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May 15, 2015

Honorable Eric Garcetti
Mayor, City of Los Angeles
200 North Spring Street, Room 303
Los Angeles, CA 90012
Attention: Mandy Morales, Legislative Coordinator

COUNCIL TRANSMITTAL: REQUEST FOR APPROVAL OF AUTHORITY TO SIGN CONTRACT AND IMPLEMENT CONTROLLER'S INSTRUCTIONS FOR THE U.S. CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) GRANT FOR CHILDHOOD LEAD POISONING PREVENTION

Summary

In mid-2014, the Los Angeles Housing + Community Investment Department (HCIDLA) was approached by Impact Assessment Inc. (IAI) to partner in a funding proposal to the Centers for Disease Control and Prevention (CDC) for a three year grant. Acting as a *bona fide* agent for HCIDLA, IAI applied for, and was awarded, a three year cooperative agreement with the CDC-Childhood Lead Poisoning Prevention Program funded for a total of \$914,016 (\$304,672 a year) for the period of 9/30/2014 to 9/30/2017. The grant was awarded in late 2014; the signed agreement was received from the CDC in February 2015. This report requests authority to execute a subcontract with IAI and to establish accounts to receive reimbursements from grant funds.

In partnership with the Los Angeles-based non-profit Healthy Homes Collaborative and the Los Angeles County Childhood Lead Poisoning Prevention Program (CLPPP) within the Department of Public Health, IAI and HCIDLA plan to reduce childhood lead poisoning within the City of Los Angeles' Promise Zone and its neighboring communities. Overarching goals of the grant-funded project, entitled *Implementing Innovative Solutions for High-Risk Children in Hard-to-Reach Populations*, include expanding existing lead poisoning prevention and intervention projects and programs within high-risk areas; increasing the number of children screened for lead poisoning who reside within identified high-risk areas; increasing awareness of the public and local leaders in Los Angeles regarding lead poisoning prevention efforts and the importance of local, state and federal laws, regulations and initiatives to eliminate lead poisoning; and decreasing lead exposure by enrolling additional at-risk families in

HCIDLA's Lead Hazard Remediation Program funded by the U.S. Department of Housing and Urban Development (HUD).

Recommendations

The General Manager of the Los Angeles Housing + Community Investment Department (HCIDLA) respectfully requests that:

- I. Your office schedule this transmittal at the next available meeting(s) of the appropriate City Council committee(s) and forward it to the City Council for review and approval immediately thereafter;
- II. The City Council, subject to the approval of the Mayor, take the following actions:
 - A. Authorize the General Manager of HCIDLA or designee, to sign the attached Subcontract with Impact Assessment Inc. for the period February 6, 2015 through September 29, 2015;
 - B. Authorize the General Manager of HCIDLA or designee, to process and execute future subcontracts or subcontract amendments with Impact Assessment Inc., to implement this CDC-grant funded program pursuant to the Mayor's Executive Directive 3 and the Los Angeles Administrative Code 14.8;
 - C. Authorize the Controller to:
 - 1. Establish a receivable within Fund No. 49N Small Grants and Awards in the amount of \$25,000 from the Centers of Disease Control passed through Impact Assessment Incorporated (IAI).
 - D. Authorize the General Manager of HCIDLA, or designee, to prepare Controller instructions for any necessary technical adjustments consistent with the Mayor and Council action in this matter, subject to the approval of the City Administrative Officer (CAO), and authorize the Controller to implement these instructions; and
 - E. Instruct the City Clerk to place on calendar on the first available meeting date after July 1, 2015, or soon thereafter, the following recommendations:

- 1. Establish new accounts within Fund No. 49N and appropriate as follows:

<u>Account</u>	<u>Title</u>	<u>Amount</u>
43M143	HCIDLA	\$16,559
43M299	Reimbursements to General Fund	<u>8,441</u>
	Total	\$25,000

- 2. Appropriate \$16,559 within Fund 100/43 Account 1010 Salaries.

