

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: HB-6727

AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S
RECOMMENDATIONS FOR IMPLEMENTING THE RECOMMENDATIONS OF

Title: THE LEAD POISONING PREVENTION WORKING GROUP.

Vote Date: 3/20/2023

Vote Action: Joint Favorable

PH Date: 3/13/2023

File No.:

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SPONSORS OF BILL:

The Public Health Committee.

REASONS FOR BILL:

Exposure to lead, which is stored in bones and tissues, reemerges in the blood stream and leads to negative consequences causing developmental delays, a decrease in IQ, as well as attention and hyperactivity problems. Lead poisoning is 100% preventable. This bill will provide the following changes to the prevention and treatment of lead poisoning:

- Reduces from 72 to 24 hours, the time in which a health care provider must notify a parent or guardian of a child under three whose test results indicate an elevated level of lead.
- Requires the state's two lead poisoning treatment centers to provide a quarterly report to the Department of Public Health (DPH) on the number of people treated for this condition including relevant demographic information.
- Requires the DPH to prepare materials on lead poisoning prevention, as well as a child's eligibility for the Birth-to-Three program, to be distributed by local health directors to parents and guardians of children with elevated levels of lead in the blood stream.
- Pediatric primary care providers must conduct an annual lead risk assessment for all children from birth to age six, and based on their findings, perform an annual screening for children with an elevated risk of exposure, perform a lead screening for all children 12 through 24 months, and finally, conduct follow-up testing for children with blood lead levels of at least 3.5ug/dL.
- Prenatal health care providers must provide guidance to pregnant patients on prevention during pregnancy; assess patients in the proper use of a lead risk

assessment tool; screen patients found to be at high risk; notify local health directors of patients with a blood lead level of at least 3.5 ug/dL; and finally, to provide guidance concerning lead risk during the patient's postpartum visit.

- Modifies the blood lead levels when a local health department must provide case management services and distribute educational materials to the parents or guardians.
- Lastly, requires that all children have a lead poisoning risk assessment before enrolling in school and, if such a risk exists, conduct a test of their blood lead levels.

RESPONSE FROM ADMINISTRATION/AGENCY:

Manisha Juthani, MD, Commissioner, the Department of Public Health (DPH):

The DPH strongly supports this bill which implements the recommendations of the Lead Poisoning Prevention Working Group. When enacted, the recommendations of the working group will align Connecticut statutes with the recommendations from the Centers for Disease Control (CDC) and the American Academy of Pediatrics enhancing early intervention. This bill further expands preventative measures by promoting testing of pregnant women who are at risk and requiring risk assessment for children prior to entering kindergarten. In addition, this bill allows for a shorter time frame in which to contact parents or guardians, as well as enhancing environmental investigations led by local health departments. These provisions will help ensure increased oversight of children with elevated lead blood levels and provide appropriate communication among medical providers, parents and guardians, and the public health staff.

NATURE AND SOURCES OF SUPPORT:

Kim Sandor, MSN, RN, FNP, Executive Director, CT Nurses' Association (CNA):

The CNA supports this bill which strengthens the state's commitment to address lead poisoning which is a preventable condition. CNA offers the following recommendations to further strengthen the bill and meet the needs of the diverse families in our state:

- Require that materials distributed to families are written in a way that is understandable and includes feedback to ensure understanding.
- Create a grant program to provide transportation to a lead testing lab if the testing is not provided at the location of the primary care service, HUSKY. Transportation is a social determinant of health and if not available can lead to disparities in care.

Jennifer Haile, MD and Chris Corcoran MD, Attending Physician, Division of Primary Care, Manager of the Healthy Homes Program, respectively, at Connecticut Children's:

In their testimony, the doctors provided some background on the Office for Community Child Health (OCCH) which houses the Healthy Homes program. OCCH works to improve the social determinants of health care such as housing, transportation, food and nutrition, and family support services. The program assesses homes and develops a scope of work to address housing -related hazards such as lead paint, mold, asbestos and injury risks. The doctors are most supportive of Section 4 of the bill which will lower the levels of lead by which

property owners must abide. This means more children will be identified, provided necessary services, and can live in lead safe homes. Landlords and building owners are critical to helping remediate lead when elevated blood lead levels are identified. Lead poisoning is 100% preventable and we need to do what is necessary to prevent it.

NATURE AND SOURCES OF OPPOSITION:

None expressed.

Reported by: Kathleen Panazza

Date: March 27, 2023