



# WEATHERIZATION PLUS HEALTH TOOLKIT



# TABLE OF CONTENTS

|  |    |
|--|----|
| BACKGROUND   | 1  |
| WEATHERIZATION PLUS HEALTH:<br>CONNECTION BETWEEN WEATHERIZATION AND HEALTHY HOMES             | 2  |
| SECTION I - HOW TO:<br>A STEP BY STEP GUIDE TO BUILDING WEATHERIZATION<br>PLUS HEALTH CAPACITY | 3  |
| LAY THE GROUNDWORK   | 4  |
| WPH in Action: Oklahoma  | 4  |
| CONDUCT A SELF-ASSESSMENT + IDENTIFY WPH CHALLENGES  | 5  |
| SWOT Analysis  | 5  |
| WPH in Action: Mississippi   | 6  |
| DEVELOP AN INTERNAL STRATEGY   | 7  |
| HOLD AN INTERNAL KICKOFF MEETING   | 9  |
| BUILD PARTNERSHIPS   | 10 |
| Characteristics of Successful Partnerships   | 10 |
| IDENTIFY POTENTIAL EXTERNAL PARTNERS   | 10 |
| OUTLINE BENEFITS FOR POTENTIAL PARTNERS  | 11 |
| Partner Types + Potential Benefits of Collaboration  | 12 |
| Foundation for Senior Living Brochure  | 13 |
| OUTREACH TO POTENTIAL PARTNERS   | 14 |
| Communications Outline   | 14 |
| Letter, Email, and Telephone Tips  | 16 |
| HOLD AN EXTERNAL KICKOFF MEETING   | 17 |
| WPH in Action: Connecticut   | 17 |
| Simple Steps to Organize and Follow up on an External Kickoff Meeting                          | 18 |
| DEVELOP REFERRAL SYSTEMS   | 19 |
| Manchester, NH One Touch Energy Efficiency Form  | 19 |
| Multi-Program Eligibility Review Diagram   | 20 |
| WAP + Healthy Homes Referral Process   | 21 |
| DEVELOP SHARED TOOLS   | 22 |
| Connecticut Efficient Healthy Homes Initiative Checklist                                       | 22 |
| Update WAP Data Collection Tools   | 23 |
| Update Partner Data Collection Tools   | 24 |
| Cross Training Between Partners for Home Assessments   | 24 |
| Data Tracking for WPH Initiatives Evaluation and Improvement                                   | 26 |
| New Hampshire One Touch Healthy Homes Checklist  | 26 |

# TABLE OF CONTENTS

|   |    |
|---|----|
| SECTION II - EXPANDING WEATHERIZATION PLUS HEALTH       | 28 |
| FUNDING WEATHERIZATION PLUS HEALTH                      | 29 |
| FEDERAL FUNDING   | 30 |
| U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT (HUD)  | 30 |
| Lead Based Paint Hazard Control & Lead Hazard Reduction |    |
| Demonstration Programs                                  | 30 |
| Lead Technical Studies Program                          | 30 |
| Healthy Homes Technical Studies Program                 | 30 |
| HUD Lead Award Totals and Grantees                      | 31 |
| Community Development Block Grant (CDBG)                | 33 |
| HOME Program  | 34 |
| U.S. CENTER FOR DISEASE CONTROL (CDC)                   | 35 |
| National Asthma Control Program                         | 35 |
| Healthy Homes and Lead Poisoning Prevention Program     | 35 |
| Community Transformation Grants                         | 36 |
| U.S. ENVIRONMENTAL PROTECTION AGENCY (EPA)              | 37 |
| Environmental Justice Small Grants                      | 37 |
| State Indoor Radon Grants                               | 38 |
| State Indoor Radon Program Grants   2012-2014           | 38 |
| U.S. HEALTH AND HUMAN SERVICES (HHS)                    | 39 |
| Prevention and Public Health Fund (PPHF)                | 39 |
| ACA Pilot Projects                                      | 40 |
| STATE FUNDING   | 41 |
| Online Funding Resources                                | 41 |
| UTILITY FUNDING   | 42 |
| WPH In Action: Washington State                         | 42 |
| PRIVATE/FOUNDATION FUNDING                              | 43 |
| Private/Foundation Funding Resources                    | 44 |
| WPH In Action: Massachusetts                            | 45 |
| PUBLICIZING WEATHERIZATION PLUS HEALTH                  | 46 |
| Communications/Outreach Resources                       | 46 |
| Craft a Weatherization Plus Health Story                | 49 |
| SECTION III - IMPLEMENTING WEATHERIZATION PLUS HEALTH   | 50 |
| IMPLEMENTING WEATHERIZATION PLUS HEALTH ACTIVITIES      | 51 |
| STRATEGIES FOR RURAL AGENCIES                           | 51 |
| STRATEGIES FOR URBAN AGENCIES                           | 52 |
| WPH In Action: New York                                 | 53 |
| INTEGRATING WEATHERIZATION WITH LEAD HAZARD CONTROL     | 53 |

# TABLE OF CONTENTS

|   |        |
|---|--------|
| INTEGRATING WEATHERIZATION WITH HOME REPAIR PROGRAMS          | 54     |
| WORKING WITH VOLUNTEER GROUPS                                 | 55     |
| UTILIZING CDBG + HOME FUNDS                                   | 55     |
| WPH In Action: Wisconsin                                      | 56     |
| INCREASING HEALTHY HOMES CLIENT EDUCATION WITH WEATHERIZATION | 57     |
| <br>SECTION IV - WEATHERIZATION PLUS HEALTH WEBSITE           | <br>58 |
| WEATHERIZATION PLUS HEALTH WEBSITE FACT SHEET                 | 59     |
| <br>SECTION V - WEATHERIZATION PLUS HEALTH FAQs               | <br>61 |
| <br>SECTION VI - WEATHERIZATION PLUS HEALTH RESOURCES         | <br>67 |
| WEATHERIZATION PLUS HEALTH TOOLS                              | 68     |
| WEATHERIZATION PLUS HEALTH KEY WEBSITES                       | 69     |
| <br>SECTION VII - APPENDICES                                  | <br>71 |
| STRENGTHS, WEAKNESSES, OPPORTUNITIES AND THREATS (SWOT)       | 72     |
| ORGANIZATIONAL ANALYSIS                                       |        |
| MEMORANDUM OF UNDERSTANDING (MOU) EXAMPLE                     | 76     |
| CONNECTICUT EFFICIENT HEALTHY HOMES INITIATIVE CHECKLIST      | 78     |
| MANCHESTER, NH ONE TOUCH ENERGY EFFICIENCY FORM               | 83     |
| NEW HAMPSHIRE ONE TOUCH HEALTHY HOMES CHECKLIST               | 88     |





# BACKGROUND

The U.S. Department of Energy's (DOE) Weatherization Plus Health (WPH) initiative is a national effort to enable the comprehensive, strategic coordination of resources for energy, health, and safety in low-income homes. Weatherization Plus Health will ensure energy efficient and healthy indoor environments by facilitating the establishment of strong, effective partnerships between Grantees of the **Weatherization Assistance Program (WAP)** and providers of **Healthy Homes** services. The National Association for State Community Services Programs (NASCSP) is implementing the project on behalf of DOE.

Weatherization Plus Health helps communities connect federal, state, and private resources so that residents can access comprehensive solutions to adverse housing conditions.

**Weatherization Assistance Program**, a federal program of DOE, reduces energy costs for low-income families, particularly for the elderly, people with disabilities, and families with children, by improving the energy efficiency of their homes, while ensuring their health and safety.



**Low Income Home Energy Assistance Program (LIHEAP)**, a federal program of the Department of Health and Human Services (HHS), allows funds targeted to assist with utility bills of low-income families to be used in conjunction with DOE's WAP, retrofitting homes to reduce the long-term energy costs.



**Healthy Homes Program**, a federal program of the Department of Housing and Urban Development (HUD), establishes a coordinated, comprehensive, and holistic approach to preventing diseases and injuries that result from housing-related hazards and deficiencies, including but not limited to lead poisoning, asthma, radon exposure, and injury caused by deteriorating housing. The Healthy Homes Program is at the core of the more widespread Healthy Homes initiative supported by several Federal agencies that have formed the Federal Interagency Work Group on Healthy Homes.

**Community Action Agencies (CAAs)** are the primary source for the implementation of anti-poverty initiatives in communities across the United States. With core funding provided by the Department of Health and Human Services Community Services Block Grant (CSBG), CAAs carry out their missions by creating, coordinating, and delivering a broad array of programs and services to their communities with the intent of reducing poverty.

# WEATHERIZATION PLUS HEALTH:

## CONNECTION BETWEEN WEATHERIZATION AND HEALTHY HOMES

Allowable measures under DOE WAP Health and Safety guidelines correlate with concerns of the Healthy Homes network, such as installation of smoke and carbon monoxide detectors, and installation of kitchen and bath fans to prevent excessive moisture. With a primary focus on energy efficiency, WAP often cannot address all of the health and safety related issues in a home. In extreme situations with leaking roofs, chipping and peeling lead based paint, or substandard electrical and plumbing issues, homes must be deferred until additional corrective actions can be made and the home is weatherization ready.

Ensuring “**weatherization readiness**” motivates WAP organizations looking to adopt a Weatherization Plus Health strategy. Deferred WAP homes present administrative burdens; if a home is audited and cannot be weatherized due to health and safety issues, the organization has invested money in a project that cannot be completed unless those issues are addressed. Moreover, the families in deferred homes risk facing future medical bills resulting from home health hazards. Additionally, they do not benefit from the WAP energy efficiency improvements. Identifying additional programs and resources that can help contribute to making homes weatherization ready is crucial to successful WAP operations. WAP operators should keep accurate records to track deferred jobs. An accurate tracking system can help managers pinpoint lost resources from time spent on jobs that are deferred, households that are not being served, and identify and prioritize the most prevalent issues needed to make homes weatherization ready.

*“WEATHERIZATION READY” means energy efficiency work is able to be accomplished without delay.*

A Weatherization Plus Health approach takes steps beyond traditional WAP Health and Safety to coordinate both internal resources (e.g., other home repair programs that may be housed within the same CAA or local agency) and outside partners and resources (e.g., utilities, health organizations, foundations) to correct identified health and safety issues that may be outside the scope or affordability of DOE WAP.

The Weatherization Plus Health approach:

- Reduces deferrals by enabling repairs to make homes “weatherization ready”.
- Supplements WAP health and safety measures to reduce WAP costs and makes more funds available for core energy efficiency measures.
- Addresses additional health and safety related issues that are not necessarily weatherization related but provide more holistic client services.

# SECTION I

HOW TO: A STEP BY STEP GUIDE TO  
BUILDING WEATHERIZATION PLUS HEALTH CAPACITY

# LAY THE GROUNDWORK

Weatherization Plus Health projects are built on the premise that healthy, safe, and energy efficient housing is beneficial for occupants. Like the delivery of weatherization services across the country, actual activities vary widely from project to project. For instance, some of the most prevalent WAP deferral issues in colder, humid climates will differ from those in hot, dry climates. Likewise, WAP agencies may have different strategies for addressing their needs based on their related partnership programs, funds, and other resources.

Strong WPH programs spring from a desire to do as much as we can for the clients we serve, and they require teamwork. Lay the groundwork for a successful program by determining realistic goals based on community needs and organizational capabilities, and getting buy-in on these goals from internal staff before approaching external partners. This helps build organizational enthusiasm for the project by letting everyone take part in the development of the program and setting of goals and priorities. Included in this section are tips to help you:

- Conduct an organization self-assessment.
- Identify specific Weatherization Plus Health challenges.
- Develop an internal strategy for implementation to define realistic goals.
- Hold an internal “kick-off” meeting.

## WPH IN ACTION

### OKLAHOMA

**ISSUE:**  
EXTREMELY HIGH ASTHMA RATES

**SOLUTION:**  
WPH measures target indoor asthma triggers through weatherization strategies such as increased ventilation.



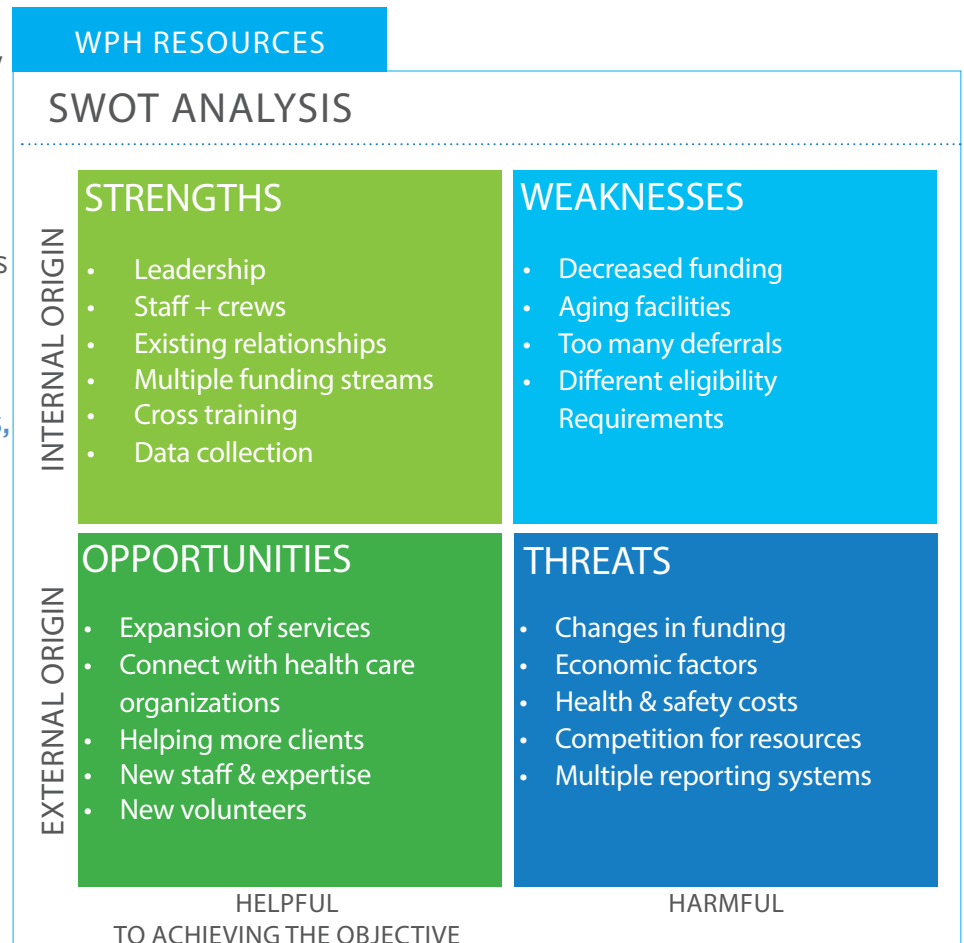
# CONDUCT SELF-ASSESSMENT + IDENTIFY WPH CHALLENGES

Engage decision makers early in the planning process to avoid “fits and starts” during implementation.

Determine your organization’s capacity for Weatherization Plus Health implementation by performing a self-assessment using a **Strengths, Weaknesses, Threats, and Opportunities (SWOT) analysis** to:

- Outline shared goals.
- Target measures of success.
- Determine your organization’s strengths and weaknesses.
- Identify internal programs that can assist with the project and clarify responsibilities of key staff.
- Set realistic timelines given staffing capacity.

Above is an example of a SWOT analysis with a number of attributes that are consistent across the country. Use this tool to identify other attributes that are specific for your organization. There is a larger version of this SWOT analysis in the Appendix along with additional guidance to help you complete your analysis.



By necessity, a Weatherization Plus Health approach will combine **different sources of funding** that may require jumping through different regulatory hoops and using staff from disparate departments. Therefore, it is important during the self-assessment to also **identify your organization's internal challenges**.

### EXAMPLES:

1. We defer “x” number of homes each year due to leaky roofs that we cannot afford or are not allowed to fix.
2. Client bases and income guidelines for programs may be hard to reconcile.
3. Programs with high client demand may have long waiting lists.

**List three of your own.**

---

---

---

## WPH IN ACTION

### MISSISSIPPI

#### ISSUE:

DECREASE WEATHERIZATION DEFERRALS



#### SOLUTION:

One of Mississippi's Weatherization sub-grantees, [South Central Community Action Agency \(SCCAA\)](#), formed an innovative partnership with [BankPlus](#) to help decrease and ultimately prevent Weatherization deferrals.

In the beginning of 2011, BankPlus worked with SCCAA to assist them in applying for a Federal Home Loan Banks' [Affordable Housing Program \(AHP\)](#). Each year, the bank uses 10% of its profits to fund the AHP grants. The grants are given out through its member institutions to organizations that focus on developing or improving affordable housing throughout Arkansas, Louisiana, Mississippi, New Mexico and Texas.

In April 2011, the Federal Home Loan Bank of Dallas (FHLB Dallas) and BankPlus awarded a \$500,000 AHP grant to SCCAA to repair homes and remediate any health and safety hazards so that the homes can now qualify for Weatherization services. To date, SCCAA has used the grant funds to repair 95 homes, at an average of [\\$3,500 per unit](#), and dramatically reduce the number of Weatherization deferrals.

# DEVELOP INTERNAL STRATEGY

Developing an internal implementation strategy to define realistic goals and address common challenges is key to Weatherization Plus Health success. Break down important questions by category such as Timeline, Staffing, and Measuring Success. Below are some important questions to ask your team during the strategy development and additional space for you to include your own specific questions.

## **TIMELINE:**

- What are realistic expectations for the short-, medium-, and long-term?

---

---

## **STAFFING:**

- What level of staffing is needed to realize the short-, medium-, and long-term goals?
- What intra-agency programs can contribute to ensure success?

---

---

## **CHALLENGES:**

- Are there any particularly tenacious challenges?

---

---

## **PREPARATION:**

- How do we ensure that as many homes as possible are made “weatherization ready”?

---

---

## **MEASURING SUCCESS:**

- How will we document success?
- What tracking systems within our various programs can be used to collect data?

---

---



We will talk more about outlining benefits for partners on page 11. In preparation for your internal kickoff meeting, identify the client, organization, and societal benefits that are applicable to your organization:

### ORGANIZATION BENEFITS

*Example:* Reducing rates of WAP deferrals helps avoid wasted administrative and auditing costs.

---

---

---

---

### CLIENT BENEFITS

*Example:* More likely to receive comprehensive services without having to fill out multiple applications.

---

---

---

---

### SOCIETAL BENEFITS

*Example:* Reduction in substandard housing stock since homes previously considered beyond the scope of WAP will now be treated.

---

---

---

---

# HOLD INTERNAL KICKOFF MEETING

The next step is to hold an internal “kickoff” meeting to gain staff acceptance and understanding for your strategy and provide an opportunity for staff input.

## Goals of the internal kickoff meeting include:

- Review and get agreement on goals and measures of success. Add to these to include goals of other programs with which you will be working.
- Identify who is responsible for what tasks.
- Identify which internal programs can address certain issues in the homes targeted for WPH. Is there a program to help with roof repair or fall prevention?
- Outline internal referral procedures and designate points-of-contact to coordinate referrals for each participating partner.
- Determine which program's data collection software is most conducive to sharing information about referrals made and resultant outcomes.
- Identify barriers to making referrals to combine WAP and healthy homes services, and ensuring client follow up.

## DRAFT WEATHERIZATION PLUS HEALTH INTERNAL MEETING AGENDA

### 9:30 am – 10:00 am: Welcome & Introductions

*Describe the general goals of a Weatherization Plus Health initiative to attendees - “Safer, healthier homes for the families we touch, and the reduction of WAP deferrals.”*

### 10:30 am – 11:00 am: Meeting Objectives

*Develop clear roles for partners and timeline for implementation.*

### 11:00 am - 11:15 am: Break

### 11:15 am - 12:00 pm: Partner Reports

*Discuss current funding and projects relevant to Weatherization Plus Health. List opportunities for collaboration and barriers to implementation.*

### 12:00 pm - 1:00 pm: Networking Lunch

### 1:00 pm – 3:00 pm: Strategy for Action & Timeline for implementation

*Review partnership Memorandum of Understanding (MOU).  
Set timeline for revising tools (e.g. - assessment forms, referral processes, data collection, etc.)  
Establish monthly meetings and set agenda for next meeting.  
Identify and assign next steps.*

### 3:00 pm: Adjourn

*Sample internal kickoff meeting agenda.*



*It is important to allow all parties to have a voice at the kickoff meeting.*

# BUILD PARTNERSHIPS

As previously stated, WAP funds are often not adequate to address the repair and/or health and safety issues found in many of the homes of needy WAP applicants. In addition, there is no other single program or funding source that addresses the wide range of needed measures to make all homes weatherization ready. Building partnerships is often a difficult, but critical step in the Weatherization Plus Health initiative process. It involves identifying local organizations that are already performing complimentary work to Weatherization and/or organizations with similar interests, such as improving the lives of the elderly population. Internal partnerships have already been identified (if applicable). Included in this section are tips to help you:

- Identify potential external partners.
- Outline the benefits for potential partners.
- Hold an external kickoff meeting.
- Develop shared tools.
- Develop referral systems.

## WPH RESOURCES

### CHARACTERISTICS OF SUCCESSFUL PARTNERSHIPS

- Respect for each partner's autonomy.
- Trust, openness, and mutual concern.
- Respect for the mission of each partner agency.
- Recognition of what each partner does well.
- Patience, flexibility and adaptability.
- Willingness to share resources for the benefit of all partners involved.

### *IDENTIFY POTENTIAL EXTERNAL PARTNERS*

Working with internal partners first, assess each program's community partners to determine what role they can fulfill. Next, **generate a list of other local organizations** with common interests to Weatherization.

---

---

---

Once a list of potential partners is compiled, group them into categories — [healthcare](#); [housing rehab](#); [education](#); [etc](#). These categories are helpful for the next phase — Outlining Benefits for Partners.

### *OUTLINE BENEFITS FOR POTENTIAL PARTNERS*

No matter how altruistic their mission, potential partners are unlikely to respond to your outreach if it does not answer these questions:

- What benefit will the partner organization receive?
- What benefits will the partner organization's clients receive?
- What are the potential roles and responsibilities the partner would perform?

For each category of partners, list the benefits of the partnership you are proposing. Some suggestions to consider are:

### *ORGANIZATION BENEFITS*

- Close coordination between community programs puts organizations on strong footing when applying for future funding.
- Coordinating funding means more homes can be served with more measures performed for maximum positive impact.

### *CLIENT BENEFITS*

- Reduced energy and medical expenses mean more money to pay for other necessities.
- Healthier homes mean more productive and happier residents.

### *SOCIETAL BENEFITS*

- Reduced carbon emissions and subsidized medical costs benefit everyone.
- Communities gain a well-trained Weatherization and Healthy Homes workforce as a resource.
- Better housing and healthier families make stronger communities.

