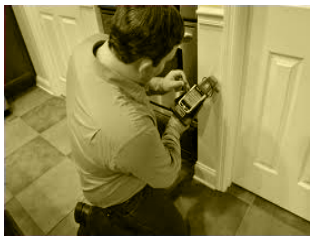
Ohio Lead Advisory Council

Annual Report 2015

Ohio

ANNUAL REPORT



Ohio Department of Health

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ANNUAL REPORT: AT A GLANCE

153,010 children tested for lead poisoning in Ohio

1 statewide conference

1100 individuals certified by ODH to conduct lead hazard control work

3% of total tested population

4,596 children with confirmed blood lead levels of **5 µg/dL** or greater

775 notifications for lead abatement projects received

2 statewide campaigns for lead poisoning prevention

1,298 children with confirmed blood lead levels of **10 µg/dL** or greater

0.85% of total tested population

569 public health lead investigations with risk assessment completed

INTRODUCTION

This Annual Progress Report highlights accomplishments of the Ohio Department of Health's lead poisoning prevention program and the Ohio Lead Advisory Council (OLAC) for calendar year 2015. This report includes information on OLAC membership and its responsibilities, blood lead testing data, and county fact sheets.

Since 1991, the Ohio Department of Health (ODH) has provided a comprehensive, statewide lead poisoning prevention program. There is no safe level of lead in the body. The primary source of lead exposure in children with elevated lead levels is deteriorated lead based paint (dust). Other lead exposure sources include soil, water, and consumer products. ODH's lead program provides guidelines on lead testing and medical management; educates healthcare providers; conducts surveillance and case management; conducts public health lead investigations; licenses the professional workforce; approves lead laboratories; and provides compliance assistance and monitoring.

ODH receives federal funding for lead poisoning prevention from the U.S. Centers for Disease Control and Prevention (CDC), the U.S. Department of Housing and Urban Development (HUD) and the U.S. Environmental Protection Agency (EPA). ODH focuses on priorities established by these federal funders and OLAC. Objectives and activities are constantly evaluated and modified as they are completed or a better approach is identified.

OHIO LEAD ADVISORY COUNCIL (OLAC)

The Ohio Lead Advisory Council (OLAC), established within the Ohio Revised Code (ORC) Chapter 3742.32, plays an active role in assisting the Director of Health with the ongoing development and implementation of the childhood lead poisoning prevention program at ODH. The mission of OLAC is to engage all stakeholders in the process of actively working toward the elimination of all sources of lead poisoning in the state. Stakeholders include state agencies, local public health jurisdictions, housing agencies, property owners, health care providers, and advocates for children and lead-safe housing.

OLAC consists of nine appointed members representing the following agencies:

- Ohio Department of Medicaid
- Ohio Department of Job and Family Services, Bureau of Child Care
- Ohio Environmental Protection Agency
- Ohio Department of Education
- Ohio Development Services Agency
- Ohio Apartment Owners' Association
- Ohio Healthy Homes Network
- Ohio Environmental Health Association
- Ohio representative of the American Coatings Association

OLAC is tasked with the following responsibilities as outlined in the ORC:

- Provide the Director of Health with advice regarding the policies the childhood lead poisoning prevention program should emphasize, preferred methods of financing the program, and any other matter relevant to the program's operation;

- Submit a report of the state's activities on childhood lead poisoning prevention to the governor, president of the senate, and speaker of the House of Representatives on or before the first day of March each year.

OLAC meets quarterly and works on activities focused on eliminating childhood lead poisoning as a public health issue. In 2015, the group met on February 26th, May 28th, August 27th and December 3rd.

