# Introduction

Childhood lead poisoning remains a significant public health problem in the United States and in New York State (NYS), which consistently ranks high on key risk factors associated with lead poisoning, including many young children living in poverty, a large immigrant population, and an older, deteriorated housing stock.¹

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. Poisoning from lead-based paint remains a serious health threat for children, especially those age six and younger.

In 2008, 2,563 children were newly identified with blood lead levels of 10 µg/dL or higher in the 15 NYS Childhood Lead Poisoning Primary Prevention Program (CLPPP Program) grantee counties alone.

The CDC and its advisory committee recommend primary prevention, “a strategy that emphasizes the prevention of lead exposure, rather than a response to exposure after it has taken place.”² In 2007, the NYS legislature passed, and the governor signed into law, a program to curtail childhood lead poisoning dramatically (PHL1370-a [3]). The CLPPP Program authorized health departments to gain access to high-risk homes for the purposes of education and inspection. This represented a significant policy shift since previously health departments could only gain access to a home if a child had already been diagnosed with an elevated blood lead level. The new strategy enabled a more proactive and effective approach focused on primary prevention: Identify housing with lead-

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³ Previous NCHH reports included NYS budget amounts; actual program funding levels are now presented.
³ Six-month cycle to bring to state cycle of April 1–March 31.
based paint hazards and remove the hazards before children are exposed.

Table 1 presents the annual funding levels for the program over its seven-year history. For additional background information on the CLPPP Program, please see New York State Task Force on the Prevention of Childhood Lead Poisoning Preliminary Report 2009.iv The CLPPP Program grantees seek to achieve five goals:

1. Identify housing at greatest risk of lead-based paint hazards.
2. Develop partnerships and community engagement to promote primary prevention.
3. Promote interventions to create lead-safe housing units.
4. Build lead-safe work practices (LSWP) workforce capacity.
5. Identify community resources for lead-hazard control.

The eight original pilot locations (funded in 2007) included Albany, Erie, Monroe, Oneida, Onondaga, Orange, and Westchester counties and New York City. In 2008, four new sites received funding: Broome, Chautauqua, Dutchess, and Schenectady counties. In 2009, Niagara and Rensselaer counties

Figure 1: Primary Prevention Program Grantees by Year of Entrance

iv http://nchh.org/LinkClick.aspx?fileticket=iZ%2f%2fge9of OY%3d&tabid=195
received funding. The Year 4 (2010–2011) addition of Ulster County brought the total number of grantees to 15 (see Figure 1). From 2011 to 2015 (years 5, 6, 7, and 8), 15 grantees continued operating primary prevention programs.

The CLPPP provides grantees a consistent framework in which to operate. However, each grantee designs their program to reflect local needs and infrastructure; targeting methods, inspection protocols, and partnership arrangements vary.

Program Results

The CLPPP 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. In some counties, referrals are made as needed 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. In addition, pregnant women and young children who might live in or visit these units in the future benefit from having lead hazards removed. (See Summary Report for New York State’s Childhood Lead Poisoning Primary Prevention Program, April 1, 2014–March 31, 2015 for details regarding overall program impact).  

The following grantee impact summaries provide cumulative program information and statistics regarding CLPPP Program activities in each of the 15 grantee jurisdictions.

Available at http://nchh.org/Program/NewYorkStateCLPPPProgram.aspx
Albany County Department of Health Childhood Lead Poisoning Primary Prevention Program Summary

Program results

Between 2007 and the end of March 2015, the Albany program inspected the interiors of 1,108 homes and identified interior lead-based paint hazards in 721 of them. Its efforts have already made 559 housing units lead-safe.

Since 2007, the program has worked with property owners to complete the removal and clearance of interior lead paint hazards from housing units in which 837 children lived, and it referred 1,153 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 1,525 children lived.

The homes visited were primarily renter-occupied units in older, multifamily buildings. Renters lived in 89% of the units, 72% were built prior to 1940, and 88% were in multifamily buildings (61% were in two-unit buildings).

Housing units targeted for inspection

Albany County has identified a specific target area that includes 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, and 665 children impacted by the program. Please refer to the Appendix for additional details.

At a Glance: Interior Activities

Program Highlights

- Grantee since 2007
- Inspected interiors of 1,108 units
- Identified interior hazards in 721 units (65% of units with interior inspections)
- Cleared interior hazards in 559 units
- Directly benefited 1,525 children in units with interior inspections
- Directly benefited 837 children in units with interior hazards cleared
- 119 median number of days to clearance for interior hazards

Housing Units with Interior Hazards Cleared

78%
units where children with blood lead levels between 5–9 or 10–14 µg/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 and provider offices (OB/GYN and pediatric offices in particular), direct requests from owners or tenants, requests as a result of advertising (e.g., bus kiosks), and/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) analyzer 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, homeowners, 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 jobsite after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 1,722 individuals on how to conduct repairs safely. Additionally, from April 1, 2014, to March 31, 2015, there were 11 individuals trained in the RRP refresher course and 15 individuals trained in window replacement.
Broome County Department of Health Childhood Lead Poisoning Primary Prevention Program Summary

Program results\textsuperscript{vii}

Between 2008 and the end of March 2015, the Broome program inspected the interiors of 550 homes and identified lead-based paint hazards in 518 of them. Its efforts have already made 362 housing units lead-safe.

Since 2008, the program has worked with property owners to remove interior lead paint hazards from housing units in which 545 children lived, and it referred 786 children for tests of their blood lead levels. The program inspected housing units in which a total of 827 children lived.

The homes visited were primarily renter-occupied units in older, multifamily buildings. Renters lived in 81% of the units, 87% were built prior to 1940, and 86% were in multifamily buildings (46% were in buildings with three or more units).

Housing units targeted for inspection

Broome County’s program targets ZIP codes 13901–13905 within the city of Binghamton and ZIP codes 13760 and 13790 within the town of Union. Housing units outside those areas are inspected when referred by the Lead Poisoning Prevention Program (which is responsible for responding to children with elevated blood lead levels).

