

Awardee Lead Profile Assessment (ALPA) User Guide

March 2026

Introduction

The purpose of the Awardee Lead Profile Assessment (ALPA) is to collect information about childhood lead poisoning-related laws and guidance, surveillance and prevention strategies, and program services including at what blood lead levels (BLLs) various case management activities are performed.

This information collection will help CDC to identify specific factors that may support or hinder the efforts of public health agencies engaged in lead poisoning prevention. CDC will use the collected information to inform guidance, resource development, and technical assistance activities to support lead hazard elimination.

You have been asked to take part in this assessment in your official capacity as someone who is knowledgeable about their state, tribal, local, and territorial childhood lead poisoning prevention program (CLPPP). The data will be kept secure throughout the analysis and reporting process.

This assessment should take no more than 53 minutes to complete. You may stop taking the assessment and finish it at a later time. To re-enter the assessment, you will just click on the original link you were sent via email.

Please complete the assessment by **[SPECIFIC DATE TO BE PROVIDED - 2 WEEKS AFTER THE SURVEY IS SENT OUT]**.

Participation is required for satisfactory performance under the current Notice of Award. No individually identifiable information will be requested. If you have programmatic questions, you can contact CDC via your Project Officer.

1. Program Information

The first section of the survey is program information and contains four questions. All fields in this section are required.









Section 1: Program Information	
1. What is your Program Title (ex. State Childhood Lead Poisoning Prevention Program, NYC Health Dept) <small>* must provide value</small>	<input type="text"/>
2. What city is your program headquarters <small>* must provide value</small>	<input type="text"/>
3. Select the State/Territory Program Headquarters <small>* must provide value</small>	<input type="text" value=""/>
4. Which best describes your program? <small>* must provide value</small>	<input type="text" value=""/>

Question 1 and 2 are free text fields.

Question 3 and 4 are drop-down fields. If you do not see your applicable response from the list, please select "other" and type in your response in the text box.

2. Governance


The second section asks about governance and contains questions 5-20.

Section 2: Governance	
This section only collects information about current state, tribal, local, and territorial mandates, regulations, and policies. Do not include federal regulations and policies.	
5. What is your program strategy for blood lead testing for children enrolled in Medicaid?	
<input type="radio"/> Universal testing mandated	
<input checked="" type="radio"/> Universal testing recommended	
<input type="radio"/> Targeted testing mandated	
<input type="radio"/> Targeted testing recommended	
<input type="radio"/> Both universal and targeted testing mandated	
<input type="radio"/> Both universal and targeted testing recommended	
<input type="radio"/> No strategy	
<input type="radio"/> Unknown	
	reset
6. Why doesn't your program mandate universal testing for all children enrolled in Medicaid?	<input type="text"/> <small>250 characters remaining</small>
7. What ages are covered by your program's strategy for children enrolled in Medicaid?	<input type="text"/> 
8. What is your program's strategy for blood lead testing for children not enrolled in Medicaid?	
<input type="radio"/> Universal testing mandated	
<input type="radio"/> Universal testing recommended	
<input type="radio"/> Targeted testing mandated	
<input type="radio"/> Targeted testing recommended	
<input type="radio"/> Both universal and targeted testing mandated	
<input type="radio"/> Both universal and targeted testing recommended	
<input type="radio"/> No strategy	
<input type="radio"/> Unknown	
	reset
9. What ages are covered by your program's strategy for children not enrolled in Medicaid?	<input type="text"/> 
10. Does your program have a strategy for blood lead testing for pregnant women?	<input type="text"/> 
11. What is the strategy based on?	<input type="text"/> 
12. Does your program have legislation mandating the existence or operation of a program?	<input type="text"/> 
13. Does your program have a reporting law for blood lead levels in children ?	<input type="text"/> 

14. What ages are covered by your program's blood lead level reporting law?


 

15. Which blood lead levels are required to be reported? (Select one)



- 
- All blood lead levels
 - Blood lead levels ≥ 3.5 $\mu\text{g/dL}$
 - Blood lead levels ≥ 5 $\mu\text{g/dL}$
 - Blood lead levels ≥ 10 $\mu\text{g/dL}$
 - Blood lead levels ≥ 15 $\mu\text{g/dL}$
 - Blood lead levels ≥ 20 $\mu\text{g/dL}$
 - Blood lead levels ≥ 45 $\mu\text{g/dL}$
 - Blood lead levels ≥ 70 $\mu\text{g/dL}$
 - Other
 - Unknown

[reset](#)



16. Who is mandated to report the blood lead levels to your program? (Select all that apply)

- 
- Private laboratories
 - State public health laboratories
 - Health care providers
 - Local health departments
 - All point of care devices
 - Other
 - Unknown