Following its bylaws, OLAC can be assisted by establishing workgroups comprised of an appointed member, an ODH staff member and volunteer members from local health departments, community development, affordable housing, non-profit healthy homes organizations, the medical community, and other interested persons. Workgroups were developed to address specific issues outside the structured environment of OLAC. In 2015, there were three workgroups active. OLAC's representative from the Ohio Environmental Health Association led a workgroup to amend the public health lead investigator qualifications as outlined in the Ohio Administrative Code. The Ohio Department of Environmental Protection's representative led a workgroup to work towards ODH seeking authorization from the U.S. EPA to administer and enforce the Renovation, Repair and Painting (RRP) Program. The Ohio Department of Education's representative to OLAC led a workgroup on public and professional educational outreach. Each of these workgroups has a sunset provision to ensure timely completion of their mandates from the Council.

KEY ACCOMPLISHMENTS

- ODH successfully received funds from the US Centers for Disease Control and Prevention (CDC) to fund childhood lead surveillance and other lead poisoning prevention activities. $406,472 was received for the project period of September 30, 2014 – September 29, 2015 and $376,451 for the project period of September 30, 2015 - September 29, 2016. CDC funds are used to pay surveillance and management staff salaries and fund several lead poisoning prevention projects.

- ODH rolled out several new versions of its surveillance and case management system, Healthy Housing and Lead Poisoning Surveillance System (HHLPSS) in 2015. Funding secured from the Ohio Department of Medicaid (ODM) funded much needed enhancements to the system.

- ODH hosted healthy homes trainings in Ohio in 2015 with the assistance of the National Center for Healthy Housing. The training *Code Inspection for Healthier Homes* was offered in Central Ohio on February 19th in partnership with the Ohio Code Enforcement Officials Association. The training was attended by 85 code enforcement professionals from around the state who learned about the prevalence of common housing maintenance problems and their connection to resident health. Information was also provided on the International Property Maintenance Code (IPMC). On April 27th in Cleveland a *Healthy Homes for Community Health Workers* training was held for 35 participants. The training teaches the participants to provide healthy homes information to members of their communities and to recommend healthy homes approaches to be taken by families, landlords and other community members.

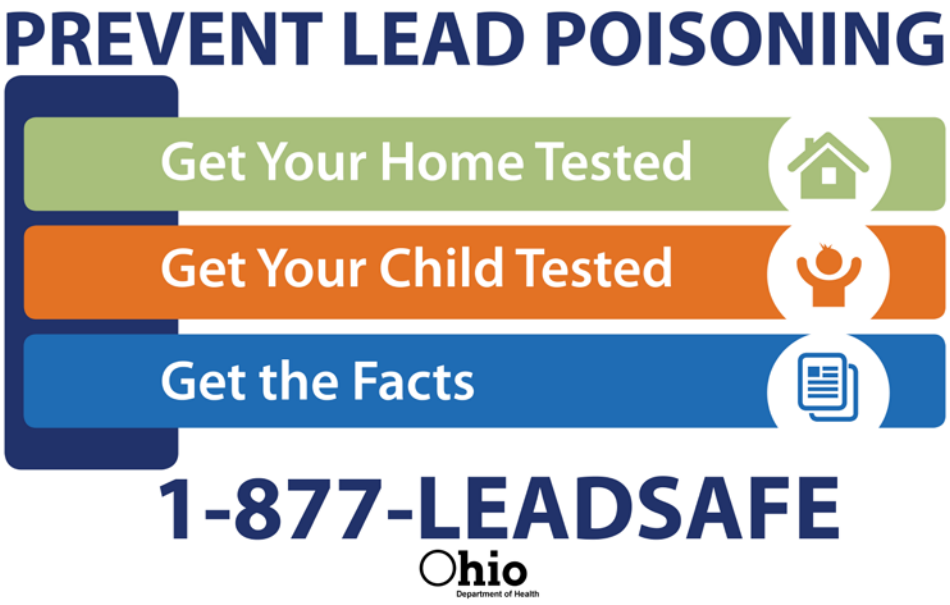
- Healthy Homes Awareness Month (HHAM) occurs every April in Ohio. The purpose of HHAM is to raise awareness about the many health hazards that are linked to the home environment such as lead poisoning. Since Americans spend the majority of their time indoors, it is important to have the healthiest home environments possible. In April 2015, 20 local health jurisdictions were awarded contracts up to $5,000 to raise awareness of lead poisoning prevention and at least one of the seven tenants of a healthy home (Keep It – Dry, Clean, Safe, Well-Ventilated, Pest Free, Contaminant Free and Well Maintained). The majority of the HHAM activities focused around mass-media outreach such as billboards, banners, radio, television, social media and local public transportation advertisement as ways to disseminate educational messages about lead poisoning prevention and healthy homes. Several jurisdictions also utilized in-person outreach, which included attending health fairs, hosting trainings, having community meetings and visiting physicians' offices. The overall reach estimate for Healthy Homes Awareness Month educational activities was approximately 4.2 million Ohioans.

