

Wisconsin Childhood Lead Poisoning Prevention Program (WCLPPP) Program Quality Criteria

Generally high program quality criteria for the delivery of quality and cost-effective administration of health care programs have been, and will continue to be, required in each public health program to be operated under the terms of this contract. Contractees should indicate the manner in which they will assure each criterion is met for this program. Those criteria include:

1. **Assessment and surveillance** of public health to identify community needs and to support systematic, competent program planning and sound policy development with activities focused at both the individual and community levels.
Contractee must assess local blood lead surveillance data for lead poisoning prevalence and risk factors.
2. **Delivery of public health services** to citizens by qualified health professionals in a manner that is family centered, culturally competent, and consistent with the best practices; and delivery of public health programs for communities for the improvement of health status.
 - a. Contractees must provide services that support the elimination of childhood lead poisoning, and the early detection and treatment of children with lead poisoning including compliance with:
 - (1) WI Statute and Administrative Rules:
 - WI Stat 254 (Environmental Health, <http://docs.legis.wi.gov/statutes/statutes/254.pdf>),
 - WI Admin Rule 181 (Reporting of Blood Lead Test Results, http://docs.legis.wisconsin.gov/code/admin_code/dhs/110/181.pdf), and
 - WI Admin Rule 163 (Certification for the Identification, Removal and Reduction of Lead-Based Paint Hazards, http://docs.legis.wisconsin.gov/code/admin_code/dhs/110/163.pdf) and
 - (2) Practice standards presented in:
 - *Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention** (http://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf, CDC, January 4, 2012),
 - Wisconsin Childhood Lead Poisoning Prevention & Control Handbook (<https://www.dhs.wisconsin.gov/publications/p00660.pdf>, rev. 2014), and
 - *Managing Elevated Blood Lead Levels Among Young Children* (http://www.cdc.gov/nceh/lead/CaseManagement/caseManage_main.htm, CDC, 2002)*.
 - b. Contractees must assure the availability and accessibility of blood lead tests for children ages 0-5 years at high risk for lead poisoning.
3. **Record keeping** for individual focused services that assure documentation and tracking of client health care needs, response to known health care problems on a timely basis, and confidentiality of client information.
Contractee must maintain a central case registry to track follow-up of children with blood lead levels ≥ 5 mcg/dL and of properties where a lead hazard investigation was performed, including findings, interventions and outcomes.
4. **Information, education, and outreach** programs intended to address known health risks in the general and certain target populations to encourage appropriate decision making by those at risk and to affect policy and environmental changes at the community level.
Contractee must provide information to one or more target audiences within the community about lead hazards, lead hazard reduction methods, primary prevention of lead poisoning, and blood lead testing, as referenced in the boundary statement.

5. **Coordination** with related programs to assure that identified public health needs is addressed in a comprehensive, cost-effective manner across programs and throughout the community.
- Contractee must build partnerships with local health care providers and agencies involved in health, social services, housing, and child care to incorporate lead hazard awareness into their activities with, or services to, families living in pre-1978 housing.
 - Contractee must provide information, consultation and technical assistance to health care providers or other programs to assure that treatment of children with lead poisoning is efficient and effective, and to assure that lead-safe environments are available to children with lead poisoning.
6. **A referral network** sufficient to assure the timely provision of services to address identified client health care needs.
- Contractee must assess the need for, and provide referrals for, supportive services to families of lead poisoned children.
7. **Provision of guidance to staff** through program and policy manuals and other means sufficient to assure quality client care and cost-effective program administration.
- Contractee must assure that local childhood lead poisoning prevention program staff has access to, are knowledgeable of and in compliance with the state statutes and administrative rules and practice standards listed in No. 2. Delivery of Public Health Services.
8. **Financial management practices** sufficient to assure accurate eligibility determination, pursuit of third-party insurance and Medicaid coverage of services provided, prompt and accurate billing and payment for services provided and purchased, accurate expenditure reporting, and appropriate use of state and federal funds.
- Contractee must pursue third party payment and/or other funding sources for service provision to children who are eligible for third party payment, except when doing so is demonstrated to be not cost effective.
9. **Data collection, analysis, and reporting** to assure program outcome goals are met or to identify program management problems that need to be addressed.
- Contractee must regularly collect and analyze local data to determine the adequacy of blood lead testing for children enrolled in WIC, timely follow-up of lead poisoned children, timely completion of lead hazard reduction work, and community lead poisoning prevention education.
 - Contractee must submit the following forms and documents to WCLPPP by electronic means such as email or attached in HHLPSS when operational and as directed in the WCLPPP Handbook. The forms and templates are available on the Lead-Safe Wisconsin website (<https://www.dhs.wisconsin.gov/lead/prevention.htm>); click on the tab titled "Public Health Interventions."
- [Nursing Case Management Report](#) (F-44771A)
 - [Nursing Closure Report](#) (F-44771B)
 - [Property Investigation Report](#) (F-44771C)
 - [Property Investigation Closure Report](#) (F-44771D)
 - [Risk Assessment Report](#) (sample template)
 - [Work Specification Language for Lead Hazard Reduction](#) (list of work spec options)
 - [Work Orders Letter](#) (sample template)
 - [Scope of Work](#) (sample template)
 - [Clearance Report](#) (sample template)

If using HHLPSS, the risk assessment report, work orders letter and scope of work must be attached with the Property Investigation Report to the address record in HHLPSS. The clearance report must be attached with the Property Investigation Closure Report to the address record in HHLPSS.