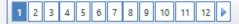
Awardee Lead Profile Assessment (ALPA)





Exit Survey

Awardee Lead Profile Assessment (ALPA)

Form Approved OMB No.: 0920-1215 Expiration Date: 02/28/2021

Below is the Centers for Disease Control and Prevention's (CDC) annual assessment for state and local childhood lead poisoning prevention programs (CLPPPs).

You have been asked to take part in this assessment as a state or local public official operating in your official capacity as decision-maker within a CLPPP.

The purpose of the assessment is to identify 1) jurisdictional legal frameworks governing CDC-funded CLPPPs in the United States, and 2) strategies for implementing childhood lead poisoning prevention activities in the United States.

This information collection will allow the CDC CLPPP to identify specific factors that may support or hinder the efforts of public health agencies engaged in lead poisoning prevention. The information collection will inform guidance, resource development and technical assistance activities the CDC CLPPP conducts in support of the ultimate goal of lead elimination. Assessment findings will be shared with key stakeholders, placed on CDC's CLPPP website, and used to respond to inquiries by the public, media, and Congress.

The data will be kept secure throughout the analysis and reporting process.

This assessment should take no more than 47 minutes to complete. You may stop taking the assessment and finish it at a later time. To re-enter the web survey, the tool will provide you with a unique link and passcode for return access. Please refer to the Awardee Lead Profile Assessment (ALPA) training manual for instructions on answering each question. Each text box has a character limit of 200 characters. Please complete the assessment by [DATE].

Participation is required for satisfactory performance. No individually identifiable information will be requested. If you have programmatic questions, you can contact CDC CLPPP via your Project Officer.

Please choose one option to continue:	* This field is required
Select	-

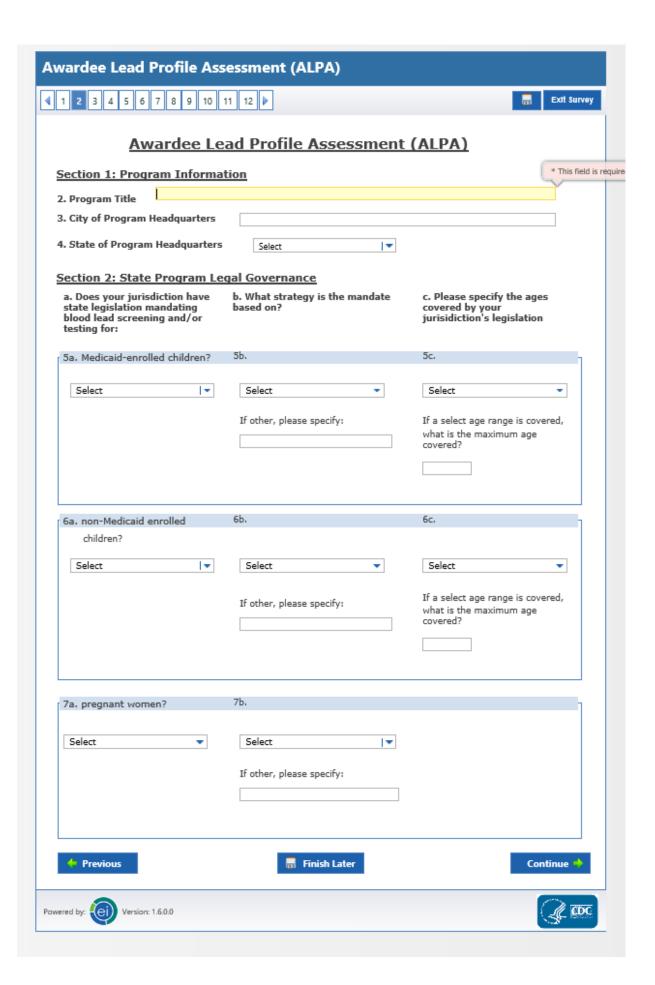
CDC estimates the average public reporting burden for this collection of information as 47 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1215)