Background

Lead is highly toxic, especially to young children. It can harm a child's brain, kidneys, bone marrow, and other body systems. At high levels, lead can cause coma, convulsions, and death. The National Academy of Sciences reported in 1993, and subsequent research has shown, that comparatively low levels of lead exposure are harmful in infants, children, and pregnant women, and are associated with impaired cognitive function, behavior difficulties including attention deficit/hyperactivity disorder (ADHD), fetal organ development, and other problems. In addition, low levels of lead in children's blood can cause impaired hearing, reduced stature and cognitive losses (lower IQ) that reduce the average lifetime earnings of such children.

A large body of evidence shows that the most common source of lead exposure for children today is lead paint in older housing and the contaminated dust and soil it generates. Poisoning from lead paint has affected millions of children since this problem was first recognized more than 100 years ago, and it persists today despite a 1978 ban on the use of lead in new paint.

Despite marked declines in blood lead levels (BLLs) over the past four years, lead poisoning has remained a persistent health problem in California and many parts of the nation, particularly in lower income neighborhoods. The U.S. Environmental Protection Agency (USEPA) Region 9 *2011-2014 Strategic Plan for Children's Health* identified lead poisoning in California as the "greatest direct environmental threat to children." In 2012, California had the fourth largest number of confirmed BLLs above 10 µg/dL (milligrams per deciliter) in the US, accounting for more than 7% of the national total. Since 1990, more than 10,000 children in the City of Los Angeles have been poisoned by lead-based paint; 81% of these children were Latino.

Childhood lead poisoning is most likely to occur when several of the conditions listed below are present:

- Children under six years old; the peak risk is babies and toddlers ages one to two years old, due to more time spent on floor, increased hand to mouth behavior, small bodies that facilitate high absorption of lead, and rapid central nervous system development
- Lives or spends significant amounts of time in pre-1978 housing/buildings with paint in poor condition or undergoing renovation
- Low income (i.e. less than \$65,200 annually for a family of four in Los Angeles)
- Family member who works with lead (e.g. home remodeling, day labor, manufacturing)
- Recent immigration/foreign adoptee, or spends time outside of the United States
- Use of certain imported remedies/supplements/cosmetics
- Use of some types of traditional/imported/handmade dishware
- Consumption of lead contaminated foods (e.g. Chapulines, some Mexican candy, some imported spices)
- Lives near source of lead air emissions (e.g. Vernon battery recycler recently in the news)
- Exposure to lead contaminated water source (e.g. from older residential plumbing with lead solder)

The City of Los Angeles has nearly 4 million residents, two-thirds of whom rent their homes. Twenty percent of all City households are below the federal poverty line, which is \$24,250 or less annual income for a family of four; half of all City households earn less than \$50,000 a year. Over one million houses and apartments, accounting for nearly 80% of the city's housing stock, were built before 1980, and are likely to have lead-based paint hazards.

Since passage of the federal Residential Lead-Based Paint Hazard Reduction Act of 1992, the City's housing agencies – HCIDLA and the Housing Authority of the City of Los Angeles (HACLA) - have incorporated those regulations, and subsequent amendments, into housing rehabilitation programs. For 18 years, the City of Los Angeles has received lead hazard remediation grants from the U.S. Department of Housing and Urban Development (HUD), awarded to HCIDLA through competitive application processes, working in collaboration with local community-based organizations (CBOs) to conduct outreach visits to inform tenants and property owners about lead hazards, and to make homes lead-safe.

