

Lead Safe Housing Rule Amendment (LSHR) for Children with an Elevated Blood Level, 9/25/19

Phil Jones: Are we recording?

Kris Richmond: Yes. The recording is starting now, so we can get started.

Phil Jones: Hello everyone. You have joined the web training for Lead Safe Housing Rule. A special focus on the 2017 amendment to that rule with a special focus on children with an identified elevated blood lead level. Welcome. We have a lot of material to cover, so pay attention to your slides. Please ask all your questions. Kris Richmond will be on the line watching for your questions and will stop us if we need to answer some. My name is Phil Jones and here we go.

You can enter your questions in the question and answer textbox anytime. If you are having technical difficulties send your questions to the chat textbook and Nicole Hassman in our office will help you get connected. As I said we have 90 minutes, we have 66 slides to review plus some questions for you. The session is recorded. If you have any issues with being recorded or having this recorded, or your questions recorded please contact Nicole through the chat box. But your voice will not come through and will not be recorded.

A few things we'll do today first, we will review the Lead Safe Housing Rule as it was originally written and is still in place and covering all of the HUD-assisted activities that we might carry out. And then we will focus in on -- well, we will have a special focus today on public housing and project-based assistance projects. So that's the purpose of the training today. There is another training that will be recorded and online for folks carrying out TBRA programs. So we'll learn some definitions, we'll learn some new requirements for the Lead Safe Housing Rule amendment and we will talk about how to meet them.

In other words, what works best for you. And I think one of the purposes of the training is for you to think about what the impact of this rule might be on you and your office, or on your owners that you deal with. What you do about recordkeeping, what you do about talking to tenants, owners and so on with your own staff. And we will also share some of the resources that we want to point you to. You all in your invitation got a link to a Dropbox that has the slides for this session. A set of definitions, a handout on the disclosure rule which is important for every rental unit.

You've got a comparison of the Lead Safe Housing Rule and Renovate Right Rule from EPA and a chart of responsibilities and a summary chart of all of the steps for your particular program. So I suggest that you keep those linked up somewhere on your computer, you may want to refer to them during the training. I won't be showing them all, but I do want you to realize that they are there and when I refer to them you can go there or look at them later. Okay. So what's the deal with all this lead? We use lead in gasoline and basically spread it all over our nation in the dirt, on the roads, on the walls of our houses that way.

And then we also used lead in paint in a lot of housing built before 1978. So since then that's been prohibited, but a lot of lead was used and is still in place. We also have lead pipes and lead solder on our pipes that bring water into our houses. As you know from the big Flint problem that that lead can still get into water. And then there is also lead baked on to ceramics, baked on to bath tubs, toys, jewelry and other things. So lots of ways to get lead. We are going to deal -- find lead in our environment. We are going to deal mostly with lead-based paint.

So the problem with all this lead is it's in dust, it's sticky and it's in dust and it's in paint that gets scraped, or chipped, or however it falls on the ground, rubbed. And that dust is durable; takes special cleaning, rigorous cleaning to get rid of it. So there's a lot of dust around that children can get on their hands, breathe in, put in their mouths and so on. And it causes a lot of damage; learning disabilities, behavior problems. It causes problems in adults as well. So workers with high exposures to lead may experience; sterility, impotence.

Women can store lead in their bones and pass them on to their unborn children later. So lots of ways that lead is durable and sticks around. And the body is confused when it confronts leads, it uses lead instead of using valuable things like calcium and potassium. And wherever it uses lead that pathway, that storage place, that structure is then affected. So on to the rules, what are we going to do about this? What have we been doing? Two sets of rules, HUD Rules 24 CFR part 35 of the federal regulations and EPA rules; Notice, HUD, Lead Disclosure Rule, EPA subpart F, Lead Disclosure Rule these are the same.

And these govern every residential property in the United States built before 1978. Every unit. Subpart B in the HUD rules; general requirements for how we use a lot of definitions, how we deal with lead, what -- the general rules that apply to all programs. Subpart HL and M deal with specific program requirements, so those requirements for public housing and project-based assistance for example. Specific rules that deal with those. And that's the focus of the amendment is in that part, but we'll get to that later. And then subpart are the Lead Safe Message and Standards drive the protocols and the methods that we use when we're dealing with lead, or lead-based paint, or the possibility of lead.

When we're looking for it, what tests do we use, how must those test be performed and so on? That part of the HUD rules is mirrored in the EPA rules, subpart E and Q. I'm sorry subparts DL and Q the Lead-Based Paint Activities Rule. So if you have this printed out you might draw a line from the subpart R methods and the standards to the Lead-Based Paint Activities Rule on EPA. Those two are following each other. Recent changes in the EPA rule are coming and those will also be reflected in the HUD Rule subpart R.

Now subpart R and the Lead-Based Paint Activities Rule are reflected in what we'll call the HUD guidelines and those guide -- I'll show you a link to those later. But those are a detailed manual for everybody that's certified and doing work with lead-based paint abatement contractors and so on. They need to know those guidelines and those guidelines need to be part of your contracts. Now last but not least subpart C and Q, the renovation repair and painting rule under EPA.

This is not something that is reflected in the HUD rule, this is an EPA rule that affects all contractors working on disturbing paint on housing built before 1978 as well as childcare facilities. Any place that children under six might be found. So we will come back to all of that. So today we are talking about project-based assistance and here are all the programs listed that might fall under that. Subpart which is subpart eight in the rule and public housing subpart L. Find your program there. Our handouts include a set of definitions we are doing 1,000 built before 1978, a few exceptions.

We have defined lead-based hazards and this is important understand this. Deteriorated paint with lead in it is officially a hazard, so that means; chipping, peeling, dusting whatever. Dust with lead in it above whatever the standard is that EPA and HUD agree on. Lead in soil at or above the hazard standard. Again these standards are set. And then fiction and impact surfaces in other words where a door rubs, a window rubs, where the door slams, where you stomp on the floor.

Any place that also is creating lead dust, that surface itself is a hazard. And pretty much anything that had lead deliberately added is going to qualify as lead-based paint, so there are some exceptions. If a property was built, in other words you have a certificate of occupancy dated after 1/1/1978. And here are two important ones, zero bedroom and single-room occupancy units. Also housing for the elderly or property designated specifically for people with disabilities. But neither of those exceptions apply if there's a child under six residing in or expected to reside in those units. And this is only housing that is specifically designated this way.