At a Glance: Interior Activities

Program Highlights

- Grantee since 2008
- Inspected interiors of 550 units
- Identified interior hazards in 518 units (94% of units with interior inspections)
- Cleared interior hazards in 362 units
- Directly benefited 827 children in units with interior inspections
- Directly benefited 545 children in units with interior hazards cleared
- 204 median number of days to clearance for interior hazards

\textsuperscript{vii} Data presented includes activities that address the interior of a unit only. Prior to 2014, yearly reports included activities that addressed the interior, the exterior, or both. For comparison, using all interior and exterior activities, the cumulative data for Broome County are as follows: 478 units visited and inspected, 464 units with confirmed or potential hazards, 278 units cleared of all hazards, and 677 children impacted by the program. Please refer to the appendix for additional details.
The program also inspects properties based on referrals from the Healthy Neighborhoods Program, Maternal and Child Health Home Visiting Programs, WIC, and/or code enforcement agencies; requests from owners or tenants; and observations of deteriorated exterior paint. 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 µg/dL reside or units adjacent to them, and vacant properties.

**Inspection procedures**

The program’s inspection protocol consists of an exterior and interior visual inspection as well as XRF (x-ray fluorescence) measurement of lead on painted household surfaces accessible to the residents of each unit. 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, homeowners, and contractors working on properties under notice as EPA-certified lead renovators. This training focuses on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the jobsite after work to remove any lead-contaminated dust. Since 2008, the program has funded training for 578 individuals on how to conduct repairs safely.
Chautauqua County Department of Health
Childhood Lead Poisoning Primary Prevention Program
Summary

Program results
Between 2008 and the end of March 2014, the Chautauqua program inspected the interiors of 482 homes and identified lead-based paint hazards in 409 of them. Its efforts have already made 278 housing units lead-safe.

Since 2008, the program has worked with property owners to remove interior lead paint hazards from housing units in which 368 children lived, and it referred 65 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 656 children lived.

The homes visited were primarily renter-occupied units in older buildings. Renters lived in 74% of the units, and 93% were built prior to 1940. The majority were either single-family homes (37%) or in two-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 µg/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 units.

At a Glance: Interior Activities

**Program Highlights**
- Grantee since 2008
- Inspected interiors of 482 units
- Identified interior hazards in 409 units (85% of units with interior inspections)
- Cleared interior hazards in 278 units
- Directly benefited 656 children in units with interior inspections
- Directly benefited 368 children in units with interior hazards cleared
- 189 median number of days to clearance for interior hazards

**Housing Units with Interior Hazards Cleared**

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*Data presented includes activities that address the interior of a unit only. Prior to 2014, yearly reports included activities that addressed the interior, the exterior, or both. For comparison, using all interior and exterior activities, the cumulative data for Chautauqua County are as follows: 514 units visited and inspected, 18 units visited but not yet inspected, 414 units with confirmed or potential hazards, 234 units cleared of all hazards, and 544 children impacted by the program. Please refer to the appendix for additional details.*
foreclosed properties. The program also inspects properties because of referrals from partner or code enforcement agencies, requests from owners or tenants, and/or identification 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 analyzer. The exterior and entryways are also tested with the XRF analyzer. 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, homeowners, 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 jobsite after work to remove any lead-contaminated dust. Since 2008, the program has funded training for 338 individuals on how to conduct repairs safely.
Dutchess County Department of Health Childhood Lead Poisoning Primary Prevention Program Summary

Program results

Between 2008 and the end of March 2014, the Dutchess program inspected the interiors of 836 homes and identified lead-based paint hazards in 193 of them. Its efforts have already made 30 housing units lead-safe.

Since 2008, the program has worked with property owners to remove interior lead paint hazards from housing units in which 24 children lived, and it referred 39 children for tests of their blood lead levels. The program inspected housing units in which a total of 278 children lived. Although the homes visited were similar in being predominantly older homes (84% were built prior to 1940), they represented a range of occupancy conditions and building types. A little over half (58%) were renter-occupied; the others were owner-occupied (14%) or vacant (29%). The majority (79%) existed in multifamily buildings, while 15% were single-family units.

Housing units targeted for inspection

The program’s target area is the portion of the city of Poughkeepsie within the 12601 ZIP code.

Within this area, the program prioritizes multifamily dwellings built before 1978. The Dutchess County

At a Glance: Interior Activities

Program Highlights

- Grantee since 2008
- Inspected interiors of 836 units
- Identified interior hazards in 193 units (23% of units with interior inspections)
- Cleared interior hazards in 30 units
- Directly benefited 278 children in units with interior inspections
- Directly benefited 24 children in units with interior hazards cleared
- 254 median number of days to clearance for interior hazards

Housing Units with Interior Hazards Cleared

16%
Department of Health (DCDOH) refers properties to code enforcement for inspection. These referrals are based on requests from owners or tenants, program staff’s observations of deteriorated exterior paint, and community partner recommendations following home visits. Properties where a child with a blood lead level from 5–14 µg/dL resides and multifamily dwellings where a child with an elevated blood lead level resides are also considered when making referrals.

**Inspection procedures**

The program’s inspections are conducted by a City of Poughkeepsie building inspector, who conducts a visual inspection of all accessible interior and exterior areas and determines whether paint conditions are in compliance with the *Property Maintenance Code of New York State*. The inspector uses the standard of intact versus deteriorated paint when assessing surfaces. The Inspector is responsible for follow-up inspections until compliance is achieved. Properties that are not compliant are referred to the DCDOH for prioritization, investigation, and enforcement. Investigation and enforcement includes a lead assessment, using the x-ray fluorescence (XRF) analyzer, of interior and exterior painted surfaces by EPA-certified risk assessors from the DCDOH. The Dutchess County Department of Health also reviews the lead dust clearance test results following remediation 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, homeowners, 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 jobsite after work to remove any lead-contaminated dust. Through a partnership with BOCES Adult Education program, Dutchess has been able to offer classes in both English and in Spanish. Since 2008, the program has funded training for more than 400 individuals on how to conduct repairs using lead-safe work practices. Additionally, in cooperation with Dutchess County BOCES, the program also offers a window and door replacement class. This course, which began in 2013, educates homeowners and landlords in lead-safe work practices when addressing these friction and impact surfaces. Twenty-five individuals have been educated in window and door replacement to date.
Erie County Department of Health Childhood Lead Poisoning Primary Prevention Program Summary

Program results*

Between 2007 and the end of March 2014, the Erie program inspected the interiors of 2,432 homes and identified lead-based paint hazards in 551 of them. Its efforts have already made 151 housing units lead-safe.

