

GRANT ANALYSIS FORM OPERATING & CAPITAL GRANT PROJECT/SPROGRAMS

Department/Division: Health/Home Environmental Health

Contact Person & Phone No: Amy Murphy, #8028

Category of Request

- ☒ New Grant
- ☐ Grant Continuation
- ☐ Change in Previously Approved Grant

Previous Council File No.

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Project/Program Title: Lead Outreach Grant

Grantor Agency: Housing and Urban Development

Grant Application Date: 07/13/04

Anticipated Award Date: 10/01/04

Please provide the following information:

1. Description of Grant Project/Program (Include Target Locations and Populations):

To develop and implement intensive and coordinated education, screening and housing advocacy in the Lead Program's Target Area

2. Relationship to City-wide Strategic Goals and Departmental Objectives:

Decrease in the prevalence of childhood lead poisoning and an increase in the number of lead-safe housing units are target outcomes for the Milwaukee Health Department.

3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

Assuring neighborhood involvement in childhood lead poisoning prevention is fully funded by grants. If grant funding is not secured, an opportunity to identify children at the greatest risk and to make their home lead-safe will be lost.

4. Results Measurement/Progress Report (Applies only to Programs):

- Number of lead-safe housing units
- Resident/community education
- Screening/Testing rates

5. Grant Period, Timetable and Program Phase-out Plan:

01/01/05-12/31/06

6. Provide a List of Subgrantees:

Dominican Center for Women
Lisbon Avenue Neighborhood Development

7. If Possible, Complete Grant Budget Form and Attach to Back.