Now if you have a property where a qualified inspector or a risk assessor has found that there is no lead-based paint and you have documentation of that, then that property then is exempt from further requirements from that point on. And we have some others they are not really relevant for properties where we are actively serving tenants so I will go on.

Now some important things to keep in mind. One of the ways that we inspect properties is to use a visual assessment. Now this is not determined whether there's lead-based paint or not, this only is looking for deteriorated paint, dust, debris that indicates that there is dust from paint that might not be lead, but that -- that's hanging around for somebody to get in their mouths or to breathe.

Also the visual assessment looks to see if previous work that was done to reduce hazards are still intact. In other words, if a lead surface was covered up and closed with a new sheet of drywall is that drywall still intact. That means the visual assessor has lacked a report on the work that was done in their hand when they do the visual assessment. A risk assessment is more detailed, this is by a trained and certified inspector using chemical testing and x-ray fluorescent technology to identify actual lead-based paint, and to then specify if the hazards exist that we just discussed and where they are.

Clearance is also important. Now this will be -- this will tie in in a couple of different ways as we go forward. This is an inspection using a specific protocol found in the guidelines visually looking for dust, but also taking dust samples or soil samples and sending them to the lab and having them analyzed to make sure that a site that might have had dust on it before is now clean.

And the surfaces that were supposed to get worked on did get worked on. So all three of those are vital.

Now here's the general set of steps that you must go through in order to comply with the rule one, every tenant gets information about the possibility -- every tenant in a -- in a unit built before 1978 gets detailed information about the fact that there might be lead paint there. What tests or analysis have been done in the past and what work might have been done to reduce the dangers. We also carry out evaluations of properties to determine is the paint intact and does it need work to reduce hazards? We carry out hazard reduction. We clear the properties in other words at the end we do a clearance examination and make sure it's clean. We notify residents of all our results. Every time one of this -- something happens here we notify them.

And in these tenant programs we maintain the properties going forward. We also keep records of all this. And that might mean that we keep records not just for three years, but we keep records for the life of the property. Because all of these records are tied to the property itself. So first disclosure its -- this is important and I want to pause here, see the first bullet applies to all 378 for sale and rental residential units, unless it has a specific exemption.

So that means everybody gets a pamphlet, or all tenants get this pamphlet protect your family from lead in your home. This pamphlet, not just a pamphlet, but this particular pamphlet.

They get a disclosure form with all of the attached information that the owner or the real estate agent has and the form is specific not just any form. But make sure that you have these in your files because there is a serious penalty enforced by the justice department, not just by HUD, that has expensive fines associated with it for failure to make sure this happens. So every rental unit, a tenant signs a disclosure form saying yes. I got this information. And the disclosure form is filled out. It does not look like this and there are many forms that it does not look like. People used all kinds of things to call them disclosure forms.

The form looks like this, this is the right one. So if your form does not look like this or have these exact words on it your form needs to be revised. So there's the website easy to look it up, easy to print it out. Now you can put some -- your organization's name at the top of this, but essentially the wording of the form needs to be what is here on the HUD website. If we were all in a room together I'd make everybody nod their heads and agree that yes, they understand this. Because this is important and I suggested if you were new in your program, go make sure that these exist in your files because you do not want the Justice Department inspector coming in and going through your files and writing this up as a finding.

Or a HUD person, either one. So what's our goal here? The goal of the rule first is to protect children or to protect all residents, but specifically protect children, because children under six are particularly at risk as they build their brain and nervous system. That we prevent exposure by identifying hazards and controlling them or removing. How much effort we put into that depends on the program that we're in, the type of assistance we're providing and in some cases the amount of assistance.

But ideally, we are trying not to get to the point where we have a child with an elevated blood lead level, that's the first goal. And one of the ways that we do this is to make sure that the people that are looking at units, inspecting them and the people that are doing the work and the people that are coming along after and checking to make sure the work was done properly, that those folks have the proper training, certifications and they follow the protocols that are laid out in the guidelines. Kris, I just want to check with you are there questions about the disclosure rule or?

Kris Richmond: No. I think everybody has their attention on you and they're not typing any questions. But I just want to remind folks, if you do have questions at the top of the bar there's a blue box that says Q&A and it has the question icon. You can click on that and type any question and I'll answer it, or find out the answer to it. If not, I'll toss it up to Phil when he pauses. And we're going to collect all the questions and the answers, have HUD review them and then post them back up on Dropbox later on for [inaudible] answers.

Phil Jones: I will add a plug to that. It is really important that if you have questions that you ask them. And no question is too minor to not be asked. We really want to know -- HUD really wants to know what is -- what would be helpful to you out there in the field? Is the training clear? Are the rules clear? Do you have doubts about how to proceed going forward? So please let us have your questions if you have any.

Kris Richmond: Yeah. And just remember put your questions in the Q&A box and not the chat box, the chat box is what we're using for technical issues. But questions that you have please put in the Q&A box please.

Phil Jones: Okay. So I mentioned this before subpart R, lead-based paint methods and standards. So this is the -- this is the book. These are the guidelines for the evaluation and control of lead-based paint hazards. And it's -- they're very detailed. This one -- it's printed out. This is a -- I don't know a three, or four-inch-thick manual with -- printed on both sides and lots of charts and graphs and explanation. And we'll refer back to this later. Let me just see do I have a picture of the cover of this? Yes. So this is what the cover of that book looks like if you could print it out. It's also available on the web and on the HUD website and I will give you that link at the end. Actually I think the links might be probably in the Dropbox too.

Kris Richmond: Yeah. It's on there on the slides, but it's one of the very last slides at the links.

Phil Jones: Yeah. Okay. Good. There are two other handouts and I'm just going to put them on the screen here and I'm going to asking you to go there if you have this in your Dropbox. These forms and I'll show you the next one, it looks just the same we've talked about most of this material down through clearance and notice. We didn't talk much about ongoing maintenance yet, so we've talked about some of these.