In addition, HCIDLA's Systematic Code Enforcement Program (SCEP), established in 1998, routinely inspects over 190,000 rental units a year and cites lead hazards such as peeling paint in pre-1978 buildings. Since 2003, SCEP staff and HCIDLA's Lead Hazard Remediation Program have worked closely with the Healthy Homes Collaborative (HHC), a coalition of community-based organizations and other agencies, to implement the Lead Poisoning Prevention Pilot Program. It supports City enforcement in rental housing of state law mandating lead-safe work practices, which requires that any repairs or remodeling that may disturb painted surfaces in pre-1978 residential properties (e.g. opening up walls for plumbing or electrical repairs, replacing windows) are conducted in a way to minimize lead dust and prevent lead hazards from harming the residents or the workers, who can unwittingly take the hazardous lead dust home to their young children.

On July 3, 2014, the National Center for Environmental Health at the federal Centers for Disease Control and Prevention (CDC) issued a Funding Opportunity Announcement (FOA) for Childhood Lead Poisoning Prevention to fund cooperative agreements to use lead poisoning surveillance data to identify the highest risk areas and target appropriate population-based prevention interventions wherever needs are identified. Proposals were due by July 22, 19 days later. This type of funding, typically awarded to state health agencies, has not been available in the Federal budget for several years. In this case, the Affordable Care Act provided new resources to support primary prevention strategies, thus the focus on underserved populations in high-risk neighborhoods. Because of HCIDLA's leadership and work with community-based healthy homes advocates, Impact Assessment Inc. approached the department asking to partner on a grant application to the CDC.

The Grant Partners

Impact Assessment Inc. (IAI) has served as a contractor to the California Department of Public Health (CDPH) for 20 years. IAI designed, developed, and deployed a statewide surveillance and case management system, RASSCLE II, to support statewide efforts to monitor trends in blood lead testing and manage lead burdened children throughout the state. The RASSCLE II system collects nearly 800,000 blood lead levels (BLLs) test results each year from over 250 reporting laboratories, houses data gathered by clinical and environmental case investigators on cases, and can export data in the 2002 CDC-defined data requirements. As of 2014, nearly all counties within California utilize RASSCLE II, including Los Angeles County.

The Healthy Homes Collaborative (HHC) is a Los Angeles-based non-profit with over twenty years of experience collaborating with community-based organizations (CBOs) and federally qualified health centers to ensure lead poisoning prevention activities take place in high-risk neighborhoods. The HHC designs and implements education and outreach strategies in a manner that is culturally competent and executed through members of the community, such as health promoters and organizers employed by the CBOs.

The Los Angeles County Childhood Lead Poisoning Prevention Program (CLPPP) within the County Department of Public Health (DPH), funded primarily through state fee-based dollars, was established in 1991 to develop and enact a standard of care for identifying and managing children with elevated BLLs. Under the direction of the State of California's Childhood Lead Poisoning Prevention Branch, the program offers case management, lead screenings, environmental investigations, surveillance, health care provider training, and health education. These services are provided to all children who meet state-case defined levels and, as resources allow, children and non-occupationally exposed adults with blood lead levels greater than or equal to 10 µg/dL.

The Grant Activities

The title of this grant-funded project is: *Implementing Innovative Solutions for High-Risk Children in Hard-to-Reach Populations*. Its purpose is to reduce the number of children exposed to lead and to reduce the number of housing units that contribute to lead poisoning within the City of Los Angeles by expanding existing lead poisoning prevention activities. Its success will be a direct outcome of bringing together the resources, expertise, and leverage of IAI, HCIDLA, HHC, CLPPP and the CDC.

This CDC-funded project is focused on communities that have not benefitted from previous community education and outreach, specifically low-income, limited-English, non-Spanish speaking residents, many of whom live in the neighborhoods comprising the Los Angeles Promise Zone (LAPZ). The grant application for this project was submitted to the CDC after the most recent HCIDLA application to HUD for lead hazard remediation funds was written. The HUD grant application received bonus points due to its commitment to expend significant educational and lead remediation resources within the boundaries of the Los Angeles Promise Zone, a geographic area designated by the White House and HUD in 2014, which made the City's application for \$3.9 million more competitive.