- In April 2015, the Ohio Healthy Homes and Lead Conference was held in Cleveland Ohio. Approximately 200 health and housing professionals were in attendance. Speakers covered topics such as the future of lead poisoning prevention in Ohio; funding evidenced based practices; the impact of race and ethnicity on lead poisoning; and the effects of lead poisoning on education attainment. Representative from the US Environmental Protection Agency (EPA), US Centers for Disease Control and Prevention (CDC) and the US Department of Housing and Urban Development (HUD) attended and provided information on the US EPA's Renovation Repair and Painting (RRP) Rule and the future of federal policy and funding.

- A lead awareness campaign was conducted in August 2015 to coordinate with children returning to school and an increase in well child visits. Approximately 80 billboards were posted throughout Ohio in high-risk zip codes, mainly in metropolitan areas such as Akron, Canton, Cincinnati, Cleveland, Columbus, Dayton and Toledo. The billboard's message "Lead Poisoning Lowers IQ – Get your child tested" was developed based on the Health Belief Model, specifically addressing the key constructs of perceived severity and a call to action. The targeted messaging to high-risk zip codes increased awareness of the need for testing in these

areas where children under age six are at the highest risk for lead poisoning in Ohio. The campaign also included radio advertisements targeted at families renovating their homes.

- National Lead Poisoning Prevention Week was held October 25-31, 2015. The theme, "Lead-Free Kids for a Healthy Future", focused on the importance of the many ways parents can reduce a child's exposure to lead and prevent its serious health effects. ODH utilized billboards, transit bus/shelter advertisements and social media to promote the lead poisoning prevention message.



- When the Director of Health becomes aware that an individual under six years of age has lead poisoning

ODH conducts a public health lead investigation to determine the source of the lead poisoning. In 2015, the Director of Health has also delegated the authority to conduct public health lead investigations to the following 15 local health jurisdictions in accordance with Ohio Revised Code 3472.34:

- Canton City Health Department
- Cincinnati Health Department
- Cleveland Department of Public Health
- Columbus Public Health
- Cuyahoga County Board of Health
- Elyria Department of Health
- Erie County General Health District
- Franklin County Public Health
- Hamilton County General Health District
- Lorain City Health Department
- Public Health Dayton & Montgomery County
- Richland County Health Department
- Summit County Public Health
- Toledo-Lucas County Health Department
- Zanesville-Muskingum County Health Department

- 569 public health lead investigations with risk assessment were completed for children with a blood lead level greater than or equal to 10 μg/dL in 2014.

- ODH was awarded a Lead-Based Paint Hazard Control grant from HUD for $3,231,610 with a grant period of November 2, 2015 – November 1, 2018. The Ohio Development Services Agency's Housing Trust Fund (ODSA) has dedicated $100,000 and the Ohio Housing Finance Agency (OHFA) has dedicated $200,000 to serve as match funds for the grant.