Now one of the usefulness of this form and this has been really valuable to me in working with people and I hope it's not able to you, is that if I have a meeting where I have to explain what's going on about lead-based paint to a group of folks who don't spend any time on it and I can only get them to look at one sheet of paper, this is the one sheet of paper I get them to look at. So if

you go back and you have a meeting with staff, or with your boss, or somebody else to talk about what kind of changes you need to make.

Start off with the sheet so they can get a picture of the nature of the requirements and the nature of the recordkeeping that is required. So here we are, ongoing maintenance. Now we've talked about identifying and controlling hazards. On an ongoing basis all owners and managers of property, so the Public Housing Authority, your project-based assistance owners must have a plan in place to maintain their units and common areas lead-safe. So and that means they need to have a schedule for inspections, they need to have informed tenants, who to call if they see any deteriorating paint. And they have qualified inspectors going out and inspecting units. So we have a trained visual assessor during regular visual assessment and that means that unit turnover in every 12 months.

Now I know this is different for -- than some programs where we do housing quality inspections every two years. But the fact is that somebody trained and this is actually a web-based training -- so very easy to attain that training. Somebody is looking at these units every year. And of course that stock we document that; right? Who did it, when did they do it and what did they see. And remember that we're always there making sure the tenants inform us. I have to tell you I was in a unit just last week where there had been a small leak in the roof and the paint was coming off the ceiling and the wall next to it and the tenant had never informed anybody.

So we caught it before things collapsed, but it's -- that tenant did get another written notice saying you must inform us. This is a building built in the 20s so probably lead-based paint thinner. So who gets to do the visual assessment? This can be an owner, an owner staff, any staff member of the PHA for example. But this person has taken the online training and there's the website to take the training. Now again we're not doing chemical analysis we're just looking for deteriorated paint. I want to stress that deteriorated paint includes paint that is on a surface that is about -- that has suffered deterioration.

So if I have a weak failing surface from water damage or whatever it might have paint on that looks intact, but that's deteriorated paint just-based on the quality of the surface underneath it. Now I mentioned before the EPA renovation repair rule that governs all contractors doing work and in residential units, or childcare facilities, preschools where there might be children under six. So anything built before 1978 the firm needs certification. The renovators have followed the training, have done the EPA approved training.

And this is not an online easy thing. This is a day or a part of -- most of the day, a good part of the day in a room with a certified trainer. And while the work is going on the contractor carries out lead-safe work practices, in other words protecting the residents, protecting the site from the spread of dust. And gives the occupant a pamphlet. And at the end when this work is HUD assisted, a clearance is conducted according to the HUD protocols. Now right here I want to stop this and take this to this handout. And if you can't read it you can blow it up on your screen, but I strongly suggest you print this out.

If you're dealing with contractors one, you do need to make sure that they have the CPA certification and that their workers are trained. But in addition you need to understand that when

we're dealing with a HUD assisted unit, the rules are more strenuous than the EPA rules and there are a couple places where that happens. For example, in the RRP rule contractors are allowed to use a test swab from the hardware store to look for the presence of lead. You've seen these it's a swab, you crush it and it turns red if there's lead. Not sufficient for HUD. If the contractor wants to avoid using safe work practices and says, hey there's no lead that must be -- that test must be carried out by a certified lead paint inspector risk assessor.

Or under testing that material chemically to make sure it's not lead-based paint in the lab not just with a swab from the hardware store. The other big difference is that let's see if I can get [inaudible] If you look on this page, go down to the professional minimum amounts of interior paint the RRP rule says I don't have to worry about safe work practices or cleaning up afterwards if I disturb less than six square feet of paint in a room.

Well, the HUD rule is not six square feet, it's two square feet, so very different. And contractors need to be aware when they come in anything over two square feet in any room we're in the HUD rules and we need to use safe work practices and we need to have clearance at the end as I mentioned. So critical differences in those rules I guess.

Kris Richmond: Yeah. It might be helpful to use the pen to help show people where you are, make sure you're able to do that too, or the arrows.

Phil Jones: I will. Yeah. Well, I am here so this is where [inaudible].

Kris Richmond: There we go. Perfect. That's great. Thanks.

Phil Jones: Sorry.

Kris Richmond: No. Love it. That's great.

Phil Jones: I apologize to everyone, I'm a little new to the web-based training. If you -- any of you know me I traveled the country for years doing this in person, so it's a little weird for me but I hope it's okay.

Kris Richmond: I had a question that came in [inaudible] that I think would be helpful for [inaudible] to hear.

Phil Jones: I think this is a good time for it.

Kris Richmond: Okay. So remember when you were talking about the exemptions and you were saying just housing specifically for the disabled is exempt, I had somebody write in and I'm trying to find it here. They were just saying since documentation of disabilities' requirements [inaudible] care how does that? Is it exempt? And I just you want to [inaudible]?

Phil Jones: Sure. So remember we said housing that's specifically designated for the disabled is exempt. But we have programs where the participants in the program are designated as disabled. Well, if we provide that person assistance to go out and find a unit and live in it that's not the

same as a unit that's specifically designated for them, so that unit still falls under the rules. So the fact that that person is designated as disabled is different from a property being designated as specifically for the disabled. You want to add to that, Kris?

Kris Richmond: I thought that was great.

Phil Jones: Okay. So that's the renovation and repair rule. Now you're wondering -- you might be wondering at this point okay I need visual sensors. Okay that's on the web, fine we can do that on the web. But I need contractors that are certified and I need clearance technicians. How do I find these people? Well, here's the side for that. I have a couple different places I can go to look. I can look on the EPA home page and look for certified renovation firms in the RRP program.

I can look for training providers if I want to sponsor a training in my organization, or in my community of grantees. I can do that. I might be able to get some assistance from my local CBG or home grantees, they've been dealing with this for a long time or for Lead Based Paint Housing control grantees. And these are people who've got special money from HUD to do specific projects and they might be able to point you to the right people. They might even be able to help you with some of the examinations that you have to do depending on what their grant says.

So lots of help out there. Now I will say right now, say it again later make sure that you line these people up in advance of when you need them. Don't have work done and then you go, oh I've got to find a clearance technician. No. Soon, tomorrow, today, go find a website that might have -- and it might be a state website. If your state is running the program, I know in Maryland where I'm sitting right now I can go on the state website and find any of these people in 30 seconds and sort them by location and call one up.