Since 2007, the program has worked with property owners to remove interior lead paint hazards from housing units in which 149 children lived, and it referred 526 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 1,718 children lived.

The program visited more homes that were renter-occupied than owner-occupied and (61% and 38%, respectively) and more multifamily compared with single-family (58% versus 41%). Almost all (98%) 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,” and accepts directed referrals for

At a Glance: Interior Activities

Program Highlights

• Grantee since 2007
• Inspected interiors of 2,432 units*
• Identified interior hazards in 551 units (23% of units with interior inspections)
• Cleared interior hazards in 151 units
• Directly benefited 1,718 children in units with interior inspections
• Directly benefited 149 children in units with interior hazards cleared
• 179 median number of days to clearance for interior hazards

Housing Units with Interior Hazards Cleared

27%

* Prior to April 1, 2014, Erie County’s approach was primarily focused on exteriors.
families with children residing in a “Community of Concern for lead poisoning” comprising ZIP codes 14201, 14207–14213, 14215. Within the Areas of High Risk, individual units are identified for inspection through door-to-door neighborhood canvas, while individual partner-referrals, such as units with a child or children with an EBLL of 5–14 µg/dL, are accepted from any of the target ZIP codes in the Community of Concern. Such referrals may come internally from Department of Health programs, or from any of a number of external community partners.

Prior to the program year starting on April 1, 2014, Erie County’s approach was primarily focused on identification and remediation of exterior hazards. Interior activities were generally limited to education for property owners and tenants, rather than enforcement.

**Inspection procedures**

Program staff approach targeted units in two different ways, depending on the method of recruitment. For door-to-door canvas units in the Areas of High Risk, risk assessment staff go block-by-block surveying the building characteristics, physical condition, and occupancy status of each housing unit. They assess the exterior of each housing structure with an XRF (x-ray fluorescence) analyzer to measure the concentration of lead on painted surfaces. In conjunction with the exterior risk assessment, staff also try to identify and gain access to units where young children reside. Upon gaining access, they perform a visual inspection of interior painted components, 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.

If the unit is recruited through one of the program’s community partners as opposed to door-to-door canvas, an appointment is made with the family or occupants for a visual inspection and education visit. Any interior or exterior potential paint hazards are documented, and staff provide the family with educational materials as well as directed referrals for blood-lead testing and other resources. The family also receives an incentive package with cleaning and safety items as an incentive for participation.

In either case, when presumed or confirmed paint hazards are identified, remediation is ordered via enforcement of the Erie County Sanitary Code, rather than Notice and Demand. Property owners who are cited by the program are eligible to attend EPA certified renovator training at a reduced cost, or a free HUD lead-safe work practices course, depending on the unit’s occupancy. Included with each course and available to any owner under notice who shows proof of proper work certification is an incentive package containing primer and all the supplies needed to mitigate the identified hazards safely.

**Training on lead-safe work practices**

Lead paint dust created during renovation work can substantially increase children’s exposure to lead. The program works addresses this problem by training landlords, homeowners, 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 jobsite after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 1,654 individuals on how to conduct repairs safely.
Monroe County Department of Health
Childhood Lead Poisoning Primary Prevention Program
Summary

Program results
Between 2007 and the end of March 2014, the Monroe program inspected the interiors of 17,212 homes and identified lead-based paint hazards in 1,503 of them. Its efforts have already made 1,262 housing units lead-safe.

Since 2007, the program has worked with property owners to remove interior lead-paint hazards from housing units in which 997 children lived, and it referred 685 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 1,716 children lived.

The homes visited were primarily renter-occupied units in older, multifamily buildings. Renters lived in 99% of the units, 82% were built prior to 1940, and over two-thirds of the homes were in multi-unit buildings (25% were in two-unit buildings, and 44% were buildings with three 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 through 14615 and 14619 through 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

At a Glance: Interior Activities

Program Highlights
- Grantee since 2007
- Inspected interiors of 17,212 units
- Identified interior hazards in 1,503 units (9% of units with interior inspections)
- Cleared interior hazards in 1,262 units
- Directly benefited 1,716 children in units with interior inspections
- Directly benefited 997 children in units with interior hazards cleared
- 78 median number of days to clearance for interior hazards

Table: Housing Units with Interior Hazards Cleared

84%
inspected by code enforcement. Other properties are targeted for inspection by county health department staff. These include homes of pregnant women, units with children with blood lead levels between 8 and 14 µg/dL, homes of refugees, and homes of Department of Human Services clients (e.g., tenants living in homes receiving state housing assistance) who have children aged six years or younger living in a home where City of Rochester cited interior hazards that were cleared three 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 perform additional dust wipe sampling in all units that pass the initial visual inspection. At properties inspected by the program itself, EPA-certified risk assessors examine the targeted properties, 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, homeowners, 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 jobsite after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 1,696 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 three feet 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 City Department of Health and Mental Hygiene
Childhood Lead Poisoning Primary Prevention Program
Summary

Program results\textsuperscript{diii}

Between 2007 and the end of March 2014, the New York City program inspected the interiors of 6,831 homes and identified lead-based paint hazards in 3,506 of them. Its efforts have resulted in the safe remediation of lead paint hazards in 3,225 housing units.

Since 2007, the program has worked with property owners to remove interior lead paint hazards from housing units in which 3,534 children lived, and it referred 6,755 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 7,450 children lived.

The homes visited were primarily occupied units in older multifamily buildings. Of the buildings visited, 77\% were built prior to 1940 and 84\% had three or more units.

Housing units targeted for inspection

New York City Primary Prevention interventions occur citywide and are targeted to high-risk neighborhoods, high-risk housing, and high-risk children. New York City uses six strategies to identify the specific high-risk housing units:

1. Use the city’s blood lead registry and the birth registry to identify housing of children under

\textsuperscript{diii} Data presented includes activities that address the interior of a unit only. Prior to 2014, yearly reports included activities that addressed the interior, the exterior, or both. For comparison, using all interior and exterior activities, the cumulative data for New York City are as follows: 5,573 units visited and inspected, 299 units visited but not yet inspected, 2,914 units with confirmed or potential hazards, 2,676 units cleared of all hazards, and 6,397 children impacted by the program. Please refer to the appendix for additional details.