- In 2015, ODH also started the final year of a previously awarded HUD Lead-Based Paint Hazard Control Grant (August 1, 2013 – July 31, 2016) that was for $2,500,000 and $230,000 of match funds from ODSA and OHFA. The grant enabled ODH to work in 24 counties to perform lead hazard control and healthy homes work on 185 homes during the grant period.

- There were 1,100 existing individuals certified by ODH to conduct lead hazard control work in Federal Fiscal Year (FFY) 2015 (October 1, 2014 – September 30, 2015).

- ODH received 775 original lead abatement project notifications and conducted 230 on-site inspections of those projects during FFY15.

2014 OHIO CHILDHOOD LEAD TESTING STATISTICS

In 2014, there were 153,010 children less than six years of age tested for lead poisoning in the state of Ohio. This is consistent with the number of children tested in 2013 (155,577). The distribution of tests by blood lead level is depicted on the following page. In November 2014, the threshold for an elevated blood lead level, as defined by the state of Ohio, was updated from 10 µg/dL to 5 µg/dL. This was done as the result of new guidance by CDC's Advisory Council of Lead Poisoning Prevention recommending a new reference value for childhood lead poisoning at the level of 5 µg/dL. This reference level is the 97.5th percentile of the blood lead level distribution for children generated by the most recent National Health and Nutrition Examination Survey (NHANES). All blood lead levels at or above this threshold are now considered to be elevated blood lead levels. There were a total of 1,298 children with confirmed blood lead levels of 10 µg/dL or greater (0.85% of the total tested population), and 4,596 children with confirmed blood lead levels of 5 µg/dL or greater (3% of the total tested population).

Children with confirmed elevated blood lead levels are eligible for case management and environmental investigation services from ODH. Further, ODH has the regulatory responsibility to investigate each case of lead poisoning to determine the probable source of the child's poisoning. While the state of Ohio did not officially approved the new definition for an elevated blood lead level until November 2014, it is important to note that 3,298 children had confirmed blood lead levels in the 5-9 µg/dL range in 2014. This constitutes a significant increase in caseload for the state. It is well documented that children with blood lead levels at these lower levels suffer cognitive dysfunction and IQ loss, as well as adverse cardiovascular, immunological, endocrine, and behavioral effects. It should be noted that there is no level of lead exposure that is considered to be safe, and that it should be the aim of public health officials to reduce the exposures of children at all blood lead levels.

All data obtained for the statistics on the following pages were obtained from the Healthy Housing and Lead Poisoning Surveillance System (HHLPSS) at the Ohio Department of Health.