And it really helps to have somebody or a couple firms that are on board with you. You've carried out a procurement, a professional services procurement in advance, they are ready to go and they'll come out when you need them. So having a risk assessor -- I would say having a risk assessor and an abatement contractor and a clearance examiner on call would be a really valuable step and you'll see why I'm emphasizing this so much later. But certainly clearance, it's important to get clearance done right away within one hour after the work is done do you stand your best chance of passing your clearance examination.

So you have to wait an hour but the clearest technician should be standing there ready to take their samples while the contractor sits in their truck planning their next job. So that if it fails -- I'm sorry they won't fail right away, but the contractor should be there to confirm that the test was done in the area the work was done.

If the clearance technician sees dust the contractor should go in and clean that spot again before the clearance technician takes a sample and so on. Okay. So then the clearance technician is going to send their swabs to the lab and they've already met the contractor so there's good communication among everybody. And that will pay off for you in the long run believe me.

Kris Richmond: This is Kris; I just wanted to pipe in. I had somebody bring up that you're mentioning contractors, but they actually have their own staff that's been trained through RRP.

So they're using their own staff. If your staff isn't trained and doesn't have these requirements, then you would need to use a contractor. But there may be situations where you actually have trained your staff and I know that Phil showed a slide where if you haven't had that training that there are links to be able to get to that.

Phil Jones: Yes. And I see these all the time. I'm on a bunch of listservs and so on where somebody in the neighborhood in the county and the state is sponsoring training and you just call up on any certified trainers and you say, hey how much does it cost to come over on Wednesday? I'm going to train all my project-based assistants, owners and their staff and my staff and whoever. So this is easy to make happen.

And I think for me the more people I have access to who have that RRP training the easier life is. I don't have to worry about it if everybody that's working with me has that certification. Okay. So in one other special instance and this will come up later, if you have had a risk assessment and hazard reduction work was done in a public housing unit on a project-based assistance unit that receives more than \$5,000 a unit per year which is most of them; then a special type of reevaluation must occur.

Not just a visual assessment every year, but what's called a periodic reevaluation. And this requires a certified risk assessor not just the trained visual assessor. So the first reevaluation occurs two years after the completion of hazard reduction and then another one two years later. Now if any of those fail and you have to keep going every two years you go back until you've reached four years of passing, or two inspections of passing risk assessments.

And in the future we'll be doing some more risk assessments and hazard reduction probably, so this is something to keep in mind for this group. Periodic reevaluations where the risk assessor is going to be part of your work plan. Okay. And I'd like to take a moment just to recap some of the important questions from this first section. Every rental file needs a disclosure form and a record that the pamphlet and anything we know about lead in that unit was given to the tenant.

We know that lead hazards are dust, lead in soil and deteriorated paint. We know that visual assessors don't need formal training, they don't need in person training, they do need to complete the HUD web training. And they aren't looking for -- actually aren't doing chemical tests. They're just looking for bad paint, dust, debris and so on. And we know there are other levels of assessments that will be done like the risk assessment and the risk assessors and abatement contractors doing more complex work get a lot more training.

Everybody's following guidelines. I have a question, if I live in a state like Massachusetts or Maryland or someplace else that has their own specific lead rules and I follow all the state rules am I good? Of course the answer is no. No. I must follow both the federal rules and the state rules. And whichever case one is more stringent than the other then that's the one that applies. And I know you all knew the answer to that, but it probably was important to say anyway. Okay. So on to the amendment that has added some new dimensions for us to the rule.

So this amendment affected the subparts that applied to specific programs and we have some additional terms we need to understand. When I say index unit, I'm referring to as a unit where a

child with an elevated blood lead level resides. This is a child under six years old. When I talk about other covered units, I'm talking about those federally assisted housing units in the property where a child under six-year-old lives or expected to live. And this will come into play, so I'll say it again later, but this is where we are right now.

Another term, we talked about risk assessments which were a detailed analysis of lead-based paint hazards in a property doing chemical testing, [inaudible] testing and so on; solely focused on the paint and the dust and debris from paint. An environmental investigation includes a full risk assessment. In other words, all of that, but it also involves interviews and testing to determine where else a child with an elevated blood lead level might have gotten lead in their blood. So it might include testing the water.

It might include looking at the jewelry, or toys, or tiles that the child plays with. Or the tub that they bathe in and drink the water from, or maybe not. Or the playground where the child plays. The other person's house where the child spends a lot of their time. All those things might be included in an environmental investigation, so we're going beyond just the risk assessment. The relevant subparts are and the people who are responsible for doing all the things listed in the sides coming up are; subpart for public housing and the PHA is responsible, subpart H, the project-based assistance.

And the owners are responsible, so the PHA people who were dealing with owners and project-based assistants. If your owners aren't taking the training then it's time for a conversation. Impacts of the amendment in place since 2017. Now major impacts and this will affect us. The threshold for defining a child with an elevated blood lead level is now in line with the CDC. And now that the CDC is going to make a determination and HUD will most likely approve that and they have improved that for the current level at CDC which is now 5 micrograms per deciliter of blood, or anything greater than that.

And that is half what the standard was before. So it's conceivable that we will see more children being identified with this elevated blood lead level. When the child is found to have an elevated blood lead level a couple things -- three things happen to the amendment as added. One, in that child's unit we do an environmental investigation not just a risk assessment. Two, we go beyond that index unit and have some requirements for any other assisted unit in the property with the child under six occupying.

So those other units, get a risk assessment and if there are hazards we control those hazards. Now all of that only comes into play if we found hazards in the first unit. If that child did not get their lead from their own unit then we document that and we don't need to go on to these other requirements. Now the other thing that the amendment does is add a requirement that HUD be notified when we find a child with elevated blood lead level. HUD is going to track the incidents of elevated blood lead level and they're going to track everybody's performance in addressing the hazards that might be in the homes.

So four major changes. So we have an EBOL case reported for a child under six and in assisted units. If that report didn't come from a healthcare provider, or public health department then the person responsible and that's the public housing agency or the owner in the case of PBA noticed

the who line there at the top of the chart. They must immediately verify that this is an accurate and confirmed report with either the healthcare provider or Public Health Department. Immediately don't wait and this can be done by phone.