## Identify other benefits:


### WPH RESOURCES

#### PARTNER TYPES + POTENTIAL BENEFITS OF COLLABORATION

| PARTNER  | BENEFIT  |
|--|--|
| <b>Weatherization Assistance Program (WAP)</b>                       | <i>The Weatherization Assistance Program touches more low-income homes than any other federal program. Partnering with Weatherization is likely to increase exposure, broaden the impact of your initiative, and help the clients you serve save even more money.</i>  |
| <b>Low Income Home Energy Assistance Program (LIHEAP)</b>            | <i>LIHEAP officials have been long time WAP partners and are often willing to discuss additional options within their purview to enhance the services to better serve low-income households.</i>   |
| <b>Housing Repair Programs</b>                                       | <i>Various Housing Programs, such as the USDA Rural Development loan and grant programs and HUD's HOME program, share some common objectives with WAP operators in addressing home repair / rehabilitation. Collaboration with these groups may lead to additional resources that mutually benefit participating organizations.</i>  |
| <b>Community Development</b>   | <i>Community Development Departments typically administer CDBG (and HOME) funds which, in most communities, can be used to address blight and unsafe living conditions. Roof repairs, electrical repairs and plumbing repairs are often covered. Lead hazards are also sometimes covered.</i>  |
| <b>Research Institutions Universities and Cooperative Extensions</b> | <i>Research institutions can provide data collection to assist in measuring the success of your initiative. University extension programs, covering most counties, often have integrated pest management programs or healthy homes education programs that can help with client education.</i>   |
| <b>Tenants' Rights Organizations</b>                                 | <i>Tenant's rights organizations usually have knowledge of the law that can help determine when landlords are required to make changes in buildings to improve living conditions.</i>  |
| <b>Advocacy Groups</b>   | <i>Advocacy groups can be instrumental in getting the word out about your initiative. They may also have political clout at the State and local level to prioritize more healthy homes related funding in budget discussions. For example, State Community Action Associations have firsthand knowledge of the energy burden and health issues of low-income households and can advocate on their behalf.</i>  |
| <b>Local Media</b>   | <i>Local media, such as newspapers and talk radio, can also be instrumental in getting the word out about your initiative. Often, local talk radio need guests on their programs. Here, you can showcase your organization's work. You can invite local media to Weatherization site demonstrations that can also highlight WPH partnerships and measures. Developing professional relationships with reporters and editors can lead to increased consideration of your story and article.</i> |
| <b>Health Departments</b>  | <i>State and local health departments often run lead poisoning prevention, asthma, and/or radon programs. They can be extremely helpful in providing client education, cross training, data collection, and mitigation services if funding allows.</i>   |
| <b>Smoking Cessation Programs</b>                                    | <i>Smoking cessation programs will be good partners in extending the impact provided by your healthy homes interventions. They can provide client education, materials for quitting smoking, and advocacy for smoke free building laws.</i>  |
| <b>Volunteer Home Repair</b>   | <i>Volunteer home repair programs are often an untapped resource. Habitat for Humanity and Rebuilding Together, for example, put special focus on improving the energy efficiency and health and safety in the homes they touch.</i>   |
| <b>Housing Code Enforcement</b>                                      | <i>Housing code enforcement can identify the needed areas of home improvement, and help to identify available funding streams to improve health and safety in homes. They could also cross train to help your organization better identify home health hazards.</i>  |
| <b>Utility Companies</b>   | <i>Utility companies are committed and sometimes required to offer energy efficiency programs. Utility companies can therefore be used for client education, referrals to your program, data collection, and loans for clients who may not qualify for WAP services.</i>   |
| <b>Head Start</b>  | <i>Partnering with Head Start will broaden the scope and impact of your home intervention, increasing children's chances of performing well in school. Head Start can refer their clients to programs that improve the home environment, increasing their success rate.</i>  |
| <b>Income Support Programs</b>                                       | <i>Partnering with income support programs such as WIC, SNAP, and Foreclosure Prevention will help to provide extra stability for clients. This helps ensure that clients know where they can access income supports so that they can remain in their homes and enjoy the benefits of the interventions provided.</i>  |
| <b>Insurance Companies</b>   | <i>Insurance companies want to keep their clients healthy. The less money they have to pay out, the better their bottom line looks. As such, insurance companies may be inclined to provide support for your initiative on the grounds of prevention services.</i>   |


Once you have identified the benefits for WPH partnering, highlight these key points in outreach materials. For example, the **Foundation for Senior Living (FSL) in Phoenix, AZ**, developed a tri-fold brochure (see below) to initiate a Weatherization Plus Health partnership with a local health insurance company.

It is important to be direct and clear when highlighting the benefits that potential partners and their clients will receive from a coordinated Weatherization Plus Health approach. Specific data, including energy savings and benefits information, are an integral part of Fact Sheets and short informational briefs.



PUBLIC HEALTH AND  
WEATHERIZATION  
PLUS HEALTH

An Opportunity



Foundation for  
Senior Living

*Thirty Years of Care by Design*

1201 East Thomas Rd.  
Phoenix, AZ 85014  
(602) 285-1800  
info@fsl.org

| HEALTH + HOUSING: THE FACTS   | HOUSING AND HEALTH: THE COSTS   | THE WEATHERIZATION ASSISTANCE PROGRAM   |
|---|---|---|
| <p><b>6,000,000</b> homes in the United States have significant health and safety problems. In the West, <b>4.2%</b> of homes have moderate or severe physical problems.<sup>1</sup></p> <p><b>90%</b> of Americans' time is spent indoors, much of that is in the home.</p> <p><b>\$77 BILLION</b> U.S. families spend \$77 billion on preventable health problems, or about <b>3.5%</b> of health care expenditures.</p> <p>Unsafe housing creates unnecessary health care costs and preventable illness, which can diminish life's opportunities for children and families.</p> <p>Addressing housing-related health and safety hazards through residential energy efficiency retrofits protects our communities and families.</p> | <p>In 2010, <b>8,076</b> Arizona residents were discharged from hospitals with asthma as their primary diagnosis.<sup>2</sup> Asthma costs the United States <b>\$56 billion</b> annually.<sup>3</sup> Each dollar spent reducing indoor asthma triggers cuts healthcare costs by <b>\$10</b> on average.</p> <p>Lead poisoning costs the United States <b>\$43.4 billion</b> annually. Each dollar invested in lead hazard control returns between <b>\$17</b> and <b>\$221</b>.<sup>4</sup></p> <p>Over <b>115,000</b> Arizona households earn less than 50% of the Federal Poverty Level and have energy bills totaling <b>59.6%</b> of their incomes.<sup>5</sup> Weatherization makes housing more affordable.</p> <p>In 2010 <b>21,649</b> Americans over 65 years old died as a result of an unintentional fall.<sup>6</sup> Fixing household safety hazards can prevent costly injuries and deaths.</p> | <p>The mission of the Weatherization Assistance Program is to reduce energy costs for low-income families, particularly for the elderly, people with disabilities, and children, while ensuring their health and safety.</p> <p>The Weatherization Assistance Program (WAP) is primarily an energy efficiency program, but adopts the "<b>House as a System</b>" approach, recognizing the house is a system of interdependent parts and the operation of one part of a home affects others.</p> <p>WAP uses the most up-to-date technology and diagnostic tools to protect the health and safety of clients. Weatherization:</p> <ul style="list-style-type: none"> <li>• Ensures proper indoor ventilation.</li> <li>• Tests and repairs or replaces furnaces, hot water heaters, and other combustion appliances.</li> <li>• Provides smoke and carbon monoxide detectors.</li> </ul> <p>When the U.S. Department of Energy's WAP faces health and safety conditions in a home that require the deferral of services, healthy housing programs can step in. Once a healthy homes partner remediates the problem, the home can be weatherized, ensuring that those who most need services receive them.</p> |

1. American Housing Survey, 2009  
2. Arizona Department of Health Services  
3. CDC National Asthma Control Program  
4. Gould, Elise "Childhood Lead Poisoning: Conservative Estimates of the Social and Economic Benefits of Lead Hazard Control." Environmental Health Perspectives, 2009 July; 117(7): 1162-1167  
5. Home Energy Affordability Gap State Fact Sheets  
6. CDC Web-based Injury Statistics Query and Reporting System

*"The connection between health and dwelling is one of the most important that exists." - Florence Nightingale*

The cover and inside view of the tri-fold brochure from the Foundation for Senior Living.

# OUTREACH TO POTENTIAL PARTNERS

## COMMUNICATIONS OUTLINE\*

Before drafting a note or picking up the phone, take a few moments to fill out this communications outline. Organizing your thoughts will help the message come across clearly.

### Who is your audience?

---

---

---

### What is the desired outcome you want from your audience?

*(e.g. attend the kickoff meeting)*

---

---

---

---

---

---

---

---

---

---

\* - Modified from "As We Speak", Peter Meyers & Shann Nix. Atria Paperback. 2011.

### In order to achieve this desired outcome, the partner needs to:

*(Be as specific as possible; general examples provided and space to add your own outcomes)*

| KNOW  | FEEL  | IDENTIFY  |
|---|---|---|
| <ul style="list-style-type: none"><li>• The benefits of partnership.</li><li>• Their potential roles &amp; responsibilities.</li><li>• What they are willing/able to provide.</li><li>•</li><li>•</li><li>•</li><li>•</li></ul> | <ul style="list-style-type: none"><li>• Excited about a potential partnership.</li><li>• Optimistic about the WPH outcomes.</li><li>•</li><li>•</li><li>•</li><li>•</li><li>•</li></ul> | <ul style="list-style-type: none"><li>• What is at stake for them.</li><li>• Why partnering makes sense for their organization.</li><li>•</li><li>•</li><li>•</li><li>•</li><li>•</li></ul> |

### What's your elevator pitch?

*(An elevator pitch is when you can deliver a summary of your idea in the span of an elevator ride, approximately 30 seconds to 2 minutes, such as "The health of our community and strength of our organizations can be enhanced through a Weatherization Plus Health partnership.")*

---

---

---

---

---

---

In your first communication, get the organization's interest by using the points under **Identify**, tell them what they need to know in a way that addresses how you want them to feel, and wrap up by asking them about the points on which you want them to agree.



With benefits and potential roles in hand, it is time to invite potential partners.

**Will you send a letter by mail?**

**Contact partners via email?**

**Place personal phone calls to gauge interest?**

Whichever you choose, remember, time is valuable, so craft a concise message to get your point across as clearly and briefly as possible. Below are helpful tips to keep in mind.



### LETTER TIPS

- Use official letterhead stationery.
- Proofread, proofread, proofread.
- Keep letter to one page.
- Include clear instructions for follow-up.



### EMAIL TIPS

- Use meaningful subject line.
- Proofread, proofread, proofread.
- Keep email to three brief paragraphs or less.
- Clearly identify the next steps and what you expect from them.



### TELEPHONE TIPS

- Introduce yourself and your purpose right away.
- Ask if now is a good time - schedule better time if it's not.
- Clearly lay out your ideas.
- Determine concrete next steps before hanging up.

# HOLD AN EXTERNAL KICKOFF MEETING

The next step is to hold an external kickoff meeting. The meeting is an opportunity to invite organizations to discuss their programmatic focus and what expertise, tools, and resources they can bring to the table. Carefully research the organizations you consider inviting. For a first meeting, you may consider looking for organizations that will be like-minded and supportive of the initiative. It can be very easy to get derailed if an initial meeting involves too many dissimilar organizations. While the goal is to ultimately have a widespread and diverse group of partners, an initial core group of enthusiastic representatives can be a strong and compelling foundation that can reach out to and include other more tangentially related organizations for future meetings and expansion of the WPH initiative.

## Goals of the external kickoff meeting:

- Review the overall purpose of the meeting and the goal of the WPH initiative.
- Map out each organization's area(s) of expertise and then what tasks and responsibilities each organization will take on.
- Identify if any partners can address structural or health and safety issues in homes targeted for WPH (e.g. roof repairs).
- Discuss data collection software and what data is most important to share between organizations on referrals, etc.

## WPH IN ACTION

### CONNECTICUT

#### Issue:

DEVELOPING PARTNERSHIPS

#### Solution:

The [United Illuminating Company](#), who leads a successful Weatherization Plus Health initiative in Connecticut, kicked off its first external meeting by asking each participating organization:

- What health and safety or energy efficiency interventions do you provide?
- How many units could you serve in a Weatherization Plus Health partnership?
- How much funding would you be able to dedicate to Weatherization Plus Health homes?
- How do you prioritize services?

Posing these questions to the participating organizations helped United Illuminating frame the meeting properly and set the stage to have a productive and successful meeting.



## SIMPLE STEPS TO ORGANIZE A KICKOFF MEETING AND FOLLOW-UP ACTIVITIES

| STEP | ACTION ITEM  | BY WHEN? | COMPLETED BY WHOM? |
|------|--|----------|--------------------|
| 1    | Determine the date, time, and location of the meeting.   |          |                    |
| 2    | Identify resources, such as Community Services Block Grant funds, available to assist with logistical costs.   |          |                    |
| 3    | Outline purpose of the meeting to be included in all materials and draft agenda.   |          |                    |
| 4    | Develop a list of invitees.  |          |                    |
| 5    | Create an invitation letter for invitees and a fact sheet about your agency.   |          |                    |
| 6    | Send invitations (email, mail, or phone) out 2 weeks in advance of meeting. Make sure there is a RSVP date included that is at least 2 days before the meeting.  |          |                    |
| 7    | Conduct a status assessment on each of the participants (and include in an asset mapping matrix) outlining systematic referral systems already in place.   |          |                    |
| 8    | Share brochures and information tools with potential partners prior to the meeting.  |          |                    |
| 9    | Conduct the meeting and follow up with notes on “Next Actions” agreed to during the meeting.   |          |                    |
| 10   | Draft <b>Memorandum of Understanding (MOU)</b> between the organizations (see example in Appendix). <ul style="list-style-type: none"> <li>• Codify roles and responsibilities.</li> <li>• Document referral strategies between programs.</li> <li>• Set timelines for accomplishing established goals.</li> </ul>   |          |                    |
| 11   | Circulate “Next Action” strategies and timelines discussed at the meeting. Possible items might include: <ul style="list-style-type: none"> <li>• Amending intake and/or assessment forms to include check-boxes for referrals to community partners.</li> <li>• Adding status of referrals to community partners to client tracking software.</li> <li>• Adding health and safety and energy conservation information to client education materials.</li> <li>• Developing cross-training for partners to recognize home health hazards to generate referrals for clients in need.</li> </ul> |          |                    |
| 12   | Determine schedule for follow-up meetings (bi-weekly, monthly, etc.) including dates, times, and location.   |          |                    |

# DEVELOP REFERRAL SYSTEMS

## COMMON BARRIERS TO SUCCESSFUL PARTNERSHIPS

- Client eligibility guidelines differ.
- Incongruous service territories.
- Long waiting lists.
- Programmatic silos.
- Funding cuts.
- Confidentiality standards can make sharing client data difficult.

## CLIENT CONFIDENTIALITY

While health-specific data protected by the Health Insurance Portability and Accountability Act (HIPAA) should not be shared among partners, housing observations and conditions can be.

Some WAP providers distribute a “**Consent for Referral**” form during client intake. By signing the form, the client acknowledges and grants permission for the organization to generate referrals to partners based on conditions found in the home during the initial audit.

## ELIGIBILITY REQUIREMENTS BY PROGRAM

Navigating client eligibility guidelines for various programs can be difficult and community partners often must adhere to these eligibility guidelines absent major policy change. While there may be no changing these requirements, the best way to adapt to them is to acknowledge them upfront and cast a wide net when developing partnerships.

Developing a coherent, logical referral system is key to Weatherization Plus Health success. Building off the Asset Mapping Matrix created in the initial kickoff meeting, the system creates an action plan when clients enter the intake process through any participating partner organization. In creating an effective referral system, agencies must first address some of the barriers mentioned in the sidebar to the left, including sharing client data, varying income eligibility, and differing coverage areas.

MANCHESTER ONE-TOUCH ENERGY EFFICIENCY & HEALTHY HOMES CHECK UP FORM

| PROGRAM INFORMATION  |                         |     |                          |
|--|-------------------------|-----|--------------------------|
| Administering Program:   | Visitor Name:           |     |                          |
| Date:  | Client Referral #:      |     |                          |
| CLIENT INFORMATION   |                         |     |                          |
| Client Name:   | Home phone:             |     |                          |
| Street Address:  | Work phone:             |     |                          |
| City, Zip:   | Email:                  |     |                          |
| Address:   | Apt. #                  |     |                          |
| Best time to call: Mon. am/pm Tues. am/pm Wed. am/pm   | Thurs. am/pm Fri. am/pm |     |                          |
| Primary Language: English Spanish Nepali Chinese Swahili Bosnian Somali Other                |                         |     |                          |
| Landlord Name:   | Landlord Phone:         |     |                          |
|  | Landlord email:         |     |                          |
| DEMOGRAPHICS   |                         |     |                          |
|  | No                      | Yes | Comments                 |
| 1 Any residents >62 yrs of age?  |                         |     |                          |
| 2 Any disabled residents?  |                         |     | Describe:                |
| 3 Any children <6 years old?   |                         |     |                          |
| 4 Any pregnant women?  |                         |     |                          |
| 5 Do residents own home?   |                         |     |                          |
| 6 Do any residents receive federal assistance? (WIC, Head Start, Fuel Assistance, Section 8) |                         |     | Describe:                |
| 7 Health Insurance?  |                         |     | Type:                    |
| 8 Primary Care Provider?   |                         |     | Doctor's Name: Location: |

I consent to release of the above information & the Energy Efficiency Checkup Form to \_\_\_\_\_ (referring organization) herein referred to as the Primary Organization. I further authorize the Primary Organization to share this information with the health care providers & other social service agencies to which I am being referred. I understand that a representative from these referral agencies may contact me directly to arrange additional follow-up. I understand that this agreement for the release & exchange of information is valid for a one-year term from the signature date below, & I understand this release may be revoked at any time with a written request to the Primary Organization. I understand that I may request a copy of this signed release.

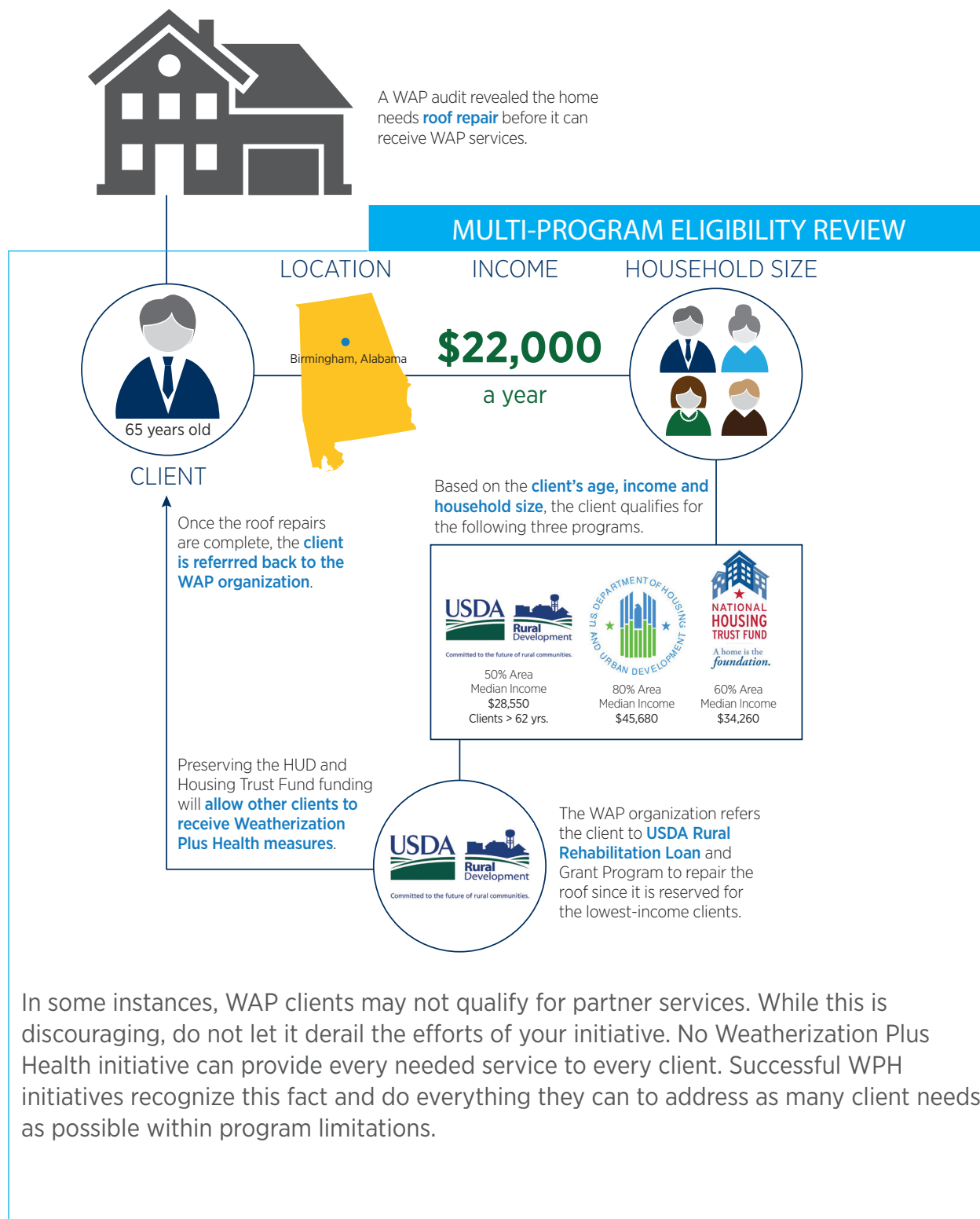
Signature of Client/Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Manchester "One Touch" Healthy Homes, Page 1 of 5

*The Manchester, NH One Touch Energy Efficiency & Healthy Homes Check Up Form.*

*See appendix for the complete form or visit:  
<http://www.nascsp.org/data/files/healthyhomes/nhonetouchassessmentform.pdf>*

If a client needs services that are offered by multiple partners and qualifies for each of them based on income requirements, it may be best to refer the client to the partner whose program has the most restrictive income-eligibility requirements. This helps save resources for clients who qualify for fewer programs. A diagram of this process is provided.



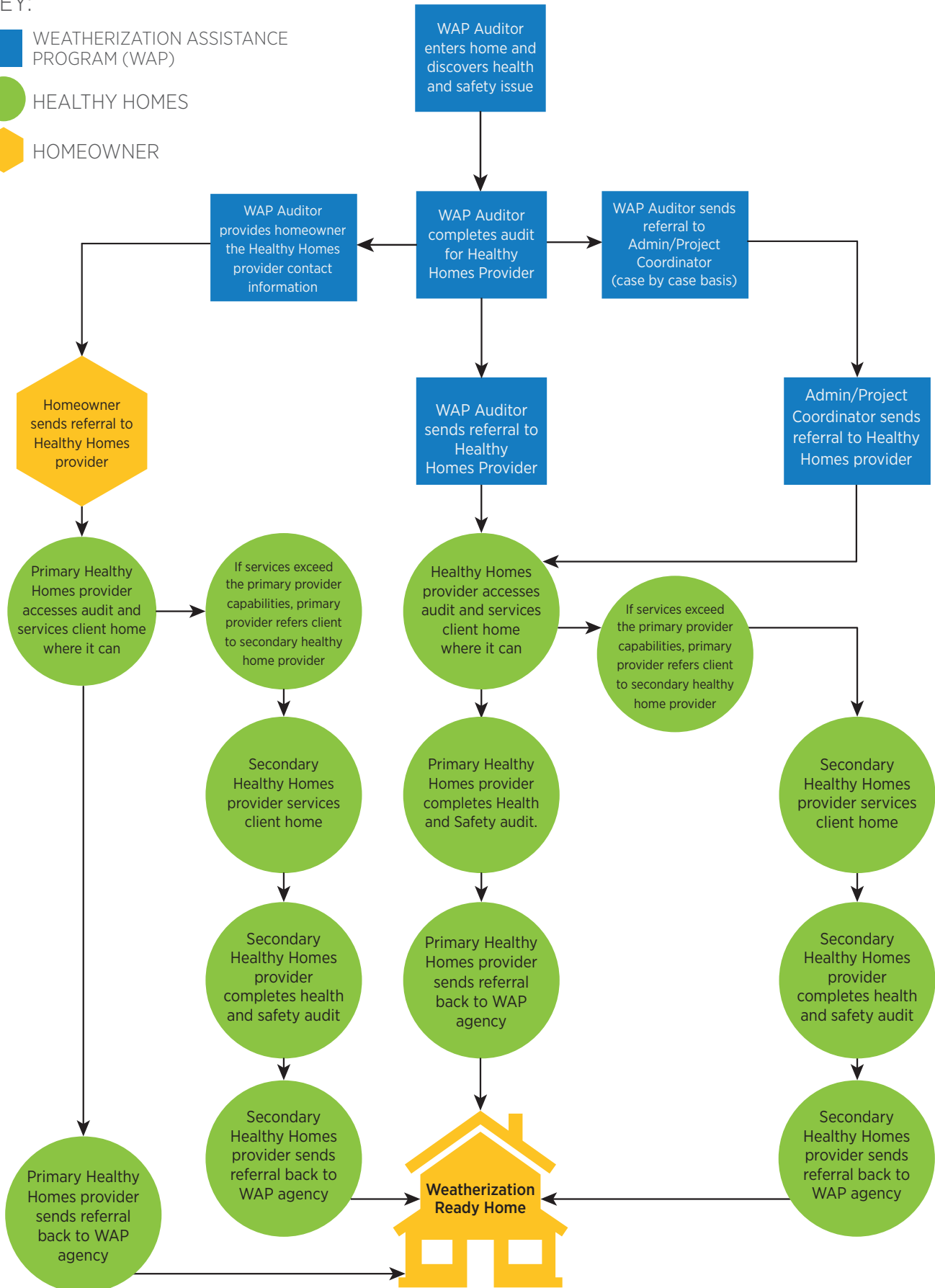
# WAP + HEALTHY HOMES REFERRAL PROCESS

KEY:

 WEATHERIZATION ASSISTANCE PROGRAM (WAP)

 HEALTHY HOMES

 HOMEOWNER



# DEVELOP SHARED TOOLS

Now that you've identified your internal and external partners, which issues they can address, and your referral policies, you can streamline the referral process by developing or updating data collection and assessment tools. Some of the needed information can be obtained in the application/intake process, while the majority will likely have to be gathered during the WAP audit.

