



City of Dallas Childhood Lead Poisoning Elimination Plan

Executive Summary

Dallas, TX is a vibrant metropolitan area which is now the ninth largest city in the United States with a population of 1,188,580. For children under age 5, the population is 98,785, which is 8.31% of the overall population. Children less than 6 years of age that were tested in 2006 and received non-Medicaid was 6,099 (21%); Medicaid tested was 23,214 (79%).

The City of Dallas has been a leader in health programs through its Environmental and Health Services Department. The department is divided into two major divisions: Environmental/Public Health and Human Services.

Lead inhalation can be very damaging to children. Ideal blood lead levels for children should be less than 10 μ /dL. For children who have lead levels higher than this, educational intervention takes place by one of the City's premier programs, the Childhood Lead Poisoning Prevention Program. Through this program the City of Dallas screens thousands of its residents with a primary focus on youth, ages 0-14. The City of Dallas believes it can reach the Healthy People 2010 goal of eliminating the burden of lead poisoning in children.

The negative impact of lead poisoning in children can range from decreased intelligence, behavioral disturbances, or delayed development to asthma and epileptic seizures. The City of Dallas believes that even one child who suffers from the side effects of lead poisoning is one child too many as this is a preventable problem. The desire to serve its residents prompted the City to initiate a screening program which spawned the City of Dallas Childhood Lead Poisoning Prevention Program (CLPPP) began in 1983. Through the program, personnel provide blood lead screening, referral services, environmental testing and case management services along with education to parents, the general public, and health providers regarding lead prevention (CLPPP Proposal 2005).

The City of Dallas Childhood Lead Poisoning Prevention Program strategic planning committee consisted of the following members:

- Pauletta Jones-Public Health Manager
- Brenda Hamilton - Lead Coordinator
- Ken Flatt- Manager of Planning and Evaluation

A meeting was hosted February 2007, a draft plan was developed. At the May 2007 Lead Coalition meeting the plan was discussed, reviewed and after clarification, the plan was accepted and approved. Representatives present were:

- Bobby Bennett – City of Dallas Housing
- Courtney Bindel – DSHS – Texas Health Steps
- Jose Rivera – City of Dallas Childhood Lead Program
- Stephen Harper – EPA
- Sharon Barby – EPA
- Mingo Servantes – EPA
- Madge Barnes, MD – City of Dallas Medical Director
- Brenda Braxton – Keller Williams Realtors
- Lillian Asberry – City of Dallas Child Health Clinic
- Don Conyers – City of Dallas Data Management
- Ken Flatt – City of Dallas Planning and Evaluation
- Belinda Rogers – City of Dallas Child Health Supervisor
- Brenda Hamilton – City of Dallas Childhood Lead Coordinator

Strategic Goal and Objectives

The City of Dallas CLPPP Coordinator, the Public Health Manager and the Planning and Evaluation Manager met in April 2007 to identify the need to address and develop strategies to eliminate childhood lead poisoning in the city of Dallas. The plan of the strategies will focus on 5 key objectives. The following objectives were developed and will be presented to the City of Dallas Lead Coalition, which is devised of the City of Dallas Housing Department, Head Start of Greater Dallas, EPA, Dallas County Health Department and other public and private health agencies.

- Objective I Leverage Dollars for Making Housing Lead Safe
- Objective II Foster Compliance with Safe Housing Practices
- Objective III Prevent Exposure of Children to Non-Paint Lead Sources
- Objective IV Increase Identification of Children under Age 6 at Risk for Lead Poisoning
- Objective V Raise Awareness about Childhood Lead Poisoning Among Decision Makers

I. Leveraging Dollars for Making Housing Lead Safe

Long Term Goal:

- Develop private-sector partnerships and leverage funds, in-kind support or charitable contributions from organizations, such as home improvement chains.

Short Term Goals:

- Secure funds for lead hazard control

Activities:

- Collaborate with Dallas County Health Department’s Weatherization Program to determine ways to allocate for abatement of lead hazards in conjunction with making properties more energy efficient. **(To be completed by June 2008)**
- Audit existing resources and explore and apply for grant funding that could be used for lead hazard control. **(On-going process)**

✓ **Secured a one year EPA grant August 2007 - \$90,600**

II. Foster Compliance with Safe Housing Practices

Long Term Goal:

- Increase the number of lead-safe housing units in 2008 to 2010

Short Term Goals:

- Collaborate with housing and environmental agencies to identify existing resources for lead hazard control and refer families to available resources. **(To be completed by June 2008)**
- Collaborate with environmental agencies and housing authorities to ensure performance of inspection of housing where a child with an elevated blood lead level resides or spend a significant amount of time. **(In progress and on-going)**

Activities:

- Certify homes that are lead safe and create a seal of approval that property owners can use to advertise rentals and sales.
- Post certified lead safe homes on official websites.
- Provide an educational awareness campaigns directed at remodelers regarding lead safe work practices and their importance. Distribute and post information in City of Dallas permit offices, HUD offices and hardware stores. **(Planning trainings for home owners, landlords and renters regarding lead safe practices during remodeling or renovation projects. To be completed by July 2008)**

III. Prevent Exposure of Children to Non-Paint Lead Sources

Long Term Goal:

- Identify and decrease the number of children exposed to non-paint lead sources.

Short Term Goal:

- Create a pamphlet/brochure identifying non-paint lead sources.

Activities:

- Distribute materials at health fairs, provider education presentations and home visits. **(On-going)**
- Ensure all recall products and information that are distributed or posted are reviewed and remain up-to-date.
 - ✓ **A note book is maintained regarding recall products and information that is presented to parents during home visits and providers during presentations.**
- Provide information regarding non-paint lead sources to local businesses that might supply such products.
 - ✓ **Providing coalition members with lead information pamphlets for distribution.**

IV. Increase Identification of Children under Age 6 at Risk for Lead Poisoning

Long Term Goal:

- Increase the number of children screened in high risk ages under age 6.
- Target children that receive Medicaid.

Short Term Goal:

- Identify high risk areas in the City of Dallas by GIS mapping.

Activities:

- Outreach and screening clinics in the identified high risk areas **(On-going)**

- Contact local providers in high risk areas and offer educational materials and staff presentations. **(On-going)**

V. Raise Awareness about Childhood Lead Poisoning Among Decision Makers

Long Term Goal:

- Raise awareness about childhood lead poisoning among decision makers.
- Identify existing campaigns in other jurisdictions.

Short Term Goal:

- Develop website to maintain information about lead poisoning.

✓ **Developed 12/06 and on-going**

Activities:

- Distribute informational packets to incoming City Council members.
 - ✓ **Planning presentation to Neighborhood Quality of Life Committee regarding lead data specific to the Dallas area and lead hazards and effects**
- Post upcoming events and new information regarding lead poisoning. (On-going)
 - ✓ **In communication with Dallas Area Rapid Transit system to post lead message on the marquee display inside buses**