So if a parent reports this, we go immediately to try and confirm this. If we can't get confirmation then we contact our hood rep, and hood reps have been asked to follow up on this and try and get this verification directly. So you keep trying and keep record of your attempts, but also make sure that HUD is now in on the effort. Remember that medical information is private, so you're going to be doing some taking real care to not disclose people's names, not disclose their -- the specific results of the test and so on.

If you transmit things securely and this is one reason we can have some of the [inaudible] conversations over the phone, the other is speed. And your public health department has a lot of experience with this so they will be able to help you in terms of what you need to do to keep that information private. Healthcare providers probably can help you with that too. Now, in the event that a child in EBOL is moved by the time, the owner or the Public Housing Authority gets that information -- guess what that unit still has to get treated.

Okay. So we're going to proceed whether or not the child has left. Because the presumption is they may have gotten their lead there and we need to go treat that -- built that unit and that property as though the child was still living there. Only logical; right? Because our goal is that this stops happening. Keep in mind that that's our ultimate goal. So we know that we have this elevated blood lead level trial, now what do we do? We notify a local health department if they don't know already.

The local HUD field office and the office of Healthy Homes at HUD Lead Hazard Control and Healthy Homes. And there's the website, really easy. Five business days, so right away don't wait, just do it immediately. And again you don't need to use the child's name, the actual test results all you're reporting is the address and the program that you're in. And actually, I think we have a slide that says exactly what you will report to HUD, here it is. I won't go to everything on this slide just remember that it's here.

When you have to file one of these reports its slide 39 all logical. So then what happens? Well, we must also immediately have our certified risk assessor who we already found and procured and have waiting for a phone call to go perform in an environmental investigation. And that needs to be completed within 15 days -- 15 calendar days now, not business days. Fifteen calendar days of receiving the report.

So quick. And remember I showed you before the slide where to find people, there it is again. Fifteen days. I will tell you this the number of clocks start as soon as you have a verified elevated blood lead level child under six, so keep that in mind. The clock has started ticking. So environmental investigations must be performed by a certified risk assessor and they are qualified to do all of these other things; clearances, screens, risk assessments, investigations and so on.

So these folks have a high level of training. And it may also be very helpful to have your risk assessor also serve or assist your construction manager in managing any work that takes place. It will help greatly if a qualified person goes and watches the safe work practices that are being carried out and the way that work is done so that further contamination of the site doesn't occur. Or somebody gets exposed to lead, or another resident maybe in another unit or maybe in that unit gets exposed.

So the risk assessor will know what protections need to be in place to make sure that doesn't happen in terms of signs, classic put up, surfaces covered, protected and potentially people temporarily staying somewhere else. One thing to keep in mind the health department, the public health department has been doing this work for a long time and they have their own protocols and methods for doing environmental investigations.

They are very close and sometimes in some cases more rigorous than what's -- what the protocol is for an environmental investigation. They don't necessarily call their inspectors risk assessors, but if you get an environmental investigation from your local public health department that is sufficient. You have met the standard. And they may also be a source of help for what do we do now. They also will be advising the -- hopefully if they're doing their job well they'll be advising family on how to protect themselves. Kris I want to pause do we have questions coming in at this point?

Kris Richmond: Yeah. We've had a couple questions coming in and they're asking about who's responsible for these steps and I reminded them that for public housing, conventional public housing it's the Public Housing Authority. If it's project-based assistance, then it's the owner that's responsible.

If it's tenant-based rental assistance, which we are not really focusing on today but it varies on the step and it might be the grantee or it might be the owner. Everybody should have access to the TBRA documents on the Dropbox as well. When you click on that Dropbox you should see a folder project-based or TBRA that you can access the responsible, or the designated party handout that we have.

Phil Jones: I'm going to just give one clue on the -- if there are TBRA people or people who also manage TBRA programs it's important that you will see that the rule shifts that responsibility around a bit, but the grantees are responsible for this initial environmental investigation. Now you can designate that to somebody else like the owner, but the rule assigns primary responsibilities for the environmental investigations for you.

After that the work that gets done and so on will -- the onus is on the owner. But in all of this we have this question of well, who pays for -- how do we pay for this? So that's a major question that -- and I wanted to say thank you to whoever asked this question, but preparing for the possibility that there's some fairly significant expenses that are going to occur here is going to be valuable. And that's one reason for making sure especially if you are responsible for project-based assistance that your owners understand what the deal is here.

I think one of the things that we try to do is really work with owners about letting them know what the potential risks are if they are not really careful about what they do in terms of documentation, in terms of repairs to units and so on. And the risks go beyond just what happens with HUD, all you have to do is Google lead paint lawsuits, or lead -- yeah. Children with LED lawsuits and you will see what can happen to owners and to organizations.

Kris Richmond: Yeah. And there were a number of questions about how many blood tests need to happen? What kind of blood testing needs to happen? And I said we would submit those to HUD to get exact answers. So stay tuned for the Q&A document to come out in a couple weeks.

Phil Jones: So yes. We will be -- in ten we hope to be publishing Q&A documents and those will be in the Dropbox, so those will show up. Keep that Dropbox active -- in your favorites column and whatever it's called on your computer and check it out every once in a while. Okay. We're good Kris?

Kris Richmond: Yeah. And I just want to remind folks because they were asking me well is this -- these rules still apply for our CDBG Single Family Rehab Program. And the rules that still went over at the very beginning with the summary chart there are certain requirements that do apply, but this main focus of the training is how do we respond to an elevated blood lead level of a child in one of our units?

And that's when there's a continued relationship between the programs and the tenant or the building. And you don't have that continued relationship with single family rehab under CDBG. So these rules for elevated blood lead level child response do not apply. They apply to tenant-based rental assistance, public housing and project-based assistance. So that's what the -- that's what we're focusing this on right now.

Phil Jones: Yeah. If you've been doing CDBG rehab, or home rehab don't panic that hey we were supposed to be going in every year. No. That's not required in those programs. TBRA if you were providing home tenant-based rental assistance then yes, so it is the relationship. All right, good questions. So here we go. Okay. So if we find hazards, if our risk assessor finds hazards in its unit, then we have some notifications to the HUD field office and to the residents.