The client questionnaire should focus on health concerns and client-reported potential hazards that could be exacerbating these concerns. Most common assessment tools, for example, will pose questions to clients such as:

- Does anyone in the home suffer from asthma or allergies?
- Are your heating/cooling bills exceptionally high?
- Is your home uncomfortably cold in the winter and/or hot in the summer?

Include prompts for follow-up questions where appropriate. For example, if the **client answers yes** to “Does anyone in the home suffer from asthma or allergies?”, the technician should ask questions to see if asthma or allergies are potentially made worse by health and safety issues present in the home, such as:

- Have you seen evidence of mold or mildew in the home?
- Have you seen evidence of pests, such as cockroaches or mice, in the home?
- Do you own any pets?
- Does anyone in the home smoke tobacco indoors?

| Connecticut Efficient Healthy Homes Initiative – Healthy Homes Checkup  |   |   |             |  |
|---|---|---|-------------|--|
| CUSTOMER NAME:  |   | ADDRESS:  |             |  |
| <b>DIAGNOSTICS</b>  |   |   |             |  |
| Carbon Monoxide (CO) Measurements (ppm)   | Room with Heating System  | Room with Water Heater  | Living Area | Kitchen  |
| <b>INTERVENTION OPPORTUNITIES</b>   |   |   |             | <b>RECOMMENDATION</b>  |
| See Healthy Homes Action Plan for allowable activities. Gray-shaded items are only eligible for referral unless otherwise indicated. Resident education should be provided for any issues observed. Certain conditions posing risks to workers and occupants may require deferral and are marked with an asterisk*. |   |   |             |  |
| <b>Air Conditioning System</b><br><input type="checkbox"/> Check if none present  | AC System Code (from NEAT Data Collection Form):<br>Is system operable? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Presence of at-risk occupants (elderly, disabled)? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Health/safety concerns:<br><input type="checkbox"/> Yes <input type="checkbox"/> None  |   |             | <input type="checkbox"/> Repair<br><input type="checkbox"/> Replace<br><input type="checkbox"/> Install  |
| <b>Heating System</b><br><input type="checkbox"/> Check if none present   | Heating System Code (from NEAT Data Collection Form):<br>Is system operable? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Is system red-tagged? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Health/safety concerns:<br><input type="checkbox"/> Yes <input type="checkbox"/> None  |   |             | <input type="checkbox"/> Clean-Tune-Test<br><input type="checkbox"/> Repair<br><input type="checkbox"/> Replace<br><input type="checkbox"/> Install  |
| <b>Solid Fuel Heating (Wood, Coal)</b><br><input type="checkbox"/> Check if none present  | Type:<br><input type="checkbox"/> Primary heat source <input type="checkbox"/> Secondary heat source<br>Condition (inspect chimney and flue; perform combustion appliance zone depressurization):<br>Does the heating source present a health or safety risk to the occupant? <input type="checkbox"/> Yes <input type="checkbox"/> No  |   |             | <b>PRIMARY:</b><br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Repair<br><input type="checkbox"/> Replace<br><b>SECONDARY:</b><br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Repair |
| <b>Space Heaters</b><br><input type="checkbox"/> Check if none present  | <b>Vented Combustion</b><br>(Treat as furnace.)<br>Is system operable? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Is system red-tagged? <input type="checkbox"/> Yes <input type="checkbox"/> No   | <b>Unvented Combustion</b><br>Unvented combustion space heater present? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Does the unit have an ANSI Z21.11.2 label? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Air free carbon monoxide test: <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Results:<br>REQUIRED: Remove, except as secondary source meeting ANSI Z21.11.2<br>Stand alone electric space heater present? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Primary heat source <input type="checkbox"/> Secondary heat source<br>Adequate power supply (check circuitry)? <input type="checkbox"/> Yes <input type="checkbox"/> No |             | <input type="checkbox"/> Repair<br><input type="checkbox"/> Replace<br><input type="checkbox"/> Install<br><input type="checkbox"/> Remove   |
| <b>Unvented Combustion Appliances</b><br><input type="checkbox"/> Check if none present   | <b>NO BLOWER DOOR TEST OR INSULATION UPGRADE WITH UNVENTED APPLIANCES</b><br>Unvented combustion appliances present (check all that apply):<br><input type="checkbox"/> Gas clothes dryer<br><input type="checkbox"/> Fuel-fired space heaters<br><input type="checkbox"/> Gas logs<br><input type="checkbox"/> Charcoal<br><input type="checkbox"/> Stoves (check burners for operability, flame quality)<br><input type="checkbox"/> Other:<br><input type="checkbox"/> Clothes dryer improperly vented (gas or non-gas)<br>REQUIRED: Conduct combustion safety testing. Proper venting to outside is required. Test naturally venting appliances for draft and spillage. |   |             | <input type="checkbox"/> Correct existing venting<br><input type="checkbox"/> Vent unvented combustion appliances<br>Describe:<br><input type="checkbox"/> Install dryer vent  |
| <b>Ventilation</b><br><input type="checkbox"/> Check if none present  | Check all that apply:<br>Bath fan? <input type="checkbox"/> Yes <input type="checkbox"/> No Operational? <input type="checkbox"/> Yes <input type="checkbox"/> No Vented to outside? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Kitchen fan? <input type="checkbox"/> Yes <input type="checkbox"/> No Operational? <input type="checkbox"/> Yes <input type="checkbox"/> No Vented to outside? <input type="checkbox"/> Yes <input type="checkbox"/> No  |   |             | <input type="checkbox"/> Install bath fan<br><input type="checkbox"/> Install kitchen fan  |

The Connecticut Efficient Healthy Homes Initiative - Healthy Homes Checklist is an example of a shared assessment/data collection tool. See Appendices for full form.

If the **client answers yes** to any of these questions, the technician may refer the client to partners who can mitigate the identified health and safety issue (in this example - pests or mold) and provide education to manage asthma symptoms.

The client questionnaire should be followed with a **brief visual assessment** to get an idea of the scope of needed services. Common housing-related hazards listed on the visual inspection form may include:

- Peeling or chipping paint which can be a threat to children if the paint is lead-based.
- Mold and/or mildew.
- Pest infestations.
- Indoor smoking which can trigger asthma symptoms.
- Missing handrails, which can be a fall hazard, particularly in homes where elderly clients live.

The best way to generate referrals is to create a chart so community partners can document where problems lie in the home. **See page 22 or Appendix for the Connecticut Efficient Healthy Homes Initiative's home hazard matrix**, which allows for easy identification of potential lead, mold, pest, and structural issues. Use this chart as a template to create your own tool.

WAP agencies starting Weatherization Plus Health initiatives should begin crafting common data collection and assessment tools soon after the initial kickoff meeting to unveil at the next partner meeting. To successfully implement wide-scale usage, test tools internally to ensure they are simple enough for all community partners, who may have no previous knowledge of building science and healthy homes principles, to use and generate referrals when needed.

### *UPDATE WAP DATA COLLECTION TOOLS*

If WAP is the first program to enter the home, your goal should be to capture all relevant data needed to refer the unit to the appropriate partner if it is not “weatherization ready” or if additional services could benefit the clients.

As a WAP provider, you already have a data collection tool that auditors use when evaluating the home for energy efficiency and DOE-allowed health and safety measures. Evaluate your existing data collection tool with your new partners and referral systems in mind.

**Does your existing tool include fields for identifying opportunities where other partners can provide services to bring a home to weatherization readiness or offer expanded measures?**

For example, if you've identified a community partner who can **assist in asthma control or prevention**, does your WAP client file indicate whether someone with asthma lives in the household, and the existence of common asthma triggers in the home? If not, add those fields.



## List services your new partners can provide not previously available to Weatherization.

| Services new Partners can provide not available through Weatherization Assistance Program | Is the field included in current data collection form? |
|---|--|
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |

### *UPDATE PARTNER DATA COLLECTION TOOLS*

In addition to getting your own forms in order for your WPH initiative, you must work with partners to ensure they are collecting the necessary information to make use of your newly expanded referral network.

### **What if WAP isn't the first program to enter the home? Is the partner collecting the right data to refer candidate homes to the WAP?**

Some WPH initiatives work with partners to create a common set of easy-to-understand data collection and assessment tools. The set typically includes a client questionnaire, a brief visual assessment form and client education materials.

### *CROSS TRAINING BETWEEN PARTNERS FOR HOME ASSESSMENTS*

Ensuring partners are properly trained to use the common assessment tool is critical to successfully generating appropriate referrals. WAP organizations are typically the best entity to deliver this training, due to their expertise in "House as a System" thinking.

After the common assessment tool has been internally vetted, unveil the draft tool to community partners at the next in-person meeting to solicit feedback, finalize, and determine training needs.

Training community partners to use the tool does not need to be complicated. A simple presentation with examples of housing-related health hazards will make visual connections between the conditions partners may see in homes and subsequent health problems.

**Literature, such as brochures and pamphlets**, many of which are required to be handed

out as part of standard WAP operations, explain how health concerns may be exacerbated by home health and safety hazards and add to client education. Both the presentation and literature will ensure that community partners generate appropriate referrals to partners.

For examples of client education materials, please visit:

<http://www.wxplushealth.org/resources/client-education-resources>.



*EPA's Renovate Right brochure is one of the many pamphlets distributed to clients during weatherization work.*

## DATA TRACKING FOR WPH INITIATIVES EVALUATION AND IMPROVEMENT

Tracking services and documenting outcomes of your WPH initiative is key and serves two purposes. Objective data points will help you:

- Measure the success of your program, useful in outreach materials for all partners involved.
- Determine areas for improvement or expansion by identifying hiccups in the referral process or common issues not treated by current partners.

If a client has agreed through the **Consent for Referral form** to allow data to be shared across programs, then partner agencies can develop a shared platform to enter client information and track the status of services provided.

| STATEWIDE "ONE-TOUCH" HEALTHY HOMES CHECKUP FORM   |   |    |                     |           |
|--|---|----|---------------------|-----------|
| <b>PROGRAM INFORMATION</b>   |   |    |                     |           |
| Administering Program:   |   |    | Visitor Name:       |           |
| Date:  |   |    | Client Referral #:  |           |
| <b>CLIENT INFORMATION</b>  |   |    |                     |           |
| Client Name:   |   |    | Apt. #:             |           |
| Head of Household Name:  |   |    | Home phone: ( )     |           |
| Street Address:  |   |    | Work phone: ( )     |           |
| City:  |   |    | Email:              |           |
| Mailing Address:   |   |    | NH Zip:             |           |
| Best time to call:   |   |    |                     |           |
| Primary Language: English Spanish Nepali Chinese Swahili Bosnian Somali Other _____  |   |    |                     |           |
| Landlord Name:   |   |    | Landlord Phone: ( ) |           |
|  |   |    | Landlord email:     |           |
| <b>DEMOGRAPHICS</b>  |   |    |                     |           |
|  |   | No | Yes                 | Comments  |
| 1  | Any residents >62 yrs of age?   |    |                     |           |
| 2  | Any disabled residents?   |    |                     | Describe: |
| 3  | Any children <6 years old?  |    |                     |           |
| 4  | Any pregnant women?   |    |                     |           |
| 5  | Do residents own home?  |    |                     |           |
| 6  | Do any residents receive federal assistance?<br>(i.e. WIC, Medicaid, Fuel Assistance, Section 8, TANF, Food stamps) |    |                     | Describe: |
| 7  | Does client have Health Insurance?  |    |                     | Type:     |
| 8  | Who is the Primary Care Provider?   |    |                     | Location: |
| Name:  |   |    |                     |           |
| <b>CONSENT</b>   |   |    |                     |           |
| I, _____ (Head of Household) give permission to _____ (Administering Program) to release any information contained on this form about me and/or my household members to:   |   |    |                     |           |
| <ul style="list-style-type: none"> <li>• _____</li> <li>• _____</li> <li>• _____</li> </ul>  |   |    |                     |           |
| I understand that a representative from the above agency/agencies may contact me directly to determine eligibility for the program to which I am being referred and to provide services if eligible. I understand that this agreement to release and exchange information is valid for one year from the signature date below and that this permission may be revoked at any time with a written request to NH HHLP. I understand that I may request a copy of this release. |   |    |                     |           |
| Signature of Client/Parent/Guardian  |   |    | Date                |           |

Revised 9-9-12 Page 1 of 5

| Head of Household Name _____ Property Address _____ |     |  |  |
|---|-----|--|--|
| REFERRALS & CLIENT EDUCATION                        |     |  |  |
| EDU   | REF | FAMILY NEED                                | AGENCY & CONTACT INFORMATION   |
|   |     | ASTHMA                                     | Family's Primary Care Physician or local Asthma Educator<br>TBD  |
|   |     | CARBON MONOXIDE                            | Carbon Monoxide Workgroup <a href="http://nh.gov/co">http://nh.gov/co</a>  |
|   |     | FAMILY AND PARENT SUPPORT                  | Northern NE Poison Center<br>Child and Family Services<br><a href="http://www.cfsnh.org">www.cfsnh.org</a>   |
|   |     | FIRE SAFETY                                | Local Fire Department or NH Division of Safety<br><a href="http://www.nh.gov/safety/divisions/firesafety/">www.nh.gov/safety/divisions/firesafety/</a>                               |
|   |     | HEAD START                                 | Local Head Start<br><a href="http://www.tccap.org/head_start_contacts.htm">www.tccap.org/head_start_contacts.htm</a>   |
|   |     | HOUSING CODE VIOLATIONS                    | Local Health Officer or Building Code Official<br>TBD  |
|   |     | INJURY PREVENTION                          | Safe Kids USA<br><a href="http://www.safekids.org">www.safekids.org</a> 1-800-835-8647   |
|   |     | LEAD HAZARD CONTROL GRANT PROGRAM          | NH Housing Finance Authority<br>On-hold until further funding available  |
|   |     | LEAD POISONING PREVENTION                  | Healthy Homes & Lead Poisoning Prevention Program<br>1-800-897-LEAD (5323)<br><a href="http://www.dhhs.nh.gov/dphs/bchs/cdpp/index.htm">www.dhhs.nh.gov/dphs/bchs/cdpp/index.htm</a> |
|   |     | MOISTURE & MOLD                            | US Environmental Protection Agency<br><a href="http://www.epa.gov/mold">www.epa.gov/mold</a> 1-800-438-4318  |
|   |     | MR. FIX-IT PROGRAM (SMALL REPAIRS)         | Local Community Action Program<br>TBD  |
|   |     | PESTS (RODENTS, INSECTS & BEDBUGS)         | UNH Cooperative Extension<br>Bed Bug Action Committee <a href="http://www.nhbedbugs.com">www.nhbedbugs.com</a> 1-877-398-4769  |
|   |     | RADON                                      | US Environmental Protection Agency<br><a href="http://www.epa.gov/radon">www.epa.gov/radon</a> 1-800-767-7236  |
|   |     | SMOKING CESSATION                          | Try-to-Stop New Hampshire<br>1-800-Try-to-Stop <a href="http://www.trytostopnh.org">www.trytostopnh.org</a>  |
|   |     | SMOKING-FREE HOUSING                       | Breathe NH<br><a href="http://www.breathenh.org">www.breathenh.org</a> 1-800-835-8647  |
|   |     | WEATHERIZATION (MIDDLE & UPPER INCOME)     | Home Performance with Energy Star<br>Frank Melanson Fax 603-634-3146   |
|   |     | WEATHERIZATION & FUEL ASSIST. (LOW-INCOME) | Local Community Action Program<br><a href="http://www.nh.gov/oepp/programs/weatherization/index.htm">www.nh.gov/oepp/programs/weatherization/index.htm</a>                           |

*New Hampshire's One Touch Healthy Homes checklist includes a consent for referral and a comprehensive list of potential referral and client education resources.  
See Appendix for the full version of the form.*

Data that should be tracked includes, but is not limited to:

- Initial intake site referrals.
- Reasons for service deferral.
- Number and percentage of health and safety related WAP deferrals.
- WAP deferrals entered back into WAP pipeline through successful referrals (e.g. homes brought to “weatherization readiness”).
- Client education administered.
- Services rendered and by which participating partner(s).
- Services currently on hold due to waiting lists.
- Dollars contributed by each partner organization for each service.
- Health improvements as reported by clients during follow up calls and/or visits.
- Number of homes receiving Weatherization Plus Health services (WAP services in addition to at least one healthy homes measure paid for with non-DOE or non-LIHEAP funds).
- Jobs affected through leveraged health and safety resources.

Shared data collection platforms do not require specialized software. Data can be entered on a [shared online spreadsheet](#) using tools which allow for file sharing and collaborative editing.

By using the same data collection platform, agencies can evaluate how to improve their referral processes together. For example, if clients referred to an agency providing housing rehab services have been on a waiting list for over three months, this platform can help identify the issue and determine if there are partners offering similar services with shorter wait times.

By tracking and aggressively evaluating the outcomes of referrals made and services rendered, agencies place themselves on good footing when applying for additional funding to continue their efforts.

# SECTION II:

## EXPANDING WEATHERIZATION PLUS HEALTH

# FUNDING WEATHERIZATION PLUS HEALTH

Many Weatherization Plus Health initiatives will start out by pooling various existing resources between the initial partner organizations. Identify the existing funding streams being used by each active partner and what Weatherization Plus Health measure(s) it addresses.

| PARTNER | FUNDING SOURCE | AMOUNT | DURATION | WPH FOCUS |
|---------|----------------|--------|----------|-----------|
|         |                |        |          |           |
|         |                |        |          |           |
|         |                |        |          |           |
|         |                |        |          |           |
|         |                |        |          |           |
|         |                |        |          |           |
|         |                |        |          |           |
|         |                |        |          |           |
|         |                |        |          |           |
|         |                |        |          |           |
|         |                |        |          |           |

Once you have identified your existing funding and you start implementing Weatherization Plus Health, the need will arise to explore new funding resources. It is important for Weatherization and Healthy Homes organizations to keep informed on current national, state, and private funding streams that may be available depending on their eligibility criteria.

Identify those Weatherization Plus Health areas that lack the necessary funding or that your group is interested in incorporating into your portfolio of services.

# FEDERAL FUNDING

---

Many federal agencies provide funding and resources that may be useful to WAP organizations trying to provide more comprehensive services related to Weatherization Plus Health and reducing WAP deferrals.

## U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT (HUD)

---

The **U.S. Department of Housing and Urban Development (HUD)** is the largest federal funder of healthy homes activities. HUD's **Office of Healthy Homes and Lead Hazard Control (OHHLHC)** administers healthy homes-related programs including:



- Lead Based Paint Hazard Control (LBPHC)
- Lead Hazard Reduction Demonstration Programs (LHRD)
- Lead Technical Studies Program (LTS)
- Healthy Homes Technical Studies Grant Program (HHTS)

In addition, HUD also administers the **Community Development Block Grant (CDGB)** and the **Home Investment Partnership Program (HOME)**, which offer opportunities to incorporate home repairs into WAP homes.

*LEAD BASED PAINT HAZARD CONTROL* and *LEAD HAZARD REDUCTION DEMONSTRATION PROGRAMS* are HUD grants that are often awarded to larger cities, state governmental health and/or housing departments, although there is no particular population size requirement.

*LEAD TECHNICAL STUDIES PROGRAM* funds organizations to conduct research to gain knowledge on improving the efficacy and cost-effectiveness of methods for evaluation and control of residential lead-based paint hazards.

*HEALTHY HOMES TECHNICAL STUDIES PROGRAM* (HHTS) grants support new approaches to improve the efficiency and cost-effectiveness of methods to evaluate and control housing-related health and safety hazards. The program, part of HUD's Healthy Homes Initiative, is particularly focused on the health of children and other vulnerable groups.

