

An Overview of Adopting Statute and Regulation Changes

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State of CT DPH
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Agenda

- Legislation impacting lead
 - Dust wipe regulations
 - XRF definition
 - Public Act 22-49
 - Public Act 23-31
- Educational Materials



Dust Wipe Regulations



New adopted levels for dust

	Floor	Sill	Well
Risk Assessment Dust Hazards Standards	> 10 $\mu\text{g}/\text{ft}^2$ (was 40)	> 100 $\mu\text{g}/\text{ft}^2$ (was 250)	n/a
Post-Abatement Clearance Dust Standards	< 10 $\mu\text{g}/\text{ft}^2$ (was 40)	< 100 $\mu\text{g}/\text{ft}^2$ (was 250)	< 400 $\mu\text{g}/\text{ft}^2$ (no change)

Circular Letter 2023-37

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

Manisha Juthani, MD
Commissioner



Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

EHS Circular Letter 2023-37

DATE: August 14, 2023

TO: Directors of Health, Lead Inspector/Risk Assessor Code Enforcement Officials, Licensed Lead Consultants, Licensed Lead Abatement Contractors, Licensed Training Providers

FROM: Kimberly Ploszaj, Supervising Environmental Analyst, Lead Poisoning Prevention Program

RE: CT regulation adoption for: X-ray fluorescence analyzer definition update and adjusts dust lead hazard and dust lead clearance levels standards

The Department of Public Health has adopted amendments to section 19a-111-1 and sections 19a-111-3 and 19a-111-4.

- The adoption of the amendment to section 19a-111-1 allows for the use of modern analytical instruments in lead inspections.
(62) "X-ray fluorescence analyzer (XRF)" means an analytical instrument that measures lead concentration of dried paint on surfaces or in a laboratory sample in milligrams per square centimeter (mg/cm²).
The language of "using a radioactive source within the instrument" has been removed.
- The adoption of the amendments to section 19a-111-3 and 19a-111-4, revises Connecticut's lead dust hazard and clearance levels to the updated levels recently adopted by the US Environmental Protection Agency (EPA) as outlined in 40 CFR 745.
Conforming to the lower EPA standards helps to protect Connecticut's children from the dangers of lead.



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New dust wipe hazards

The adoption of the amendments to section **19a-111-3** and 19a-111-4, revises Connecticut's lead dust hazard and clearance levels to the updated levels recently adopted by the US Environmental Protection Agency (EPA) as outlined in 40 CFR 745.

(j) Dust-lead hazard – For the purpose of assessing the level of risk from lead dust, a dust-lead hazard is surface dust in a residential dwelling or child-occupied facility that contains concentrations of lead on floors and window sills that equal or exceed the dust lead hazard concentrations specified in 40 CFR 745, as amended from time to time.

(Effective September 29, 1992; Amended July 25, 1997; Amended September 30, 2003; Amended August 10, 2023)

New dust wipe clearance

The adoption of the amendments to section 19a-111-3 and 19a-111-4, revises Connecticut's lead dust hazard and clearance levels to the updated levels recently adopted by the US Environmental Protection Agency (EPA) as outlined in 40 CFR 745.

(2) Samples of dust shall be collected at the following locations in each room or area where lead-based paint has been abated. Additionally, if only a portion of a dwelling unit has been abated, a sample shall be collected from the floor outside the containment within ten (10) feet of the entrance to the abatement area upon completion of abatement activities. Any samples collected under this section shall have lead in dust levels that are below the clearance criteria for reoccupancy, as specified in 40 CFR 745, as amended from time to time.

XRF Definition Change

XRF definition change

The adoption of the amendment to section 19a-111-1 allows for the use of modern analytical instruments in lead inspections.

(62) “X-ray fluorescence analyzer (XRF)” means an analytical instrument that measures lead concentration of dried paint on surfaces or in a laboratory sample in milligrams per square centimeter (mg/cm²).

The language of “using a radioactive source within the instrument” has been removed.