And we will need to carry out some notification to other building residents because we are going to be working on that building; right? So we will also on the -- in the questions we are going to provide some details about all these notice requirements. But I will tell you your risk assessor again as they go into work or your abatement contractor will know what kinds of things need to be shared with other building residences whose units might not be getting worked on.

But remember if we are in multifamily we are going to be working on common areas as well, or we might be working on common areas and that could possibly effect everybody. And again short timeframe, so my notification is 10 business days to notify HUD, 15 calendar days for resident notifications. We're going to review all these timelines at the end, so don't try to remember them all.

Here we have a slide that summarizes them all and we'll do some -- we'll have a discussion when we get there. And these notifications should be specific notices to each unit involved. Everything we do we need to document to date. If we had a full environmental investigation in this unit six months ago or less than a year ago that's still valid, that investigation is probably still valid. Now it raises some question about are we really -- where is this particular child who's been identified getting their lead and that's probably time to have a conversation with the public health department.

But just remember date everything, document everything. Now. Let's say we do the environmental investigation and we didn't find any lead-based paint hazards so the child is getting their lead somewhere else. Excuse me. So the environmental investigation will probably make some recommendations about where the lead did come from. Hopefully we found it, or we found some possible sources.

But it is essentially on the family to then take care of that issue or to go get help from someone to address that issue. Now it may be that owners will want to respond and carryout further testing. For example, if we find out your building is being supplied with water with lead in it then that's a conversation I would hope any owner including a PHA would have with the water company. But in the unit itself, or in the child's behavior itself that's something that's going to be the family's responsibility.

So then I'm sorry -- let's make this clear, if we didn't find lead-based paint hazards in the environmental investigation in the index unit and we then notify everybody of those results we've done as far as the amendment is concerned. We've met our obligation although further things that we have to do to satisfy the requirement to the amendment, so I just want to make that clear. This is like a flow chart; we would stop here if we reached this point. But if you did identify hazards then we go down a whole other pathway.

And that means the owner or the PHA is responsible for controlling those hazards and then doing some other things. At this point we start controlling hazards in the index unit, we use a certified abatement firm, or a certified lead renovation firm. All the hazards are identified and hopefully our risk assessor is still around and looking over their shoulder and all that work passes clearance. And this all happens within 30 calendar days of receipt of the environmental investigation results.

So not time to carry out a professional procurement even. I mean you might if you hustle, but much better to have done your procurement and have fewer certified firms maybe three or four available to you ready to come out and work. Now everybody take a deep breath. So far we've been talking about the index unit. In another words where this unit -- where the child with the elevated blood lead level resides. Now if we found hazards in that unit there's a good chance are hazards in other units of the property so we need to go do some things there.

Any other assisted unit in the property, so public housing all of them and most project-based assistance as well, in other words all of them, where we have a child under six living or expected to reside these units are called other covered units. And they get a risk assessment. So we start communicating with them right away. So this is another part of your conversation with owners is

know where your children are. Do you remember that old thing? I don't know. Do you know where your children are? This is one of those instances.

We need to know where our children are and where our coming children are. So I have a unit where I'm expecting a child under six to live, whatever might be making that happen. Because now I need to deal with those units and I need to tell these people, hey we're going to come in, we are going to do risk assessment. And we may, or may not come in. We probably have to come in just to look around and we might come in and do some detailed analysis. If I have a lot of units our risk assessors allowed to carry out might be able to do some sampling of those units to figure out where the hazards are.

The guidelines lay out in specific guidance for what kind of sampling is allowed, recommended so on to determine how much work we have to do on the other units as well. So some of this depends on what we found in the index unit and some of it depends on the condition of the other units. Are all the cabinets the same for example?

Are all the windows clearly 1950s, 1930s windows? We don't have to test everyone. We can test some specified number and if they're turning up lead then we're going to just presume that they are all lead, we don't have to pay for tests on all of them. So that's how sampling works. I won't go into the details with those.

Kris Richmond: No. Hey. So this is Kris. I just wanted to emphasize because I did have a couple questions at the beginning asking do we really have to do this for every single other coverage unit in the whole development? And I said, you know what, there's going to be information about sampling so don't panic more information is coming about that. So I didn't know if you wanted to say a little bit about slide 52. I think we're doing okay on time.

Phil Jones: Yeah. I mean this is a conversation I had with the risk assessor and the risk assessor should demonstrate working knowledge and understanding of the sampling guidelines and the sampling methods. There's no need to pay for endless X RF tests if I look at one window in a building and all the windows are the same and that window is testing hot for lead, in other words it clearly was painted with lead, it's a pretty safe assumption that the rest of the windows in that building were all painted the same originally.

And down there underneath somewhere there's lead. So we don't have to -- we may have to pay for replacing all the windows, but we don't have to pay for testing all of them. And I'll add to that, if you've got a building that's filled with windows that are old enough to be covered with lead-based paint those windows are inefficient and out of date and a maintenance nightmare anyway. So I would highly recommend that owners replace those windows anyway no matter what. But that's just me talking. Do we need to say more about this, Kris?

Kris Richmond: I think that's helpful, thanks.

Phil Jones: Okay. But again make sure that you have a good relationship with the risk assessor and that you're working together. They're working with the owner and you are trying to figure out how to cover costs and schedule how to get the work done, because again time is of the

essence here. Now, here again, if we run into other units and for whatever reason they did not exhibit web-based paint hazards then we notify them, we notify the HUD field office, hey here are our results and we are done as far as those units are concerned. So again the flow chart stops there.

Timing. So if I have an index unit with hazards the hazards must be addressed and we said this before within 30 days of when I get those results. And then I must complete-based on the number of other covered units in the property the risk assessments from other cover units within 30 days. Not 30 days after I fix the index unit, 30 days from the date I get the EI results. So we have something happening, two things happening here at once, in those 30 days I need to both fix the index unit, address the hazards in the index unit and get the risk assessments done for the rest of the property.