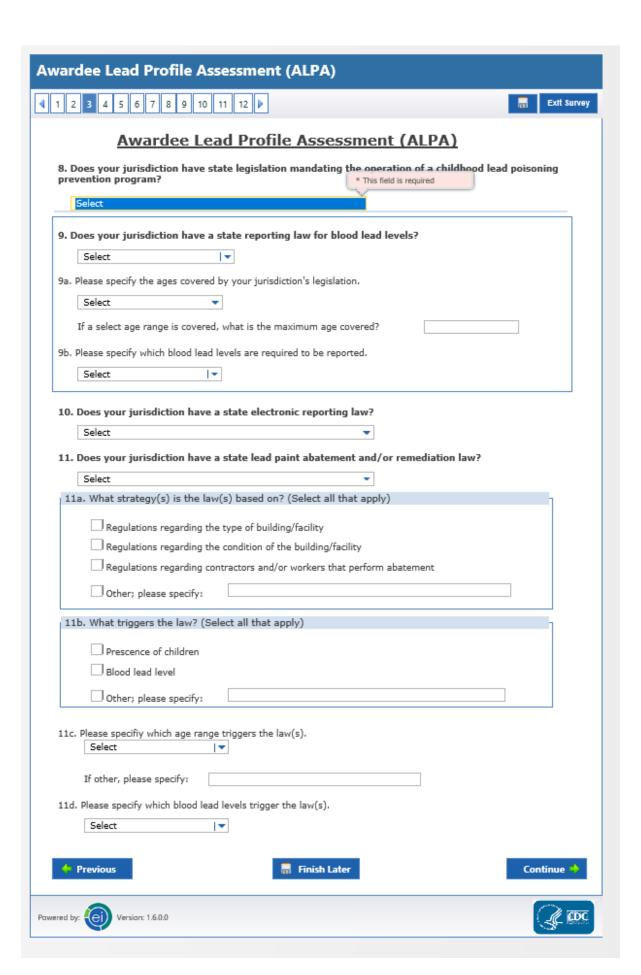


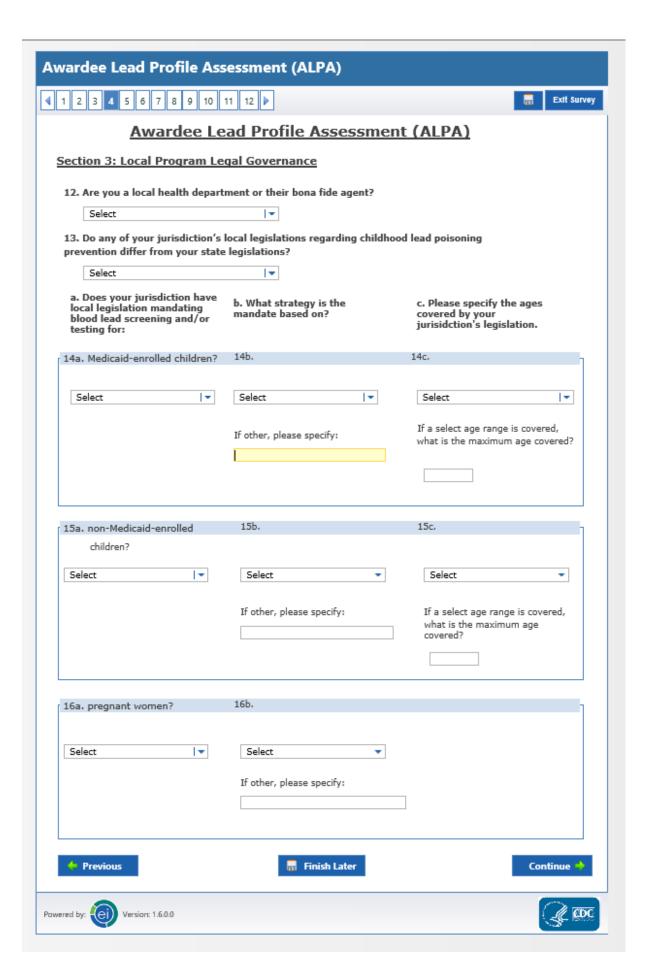
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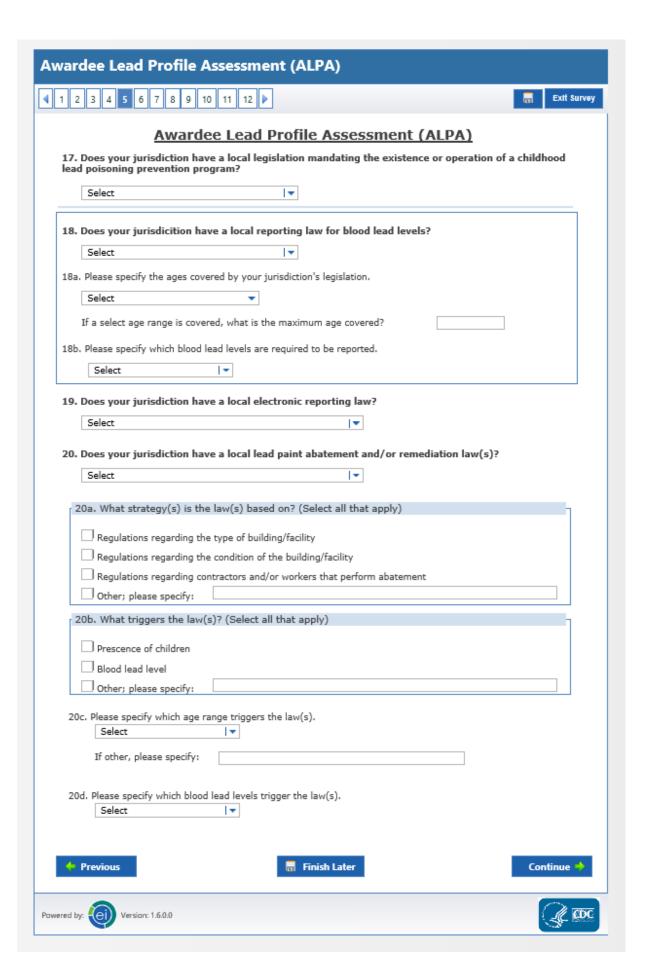












