OMB Control No. 2539-0008
exp. (01/31/2004)

U.S. Department of Housing and Urban Development

Lead-Based Paint Hazard Control Grant Program

Progress Reporting

Replaces forms 96001, 96002, 96003, 96004, & 96005

form **HUD-96006** (8/2001)

OMB Control No. 2539-0008 exp. (01/31/2004)

This information is designed to provide timely information to HUD regarding the progress of the grantees in carrying out the Lead-Based Paint Hazard Control Grant Program and to provide the Congress with status reports as required by statute - Title X of the Housing and Community Development Act of 1992 (PL 102-550).

Public reporting burden for this collection of information is estimated to be 12 hours per response.

This agency may not collect this information, and you are not required to complete this form packet, unless it displays a currently valid OMB control number.

This collection does not require the retention of confidential or sensitive material.

Dear Lead Hazard Control Grantee:

I am pleased to transmit to you an improved grantee reporting system. The Lead-Based Paint Hazard Control Grant Program Progress Reporting Form reflects the new set of reporting requirements that we believe will assist both HUD and grantees monitor and evaluate progress implementing lead hazard control grant program activities. This report is the result of the Office of Lead Hazard Control's continuing effort to develop more effective ways to obtain timely and useful qualitative and quantitative information. Staff from the Office of Lead Hazard Control as well as selected lead hazard control grantees provided input and feedback on the development of this report. Their valuable contributions and insights were appreciated.

This Quarterly Progress Report is designed for web-based reporting, but will be available in several formats for submission to the Office of Lead Hazard Control. These reporting requirements supersede previous requirements.

We believe that this report, coupled with a well-conceived work plan, creates a system to assist all parties in measuring grantee performance and fulfilling program management, monitoring, and oversight responsibilities.

Sincerely,

Ellis G. Goldman, Director
Program Management Division

OFFICE OF LEAD HAZARD CONTROL
GRANTEE QUARTERLY PROGRESS REPORT

1. Grant Agreement Number:	
2. Grantee Organization:	
3. Project Title:	
4. Organization Address:	
5. Report Period:	Jan 1 – Mar 31 Jul 1 – Sep 30 Year 20____ Apr 1 – Jun 30 Oct 1 – Dec 31
6. Project Period of Performance: (Start - Expiration Date)	
7. Cumulative Federal Grant Funds Drawn (LOCCS) Through End Date of Report Period:	
8. Number of Projected Units per HUD Grant Agreement (HUD 1044):	

Certification

9. Program Manager: (print name)		
10. Signature:		10a. Date:

If any items in this report require explanation or clarification, please address them in the PROGRAM NARRATIVE RESPONSE portion of the quarterly report.

QUARTERLY PROGRESS REPORT

PART 1
PROGRAM NARRATIVE RESPONSE

Discuss your progress and accomplishments in meeting the tasks and objectives outlined in your HUD-approved work plan. You should respond to each narrative item with a short paragraph. Work plan tasks that must be covered in this report include:

A. Program Management and Capacity Building (including discussions of data collection and program performance activities)
B. Community Education, Outreach and Training
C. Lead Hazard Control Activities (including relocation)

Summarize your activities for this report quarter, and cumulatively if appropriate. In the discussion of these work plan tasks, highlight issues and/or activities that had a significant impact on the program. The narrative discussion is to complement the data submitted on these OMB-approved report forms.

If your narrative response to a particular question (such as A4.) remains unchanged from the previous quarterly report or no new information can be reported (i.e., changes to key personnel), you should reply by repeating your response from the previous report and indicating the date of the original response (i.e. Jan 1 - Mar 31, 1999).

A. Program Management and Capacity Building

Within the context of the current work plan and grant agreement, summarize your progress in the overall grant program.

A1. Describe any obstacles to performance and measures taken to overcome these obstacles.
A2. Describe efforts to enhance the coordination and integration of lead hazard control work with other housing, health, and environmental programs (i.e., childhood lead poisoning prevention programs, health and housing code enforcement, housing rehabilitation, weatherization, etc.). Describe other services to be provided such as blood lead screening and community education and outreach; intra- and interagency partnerships, and public and private partnerships.
A3. Describe the availability of lead-based paint contractors in your area. Describe activities you have taken to increase the number of contractors available to provide lead hazard control work as part of your grant.
A4. Describe any changes in key personnel in the program, and among sub-grantees or other entities directly involved in your grant program and its impact. Provide information on any new program participants, including resumes of key individuals. (Include letters of commitments, MOU's, or other arrangements with community-based organizations and other partners.) Describe any significant changes to the work plan or budget that have occurred. Describe methods used to collect program data and what criteria were used to evaluate the performance of your grant program. Describe the effectiveness of the financing mechanisms used in enrolling property owners, including owners of rental properties, in the program. Describe any efforts undertaken to develop and utilize a lead-safe housing registry. (Include information on the number of units included, the public availability of the system, and examples of how the registry has been used.) Describe any proposed or actual changes in State or local laws, regulations, or policies which may affect your grant program.