### *Opportunity for Weatherization Organizations*

Some local WAP agencies have had success coordinating these funds for lead remediation to enable weatherization of homes that would have been deferred. In other cases, some WAP organizations have received funding via subcontract to actually perform the lead hazard control work. The majority of the funding from these HUD grants must be used for direct activities such as abatement, interim control, clearance, and risk assessment, providing opportunities for partnerships, as grantees are required to partner with community groups.

| GRANT PROGRAM  | FUNDING LEVELS AS OF 2014 |
|--|---------------------------|
| Lead-Based Paint Hazard Control Grant Program (LBPHC)    | \$62,028,846*             |
| Lead Hazard Reduction Demonstration Grant Program (LHRD) | \$46,674,121*             |
| Lead Technical Studies Grant Program (LTS)               | \$814,017                 |
| Healthy Homes Technical Studies Grant Program (HHTS)     | \$2,797,033               |
| TOTAL  | \$112,314,017             |

\* This includes the \$11,402,967 HUD is awarding to assist in the promotion and development of programs to concurrently identify and address multiple housing-related health hazards with lead hazard control intervention work. Read more at [http://portal.hud.gov/hudportal/HUD?src=/press/press\\_releases\\_media\\_advisories/2014/HUDNo\\_14-117](http://portal.hud.gov/hudportal/HUD?src=/press/press_releases_media_advisories/2014/HUDNo_14-117)

| STATE | RECIPIENTS  | GRANT PROGRAM | 2014 AWARD  |
|-------|---|---------------|-------------|
| AZ    | City of Phoenix   | LBPHC         | \$3,400,000 |
| CA    | California Department of Community Services and Development | LBPHC         | \$3,400,000 |
|       | City of Los Angeles   | LHRD          | \$3,900,000 |
|       | City of San Diego Environmental Services Department         | LBPHC         | \$3,400,000 |
|       | County of Alameda   | LBPHC         | \$3,400,000 |
| CT    | City of Hartford  | LHRD          | \$3,900,000 |
| DC    | District of Columbia  | LHRD          | \$3,746,551 |
| DE    | State of Delaware Health and Social Services                | LBPHC         | \$3,288,728 |
| GA    | City of Atlanta   | LBPHC         | \$2,500,000 |
| IA    | City of Marshalltown  | LBPHC         | \$3,400,000 |
| IN    | Purdue University   | HHTS          | \$659,050   |
| IL    | City of Chicago Department of Public Health                 | LHRD          | \$3,900,000 |
|       | City of Kankakee  | LBPHC         | \$3,183,395 |
| MA    | Harvard University  | HHTS          | \$724,726   |
| MD    | Quantech, Inc.  | LTS           | \$498,517   |
| ME    | City of Lewiston  | LBPHC         | \$3,395,159 |



| STATE  | RECIPIENTS                                     | GRANT PROGRAM | 2014 AWARD    |
|--------|--|---------------|---------------|
| MI     | City of Detroit                                | LHRD          | \$3,637,000   |
|        | County of Muskegon                             | LBPHC         | \$1,100,000   |
| MN     | City of Minneapolis                            | LBPHC         | \$3,400,000   |
| MO     | City of St. Louis                              | LHRD          | \$2,500,000   |
|        | County of St. Louis                            | LBPHC         | \$2,496,364   |
|        | Kansas City Missouri Health Department         | LBPHC         | \$3,216,136   |
|        | Washington University                          | HHTS          | \$724,996     |
| NH     | City of Nashua                                 | LBPHC         | \$3,400,000   |
|        | New Hampshire Housing Finance Authority        | LBPHC         | \$3,400,000   |
| NY     | City of Schenectady                            | LHRD          | \$3,190,570   |
|        | Erie County                                    | LBPHC         | \$3,400,000   |
|        | Monroe County Department of Public Health      | LBPHC         | \$3,270,000   |
|        | Onondaga County Community Development Division | LHRD          | \$3,900,000   |
| OH     | City of Cincinnati                             | LBPHC         | \$3,400,000   |
|        | City of Columbus Department of Development     | LHRD          | \$3,900,000   |
|        | University of Cincinnati                       | HHTS          | \$688,261     |
| RI     | City of Providence                             | LHRD          | \$3,900,000   |
|        | The Providence Plan                            | LTS           | \$315,500     |
| TX     | City of Fort Worth                             | LHRD          | \$2,400,000   |
| VA     | City of Roanoke                                | LBPHC         | \$2,179,064   |
| VT     | City of Burlington                             | LBPHC         | \$3,400,000   |
| WI     | City of Milwaukee Health Department            | LHRD          | \$3,900,000   |
|        | Kenosha County Division of Health              | LHRD          | \$3,900,000   |
| TOTAL* |  |               | \$112,314,017 |

## COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)

CDBG grants are awarded to entitlement communities around the country. Entitlement communities are comprised of:

- Cities with populations over 50,000 residents.
- Counties with populations over 200,000 residents.
- States, who distribute these funds out competitively to **non-entitlement jurisdictions**.
  - Cities with populations less than 50,000.
  - Counties with populations less than 200,000.

CDBG funds are not strictly allocated for housing, though housing is an important focus of the program. The funding pool is quite flexible depending on the needs of the jurisdiction.

Typically, states and local jurisdictions allocate anywhere from **5-20% to housing rehabilitation and/or repair activities** funded by CDBG, though there is no cap on funds that can be directed toward housing.

### *Opportunity for Weatherization Organizations*

There is ample opportunity for Weatherization organizations to partner with their CDBG Grantee on housing repairs that are related to Weatherization Plus Health and making homes weatherization ready. There may even be potential for Weatherization agencies to receive some CDBG funding to perform the work themselves. CDBG-funded housing repair measures are flexible and determined each year when a jurisdiction presents its annual plan. HUD requires CDBG Grantees to solicit feedback from social service agencies and the general public before submitting their annual plans.

| CDBG PROGRAM                | 2012  | 2013                        | 2014                        |
|-----------------------------|---|-----------------------------|-----------------------------|
| TOTAL FUNDING               | \$3.008 billion   | \$3.135 billion             | \$3.100 billion             |
| # OF AWARDS                 | 1,200+  | 1,200+                      | 1,200+                      |
| AWARD LEVELS                | \$58,591 -<br>\$149.7 million                                   | \$61,128 -<br>\$155,708,779 | \$63,840 -<br>\$152,575,507 |
| ELIGIBLE RECIPIENT<br>TYPES | Entitlement Cities<br>Entitlement Counties<br>State Governments |                             |                             |

## HOME INVESTMENT PARTNERSHIPS PROGRAM (HOME)

HOME funds are also awarded to entitlement cities and counties; however, rural city and county governments do have the option to form a consortium through a binding agreement to receive these funds. HOME funds are strictly allocated for housing, primarily for **affordable housing, housing development, housing rehabilitation and repair activities**.

### *Opportunity for Weatherization Organizations*

The HOME grants offer the same opportunities as the CDBG program. Weatherization organizations can partner with their local HOME Grantee to help decrease the number of deferrals by repairing or rehabbing client homes to make them “weatherization ready.”

| HOME PROGRAM                | 2012  | 2013                         | 2014                           |
|-----------------------------|---|------------------------------|--------------------------------|
| FUNDING                     | \$1 billion   | \$947.7 million              | \$1 billion                    |
| # OF AWARDS                 | 648   | 644                          | 643                            |
| AWARD LEVELS                | \$157,332-<br>\$60.34 million                                   | \$40,286 -<br>\$57.8 million | \$71,893 -<br>\$58.658 million |
| ELIGIBLE RECIPIENT<br>TYPES | Entitlement Cities<br>Entitlement Counties<br>State Governments |                              |                                |

## U.S. CENTER FOR DISEASE CONTROL (CDC)

The U.S. Center for Disease Control and Prevention's (CDC) healthy homes-related programs have not weathered the recent budget cuts well. The **Healthy Homes and Lead Poisoning Prevention Program (HHLPPP)** has been drastically reduced in recent years. As recently as Fiscal Year 2011, there were 41 state grantees, either states or large cities. These funds typically filtered down to local health departments and/or coalitions for healthy homes education, outreach, and surveillance and data collection. While the national program is currently only operational at the national level, some states have funded the program to continue their activities.



### *NATIONAL ASTHMA CONTROL PROGRAM*

CDC's National Asthma Control Program (NACP) was created in 1999 to help the millions of people with asthma in the United States gain control of their disease. This grant program funds state-level projects to perform **asthma education, outreach, and surveillance and data collection through local health departments and/or coalitions**. In Fiscal Year 2013, there were efforts to combine HHLPPP with the National Asthma Control Program to create the Healthy Homes and Community Environments Program, but this did not occur.

### *Opportunity for Weatherization Organizations*

WAP providers frequently find units with moisture issues and other issues linked to childhood asthma. Having a base knowledge of NACP can help WAP provide referrals and more holistic assistance to the needs of the low-income households they serve.

| NACP PROGRAM             | 2012              | 2013             | 2014           |
|--------------------------|-------------------|------------------|----------------|
| TOTAL FUNDING            | \$25.3 million    | \$28.372 million | \$24.7 million |
| # OF AWARDS              | 36                | 36               | 36             |
| ELIGIBLE RECIPIENT TYPES | State Governments |                  |                |

## HEALTHY HOMES AND LEAD POISONING PREVENTION PROGRAM

The CDC's Healthy Homes and Lead Poisoning Prevention program gained a tremendous amount of funding with the FY2014 Omnibus budget. The program received \$15 million for 2014 - a significant increase from last year's budget of \$2 million. One of the main goals of this program is to maintain a national surveillance system to monitor blood lead testing for children and supports state and local lead screening.

### *Opportunity for Weatherization Organizations*

WAP providers routinely assess the possibility of lead based paint in units to be weatherized, and have received basic training on lead poisoning. Knowledge of the Healthy Homes and Lead Poisoning Prevention Program can help WAP provide referrals and more holistic assistance to the needs of the low-income households they serve.

| CDC HEALTHY HOMES<br>& LEAD POISONING<br>PREVENTION PROGRAM | 2012  | 2013        | 2014         |
|---|---|-------------|--------------|
| TOTAL FUNDING   | \$2 million   | \$2 million | \$15 million |
| ELIGIBLE RECIPIENT<br>TYPES                                 | Cities serving 1 million or more<br>Counties serving 1 million or more<br>State Governments |             |              |

## AFFORDABLE CARE ACT'S PREVENTION AND PUBLIC HEALTH FUND COMMUNITY TRANSFORMATION GRANT (CTG) PROGRAM

The Community Transformation Grants' goal is to take a holistic approach to improve community health by reducing chronic disease. With funding of \$226 million and 107 awards distributed in FY 2012, and an additional \$146 million of funding in FY 2013, Community Transformation Grants have funded a variety of local organizations engaging partners to improve health.

### *Opportunity for Weatherization Organizations*

In 2014, the Omnibus bill maintained the Prevention and Public Health Fund but reallocated the CTG Program to the CDC's Diabetes and Heart Disease and Stroke Prevention programs. But, the Omnibus did provide \$80 million towards new **Community Prevention Grants**. These grants are directed towards assisting communities to build multi-sector partnerships to improve community health. These new grants could be a new funding stream for Weatherization Plus Health activities. Non-profit organizations are among the list of eligible recipients.

## U.S. ENVIRONMENTAL PROTECTION AGENCY (EPA)

---

Environmental Protection Agency (EPA) grants typically provide small dollar awards, but are a great resource for planning and capacity building. In fact, **The Opportunity Council**, a Weatherization agency in Bellingham, Washington, coined “Weatherization Plus Health” for a project resulting from a \$20,000 **Environmental Justice Small Grants Program** award in 1993. With these funds, The Opportunity Council convened meetings with community partners to discuss existing resources and referral opportunities between programs. Environmental Justice grants are typically funded at around \$1 million per year, with about 50 awards given to local organizations annually.



## STATE INDOOR RADON GRANTS (SIRG) PROGRAM

The State Indoor Radon Grants program has been in the crosshairs of budget-cuts for the past two years, but has remained at \$7.8 million per year due to the enactment of multiple Continuing Resolutions. The Administration has proposed the program be eliminated for the past two Fiscal Years because the infrastructure for radon education built for the past 23 years would allow the efforts of the program to continue as part of other state-level funded healthy homes activity.

### *Opportunity for Weatherization Organizations*

While this program currently only funds state and territorial Grantees, there are opportunities for Weatherization to partner with Grantees on local radon outreach and education.

| STATE INDOOR RADON GRANT (SIRG) PROGRAM   2012 - 2014 |             |             |             |
|---|-------------|-------------|-------------|
| EPA REGION  | 2012        | 2013        | 2014        |
| Region 1<br>(Boston, MA)                              | \$829,000   | \$698,000   | \$741,000   |
| Region 2<br>(New York, NY)                            | \$711,000   | \$685,000   | \$725,000   |
| Region 3<br>(Philadelphia, PA)                        | \$837,000   | \$747,000   | \$789,000   |
| Region 4<br>(Atlanta, GA)                             | \$1,375,000 | \$1,331,000 | \$1,392,000 |
| Region 5<br>(Chicago, IL)                             | \$1,815,000 | \$1,760,000 | \$1,851,000 |
| Region 6<br>(Dallas, TX)                              | \$407,000   | \$396,000   | \$419,000   |
| Region 7<br>(Kansas City, MO)                         | \$716,000   | \$693,000   | \$733,000   |
| Region 8<br>(Denver, CO)                              | \$586,000   | \$569,000   | \$604,000   |
| Region 9<br>(San Francisco, CA)                       | \$553,000   | \$537,000   | \$572,000   |
| Region 10<br>(Seattle, WA)                            | \$216,000   | \$210,000   | \$225,000   |
| TOTALS  | \$8,045,000 | \$7,626,000 | \$8,051,000 |

## U.S. HEALTH AND HUMAN SERVICES (HHS)

---

The Patient Protection and Affordable Care Act (ACA) of 2010 is designed to improve the return on investment Americans receive for their health care dollars. ACA reforms both health insurance and the health care system and is being implemented in phases through 2016. With 2016 rapidly approaching, there are opportunities for WAP agencies and healthy homes partners to seek funding for projects that improve client health.



In preparing to seek funding from entities under the Affordable Care Act, it is important to consider:

- The non-energy benefits of Weatherization, e.g., lives saved due to measures such as a carbon monoxide detector installation.
- The effect of poverty on health, for instance, Weatherization helps reduce conditions of poverty, potentially improving mental and physical health.

### *PREVENTION AND PUBLIC HEALTH FUND (PPHF)*

Competitive funding for Weatherization Plus Health projects may be available through ACA's Prevention and Public Health Fund (PPHF). Projects with a focus on improving housing conditions address one of the PPHF's four strategic directions, **"Healthy and Safe Community Environments."** As the ACA is fully implemented, approximately \$2 billion will be available annually through PPHF.

### *Opportunity for Weatherization Organizations*

Weatherization agencies with developed Weatherization Plus Health strategies will be in a good position to seek funding from PPHF. Establishing a partnership with your local hospital and/or state or local health department can be a boon to your Weatherization Plus Health strategies. Weatherization agencies can partner with the 2,900 non-profit, acute care hospitals that currently keep their tax-exempt status by providing care to uninsured individuals. Under ACA's hospital "community benefit" fund provisions, hospitals will make new investments in community health, anticipated at about \$13 billion each year, every year. With the ACA expected to reduce the number of uninsured Americans by about 20 million, providing community benefit will take on new importance and no longer be fulfilled with uncompensated care. This is an opportunity to pitch your Weatherization Plus Health project as a means to allow hospitals to achieve required community benefit provisions. Contact your local hospital or health care system, or visit their website to find out about hospital community benefit funds in your area.



## ACA PILOT PROJECTS

ACA also funds dozens of pilot projects to test new ways to organize and deliver health care to lower costs and improve quality of care. Most of these pilots target public coverage under Medicare and Medicaid. Weatherization agencies that include a health clinic, aging services, early childhood services, or home health care may qualify to participate in these pilots, sharing in cost-savings and creating referrals between Weatherization and health care that can become part of a Weatherization Plus Health program. Examples of the pilots include:

**Accountable Care Organizations/Communities:** Partnerships across health and community programs, including housing and health entities, as a preventative health strategy.

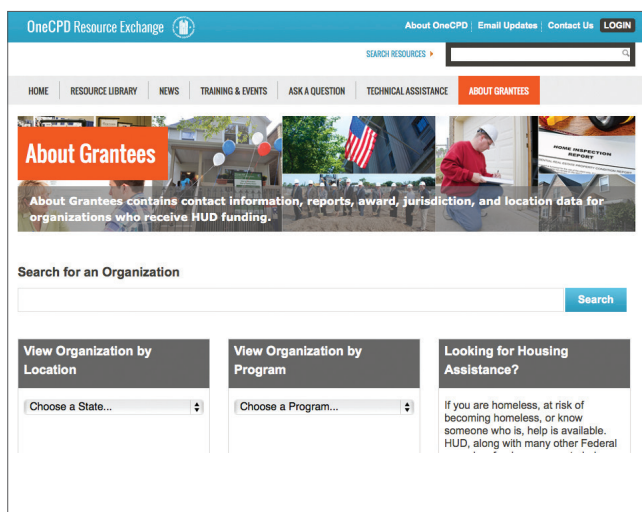
**Patient-Centered Medical Homes or Health Homes:** Coordinated care and funding to enable one-stop shopping for patients, which can include social services such as Weatherization, home repair, aging-in-place services, etc.

**Medicaid Reimbursement of Healthy Homes Services:** In the spring of 2014, the National Center for Healthy Housing (NCHH) conducted a nationwide survey to identify states where healthcare financing for lead poisoning or home-based asthma services is already in place or pending. State specific information is provided at <http://www.nchh.org/Resources/HealthcareFinancing/Snapshot.aspx>.

# STATE FUNDING

State funding for Weatherization Plus Health activities may be available, particularly from state Departments of Health and/or Housing. Many states have Affordable Housing Trust Funds, to and from which Weatherization agencies can connect clients with home rehabilitation and repair. These funds can help prevent Weatherization deferrals due to structural, plumbing, or electrical issues.

## ONLINE FUNDING RESOURCES



**OneCPD Resource Exchange**  
<https://www.onecpd.info/grantees>



**DSIRE**  
<http://dsireusa.org>

# UTILITY FUNDING

Many Weatherization providers have the use of utility funds to supplement budgets for energy efficiency measures. Many states require that utility companies offer energy efficiency programs to low-income clients, but these programs do not always include health and safety components. Some state **Public Utilities Commissions** are required to provide certain measures while others voluntarily follow DOE guidelines for health and safety.

## WPH IN ACTION

### WASHINGTON STATE

**ISSUE:**  
LEVERAGING FUNDS



**SOLUTION:**

The Washington State Department of Commerce (DOC) has long been a leader in leveraging funding from utility companies to supplement its Weatherization budgets, enabling more homes to be weatherized and additional measures beyond the scope of DOE WAP. In 1992, DOC convened Executive and Weatherization Directors from its Weatherization agencies, along with state officials to form a steering committee for **The Energy Project (TEP)**. TEP aimed to train the Weatherization network across the state to expand advocacy capacity to secure consistent and fair investment among all utilities in the state for low-income weatherization programs. Primary TEP project objectives included:

- Protecting low-income citizens from increased base charges.
- Collaborating to create new program models and solutions.
- Advocating for the Community Action Program network to deliver services.
- Educating local agencies on energy system and policy.
- Increasing energy assistance funding from utilities when rates increased.
- Advocating for home repair funding.

Members of TEP have developed extremely positive relationships with utility companies in the state, and have served on a least five separate utilities' planning advisory groups. Since 1993, TEP has leveraged an eye popping **\$236 million**, at an upfront cost of \$4.5 million, **securing \$52 for each dollar invested**. TEP has also recently secured increased allowances for weatherization-related repair funding, helping to prevent deferrals. In fact, **Puget Sound Energy**, a utility company for which TEP has a seat at the planning advisory group, now allows up to 30% of its funding to be dedicated to repairs which help make homes weatherization ready.

## PRIVATE/FOUNDATION FUNDING

---

Foundation and philanthropic support exists in nearly every community, although its scale and scope varies. National foundations typically fund work throughout the country, while community and local foundations and individual donors often focus their giving to address local community needs. Weatherization providers seeking to embrace Weatherization Plus Health may find it most useful to begin looking at resources in their local communities before exploring national funders.

Foundations, like many funders, like to see an emphasis on sustainability, namely, that projects are structured to generate operating expenses after the initial foundation outlay. Montachusets Opportunity Council's story below is a great example.

When assessing funders, ask questions such as:

- Does the foundation fund health, housing and/or environmental activities? If so, what is the type of work they have funded in the past?
- Does my organization have any connections to this organization or individual?
- Do they accept proposals on a rolling basis or is there a prescribed time frame for submissions?
- Have they funded any of the organizations with which we collaborate?

Weatherization agencies have successfully leveraged local foundation funding toward Weatherization Plus Health goals. For example:

**Genesee County Community Action Resource Department** in Michigan leveraged \$125,000 from a local foundation for roof repairs in WAP homes.

**People Working Cooperatively**, an organization that works in Ohio, Indiana, and Kentucky, leverages funding from multiple foundations, including the Home Depot Foundation, so they can install fall prevention measures, such as shower grab bars and stair handrails in homes that also receive weatherization services.

Other Weatherization agencies have sought funding from health foundations for Weatherization Plus Health planning and capacity building purposes.

Many WAP agencies have worked in various capacities with private foundations and financial organizations over the years. A few possible resources for Weatherization Plus Health initiatives are noted on the next page but *readers are strongly encouraged to research additional private organizations that may be active in their area or for their specific identified needs.*

## SAMPLE PRIVATE FOUNDATION AND ORGANIZATION FUNDING RESOURCES

### PRIVATE FOUNDATIONS

#### The Kresge Foundation

<http://kresge.org/programs/health>

*The Kresge Foundation is a \$3 billion private, national foundation headquartered in Metropolitan Detroit, in the suburb community of Troy, that works to expand opportunities in America's cities through grantmaking and investing in arts and culture, education, environment, health, human services, community development and our place-based efforts in Detroit.*

#### The Home Depot Foundation

<http://www.homedepotfoundation.org>

*Affordable housing for deserving families is at the heart of The Home Depot Foundation's mission. Since 2002, The Home Depot Foundation has invested more than \$340 million in local communities to build and renovate homes for deserving families; transform local parks and playgrounds; and repair community facilities.*

### FINANCIAL ORGANIZATIONS

#### The Federal Home Loan Banks' Affordable Housing Program

[http://www.fhlbanks.com/programs\\_affordhousing.htm](http://www.fhlbanks.com/programs_affordhousing.htm)

*The Federal Home Loan Banks' Affordable Housing Program (AHP) is one of the largest private sources of grant funds for affordable housing in the United States. It is funded with 10% of the Federal Home Loan Banks' net income each year. The AHP allows for funds to be used in combination with other programs and funding sources, like the Low-Income Housing Tax Credit. These projects serve a wide range of neighborhood needs: many are designed for seniors, the disabled, homeless families, first-time homeowners and others with limited resources. More than 811,500 housing units have been built using AHP funds, including 475,000 units for very low-income residents. The Federal Home Loan Bank System is the largest single funding provider to Habitat for Humanity. The total AHP dollars since 1990 is over \$4.86 billion.*

#### US Bank

<https://www.usbank.com/community/grant-guidelines.html>

*One of US Bank's priorities is to support affordable housing through its grants program. Their affordable housing efforts work with organizations that support the preservation, rehabilitation and construction of quality affordable housing that assists low- and moderate-income populations and programs that provide home buyer counseling and related financial education to low- and moderate-income individuals and families.*

#### Wells Fargo Community Investment

<https://www.wellsfargo.com/about/charitable/>

*Wells Fargo makes contributions in areas that we believe are important to the future of our nation's vitality and success. Our first priority is to support programs and organizations whose chief purpose is to benefit low- and moderate-income individuals and families. We look for projects that keep our communities strong, diverse, and vibrant.*

### MASSACHUSETTS

#### ISSUE:

PARTNERING & LEVERAGING FUNDS



#### SOLUTION:

After attending a Weatherization Plus Health (WPH) conference in Portland, Maine in May 2011, Mary Giannetti, Director of Housing and Energy Services at [Montachusett Opportunity Council \(MOC\)](#) was inspired to integrate Healthy Homes/ Weatherization Plus Health into their services for the 30 North Central Massachusetts communities MOC serves.

With a grant from the [Massachusetts Department of Public Health and Harvard Catalyst](#), MOC piloted a new program in late 2011 to provide free healthy homes assessments along with intensive client education to teach clients how to maintain healthy homes. MOC created a partner network that consisted of Women, Infants, and Children (WIC); school nurses; Head Start; and local Boards of Health as referral sources, MOC saw immediate changes in client behavior. But MOC wanted to do more to help remediate health and safety issues in homes, and they saw Weatherization as the way.

MOC's Weatherization program immediately approached [Twin Cities Community Development Corporation](#) and the [City of Fitchburg](#) to partner with. The partnership was awarded a [\\$90,000 grant from the Health Foundation of Central Massachusetts \(HFCM\)](#) to fund strategic planning to integrate weatherization and healthy homes into their programs. The key to MOC's pitch when applying to HFCM was its commitment to sustainability - MOC and its partners could make homes more energy efficient, healthy, and safe well into the future. MOC has ambitiously proposed three critical goals to ensure the success of this project into the future:

**Goal One:** Build a partnership charged with integrating healthy homes practices into local building and rehabilitation work by (1) creating a referral network, (2) using staff training to build capacity; and (3) incorporating healthy homes assessments into all housing programs.

**Goal Two:** Complete healthy homes remediation on eight projects using three levels.

- Light Touch program to identify health and safety issues;
- Limited rehabilitation program to integrate various funding sources, including WAP, Elder Home Repair, CDBG, etc.; and
- Substantial rehabilitation program, also leveraging funds from other sources.