Awardee Lead Profile Assessment (ALPA)		
1 1 2 3 4 5 6 7 8 9 10 11 12 ▶ Exit Survey		
Awardee Lead Profile Assessment (ALPA)		
Section 4: Program Surveillance and Prevention Strategy		
a. For the following populations, does your jurisdication practice a blood lead screening and/or testing strategy that is different from your jurisdiction's mandate?	b. How does your jurisdiction's practiced blood lead screening and/or testing strategy differ from your jurisdiction's mandate? (Select all that apply)	c. What barriers does your jurisdiction face when practicing blood lead screening and/or testing strategies? (Select all that apply)
21a. Medicaid-enrolled children less than 6 years (72	21b.	21c.
months) of age?	Specific interventions are triggered at a lower blood lead	Resources for childhood lead poisoning prevention program
○Yes	level than what is mandated	Resources for screening and/or testing
O No (Skip to question 22a) O Unknown (Skip to question	Specific interventions are triggered at a higher blood lead level than what is mandated	Working with providers Education and/or outreach to providers
22a)	Focus is on targeting younger children	Education and/or outreach to public
	Other; please specify:	Education and/or outreach to targeted populations
		Accessing Medicaid program
		Other; please specify:
22a. non-Medicaid-enrolled	22b.	22c.
children less than 6 years (72 months) of age?	Specific interventions are triggered at a lower blood lead	Resources for childhood lead poisoning prevention program
OYes	level than what is mandated	Resources for screening and/or testing
O No (Skip to question 23)	Specific interventions are triggered at a higher blood lead level than	Working with providers
OUnknown (Skip to question 23)	what is mandated	Education and/or outreach to providers
OThere is no mandate for non-Medicaid-enrolled children	Focus is on targeting younger	Education and/or outreach to public
less than 6 years of age (Skip to question 23)		Education and/or outreach to targeted populations
to question 23)	Other; please specify:	Accessing Medicaid program
		Other; please specify:
Previous	🔚 Finish Later	Continue 🔸