CONNECTICUT DEPARTMENT OF PUBLIC HEALTH



Summary of Childhood Lead Poisoning Prevention Program changes effective 1/1/23

Public Act 22-49

Summary of Changes

- Test any child between 9 months to 35 months **annually**
- Medical professionals and clinical laboratories report to the CT DPH and local health departments, any blood lead level $\geq 3.5 \mu\text{g/dL}$ within **48 hours**
- Local health departments must provide **educational materials** to parents and/or guardians of children with blood lead levels $\geq 3.5 \mu\text{g/dL}$ (**capillary and venous**)
- Providers shall make reasonable efforts to notify the parent or guardian of a child less than the age of 3, with blood lead levels $\geq 3.5 \mu\text{g/dL}$
- Any child between 36 months to 72 months of age if **enrolled in medical assistance or is a resident in a high-risk municipality** including areas with older housing stock and high prevalence of children's blood lead levels $> 5 \mu\text{g/dL}$, **shall be tested annually**

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Phase in actions at lower blood lead levels

Time effective	One (1) confirmed venous blood test (Epidemiological Investigation)	Two (2) confirmed venous blood tests, taken at least 3 months apart (Onsite Remediation)
January 1, 2023 to December 31, 2023	$\geq 15 \mu\text{g/dL}$	(2) $\geq 10 \mu\text{g/dL}$ or $\geq 15 \mu\text{g/dL}$
January 1, 2024 to December 31, 2024	$\geq 10 \mu\text{g/dL}$	(2) $\geq 10 \mu\text{g/dL}$ or $\geq 15 \mu\text{g/dL}$
After January 1, 2025	$\geq 5 \mu\text{g/dL}$	n/a

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Summary of Childhood Lead Poisoning Prevention Program changes effective 10/1/23

Public Act 23-31

Summary of Changes

- Medical professionals notify parents of any blood level $\geq 3.5 \mu\text{g/dL}$ within 24 hours
- SDE must update school entrance form to make lead a 'mandatory' field (will not prevent entry into school)
- LHDs to perform on-site inspection and order remediation
- Create screening program for pregnant persons

On-Site Inspection

- Section 19a-110(a) of the general statutes, an on-site inspection is defined as:

"an examination of a residential dwelling to identify lead hazards, including, but not limited to, an examination of the dwelling for deteriorating paint, lead dust, bare soil near the perimeter of the dwelling, household items that may present a potential lead risk, such as toys, cookware, food products and cosmetics, and an inquiry into the water system serving the dwelling"
- Section 19a-110(a) of the general statutes, remediation is defined as:

"the process of *remedying a lead hazard condition*, including, but not limited to, investigation, abatement and, if appropriate, ongoing management measures"

Phase in actions at lower blood lead levels

Time effective *10/1/23 to 12/31/24	One (1) confirmed venous blood test (Epidemiological Investigation)	One (1) confirmed venous blood (Onsite Inspection and Remediation)
*10/1/23 to 12/31/23	$\geq 15 \mu\text{g/dL}$	(1) $\geq 10 \mu\text{g/dL}$ but $< 15 \mu\text{g/dL}$
*1/1/24 to 12/31/24	$\geq 10 \mu\text{g/dL}$	(1) $\geq 5 \mu\text{g/dL}$ but $< 10 \mu\text{g/dL}$
After 1/1/25	$\geq 5 \mu\text{g/dL}$	n/a

On-site inspection environmental form

**SUMMARY FORM
For On-Site Inspections**

PROPERTY INSPECTED/TESTED
(Check): ☐ Single-Family Attached ☐ Single-Family Detached
☐ Multi-Family Home ☐ Multi-use Building

Street Address: _____ Apt.#/Floor: _____
City/Town: _____ Zip Code: _____
If Apartment, Number of Units: _____ Year Property Built: _____

PROPERTY OWNER
Name: _____
Street Address: _____ City: _____
State: _____ Zip Code: _____ Telephone: _____

INSPECTING ENTITY
A. IF CODE ENFORCEMENT:
Department Name: _____
Inspector's Name: _____
Telephone: _____
B. IF CONSULTANT CONTRACTOR:
Company Name: _____
Address: _____
City/Town, State: _____ Zip Code: _____
Inspector's Name: _____
Telephone: _____
Consultant License Number: _____ Inspector Certification Number: _____

pg. 1

Captures:

- Family housing info
- Property owner
- Paint condition
- Dust wipe sample locations
- Dust wipe results

Intended to provide what potential lead hazards are in the home

On-site inspection child form

Child Assessment – On Site Inspection

Paint and soil exposure:

1. What is the age and general condition of the residence?

2. Is there evidence of chewed or peeling paint on woodwork, furniture, or toys?
☐ Yes ☐ No If yes, where? _____
3. How long has the family lived at this residence? _____
4. Have there been recent renovations or repairs in the house? ☐ Yes ☐ No
If yes, in what area? _____
5. Are there other sites where the child spends significant amounts of time?