Blood Lead Testing Statistics for Ohio Children, 2014

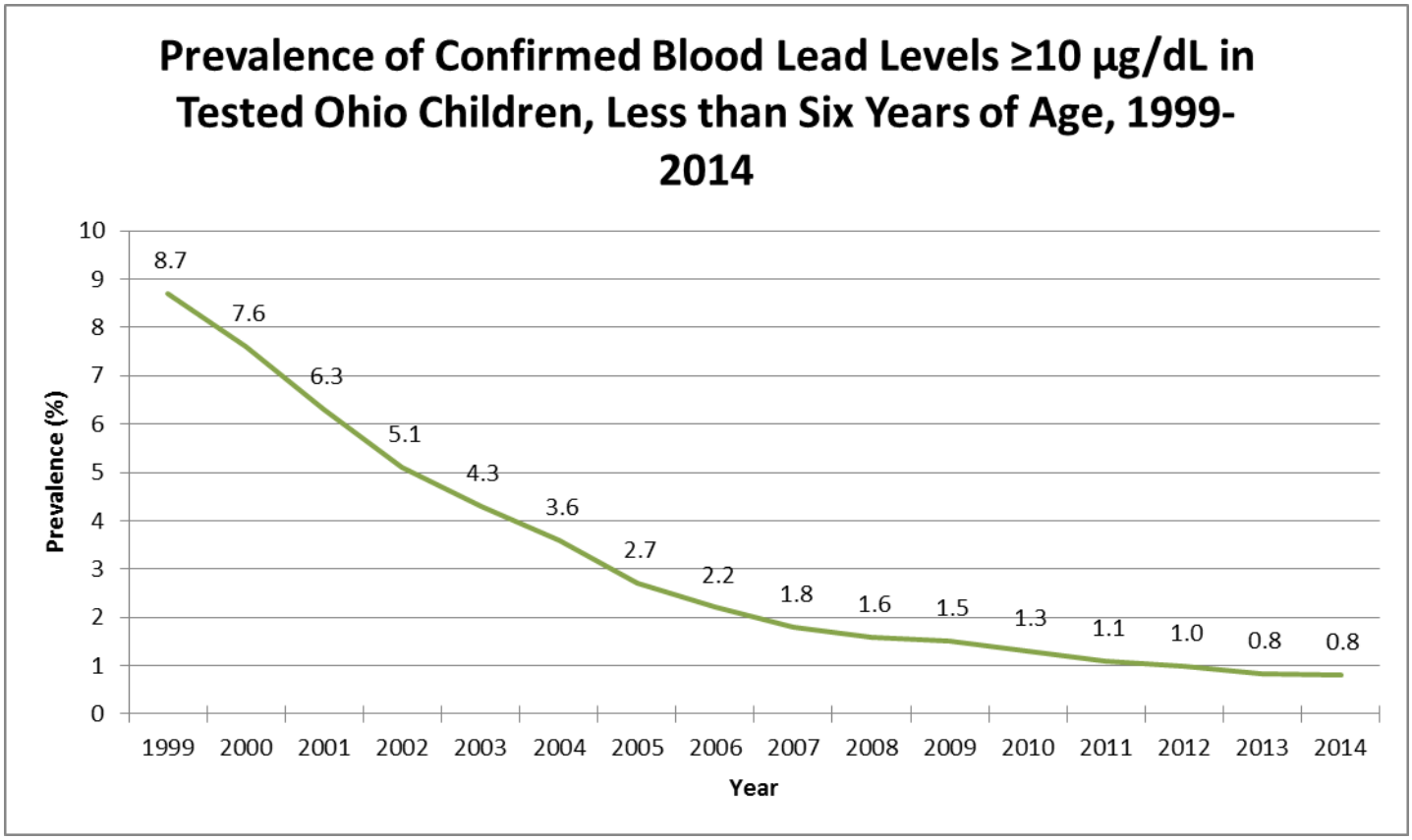
Starting in November 2014, the State of Ohio requires that all screening blood lead levels of 5 µg/dL or greater be confirmed by a venous draw, in line with the new definition of an elevated blood lead level and the body of scientific literature demonstrating adverse health effects at lower blood lead levels. This new definition will significantly increase the prevalence of children considered to be lead poisoned in the state of Ohio.

			Confirmed BLLs only									Unconfirmed	
State of Ohio	Total Children Tested	0-4 µg/dL	5-9 µg/dL	10-14 µg/dL	15-19 µg/dL	20-24 µg/dL	≥25 µg/dL	Total ≥5 µg/dL	% Tested with ≥5 µg/dL	Total ≥10 µg/dL	% Tested with ≥10 µg/dL	5-9 µg/dL	≥10 µg/dL
TOTAL	**153,010**	145,859	3,298	751	264	131	152	**4,596**	**3.00%**	**1,298**	**0.85%**	2,311	244

