

City of Milwaukee Health Department
Office of Policy, Strategy, and Analysis

Systems Improvement Project
Childhood Lead Poisoning Prevention Program
Solutions Implemented through 11-15-18

Main takeaways

- ❖ Families should have a high level of confidence that if their child has elevated blood lead levels, the systems are in place within the program to ensure that their child gets the services they need.
- ❖ The program is working diligently to implement various work plans it established to ensure that an infrastructure is in place to serve families thoroughly and efficiently.
- ❖ If a nurse or lead risk assessor is reaching out to you, please respond. They want to work with you to make sure your child gets the services they need to be healthy.
- ❖ Through the 2019 budget, the program has expanded its staff capacity to be more aggressive in its interventions.

1. Program Infrastructure

- ✓ Developed and implemented a revised program organization chart.
- ✓ Conducted a Strategic Planning Exercise with the full lead program staff and authored a report with findings.
- ✓ Attend most weekly LRA meetings to ensure that their major concerns are addressed.
- ✓ Created comprehensive workflows for each program component—environmental and nursing.
- ✓ Created a staffing work plan and began revising job descriptions.
- ✓ Successfully migrated to the CDC's new data collection and surveillance system.

2. Program Policies

- ✓ Created a comprehensive policy list needed for the program to operate in compliance with state statutes and rules; ensured policies were aligned with workflows.
- ✓ Finalized the Intervention Schedule Policy required for basic program function.
- ✓ Worked with City Attorney's Office to develop a process to obtain a special investigation warrant to conduct lead inspections.

3. HUD Stop Work Order (SWO) received in February 2018

- ✓ Inspected 18 properties required for the SWO and produced LI/RAs for 18 properties within the first 4 weeks. 30/32 properties now complete with two property owners opting out of the program.
- ✓ Created a HUD work plan.
- ✓ Created a HUD LRA team.
- ✓ Communicated changes to HUD.
- ✓ Met with City Attorney's Office to develop a rental agreement form for properties that have been made lead-safe.

4. State of Wisconsin Work Plan

- ✓ Had several conference calls and meetings with State of Wisconsin officials.
- ✓ Submitted newly proposed work plan and are reviewing appropriate case closure criteria.
- ✓ Completed required state trainings.

5. Common Council Resolution #180343

- ✓ Hosted meeting with two community organizations – Sixteenth Street/SDC.
- ✓ Developed geographic boundaries for outreach and education.
- ✓ Developed plan to begin work effective January 2018.

6. Staffing Projections and Performance

- ✓ Staffing projections provided dependent on level of intervention.
- ✓ Worked with the budget office to determine number of LRAs required to address backlog.
- ✓ Created excel tool for managers to track individual LRA cases.
- ✓ Automated performance metrics for reporting.



City of Milwaukee Health Department

Office of Policy, Strategy and Analysis

Systems Improvement Project

CHILDHOOD LEAD POISONING PREVENTION PROGRAM PROGRESS REPORT 1 | NOVEMBER 2, 2018



Purpose

Effective September 11, 2018, the Childhood Lead Poisoning Prevention Program (CLPPP) was moved under the Office of Policy, Strategy and Analysis (OPSA) to temporarily provide the program with management expertise, systems improvement consultation and policy and data technical support. OPSA support is meant to produce overall improvement in program operations and ensure the program meets its state statutory obligations. To help create a shared understanding (internal and external to the MHD) of short-term program goals, this progress report was developed.

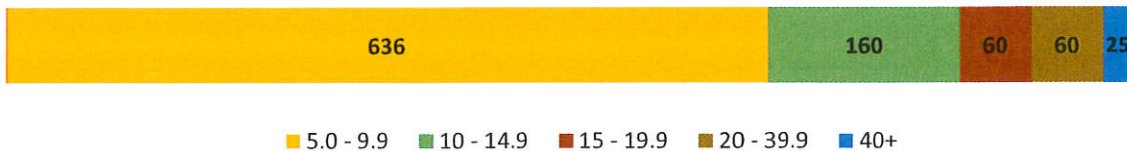
OPSA support is grounded in helping the CLPPP meet the following goals:

- **GOAL 1:** Ensure that children with an elevated blood lead level (EBLL) in 2018 and thereafter receive services in accordance with the Childhood Lead Poisoning Prevention Program’s (CLPPP) intervention schedule.
- **GOAL 2:** Ensure that the CLPPP has the organizational infrastructure needed to provide services in accordance with the program’s intervention schedule.
- **GOAL 3:** Lift the Department of Housing and Urban Development’s (HUD) Stop Work Order issued on February 12, 2018.
- **GOAL 4:** Provide follow-up to families that did not receive proper services from the CLPPP between 2015 and 2017 (Historical Cases), as identified in the MHD’s internal assessment.
- **GOAL 5:** Adequately respond to the State of Wisconsin’s work plan to ensure that the program meets statutory requirements.

