

Lead Poisoning Prevention in Minneapolis and Hennepin County

A Report of the
 Minneapolis/Hennepin County Childhood Lead Poisoning Prevention Work Group
 November, 2007

Work Group Purpose

The purpose of Work Group is to establish and monitor plans, align efforts and build capacity for creating lead safe housing. Established by joint resolution of the City Council and Board of Commissioners, the Work Group includes elected officials and staff from city, county, state and non-profit agencies involved in prevention and intervention activity.

Childhood Lead Poisoning in Hennepin County

In the last ten years there has been an ongoing, significant reduction in the number of children under six tested for lead whose blood lead level (BLL) is greater than 10 micrograms per deciliter (ug/dL). This is the threshold for intervention set by the Centers for Disease Control and Prevention (CDC). The overall trend is reflected in the BLL statistics for children in the crucial developmental ages of 9 – 36 months. In 1996, 14.9% of the Minneapolis children and 2.0% of the suburban Hennepin County children who were tested had BLLs of 10+. By 2006 this had dropped to 2.6% in Minneapolis and .85% in Hennepin County. In that same time period the number of 9 – 36 month olds receiving a test per year rose by 83%, to 15,084. Similar decreases in elevated blood lead levels are seen for all tested children under 6, as detailed in the table below

Suburban Hennepin: Children Tested Under Age 6

<u>Year</u>	<u>Total Tested</u>	<u>Total Elevated Lead Levels (10+ ug/dl)</u>	<u>Percentage Elevated</u>	<u>Population (2000 Census)</u>	<u>% Tested</u>
1996	4455	89	2.0%	58734	7.6%
2001	4770	46	.96%	58734	8.1%
2006	10086	86	.85%	58734	17.2%

Minneapolis: Children Tested Under Age 6

<u>Year</u>	<u>Total Tested</u>	<u>Total Elevated Lead Levels (10+ ug/dl)</u>	<u>Percentage Elevated</u>	<u>Population (2000 Census)</u>	<u>% Tested</u>
1996	11171	1792	16.0%	29271	38.2%
2001	10912	846	7.8%	29271	37.3%
2006	11083	335	3.0%	29272	37.9%

This success is wonderful, but serious consequences of lead exposure continue. The CDC has determined that there is no evidence of a blood lead threshold below which adverse effects are not experienced. Exposure to lead by children under 6 years of age has neurodevelopmental effects that include lowered intelligence, shortened attention span, decreased coordination, aggressive behavior and learning disorders. The cost of childhood lead exposure includes loss of lifetime productivity, health care costs and special education costs that have been estimated at \$1.223 billion per year in Minnesota.

The primary source of elevated blood lead levels in children is lead paint on windows in homes built before 1960. Additional common sources include other exterior and interior paint and contaminated soil.

It is the goal of the State of Minnesota and the Centers for Disease Control to eliminate childhood blood lead levels of 10 ug/dL or greater by 2010. In order to accomplish this goal both the State and national strategy for eliminating lead poisoning has been shifting toward a primary prevention focus on eliminating sources of lead poisoning, in particular lead paint in housing. Outreach, testing and education for people living in high risk housing continue to be priorities for the City and County.

Prevention and Intervention Programs

The County, City and contracting community organizations conduct a variety of programs to reduce lead poisoning in our community. Activities include:

- Outreach, education and public information
- Blood lead testing
- Lead hazard evaluations and risk assessments
- Control of lead hazards in housing.

Work Group Activities and Accomplishments

Planning

The member agencies work closely together to provide program services effectively and to make the best use of federal funds as they become available. In mid 2005 the Work Group developed operating policies and member expectations, and began long term planning by assessing current programs and identifying possible strategies for future action. The members decided to support efforts to replace lead painted windows because they are the primary source of lead in children with elevated blood lead levels in our community. This led to a legislative proposal in 2007. As part of its planning activities the Work Group also collaborates on seeking funding and supporting best practices.

Local Government Actions

The County and City are the recipients of and program managers for HUD funding for lead hazard controls. This is the primary source of funding for lead hazard reduction in housing. Hennepin County and Minneapolis have committed tax revenues and discretionary grant funding to provide the local matching funds needed in competitive applications for HUD lead-based paint grants.

The City of Minneapolis adopted a property tax exception for improvements due to lead hazard control work, as authorized by the Legislature in 2005. This summer the City of Minneapolis approved an ordinance that requires rental property owners to provide documentation that the person who completes or supervises work to repair chipping and peeling paint in all pre-1978 rental property is certified in lead safe work practices.

Legislative Efforts

The City and County coordinate legislative activities in this area and have included Work Group recommendations in their respective legislative agendas. The Work Group has initiated City and County support for several successful legislative actions, including:

- Reimbursement to local governments for half the cost of conducting risk assessments for lead poisoned children on Medicaid
- Standards for lead content in jewelry, glass, ink and glaze
- The property tax exception for lead hazard control work, mentioned above

In 2007 the Work Group developed a proposal to establish a loan fund for window replacement in qualifying properties. This legislative proposal was supported by Hennepin County and the City of Minneapolis, and several other cities, counties and associations. The window replacement program received support in the Senate but was not approved by the full Legislature.