**Goal Three:** Develop lasting policies, systems, and standards to promote healthy homes.

# PUBLICIZING WEATHERIZATION PLUS HEALTH

Once your funding is established, a key element to any community-based effort is to publicize your efforts through an array of marketing and outreach efforts. Promoting your Weatherization Plus Health activities to your communities and key audiences will help:

- Raise awareness of residential health and safety hazards.
- Market the idea of Weatherization Plus Health to potential health, community, utilities, or educational groups or organizations.
- Demonstrate and document Weatherization Plus Health successes that can be used in funding applications.
- Broaden the Weatherization Plus Health identity.

An important element of your partnership development is to identify which participating organizations have strong communications/outreach efforts and have the bandwidth to add Weatherization Plus Health promotion to their responsibilities. Once you have your core communications group identified, the next step is to compile a list of resources and expertise existing within your group and what areas are needed.

| COMMUNICATIONS/OUTREACH RESOURCES   |  |
|---|--|
| Press/Media Contacts<br>(television, radio, print, blogs, etc.)                 |  |
| Government Contacts   |  |
| Public Speakings/Spokesperson   |  |
| Photography   |  |
| Writing   |  |
| Social Media  |  |
| Graphic Design/Materials Development<br>(brochures, fact sheets, presentations) |  |
| Video Production  |  |
| Website Development   |  |
| Event Planning  |  |

Once you have finalized what resources and expertise you have in-house, the next task for the group is to identify your key audiences, what are the outcomes you want to achieve and how important they are to your efforts.

| Audiences              | Targeted Outcomes   | Importance |
|------------------------|---------------------|------------|
| Health Organizations   | Join WPH initiative | Critical   |
| Community/Civic Groups | Support WPH         | Important  |
| Utilities              | Gain funding        | Important  |
| Media                  | Raise awareness     | Critical   |

**Add in some key audiences that are important to you, the targeted outcomes, and the importance of their participation.**

---

---

---

---

---

In today's 24-hour news cycle, messaging is critical. In addition to the broad Weatherization Plus Health goals, your partnership should identify specific messages that will focus your communications efforts and support your group's specific goals.

**Identify some potential messages for your organization.**

---

---

---

---

---



Once you have all the elements identified, then it is time to create a brief communications strategy to establish the specific publicity and communications activities, what messages will be used, what audience(s) will be targeted, what partner group will be assigned, and any need for outside resources.

### Will you:

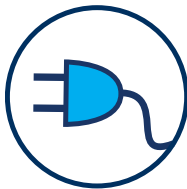
- Develop a new brochure to identify all partners and your goals?
- Produce a video to show a WPH audit?
- Create a customized slideshow presentation targeted for private funding or foundations?
- Maintain a roster of speakers to have on hand for public engagements?

Use the table below to help record your ideas on what to include in your communications strategy.

| Communications Activity             | Messages Used   | Audiences Targeted                            | Assigned Partner Group(s) | Outside Resources Needed? |
|-------------------------------------|---|---|---------------------------|---------------------------|
| Develop a new WPH brochure          | Improve low-income housing<br>Improve health and safety | Public<br>New Potential Partners              |                           | No                        |
| Produce a video to show a WPH audit | Educate about benefits of Weatherization Plus Health    | Public<br>Local Government<br>Private Funders |                           | Yes                       |
|                                     |   |   |                           |                           |
|                                     |   |   |                           |                           |
|                                     |   |   |                           |                           |
|                                     |   |   |                           |                           |
|                                     |   |   |                           |                           |
|                                     |   |   |                           |                           |
|                                     |   |   |                           |                           |
|                                     |   |   |                           |                           |
|                                     |   |   |                           |                           |

# CRAFT A WEATHERIZATION PLUS HEALTH STORY

## 1. CHOOSE YOUR STORY



SAVING ENERGY



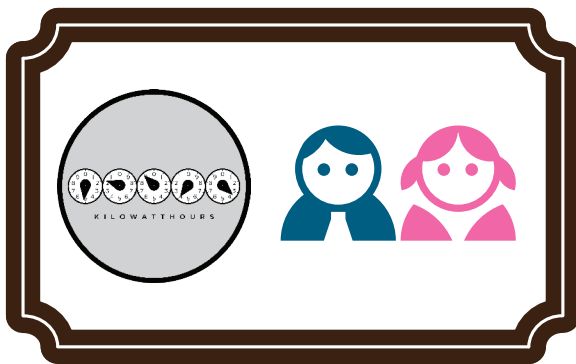
PREVENT HOSPITAL  
VISITS



SUPPORT WORKING  
FAMILIES

*Choose stories that illustrate frames and focus on the values and goals of Weatherization Plus Health. Stories reflecting responsible leadership and strategic thinking, mobilization of a variety of resources and partners, and positive results for individuals, families, and the community as a whole resonate best.*

## 2. FRAME YOUR STORY



*Framing the story as a broad based issue, something that affects everyone - higher energy prices or improving children's health. These issues open the door to show how your initiatives can bring wide ranging benefits.*

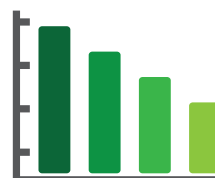
## 3. IDENTIFY PROBLEM, GOALS & SOLUTIONS

*Describe the problem itself (e.g. housing-related health hazards or energy efficiency needs) and the steps taken to implement creative solutions. Lay out how your Weatherization Plus Health collaboration provided a solution, such as referrals to community partners who provide resources allowing for WAP services to proceed. Successes should turn the story goals into specific achievements.*



## 4. DESCRIBE THE OUTCOMES

*All narratives should end with the demonstrated successes. Facts and figures are extremely helpful, especially with respect to community and economic changes.*



# SECTION III:

## IMPLEMENTING WEATHERIZATION PLUS HEALTH

# IMPLEMENTING WEATHERIZATION PLUS HEALTH ACTIVITIES

While the overall goal of Weatherization Plus Health is constant across all of the active organizations, how they approach and implement the program is unique for everyone. How an organization structures its program can be attributed to a number of factors, such as:

- Service area: Do they serve an urban, suburban or rural community?
- Housing stock: Is the housing stock more multifamily buildings or more single family homes?
- Environmental factors: Are there environmental issues that need to be addressed (e.g. - radon, lead)?

The following sections will offer strategies based on community types and collaborating with other health programs.

## *Strategies for Rural Agencies*

Weatherization Plus Health and Healthy Homes partners and collaborations can be more difficult in rural areas due to their diverse and large geography, dispersed populations, and few local funding sources. That said, there are a number of programs with which rural Weatherization agencies can build partnerships.

**Habitat for Humanity (Habitat)** covers nearly every county in the country. Nationally, the organization is prioritizing repairing and rehabilitating existing housing over building new housing as a more cost-effective way to ensure safe, affordable housing. Weatherization agencies may be able to educate their local Habitat affiliates on the energy and non-energy benefits of Weatherization and suggest a partnership. That way, Habitat can provide needed repairs to make homes “weatherization-ready” and Weatherization can provide services to rehabilitated Habitat homes.

**USDA Rural Development** covers every county in the nation, providing loans and grants for low-income families for health and safety-related repairs through its **504 Rural Rehabilitation Loan and Grant program**. Many rural Weatherization agencies partner with this program to provide roof, plumbing, electrical, or other structural repairs to make homes weatherization-ready.

**State Housing Trust Funds** are dedicated to the goal of providing affordable housing and many provide funds for health and safety repairs in low-income homes. According to the Housing Trust Fund Project, operated by the Center for Community Change, at least 40 states and the District of Columbia operate state housing trust funds. Twenty-six of these states, as of 2010, had dedicated public revenues committed to one or more of their state

housing trust funds. To learn more about state housing trust funds, please visit the Center for Community Change's Housing Trust Fund website.

**The Federal Home Loan Bank's Affordable Housing Program** has provided grants to Weatherization agencies to help get deferred Weatherization clients' homes weatherization-ready.

### *STRATEGIES FOR URBAN AGENCIES*

While urban Weatherization agencies may have less difficulty than their rural counterparts finding partners to contribute to Weatherization Plus Health, the logistics of coordinating services can still be tough. For example, service territories can vary wildly among potential partners; some partners' services may span an entire county, others may cover only a few zip codes. Urban areas also often tend to have older housing stock, making the need for Weatherization Plus Health services even more apparent.

One successful urban strategy is to convene a few initial partners who have some overlapping service territories, hone in on a couple of blocks or a specific neighborhood where there is great need for weatherization and other healthy homes measures, and implement a small-scale Weatherization Plus Health pilot. Pilots can:

- Serve as a quick way to gather lessons learned for improving collaborative efforts between partners.
- Help partners gain a true sense of their capacity for project expansion.
- Provide recognizable success and an interesting narrative when publicizing your work.

Many of the above resources listed for rural Weatherization agencies are available to urban Weatherization agencies as well. Additional resources may include:

**HUD Lead Hazard Control grants** are generally awarded to urban local governments, with some grants awarded to state-level agencies. Please see page 53 for strategies in integrating Lead Hazard Control funds in Weatherization homes.

Cities with populations over 50,000 and counties with populations over 200,000 automatically receive funds from **HUD's Community Development Block Grant program**. This program is highly flexible, with localities having ultimate say in how funds are allocated and no cap on the percentage that is used for housing repairs for health and safety. Many Weatherization agencies are sub-grantees of CDBG funds which they use to provide home repair or rehabilitation loan or grant programs.

Larger cities often have multiple **Community Development Corporations**, such as NeighborWorks affiliates, that provide loans and/or grants to perform health and safety repairs on low-income homes and are ripe for Weatherization Plus Health partnership.

## WPH IN ACTION

### NEW YORK

#### ISSUE:

EXPANDING SERVICES

#### SOLUTION:

[New Buffalo Impact \(NBI\)](#) is a Weatherization provider serving the greater Buffalo, NY area and has greatly benefited from integrating healthy homes and energy efficiency services with community partners. NBI became a lead production partner in a [Green and Healthy Homes Initiative \(GHHI\)](#) site in Buffalo and has greatly expanded services so that when Weatherization auditors identify health and safety concerns, NBI crews can address these issues immediately. Becoming a GHHI partner and expanding their services allowed NBI to add six WAP staff. In addition, the agency secured a commitment from the [Community Foundation for Greater Buffalo](#) for \$609,000 to perform an average of \$7,000 in health and safety repairs beyond the scope of DOE WAP services.

### *INTEGRATING WEATHERIZATION WITH LEAD HAZARD CONTROL*

Weatherization agencies often provide energy efficiency retrofit services on housing stock built prior to 1978, when lead-based paint was banned. DOE guidelines contain a number of safeguards for families receiving WAP services to ensure their health and safety, including:

- WAP crews working in pre-1978 housing are required to be trained in Lead Safe Weatherization.
- WAP is required to follow EPA's Lead, Renovation, Repair, and Painting Program rule.
- Deferral of WAP services is required when the extent and condition of lead-based paint in the house would potentially create further health and safety hazards.

A common misconception about Weatherization is that the program is able to replace windows as an energy efficiency measure. With the program's focus on increasing the energy efficiency in homes, crews and contractors must ensure that measures installed meet criteria for a [Savings-to-Investment Ratio \(SIR\)](#) greater than one. This means that any installed measure not billed toward health and safety costs must pay for themselves in energy savings, criteria that window replacement generally does not meet. Few deferrals actually result from lead based paint conditions being so serious that weatherization would actually exacerbate the problem. But Weatherization crews often wish they could do more to connect clients with resources to remove the threat of lead-based paint in a home, making collaboration with Lead Hazard Control programs all the more critical.

The best way for Weatherization agencies to begin working with Lead Hazard Control programs is to identify low hanging fruit opportunities, such as homes that are already in the Lead Hazard Control pipeline or have already been provided lead hazard control services, in conjunction with the local Lead Program. This saves Weatherization dollars from being spent on Lead Safe Weatherization, which can then be directed toward other health and safety costs. It also allows Lead Hazard Control programs to connect their clients with opportunities for energy bill reduction. Common intake forms that verify eligibility for services for both programs can help in referrals between agencies. Lead Hazard Control income eligibility guidelines (80% of Area Median Income) tend to be lower than WAP guidelines (200% Federal Poverty Level), so not all clients will qualify for both, but some will.

**Try to target common clients for a small scale pilot.** Both Weatherization and Lead Hazard Control programs prioritize homes with young children; identify these homes based on the initial intake (e.g., WAP audit, Lead Hazard Control audit, community partner enters home and sees evidence that both services may be needed). After identifying common homes, draft a **Memorandum of Understanding** to solidify commitment and roles.

In some instances it may make sense for lead hazard control to be performed first, like when WAP services could exacerbate the problem, causing a deferral in services. In other instances, weatherization measures can occur prior to lead hazard control services, but movement must be tracked to ensure those services were delivered. WAP agencies may also want to consider becoming a certified EPA Renovator firm to take on work as Lead Hazard Control services providers under contract from recipients of Lead Hazard Control grants. This could provide additional work for WAP crews or contractors during tight budget times for WAP.

The pilot stage helps partners develop solutions to barriers to integration and help to solidify an approach to seeking a common funding pool for continued efforts. Selling an integrated approach to weatherization and lead hazard control to funders gives partners a leg up as coordination becomes easier and more frequent. The final step is to expand beyond the pilot homes and roll out integrated services to all.

To learn more about integrating Weatherization services with Lead Hazard Control, please visit the **Weatherization Plus Health Past Training Events** page to find a free downloadable webinar recording from the Webinar Wednesday Series entitled *Integrating Weatherization with Lead Hazard Control*.

### ***INTEGRATING WEATHERIZATION WITH HOME REPAIR PROGRAMS***

One of the most common resources WAP agencies tap to prevent deferrals is local home rehabilitation (rehab) and repair programs. These programs are funded by a variety of sources and can help to stretch Weatherization repair and health and safety budgets, typically paying for measures that correct structural deficiencies and electrical and plumbing issues or accessibility modifications, all of which can help improve the health and safety of low-income clients.

Weatherization agencies struggling with where to begin with Weatherization Plus Health may have their own in-house home rehab or repair program with which to partner. In fact, many weatherization agencies hire contactors and or crews that are cross-trained to provide some of these services in addition to weatherization. Additionally, Community Development Corporations, local governments, and volunteer organizations are potential partners in your community for an integrated approach involving WAP and home rehab or repair services.

### *WORKING WITH VOLUNTEER GROUPS*

Volunteer organizations such as Habitat for Humanity and Rebuilding Together work nationwide to prioritize, repair, and rehabilitate existing houses. Based on their budget capacities, these organizations also contribute to a healthy home environment, particularly for senior clients. Modifications include roof repairs and installation of safety features such as grab bars in showers, handrails on stairs, and repairs to ensure safe entryways into homes, which can prevent costly injuries for elderly clients. They are also at work in communities to build new houses. These efforts can help prevent WAP job deferrals and also may offer a potential partnership for WAP providers.

Other ways WAP can leverage volunteer efforts include:

- Training volunteer staff to provide energy and health and safety education
- Donated materials
- Community outreach for referrals into WAP

While there are tradeoffs to working with volunteer repair organizations, such as dedicating time for supervision and guidance, these efforts can save significant funds. Additionally, these groups can provide services outside the scope of DOE-allowed measures, thus preventing WAP deferrals. Finally, these agencies, particularly agencies with a nationwide presence like Habitat for Humanity and Rebuilding Together, have a lot of clout and connections to help spread the word about the good work WAP agencies are doing across the country.

### *UTILIZING CDBG AND HOME FUNDS*

Many agencies working with internal or external partners with home repair programs may already be using CDBG and HOME funds in WAP homes. See page 33-34 for more information on CDBG and HOME.

If your agency currently does not have an in-house home repair program and a city's population within your jurisdiction exceeds 50,000 or a county within your jurisdiction exceeds 200,000 people, your agency may become a contractor or sub-grantee for CDBG or HOME funds. Many entitlement entities award funds to CAA and WAP agencies for combining home repair services with weatherization services and some even provide funds to help pay for additional weatherization measures. After all, combined savings from energy bill reduction and healthy homes improvements is certainly a viable economic development strategy!



It is critical for WAP agencies to develop solid relationships with their local housing departments. Each year, CDBG and HOME grantees must submit an annual plan outlining project objectives while every five years they must submit a strategic plan, otherwise known as a five-year consolidated plan. These jurisdictions are required to seek input from social service agencies and nonprofits and the general public before submitting their plans. CDBG is flexible, with no caps set on percentages of funds that can be dedicated to housing repairs or rehabilitation, and no “off limits” measures, a valuable resource for Weatherization agencies. Partnership with CDBG and HOME programs can be a critical resource for agencies to prevent deferrals, and increase the health and safety of clients they serve.

## WPH IN ACTION

### WISCONSIN

**ISSUE:**  
DECREASING DEFERRALS



**SOLUTION:**

[Couleecap, Inc.](#), both a Community Action and local WAP agency, serves a part of rural western Wisconsin. The agency faced Weatherization deferral rates approaching 60%, preventing WAP services for their neediest families. Using long-time collaborators, Couleecap created the [Weatherization Deferral Project \(WDP\)](#). Couleecap partnered with the [Federal Home Loan Bank's \(FHLB\) Affordable Housing Program \(AHP\)](#) for donated materials and forgivable grants, and [Habitat for Humanity](#) for volunteer labor to address issues on WAP-deferred units. Couleecap and Habitat worked together by using Habitat's volunteer-based model and WAP's quality standards. As a result, Habitat agreed to a one year warranty on their work, the same requirement that applied to all Couleecap contractors.

Increased collaboration through WDP has produced multiple benefits, allowing Weatherization to use an additional [\\$5,000 to \\$10,000](#) in rehab and healthy homes benefits per home and provide weatherization services for homes that would have been deferred. Most importantly, clients in 52 homes were able to receive full Weatherization services.

## *INCREASING HEALTHY HOMES CLIENT EDUCATION WITHIN WEATHERIZATION*

Bolstering healthy homes client education efforts is a great first step for Weatherization agencies who want to branch out into Weatherization Plus Health. Behavioral changes can garner significant savings for clients and appreciably increase their health and safety. Weatherization agencies can partner with community organizations serving similar clientele to distribute common energy efficiency and healthy homes publications. When other organizations enter the home first, they can still provide healthy homes and energy education in addition to screening the client for referral opportunities into Weatherization. That way, even if there is a waiting list for services, clients can immediately make changes with potential significant financial and health benefits.

### **Simple tips for a cleaner, safer home include:**

- Regularly vacuuming duct work to reduce airborne fine asthma particulates.
- Regularly changing furnace filters.
- Eliminating chemical based cleaners and using only green and healthy cleaning products in the home.
- Taking off shoes when entering the home to help reduce dirt, dust, and possible soil contaminants.

An inexpensive, effective, and timely strategy is to add Weatherization Plus Health education tips to the organization's regular WAP client education component. Follow up calls will help reinforce the recommended tips and help ensure clients follow-through.

# SECTION IV:

## WEATHERIZATION PLUS HEALTH WEBSITE

# WEATHERIZATION PLUS HEALTH WEBSITE FACT SHEET



U.S. DEPARTMENT OF  
**ENERGY**

*Weatherization Plus Health*

The U.S. Department of Energy's (DOE) Weatherization Plus Health initiative is a national effort to comprehensively and strategically coordinate resources to improve the energy efficiency, health, and safety of low-income homes. The National Association for State Community Services Programs (NASCCSP) is implementing the project on behalf of DOE. Weatherization Plus Health will ensure energy efficient and healthy indoor environments by facilitating the establishment of strong, effective partnerships between DOE's Weatherization Assistance Program (WAP) and healthy homes providers.



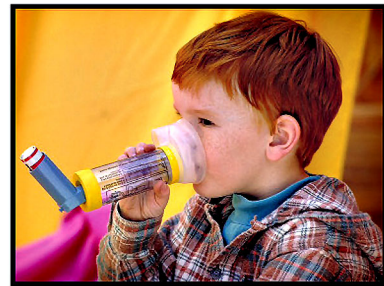
## Carbon Monoxide

Faulty gas-burning furnaces and hot water heaters, as well as unvented space heaters leak the deadly and invisible gas carbon monoxide (CO), a byproduct of combustion. Pregnant women, infants, and people with heart disease, anemia, or respiratory problems are especially at risk. Each year, more than 400 Americans die from unintentional CO exposure, with the death rate highest among older individuals.



## Childhood Lead Poisoning

Most homes in the United States were built before 1978, when lead paint was banned due to its toxic effects on children and adults. Lead dust from worn paint is a poison, causing permanent, life-long brain damage, loss of IQ, increased impulsive behavior, and kidney and heart disease. Nearly one-quarter million young children (less than 6 years old) have elevated blood lead levels above 10 micrograms per deciliter of blood, indicating a harmful level of exposure.



## Asthma

Dust, mildew, pest droppings, and fumes from building materials and cleaning products can trigger symptoms of asthma, one of the most common lung diseases in the United States. The Centers for Disease Control and Prevention (CDC) estimates that almost 10 percent of the U.S. population has asthma (25.7 million people), including 7.1 million children. Asthma flare ups keep children home from school, their parents home from work, and each year are associated with over 15 million physician office and hospital outpatient visits, nearly two million emergency room visits, and hospitalizations that cost tens of millions of dollars.



U.S. DEPARTMENT OF  
**ENERGY**

Energy Efficiency &  
Renewable Energy

[www.wxplushealth.org](http://www.wxplushealth.org)

The new Weatherization Plus Health web portal provides valuable data, resources, and tools to connect low-income community energy and health providers, as well as citizens, with much needed services and resource information to help impact community health planning.

## WeatherizationPlusHealth.org

Introduced fall 2012, the Weatherization Plus Health web portal [www.wxplushealth.org](http://www.wxplushealth.org) provides valuable data, resources, and tools to connect low-income community energy and health providers, as well as citizens, with much needed services and resource information to help impact community health planning. It also identifies home location health hazards and energy costs. Training events, best practices and technical expertise resources are posted as well. Within this web portal, the GeoExplorer tool can help the user identify various layers of data for their location including weatherization and healthy homes providers, population demographics, environmental data on climate and radon zones. This is the first comprehensive compilation of Weatherization Assistance Program (WAP) and Healthy Homes resources.

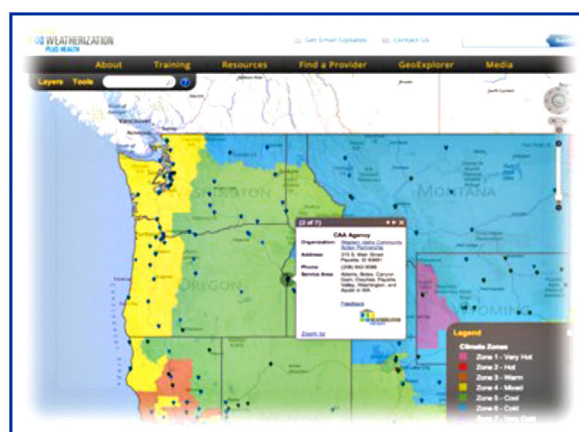
### WxPlusHealth.org Key Features

**Find A Provider**, a web based mapping tool created for this site is enabling member community service providers to easily locate providers of complimentary services such as remediation of radon, lead paint, or mold. With the locations of the community action agencies, Healthy Home grantees (Including Radon, Lead, and Asthma) and even training providers, **Find a Provider** is helping to make community collaboration and Weatherization Plus Health more effective.



**GeoExplorer**, NASCSP's advanced spatial data exploration tool allows users to overlay map data relevant to the mission. With filtering tools, all data from **Find a Provider**, the service areas of Community Action Agencies, and a wide range of demographic, and political data, users can easily identify spatial trends. Data includes:

|                 |                       |
|-----------------|-----------------------|
| Radon Zones     | Poverty Information   |
| Climate Zones   | Owner Occupancy       |
| Non Rural Areas | Age of Structure      |
| Home Type       | Total Household Count |
| Median Income   |                       |



U.S. DEPARTMENT OF  
**ENERGY**

Energy Efficiency &  
Renewable Energy

[www.waptac.org](http://www.waptac.org)

[www.wxplushealth.org](http://www.wxplushealth.org)

# SECTION V:

## WEATHERIZATION PLUS HEALTH FAQS



# WEATHERIZATION PLUS HEALTH FAQs

## WHAT IS WEATHERIZATION PLUS HEALTH?

Weatherization Plus Health (WPH) is a U.S. Department of Energy (DOE) initiative that enables local providers of low-income energy, health, and safety services to work together efficiently and effectively. Weatherization Plus Health will help communities integrate resources so residents can access comprehensive solutions to their housing problems.