As mentioned above, for 12 years, since 2003, the Lead Poisoning Prevention Pilot Program has focused on the oldest, lowest-income highest-need communities in Los Angeles, in the Eastside, South Los Angeles, Hollywood, and the north San Fernando Valley, providing education and outreach to residents and owners of properties that have had multiple code violations, which present the highest lead-poisoning risks to young children. But no educational materials about lead hazards have been developed for other limited-English groups such as Korean-speaking tenants, owners, and maintenance-remodeling contractors, or for Mayan-dialect-speaking residents, in Los Angeles or anywhere else in the United States. Those populations and other low-income linguistically-isolated communities reside in or near the LAPZ, which is why this CDC-funded effort is focusing on that geographic area within the City. Materials developed and lessons learned will be shared throughout the City and beyond.

The overall LAPZ poverty rate is 35%, significantly higher than the citywide poverty rate of 20%, and its violent crime rate is twice that of the City. Of the 165,362 residents, nearly 60% pay more than a third of their monthly income for rent; 30% of households pay over half their income. The LAPZ

includes parts of the Hollywood, East Hollywood, Koreatown, Pico Union, and Westlake communities. Immigrants from many parts of the world live in this diverse region, particularly from Central America and Asia. This project will enable HCIDLA and HHC to expand into hard-to-reach populations by engaging community-based partners that reflect the specific cultures. The CDC grant will fund the development of culturally and linguistically appropriate educational materials to serve residents, property owners, building contractors and workers of those communities.

Even though the LAPZ's poverty rates and age of housing would be expected to result in high rates of lead-poisoned children, in fact it is a 'cold spot', with relatively few cases managed by CLPPP, which could mean that insufficient blood lead testing is occurring. This CDC-funded project aims to ensure that all children at risk are tested for elevated blood lead levels, that residents and property owners are aware of lead hazards, and that maintenance /remodeling contractors and their workers are aware of, and comply with, state law mandating lead-safe work practices and federal USEPA Renovation Repair and Painting (RRP) regulations. If the remodeling contractors do not have the federally-required RRP certification, and are not using the relatively simple, lead-safe construction techniques in homes and apartments built before 1978, not only the resident children but also those of the construction workers and day laborers can be harmed, because working parents can bring home lead-based paint dust on their clothes.

The project goals are:

Goal 1: Contribute to California's and the CDC's capacity to utilize lead poisoning data to identify actions that serve high-risk populations and develop appropriate intervention strategies through data sharing and dissemination.

Goal 2: Reduce repeat lead exposures in children by implementing strategies that identify and remove lead hazards in housing units located in the Los Angeles Promise Zone.

Goal 3: Increase awareness of the general public, and City and County leaders in Los Angeles of lead poisoning prevention efforts, and the importance of effectively enforcing federal, state and local laws and supporting local and state initiatives to eliminate lead poisoning.

Goal 4: Enhance existing City of Los Angeles prevention and intervention projects and programs.

Goal 5: Reduce the number of children with blood lead levels (BLLs) greater than or equal to 5 µg/dL in high-risk areas within the Los Angeles Promise Zone.

Goal 6: Monitor and evaluate the project following the CDC evaluation and performance measurement strategy.

Anticipated short-and mid-term outcomes include:

1. Improved data quality on patient- and address-specific data from the Los Angeles Promise Zone (LAPZ) in California's statewide surveillance system.
2. Established means to provide blood lead testing data for residents of the LAPZ to the CDC.

3. Primary prevention strategies developed to direct proactive housing and health enforcement activities to properties in the LAPZ at greatest risk of causing lead exposure to children.
4. Outreach materials developed to increase at-risk communities' awareness of housing and health issues and to improve outcomes of enforcement strategies implemented in the LAPZ.
5. Increased data sharing with the County of Los Angeles Childhood Lead Poisoning Prevention Program (CLPPP).
6. Increased number of children screened for lead by conducting outreach to healthcare providers serving at-risk populations within the LAPZ.
7. Increased awareness and support of the public, professionals, and leaders in Los Angeles regarding lead poisoning prevention efforts, and the importance of effectively enforcing federal, state and local laws and supporting local and state initiatives to eliminate lead poisoning.
8. Decreased lead exposure by enrolling additional at-risk families in HCIDLA's HUD-funded Lead Hazard Remediation Program through partnerships with community-based organizations and faith-based organizations.