6. What is the condition of indoor play areas? ☐ Intact Paint ☐ Chipping/Peeling Paint
7. Do outdoor play areas contain bare soil that may be contaminated? ☐ Yes ☐ No
8. How does the family attempt to control dust/dirt?

Relevant behavioral characteristics of the child:

1. To what degree does the child exhibit hand-to-mouth activity?

2. Does the child exhibit pica (chewing or eating of non-food items)? ☐ Yes ☐ No
3. Are the child's hands washed before meals and snacks? ☐ Yes ☐ No

Exposures to and behaviors of household members

1. Do any of the adults living in home work in or do any of the following?

<input type="checkbox"/> lead smelter	<input type="checkbox"/> machining or grinding of lead alloys
<input type="checkbox"/> battery or radiator manufacturing	<input type="checkbox"/> home renovation/remodeling
<input type="checkbox"/> demolition of old structures	<input type="checkbox"/> steel bridge maintenance
<input type="checkbox"/> welding or cutting of old painted metal	<input type="checkbox"/> thermal stripping/sanding of paint
<input type="checkbox"/> other	

Captures:

- Condition of residence
- Where the child spends time
- Dust/Dirt control
- Child behaviors
- Occupations/Hobbies

Intended to provide what potential lead hazards are in the home

Educational Materials



Active Lead Abatement in Your Home

The abatement process for lead is performed by licensed lead abatement contractors and is designed to safely reduce lead hazards in the home, including chipping and peeling paint, dust and bare soil.

Requirements of landlords and lead abatement contractors

- The landlord must post a sign that there are lead hazards in the unit once they are issued an order letter.
- Before the landlord submits the abatement plan for review, they must speak with the local health department to decide the best plan of action for tenants, including how to keep the tenants safe during the abatement process.
- The landlord needs to inform tenants at least 5 days before the start of lead abatement work.
- The lead abatement contractor is responsible for setting up and following all lead safe work practices.

What to expect

- During an abatement, all personal items must be covered. This may include moving items to the center of the room and covering them with thick plastic before abatement starts. Please discuss arrangements with your landlord and the local health department.
- Lead abatement contractors will seal off doors, windows, ducts, etc., with plastic.
- All furniture, carpets, drapes, etc., must be removed.

Preparing for abatement

- You may need to stay with family or friends during the abatement.
- If abatement work is minor you may be able to remain in your home during the work. Never remove, unsink, or break down any containment areas.

For more information

Please contact your local health department, or visit ctleadprevention.org



Lead Abatement in Your Home

Lead hazards have been identified in your home. Lead abatement is required to correct the lead hazards to protect you and others in your home.

Here are other ways tenants can reduce exposure to lead at home:

- Use a wet cloth with soap and water to clean surfaces
- Take shoes off at the door
- Increase hand washing
- Avoid areas that have chipping and peeling paint

If you have any questions, please contact your landlord or your local health department.



Abatement Materials

Understanding Lead Abatement

Process, Instructions & Timeline



Staying Safe Before Lead Abatement Begins

When a child has an elevated blood lead level, the lead hazards must be identified and actions taken to reduce or eliminate the hazard. This is called abatement. In Connecticut, this work must begin within 45 days of a lead abatement order being issued by a local health department. It is usually safe to stay in your home while waiting for this abatement work to begin, but here are some tips to reduce risk.

What is lead?

Lead is a heavy metal and was used in old paint. As old paint breaks down, it can create chipping and peeling paint and lead dust. When lead paint or dust is ingested, a child can become lead poisoned.

How to protect children

- Wash hands often, especially after children have been playing on the floor.
- Avoid areas that have chipping or peeling paint.
- Move furniture to block affected windows from reach, putting a barrier between the child and the window surfaces.
- If you have two entryways, use the one that has the least amount of chipping and peeling paint.

Tips for landlords

- Don't sand or scrape paint.
- Place a large area rug over porches with chipping or peeling paint.
- Tape up or cover defective windows or other areas.
- Offer cleaning supplies to your tenants.
- Cover bare soil with mulch/potatoes.
- Hire a licensed lead abatement contractor to help reduce lead hazards.