Awardee Lead Profile Assessment (ALPA) 4 1 2 3 4 5 6 **7** 8 9 10 11 12 **>** Exit Survey Awardee Lead Profile Assessment (ALPA) Section 5: Primary Prevention Strategy 23. Does your childhood lead poisoning prevention program conduct any of the following primary prevention activities? (Select all that apply) Link families with young children at high risk for lead poisoning to housing inspection and environmental intervention resources before a child's blood lead level becomes elevated Evaluate lead-safe housing status of community by conducting systematic environmental investigation activities (such as lead dust wipes, visual inspections, paint chip and soil analysis) based on the high-risk status of the housing (i.e. pre-1950 housing in poor condition), compiling those data in an electronic format, and developing an ongoing evaluation component Have codified specifications for lead-safe housing treatments Lead hazard identification has been incorporated into ongoing housing code or other inspections as a result of partnerships with housing agencies Assure that policy changes needed to promote childhood lead poisoning prevention and lead-safe environments are recommended and supported with data Collaborate with other agencies and organizations and incorporate lead poisoning educational information into other health, housing, and community services that reach high-risk families Conduct family and community education that support primary prevention activities Conduct professional health education, risk communication, and/or training activities to increase lead poisoning prevention awareness When a child is identified with an elevated blood lead level, require that environmental testing of adjacent units is conducted Require that housing units identified previously as sources for lead exposure for child are prioritized Lead-safe training sessions occur at least quarterly Provide resources to help families reduce lead hazards in their home Require that all lead abatement contractors are certified and that all renovation and other contractors who work in pre-1978 housing are trained in lead-safe work practices Replace lead service lines None of the above

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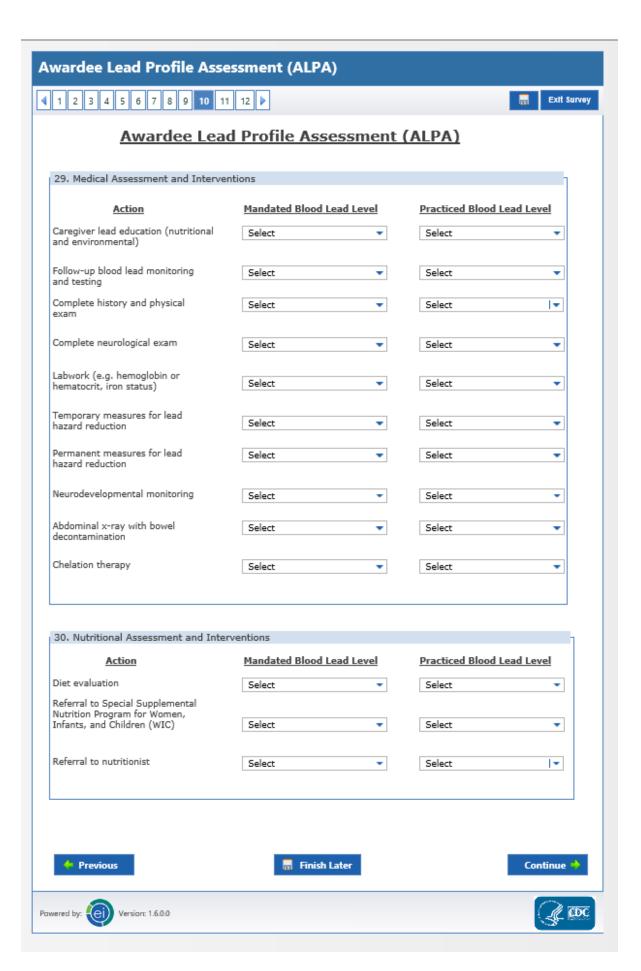
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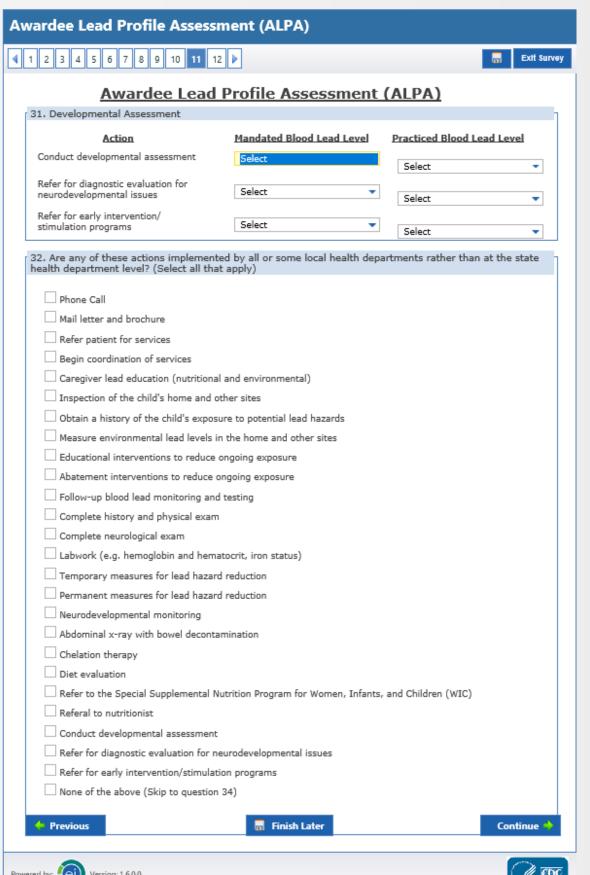