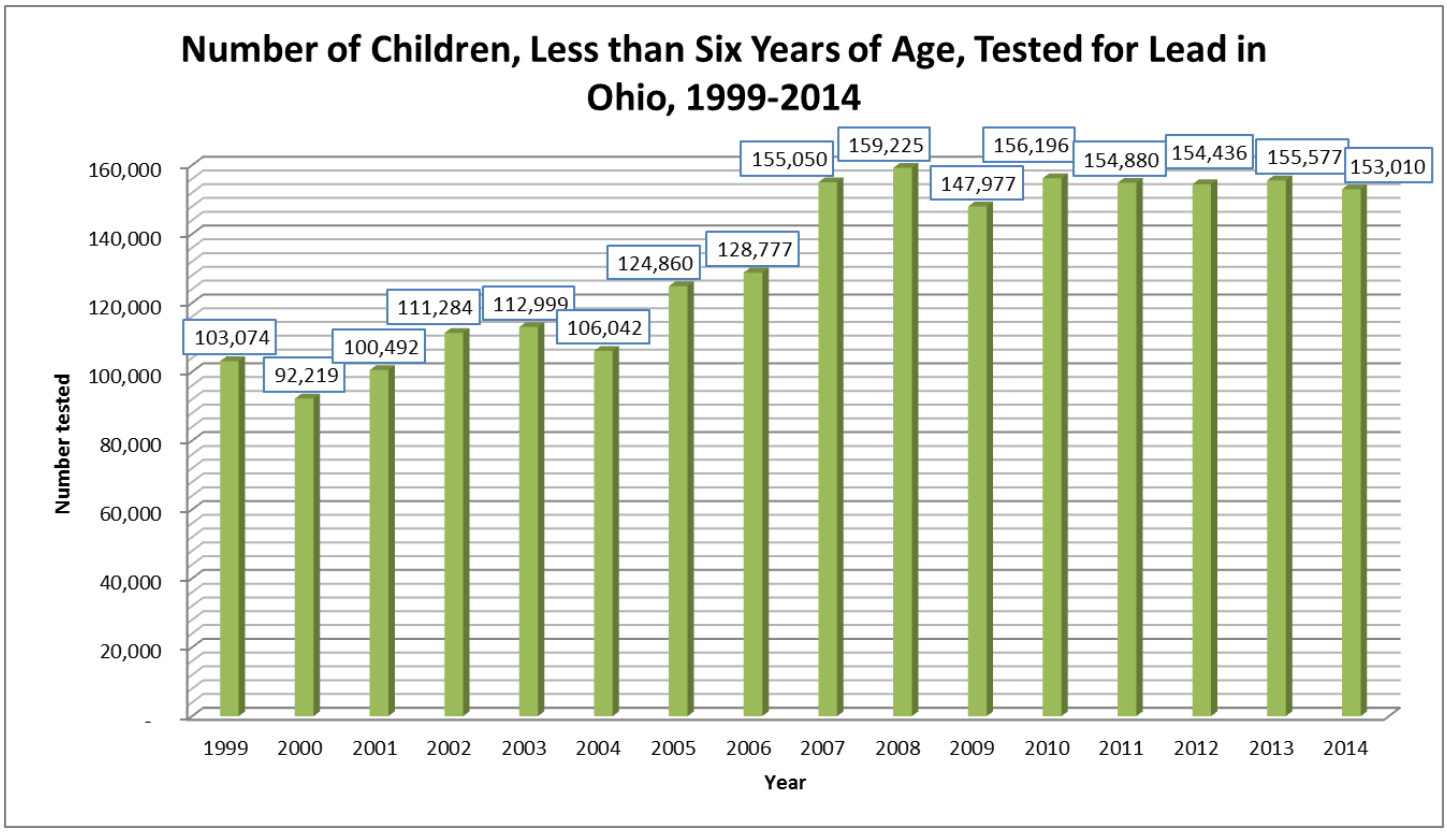
i. The table above contains data for children less than 72 months (6 years) of age at the time of test.

ii. Blood lead levels reflect the highest confirmed test if a confirmed test exists for the child or the highest test for the year, otherwise.