At a Glance: Interior Activities

Program Highlights

- Grantee since 2007
- Inspected interiors of 6,831 units
- Identified interior hazards in 3,506 units (51\% of units with interior inspections)
- Cleared interior hazards in 3,225 units
- Directly benefited 7,450 children in units with interior inspections
- Directly benefited 3,534 children in units with interior hazards cleared
- 59 median number of days to clearance for interior hazards
six years of age with blood lead levels of 10–14 µg/dL and newborns under six months of age living in the same building;

2. Inspect homes in response to referrals from the Newborn Home Visiting Program because of peeling paint in the newborn’s home.

3. Inspect homes in response to referrals for peeling paint in the homes of young children in the department’s asthma initiative.

4. Identify buildings where two or more Commissioner’s Orders for lead paint violations have been cited in at least two apartments and offer to conduct inspections in apartments where there is peeling paint and a child under six years of age.

5. Respond 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.

6. Respond to tenants’ complaints of peeling paint in one- and two-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. If the landlord fails to fix the violations and/or submit the results of acceptable clearance dust wipe tests, a referral is made to the NYC housing agency to make the repairs and conduct clearance dust sampling.

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. Clearance dust wipe samples are also required for premises where lead paint violations are cited. In all inspections, the Primary Prevention Program provides counseling and education on lead poisoning prevention, and re-inspections are conducted until violations have been addressed. In 2015, the program began a pilot initiative to post a dust hazard warning sign, in addition to providing dust wipe results. Referrals to Department of Buildings are also being made, along with the tenant protection taskforce, where appropriate. The Primary Prevention Program routinely refers addresses where unsafe work is identified to EPA for assessment of compliance with RRP.

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 workers, landlords, homeowners, and contractors in lead-safe work practices. These trainings, delivered in either English or in Spanish, focus on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the jobsite after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 2,898 individuals on how to conduct repairs safely.
Niagara County Department of Health
Childhood Lead Poisoning Primary Prevention Program
Summary

Program results\textsuperscript{xi}

Between 2009 and the end of March 2014, the Niagara program inspected the interiors of 846 homes and identified lead-based paint hazards in 554 of them. Its efforts have already made 407 housing units lead-safe.

Since 2009, the program has worked with property owners to remove interior lead paint hazards from housing units in which 429 children lived, and it referred 616 children for tests of their blood lead levels. The program inspected housing units in which a total of 707 children lived.

The homes visited were primarily in older buildings: 86% were built prior to 1940. More than half (64%) of the units were renter-occupied, and the majority of homes (58%) were single-family units. About one-fourth (26%) lived in two-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, 211, 212, and 213; ZIP code 14094 in Lockport to include portions of census tracts 235, 236, 238, and 239; and ZIP code 14120 North Tonawanda, in census tract 232.

At a Glance: Interior Activities

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<tr>
<th>Program Highlights</th>
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<tr>
<td>• Grantee since 2009</td>
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<tr>
<td>• Inspected interiors of 846 units</td>
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<td>• Identified interior hazards in 554 units (66% of units with interior inspections)</td>
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<tr>
<td>• Cleared interior hazards in 407 units</td>
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<td>• Directly benefited 707 children in units with interior inspections</td>
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<td>• Directly benefited 429 children in units with interior hazards cleared</td>
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<td>• 95 median number of days to clearance for interior hazards</td>
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\textsuperscript{xi} Data presented includes activities that address the interior of a unit only. Prior to 2014, yearly reports included activities that addressed the interior, the exterior, or both. For comparison, using all interior and exterior activities, the cumulative data for Niagara County are as follows: 5,322 units visited and inspected, 1,778 units with confirmed or potential hazards, 926 units cleared of all hazards, and 604 children impacted by the program. Please refer to the appendix for additional details.
Within these areas, program staff, (one public health sanitarian and two public health technicians) canvass the neighborhood from door to door. 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 µg/dL, or units adjacent to such dwellings. Units can also be referred by 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.

The program has a two-stage inspection protocol. The first inspection is a visual survey for potential lead-based paint hazards. 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) analyzer 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, homeowners, 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 jobsite after work to remove any lead-contaminated dust. Since 2009, the program has funded training for 148 individuals on how to conduct repairs safely.
Oneida County Department of Health
Childhood Lead Poisoning Primary Prevention Program
Summary

Program results*iv
Between 2007 and the end of March 2014, the Oneida program inspected the interiors of 1,365 homes and identified lead-based paint hazards in 1,069 of them. Its efforts have already made 685 housing units lead-safe.

Since 2007, the program has worked with property owners to remove interior lead paint hazards from housing units in which 1,035 children lived, and it referred 1,061 children for tests of their blood lead levels. The program inspected housing units in which a total of 2,042 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 multifamily buildings. Renters lived in 84% of the units, 86% were built prior to 1940, and 90% of the units were in multifamily buildings (59% of which were two-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

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*iv Data presented includes activities that address the interior of a unit only. Prior to 2014, yearly reports included activities that addressed the interior, the exterior, or both. For comparison, using all interior and exterior activities, the cumulative data for Oneida County are as follows: 2,215 units visited and inspected, 1,791 units with confirmed or potential hazards, 941 units cleared of all hazards, and 1,845 children impacted by the program. Please refer to the appendix for additional details.

At a Glance: Interior Activities

Program Highlights
- Grantee since 2007
- Inspected interiors of 1,365 units
- Identified interior hazards in 1,069 units (78% of units with interior inspections)
- Cleared interior hazards in 685 units
- Directly benefited 2,042 children in units with interior inspections
- Directly benefited 1,035 children in units with interior hazards cleared
- 112 median number of days to clearance for interior hazards

64%
seven a well as families with children under six with blood lead levels less than 15 µg/dL. The program also inspects properties because of referrals from partner agencies or code enforcement or requests from owners or tenants. Through targeted street drive-by initiatives, door-hangers are left on units identified with visual hazards.

Primary Prevention Program staff conducted 100% of all interior 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 an initial home visit, home visiting staff provide extensive education on lead hazards and lead poisoning prevention and cleaning supplies. At a second visit, the home visitor reviews the results of the dust testing and encourages use of a HEPA vacuum until any needed remediation work can be completed. When reviewing the work plan for remediation of identified lead hazards with tenants or landlords who have completed the lead renovator certification class, a voucher for a primer paint is issued if lack of resources to complete work plan is indicated.