B. Community Education, Outreach and Training

B1. Describe education and outreach activities and events completed this quarter. Discuss the expected results of your efforts. Describe your outreach efforts at reaching specific groups you have targeted (door-to-door, presentations, training, broadcast media, mailings) and the intended recipients of this outreach (tenants, landlords, parent groups, child-care providers). These activities should be included in Item B5 below.

B2. Describe outreach techniques and/or particular methods, materials, and formats that have proved to be most effective (attach copies of any media coverage and materials, including press clippings, to this report).

B3. Describe training efforts completed this quarter. Discuss the types of training provided and any certifications received. These efforts should correspond to Item B4 below.

B4. Skills Training and Economic Opportunities

Skills Training Conducted (For Report Quarter)	**Number of Individuals Trained**	**Number of Individuals Employed as a Result of Training**
Low-Income Individuals	B4a.	B4b.
Property Owners / Tenants / Remodelers / Renovators / Maintenance Workers	B4c.	
Lead-Based Paint Contractors	B4d.	
Grant Program & Partnering Entities Staff	B4e.	
Other (specify)	B4f.	

See instructions for completing this section of the report.

B5. Community Education and Outreach Activities

Target Audiences	**Activities Conducted (For Report Quarter)**	**Number of Individuals Reached**
Health & Child Care Providers	B5a.	B5b.
Schools, Parent groups, Places of Worship	B5c.	B5d.
Landlords / Landlord Groups, Tenants / Tenant Groups, Housing Corporations	B5e.	B5f.
Community or Target Area Wide	B5g.	B5h.
Real Estate Professionals	B5i.	B5j.
Other (specify)	B5k.	B5l.

C. Lead Hazard Control Activities

C1. Describe the extent to which lead hazard control activities were conducted in conjunction with other work (i.e., rehabilitation, code correction, weatherization, etc.).

C2. Describe the lead hazard control methods or combination of methods used. To the extent possible, describe the number of housing units completed and cleared for the methods used (e.g., low-level interventions, interim controls, hazard abatement). Discuss the lead hazard control and rehabilitation costs for units completed this quarter.

C3. Describe any post-hazard control maintenance plans for units where lead hazard control grant work has been completed.

C4. Lead Hazard Evaluations and Units in Progress

Activity	Number Completed This Quarter
Number of Units Receiving Lead Hazard Evaluations	C4a.
Number of Units with Lead Hazards Identified	C4b.
Number of Units in Progress or Under Contract	C4c.

C5. Lead Hazard Control – Unit Production

Number of Units Completed and Cleared	Number Completed and Cleared*	Number of Units With Other Rehab, Code work	Number of Units Where Occupants Were Relocated
Occupied Rental Units	C5a.	C5b.	C5c.
Vacant Units	C5d.	C5e.	
Owner-Occupied Units	C5f.	C5g.	C5h.
Total	C5i.	C5j.	C5k.

* A Listing of Units Completed and Cleared during the Quarter by street address is to be attached to the Quarterly Report (see PART 2 – LISTING OF UNITS COMPLETED AND CLEARED)

C6. Age of Units Completed and Cleared

Age of Housing (based on number of units completed and cleared)	Pre-1940	1940 - 1959	1960 - 1977	Unknown
	C6a.	C6b.	C6c.	C6d.

C7. Occupant Information of Units Completed

Number of Occupants Residing in Units when Lead Hazard Control Work was Initiated	Children under 6 Years of Age	Children under 6 Years of Age Receiving Medicaid	Occupants over 6 years of age (including adults)
	C7a.	C7b.	C7c.

C8. Blood Lead Values of Children

Blood Lead Values of Children Under 6 of Age Residing in Units when Lead Hazard Control Work was Initiated	BLL under 10 µg/dL	BLL between 10-19 µg/dL	BLL $\geq$20 µg/dL	Not Tested or results not available
	C8a.	C8b.	C8c.	C8d.

In addition to the quarterly report, the HUD Office of Lead Hazard Control is always interested in the accomplishments of our Lead Hazard Control grantees and in sharing these with lead poisoning prevention advocates. If you have a particular "success story" which may reflect innovative approaches in implementing your program, or if you have overcome any obstacles that would be of interest or benefit to others, please submit the story with your quarterly report.