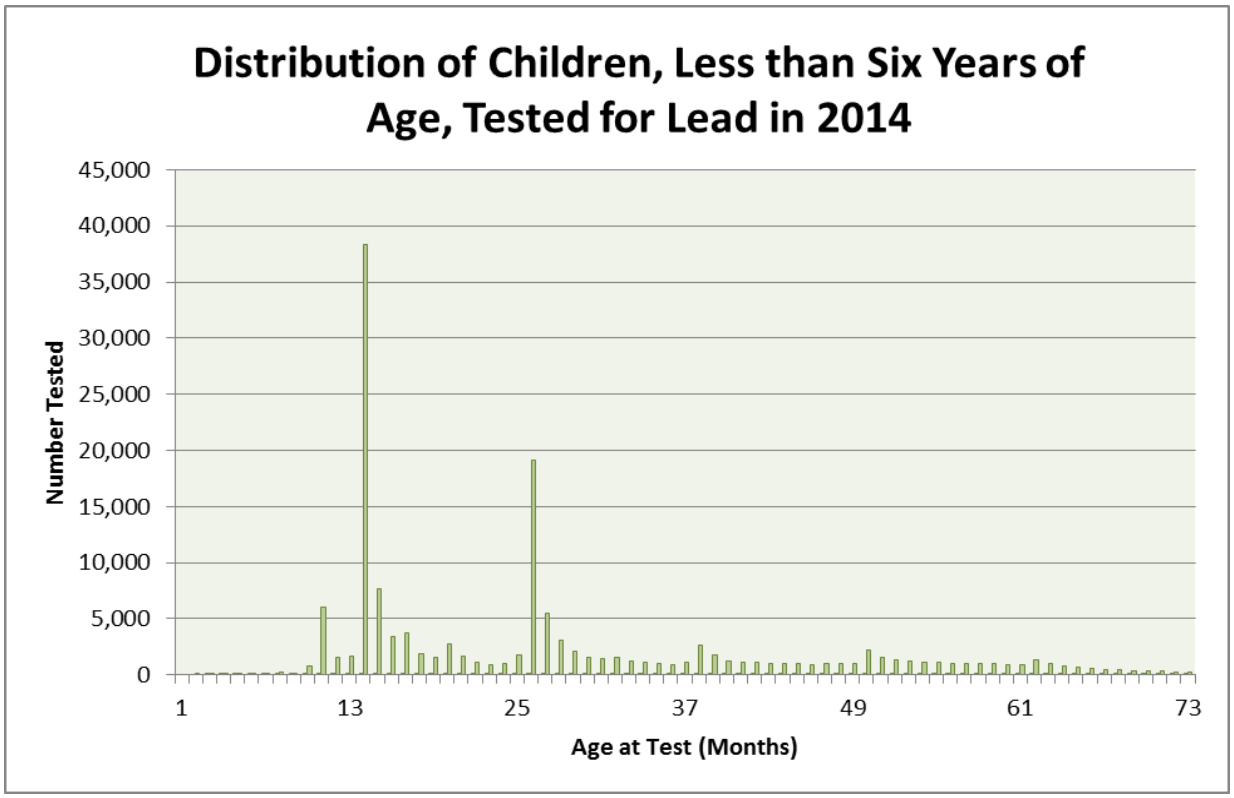
iii. Unconfirmed BLLs are defined as tests for children who had a capillary test of 5 µg/dL or greater and did not receive confirmatory test within 90 days.



The prevalence of confirmed blood lead levels ≥10 µg/dL is a measure of the proportion of children tested, less than six years of age, who were identified to have confirmed blood lead levels ≥10 µg/dL in a calendar year. The figure shows a decline in the prevalence of children with blood lead levels ≥10 µg/dL from 8.7 percent in 1999 to approximately 0.8 percent in 2013. The observed prevalence of confirmed blood lead levels ≥10 µg/dL in 2014 is consistent with the previous year.



Note: Children tested for lead more than once in a calendar year were counted only once. Only the highest confirmed blood lead level was used for a child during the year if a confirmed test existed, or the highest test for the year, otherwise.



APPENDIX A

CHILDHOOD LEAD POISOINING STATISTICS BY COUNTY

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