17. Does your program require electronic reporting for blood lead levels?

18. Does your program have a lead paint abatement and/or remediation law(s)?

19. Which of the following does the law apply to? (Select all that apply)

- The type of building/facility (e.g. childcare centers, Section 8 housing, rental properties, etc.)
- The condition of the building/facility (e.g. pre-1978, 2 square feet of deteriorating paint, etc.)
- Contractors and/or workers that perform abatement
- Other
- Unknown

20. What triggers the law(s)? (Select all that apply)

- Presence of children
- ≤1 years of age
- ≤2 years of age
- ≤3 years of age
- ≤6 years of age
- ≤16 years of age
- Other age
- All blood lead levels
- Blood lead levels ≥ 3.5 $\mu\text{g}/\text{dL}$
- Blood lead levels ≥ 5 $\mu\text{g}/\text{dL}$
- Blood lead levels ≥ 10 $\mu\text{g}/\text{dL}$
- Blood lead levels ≥ 15 $\mu\text{g}/\text{dL}$
- Blood lead levels ≥ 20 $\mu\text{g}/\text{dL}$
- Blood lead levels ≥ 45 $\mu\text{g}/\text{dL}$
- Other blood lead level
- Unknown

For local programs funded to conduct surveillance (New York City or Los Angeles County), fill out this section according to your local mandates, regulations, and policies.

Question 5 has skip logic. If you select “universal testing mandated” or “both universal and targeted testing mandated,” the survey will skip to question 7. If you select “unknown,” the survey will skip to question 8.

Question 10 has skip logic. If you select “no” or “unknown,” the survey will skip to question 12.

Question 13 has skip logic. If you select “no” the survey will skip to question 18.

Question 18 has skip logic. If you select “no” the survey will skip to question 21.

3. Surveillance, Testing and Prevention

The third section asks about surveillance, testing, and prevention and contains questions 21-32.

Section 3: Surveillance, Testing and Prevention	
21. Does your program use CDC's blood lead reference value (BLRV) of 3.5 ug/dL for at least one public health action?	<input type="text"/>
22. When did this change become effective? (MM/YYYY)	<input type="text"/>
23. What barriers hinder your program's ability to use CDC's current BLRV to initiate various public health actions? (Select all that apply)	<input type="checkbox"/> Lack of support from providers <input type="checkbox"/> Lack of organizational support <input type="checkbox"/> Lack of support from decision makers <input type="checkbox"/> Lack of resources for the program <input type="checkbox"/> Lack of resources for testing <input type="checkbox"/> Lack of resources for follow-up activities <input type="checkbox"/> Lack of resources for laboratories <input type="checkbox"/> Laboratory testing capacity <input type="checkbox"/> Other <input type="checkbox"/> Unknown
24. Over the past 12 months, what has been the general trend for blood lead testing rates in the area covered by your program?	<input type="text"/>
25. If testing rates have increased, what do you attribute that change to?	<input type="text"/>
26. If testing rates have decreased, what do you attribute that change to?	<input type="text"/>


- New policies/regulations
- Decreased availability of staff
- Decreased funding
- Recalls of point-of-care testing kits
- Decreased resources for the program
- Decreased resources for testing
- Decreased resources for laboratories
- Laboratory-related issues
- Other
- Unknown

[reset](#)

27. Does your 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
- Conduct systematic environmental investigation activities
- Have codified specifications for lead-safe housing treatments
- Partner with housing agencies to incorporate lead hazard identification into housing code or other inspections
- Use data to recommend policy changes that promote childhood lead poisoning prevention
- Collaborate with partners to incorporate lead poisoning educational information into their materials for high-risk families
- Conduct family and community education that supports primary prevention activities
- Conduct professional health education, risk communication, and/or training activities to increase lead poisoning prevention awareness
- Require environmental testing of adjacent units when a child with lead poisoning is identified
- Prioritize remediation of housing units previously identified as sources of a child's lead exposure
- Require certification for lead abatement contractors and training in lead-safe work practices for contractors who work in pre-1978 housing
- Replace lead service lines
- Replace drinking fountains in schools and childcare centers
- Other
- None of the above
- Unknown

28. Does your program have an active lead elimination plan?



29. Does your program's lead elimination plan have any of the following measures? (Select all that apply)

- Quantifiable standard
- Timeline for goals
- Other
- None of the above
- Unknown

30. Does your program's lead elimination plan include any of the following components? (Select all that apply)


- Needs assessment
- Primary prevention plan
- Blood lead surveillance/testing plan
- CLPPP workplan
- Establishing a workgroup/taskforce/advisory committee
- Laws/regulations/policies plan
- Evaluation plan
- Other
- None of the above
- Unknown

31. Does your program publish maps of high-risk areas and/or populations for public use?

- Yes, maps of both high-risk areas and populations are published
- Yes, maps of only high-risk areas are published
- Yes, maps of only high-risk populations are published
- No
- Unknown

reset

32. Does your program have a public-facing interactive mapping tool?



Question 21 has skip logic. If you select "no," question 23 will show. If you select "unknown," question 24 will show.

Question 22 is a free text field for (MM/YYYY). If you don't know all or part of the date, use 9s for unknown.

