

Existing state infrastructure

In assessing the extent of the childhood lead poisoning problem in Maine, it is necessary to understand the statewide infrastructure that already exists to address both primary and secondary prevention efforts. Understanding this foundation helps to develop realistic strategies and activities for the elimination plan. There are a host of governmental agencies with primary responsibility for lead poisoning prevention and management, as well as a series of secondary state agencies, and community partners. Program activities have either a primary prevention or secondary prevention focus. In public health terminology, primary prevention activities are designed to prevent lead poisonings. Secondary prevention consists of efforts to reduce the progression of a public health problem after it has occurred. Applied to childhood lead poisoning, secondary prevention involves the early identification and treatment of lead poisoning to minimize the long-term physiological and cognitive damage. The following identifies the various agencies, partners and resources, and the roles they play in both primary and secondary prevention.

Deleted: was

Deleted: for the Advisory Council members

Deleted: also

Deleted: also

Deleted: There are two broad activities that partners are involved in,

Deleted: and

Deleted: this means

Deleted: As there are many programs involved in both primary and secondary prevention, t

Lead Poisoning Prevention Fund

In 2005, the 122nd Maine Legislature established the Lead Poisoning Prevention Fund (LPPF or 22 MRSA c.252 §1322-E). Revenue for the LPPF is obtained from a 25 cent per gallon fee imposed on manufacturers or wholesalers of paint sold in Maine. The LPPF was established to provide resources to support lead poisoning prevention education, outreach and training programs (primary prevention). The legislation creating the LPPF specified seven prevention actions that the Fund should pursue:

- Contracts for funding community and worker educational outreach programs;
- An ongoing major media campaign;
- Measures to prevent children's exposure to lead, including targeted educational mailings to families with children;
- Measures to prevent occupational exposures to lead for private and public employees;
- Funding an assessment of current uses of lead;
- Funding of educational programs and information for rental property owners; and

- Implementation of the lead safe housing registry.

The legislation authorized the Maine CDC to administer the funds with the review and advice of an advisory board and specified that preference should be given to programs that reach high risk or underserved populations. The legislation allows for the contracting of professional services to carry out the actions listed above.

A summary of the status of LPPF activities as of Fall 2009 are:

1. Contracts for funding community and worker educational outreach programs;

The Community Contracts are formulated and designed to engage each Healthy Maine Partnership (HMP) at the local and district levels and in high risk areas. Lead hazards and lead poisonings are seen state wide, but there are areas of Maine that have a greater burden of children with elevated blood lead levels (eBLLs) and have higher percentages of children with eBLLs among those screened. These communities are referred to as having a “high density” of children with eBLLs. Municipalities where the number of eBLLs cases do not reach the level of “high density” but are still significant are identified as “second tier” areas.

Contracts with the communities are in their second year. Community contracts are broken into different categories depending on prevalence of poisoned children within a region, etc. At this point, there are community contracts with the 5 high density areas, the individual Healthy Maine Partnerships within the public health districts, and the individual public health districts as a whole. At this point, some of the major activities have included:

Deleted: for

- Identifying a point of contact for lead poisoning prevention outreach who can work with LPPF staff to distribute lead poisoning prevention information through existing programs and networks.
- Compiling a list of existing programs and networks that can be vehicles for delivering lead poisoning prevention education and outreach to parents of young children, health care providers, housing service providers and landlords working

with young families. Helping distribute through existing channels targeted marketing materials and training information developed by the Lead Poisoning Prevention Fund.

- Holding a minimum of three (3) education programs or outreach events developed in response to a prioritized action plan.
- Participating in three (3) Maine CDC trainings/contractee forums over the course of the contract period.
- Maintaining and promoting a system for identifying and working with owners and tenants of rental properties within the target area. This includes holding educational events.
- Developing a program for the lead dust testing of 50 apartments within the high density areas.