This project expects long-term outcomes that include a reduction of the number of children in high-risk areas who have blood lead levels greater than or equal to 5 µg/dL, and a reduction of repeat lead exposures for children in these areas by implementing strategies that identify and remove lead hazards in housing units. Ultimately, this collaborative effort intends to expand on direct, relevant, and proven interventions implemented to reduce lead hazards. Outcomes from this project will also allow local, state, and federal partners to make progress towards the goal of reducing inequities that lead to health disparities by focusing on high-risk, underserved populations.

Partnership Roles

Impact Assessment Inc. (IAI) will:

- Serve as Co-Program Director with HCIDLA, overseeing all grant activities.
- Lead efforts to identify data elements, develop data management protocols, develop and implement data tracking tools and increase data sharing with CLPPP.
- Develop and implement evaluation and performance measurement plan using quantitative and qualitative methodologies consistent with CDC's Program Evaluation for Public Health Programs guidelines.
- Support the development of outreach materials to increase resident awareness of housing and health enforcement strategies implemented in high-risk areas in the city of Los Angeles and the development of tools and models to best inform professionals and policy makers.
- Create educational messages on lead testing for partner websites that are specifically targeted for the unique populations within these high-risk areas.
- Assist in developing and implementing proactive housing and health enforcement strategies to identify and track housing with the highest risk of lead exposures to children.
- Conduct computer programming activities as needed for the design, development, and testing of code for exporting data from local sources that meets CDC Surveillance Data Specifications, and creation of partner web data.

The Healthy Homes Collaborative (HHC) will:

- Support the development and implementation of new approaches, or strengthen existing under-funded strategies, that have proven to be most successful in identifying and tracking housing with the highest risk of lead exposures to children.
- Develop specific culturally-sensitive messages to targeted communities within the Los Angeles Promise Zone area to increase awareness of housing and health enforcement resources.
- Assist in the design of an integrated tool and model for HCIDLA, which ultimately could be used by other local housing departments, to best serve the targeted group of professionals and policy makers that will lead to the development of an integrated standards of practice document.
- Hone outreach messaging for approaching candidate community clinics to facilitate deployment of LeadCare® II point-of-care blood lead testing technology to two clinics that serve the Los Angeles Promise Zone population.

The Los Angeles Housing + Community Investment Department (HCIDLA) will:

- Serve as the Co-Program Director with IAI and be responsible for general oversight and administration of the program.
- Facilitate related HCIDLA data development, including providing detailed data requirements and knowledge transfer to IAI as needed.
- Provide subject matter expertise on HCIDLA's HUD-funded lead hazard remediation and healthy homes intervention work and its CCRIS and HIMS databases.

The Subcontract

In late 2014, the CDC awarded a three year cooperative agreement to Impact Assessment Inc. (IAI), functioning as a bona fide agent for the City of Los Angeles; the signed revised agreement was provided by the CDC in February 2015. The CDC funds are drawn and managed by IAI, reducing the administrative and grants management burden on the City. The subcontract was reviewed by the City Attorney, is for a total of \$25,000 and will pay for a portion of costs incurred by HCIDLA in carrying out this work, which builds upon existing lead-hazard work. This report requests authority to sign the subcontract agreement and approval of Controller's Instructions to establish accounts and receive reimbursements.

Fiscal Impact Statement

Grant funds totaling \$8,441 will be used to reimburse the General Fund for related costs.

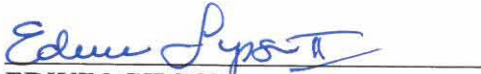
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Attachments