

City of Milwaukee Health Department

Office of Policy, Strategy and Analysis

Systems Improvement Project

CHILDHOOD LEAD POISONING PREVENTION PROGRAM PROGRESS REPORT 3 | NOVEMBER 30, 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:

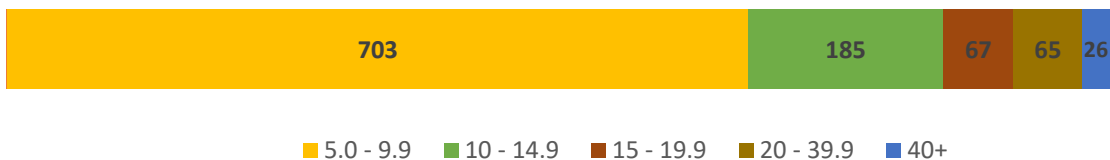
- **GOAL 1:** Ensure that children with an elevated blood lead level (EBLL) in 2018 and thereafter receive services in accordance with the Childhood Lead Poisoning Prevention Program's (CLPPP) intervention schedule.
- **GOAL 2:** Ensure that the CLPPP has the organizational infrastructure needed to provide 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 November 30, 2018, 25,216 unique children received blood lead tests, totaling 33,397 total tests. (This is an additional 4,121 tests from Progress Report 1). Of those tests, 1,046 (4.1%) were confirmed to have lead levels ≥ 5 mg/dL through venous testing. In total, 100 unique children qualified under state statute for nursing case management and environmental investigations. Those 100 unique children were associated with 109 addresses requiring environmental investigations. This is 7 more unique children and 7 more addresses from PR1.

2018 Confirmed Elevated Blood Lead Levels as of 11-30-18

25,216 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, which may include a recommendation for a confirmatory lead test if the test result received by the MHD was from a capillary test. Between November 1st and November 30th, a total of 341 letters were mailed. The program is working to perfect this reporting metric, as codes are being created to distinguish the various letters that are going out to families.

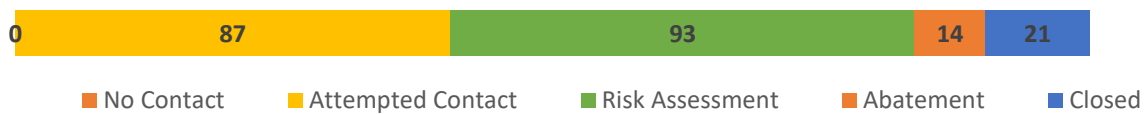
Objective 1.2: All children with EBLLs meeting levels outlined in state statute will receive *nursing case management* from the CLPPP in accordance with the program’s intervention schedule (ongoing).

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 525 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).

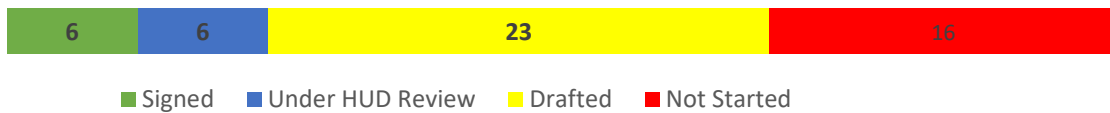
The CLPPP conducts an environmental risk assessment of properties that are associated with children who have an EBLL as outlined in the program’s intervention schedule. The environmental risk assessment is a surface by surface assessment of where lead hazards are in the home. The PR1 included open cases from 2018 and prior years. To provide a more precise estimate of environmental investigations, this report is only including open cases from 2018 for this objective.



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. Offers were made for both of these positions. The program was also successful in exempting a critical vacancy related to its HUD grant—the Lead Project Assistant. Additionally, the Home Environmental Health Manager position was posted externally as was the Lead Risk Assessor position. The goal is to create a new list of LRAs to fill the positions created in the 2019 budget. 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.

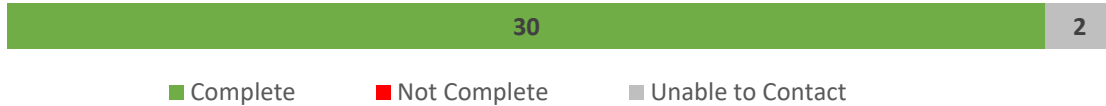
The CLPPP is temporarily operating under the Office of Policy, Strategy and Analysis until the department completes a strategic planning process. The strategic plan will identify where the CLPPP will be housed long-term within the department’s organizational structure.



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. All 30 LIRA reports have been submitted to HUD for their review.

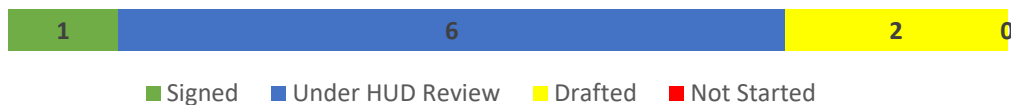
Objective 3.2: The CLPPP will revise and resubmit the 2016 HUD grant narrative with revised benchmarks by December 1, 2018.

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.



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.



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