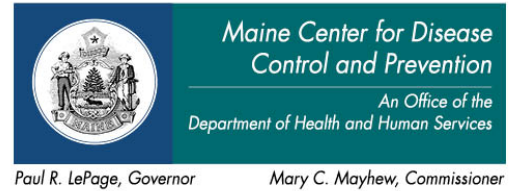


**Lead Poisoning Prevention Fund
Advisory Board Meeting
June 2, 2017 • 9:00 AM – 11:00 AM
Maine Health Access Foundation
150 Capital Street, Augusta, Maine**



Meeting Notes

Board Members Present: Barbara Leonard (Chair), MaryAnn Amrich, Peter Doran, Kala Ladenheim, Syd Sewall; **Absent:** Michele Polascek; **Maine CDC Staff:** Karyn Butts, Andy Smith; **Maine State Housing Authority Staff:** Troy Fullmer; **Department of Environmental Protection Staff:** John Bucci, David Wright

I. Introductions, Meeting Overview, and Objectives

Karyn Butts, staff manager of the Lead Poisoning Prevention Fund Advisory Board, welcomed the group to the meeting and led introductions. Karyn reviewed the objectives of the meeting: 1) update board members on legislative initiatives and federal grants that may impact LPPF activities and budget; and, 2) solicit board input on how to expand LPPF activities if additional funds become available because of restored federal grant funding for core lead poisoning prevention functions.

II. Legislative Updates

Andy Smith, State Toxicologist and Manager of the Maine CDC's Environmental and Occupational Health Program, discussed two bills introduced in the 128th Legislature that were related to childhood lead poisoning and had/have the potential to impact the activities of the LPPF.

- LD 1542: An Act To Support Lead Abatement in Older Residential Properties. This bill aimed to establish a grant program within the Maine State Housing Authority to support residential lead abatements. Of significance was that the Committee recommended to fund the initiative using the Lead Poisoning Prevention Fund. The bill was voted out of committee with a unanimous recommendation of ought to pass. Advocates were able to educate the bill sponsor and other Committee members about the LPPF, and, ultimately, the bill was carried over.
- LD 691: An Act to Prevent Lead Poisoning in Children. This bill aimed to direct Maine's home visiting program to provide lead test kits to parents of young children living in pre-1978 homes. Maine DHHS provided testimony in opposition to this bill because it created a mandate for a program that had not yet been proven and that is currently being piloted. This bill was also carried over and the Committee has sent a letter to DHHS requesting an update on the results of the pilot this winter.

III. Overview of US CDC Lead Poisoning Prevention Grant Proposal

Andy Smith and Karyn Butts provided a summary of the grant proposal Maine CDC submitted to the US CDC, covering the following points.

- The proposal was for \$404,685, and if awarded funding would restore federal funding for childhood lead poisoning prevention activities (Maine CDC has not had federal funding for childhood lead poisoning since 2014). In addition, assuming the proposal is fully funded, Maine CDC would be able to shift some costs to the grant that have been coming out of the LPPF during the gap in federal funding. It could be up to \$200,000 that are made available in LPPF funds.

- Maine CDC's proposal was responsive to the four broad categories specified in the funding opportunity announcement of: 1) improving blood lead testing, 2) improving blood lead surveillance, 3) strengthen population based interventions to prevent childhood lead poisoning, 4) strengthen processes to identify lead-exposed children and connect them with services.
- A key component of the proposal is that Maine CDC will leverage the LPPF to provide grants to communities interested in improving screening and confirmatory testing and expand both the annual targeted mailing and facilitated lead dust testing initiative through the Maine Families Home Visiting program that is currently being piloted. Other activities proposed include: deploying a lead module within Maine's Immunization Registry to handle the electronic reporting of blood lead testing results to and from provider offices, expanded analyses of blood lead testing among MaineCare population, surveillance, and improving confirmatory testing of children with blood lead levels of 5-<10 ug/dL.
- Maine CDC does not know when to expect to hear if we have been awarded funds, but is hopeful we will hear by the end of the summer.

IV. FY18 Budget and Activity Planning Discussion

The board discussed priorities to fund with the monies that may be freed up if the grant proposal is successful. There was consensus among the board members present that the highest priority is doing an evaluation of LPPF activities as this has been put off due to resource constraints during the gap in federal funding. The board identified increasing current contracts with community partners, expanding contracts to other areas (ie, the Upper Kennebec Valley), working to address New Mainer populations through ethnic community-based organizations, strengthening the LPPF funded multimedia campaign, and expanding efforts to identify and address lead in housing as priorities behind evaluation.

V. Discussion and Planning for Next Meetings

The group agreed to meet again in September once the status of the grant award is known with proposed uses for the resources made available.