So the good thing about that is my risk assessor is on site and is around and can both watch the work and be doing risk assessments at the same time. And then that work needs to be completed for any work that's identified as needed on these other covered units needs to be completed within again a number of days, 30 days if I have less than 20 other covered units. And 90 days for a property with more than 20 other covered units. But still a tight timeframe, so this clock for the last bullet starts with a completion of the risk assessment on those units.

So you can work out where your total time limits are, but they aren't much because remember back at the beginning we had a 15 calendar day notice to get the original environmental investigation done. Then we have 30 days to get that work completed.

And we also overlapping that we have 30 days, or 60 days for the other covered units to be risk assessments. So there's a lot going on in a very short period of time, which brings us to the first bullet on this slide. I've said it many number of times, but here we are again, plan ahead with your risk assessor.

Make sure your risk assessor understands the scope, so he might share, the last couple of slides are the ones I'm going to show you a minute or two about the timing issues. Figure out the sampling options and if your risk assessor is really good in experiences let them be involved, have some control over the construction process. And if somebody doesn't understand the implications of all this, goes in and starts telling them -- ordering contractors around, or letting contractors get away with things that they shouldn't that's a potential problem.

And it's not just a regulatory problem; it's a liability problem for you and your owners. One thing to keep in mind is that I may need to relocate tenants temporarily to keep them away from the lead dust and work that's going on. So preparing for relocation is part of this and owners need to be aware that this could happen. And one thing I might want to do especially when I get the other covered units is have this historic staging work, so that when I need units they can -- maybe I've got a unit that's lead safe that I can use.

Or maybe I've got some other place that I can temporarily house people. Now these other units for temporary relocation are lead safe. Meaning they were either constructed after 1978, or they pay us both the visual assessment and bus sampling similar to a clearance. So they just need to

be really clean with the paint intact and pass the clearance test. Abatement is always recommended versus interim controls. controls will keep -- well, control hazards but rental units suffer a fair amount of wear and tear.

The interim controls that are patching, basically patching up hazards are not going to be very durable and your visual assessor is going to be -- year after year is going to be back, hey we got - - this thing is deteriorating we need to take care of it again. Abatement will help you a lot in terms of your maintenance and inspection requirements and strongly recommended by HUD. I'd like to just recap for a second here I think we've got time. Very quickly who can verify an EBOL?

Must be a healthcare provider for the public health department. Are we dealing with all the units in the property or just the units occupied, or expected to be occupied by children under six? Yes. B. The ones that are occupied by children under six. Remember to review your RRP handout and the differences between, so you can explain to contractors the differences between our other RRP work on pre-'78 facilities and work that is in a HUD-assisted unit. Be sure you do all the planning that we've talked about and your procurements in advance.

Okay. So control work, all this work is considered complete when the hazards are controlled and this project has passed a clearance examination as we have discussed. So we have a clearance examination, you have a report that you can share with HUD, with owners, with occupants and your files. So notification. With every step we have notification [inaudible] who was responsible the PHA, or the owner. Notify residents as appropriate.

The local HUD Field Office and if we have been working on a large property we might want to let everybody know, hey we're done and here's the result. We've reduced hazards and here we are. And again we have some deadlines, 15 calendar days for residents, 10 business days for HUD to carry out that notification. Just a review; we find hazards, we notify, we protect, we control hazards, we achieve clearance, we notify again. And then ongoing we maintain. And again remember when I said much earlier if we did have risk assessments done and hazard control work done we need a periodic reevaluation of those units.

So within two years and then again two years after that a reevaluation by a risk assessor not just a visual assessment. So here's the chart of timeframes. I'll leave it there for a second. Well, actually longer than that. So notice. I get the EBOL verification, then I have this notice to do. Now from that point I have 15 calendar days to complete the EI. Now then I have 10 business days to notify HUD of EI results. Overlapping those 10 business days I have to do risk assessment on the other covered units.

I have 30 calendar days to do that. Overlapping that 30 days I am also -- of the same 30 days these are the same 30 days in which I have to complete lead hazard control work and this is on the index units. So this is index. And then I have 30 days after I get these results, these results here to do this work. Okay. Yes. Questions?

Kris Richmond: Yeah. I had an interesting question come in because they're asking how do projects find out if there is a child in the program within an elevated blood lead level? And is there any proactive steps they should take to find out?

I know this is different than TBRA, because TBRA there's that data sharing component where there has to be a memorandum of understanding in place between the health department and the TBRA Program to share data of any elevated blood lead level children identified. But do you have any comments about what you can do for project-based assistance or public housing to try to -- to find out if -- any proactive steps they can take to find that out.

Phil Jones: Well, it's a great question. I think this is a little bit difficult for folks that are -- that may be already swamped with work will say, do I want to also -- do I want to take on a campaign that's looking for people that are -- of course need more work? So let's be realistic about that is what could conceivably happen, but the goal is to stop people from being exposed to lead. So to me the obvious proactive step is to post -- talk to your Public Health Department have them post signs in your units and your developments, or to just find out what other -- what programs are there.

And if you have a newsletter, or your owners have a newsletter or a publication that goes out to tenants to remind them that testing is available at such and such a date, such and such a time. There is a lot of testing going on these days in schools, childcare facilities and so on where the parent signs a release the child gets a finger prick.

And then if that looks positive the finger prick is so the parents are informed and that finger prick test gets followed up with [inaudible] sampling. So it's -- the testing is out there and it's just a question of getting people to go avail themselves. That's what I know.

Kris Richmond: Yeah. And can you just go back one more slide where you had the timeframes? Because somebody was asking again, what is the timeframe for completing the risk assessment in the index unit? And remember we're not doing a risk assessment, we're doing the final investigation which is -- it's a risk assessment with additional questions. And so that's got to be done within 15 calendar days of receiving verification that there is -- that someone tested within an elevated blood lead level, but 15 calendar days.

And then somebody wanted to know can you explain further what is meant by the overlapping 15, 30 or 60 days? Does the count off start with the date the EBOL is identified? I don't know if you want to [inaudible] to that? You can erase the -- you can go up to the eraser and erase the annotations if you want to clean to answer that question. What about the overlap?

Phil Jones: Okay. So everybody saw these highlights I'm just making today standout I think. But I think what I was saying about that overlapping is that up here somewhere at the beginning I've got this -- I got notified of an EBOL; right? I verified an EBOL, so now a clock starts; yes. Okay. So I have from that point I have these 15 days and these two things -- this is 15 days, both of these things happen, these five business days to notify HUD and everybody else. And the 15 to get the -- so that's one -- those are two things that overlap.