Note: The local health department will contact other tenants in the building to see if children under 6 are in the home.

Tips for tenants

- Clean affected areas: Use wet wipes, wet paper towels or wet rags that can be thrown away. All purpose cleaning wipes work well.
- Avoid anything that will move lead dust around: Don't clean with dusters, brooms, or vacuums.
- Avoid the use of fans or air conditioners in affected areas.
- Don't bring lead inside: If there is bare soil around the property, take shoes off at the door, do not let children play near the shoes, clean toys that have been outside, increase handwashing after playing outside and before eating/digging, and do not let your pets dig in the bare soil.

Questions?

Contact your local health department, or visit ctleadprevention.org



Lead Screening: Children

How to Protect Children from Lead Poisoning



All CT children between 9 and 35 months must be screened annually for lead.

The main cause of childhood lead poisoning is exposure to chipping and peeling lead paint in homes built before 1978. Poisoning can cause slowed growth and development, difficulty learning, and behavioral problems. The good news is that it is preventable.

- CT state law requires healthcare providers to test children aged between 9 and 35 months each year for lead poisoning. Testing is the only way to know if a child has been exposed to lead. Children that have an elevated capillary test result are required to be tested with a confirmation venous blood test.

When following up with families for lead testing, refer to the timeline below to determine when a child should receive further lead testing:

Venous Blood Lead Result Follow-up Schedule

Capillary Blood Lead Level (µg/dL)*	Venous Confirmation Testing
Less than 3.5 µg/dL	No further testing is required. Prevention education should be provided.
3.5 to 9.9 µg/dL	Within 3 months
10.0 to 19.9 µg/dL	Within 1 month
20.0 to 44.9 µg/dL	Within 2 weeks
Greater than 45 µg/dL	Within 48 hours

*The higher the result of the capillary test, the sooner a venous test should be completed.

Families can have a positive impact on reducing further lead exposure by taking these steps:

- Increase hand washing
- Increase iron/calcium in diet (prescribe iron therapy if anemic)
- Identify areas in the home with chipping or peeling paint
- Block areas with chipping or peeling paint that a child may touch
- Clean areas that may have high levels of dust: floors, window sills/walls
- Identify low-risk areas for safe play
- Repeat blood test until <3.5 µg/dL
- more on reverse

Visit ctleadprevention.org for more information.



Cómo Proteger a los Niños del Envenenamiento por Plomo



Todos los niños de CT entre 9 y 35 meses deben someterse a pruebas anuales de plomo.

La principal causa de envenenamiento por plomo en la infancia es la exposición a la pintura con plomo que se pela y desprende en casas construidas antes de 1978. El envenenamiento puede provocar un crecimiento y desarrollo más lentos, dificultades de aprendizaje y problemas de comportamiento. La buena noticia es que se puede prevenir.

- La ley estatal de Connecticut requiere que los proveedores de atención médica realicen pruebas de plomo a los niños de entre 9 y 35 meses cada año. Las pruebas son la única manera de saber si un niño ha estado expuesto al plomo. Los niños que tienen un resultado elevado en la prueba capilar deben someterse a una prueba de confirmación de sangre venosa.

Al hacer un seguimiento con las familias para las pruebas de plomo, consulta la siguiente línea de tiempo para determinar cuándo un niño debe recibir pruebas adicionales:

Seguimiento para el Resultado de la Prueba de Plomo de Sangre Venosa

Nivel de Plomo en Sangre Capilar (µg/dL)*	Prueba de Confirmación Venosa
Menos de 3.5 µg/dL	No se requieren más pruebas. Se debe proporcionar educación preventiva.
3.5 a 9.9 µg/dL	Dentro de 3 meses
10.0 a 19.9 µg/dL	Dentro de 1 mes
20.0 a 44.9 µg/dL	Dentro de 2 semanas
Más de 45 µg/dL	Dentro de 48 horas

*Cuanto más alto sea el resultado de la prueba capilar, más rápido se debe realizar la prueba venosa.