**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, homeowners, 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 jobsite after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 603 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 results

Between 2007 and the end of March 2014, the Onondaga County Health Department’s program inspected the interiors of 2,202 homes and identified lead-based paint hazards in 1,385 of them. Its efforts have already made 1,046 housing units lead-safe.

Since 2007, the program has worked with property owners to remove interior lead paint hazards from housing units in which 1,376 children lived, and it referred 762 children for tests of their blood lead levels. The program inspected housing units in which a total of 2,811 children lived.

The homes visited were primarily renter-occupied units in older, multifamily buildings. Renters lived in 84% of the units, 83% were built prior to 1940, and 72% of the units were in multifamily buildings (47% of which were buildings with two 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: 13203–13205, 13207, and 13208. The program targets the highest-risk properties including but not limited to (1) homes of at-risk newborns or pregnant women, units where children with blood lead levels between

At a Glance: Interior Activities

Program Highlights

- Grantee since 2007
- Inspected interiors of 2,202 units
- Identified interior hazards in 1,385 units (63% of units with interior inspections)
- Cleared interior hazards in 1,046 units
- Directly benefited 2,811 children in units with interior inspections
- Directly benefited 1,376 children in units with interior hazards cleared
- 88 median number of days to clearance for interior hazards

Housing Units with Interior Hazards Cleared

76%
5–14 µg/dL reside or other units in the same building, (2) units with a history of elevated blood lead cases or other units in the same building, (3) rental units occupied by resettled refugees, and (4) rental units occupied by DSS-funded or Section 8-funded recipients. Requests for inspections on rental units outside of the five high-risk targeted ZIP codes listed above that otherwise meet the program’s inspection criteria for age of housing (pre-1960), presence of deteriorating paint conditions, and occupant composition (children less than seven years of age, newly arrived refugees, and/or pregnant women) are also accepted and scheduled as staff availability permits. The program also inspects properties identified in collaboration with the local LPPP, in response to referrals from the Healthy Neighborhoods Program, Maternal and Child Health Home Visiting programs, other partner agencies, or code enforcement agencies; in response to requests from owners or tenants; due to observations of deteriorated exterior paint; and as identified during door-to-door canvassing activities.

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 will conduct a telephone survey with a parent or caregiver to determine if the property meets the following risk criteria: (1) a child age seven or under resides or regularly visits or a pregnant woman resides at the property, (2) the property was built before 1960, (3) chipping and peeling paint has been observed, (4) the property is located in the target area, and (5) it is a rental property. If determined eligible, an environmental team member then conducts an onsite lead hazard risk assessment.

Risk assessments consist of exterior and interior visual inspection and XRF (x-ray fluorescence) measurement of the concentration of lead on painted surfaces. Dust wipe sampling may be conducted during an initial visit with negative XRF results in properties where children with BLL 5-14 µg/dL reside. 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 seven 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, homeowners, 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 jobsite after work to remove any lead-contaminated dust. Since 2007, the program has funded training for 703 individuals on how to conduct repairs safely. This number represents formal classroom training paid for by NYSDOH Primary Prevention funding. Eight-hour Initial Renovator trainings were offered in English and Spanish. In 2012, monthly HUD lead-safe work practices training sessions previously supported by the City of Syracuse’s HUD-funded Lead Hazard Control Program were discontinued. As a result, CLPPPP staff began providing more detailed lead-safe work practices instruction during all field visits, including initial inspection visits, field conferences, follow-up inspection visits, pre-hearing re-check visits, and dust wipe clearance visits. The total number of individualized lead-safe work practices educational contacts completed by CLPPPP environmental health risk assessors far exceeds the number of individuals who received formal classroom training paid for with NYSDOH Primary Prevention funds. Since April 1, 2012, more than 3,800 lead-safe work practices educational contacts were completed.
Orange County Department of Health
Childhood Lead Poisoning Primary Prevention Program
Summary

Program results

Between 2007 and the end of March 2014, the Orange County program inspected the interiors of 995 homes and identified lead-based paint hazards in 620 of them. Its efforts have already made 380 housing units lead-safe.

Since 2007, the program has worked with property owners to remove interior lead paint hazards from housing units in which 505 children lived, and it referred 577 children for tests of their blood lead levels. 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, multifamily buildings. Renters lived in 93% of the units, 90% were built prior to 1940, and 89% were in multifamily buildings (49% of units were in multifamily buildings with three 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 (1) homes of at-risk newborns or pregnant women, (2) units where children with blood lead levels between 5–9 or

At a Glance: Interior Activities

Program Highlights
- Grantee since 2007
- Inspected interiors of 995 units
- Identified interior hazards in 620 units (62% of units with interior inspections)
- Cleared interior hazards in 380 units
- Directly benefited 1,104 children in units with interior inspections
- Directly benefited 505 children in units with interior hazards cleared
- 309 median number of days to clearance for interior hazards

Housing Units with Interior Hazards Cleared
- 61%
10–14 µg/dL reside or units adjacent to them, (3) units with a history of elevated blood lead cases or other units in the same building, or (4) rental units occupied by DSS-funded or Section 8-funded recipients. The program also inspects properties because of referrals from Healthy Neighborhoods Program, Maternal and Child Health Home Visiting programs, other partner agencies, day cares, and schools; 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 in 100% of all inspections. The program also provides educational materials and incentives to encourage residents’ participation. During inspections, residents are interviewed by community health workers to educate them regarding any found hazards, promote childhood blood lead level testing, and obtain relevant information to the property inspection. To obtain these inspections, the program partners, with many agencies and other departments, knocks from door to door and presents at schools, health fairs, bus stops, laundromats, and many other community events (e.g., during National Lead Poisoning Prevention Week, all local Head Start classrooms were visited and students watched Elmo’s “Lead Away” video and all families received take-home educational material and referral forms for inspections; 924 families were reached in this way. Also, during one Thanksgiving Food Basket program, staff inserted 1,300 flyers advertising free lead inspections).

Following property owner completion of lead-safe renovations, funds are used to help them complete required dust wipe clearance tests, protecting both the occupants and the property owners. When the unit passes the dust clearance test, the case is closed. Owners are advised that ongoing maintenance of the painted surfaces is required.