PART 2
LISTING OF UNITS COMPLETED AND CLEARED

Grant Agreement Number:	
Grantee Organization:	
Report Period:	Jan 1 – Mar 31 Jul 1 – Sep 30 Year 20____ Apr 1 – Jun 30 Oct 1 – Dec 31

Please submit the following information for units that have undergone lead hazard control activities and subsequently cleared:

Unit Street Address	Apt #	City	State	Zip Code	LHC Intervention Costs	Relocation Costs	Rehab or other Work Costs

PART 3
FINANCIAL REPORTING
HUD Lead Hazard Control Grant Funds

Grant Agreement Number:	
Grantee Organization:	
Report Period:	Jan 1 – Mar 31 Jul 1 – Sep 30 Year 20____ Apr 1 – Jun 30 Oct 1 – Dec 31

BUDGET CATEGORIES*	NEGOTIATED BUDGET	EXPENDED THIS PERIOD*	EXPENDED TO DATE*	AVAILABLE BALANCE
1. Personnel (Direct Labor)				
2. Fringe Benefits				
3. Travel				
4. Equipment				
5. Supplies and Materials				
6. Consultants				
7. Contracts / Sub-Grantees /				
7a.				
7b.				
7c.				
7d.				
7e.				
7f.				
7g.				
7h.				
7i.				
Subtotal Item 7				
8. Other Direct Costs				
9. Indirect Costs				
10. TOTALS*	10a.	10b.	10c.	10d.

* Administrative costs included in totals expended **<u>are not</u>** to exceed 10-percent

OFFICE OF LEAD HAZARD CONTROL

Instructions for Completing the Quarterly Progress Report

Cover Page

1. ***Grant Agreement Number***. The Number Assigned in Block 3 of the HUD Grant Agreement (HUD 1044).
2. ***Grantee Organization***. The State or local agency which was awarded the Lead Hazard Control Grant.
3. ***Project Title***. The name of the Lead Hazard Control Grant Program.
4. ***Organization Address***. The mailing address where the Lead Hazard Control Grant Program receives correspondence and other program materials.
5. ***Report Period***. Check the appropriate box covering the period for the report.
6. ***Project Period of Performance***. The currently approved period of the HUD Grant Agreement (including any grant agreement modification). The period of performance is listed as a "clause" or in Block 16 of the HUD grant agreement (the expiration date is the date the grant is to conclude).
7. ***Cumulative Federal Grant Funds Drawn (LOCCS) Through End Date of Report Period***. The total Federal grant funds drawn down by the grantee. This amount should correspond to the total listed in Item 10 (c) of Part 3 - Financial Reporting.
8. ***Number of Projected Units per HUD Grant Agreement (HUD 1044).*** The number of units to have lead hazard control interventions as negotiated between HUD and the grantee.
9. ***Program Manager.*** The manager of the Lead Hazard Control Grant Program. The person responsible for the completion and submission of the quarterly report.
10. ***Signature.*** The signature of the Program Manager. 10a. ***Date.*** The date the Program Manager signs and submits the quarterly report to HUD.

PART 1 - Program Narrative Response

Items A1-A4, B1-B3, C1-C3. Program Management and Capacity Building; Community Education, Outreach, and Training; and Lead Hazard Control Activities.

Instructions for the completion of this narrative section of the quarterly report are included with the forms and are self-explanatory. Grantees are expected to discuss progress and obstacles in implementing the Lead Hazard Control Grant Program. A response to each item is expected. Please note that responses to particular questions may remain unchanged from the previous quarter. In the event that the response does not change from the previously submitted quarterly report, follow the instructions outlined in the box immediately preceding the ***Program Management and Capacity Building*** Section of the report (Part 1).

Item B4. ***Skills Training and Economic Opportunities***

Responses to this item should relate to the activities described in the narrative reply to Item B4.

B4 a. The number of low-income individuals receiving training to obtain or enhance specific skills in lead related activities during the reporting period (e.g. inspection and testing; construction trade skills, lead hazard control work, conducting community education and outreach work, etc.).

B4 b. The number of low-income individuals employed as a result of receiving this skills training. This total should only include those low-income individuals trained and employed during this report period. However, low-income individuals who were first employed during this quarter, but who may have been trained in a previous quarter, should be included in the current reporting period.

B4 c. The number of property owners, tenants, remodelers, renovators, and maintenance workers receiving training in lead hazard control intervention methods (cleaning, paint stabilization, interim control techniques) during the current reporting period.