Deleted: your

Deleted: has

Deleted: d

2. An ongoing major media campaign;

Much of the effort to date has been associated with setting the foundation for an ongoing major media campaign. That has included developing supplementary material, redesigning the website and potentially hiring a public health educator for the LPPF.

In June of 2009 a new lead website was launched. The new website is more interactive, colorful and designed to take better advantage of the internet. Overall the site has had a 49% increase in traffic for the first 8 months of 2009 compared to the last 8 months of 2008. Feedback from community partners has been very positive.

In 2009, the LPPF developed and produced a series of pieces designed for easy distribution and printing. These “tipsheets” are single page fact sheets that address issues of screening for lead, cleaning to reduce lead dust, sources of lead, etc. These pieces were developed using easy to read techniques, and can be produced in both black and white or color. Since these pieces have been produced they were downloaded from the website over 700 times from June through September 2009.

Deleted: consist of

Deleted: 1

Deleted: have been

The LPPF has worked extensively with the University of New England Health Literacy Institute to develop and produce a brochure offering lead poisoning prevention information and a free lead dust test kit. We conducted interviews with Maine professionals working in lead poisoning prevention as well as parents who had had a lead poisoned child. With this formative research, we developed a mailing for parents of one-and two-year olds (the highest risk ages of lead exposure) focused on renovation-related hazards. The mailer was focus group tested across Maine with both rural and urban young families. The material also included or provided direction to the tools and resources they need to assess their child's risk for lead poisoning and to protect their child from it. Overall our goal with the mailer became to provide immediately actionable steps and to drive traffic to the Childhood Lead Poisoning Prevention website. This mailer will provide the piece to be used for the targeted mailing required by the legislation (see point 3).

Deleted: also

Deleted: ed

Deleted: d

Deleted: also

3. Measures to prevent children's exposure to lead, including targeted educational mailings to families with children;

The major effort associated with this activity is the distribution of the mailer described above.

The mailer is being produced in two iterations, one offering a free lead dust test kit and one offering information only. Two iterations are being produced, in part, to evaluate the cost of and demand for the free lead dust test kits. Currently, LPPF has budgeted for 1000 free lead dust test kits. Distribution will be targeted to parents of 1 and 2 year olds via direct mail.

Deleted: only

Deleted: of

Geographically, distribution will initially focus on the high density areas and possibly one or two public health districts. The mailer will also be made available to LPPF community contractors to distribute via their channels. Much of the spring and summer of 2009 was spent developing the materials and data transfer protocols between the lab and CLPPP. The protocols were subject to a limited alpha test, with a beta test to 500 members of the central district, in the fall of 2009.

Deleted: This fall will likely see the launch of the media campaign.

Deleted: are currently under

Deleted: ing regime and

Deleted: will occur

4. Measures to prevent occupational exposures to lead for private and public employees;

Most contractors, property managers and landlords will be required to take lead safe training under EPA's new Renovation, Repair and Painting Rule (RRP) which comes fully into effect in

April 2010. Using LPPF funds, DEP offers lead training at a discounted rate to landlords and property managers. Additionally, contractors who will need only a refresher course will be offered a discounted rate, supported in part by a one-time grant from the U.S. Environmental Protection Agency (USEPA).

Deleted: will be able to

5. Funding an assessment of current uses of lead;

Subsequent to the establishment of the Lead Poisoning Prevention Fund, there have been actions at both the state and federal level that have resulted in the reduction and elimination of the use of lead in products. In August 2008, the Consumer Product Safety Commission clarified that the Consumer Product Safety Improvement Act requires that manufacturers and importers of products intended for children under 12 demonstrate that the lead content in their products does not exceed mandatory standards. Additionally, the 123rd Maine State Legislature enacted Public Law 604, *An Act to Ensure that Children's Toys and Products are Free of Lead*. This law further reduces the likelihood that childhood lead poisonings will be caused by exposure to lead in products.

This assessment has not yet been identified as a priority for expenditure of the limited monies available from the LPPF, as products containing lead have not been found as a primary or prevalent cause of childhood lead poisonings in Maine.