## WHAT IS THE WEATHERIZATION ASSISTANCE PROGRAM?

The U.S. Department of Energy's (DOE) Weatherization Assistance Program (WAP) was created in 1976 to assist low-income families that were least able to afford to make the modifications in energy efficiency in their homes. Weatherization is operated in all 50 states, the District of Columbia, Native American tribes, and U.S. Territories. Funds are used to improve the energy efficiency of low-income homes using the most advanced technologies and testing protocols available in the housing industry. The energy conservation resulting from the efforts of State and local agencies helps our country reduce its dependence on foreign oil and decrease the cost of energy for families in need while improving the health and safety of their homes.

While serving as an energy efficiency program primarily, Weatherization also plays a role in ensuring the health and safety of low-income homes. **Weatherization Program Notice (WPN) 11-6**, or the WAP Health and Safety Guidance, enables how Weatherization agencies may spend a percentage of their programs' funding on health improvements to client homes. As the nation's largest residential energy efficiency program, touching over 700,000 homes from 2009 to 2012, Weatherization agencies can also connect a significant number of low-income families to other health and safety resources in the community. The DOE-funded Weatherization Plus Health initiative connects existing Weatherization network members with providers of Healthy Homes services, such as lead hazard control, remediation of asthma triggers (including moisture, mold, and pests), reduction in exposure to radon and other toxic chemicals, and prevention of injuries caused by old or dilapidated housing.

## WHAT IS NATIONAL ASSOCIATION FOR STATE COMMUNITY SERVICE PROGRAMS (NASPCSP)?

NASPCSP is a membership association that enhances the leadership role of states in preventing and reducing poverty. NASPCSP's vision encompasses the empowerment of low-income families to reach self-sufficiency in its broadest context. As an organization, NASPCSP represents the State Directors of the federal Department of Energy (DOE) Weatherization Assistance Program (WAP) and the Department of Health and Human Services (HHS) Community Services Block Grant (CSBG). The organization serves as an information resource and provides training and technical assistance around both programs.

### *WHAT IS THE CONCEPT OF A HEALTHY HOME?*

“A healthy home is sited, designed, built, maintained, and renovated in ways that support the health of its residents.” – U.S. Surgeon General, 2009

### *WHAT ARE THE 8 PRINCIPLES OF A HEALTHY HOME?*

1. **Keep your home Dry:** Damp houses provide a nurturing environment for mites, roaches, rodents, and molds, all of which are associated with asthma.
2. **Keep your home Clean:** Clean homes help reduce pest infestations and exposure to contaminants.
3. **Keep your home Pest-Free:** Recent studies show a causal relationship between exposure to mice and cockroaches and asthma episodes in children; yet inappropriate treatment for pest infestations can exacerbate health problems, since pesticide residues in homes pose risks for neurological damage and cancer.
4. **Keep your home Safe:** The majority of injuries among children occur in the home. Falls are the most frequent cause of residential injuries to children, followed by injuries from objects in the home, burns, and poisonings.
5. **Keep your home Contaminant-Free:** Chemical exposures include lead, radon, pesticides, volatile organic compounds, and environmental tobacco smoke. Exposures to asbestos particles, radon gas, carbon monoxide, and second-hand tobacco smoke are far higher indoors than outside.
6. **Keep your home Ventilated:** Studies show that increasing the fresh air supply in a home improves respiratory health.
7. **Keep your home Maintained:** Poorly-maintained homes are at risk for moisture and pest problems. Deteriorated lead-based paint in older housing is the primary cause of lead poisoning, which affects some 240,000 U.S. children.
8. **Thermally Controlled:** Houses that do not maintain adequate temperatures may place the safety of residents at increased risk from exposure to extreme cold or heat.

### *WHO ARE THE FEDERAL HEALTHY HOMES PARTNERS?*

**The U.S. Department of Housing and Urban Development (HUD)’s Office of Healthy Homes and Lead Hazard Control (OHHLHC)** is unique among federal agencies. The OHHLHC was established to eliminate lead-based paint hazards in America’s privately owned and low-income housing and to lead the nation in addressing other housing-related health hazards that threaten vulnerable residents. As one means of addressing substandard housing, the OHHLHC provides funds to state and local governments to develop cost-effective ways to reduce lead-based paint hazards. In addition, the office enforces HUD’s lead-based paint regulations, provides public outreach and technical assistance, and conducts technical studies to help protect children and their families from health and safety hazards in the home.



**Environmental Protection Agency (EPA) Indoor Environments Division** is a critical partner in the effort to increase healthy housing conditions across the country. EPA administers the Indoor Environments Program, the goal of which is to reduce the environmental health risks posed by contaminants in indoor environments in new and existing homes, schools, offices, and other buildings.

EPA released **“Healthy Indoor Environment Protocols for Home Energy Upgrades,”** a voluntary guidance document developed in collaboration with the White House Council on Environmental Quality (CEQ) Recovery Through Retrofit Initiative and the DOE initiative to develop Guidelines for Home Energy Professionals. This voluntary guidance is particularly useful for the Weatherization Assistance Program network because it aims to seize opportunities for health and safety improvements within the boundaries of DOE’s mandate as an energy efficiency program. The Protocols also include a helpful client education appendix that enables weatherization practitioners to recommend specific behavioral actions to extend the life of the interventions they provide and empower clients to maintain healthier, safer, and more energy efficient homes.

**Centers for Disease Control and Prevention (CDC)’s Healthy Homes Program** is a coordinated, comprehensive, and holistic approach to preventing diseases and injuries that result from housing-related hazards and deficiencies. The CDC also funds the National Asthma Control Program, which aims to reduce the number of deaths, hospitalizations, emergency department visits, missed school days or workdays, and limitations on activity due to asthma. The CDC provides helpful educational documents to assist organizations in developing healthy homes initiatives and educate the public about the dangers of hazardous housing conditions. The CDC also provides state specific home health related data through its National Environmental Public Health Tracking Program, which allows states and localities to analyze current housing conditions and target the interventions they may seek to provide. As such, the CDC is a wonderful resource for organizations and agencies for holistically addressing energy efficiency and healthy homes issues.

**U.S. Department of Agriculture (USDA)’s Healthy Homes Initiative** is coordinated by Auburn University and administered on the ground by State Cooperative Extension offices. Its network of state coordinators has partnered with state agencies, medical professionals, schools, and community groups to educate families on home health hazards. The booklet *Help Yourself to a Healthy Home* is a self-help guide on home health issues, and can be a useful client education tool. Available in English and Spanish, it provides simple action steps to improve home safety, covering topics such as pest management, asthma triggers, mold, lead, etc. USDA also funds Rural Rehabilitation Loans and Grants, which when coordinated with weatherization activities can improve the structural integrity of homes for low-income families to allow for the most efficient weatherization work.

**The Office of the Surgeon General (OSG)** issued a Call to Action in June of 2009 to promote Healthy Homes. Included in this release are steps that individuals, organizations, health care providers, and state and local governments can take to educate the public about maintaining healthy homes, and implement healthy homes protocols to improve public health.

**U.S. Department of Labor (DOL)** runs the the Occupational Safety and Hazard Administration, which recognizes the importance of maintaining a safe working environment for American workers. Individuals spend 90% of their time indoors, and although most of that time is spent in their own homes, a significant part of that time is spent in the indoor work environment. Many WPH principles of maintaining a healthy home, particularly unintentional injury prevention, are transferrable to the workplace and can be linked to the Occupational Safety and Hazard Administration's goals.

### *WHO ARE THE NATIONAL PARTNERS?*

**The National Center for Healthy Homes (NCHH)** has been a critical partner in advancing the goal of creating healthier and more energy efficient homes. Using a holistic and interdisciplinary approach, NCHH brings the public health, housing, environmental, and regulatory communities together to combat disease and injuries caused by hazards in the home. NCHH currently operates Healthy Homes Training Centers in 29 States across the country. NCHH also frequently publishes research papers on various healthy homes projects and topics. The NCHH website houses a wealth of resources on training materials, current policy initiatives surrounding healthy homes, upcoming Healthy Homes training schedules, and more.

**Green and Healthy Homes Initiative (GHHI)** is a public-private partnership that refocuses how we as a nation repair and improve housing in economically challenged communities. Currently operating in 17 pilot sites across the country, the GHHI approach aligns funding sources, coordinates resources and trains workers to handle home rehab projects at the same time. GHHI received some much deserved recognition in Vice President Biden's report to the President entitled, "A New Way of Business: How the Recovery Act is Leading the Way to a 21st Century Government," for administering a cost-effective approach to healthier, more energy efficient housing for low-income families.

### *WHERE CAN I GET TRAINING?*

**Weatherization Assistance Program (WAP) Training Centers** offer trainings that include topics such as Air Sealing, Insulation, Combustion Safety, Lead Safe Weatherization, Building Science Fundamentals, and Ventilation Standards. Many training classes focus directly on issues of health and safety in weatherization. To view a list of WAP Network-verified Training Centers, please go to <http://wxplushealth.org/find-a-provider>

**The National Center for Healthy Housing (NCHH)** operates the **National Healthy Homes Training Center and Network** through a cooperative agreement with the U.S. Centers for Disease Control and Prevention (CDC), and support from the U.S. Department of Housing and Urban Development (HUD). The Training Center and its local training partners provide training to a wide range of audiences, including environmental health practitioners, public health nurses, and housing professionals such as WAP technicians.

### Goals of the Healthy Homes Training Network

- Provide training for public health and housing practitioners in the assessment and treatment of housing-related health hazards, with a focus on practical and cost-effective methods;
- Promote cross-training of public health and housing practitioners;
- Create a forum for the exchange of practical guidance about healthy housing strategies among federal, state, tribal, and local agency staff;
- Develop a mechanism for the ongoing introduction of new research findings into public health training and practice; and
- Identify and optimize opportunities for networking, collaboration, and partnerships.

To view a list of Healthy Homes Training Centers, please go to <http://wxplushealth.org/find-a-provider>

### *WHO ARE THE LOCAL PROVIDERS?*

Local providers of Weatherization Plus Health programs include Community Action Agencies, Weatherization Assistance Programs, and local Healthy Homes Programs (Asthma, Lead, Radon, etc.). You can find local providers for your area by using the Find a Provider map at <http://wxplushealth.org/find-a-provider>

# SECTION VI:

## WEATHERIZATION PLUS HEALTH RESOURCES

# WEATHERIZATION PLUS HEALTH RESOURCES

One of Weatherization Plus Health's main goals is to connect the Weatherization Assistance Program and Healthy Homes practitioners. Below is a list of useful resources for individuals or agencies engaging in such work. If you have any questions or would like to request additional resources, please contact NASCSP at [info@waptac.org](mailto:info@waptac.org).

## WEATHERIZATION PLUS HEALTH TOOLS

<http://wxplushealth.org/resources/weatherization-plus-health-tools>

These tools make it easier for your agency to form and sustain new partnerships between the Weatherization Assistance Program and Healthy Homes programs. These resources include examples of integrated audit tools, publicity tips, fundraising strategies, and more.

- Sample Assessment Forms
- Asset mapping resources
- Publicity Resources
- Community Foundation Locators
- Funding Partners
- Innovative funding strategies
- WAPTAC Resources

## Client Educational Resources

Client education is an important component of increasing the lifespan of the home interventions your agency provides. Promoting behavioral change in your client base can lead to more efficient energy usage habits as well as better health outcomes.

<http://wxplushealth.org/resources/client-education-resources>

## Past Training Events

As part of the Weatherization Plus Health initiative, the Department of Energy (DOE) hosted six regional conferences in 2011 that took place across the country. The National Association for State Community Services Programs (NASCSPP) also delivered trainings at state weatherization conferences and state-level Healthy Homes meetings across the country. Information about the conferences, including presentations from conference speakers, can be found on the Past Training Events webpage.

<http://wxplushealth.org/training/past-training-events>

## NASCSP Member Contact Information

NASCSP member contact information provides a list of state administrators of the Community Services Block Grant (CSBG) and Weatherization Assistance Program (WAP).

<http://wxplushealth.org/resources/nascsp-member-contact-information>

## Healthy Home E-mail Updates

These listservs are helpful tools in learning about the latest research regarding energy efficiency and healthy homes issues, updates on the newest regulations and standards issued by governmental departments regarding healthy homes issues, and the funding status of various federal Healthy Homes and energy efficiency related programs. These listservs also often contain compelling personal stories and news articles involving relevant programs.

<http://wxplushealth.org/resources/healthy-homes-email-updates>

## Related Publications

Weatherization Plus Health related publications are available. These are great reference and resource publications that can be used for planning, grant writing, quotations in presentations, testimony, and other public forums.

<http://wxplushealth.org/related-publications>

## Success Stories

Learn more about programs throughout the nation that have already formed successful partnerships between energy efficiency and Healthy Homes programs using a variety of funding sources and creative approaches.

<http://wxplushealth.org/success-stories>

## Find A Provider

Use the “Find a Provider” tool to identify the specific local providers in your area. The tool identifies Weatherization agencies, Community Action Agencies, CSBG state contacts, Weatherization state contacts, Asthma Grantees, Lead Grantees, Radon Grantees, Healthy Homes Grantees, Health and Housing Funders’ Forum, Healthy Homes Training Providers, and Weatherization Training Providers.

<http://wxplushealth.org/find-a-provider>

## KEY WEBSITES

U.S. Department of Energy’s Weatherization Assistance Program

<http://www1.eere.energy.gov/wip/wap.html>

Weatherization Assistance Program Technical Assistance Center (WAPTAC)

<http://www.waptac.org>

National Association for State Community Service Programs (NASCSPP)

<http://www.nascsp.org>

## FEDERAL AGENCIES

U.S. Department of Housing and Urban Development (HUD)'s Office of Healthy Homes and Lead Hazard Control (OHHLHC)

[http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/healthy\\_homes](http://portal.hud.gov/hudportal/HUD?src=/program_offices/healthy_homes)

Centers for Disease Control and Prevention (CDC)

<http://www.cdc.gov>

U.S. Environmental Protection Agency (EPA)

<http://www.epa.gov>

Health and Human Services (HHS)

<http://www.hhs.gov>

U.S. Department of Agriculture (USDA)

<http://www.usda.gov>

## NATIONAL ORGANIZATIONS

National Center for Healthy Homes (NCHH)

<http://www.nchh.org>

Green & Healthy Homes Initiative (GHHI)

<http://www.usda.gov>

American Public Health Association (APHA)

<http://www.apha.org>

# SECTION VII:

## APPENDICES



# STRENGTHS, WEAKNESSES, OPPORTUNITIES AND THREATS (SWOT) ORGANIZATIONAL ANALYSIS\*

An organizational analysis is accomplished from two perspectives:

- Looking outside at key influences on the organization (external analysis).
- Looking inside at the resources and services of the organization (internal analysis).

The external analysis involves judgment and some speculation concerning the effects of existing trends. Specifically, it focuses on threats and opportunities.

The internal analysis evaluates the organization's human, financial, facilities, competitiveness and other capacities and potential. It focuses on strengths and weaknesses.

## SWOT DEFINITIONS

Several key definitions are used for this SWOT assessment:

### STRENGTHS

Those factors or characteristics of the organization that could serve as the basis for achieving your mission and vision.

#### EXAMPLES

---

|                        |                          |                 |
|------------------------|--------------------------|-----------------|
| Leadership             | Multiple Funding Streams | Data Collection |
| Staff and Crews        | Financial Resources      | Volunteers      |
| Existing Relationships | Cross Training           |                 |

### WEAKNESSES

Factors that realistically may limit the extent or speed with which your mission and vision may be accomplished.

#### EXAMPLES

---

|                    |                       |
|--------------------|-----------------------|
| Decreased Funding  | Different Eligibility |
| Aging Facilities   | Requirements          |
| Too many deferrals |                       |

### OPPORTUNITIES

Represent “good bets” for action as a means to generate additional programs and services, organizational investment opportunity or other aspects of the vision.

#### EXAMPLES

---

|  |                       |
|--|-----------------------|
| Expansion of services                  | Helping more clients  |
| Connect with health care organizations | New Staff & Expertise |
|  | New Volunteers        |

## THREATS

Are conditions external to your organization that could undermine stability and therefore should provide greater incentive for action.

### EXAMPLES

---

Changes in funding

Economic Factors

Health & Safety Costs

Competition for resources

Multiple reporting systems

## SWOT EXERCISE

Now it is time to gather your group or organization and create and prioritize a list of your organization's Strengths, Weaknesses, Opportunities and Threats. With your group, appoint someone to facilitate and record.

### Materials Needed:

Flip chart paper

Markers

Colored dots

### Brainstorm Strengths: 5 minutes

- Provide two (2) minutes of silence for each member to gather thoughts and make a list of Strengths.
- Using a round robin, start with one member sharing one idea from their list and then continuing in a circle with each person sharing one idea at a time.
- Record these ideas on a large sheet of paper so everyone can see. Continue until all ideas are up on the paper. Reinforce to the group there should be no discussion or judgment until the end.
- May ask questions to clarify what people mean.

### Evaluate Strengths: 5 minutes

Allow each member to discuss strengths and advocate for their favorite.

### Prioritize Strengths: 5 minutes

- Each person is given three colored dots and asked to place one dot by each of their top three strengths.
- Count up votes for each strength and number them with one for the most votes, two for the second, etc.

Follow the same instructions above for prioritizing Strengths for the other categories - Weaknesses, Opportunities, and Threats.

\* SWOT analysis modified from the Rural Development Initiative SWOT Analysis, 2001; [http://www.rdiinc.org/pdfs/4/original/SWOT\\_Form.pdf](http://www.rdiinc.org/pdfs/4/original/SWOT_Form.pdf)

# SWOT EXERCISE

INTERNAL ORIGIN

## STRENGTHS

---

---

---

---

---

---

---

---

---

---

---

---

EXTERNAL ORIGIN

## OPPORTUNITIES

---

---

---

---

---

---

---

---

---

---

---

---

HELPFUL  
TO ACHIEVING THE OBJECTIVE

## WEAKNESSES

INTERNAL ORIGIN

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

## THREATS

EXTERNAL ORIGIN

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

HARMFUL

# MEMORANDUM OF UNDERSTANDING

## MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (“Memorandum”) is made and entered into by and between the XXXX and XXXX and is intended to provide an outline of principles that govern the relationship and dealings between these parties utilizing the Safe and Healthy Homes Investment Partnership (SHHIP) Model hereto known as XXXXX.

### Background Information

**A.** The XXXXX Lead program (insert agency/program background here example): The XXXXX Department is protecting health and improving lives as the local public health agency for the City of XXXXX. Established in XXXXX, the department is charged with assuring conditions in which people can be healthy. XXXXX Public Health provides clinical, environmental, health promotion, and population-based services. The XXXXX Public Health, Healthy Homes Program works to reduce disease and injury by helping families make their homes healthier and safer environments. Areas of focus include lead poisoning prevention, asthma and allergy control, and household hazards. Asthma triggers include pests and pesticides, indoor/outdoor air quality, allergens such as mold and dust mites, tobacco smoke, and chemicals.

**B.** The XXXXX Weatherization (insert agency/program background here example): Weatherization Assistance Program (Weatherization) enables low-income families to permanently reduce their heating and cooling cost by making their homes more energy efficient. Weatherization promotes a “whole house approach” concept. Weatherization technologies include a wide range of energy efficiency measures for retrofitting homes. Service providers choose the best combination of measures for reducing total energy consumption in low-income housing. This is based on a comprehensive energy audit, which is performed on each home.

### Terms of Collaboration

The XXXXX Lead Program and XXXXX Weatherization agency each agree to be responsible for the following needs of the project:

The XXXXX Lead Program will provide:

- Phone consultations.
- Lead testing for children 6 months – 6 years.
- In-home healthy home intervention for homes with an asthmatic child for asthma control and triggers, and household dangers (including environmental assessments, education/behavior change, trigger control supplies).
- Mandatory lead inspections for homes with lead poisoned children.
- Free HEPA vacuum loan for lead hazard clean-up.
- Presentations to community organizations.
- Displays of healthy home educational information at fairs and special events.
- Referrals to services for landlords, tenants, and homeowners.
- Make necessary referrals to and combine services with the other parties of the agreement to ensure a safe and healthy home for occupants.

### The XXXXX WAP will:

1. Provide weatherization assistance program services to income eligible households. These services will include (but not be limited to) the following:
  - a. Combustion analysis testing of all combustion fired appliances;
  - b. Draft testing of all combustion appliances that are vented to the outside, in worst case pressure scenario of the home;
  - c. Perform a blower door test of the home to determine the amount of air infiltration occurring within the home;

- d. Visually inspect for existing insulation within the attic(s), sidewalls, and floor areas if necessary;
  - e. Issue work orders to local HVAC and Insulation contractors to perform the work that needs to be completed;
  - f. Provide final inspection for all work that was performed by local contractors to ensure quality workmanship and that work has met the standards identified in the Weatherization Program Standards (WPS) required by the Home Weatherization Assistance Program (HWAP).
2. Customer education during the weatherization assistance process on issues that the customer can address on their own to supplement the work performed on their homes and to save additional energy.
  3. Make necessary referrals to the other parties of the agreement to leverage the activities available through the parties to ensure a safe and healthy home for occupants.

#### **Responsibilities shared by all parties:**

The Partnership will include at least one partner from each of the following service disciplines: Housing rehabilitation, energy efficiency, and Healthy Homes/Lead Hazard Control.

The outcomes of this Partnership are coordinated intervention strategies that provide more economical interventions, healthier residents, and more comprehensive and effective service delivery.

#### **The Mission is to IMPROVE:**

- Service delivery
- Workforce of healthy building professionals
- Health outcomes, particularly children and the elderly
- Ease of access and enrollment in eligible programs
- Housing in a manner that is environmentally sustainable, healthy and safe
- Partnership sustainability

#### **Partnership Service Delivery will:**

- Streamline service delivery with a goal of Single Citizen Point-of-Contact
- Identify and Eliminate Barriers to Effective Service Delivery
- Utilize HUD Healthy Homes Rating Tool where appropriate
- Support common multi-disciplinary Workforce Training
- Maximize the benefits of health-based housing interventions
- Report Data in a Unified Manner

## **AUTHORIZATION**

The execution of this Memorandum by the parties has been authorized by the respective governing bodies of such parties. This Memorandum may not be modified except in writing executed by each of the parties hereto.