The program provides residents and landlords with educational materials and incentives to encourage participation and cooperation. Failure to comply with a Notice and Demand issued to a property owner regarding identified lead-based paint hazards results in the following enforcement procedure: A pre-hearing conference is held at the Department of Health, at which time a stipulated agreement is reached regarding time frame and method of correction; failure to show for the pre-hearing conference, or failure to comply with the stipulated agreement reached, results in a formal hearing at the Department of Health, at which time penalty fees are assessed. In the city of Newburgh, failure to comply with a Notice and Demand results first in the referral of the property owner to code enforcement and then through the enforcement procedure described above.

**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, homeowners, and contractors in lead-safe work practices. These trainings focus on reducing the amount of dust generated during paint-disturbing work, containing any dust generated, and thoroughly cleaning the jobsite after work to remove any lead-contaminated dust.

The program teaches the EPA Renovation, Repair, and Painting (RRP) certification class. Between 2011 and 2014, 273 individuals were certified in RRP. A “Don’t Spread the Lead” National Center for Healthy Housing curriculum class for do-it-yourselfers working on their own residences is also taught. The program has implemented a nutrition/lead safety class at local supermarkets. All students receive incentives for coming to these classes to aid them in keeping their families lead-safe. Since 2011, 336 families have taken this class. The program also has an active Lead Safe coalition with over 100 members. Partner agencies are now educating families in lead poison prevention by distributing the program’s educational materials and referral forms.
Rensselaer County Department of Health
Childhood Lead Poisoning Primary Prevention Program
Summary

Program results
Between 2009 and the end of March 2014, the Rensselaer program inspected the interiors of 617 homes and identified lead-based paint hazards in 489 of them. Its efforts have already made 337 housing units lead-safe.

Since 2009, the program has worked with property owners to remove interior lead paint hazards from housing units in which 338 children lived, and it referred 477 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 531 children lived.

The homes visited were primarily renter-occupied units in older, multifamily buildings. Renters lived in 63% of the units, 81% were built prior to 1940, and 74% of the units were in multifamily buildings.

Housing units targeted for inspection
Rensselaer County’s target areas are the city of Troy, including ZIP codes 12180 and 12182, and the city of Rensselaer, including ZIP code 12144. The program defines its primary target group as target-area residential homes that were 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 µg/dL.

At a Glance: Interior Activities

Program Highlights
- Grantee since 2009
- Inspected interiors of 617 units
- Identified interior hazards in 489 units (79% of units with interior inspections)
- Cleared interior hazards in 337 units
- Directly benefited 531 children in units with interior inspections
- Directly benefited 338 children in units with interior hazards cleared
- 190 median number of days to clearance for interior hazards

Data presented includes activities that address the interior of a unit only. Prior to 2014, yearly reports included activities that addressed the interior, the exterior, or both. For comparison, using all interior and exterior activities, the cumulative data for Rensselaer County are as follows: 480 units visited and inspected, eight units visited but not yet inspected, 396 units with confirmed or potential hazards, 263 units cleared of all hazards, and 443 children impacted by the program. Please refer to the appendix for additional details.
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 Maternal and Child Health Home Visiting programs, the Early Intervention Program, other partner agencies (e.g., inspections of units for DSS foster care placements), code enforcement agencies, and/or other partner organizations (e.g., the Homebuyer’s Incentive and Rehabilitation programs of the Troy Rehabilitation Improvement Program). It also inspects properties due to 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, remediation supplies, and other incentives to increase resident knowledge and encourage resident action.

**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, homeowners, 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 jobsite after work to remove any lead-contaminated dust. Since 2009, the program has funded training for 1,079 individuals on how to conduct repairs safely.
Schenectady County Department of Health Childhood Lead Poisoning Primary Prevention Program Summary

Program results

Between 2008 and the end of March 2014, the Schenectady program inspected the interiors of 434 homes and identified lead-based paint hazards in 361 of them. Its efforts have already made 291 housing units lead-safe.

Since 2008, the program has worked with property owners to remove interior lead paint hazards from housing units in which 367 children lived, and it referred 147 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 519 children lived.

The homes visited were primarily renter-occupied units in older multifamily buildings. Renters lived in 84% of the units, 73% were built prior to 1940 (when the age of the unit was known; 47% were unknown or missing year built), and 85% were units in multifamily buildings (72% of which were in two-unit buildings).

Housing units targeted for inspection

Schenectady County’s program targets properties in the 12303, 12304, 12307 and 12308 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

At a Glance: Interior Activities

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<th>Program Highlights</th>
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<tr>
<td>• Grantee since 2008</td>
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<tr>
<td>• Inspected interiors of 434 units</td>
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<tr>
<td>• Identified interior hazards in 361 units (83% of units with interior inspections)</td>
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<tr>
<td>• Cleared interior hazards in 291 units</td>
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<tr>
<td>• Directly benefited 519 children in units with interior inspections</td>
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<tr>
<td>• Directly benefited 367 children in units with interior hazards cleared</td>
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<td>• 51 median number of days to clearance for interior hazards</td>
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Data presented includes activities that address the interior of a unit only. Prior to 2014, yearly reports included activities that addressed the interior, the exterior, or both. For comparison, using all interior and exterior activities, the cumulative data for Schenectady County are as follows: 392 units visited and inspected, two units visited but not yet inspected, 349 units with confirmed or potential hazards, 256 units cleared of all hazards, and 485 children impacted by the program. Please refer to the appendix for additional details.
with a blood lead level greater than or equal to 10 µg/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 referrals from the Healthy Neighborhoods Program, Maternal and Child Health Home Visiting programs, and/or other partner agencies, as well as 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, approximately 39% of activities have been conducted by program staff. Regardless of which agency’s staff conducts 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 are checked for lead hazards, as well as all common areas of the property. 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, homeowners, 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 jobsite after work to remove any lead-contaminated dust. Since 2008, the program has funded training for 764 individuals on how to conduct repairs safely.
Ulster County Department of Health
Childhood Lead Poisoning Primary Prevention Program
Summary

Program results

Between April 2011 and the end of March 2014, the Ulster program inspected the interiors of 166 homes and identified lead-based paint hazards in 107 of them. Its efforts have already made 50 housing units lead-safe.

Since April 2011, the program has worked with property owners to remove interior lead paint hazards from housing units in which 37 children lived, and it has referred 49 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 137 children lived.

The homes visited were primarily renter-occupied units in older multifamily buildings. Renters lived in 74% of the units, 73% were in multifamily buildings, and 83% were built prior to 1940.