6. Funding of educational programs and information for rental property owners;

Utilizing LPPF monies, DEP is providing "Essential Maintenance Practices" courses in the 5 high density regions targeted for use by landlords, as well as Lead Dust Sampling Technician courses in Sanford, Saco/Biddeford, Portland, Lewiston/Auburn and Bangor in 2010.

Deleted: Again, through

Deleted: Funds

Deleted: will be making available

Deleted: . Five

Deleted: will be offered

Additionally, options for web based training and a renovations course specifically for homeowners are being explored.

7. Implementation of the lead safe housing registry.

DEP is in the process of developing a lead safe housing registry. The registry is planned to be an online searchable database which property owners can use to list their lead-safe rental properties. Properties will be listed that meet various criteria and rated as follows:

CRITERIA	Silver	Gold	Platinum
Lead-Hazard Screen at turnover to identify: deteriorated paint, accessible bare soil, plus dust wipes from entry floor, two other floors, and two window sills.	R	R	
Documentation that potential lead hazards addressed as a result of lead-hazard screen	R	R	
Landlord (or maintenance staff) is trained in Essential Maintenance Practices or Lead-Safe Renovation	R	R	
Landlord provides tenant with notice/form to report deteriorated paint	R	R	
Lead inspection performed and report available (identifies location of lead-based paint)		R	
Lead inspection performed; no lead paint found – or- built after 1977			R
R=Required			

Childhood Lead Poisoning Prevention Program

The Childhood Lead Poisoning Prevention Program (CLPPP), funded by the U.S. Centers for Disease Control and Prevention (CDC), has existed as a program in the Maine CDC (formerly Bureau of Health) since 1992. The ultimate goal of the program, as stated in the Healthy Maine 2010 objectives, is the elimination of childhood lead poisoning by the year 2010 by preventing lead exposures to young children. Hence the role of the CLPPP includes both primary and secondary prevention.

Much of the CLPPP program primary prevention activities are tied into the LPPF activities (materials development, website, etc). Two areas, however, are not directly tied to LPPF activities – they are collaborations with Public Health Nursing ([PHN](#)) and simplification of the real estate disclosure.

PHN is an important partner with the lead program – its staff interact with parents of young children directly and have been able to intervene to prevent a lead poisoning or prevent a lead poisoning issue from becoming worse. CLPPP is currently working with PHN in several areas.

Deleted: ublic h

Deleted: ealth n

Deleted: ursing

Deleted: they

Deleted: homeowners

PHN is developing a healthy housing module for home visits. The lead program has been providing feedback and making materials available for distribution to clients. The lead program also collaborates with PHN through quarterly conference calls with their Public Health Nursing liasons. These conference calls serve to keep PHN apprised of activities within CLPPP that may be important in their work. Finally, CLPPP is developing a “leadcheckTM” kit to make available to PHN. This will allow PHN to easily test deteriorated paint for the presence of lead during home visits. They can then emphasize methods to prevent lead paint from becoming a dust hazard.

Deleted: Public health nursing

Deleted: a

Currently there are both state and federal laws that require disclosures about the known or suspected presence of lead paint during real estate transaction (both purchase and rental). While a disclosure is intended to notify potential owners or tenants that lead paint may or does exist, this paperwork is only helpful if it is understandable and if it is recognized. Current practice is the distribution of both state and federal disclosure forms. Combining those forms into one form that is “easy to read” would improve the ability of the currently separate pieces to serve their function and simplify compliance for landlords and real estate agents.

The Maine CLPPP has developed an effective secondary prevention system in partnership with public, private and state agencies. The strength of this system begins with the Maine Lead Poisoning Control Act.

Enacted in 1992, the Maine Lead Poisoning Control Act provides the Department of Health and Human Services, under which MCLPPP is housed, with the authority to monitor blood lead testing results, conduct inspections in homes and child care facilities where the “presence of lead-based substances” is suspected, and order the removal of lead hazards.