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Awardee Lead Profile Assessment (ALPA) 4 1 2 3 4 5 6 7 8 9 10 11 12 b Exit Survey Awardee Lead Profile Assessment (ALPA) 24. Has your jurisdiction's childhood lead poisoning prevention program developed a lead elimination plan or goal? Select ΙΨ 24a. Does your jurisdiction's lead elimination plan have any measures? (Select all that apply) Quantifiable standard Timeline for goals Other; please specify: None of the above 24b. Does your jurisdiction's lead elimination plan include any of the following components? (Select all that apply) Primary prevention plan Testing and/or screening plan CLPPP workplan Laws/regulations and/or policy plan Other; please specify: None of the above 25. Does your jurisdiction's childhood lead poisoning prevention program target high-risk areas and/or populations? Select 26. Does your jurisdiction publish GIS maps of high-risk areas and/or populations for public use? Select 🔚 Finish Later revious 👇 Continue Version: 1.6.0.0

Awardee Lead Profile Assessment (ALPA) 1 2 3 4 5 6 7 8 9 10 11 12 Exit Survey Awardee Lead Profile Assessment (ALPA) Section 6: Program Services 27. Administrative Action Mandated Blood Lead Level Practiced Blood Lead Level Phone Call Select -Mail letter and/or brochure Select Select -Refer patient for services Select Select • Begin coordination of services Select Select -28. Assessment and Remediation of Residential Lead Exposure Action Mandated Blood Lead Level Practiced Blood Lead Level Inspection of child's home and other Select -Select • sites Obtain a history of the child's exposure to potential lead hazards -Select Select Measure environmental lead levels in Select -Select the home and other sites Educational interventions to reduce Select -Select ongoing exposure Abatement interventions to reduce Select -Select ongoing exposure Previous 🔚 Finish Later Continue Version: 1.6.0.0









Awardee Lead Profile Assessment (ALPA) 1 2 3 4 5 6 7 8 9 10 11 12 Exit Survey Awardee Lead Profile Assessment (ALPA) 33. Are action(s) implemented by the local health department at a different blood lead level than levels set by the state health department? Select -34. Does your program recieve Medicaid reimbursement for any of the following lead poisoning prevention related services? (Select all that apply) Phone Call Mail letter and brochure Refer patient for services Begin coordination of services Caregiver lead education (nutritional and environmental) Inspection of the child's home and other sites Obtain a history of the child's exposure to potential lead hazards Measure environmental lead levels in the home and other sites Educational interventions to reduce ongoing exposure Abatement interventions to reduce ongoing exposure Follow-up blood lead monitoring and testing Complete history and physical exam Complete neurological exam Labwork (e.g. hemoglobin and hematocrit, iron status) Temporary measures for lead hazard reduction Permanent measures for lead hazard reduction Neurodevelopmental monitoring Abdominal x-ray with bowel decontamination Chelation therapy Diet evaluation Refer to the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Referal to nutritionist Conduct developmental assessment Refer for diagnostic evaluation for neurodevelopmental issues Refer for early intervention/stimulation programs None of the above Previous 📊 Finish Later Print / Download CSV Submit Survey