Housing units targeted for inspection

Ulster County targets properties within the 12401 ZIP code, as well as owner-occupied and rental units across Ulster County where children have been identified with an elevated blood lead level of 10–14 µg/dL. Priority is given to those dwellings in which children under six years of age and pregnant women reside. Properties identified for inspection include but are not limited to properties referred

At a Glance: Interior Activities

Program Highlights

- Grantee since 2010
- Inspected interiors of 166 units
- Identified interior hazards in 107 units (64% of units with interior inspections)
- Cleared interior hazards in 50 units
- Directly benefited 137 children in units with interior inspections
- Directly benefited 37 children in units with interior hazards cleared
- 276 median number of days to clearance for interior hazards

Housing Units with Interior Hazards Cleared

47%
by partners such as Maternal and Child Health Home Visiting programs, City of Kingston code enforcement, Rural Ulster Preservation Company (RUPCO), and physician’s offices; 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 having a history of children with elevated blood-lead levels and other units in the same building, as well as units in which children with blood-lead levels of 10–14 µg/dL currently reside. Rental properties are the primary focus, although owner-occupied single-family properties are inspected at owners’ requests as long as they understand and agree to comply with the program protocols.

**Inspection procedures**

The program employs a two-tiered strategy that includes both visual assessments and XRF inspections conducted by a licensed risk assessor. Visual and XRF analyses are conducted by program staff, who perform 99% of inspections. Additional inspections were conducted by or in cooperation with community partners, the Building Safety Division of the City of Kingston Fire Department, and RUPCO, who performs visual-only inspections. When an exterior-only visual inspection is performed, efforts are made by CLPPP staff to gain access to the building’s interior to perform XRF measurements of painted surfaces to determine if interior hazards exist. 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. Owners are advised that ongoing maintenance of the painted surfaces is required. The program 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. Ulster County addresses this problem by training landlords, homeowners, and contractors in lead-safe work practices. Free classes teach individuals to reduce the amount of dust generated during paint-disturbing work, contain any dust generated, and how to clean the jobsite thoroughly to remove any lead-contaminated dust. The program has provided lead-safe training since 2011. Between April 2011 and March 2012, 78 individuals were trained in eight-hour lead-safe work practices classes, and 58 people attended four-hour Renovation, Repair, and Painting refresher classes. From April 2012 to March 2015, 777 individuals have attended eight-hour Renovation, Repair, and Painting classes; 776 successfully became EPA-certified lead renovators. In addition, 12 staff at partner agencies were trained in visual lead inspection techniques, and 15 Ulster County Department of Health staff nurses were trained to identify lead paint hazards visually on home visits.
Westchester County Department of Health
Childhood Lead Poisoning Primary Prevention Program
Summary

Program results

Between 2007 and the end of March 2014, the Westchester program inspected the interiors of 1,686 homes and identified lead-based paint hazards in 854 of them. Its efforts have already made 640 housing units lead-safe.

Since 2007, the program has worked with property owners to remove interior lead paint hazards from housing units in which 479 children lived, and it referred 266 children for tests of their blood lead levels. The program visited or inspected housing units in which a total of 997 children lived.

The homes visited were primarily renter-occupied units in multifamily buildings. Renters lived in 80% of the units, and 86% of the units were in buildings with three or more units. Over half of the units (59%) were built prior to 1940, and 20% were built between 1940 and 1959. Westchester’s percentage of visited homes built prior to 1940 has steadily increased over the last several years as a result of targeted efforts.

Housing units targeted for inspection

Westchester County’s program targets ZIP codes 10701 and 10705 in Yonkers, 10550 in Mount Vernon, 10801 in New Rochelle, and 10606 in White Plains. The program focuses its efforts on housing

At a Glance: Interior Activities

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<tr>
<th>Program Highlights</th>
<th>Housing Units with Interior Hazards Cleared</th>
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<tr>
<td>• Grantee since 2007</td>
<td>75%</td>
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<tr>
<td>• Inspected interiors of 1,696 units</td>
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<tr>
<td>• Identified interior hazards in 854 units (50% of units with interior inspections)</td>
<td></td>
</tr>
<tr>
<td>• Cleared interior hazards in 640 units</td>
<td></td>
</tr>
<tr>
<td>• Directly benefited 997 children in units with interior inspections</td>
<td></td>
</tr>
<tr>
<td>• Directly benefited 479 children in units with interior hazards cleared</td>
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</tr>
<tr>
<td>• 279 median number of days to clearance for interior hazards</td>
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units having a history of a children with a blood lead level at or above 10 µg/dL residing in them 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; properties that are referred by the Healthy Neighborhoods Program, Maternal and Child Health Home Visiting programs, other partner agencies or code enforcement agencies; properties for which owners or tenants have requested inspections; and properties that have been identified by program staff through door-to-door canvassing or observations of deteriorated paint. During the past grant year (April 1, 2013–March 31, 2014), Westchester County’s program has also been conducting aggressive door-to-door campaigns in selected smaller target areas within the target ZIP codes. Last year, one such area was a neighborhood within the Yonkers target ZIP code area that proved to be, after looking at housing and poverty statistics and relying on field experience, a specifically high-risk neighborhood for lead poisoning and other health problems. Currently, similar outreach activities are being conducted in the other three target areas of White Plains, New Rochelle, and Mount Vernon. The program also provides follow-up inspections, including educational materials, to residences at which a child’s blood-lead level test result was 10–14 µg/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 uses the XRF (x-ray fluorescence) analyzer to measure the concentration of lead on painted surfaces. If the home has a child with a blood lead level of 10–14 µg/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, homeowners, contractors, and real estate agents in lead-safe work practices. With the advent of the EPA’s RRP requirement in April 2010, attendance to this class dropped significantly, and the class was discontinued. However, the Primary Prevention Program has subsequently produced three lists of Westchester-area RRP-certified contractors: one each for the southeastern, southwestern, and northern parts 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 instructors so that landlords and homeowners can get themselves or their crews trained in RRP.
Appendix: Selection of Units with Interior Activities

This appendix describes the methodology used in selecting units with interior activities for analysis and the rationale for this change in approach.