Question 24 has skip logic. If "testing rates have decreased" is selected, question 26 will show. If "testing rates have remained relatively consistent" or "unknown" are selected, question 27 will show.

For question 27, the option "Conduct systematic environmental investigation activities" includes things such as lead dust wipes, visual inspections, and paint chip and soil analysis based on housing characteristics (i.e. pre-1978 housing in poor condition) and making data available electronically.

Question 28 has skip logic. If you select "no" or "unknown," the survey will skip to question 31.

4. Case Management

The fourth section asks about case management and contains questions 33-38.

Section 4: Case management

33-35. At what confirmed blood lead level does your program initiate the following actions for children less than 6 years (72 months) of age by mandate and by practice?

Administrative Actions	Mandated Blood Lead Level	Practiced Blood Lead Level
Notification (Phone call, mail letter, provide educational materials)	<input type="text"/>	<input type="text"/>
Begin case management or follow up	<input type="text"/>	<input type="text"/>
Assessment and Remediation Actions	Mandated Blood Lead Level	Practiced Blood Lead Level
Obtain child's exposure history/inspect child's home/measure environmental lead levels	<input type="text"/>	<input type="text"/>
Lead hazard reduction or abatement interventions to reduce exposure	<input type="text"/>	<input type="text"/>
Medical/Clinical Actions	Mandated Blood Lead Level	Practiced Blood Lead Level
Follow-up blood lead testing	<input type="text"/>	<input type="text"/>
Conduct history and physical exam/neurological exam/developmental assessment	<input type="text"/>	<input type="text"/>
Additional lab work or diagnostic studies (e.g. hemoglobin or hematocrit, iron status, abdominal x-ray)	<input type="text"/>	<input type="text"/>
Chelation therapy/bowel decontamination	<input type="text"/>	<input type="text"/>
Diet or nutritional evaluation	<input type="text"/>	<input type="text"/>
Refer for diagnostic evaluation for neurodevelopmental issues or early intervention programs	<input type="text"/>	<input type="text"/>
Refer to Woman, Infants, and Children (WIC) program	<input type="text"/>	<input type="text"/>
Refer to hospital for urgent lead poisoning evaluation and treatment	<input type="text"/>	<input type="text"/>

36. Are any of these actions implemented by all or some local health departments rather than at the state/territorial/tribal health department level? Select all that apply

- Notification (Phone call, mail letter, provide educational materials)
- Begin case management or follow up
- Obtain child's exposure history/inspect child's home/measure environmental lead levels
- Lead hazard reduction or abatement interventions to reduce exposure
- Follow-up blood lead testing
- Conduct history and physical exam/neurological exam/developmental assessment
- Additional lab work or diagnostic studies (e.g. hemoglobin or hematocrit, iron status, abdominal x-ray)
- Chelation therapy/bowel decontamination
- Diet or nutritional evaluation
- Refer for diagnostic evaluation for neurodevelopmental issues or early intervention/stimulation programs
- Refer to Woman, Infants, and Children (WIC) program
- Refer to hospital for urgent lead poisoning evaluation and treatment
- None of the above
- Unknown
- Not Applicable

37. What barriers does your program face when practicing blood lead case management? (Select all that apply)

- Resources for the program
- Resources for testing
- Working with providers
- Education and/or outreach to providers
- Education and/or outreach to public
- Education and/or outreach to targeted populations
- Accessing Medicaid program data
- Other
- Unknown

38. Does your program receive Medicaid reimbursement for any of the following lead poisoning prevention related services? (Select all that apply)

- Notification (Phone call, mail letter, provide educational materials)
- Begin case management or follow up
- Obtain child's exposure history/inspect child's home/measure environmental lead levels
- Lead hazard reduction or abatement interventions to reduce exposure
- Follow-up blood lead testing
- Conduct history and physical exam/neurological exam/developmental assessment
- Additional lab work or diagnostic studies (e.g. hemoglobin or hematocrit, iron status, abdominal x-ray)
- Chelation therapy/bowel decontamination
- Diet or nutritional evaluation
- Refer for diagnostic evaluation for neurodevelopmental issues or early intervention/stimulation programs
- Refer to Woman, Infants, and Children (WIC) program
- Refer to hospital for urgent lead poisoning evaluation and treatment
- None of the above
- Unknown

Note that on the table under the Assessment and Remediation Actions section, "Obtaining child's exposure history/ inspect child's home/ measure environmental lead levels" includes inspection and

measurement in other frequently visited sites in addition to the home, such as a grandparent's home.

Note that on the table under the Medical/Clinical Actions section and in questions 36 and 38, "Diet or nutritional evaluation" also includes referrals.

Submitting the survey

Once the data have been entered and completed, you can save a copy of your responses by right clicking anywhere on the survey page, clicking print, and then saving as a PDF. Please do this step before submitting if you want to have a copy of your responses. After saving, please click on submit.