DEPARTMENT OF HEALTH & HUMAN SERVICES

JUL 3 1 2003

ADMINISTRATION FOR CHILDREN AND FAMILIES 370 L'Enfant Promenade, S.W. Washington, D.C. 20447

TO LIHEAP Grantees:

The Office of Community Services (OCS) and the Centers for Disease Control and Prevention (CDC) are pleased to announce a partnership to assist CDC with the prevention of childhood lead poisoning. Lead Poisoning is one of the most prevalent, yet preventable environmental childhood diseases in America today. According to the National Report on Human Exposure to Environmental Chemicals, published in January 2003, the CDC estimates that the percent of U. S. children 1-5 years old with elevated blood lead levels (levels $\geq 10~\mu g/dL$) was 2.2%. Lead poisoning can result in a variety of health problems such as decreased intelligence, impaired neurobehavioral development, and impaired hearing acuity. One of the 2010 Healthy People goals of the Department of Health and Human Services (HHS) is to eliminate childhood lead poisoning as a major public health problem, and we believe that OCS/LIHEAP grantees may be in a unique position to assist in this effort.

CDC oversees the National Childhood Lead Poisoning Prevention Program (CLPPP) that provides national leadership, technical assistance and surveillance to prevent and reduce childhood lead poisoning. CLPPP grantees will be working in 37 states and 5 large cities to identify and intervene when lead poisoning is detected. LIHEAP's main focus is to assist households with their heating and cooling needs; however, LIHEAP programs are also focused on health and safety needs by targeting LIHEAP benefits, providing weatherization, conservation education, coordination, and outreach to vulnerable households, many of which contain young children.

LIHEAP grantees have an opportunity during the LIHEAP application intake process to provide to low-income households with children information identifying lead poisoning hazards and referrals for blood lead testing and follow-up. Additionally, as LIHEAP weatherization contractors are working in homes, they may detect potential lead paint hazards and have the opportunity to provide households with information and referrals to CLPPP grantees.

Through this partnership, we are encouraging LIHEAP grantees to coordinate with CDC's CLPPP programs in establishing ways to identify and refer potential households with children at risk for lead poisoning to CLPPP grantees. At the Federal level, we will exchange grantee listings and provide CLPPP information to LIHEAP grantees including LIHEAP weatherization offices. CLPPP information will also be posted on the LIHEAP Websites and will be available at conferences and workshops. We also anticipate updating the Information Memorandum on the Department of Energy's protocols for dealing with lead paint hazards. Conversely, LIHEAP presentations will be made at

CLPPP conferences, and CLPPP grantees will provide referrals for energy assistance to LIHEAP.

We look forward to this partnership and believe this effort will not only provide outreach for both programs, but will increase the health and safety of our low-income households giving them more tools in their struggle to rise above poverty.

Sincerely,

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Patrick J. Meehan, MD Director, Division of Emergency and Environmental Health Services National Centers for Environmental Health, Centers fro Disease Control Sincerely,

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