Rationale: In CLPPPP evaluation reports prior to Year 7, the term “units” included both individual units and, in some cases, multifamily buildings. However, in our data cleaning efforts, we found that reporting of exterior activities for multifamily buildings varied greatly among grantees. For instance, some grantees created a single record of exterior activities for a multifamily building and associated that with a single random unit within the building. Other grantees reported a similar exterior assessment of a multifamily building by recording that activity on the assessment form for every unit within a building. In some cases, grantees initiated a separate assessment form for exterior activities that was not linked to any units at all. Finally, some grantees focused primarily on exterior activities and therefore most of their units were buildings. Thus, “units,” as reported previously, were actually a mix of single-family housing units, multifamily housing units, and multi-unit buildings. The data collection system will be revised in the future to allow for reporting of interior activities by housing unit and exterior activities by building. In the meantime, NCHH devised a method for identifying units with interior activities using the current data structure. This enabled NCHH to report on activities that address actual housing units, a primary focus of the program.

Method for identifying units with interior activities: Units with interior activities are identified as any unit with an interior assessment or hazard identified. For units with interior hazards, interior visual assessment, dust sampling, or other interior assessment, this identification is straightforward. However, there is a small subset of units with XRF testing that have no interior hazards identified and no other interior assessment (no interior visual assessment, dust sampling, or other interior assessment). The current data collection form does not distinguish between XRF testing done on the building exterior and unit interior, and absent other information that would identify the unit as one with interior activities, a conjecture must be made to estimate whether the unit has interior activities.

To estimate how many of these unassigned units are likely to have had interior activities, NCHH used the proportion of units with XRF testing (but no other interior assessment) that did have interior hazards identified. The assumption is that the proportion of units assessed with an XRF on the interior would not differ substantially based on whether an interior hazard was identified. This proportion ($P_i$) was calculated for each grantee individually using the cumulative dataset and applied to their unassigned units (Table A1).

For example, in Broome County, approximately 296 units were inspected. Of these, 271 had data to indicate a clear interior inspection or hazard, and 25 were unassigned (had XRF testing but no other definitive interior activity). Of the twenty-six units in the cumulative dataset that had XRF testing (but no other interior inspection), one (3.8%) had an interior hazard identified, indicating that the interior was assessed. This proportion (3.8%) is Broome’s $P_i$ for the cumulative dataset. Multiplying the 25 unassigned units by 3.8% (Broome’s $P_i$) results in one additional units classified as having interior activities for a total estimate of 272 units (271+1).

For additional information, contact Amanda Reddy (areddy@nchh.org).
### Table A1. Data Used to Estimate $Pi$ and Results Using $Pi$ for Year 8

<table>
<thead>
<tr>
<th>Grantee</th>
<th>N</th>
<th>Estimated $Pi$</th>
<th># Inspected</th>
<th>Data Indicated Clear Interior (1)</th>
<th># with Imputation</th>
<th>Percent Interior</th>
<th>Estimated # of Interior Housing Units Inspected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albany</td>
<td>17</td>
<td>94.1%</td>
<td>332</td>
<td>332</td>
<td>0</td>
<td>100%</td>
<td>332</td>
</tr>
<tr>
<td>Broome</td>
<td>26</td>
<td>3.8%</td>
<td>296</td>
<td>271</td>
<td>25</td>
<td>92%</td>
<td>272</td>
</tr>
<tr>
<td>Chautauqua</td>
<td>64</td>
<td>0.0%</td>
<td>286</td>
<td>240</td>
<td>44</td>
<td>84%</td>
<td>240</td>
</tr>
<tr>
<td>Dutchess</td>
<td>20</td>
<td>85.0%</td>
<td>557</td>
<td>349</td>
<td>3</td>
<td>63%</td>
<td>352</td>
</tr>
<tr>
<td>Erie</td>
<td>3,746</td>
<td>0.1%</td>
<td>3,011</td>
<td>1,752</td>
<td>1,218</td>
<td>58%</td>
<td>1,753</td>
</tr>
<tr>
<td>Monroe–City</td>
<td>1</td>
<td>100.0%</td>
<td>3,762</td>
<td>3,762</td>
<td>0</td>
<td>100%</td>
<td>3,762</td>
</tr>
<tr>
<td>Monroe–County</td>
<td>857</td>
<td>92.2%</td>
<td>467</td>
<td>378</td>
<td>89</td>
<td>99%</td>
<td>460</td>
</tr>
<tr>
<td>New York City</td>
<td>0</td>
<td>—</td>
<td>1,509</td>
<td>1,509</td>
<td>0</td>
<td>100%</td>
<td>1,509</td>
</tr>
<tr>
<td>Niagara</td>
<td>99</td>
<td>6.1%</td>
<td>1,474</td>
<td>413</td>
<td>74</td>
<td>28%</td>
<td>417</td>
</tr>
<tr>
<td>Oneida</td>
<td>12</td>
<td>0.0%</td>
<td>1,431</td>
<td>659</td>
<td>25</td>
<td>46%</td>
<td>659</td>
</tr>
<tr>
<td>Onondaga</td>
<td>9</td>
<td>22.2%</td>
<td>1,031</td>
<td>1,018</td>
<td>5</td>
<td>99%</td>
<td>1,019</td>
</tr>
<tr>
<td>Orange</td>
<td>43</td>
<td>90.7%</td>
<td>421</td>
<td>414</td>
<td>7</td>
<td>100%</td>
<td>420</td>
</tr>
<tr>
<td>Rensselaer</td>
<td>1</td>
<td>0.0%</td>
<td>279</td>
<td>275</td>
<td>1</td>
<td>99%</td>
<td>275</td>
</tr>
<tr>
<td>Schenectady</td>
<td>32</td>
<td>93.8%</td>
<td>154</td>
<td>153</td>
<td>1</td>
<td>100%</td>
<td>154</td>
</tr>
<tr>
<td>Ulster</td>
<td>53</td>
<td>71.7%</td>
<td>230</td>
<td>102</td>
<td>20</td>
<td>51%</td>
<td>116</td>
</tr>
<tr>
<td>Westchester</td>
<td>113</td>
<td>17.7%</td>
<td>1,033</td>
<td>953</td>
<td>79</td>
<td>94%</td>
<td>967</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>16,273</strong></td>
<td><strong>12,580</strong></td>
<td></td>
<td></td>
<td></td>
<td><strong>12,708</strong></td>
</tr>
</tbody>
</table>

(1) Unit had an interior inspection or an interior hazard.
(2) NA = New York City did not have any units with XRF testing that did not have either another interior assessment or interior hazards identified.