B4 d. The number of lead-based paint contractors trained and certified during the current reporting period (Includes all disciplines - inspection/testing, program design, supervisor, abatement work).

B4 e. The number of grantee or partner organization(s) staff receiving training this current reporting period. Training could be related to any program activity or task (e.g. management, supervision, inspection/testing, lead hazard control activities, community education and outreach, data collection, etc.).

B4 f. Any other training activities conducted which are not included in items B4 a.-e.

Item B5. ***Community Education and Outreach Activities***

B5 a-l. Responses to these items should relate to the narrative reply to Items B1-B2. You should list all activities undertaken to reach each target audience during the quarter. (e.g. meetings, presentations, mailings of educational materials and brochures, health fairs, media efforts, etc.). If no activity occurred during the report period, indicate “None” in the appropriate block(s). The number of individuals reached is the cumulative number of recipients who received community education and outreach (e.g. 25 real estate brokers/agents were informed of disclosure requirements at a meeting, with an additional 225 mailed information. The total number of real estate professionals reached during the period would be 250)

Items C4. *Lead Hazard Evaluations and Units in Progress*

Responses to these items should pertain to the number of lead hazard control evaluations (hazard screens, paint inspections, and/or risk assessments) conducted during the quarter. These evaluations should only pertain to units either enrolled or considered for enrollment into the program.

C4 a. The number of lead hazard screens, lead-based paint inspections and/or risk assessments conducted during the current reporting period.

C4 b. The number of units in which ***lead-based paint hazards*** were identified.

C4 c. The number of units at the end of the current reporting period either under contract for lead hazard control work to be undertaken or units where actual lead hazard control work has begun, but the unit has not yet cleared.

Item C5. *Lead Hazard Control - Unit Production*

C5a., C5d., C5f., C5i. The number of units, by occupancy status, in which lead hazard control work was completed and the unit cleared in accordance with HUD Guidelines during the current reporting period.

C5b., C5e., C5g., C5j. Of the number of units completed and cleared, the number of units, by occupancy status, in which other rehabilitation or code work was conducted.

C5c., C5h., C5k. Of the occupied units completed and cleared during the current reporting period, indicate in the appropriate block, the number of units in which the occupants were temporarily relocated while the unit was undergoing lead hazard control interventions.

Item C6. *Age of Units Completed and Cleared*

C6a.- d. Of the total units completed and cleared during the current reporting period (Item C5i), indicate the number of units, by age of housing, in the appropriate block.

Items C7-C8. *Occupant Information of Units Completed*

Of the units completed and cleared during the current reporting period (Item C5i), identify the number of occupants residing in these units at the time that lead hazard control work was initiated.

C7a. The total number of children ***less than*** 6 years of age occupying units at the time lead hazard control work was initiated.

C7b. The total number of children ***less than*** 6 years of age receiving Medicaid.

C7c. The total number of occupants 6 years of age or older (including adults) residing in units at the time that lead hazard control work was initiated.

C8. Of the children ***less than*** 6 years of age identified in item C7a., indicate the number whose pre-hazard control blood lead values fall within the categories outlined in blocks C8a.-C8d.

PART 2 - LISTING OF UNITS COMPLETED AND CLEARED

This section of the report is to provide additional information pertaining to the units in which lead hazard control work was completed and the unit achieved clearance during the current reporting period. Indicate the unit address, city, state, and zip code, for each unit listed. The total number of units included in this listing should equal the total number identified in Block C5i of Part 1.

Identify the lead hazard control, temporary relocation, and rehabilitation costs associated with the work conducted in each unit. Costs only related to the lead hazard control intervention measures used for treating units, (exterior, interior, common areas) clean up work, and waste handling and disposal are to be reported in the "**LHC Intervention Costs**" block. Relocation costs attributed to a unit should be reported in the "**Relocation Costs**" block. Rehabilitation, code correction or other work conducted in conjunction with HUD Lead Hazard Control Grant Program funds in a unit using Community Development Block Grant, HOME funds or other resources are to be included in the "**Rehabilitation or other Work Costs**" block.

A description of these costs is to be included in your narrative response to Item C2 Part 1.

PART 3 - FINANCIAL REPORTING

Items 1-10. The financial information to be submitted for the current reporting period is based on the negotiated budget included in the HUD grant agreement (including any modifications). Expenditures are to reflect Voucher Payment Requests made through the LOCCS. Item 7 should list all sub-grantee organizations individually. If the program uses more than one abatement contractor, they all may be included in one sub-category (as abatement or lead hazard control contractors).