The XXXXX Lead Program

By \_\_\_\_\_

Its \_\_\_\_\_

Date \_\_\_\_\_, 2014

The XXXXX Public Health Department

By \_\_\_\_\_

Its \_\_\_\_\_

Date \_\_\_\_\_, 2014

# CONNECTICUT EFFICIENCY HEALTHY HOMES INITIATIVE - HEALTHY HOMES CHECKUP

|   |   |  |             |  |
|---|---|--|-------------|--|
| <b>CUSTOMER NAME:</b>   |   | <b>ADDRESS:</b>  |             |  |
| <b>DIAGNOSTICS</b>  |   |  |             |  |
| <b>Carbon Monoxide (CO) Measurements (ppm)</b>  | Room with Heating System  | Room with Water Heater   | Living Area | Kitchen  |
| <b>INTERVENTION OPPORTUNITIES</b><br><i>See Healthy Homes Action Plan for allowable activities. Gray-shaded items are only eligible for referral unless otherwise indicated. Resident education should be provided for any issues observed. Certain conditions posing risks to workers and occupants may require deferral and are marked with an asterisk*.</i> |   |  |             | <b>RECOMMENDATION</b>  |
| <b>Air Conditioning System</b><br><input type="checkbox"/> Check if none present  | AC System Code (from NEAT Data Collection Form): _____<br>Is system operable? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Presence of at-risk occupants (elderly, disabled)? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Health/safety concerns:<br><input type="checkbox"/> Yes: _____<br><input type="checkbox"/> None  |  |             | <input type="checkbox"/> Repair<br><input type="checkbox"/> Replace<br><input type="checkbox"/> Install  |
| <b>Heating System</b><br><input type="checkbox"/> Check if none present   | Heating System Code (from NEAT Data Collection Form): _____<br>Is system operable? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Is system red-tagged? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Health/safety concerns:<br><input type="checkbox"/> Yes: _____<br><input type="checkbox"/> None  |  |             | <input type="checkbox"/> Clean-Tune-Test<br><input type="checkbox"/> Repair<br><input type="checkbox"/> Replace<br><input type="checkbox"/> Install  |
| <b>Solid Fuel Heating (Wood, Coal)</b><br><input type="checkbox"/> Check if none present  | Type: _____<br><input type="checkbox"/> Primary heat source <input type="checkbox"/> Secondary heat source<br>Condition ( <i>inspect chimney and flue; perform combustion appliance zone depressurization</i> ): _____<br>Does the heating source present a health or safety risk to the occupant? <input type="checkbox"/> Yes <input type="checkbox"/> No   |  |             | <b>PRIMARY:</b><br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Repair<br><input type="checkbox"/> Replace<br><br><b>SECONDARY:</b><br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Repair |
| <b>Space Heaters</b><br><input type="checkbox"/> Check if none present  | <b>Vented Combustion</b>  | <i>(Treat as furnace.)</i><br>Is system operable? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Is system red-tagged? <input type="checkbox"/> Yes <input type="checkbox"/> No   |             | <input type="checkbox"/> Repair<br><input type="checkbox"/> Replace<br><input type="checkbox"/> Install  |
|   | <b>Unvented Combustion</b>  | Unvented combustion space heater present? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Primary heat source <input type="checkbox"/> Secondary heat source<br>Does the unit have an ANSI Z21.11.2 label? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Air free carbon monoxide test: <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Results: _____<br><b>REQUIRED: Remove, except as secondary source meeting ANSI Z21.11.2</b> |             | <input type="checkbox"/> Remove  |
|   | <b>Stand Alone Electric</b>   | Stand alone electric space heater present? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Primary heat source <input type="checkbox"/> Secondary heat source<br>Adequate power supply ( <i>check circuitry</i> )? <input type="checkbox"/> Yes <input type="checkbox"/> No   |             | <input type="checkbox"/> Examine options for alternate heat source if primary  |
| <b>Unvented Combustion Appliances</b><br><input type="checkbox"/> Check if none present   | <b>NO BLOWER DOOR TEST OR INSULATION UPGRADE WITH UNVENTED APPLIANCES</b><br><input type="checkbox"/> Unvented combustion appliances present ( <i>check all that apply</i> ):<br><input type="checkbox"/> Gas clothes dryer<br><input type="checkbox"/> Fuel-fired space heaters<br><input type="checkbox"/> Gas logs<br><input type="checkbox"/> Charcoal<br><input type="checkbox"/> Stoves ( <i>check burners for operability, flame quality</i> )<br><input type="checkbox"/> Other: _____<br><input type="checkbox"/> Clothes dryer improperly vented (gas or non-gas)<br><b>REQUIRED: Conduct combustion safety testing. Proper venting to outside is required. Test naturally venting appliances for draft and spillage.</b> |  |             | <input type="checkbox"/> Correct existing venting<br><input type="checkbox"/> Vent unvented combustion appliances<br>Describe: _____<br><input type="checkbox"/> Install dryer vent  |
| <b>Ventilation</b><br><input type="checkbox"/> Check if none present  | Check all that apply:<br>Bath fan? <input type="checkbox"/> Yes <input type="checkbox"/> No   Operational? <input type="checkbox"/> Yes <input type="checkbox"/> No   Vented to outside? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Kitchen fan? <input type="checkbox"/> Yes <input type="checkbox"/> No   Operational? <input type="checkbox"/> Yes <input type="checkbox"/> No   Vented to outside? <input type="checkbox"/> Yes <input type="checkbox"/> No  |  |             | <input type="checkbox"/> Install bath fan<br><input type="checkbox"/> Install kitchen fan  |

## Connecticut Efficient Healthy Homes Initiative – Healthy Homes Checkup

|   |  |  |  |
|---|--|--|--|
|   | <input type="checkbox"/> MERV 8 or greater air filter    Operational? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Other mechanical/central ventilation (specify: _____)    Operational? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br><i>REQUIRED: ASHRAE 62.2 2010 must be met to the fullest extent possible when performing weatherization.</i>  |  | <input type="checkbox"/> Update fans and blower systems per ASHRAE 62.2 2010<br>Describe: _____  |
| <b>Water Heaters</b><br><input type="checkbox"/> Check if none present                        | Safety test: <input type="checkbox"/> Yes <input type="checkbox"/> No    Is water heater performing safely? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If no, describe: _____<br>Is the hot water temperature greater than 120F? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Hot water temperature turn-down to 120F? <input type="checkbox"/> Yes <input type="checkbox"/> No  |  | <input type="checkbox"/> Replace   |
| <b>Air Pollutants (Formaldehyde, VOCs, Other)*</b>  | Presence of air pollutants? <input type="checkbox"/> Yes <input type="checkbox"/> No    Specify: _____<br>If yes, is there a risk to workers? <input type="checkbox"/> Yes <input type="checkbox"/> No   |  | <input type="checkbox"/> Removal<br><input type="checkbox"/> Deferral  |
| <b>Asbestos</b><br><input type="checkbox"/> Check if none present                             | ANY EVIDENCE OF POSSIBLE ASBESTOS-CONTAINING MATERIAL? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><i>If yes, <b>no</b> blower door test may be performed.</i>   |  |  |
|   | <b>Siding</b>  | <b>NEVER CUT OR DRILL</b><br><input type="checkbox"/> None noted <input type="checkbox"/> Visual presence <input type="checkbox"/> Assumed present<br>Location: _____<br>Removal required to perform energy conservation measures? <input type="checkbox"/> Yes <input type="checkbox"/> No  | <input type="checkbox"/> Remove  |
|   | <b>Vermiculite</b>   | <b>REMOVAL NOT ALLOWED</b><br><input type="checkbox"/> None noted <input type="checkbox"/> Visual presence <input type="checkbox"/> Assumed present<br>Location: _____<br><input type="checkbox"/> Prevents safe weatherization  | <input type="checkbox"/> AHERA-certified prescriptive sampling<br><input type="checkbox"/> Encapsulation by trained professional   |
|   | <b>Pipes, Furnaces, Small Covered Surfaces</b>   | <input type="checkbox"/> None noted <input type="checkbox"/> Visual presence <input type="checkbox"/> Assumed present<br>Location: _____<br><input type="checkbox"/> Condition: _____<br>_____<br>_____  | <input type="checkbox"/> AHERA-certified prescriptive sampling<br><input type="checkbox"/> Encapsulation by trained professional<br><input type="checkbox"/> Removal by trained professional |
| <b>Biologicals and Unsanitary Conditions*</b>   | Presence of conditions leading to biological and unsanitary conditions: <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, describe: _____<br>_____<br>Do conditions pose a risk to workers? <input type="checkbox"/> Yes <input type="checkbox"/> No   |  | <input type="checkbox"/> Remediation<br><input type="checkbox"/> Deferral  |
| <b>Building Structure and Roofing*</b><br><br><i>Indicate any holes in wall on worksheet.</i> | Any evidence or reporting of roof leaks? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Describe: _____<br>Bulging, buckling, or alignment problem? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Describe: _____<br>Safe for entry and performance of assessment, work, and inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Requires more than incidental repair to perform weatherization? <input type="checkbox"/> Yes <input type="checkbox"/> No |  | <input type="checkbox"/> Incidental repair<br>Describe: _____<br>_____<br><input type="checkbox"/> Deferral<br><input type="checkbox"/> REFER  |
| <b>Carbon Monoxide Detector</b>   | Are gas-burning appliances present? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Is there an attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Is an operational carbon monoxide detector present on each floor outside bedrooms? <input type="checkbox"/> Yes <input type="checkbox"/> No   |  | <input type="checkbox"/> Provide CO detector<br>Number: _____  |
| <b>Drainage*</b>  | <b>Gutters and Downspouts</b>  | <input type="checkbox"/> Gutters, downspouts: attached, functioning, no pooling of water<br><input type="checkbox"/> Gutters, downspouts: not attached/missing, not functioning, pooling of water<br><input type="checkbox"/> No gutters/downspouts<br><input type="checkbox"/> Evidence of moisture problems linked to drainage<br><input type="checkbox"/> Ice damming present | <input type="checkbox"/> Incidental repair<br>Describe: _____<br>_____<br><input type="checkbox"/> Deferral<br><input type="checkbox"/> REFER  |
|   | <b>Roof Flashing</b>   | <input type="checkbox"/> Roof flashing appears to be functioning<br><input type="checkbox"/> Roof flashing does not appear to be functioning   |  |
| <b>Electrical Wiring Hazard</b>   | <b>Regular Wiring</b>  | Health or safety risk? <input type="checkbox"/> Yes <input type="checkbox"/> No    Location: _____<br>Does the condition of wiring prevent weatherization? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Voltage test drop results: _____  | <input type="checkbox"/> Minor repair<br><input type="checkbox"/> Minor upgrade  |



## Connecticut Efficient Healthy Homes Initiative – Healthy Homes Checklist

|  |   |   |  |  |  |                |  |                                |  |  |  |
|--|---|---|--|--|--|----------------|--|--------------------------------|--|--|--|
|  |   | Voltage detection test results: _____   |  |  |  |                |  |                                |  |  |  |
|  | <b>Knob-and-Tube Wiring</b>   | <input type="checkbox"/> Not present <input type="checkbox"/> Present   Location: _____<br>Is the wiring a health or safety risk? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Does the condition of wiring prevent weatherization? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Voltage test drop results: _____<br>Voltage detection test results: _____<br><i>REQUIRED: Provide sufficient over-current protection prior to insulation over knob-and-tube.</i> | <input type="checkbox"/> Minor repair<br><input type="checkbox"/> Minor upgrade  |  |  |                |  |                                |  |  |  |
| <b>Fire Extinguisher</b>   | Is solid fuel present? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Presence of fire extinguisher? <input type="checkbox"/> Yes <input type="checkbox"/> No   Age of extinguisher? _____   |   | <input type="checkbox"/> Provide extinguisher (with solid fuel only)   |  |  |                |  |                                |  |  |  |
| <b>Injury Prevention</b>   | Do conditions exist that prevent weatherization or that endanger workers? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Describe/state location: _____<br>_____<br>Could these conditions be fixed with minor repairs to allow weatherization? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   | <input type="checkbox"/> Minor repairs or installation<br>Describe: _____<br>_____   |  |  |                |  |                                |  |  |  |
| <b>Lead</b><br><br><i>If chipping/peeling paint, complete worksheet.</i>   | Follow EPA'S Lead, Renovation, Repair, and Painting (RRP) Program and Lead Safe Work Practices.<br>Home built before 1978? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Children under the age of 6: <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Has the property previously been tested for lead?:<br><input type="checkbox"/> Not tested <input type="checkbox"/> Tested and not found <input type="checkbox"/> Tested and found<br>Has lead abatement been performed in the property? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown<br>Are there any outstanding orders for lead abatement on the property?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown<br>Presence of chipping or peeling paint? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   | <input type="checkbox"/> EPA-recognized test kit for lead<br><input type="checkbox"/> REFER  |  |  |                |  |                                |  |  |  |
| <b>Mold and Moisture*</b><br><input type="checkbox"/> Check if none present<br><br><i>If observed, complete attached worksheet.</i>                      | <input type="checkbox"/> Mold or moisture issue observed <input type="checkbox"/> No mold observed<br>If present, will mold and moisture issues impact, prevent or be worsened by weatherization? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Describe: _____<br>_____<br>_____<br>If present, are sources of moisture evident? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Describe: _____<br>_____<br>_____<br>If present, are mold and moisture issues severe (beyond limited repair)? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Describe: _____<br>_____  |   | <input type="checkbox"/> Limited repair and correction<br>Describe: _____<br>_____<br><input type="checkbox"/> Deferral<br><input type="checkbox"/> REFER                        |  |  |                |  |                                |  |  |  |
|  | Humidifier used? <input type="checkbox"/> Used <input type="checkbox"/> Not used <input type="checkbox"/> Not present<br>If used: <input type="checkbox"/> Reservoir not cleaned   Last filter change: _____<br>Dehumidifier used? <input type="checkbox"/> Used <input type="checkbox"/> Not used <input type="checkbox"/> Not present<br>If used: <input type="checkbox"/> Bucketless <input type="checkbox"/> Reservoir not cleaned  |   | <input type="checkbox"/> Provide dehumidifier  |  |  |                |  |                                |  |  |  |
| <b>Pests*</b><br><input type="checkbox"/> Check if none present<br><br><i>Note any pest locations (reported or evidence seen) on attached worksheet.</i> | Does pest infestation prevent successful weatherization? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><table border="1"> <tr> <td><b>Cockroaches</b></td><td> <input type="checkbox"/> None   <input type="checkbox"/> Family reports   <input type="checkbox"/> Evidence seen<br/> <input type="checkbox"/> Access points, if known: _____<br/>           _____         </td></tr> <tr> <td><b>Rodents</b><br/><input type="checkbox"/> Rats<br/><input type="checkbox"/> Mice</td><td> <input type="checkbox"/> None   <input type="checkbox"/> Family reports   <input type="checkbox"/> Evidence seen<br/> <input type="checkbox"/> Access points, if known: _____<br/>           _____         </td></tr> <tr> <td><b>Bedbugs</b></td><td> <input type="checkbox"/> None   <input type="checkbox"/> Family reports   <input type="checkbox"/> Evidence seen         </td></tr> <tr> <td><b>Other</b><br/>Specify: _____</td><td> <input type="checkbox"/> None   <input type="checkbox"/> Family reports   <input type="checkbox"/> Evidence seen<br/> <input type="checkbox"/> Access points, if known: _____<br/>           _____         </td></tr> </table> | <b>Cockroaches</b>  | <input type="checkbox"/> None <input type="checkbox"/> Family reports <input type="checkbox"/> Evidence seen<br><input type="checkbox"/> Access points, if known: _____<br>_____ | <b>Rodents</b><br><input type="checkbox"/> Rats<br><input type="checkbox"/> Mice | <input type="checkbox"/> None <input type="checkbox"/> Family reports <input type="checkbox"/> Evidence seen<br><input type="checkbox"/> Access points, if known: _____<br>_____ | <b>Bedbugs</b> | <input type="checkbox"/> None <input type="checkbox"/> Family reports <input type="checkbox"/> Evidence seen | <b>Other</b><br>Specify: _____ | <input type="checkbox"/> None <input type="checkbox"/> Family reports <input type="checkbox"/> Evidence seen<br><input type="checkbox"/> Access points, if known: _____<br>_____ |  | <input type="checkbox"/> Pest removal (IPM)<br><input type="checkbox"/> Sealing of access points to prevent intrusion<br><input type="checkbox"/> Deferral |
| <b>Cockroaches</b>   | <input type="checkbox"/> None <input type="checkbox"/> Family reports <input type="checkbox"/> Evidence seen<br><input type="checkbox"/> Access points, if known: _____<br>_____  |   |  |  |  |                |  |                                |  |  |  |
| <b>Rodents</b><br><input type="checkbox"/> Rats<br><input type="checkbox"/> Mice   | <input type="checkbox"/> None <input type="checkbox"/> Family reports <input type="checkbox"/> Evidence seen<br><input type="checkbox"/> Access points, if known: _____<br>_____  |   |  |  |  |                |  |                                |  |  |  |
| <b>Bedbugs</b>   | <input type="checkbox"/> None <input type="checkbox"/> Family reports <input type="checkbox"/> Evidence seen  |   |  |  |  |                |  |                                |  |  |  |
| <b>Other</b><br>Specify: _____   | <input type="checkbox"/> None <input type="checkbox"/> Family reports <input type="checkbox"/> Evidence seen<br><input type="checkbox"/> Access points, if known: _____<br>_____  |   |  |  |  |                |  |                                |  |  |  |
| <b>Radon</b>   | Does exposed dirt exist within the home? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Is there an open sump pump? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><i>REQUIRED: Vapor barrier on exposed dirt, and/or cover on open sump pump</i>   |   | <input type="checkbox"/> Vapor barrier<br><input type="checkbox"/> Sump pump cover   |  |  |                |  |                                |  |  |  |

## Connecticut Efficient Healthy Homes Initiative – Healthy Homes Checkup

|   |  |  |
|---|--|--|
|   |  | <input type="checkbox"/> REFER   |
| <b>Smoke Detector</b>   | Operational smoke detector on each floor? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Is smoke detector hard-wired? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If battery operated, when were batteries last changed? _____   | <input type="checkbox"/> Provide smoke detector<br>Number: _____   |
| <b>EDUCATION OPPORTUNITIES</b><br><i>See Action Plan for referral and education tips. While there may not be resources to address these issues, many may be addressed through education or through resident action. Education should be provided for each issue identified.</i> |  |  |
| <input type="checkbox"/> <b>HANDOUTS PROVIDED: Help Yourself to a Healthy Home, CO Fact Sheet, and Healthy Homes Maintenance Worksheet</b>  |  |  |
| <b>Air Purifier Use</b>   | <input type="checkbox"/> Used <input type="checkbox"/> Not used <input type="checkbox"/> Not present <input type="checkbox"/> Last filter change: _____  |  |
| <b>Allergy and Asthma Concerns</b>  | Check the type of bedroom flooring:<br><input type="checkbox"/> Hardwood/tile/linoleum <input type="checkbox"/> Small area rug <input type="checkbox"/> Large area rug <input type="checkbox"/> Wall-to-wall carpet<br>Are there pets in the house? <input type="checkbox"/> Yes <input type="checkbox"/> No Are pets permitted in the bedrooms? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Is smoking permitted inside the house? <input type="checkbox"/> Yes <input type="checkbox"/> No <span style="float: right;"><input type="checkbox"/> REFER</span> |  |
| <b>Chemical Safety and Poison Control</b>   | <b>Pesticides</b>  | Are pesticides used in the home (airborne sprays or bombs):<br><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly <input type="checkbox"/> Not Used<br>If used, are residents in house during use? <input type="checkbox"/> Yes <input type="checkbox"/> No |
|   | <b>Poison Control</b>  | Is the Poison Control number posted by phone (1-800-222-1222)? <input type="checkbox"/> Yes <input type="checkbox"/> No (PROVIDE)  |
|   | <b>Flammables</b>  | Are matches, lighters, cleaning products/chemicals stored out of reach? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Are they stored near an open flame or any combustible items? <input type="checkbox"/> Yes <input type="checkbox"/> No  |
|   | <b>Drugs and Medicines</b>   | Are all observable drugs and medicines stored out of reach? <input type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | <b>Cabinet Locks</b>   | Are cabinet locks in use in properties with young children? <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| <b>Cleaning</b>   | <input type="checkbox"/> Vacuum (non-HEPA) <input type="checkbox"/> HEPA vacuum <input type="checkbox"/> Damp mop and damp dusting <input type="checkbox"/> Sweeping, dry dusting<br>Air fresheners used? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Strong fragrances or scented candles used? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>High levels of trash and debris? <input type="checkbox"/> Yes <input type="checkbox"/> No   |  |
| <b>Electrical Outlets</b>   | Are outlet covers present? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Are all outlets near a water source GFCI? <input type="checkbox"/> Yes <input type="checkbox"/> No  |  |
| <b>General Injury Prevention</b>  | Is there a safety rail on all staircases? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Are stairways well-lit? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Are stairways free of clutter? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>In homes with residents over 60, is a grab bar present in showers/tubs? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Do bathtubs have a non-slip surface/mat? <input type="checkbox"/> Yes <input type="checkbox"/> No   |  |
| <b>COMMENTS:</b>  |  |  |
|   |  |  |
| <b>TOTAL JOB HOURS WORKED:</b>  |  |  |

## Connecticut Efficient Healthy Homes Initiative – Healthy Homes Checkup

| CTEHHI HEALTHY HOMES CHECKUP WORKSHEET  |          | Put an asterisk * above any room(s) where a child sleeps or plays. |          |             |             |         |                |           |           |           |           |        |          |       |       |
|---|----------|--|----------|-------------|-------------|---------|----------------|-----------|-----------|-----------|-----------|--------|----------|-------|-------|
|   | Exterior | Porch  | Entryway | Living Room | Dining Room | Kitchen | Master Bedroom | Bedroom 2 | Bedroom 3 | Bedroom 4 | Main Bath | Bath 2 | Basement | Attic | Other |
| LEAD (Referral Opportunity)   |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| If chipping or peeling paint is present, indicate below with an X.                    |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Walls   |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Ceilings  |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Windows   |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Paint chips on floor  |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| MOLD AND MOISTURE (Referral Opportunity)  |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Specify whether the issue is an odor (O), visible damage (V), or reported damage (R). |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Mold/Mildew   |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Water Damage  |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Visible Moisture/Water  |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| PESTS   |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Specify whether the pest is reported (R) by the family or if evidence (E) is seen.    |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Bedbugs   |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Rodents   |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Cockroaches   |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Other   |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| BUILDING STRUCTURE AND ROOFING – HOLES IN WALL  |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Indicate any holes in walls with an X.  |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |
| Holes in Wall   |          |  |          |             |             |         |                |           |           |           |           |        |          |       |       |

# MANCHESTER, NH ONE-TOUCH ENERGY EFFICIENCY & HEALTHY HOMES CHECKUP FORM

| PROGRAM INFORMATION  |                 |
|--|-----------------|
| Administering Program:   | Visitor Name:   |
| Date: Client Referral #:   |                 |
| CLIENT INFORMATION   |                 |
| Client Name:   | Home phone:     |
| Street Address:  | Work phone:     |
| City, Zip:   | Email:          |
| Address:   | Apt. #          |
| Best time to call: Mon__am/pm Tues__am/pm Wed__am/pm Thur__am/pm Fri__am/pm        |                 |
| Primary Language: English Spanish Nebali Chinese Swahili Bosnian Somali Other_____ |                 |
| Landlord Name:   | Landlord Phone: |
|  | Landlord email: |

|   | DEMOGRAPHICS  | No | Yes | Comments                    |
|---|---|----|-----|-----------------------------|
| 1 | Any residents >62 yrs of age?   |    |     |                             |
| 2 | Any disabled residents?   |    |     | Describe:                   |
| 3 | Any children <6 years old?  |    |     |                             |
| 4 | Any pregnant women?   |    |     |                             |
| 5 | Do residents own home?  |    |     |                             |
| 6 | Do any residents receive federal assistance?<br>(WIC, Head Start, Fuel Assistance, Section 8) |    |     | Describe:                   |
| 7 | Health Insurance?   |    |     | Type:                       |
| 8 | Primary Care Provider?  |    |     | Doctor's Name:<br>Location: |

I consent to release of the above information & the Energy Efficiency Checkup Form to \_\_\_\_\_(referring organization) herein referred to as the Primary Organization. I further authorize the Primary Organization to share this information with the health care providers & other social service agencies to which I am being referred. I understand that a representative from these referral agencies may contact me directly to arrange additional follow-up. I understand that this agreement for the release & exchange of information is valid for a one-year term from the signature date below, & I understand this release may be revoked at any time with a written request to the Primary Organization. I understand that I may request a copy of this signed release.