Yeah. And then I get my EI results here. I get my EI results here. Yes. For the index unit. Well, once that happens I have 10 business days to notify HUD and 30 calendar days -- I'm sorry, I have 30 calendar days to do risk assessments and I have 30 days to complete the lead hazard control work in the index unit. So all of these things overlap. These are all happening at the same time that's what I mean.

Kris Richmond: Thanks. That's really helpful.

Phil Jones: So those are the two main ones that you've got to worry about is there's a lot going on. In this first -- to me this is a 45-day clock, 15 here and then 30 here and 30 here. These are the same 30. So I have 15 and then in the next 30 I'm doing all of this. Well, unless I fall under this category. But still I better start. Even if I got these 60 days I need to get started. There are a lot of units to deal with. Anything else here?

Kris Richmond: No. Just someone coming back out about the question of the Public Housing Authority and conducting a risk assessment of other units of the building. And some of our slides say property, I said that that's an outstanding question that we're working through with HUD. Stay tuned.

Phil Jones: Yeah. Just so you're aware -- the rule -- when we are working in a building in a multifamily building, just under the normal protocols for doing any work, any hazard control work in a building we need to notify the residents of the whole building. Because there's potentially lead dust flying around and there's going to be workers with plastic and everything. We don't want people getting scared, this is an environmental hazard, or if they are letting them know that it's controlled and how they're controlling it.

So there are requirements pertaining to the building in any work that we do. Or any common area where we might be affecting other residents. We've got to tell everybody what's happening. But the specific rule in the amendment is once we find lead hazards in an index unit then yes other buildings in the property are affected.

So some places slides are going to say other units in the property that's an issue related to the amendment and who we need to go take care of, which is all of these children under six that might be in units with lead versus where we're doing work which is typically a building specific issue.

So I'm generalizing there we're going to try and put out more information on that [inaudible]. Okay. So we are about to come to the end, please if you have any questions please keep writing them. I'll just put these screens up. Remember to keep your records and that they are somewhere secure. I talked to one person who said all the records were in paper and they were in a wet basement and got ruined, so in the modern age that shouldn't happen anymore. We're all going to be in the cloud. So we've got a record that our testing is done, we're keeping our records, we're sharing our records.

We've got evidence of the certifications of our contractors and our staff. We know who the contact person is that we want to deal with at the state government or the health department. And

we're obviously informing residents of the risks of lead-based paint and encouraging that other young children are tested.

Now the other thing is I have to tell you what the pamphlet says to parents of children well, everybody is if you're in a pre-'78 unit that might have lead in it, clean, clean and clean. And don't let your children play in the dust. So the first step in all of this is to keep these units as clean and free of dust and lead paint as possible. So that's step one of prevention and that has to involve tenants as well.

So some of the responsibility for this does fall on the tenants themselves. And I've been in units where mothers took this seriously and their child did not touch anything that was not theirs that they were able to wash. So especially a child that is crawling and putting everything in their mouths at that age really susceptible and those children should be kept away from dust. Or the dust away from the children, either one.

Okay. Websites. Some of these are invaluable and the others are just really good. I will say this, I've been enjoying using this one because this is an electronic version of the rule. It's easy to scroll from one section to another to go back and forth to because the rule always refers to some other section somewhere. It's easy to skip around and it's been updated with the amendment information. So this is one that I personally use all the time. The others are good reading and might give you some additional information especially public housing folks who'd want to look at this one.

If you want to find out who got money in your area or that you might be able to reach out to for help here are the grantees who got special lead money. Here are the guidelines that should be used by your risk assessors and contractors when they are evaluating work or doing work and on and on. If you have some tricky question like what I said about relocation for example that detail is not found in the rule it's found here. So this is a useful document.

Kris Richmond: So can I chime in here too. The resources here for the PHA, the Public Housing Offices at HUD did a really nice job of putting together factsheets. There's factsheets that can be downloaded, printed, copied, handed out to your agency, handed out to landlords. There's also videos that are available. Those can all be accessed through that link right there, the resources for PHAs.

And then there's lead-based paint compliance advisors is also a really nice resource. If you're not quite sure what steps you have to take it's an online -- almost like that -- I can't remember the thing you use for your taxes where you can go through and you type in like what kind of housing am I dealing with? What year was it built? What kind of work am I doing?

And so we had some people ask us about some rehab and we weren't really talking about single family rehab, but that -- if that's what you're doing, check out the Lead-Based Paint Compliance Advisor because it has resources, it has -- it'll walk you through and if you type in what you're going to be doing it'll spit out what the requirements are and what steps you need to follow for that as well.

Phil Jones: Great. That brings us to 2:30, almost exactly. Remember you can reach out with questions, comments and suggestions to the office of Healthy Homes. And here's the address. And Kris will the Q&A box be open for any period of time, or we need to close this off here?

Kris Richmond: No. It's going to be closed off once the webinar is turned off, but you can still continue to send questions to the email that's on there, theleadregulations@hud.gov, that does go directly to HUD headquarters. And I do believe, Nicole let us know this, but I'm pretty sure everybody is going to get a link to fill out a survey; is that correct?

Nicole Hassman: Not at this time.

Kris Richmond: Oh, not. Okay. Well, if you have comments about the training you can put it in the lead regulations email as well. And then like I said we're --

Phil Jones: I want to say --

Kris Richmond: Yeah. Go ahead.

Phil Jones: Go ahead. I just want to say my appreciation for everybody who joined. This is important work and hopefully we could get to the point where we don't need to be talking about this anymore. This is a solvable problem and I'm happy so many people are paying attention.

Kris Richmond: Yeah. Great. And so if you had colleagues that weren't able to join you today we do have to send this recording to be -- to have transcripts made. So it will take a week or two before it's going to be posted. But check back again it will be posted on the HUD Exchange, if you have colleagues that want to listen in or just read through the transcript afterwards.

So thanks. Thanks, Phil today too.

Phil Jones: Yeah. Thank you. Take care, everybody.

Kris Richmond: Bye.