Maine statute mandates that all children receive a blood lead screening test at one-and-two years of age unless the healthcare provider can demonstrate, via a risk assessment

questionnaire, ~~that~~ the child is not at risk for lead exposure. The law also reiterates the federal mandate to screen every Medicaid-enrolled one-and-two year old, regardless of risk status. Primary pediatric healthcare providers are required to conduct all of the lead screening on all Maine children. Blood lead specimens must, under Maine law, be submitted to the Maine State Health and Environmental Laboratory for analysis. Under an agreement with MCLPPP, the state public health laboratory electronically sends all blood lead test results to MCLPPP, thereby ensuring MCLPPP access to all lead screening results for Maine children.

Deleted: which

Upon notification of an elevated blood lead result, the MCLPPP initiates comprehensive case management services. MCLPPP's nursing care coordinator manages the referrals to public and community health nurses throughout the state for all children with confirmed blood lead levels of 15+ µg/dl. Public and Community Health Nurses provide case management services for lead poisoned children in every town and community in Maine. Twelve Public Health/Community Health nurses are designated as "childhood lead poisoning specialists". These 12 nurses provide consultation and resource information to their colleagues. MCLPPP coordinates quarterly conference calls for the lead poisoning nurse specialists, to share information and updates, and for mutual problem sharing.

Licensed lead inspectors are ~~contracted by~~ the MCLPPP to conduct environmental investigations in homes where children are identified with confirmed blood lead levels of 15+ µg/dl. An MCLPPP environmental coordinator manages the referrals for environmental investigations, provides quality oversight, and works with property owners to ensure that the required remediation is completed. ~~Many of the environmental investigations are contracted to~~ Community Action Agencies (CAA). ~~CAA agencies~~ are also the administrators of Maine State Housing Authority (MSHA)'s Lead Hazard Control ~~Grant~~ (LHCG) program. Thus the lead inspectors are in a position to offer property owners applications for the LHCG funds if lead hazards are identified on the property. The cities of Portland, Lewiston and Auburn have independent LHCG funds that are offered to property owners in those communities.

Deleted: designated through cooperative agreements with

Deleted: T

Deleted: through through

Comment [G1]: "agencies" is included in CAA

Deleted: Contract

With the availability of abatement monies, the majority of property owners in Maine comply with orders to abate. The few recalcitrant property owners ~~that~~ adamantly refuse to comply with the state law are referred to the state attorney general's office. The Maine Attorney General has the statutory authority to pursue court action in order to force the clean up of lead

Comment [G2]: Is the law the same for home owners as it is for investors?

hazards. While few cases have been brought to court, they have been effective in the implementing the abatement process in identified properties.

Lead Hazard Prevention Program (DEP)

The Department of Environmental Protection's Lead Hazard Prevention Program assists in the elimination of childhood lead poisoning with programs aimed at preventing the release of lead to the environment. Through regulation, DEP sets the standards for lead training courses as well as work practice standards for lead inspection (including testing for lead-based paint) and lead abatement. DEP also enforces Maine's law which requires anyone engaged in renovation, remodeling, maintenance or repair to take reasonable precautions to prevent the release of lead to the environment. Along with the explicit authority for these activities (see 38 MRSA §1291 et seq.), DEP has general authority to pursue enforcement with penalties of \$100 to \$10,000 per day per violation.

Deleted: all

DEP's primary prevention activities include technical assistance to contractors, building owners, maintenance workers and parents on how to do lead-safe maintenance and renovation. As previously mentioned, in accordance with the requirements of the Lead Poisoning Prevention Fund, DEP is responsible for developing and maintaining Maine's Lead-Safe Rental Housing Registry.

Deleted: ¶

Deleted: Under

Deleted: , DEP provides

Maine law mandates that all lead industry workers – inspectors, risk assessors, design specialists, contractors and workers – be trained and licensed. The Maine Department of Environmental Protection (DEP), Lead & Asbestos Unit, is the state agency responsible for implementing this law. Through its Lead Hazard Prevention Program, the DEP ensures a competent and qualified lead workforce.