\_\_\_\_\_  
Signature of Client/Parent/Guardian

\_\_\_\_\_  
Date

|   | ENERGY EFFICIENCY   | No | Yes | Comments   |
|---|---|----|-----|--|
| 1 | What fuel is used for heating?  |    |     | Oil<br>Gas   |
| 2 | Was the occupant(s) cold last winter?   |    |     | Thermostat setting in winter:  |
| 3 | Did the occupant(s) close off/ isolate rooms to stay warm?  |    |     | Fraction of rooms used:  |
| 4 | Is the heating system old or inefficient?<br>(collect digital photo if possible)  |    |     | Year system was installed if known:  |
| 5 | Could the home have insufficient attic or wall insulation? (Answer Yes/No)  |    |     | Is there currently any attic insulation?<br>Attic insulation inconsistent/below framing?<br>Are there cold spots in walls? |
| 6 | Does the home consume large amounts of energy? - Obtain 1 years of heating & electric bills (e.g. utility account number & company, or oil delivery bills)<br>Utility Name & Account #'s: |    |     | Kilowatts (kW) /year:<br>Therms of gas/year:<br>Oil gallons/year (or # of deliveries):<br>Cords of wood /year:             |

|   | OCCUPANT HEALTH  | No | Yes | Comments  |
|---|--|----|-----|---|
| 1 | a. Has anyone <18 years living in this house been diagnosed by a doctor, nurse or other health professional with <b>asthma</b> ?<br>b. If <b>YES</b> , is <i>your child/teen</i> currently taking medication <u>daily</u> for their asthma?<br>c. If <b>YES</b> , did <i>your child/teen</i> have any unplanned doctor visits, ER or urgent care visits, or hospitalizations for asthma in the last 6 months?<br><b>If answered yes to ALL Questions 1a, b, &amp; c refer to city asthma program</b> |    |     | How may visits in the past 6 months:<br>Unplanned Doctor _____<br>ER or Urgent Care _____<br>Hospitalizations _____ |
| 2 | Occupants with other respiratory problems?   |    |     |   |
| 3 | Occupants with flu-like symptoms or headaches experienced only in home?  |    |     |   |
| 4 | a. Do any occupants smoke?<br>b. Is there smoking inside the home?   |    |     |   |

|    | ENVIRONMENTAL CONDITIONS  | No | Yes | Comments                                       |
|----|---|----|-----|--|
| 1  | For homes built before 1978, is there >2 ft <sup>2</sup> <b>inside of flaking, peeling, or chipping paint</b> ?<br>(If unknown, assume pre 1978)            |    |     | Location:                                      |
| 2  | For homes built before 1978, is there significant <b>outside flaking, peeling, or chipping paint</b> (> 10 ft <sup>2</sup> )? (If unknown, assume pre 1978) |    |     | Location:                                      |
| 3  | Evidence of <b>pests?</b> (e.g, mice, squirrels, cockroaches, rats /urine stains, droppings, teeth mark, bed bugs)  |    |     | Location:                                      |
| 4  | a. Are there <b>Smoke alarms</b> ?<br>(Need 1/unit/level; required in buildings with 2 or more units)   |    |     | Location:                                      |
|    | b. Are Smoke alarms working?  |    |     |  |
| 5  | a. Is there a <b>carbon monoxide</b> alarm?<br>(Need 1/unit/level & inside the bedroom if there is a CO source in bedroom)                                  |    |     | Location:                                      |
|    | b. Is the Carbon monoxide alarm working?  |    |     |  |
| 6  | Is there an <b>unvented space heater</b> ?  |    |     | Location:                                      |
| 7  | Is there evidence of <b>current moisture</b> inside (e.g., wet spots, water stains, mold, musty smell)?   |    |     | Location:<br><br>Obvious source:               |
| 8  | Is there <b>&gt; 1 ft mold or discoloration from moisture/room</b> on interior surfaces?  |    |     | Location:<br><br>Obvious source:               |
| 9  | Is there evidence of <b>condensation</b> inside?<br>➤ 2 feet in attic<br>➤ > 1 foot on window   |    |     | Note season & location:<br><br>Obvious source: |
| 10 | Is there evidence <b>past moisture</b> problems on interior surfaces? (e.g., rotting wood, water stains, occupant reports)                                  |    |     | Location:<br><br>Obvious Source:               |
| 11 | Are there <b>unvented dryers</b> ?  |    |     |  |
| 12 | Are there obvious sources of Volatile Organic Compounds (VOCs) (e.g., air fresheners, candles)?   |    |     |  |

|   | INJURY PREVENTION                                   | NO | YES | COMMENTS               |
|---|---|----|-----|------------------------|
| 1 | For <b>elderly</b> , are grab bars present in bath? |    |     |                        |
| 2 | For <b>elderly</b> , are handrails present?         |    |     | Note areas with needs: |
| 3 | Is outdoor lighting sufficient near entryway?       |    |     |                        |

|   | INJURY PREVENTION  | NO | YES | COMMENTS |
|---|--|----|-----|----------|
| 4 | Is interior lighting sufficient?   |    |     |          |
| 5 | For <b>young children</b> , are there? <ul style="list-style-type: none"> <li>- child gates (if stairs are present)</li> <li>- strangulation cords (with blinds)</li> <li>- window guards</li> </ul> |    |     |          |

| <input checked="" type="checkbox"/> | Family Need                                  | Agency                            | Contact Information |
|-------------------------------------|--|-----------------------------------|---------------------|
|                                     | Asthma                                       | Manchester Health Department      |                     |
|                                     | Weatherization/Fuel Assistance<br>Low-Income | Southern NH Services              |                     |
|                                     | Weatherization<br>Middle & Upper income      | Home Performance with Energy Star |                     |
|                                     | Childhood Lead Poisoning                     | Manchester Health Department      |                     |
|                                     | Lead Hazard Control Funding                  | Manchester Housing Initiative     |                     |
|                                     | Family Support Programs                      | Child and Family Services         |                     |
|                                     | Home Rehab                                   | Manchester Housing Initiative     |                     |
|                                     | Mr. Fix-It Program<br>(small repairs)        | Southern NH Services              |                     |
|                                     | Housing Code Violations                      | City of Manchester                |                     |
|                                     | Head Start                                   | Southern NH Services Head start   |                     |
|                                     | Fire Safety                                  | Manchester Fire Department        |                     |
|                                     | Smoking Cessation                            | Manchester Health Department      |                     |

## REFERRALS & CLIENT EDUCATION

1. **Asthma: Determine if resident qualifies for Manchester Asthma Home Visiting Program.** Answers yes to **ALL THREE** OCCUPANT HEALTH questions 1a, 1b, & 1c.
2. **Lead Hazard Control Grant:** Flaking, peeling paint & children less than six years old living in homes built before 1978. Answers yes to DEMOGRAPHICS question 3, ENVIRONMENTAL CONDITIONS questions 1 or 2 & home is pre-1978. Priority placed on children with elevated blood lead levels. Program works with property owners. Obtain owner information.
3. **Lead Poisoning Prevention Program:** Flaking, peeling paint & children under six years old in homes built before 1978. Answers yes to DEMOGRAPHICS question 3, ENVIRONMENTAL CONDITIONS questions 1 or 2; & home is pre-1978.
4. **Head Start:** Head Start serves children up to two years prior to public school entrance, so children may be 3 and 4. Eligibility for the program is based on age, income, and weighted selection criteria.
5. **NH Child & Family Services:** Child & Family Services provides services to low income families in need of parenting support and to the elderly in need of assistance with home care.
  - Elderly needing help with chores.
  - Parenting support.
  - Pregnancy support.
6. **Fix-it:** Homeowners needing volunteer modest home repair help.
7. **Home Rehab:** Home repairs needed, program works with property owners. Obtain property owner information.
8. **Pests:** Pest infestation, answers yes to ENVIRONMENTAL CONDITIONS question 3.
9. **Weatherization:** High Energy user & low income high risk population. Weatherization high-risk population is:
  - Low income (income 200% of Federal Poverty Guidelines); &
  - Occupants are: elderly (>62 yrs), children under 6 yrs or age, **or** disabled.Also, if answers yes to OCCUPANT HEALTH question 3 & Environmental Conditions question 6 (unvented space heater if this is the only source of heat.) Program works with property owner. Obtain owner information.
10. **Home Performance with Energy Star & Cooperative Extension:** High energy user, no income or target population criteria.

**To determine if Occupant Has High Energy.** Answers “yes” to ENERGY EFFICIENCY questions 2, 3, 4, or 5. Or answers to question 6 exceed below energy thresholds.

| Fuel                              | High Energy Threshold                   |
|-----------------------------------|---|
| Therms (gas)                      | > 400/ year                             |
| Kwh (electric)                    | > 7,500 / year                          |
| Oil (mobile homes or stick built) | > 500 gallons OR >= 2 deliveries / year |



# NEW HAMPSHIRE STATEWIDE ONE-TOUCH ENERGY EFFICIENCY & HEALTHY HOMES CHECKUP FORM

|  |  |                    |    |      |                         |               |  |  |  |
|--|--|--------------------|----|------|-------------------------|---------------|--|--|--|
| <b>PROGRAM INFORMATION</b>   |  |                    |    |      |                         |               |  |  |  |
| Administering Program:   |  |                    |    |      |                         | Visitor Name: |  |  |  |
| Date:  |  | Client Referral #: |    |      |                         |               |  |  |  |
| <b>CLIENT INFORMATION</b>  |  |                    |    |      |                         |               |  |  |  |
| Client Name:   |  |                    |    |      | Apt. #:                 |               |  |  |  |
| Head of Household Name:  |  |                    |    |      | Home phone: (     )     |               |  |  |  |
| Street Address:  |  |                    |    |      | Work phone: (     )     |               |  |  |  |
| City:  |  |                    | NH | Zip: | Email:                  |               |  |  |  |
| Mailing Address:   |  |                    |    |      |                         |               |  |  |  |
| Best time to call:   |  |                    |    |      |                         |               |  |  |  |
| Primary Language: English   Spanish   Nepali   Chinese   Swahili   Bosnian   Somali   Other_____ |  |                    |    |      |                         |               |  |  |  |
| Landlord Name:   |  |                    |    |      | Landlord Phone: (     ) |               |  |  |  |
|  |  |                    |    |      | Landlord email:         |               |  |  |  |

|   | DEMOGRAPHICS   | No | Yes | Comments  |
|---|--|----|-----|-----------|
| 1 | Any residents >62 yrs of age?  |    |     |           |
| 2 | Any disabled residents?  |    |     | Describe: |
| 3 | Any children <6 years old?   |    |     |           |
| 4 | Any pregnant women?  |    |     |           |
| 5 | Do residents own home?   |    |     |           |
| 6 | Do any residents receive federal assistance?<br>(i.e, WIC, Headstart, Fuel Assistance, Section 8, TANF, Food stamps) |    |     | Describe: |
| 7 | Does client have Health Insurance?   |    |     | Type:     |
| 8 | Who is the Primary Care Provider?<br>Name:   |    |     | Location: |

| <b>CONSENT</b>   |  |
|--|--|
| <p>I, _____ give permission to _____</p> <p style="text-align: center;">(Head of Household)</p> <p>to release any information contained on this form about me and/or my household members to:</p> <ul style="list-style-type: none"> <li>• _____</li> <li>• _____</li> <li>• _____</li> <li>• _____</li> </ul>   | <p style="text-align: center;">(Administering Program)</p> |
| <p>I understand that a representative from the above agency/agencies may contact me directly to determine eligibility for the program to which I am being referred and to provide services if eligible. I understand that this agreement to release and exchange information is valid for one year from the signature date below and that this permission may be revoked at any time with a written request to NH HHLPP. I understand that I may request a copy of this release.</p> |  |
| <p>_____</p> <p>Signature of Client/Parent/Guardian</p>  | <p>_____</p> <p>Date</p>                                   |

Head of Household Name \_\_\_\_\_ Property Address \_\_\_\_\_

|    | ENERGY EFFICIENCY  | No | Yes | ? | Comments                               |
|----|--|----|-----|---|--|
| 9  | What <b>fuel</b> is used for heating?<br>(Indicate primary vs. secondary heating source)   |    |     |   | Oil                                    |
|    |  |    |     |   | Natural Gas                            |
|    |  |    |     |   | Propane:                               |
|    |  |    |     |   | Electric                               |
|    |  |    |     |   | Wood                                   |
| 10 | Was the occupant(s) <b>cold</b> last winter in this home?  |    |     |   | Thermostat setting in winter:          |
| 11 | Did the occupant(s) close off/ <b>isolate rooms</b> to stay warm in this home?   |    |     |   | Fraction of rooms <b>used</b> :        |
| 12 | Is the <b>heating system</b> old or inefficient?<br>(collect digital photo if possible)  |    |     |   | Year system was installed if known:    |
| 13 | a. Is the <b>attic insulated</b> ?   |    |     |   | Comment                                |
|    | b. If <b>Yes</b> , Is the <b>attic insulation</b> inconsistent or below framing?   |    |     |   |  |
|    | c. Are there <b>cold spots</b> in walls?   |    |     |   |  |
| 14 | Does the home consume large amounts of <b>energy</b> ? - Collect 1 years of heating & electric bills (e.g. utility account number & company, or oil delivery bills)<br>Utility Name & Account #'s: |    |     |   | Kilowatts (kW) /year:                  |
|    |  |    |     |   | Therms of gas/year:                    |
|    |  |    |     |   | Oil gallons/year (or # of deliveries): |
|    |  |    |     |   | Cords of wood /year:                   |

|    | OCCUPANT HEALTH  | No | Yes | NA | Comments  |
|----|--|----|-----|----|---|
| 15 | a. Has anyone living in this house been diagnosed with <b>asthma</b> ?                                   |    |     |    |   |
|    | b. If <b>YES</b> , is this person currently using <b>rescue</b> medicine for <b>asthma</b> ?             |    |     |    | If <b>Yes</b> , how many times a week are they using <b>rescue</b> medicine? _____                                |
|    | c. If <b>YES</b> , did this person have any unplanned doctor visits for <b>asthma</b> in the last 6 mos? |    |     |    | How many visits in the past 6 mos.<br>Unplanned Doctor _____<br>ER or Urgent Care _____<br>Hospitalizations _____ |
| 16 | Occupants with <b>other respiratory</b> problems?  |    |     |    |   |
| 17 | Occupants with <b>flu-like</b> symptoms or headaches experienced only in home?                           |    |     |    |   |
| 18 | a. Do any occupants <b>smoke</b> ?   |    |     |    |   |
|    | b. Is there <b>smoking</b> inside the home?  |    |     |    |   |

Revised 3-9-12

|    | ENVIRONMENTAL CONDITIONS  | No | Yes | NA | Comments           |
|----|---|----|-----|----|--------------------|
| 19 | a. Was the home built <i>before 1978</i> ?  |    |     |    | Year:              |
|    | b. If built <i>before 1978</i> , is there <b>flaking, peeling, or chipping paint</b> ?  |    |     |    | Comment:           |
|    | c. If built <i>before 1978</i> , have children <6 years old been tested for <b>lead</b> ?   |    |     |    | Comment:           |
| 20 | Is there evidence of <b>pests</b> ?<br>(i.e. mice, squirrels, cockroaches, ants, rats, bed bugs, flies)   |    |     |    | Location:          |
| 21 | a. Are there <b>Smoke alarms</b> ?<br>(Need 1/unit/level & common areas/level required by law in rental units)  |    |     |    | Comment:           |
|    | b. Are the <b>smoke alarms</b> working?   |    |     |    | Location:          |
|    | c. Do you have an <b>Emergency Evacuation Plan</b> ?  |    |     |    | What is your plan? |
| 22 | a. Are there <b>carbon monoxide</b> alarms?<br>(Need 1/unit/level/outside sleeping area(s) & common areas required by law in rental units)                                      |    |     |    | Location:          |
|    | b. Are the <b>carbon monoxide</b> alarms working?   |    |     |    | Location:          |
|    | c. Are there <b>un-vented combustion</b> sources?<br>(i.e gas stove or dryers, space heaters, generators)   |    |     |    | Comment:           |
| 23 | Is there evidence of <b>moisture</b> inside?<br>Visible mold _____ Rotting wood _____<br>Musty smell _____ Unvented dryer _____<br>Condensation _____ Water stain or leak _____ |    |     |    | Comment:           |
| 24 | Do you use <b>incense, air fresheners, or candles</b> ?   |    |     |    | Comment:           |
| 25 | Have you tested your home for <b>Radon</b> ?  |    |     |    | Comment:           |

|    | INJURY PREVENTION  | No | Yes | NA | COMMENTS |
|----|--|----|-----|----|----------|
| 26 | For <b>older adults</b> , are grab bars present in bathroom by toilet and in tub?                        |    |     |    |          |
| 27 | For <b>older adults</b> , are handrails present along staircase?   |    |     |    |          |
| 28 | Is <b>lighting</b> sufficient at top and bottom of stairs, in bathrooms, bedrooms, and outside entryway? |    |     |    |          |
| 29 | For <b>young children</b> are there:   |    |     |    |          |
|    | a. <b>child gates</b> if stairs are present?   |    |     |    |          |
|    | b. <b>window blind cord</b> safety devices?  |    |     |    |          |
|    | c. <b>window guards</b> or stops? (higher than 1 <sup>st</sup> floor)                                    |    |     |    |          |
|    | d. <b>medicines &amp; poisons</b> out of reach?  |    |     |    |          |

Head of Household Name \_\_\_\_\_ Property Address \_\_\_\_\_

## REFERRALS & CLIENT EDUCATION

| EDU | REF | FAMILY NEED   | AGENCY & CONTACT INFORMATION   |
|-----|-----|---|--|
|     |     | <b>ASTHMA</b>   | Family's Primary Care Physician or local Asthma Educator<br>TBD  |
|     |     | <b>CARBON MONOXIDE</b>                                    | Carbon Monoxide Workgroup <a href="http://nh.gov/co">http://nh.gov/co</a>  |
|     |     | <b>FAMILY AND PARENT SUPPORT</b>                          | Child and Family Services<br><a href="http://www.cfsnh.org">www.cfsnh.org</a>  |
|     |     | <b>FIRE SAFETY</b>  | Local Fire Department or NH Division of Safety<br><a href="http://www.nh.gov/safety/divisions/firesafety/">www.nh.gov/safety/divisions/firesafety/</a>                               |
|     |     | <b>HEAD START</b>   | Local Head Start<br><a href="http://www.tccap.org/head_start_contacts.htm">www.tccap.org/head_start_contacts.htm</a>   |
|     |     | <b>HOUSING CODE VIOLATIONS</b>                            | Local Health Officer or Building Code Official<br>TBD  |
|     |     | <b>INJURY PREVENTION</b>                                  | Safe Kids USA 1-800-835-8647<br><a href="http://www.safekids.org">www.safekids.org</a>   |
|     |     | <b>LEAD HAZARD CONTROL GRANT PROGRAM</b>                  | NH Housing Finance Authority<br>On-hold until further funding available  |
|     |     | <b>LEAD POISONING PREVENTION</b>                          | Healthy Homes & Lead Poisoning Prevention Program<br>1-800-897-LEAD (5323)<br><a href="http://www.dhhs.nh.gov/dphs/bchs/clpp/index.htm">www.dhhs.nh.gov/dphs/bchs/clpp/index.htm</a> |
|     |     | <b>MOISTURE &amp; MOLD</b>                                | US Environmental Protection Agency 1-800-438-4318<br><a href="http://www.epa.gov/mold">www.epa.gov/mold</a>  |
|     |     | <b>MR. FIX-IT PROGRAM<br/>(SMALL REPAIRS)</b>             | Local Community Action Program<br>TBD  |
|     |     | <b>PESTS<br/>(RODENTS, INSECTS &amp; BEDBUGS)</b>         | UNH Cooperative Extension 1-877-398-4769<br>Bed Bug Action Committee <a href="http://www.nhbedbugs.com">www.nhbedbugs.com</a>  |
|     |     | <b>RADON</b>  | US Environmental Protection Agency 1-800-767-7236<br><a href="http://www.epa.gov/radon">www.epa.gov/radon</a>  |
|     |     | <b>SMOKING CESSATION</b>                                  | Try-to-Stop New Hampshire<br>1-800-Try-to-Stop <a href="http://www.trytostopnh.org">www.trytostopnh.org</a>  |
|     |     | <b>SMOKING-FREE HOUSING</b>                               | Breathe NH -800-835-8647<br><a href="http://www.breathenh.org">www.breathenh.org</a>   |
|     |     | <b>WEATHERIZATION<br/>(MIDDLE &amp; UPPER INCOME)</b>     | Home Performance with Energy Star  |
|     |     | <b>WEATHERIZATION &amp; FUEL ASSIST.<br/>(LOW-INCOME)</b> | Local Community Action Program<br><a href="http://www.nh.gov/oep/programs/weatherization/index.htm">www.nh.gov/oep/programs/weatherization/index.htm</a>                             |

Revised 3-9-12

## REFERRALS & CLIENT EDUCATION

1. **WEATHERIZATION PROGRAM:** An Eligibility criteria for program is 200% of Federal Poverty Guidelines. **Four high priority criteria:** 1.) High Energy user, 2.) older than 62 yrs, 3.) children under 6 yrs, or 4.) disabled. Also, if answers Yes to OCCUPANT HEALTH question 17 & Environmental Conditions question 22c (un-vented space heater if this is the only source of heat.) Talk to property owner about this and refer to CAP agency.
2. **HOME PERFORMANCE WITH ENERGY STAR & COOPERATIVE EXTENSION:** High energy user, no income or target population criteria. To determine If Occupant Has High Energy. Answers “yes” to questions 10, 11, 12, or 13 or answers to question 14 exceed below energy thresholds.
 

| Fuel                              | High Energy Threshold                   |
|-----------------------------------|---|
| Therms (gas)                      | > 400/ year                             |
| Kwh (electric)                    | > 7,500 / year                          |
| Oil (mobile homes or stick built) | > 500 gallons OR >= 2 deliveries / year |
3. **ASTHMA:** Answers Yes to OCCUPANT HEALTH questions 15a and answers Yes to 15b more than twice a week. May also answers Yes to 15c. Refer to Primary Care Physician or local Asthma Educator if available.
4. **LEAD:** Answers Yes to DEMOGRAPHICS question 3, ENVIRONMENTAL CONDITIONS question 19a. Refer to State Healthy Homes & Lead Poisoning Prevention Program for educational material and information on testing children for lead. Refer to Lead Hazard Control Grant program for funding available to property owners of pre-78 homes.
5. **PESTS:** Answers Yes to ENVIRONMENTAL CONDITIONS question 20. Talk to property owner about this and refer to UNH Cooperative Extension and NH Bed Bug Action Committee.
6. **FIRE:** Answers No to ENVIRONMENTAL CONDITION 21a or 21b. Talk to property owner about this and refer to local fire department.
7. **CARBON MONOXIDE:** Answers No to ENVIRONMENTAL CONDITION 22a or 22b, or Yes to question 22c. Talk to property owner about this and refer to local fire department.
8. **MOISTURE:** Answers yes to ENVIRONMENTAL CONDITION 23. Talk to property owner about this and refer to US Environmental Protection Agency.
9. **RADON:** Answers No to ENVIRONMENTAL CONDITION 25. Talk to property owner about this and refer to US Environmental Protection Agency regarding testing.
10. **INJURY:** Answers No to INJURY PREVENTION question 26, 27, or 28. Talk to property owner about this and refer to Mr. Fixit program at local Community Action Program. If No to INJURY PREVENTION question 29, refer to NH Safe Kids for educational material.
11. **SMOKING:** Answers Yes to OCCUPANT HEALTH question 18a, refer to 1-800-Quit-Now .

Revised 3-9-12

# WEATHERIZATION PLUS HEALTH TOOLKIT

U.S. DEPARTMENT OF ENERGY

2014