Las familias pueden tener un impacto positivo en la reducción de una mayor exposición al plomo tomando estos pasos:

- Aumentar el lavado de manos
- Aumentar el hierro/calcio en la dieta (recetar terapia con hierro si hay anemia)
- Identificar áreas en el hogar con pintura que se desprenda o se pela
- Bloquear áreas con pintura pelada o desprendida que un niño pueda tocar
- Limpiar áreas que pueden tener niveles altos de polvo: suelos, repisas y pozos de ventanas
- Identificar áreas de bajo riesgo para jugar de manera segura
- Repetir la prueba de sangre hasta que sea <3.5 µg/dL
- Más información en el reverso.

Visita www.ct.gov/dph/preventlead para obtener más información.



Lead Screening: Pregnancy

Prenatal Lead Exposure Is Preventable



Lead can be passed from parents to their unborn baby, but it's 100% preventable

Maternal lead exposure is associated with hypertension, premature birth, decreased fetal growth, and miscarriage. Fetal exposure may adversely affect neurodevelopment. At the first prenatal visit, educate your patients on lead prevention and test those determined to be at risk.

*Report blood lead levels ≥ 3.5 µg/dL to the Connecticut Department of Public Health by fax to (959) 200-4751. **Please indicate that this patient is pregnant.** To discuss a case, call (860) 509-7299.

Lead Risk Assessment Questions: the following are questions you can ask patients to help assess their risk of lead exposure:

- Have you ever been tested for lead poisoning? If yes, was your blood lead level high?
- Were you born outside of the United States?
- In the past 12 months, have you spent any time outside of the United States?
- In the past 12 months, did you use products from other countries, such as health remedies, spices, foods, ceramics or cosmetics?
- At any time during your pregnancy, did you eat, chew on or put in your mouth nonfood items such as clay, pottery, soil or paint chips?
- In the last 12 months, have there been any renovations/repairs in your home?
- Do you have, or have you ever had, a job or hobby that could expose you to lead? (e.g., bridge repair, home repair and renovation, automotive or electronic repair, working with firearms, etc.)
- Are there other adults in your home that have a job or hobby that could expose you to lead?

If the patient answers "YES" to any of the questions above, test them for lead. Please refer to the table on the reverse for recommended care actions and follow-up depending on the blood lead level measured.



La Exposición al Plomo en el Embarazo Se Puede Prevenir



El plomo puede transmitirse de los padres al bebé antes de nacer, pero es 100% prevenible

La exposición materna al plomo se asocia con hipertensión, parto prematuro, disminución del crecimiento fetal y aborto espontáneo. La exposición fetal puede afectar el neurodesarrollo. En la primera visita prenatal, eduque a sus pacientes sobre la prevención del plomo y realice pruebas a aquellos que se determine que están en riesgo.

*Reporte niveles de plomo en la sangre ≥ 3.5 µg/dL al Departamento de Salud Pública de Connecticut por fax al (959) 200-4751. **Por favor, indique que esta paciente está embarazada.** Para discutir un caso, llame al (860) 509-7299.

Preguntas de Evaluación de Riesgos de Plomo: las siguientes son preguntas que puede hacer a los pacientes para ayudar a evaluar el riesgo de exposición al plomo:

- ¿Alguna vez se ha realizado una prueba por intoxicación de plomo? Si la respuesta es sí ¿fue alto su nivel de plomo en la sangre?
- ¿Nació fuera de los Estados Unidos?
- En los últimos 12 meses, ¿ha pasado algún tiempo fuera de los Estados Unidos?
- En los últimos 12 meses, ¿ha utilizado productos de otros países, como remedios de salud, especias, alimentos, cerámica o cosméticos?
- En algún momento durante su embarazo, ¿ha comido, masticado o puesto en su boca objetos no alimenticios como arcilla, cerámica, tierra o trozos de pintura?
- En los últimos 12 meses, ¿ha habido alguna renovación/repación en su hogar?
- ¿Tiene o ha tenido alguna vez un trabajo o pasatiempo que podría exponerlo al plomo? (por ejemplo, reparación de puentes, reparación y renovación del hogar, reparación automotriz o electrónica, trabajar con armas de fuego, etc.)
- ¿Hay otros adultos en su hogar que tengan un trabajo o pasatiempo que podría exponerlo al plomo?

Si el paciente responde "SÍ" a alguna de las preguntas anteriores, realice pruebas de plomo. Consulte la tabla en el reverso para conocer las acciones de cuidado recomendadas y el seguimiento según el nivel de plomo medido en la sangre.



COMMUNICATION



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Questions

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