2018 Confirmed Elevated Blood Lead Levels

As of October 30, 2018, 22,744 unique children received blood lead tests, totaling 29,276 total tests. Of those tests, 941 (4.1%) were confirmed to have lead levels ≥ 5 mg/dL through venous testing. In total, 93 unique children qualified under state statute for case management and environmental investigations. Those 93 unique children were associated with 102 addresses requiring environmental investigations.

2018 Confirmed Elevated Blood Lead Levels as of 10-30-18 22,744 Unique Children Tested



GOAL 1: Ensure that children with an elevated blood lead level (EBLL) in 2018 and thereafter receive services in accordance with the Childhood Lead Poisoning Prevention Program’s (CLPPP) intervention schedule.

Objective 1.1: All children with EBLL of 5 ug/dL or above will be sent a letter from the CLPPP in accordance with the program’s intervention schedule (ongoing).

The City of Milwaukee Health Department (MHD), in addition to the child’s medical provider, notifies the family of a child’s blood lead test result if it is at least 5 ug/dL. Depending on the test type and blood lead level, the letter advises the family on next steps.

*The CLPPP program migrated to a new database platform (from STELLAR to HHLPSS) in mid-September 2019. With support from the State of Wisconsin, the program has been working on data migration issues to ensure that the platform serves the needs of the program. Due to this migration, reporting for this metric will begin effective 11-1-18.

Objective 1.2: All children with EBLLs meeting levels outlined in state statute will receive nursing case management from the CLPPP in accordance with the program’s intervention schedule (ongoing).

The CLPPP provides nursing case management services to children with EBLL outlined in the program’s intervention schedule. Case management services include a home visits and nursing assessment, education, and developmental screenings. The CLPPP currently has 517 open cases. Open cases include both EBLLs from 2018 and those from prior years that require ongoing monitoring.



Objective 1.3: All children with EBLLs meeting levels outlined in state statute will receive an environmental risk assessment from the CLPPP in accordance with the program’s intervention schedule (ongoing).

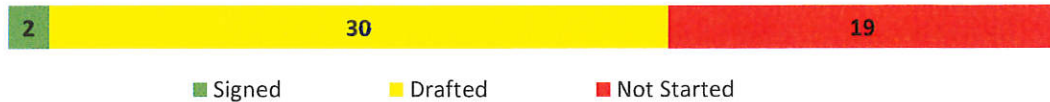
The CLPPP conducts an environmental risk assessment of properties that are associated with children who have an EBLL as outlined in the program’s intervention schedule. The environmental risk assessment is a surface by surface assessment of where lead hazards are in the home. Open cases include both EBLLs from 2018 and those from prior years.



GOAL 2: Ensure that the CLPPP has the organizational infrastructure needed to provide services in accordance with the program’s intervention schedule.

Objective 2.1: The CLPPP will have written policies and procedures by December 31, 2018.

The program has identified a list of 51 policies and procedures that are needed to support staff in carrying out the day-to-day functions of the program. Policies and procedures standardize how the program delivers services. OPSA has prioritized HUD policies as well as the intervention schedule.



Objective 2.2: The CLPPP will fill critical vacancies by December 31, 2018.

Critical vacancies include the Home Environmental Health Manager, Public Health Nurse Supervisor, Environmental Health Services Manager, Lead Project Specialist, and the Lead Project Assistant. Interviews for the Lead Project Specialist and Environmental Health Services Manager took place the week of 10/29/2018. In the 2019 budget, 7 new positions were created, 2 of which have already been filled. 3 additional Lead Risk Assessor Positions are also in the process of being added.



Objective 2.3: The CLPPP will be placed under a permanent division by December 31, 2018.

The CLPPP is temporarily operating under the Office of Policy, Strategy and Analysis until the department completes a strategic planning process. The strategic plan will identify where the CLPPP will be housed long-term within the department’s organizational structure.



GOAL 3: Lift the Department of Housing and Urban Development’s (HUD) Stop Work Order issued on February 12, 2018.

Objective 3.1: Complete full Lead Investigations/Risk Assessments, and required reports, for all 32 properties identified in the HUD Stop Work Order by October 26, 2018.

The HUD work plan identified 32 properties from the 2016 grant that required a full lead investigation/ risk assessment. Lead Risk Assessors went to each property, conducted a full lead investigation/risk assessment, and wrote a lead investigation/risk assessment report (LIRA). Despite repeated efforts, the program has been unsuccessful in contacting two property owners.