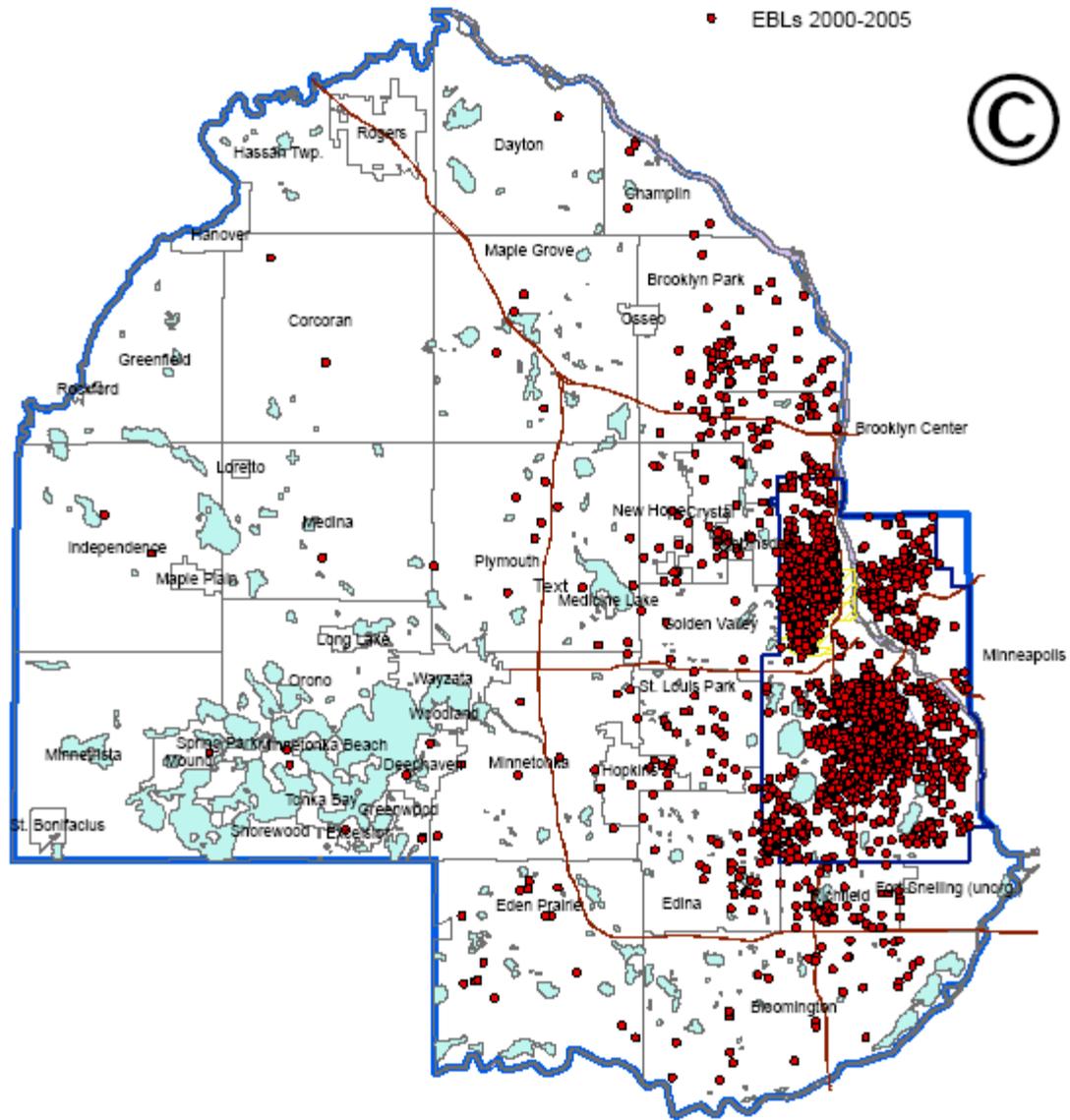
City/County Work Group members worked with legislators and the MN Department of Human Services (DHS) to link lead testing rates in children enrolled in public health care programs to health plan incentive payments. In 2003 DHS began withholding 1% of total annual payments to health plans, to be disbursed only if the plans meet their annual lead testing goals. These withholds increase health plan activities to insure lead testing is done, including providing patient incentives and partnering with various community and public health agencies on targeted outreach activities.

Hennepin County/Minneapolis - Lead-based Paint Grant Programs Report

	<u>2004</u>	<u>2005</u>	<u>2006</u>	<u>Total</u>
Skills Training - Number of persons	162	130	206	498
Community Education & Outreach				
Number of Events	201	281	243	725
Number of Individuals	7615	8008	13230	28853
Referrals for remediation	186	397	509	1092
Lead Hazard Evaluations				
Number of Units	289	577	1049	1915
Number with Lead	281	556	991	1828
Units Completed and Cleared				
Rental	22	238	700	960
Owner Occupied	<u>29</u>	<u>176</u>	<u>268</u>	<u>473</u>
Total Units:	51	414	968	1433
Age of Units				
Pre-1940	39	297	822	1158
1940-1959	11	58	45	114
1960-1977	1	59	101	161
Unknown	0	0	0	0
Total	51	414	968	1433
Number of Occupants				
Children <6	40	266	602	908
Occupants >6	65	671	2135	2871
Blood lead levels				
Under 10	19	142	316	477
10-19	4	16	30	50
Over 20	6	15	26	47
Unknown	11	90	192	293
Expenditures				
Federal Government	\$930,459	\$1,906,136	\$3,728,564	\$6,565,159
State Government		\$133,378	\$128,180	\$261,558
Local Government	\$446,547	\$1,341,640	\$1,858,845	\$3,647,032
Private Funds	\$89,219	\$174,126	\$132,643	\$395,988
Total:	\$1,377,006	\$3,381,154	\$5,715,588	\$10,473,749

Hennepin County EBLs 2000-2005

-  NorthSide Target Area
-  SouthSide Target Area
-  EBLs 2000-2005



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Source Data: Minnesota Department of Health