Deleted: provision

Deleted: their work

Maine communities and counties which receive U.S. Dept. of Housing and Urban Development funds and use them for renovation or rehabilitation, are required to use Lead Smart contractors. Contracts are awarded after verification that a contractor has participated in LSR training and there is a DEP record of that participation.

Lead Hazard Control Programs (Maine State Housing Authority, City of Portland, Cities of Lewiston/Auburn

Deleted: ¶
¶

Lead Hazard Control Programs are the primary program targeted to mitigating lead hazards in housing. Funded by the US Department of Housing and Urban Development, the grant typically provides low or no interest loans to eligible recipients to abate lead hazards. These funds are offered to both homes that have already been identified as a lead hazard by the finding of a lead poisoned child, as well as homes that qualify financially, house children of the target age and have lead paint (but have yet to poison a child). Currently (2009-2010) the Maine State Housing Authority, the City of Portland and the Cities of Lewiston and Auburn are LHCP Grant recipients.

Lead Hazard Control Grant programs target rental housing that is occupied by residents who meet income eligibility requirements, and is located in high risk "target areas". For a property that is owner occupied, the unit contains a child i under the age of six, and has lead paint. This acts as primary prevention in that it identifies and removes potential lead paint hazards before there is a poisoned child. Additionally the programs serve to abate houses where lead poisoned children have been identified. This serves the purpose of environmental case management (secondary prevention). The programs include lead awareness, and increased screening efforts through local partnerships..

Deleted: that house
Deleted: s home to children of the ages at risk
Deleted: ve

MaineHousing was awarded its fourth HUD Lead Hazard Reduction Grant in October 2008. With the required matching funds, a total of \$4,377,000 has been allocated to be used from October 2008 through September 2010. These monies are targeted to perform lead abatement (complete removal of lead paint and lead contaminated soil, or permanent enclosure of lead-painted surfaces) in low-income residences of lead-poisoned children and children with elevated blood lead levels, except for those communities or counties who receive direct HUD Lead Grant funding. MaineHousing's *Lead Hazard Control Program* provides 0% deferred, forgivable loans (interest free with no monthly payments).

Deleted: While each program is slightly different in it's details,
Deleted: contract
Deleted: ;
Deleted: w

The program provides up to \$16,000 to eligible homeowners, and up to \$100,000 to eligible landlords of lower-income tenants for lead safety improvements. The entire amount of the loan is forgiven after 3 years, provided the property isn't refinanced or sold during that time, and, in the case of rental property, rental units are kept affordable. Making homes lead safe may involve paint removal or stabilization, and window and door replacement. MaineHousing has completed

lead hazard reduction work in 746 residences with its first three grants, and expects to complete 280 more units over the next three years with the most recently awarded HUD funds.

Deleted: contracts

MSHA also delivers *Lead Safe Renovator Training* as part of the LHCP and has trained over 500 contractors, landlords, and others in lead safe renovation practices or in proper lead sampling techniques.

Likewise, the cities of Portland, Lewiston and Auburn have been awarded HUD Lead Hazard Control Program (LHCP) grants. Portland is in its third round of funding. The cities of Lewiston and Auburn partnered to successfully compete for their first round of LHCP funds in 2001 and the second round in 2009. (is this the right date?).

Deleted: contract funds

Other State Partners

Several state agencies and other groups act as partners with the above agencies to ensure the goals of eliminating childhood lead poisoning are met. Some of these groups include:

- Health and Environmental Testing Laboratory – state law requires all blood lead tests to be performed at the Maine State Health and Environmental Testing Laboratory. This provides CLPPP with all their surveillance data that is used identify risk factors for lead poisoning and spot trends in lead poisonings. Additionally this data is used for prompt and appropriate case follow up by CLPPP staff.
- MaineCare – As all MaineCare recipients are currently required to get a blood lead test at ages 1 and 2, MaineCare is an important partner for ensuring that occurs. MaineCare works with CLPPP in sharing data to evaluate the rate blood lead testing, improving outreach to MaineCare clients, and potentially identifying screening rates on a practice by practice basis to identify areas where screening rates could be improved.
- The Medical Community – both nurses and physicians act as trusted sources of information, decision makers about the need for screenings, and active partners in lead poisoning prevention.
- Public Health Nursing (PHN) - Public Health Nursing acts as a vital partner both for preventing lead poisoning and for managing poisoned children. Because public health nurses are often in the housing of concern, they can identify and prevent practices that increase the risk of lead poisoning, can identify deteriorated paint, and once a child is

Deleted: from whom testing of one and two year olds is currently required by both federal and state law.

Deleted: Currently,

Deleted: is working

Deleted: effectiveness with which this is occurring

Deleted: s

Deleted: P

Deleted: H

Deleted: N

poisoned, act as trusted liaisons between the CLPPP and the families. Public health nurses also provide a conduit for information to Community Health Nurses – contractees who cover parts of the state not covered by Public Health Nursing.

Deleted: H

Deleted: N

- Women Infants and Children (WIC) currently asks every parent they interact with if their child has had a blood lead test. WIC also provides nutrition education and healthy food sources for low income families and children. As such, they provide a link to one group at risk of lead poisoning. Hence, collaboration with WIC is an important part of primary prevention. Additionally, a collaboration with WIC and the medical community is currently underway and may provide an opportunity to streamline blood lead testing for their members.
- Occupational Disease Reporting System – within the Environmental and Occupational Health Programs (along with CLPPP), this program provides a vital link between adult lead poisoning and childhood lead poisoning. As identified in a recent publication from the National CDC, occupational exposure to lead can be transferred to the home or car, resulting in lead poisoning of the children.
- Head Start – is a comprehensive early childhood development program that serves low-income children and their families. Early Head Start in particular provides a medium to increase screening in our target population.

Other private groups or non-state agencies also act as partners in the effort to eliminate childhood lead poisoning. Some of these groups include:

- Lead Poisoning Prevention Fund Contractees: The Lead Poisoning Prevention Fund (LPPF) supports community outreach programs to enable the public to identify lead hazards and take precautionary action to prevent exposure to lead. The LPPF provided funds to allow grassroots community-based organizations with direct ties to the at-risk communities (i.e. landlords and renters, special target populations like refugee and immigrant groups) to directly engage in the outreach strategy, building widespread support for action as well as a sustainable local infrastructure. The Community Partners promote a system that supports local involvement of families, landlords, home inspectors, health care providers and many others critical to implementing and incorporating lead

poisoning prevention practices in their communities and help eliminate lead poisoning for Maine families.

- Landlords, landlord associations, property owners and local housing authorities: The CLPPP has considerable authority to intervene when lead poisonings occur in rental property. Additionally approximately ½ of the lead poisoned children occur in rental property. Given that, collaboration with the rental community to change how lead and property maintenance is perceived will be important in eliminating childhood lead poisoning. Working with landlord associations, such as the Maine Apartment Owners and Managers Association (MAOMA), is critical to ensure support for mutual goals. Additionally, local housing authorities who administer low income housing are an important partner.
- Immigrant Advocacy Group – such as United Somali Women: It is well recognized that some immigrant groups are at greater risk of lead poisoning. Additionally, working with these groups include significant additional cultural and language barriers that are difficult to overcome. Grassroots organizations, such as United Somali Women are important in helping identify immigrant specific lead exposure routes, as well as present information in a manner that is relevant to their community.
- Realtors: Both Maine and Federal law requires that sale of a residential property built before 1978 requires that the owner provide the potential buyer with a lead disclosure. Given this requirement, targeted intervention at this opportunity could identify potential lead hazards to new home owners.

All the previous organizations act in some way in promoting the goal of preventing childhood lead poisoning and the previous list is not and cannot be comprehensive. However, all these organizations interact in ways to further our mutual goals.