All investigations and LIRA reports were completed for all 30 properties by October 26, 2018. 17 investigations and associated LIRA reports were completed between September 26th and October 26th. Of the 30 completed properties, 17 have been submitted to HUD for their review, 13 (of 17) have been approved by HUD and 3 (of 17) projects are complete.

Objective 3.2: The CLPPP will revise and resubmit the 2016 HUD grant narrative with revised benchmarks by December 1, 2018.

The HUD work plan requires the MHD to revise and resubmit the narrative for the 2016 grant with revised benchmarks and goals-based on Lead Risk Assessors’ revised, more time intensive work flow for conducting environmental investigations/risk assessments and increased scopes of work. A revised narrative was submitted to HUD prior to the CLPPP being placed under OPSA. HUD found that document to be inadequate and required that the city re-submit the report.



Objective 3.3: The CLPPP completes policies identified in the HUD Stop Work Order by December 1, 2018.

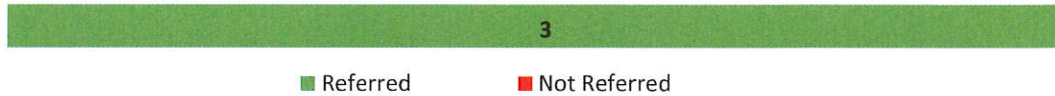
HUD’s review of the CLPPP program identified a number of procedures that were not being completed in compliance with HUD standards or guidelines. The HUD work plan requires that the department revise 8 policies to ensure that the processes are corrected.



GOAL 4: Provide follow-up to families that did not receive proper services from the CLPPP between 2015 and 2017 (Historical Cases), as identified in the MHD’s internal assessment.

Objective 4.1: Assign all cases that should have but did not receive a referral for case management services between 2015 and 2017.

The MHD’s internal audit of the CLPPP identified children that did not receive proper referrals for nursing case management service. The CLPPP has referred all clients for services.



Objective 4.2: Follow up with the 112 properties that should have but did not receive a complete/satisfactory environmental investigation between 2015 and 2017 by December 31, 2020.

The MHD’s internal audit of the CLPPP identified 112 properties that did not receive proper referrals for environmental risk assessments or did not have adequate documentation. The CLPPP has attempted to contact each property owner to gain access and complete a lead investigation and risk assessment. Closure criteria is being discussed with the State of Wisconsin for these unique properties, as entry into the homes has been challenging. Of the 112 properties, 4 have been abated and 20 are in the risk assessment stage. 80 cases remain in the contact stage, meaning various attempts to contact property owners have been made, but entry into the property has not been gained.



GOAL 5: Adequately respond to the State of Wisconsin’s work plan to ensure that the program meets statutory requirements.

Objective 5.1: Revise the CLPPP’s intervention schedule by November 5, 2018.

The State of Wisconsin assessment of the CLPPP identified inconsistencies what the department was communicating as interventions the program provides. In addition, one intervention was found to be ineffective as administered.



■ Complete ■ Not Complete

Objective 5.2: Ensure that CLPPP staff receive proper training from the State.

The MHD’s program assessment as well as the State of Wisconsin’s noted the need for additional staff training. State of Wisconsin offered to train program staff on programmatic issues as well as on the new data platform.



■ Complete ■ Not Complete

Objective 5.3: Develop policies and procedures to ensure that information is properly documented.

The MHD’s program assessment as well as the State of Wisconsin’s noted the lack of systems in place to ensure information was accurately being documented and data being entered into the data platform. To ensure appropriate documentation practices, the CLPPP is embedding documentation and data entry requirements into each policy. This objective will be met under Objective 2.1.

Objective 5.4: Review the 491 cases that met statutory requirements between 2012 and 2017 to see if proper nursing case management services were provided.

The State of Wisconsin identified 491 cases that met the statutory requirements for case management between 2012 and 2017. The CLPPP has reviewed all 491 cases and is working with the State of Wisconsin to ensure appropriate case closure.



■ Complete ■ Not Complete

Objective 5.6: Review the 491 cases that met statutory requirements between 2012 and 2017 to see if proper environmental risk assessment services were provided.

The CLPPP has reviewed all cases requiring environmental risk assessment between 2015-2017. This review resulted in the “historical cases” in Objective 4.2. The CLPPP is in the process of identifying and reviewing the additional cases between 2012-2014. The CLPPP will continue working with the State of Wisconsin to determine appropriate case closure criteria for historical cases.



■ Complete

■ Not Complete