

Action Plan for Lead-Free Children by 2030

STEP 8

8 | Research New Ways to Protect Children from Lead

- Explore strategies that will protect children from lead hazards in early childhood education programs and schools.
- Examine all publicly funded child placements by child serving agencies, including foster care homes and residential facilities, to ensure those living environments are lead-safe.
- Fill gaps in research to better target state and local prevention and response efforts. Partner with local government, research institutions and philanthropic organizations to conduct research to identify sources of lead exposure and populations at greatest risk.
- Provide local public health departments with a detailed risk analysis of lead poisoning by jurisdiction at the census tract level every 5 years.
- Evaluate federal, local and state lead hazard abatement and control programs as well as local lead poisoning prevention ordinances to determine program effectiveness at child lead poisoning prevention.

**Turn the page to read the entire
Action Plan for Lead-Free Children by 2030.**



OHIO LEAD FREE KIDS
COALITION



OHIO ACTION PLAN FOR LEAD-FREE CHILDREN

All Ohio Children Deserve to Be Lead-Free.

We Can Get There.

Lead is poison.

There is no safe level of lead in the blood.
In severe cases, lead can be life threatening.

Lead is a devastating neurotoxin that damages children's brains and bodies. Young children are especially vulnerable to lead poisoning because as crawlers and toddlers they may be easily exposed to lead dust from lead-paint and because the harm from lead can be especially destructive to their still-developing neurological, cognitive and social-emotional abilities.

Most of Ohio's housing stock (over 66%) was built before 1980 and is likely to have lead hazards. The hazard exists predominately in urban core and rural communities where the housing stock is older than more newly developed suburbs. More than 330,000 of these Ohio homes are estimated to have children under 6 years old living in them.¹ Although no part of the state is free from the risk of lead, the highest rates of reported child lead poisoning in Ohio tend to be found in communities that are predominantly African-American and low-income.² In some Ohio communities, 1 in 4 children entering kindergarten have a history of lead poisoning.³

Childhood lead exposure comes at a high price – both personally and financially. According to The Pew Center on the States, “for every dollar spent controlling lead hazards, at least \$17 would be returned (and as much as \$221) in health benefits, increased IQ, higher lifetime earnings, tax revenues, lower special education costs and reduced criminal activity. Given the high societal costs of inaction, lead hazard control is a public health and fiscal imperative.”⁴ Lead remediation investments will also create jobs and an opportunity to build career pathways out of poverty into lead-remediation work for residents of the most impacted communities. The cost-benefit of investing in prevention is compelling.⁵



The Ohio Lead-Free Kids Coalition is a collection of organizations and individuals who share a deep and urgent concern about the potentially life-long harm caused by lead poisoning and the future well-being of our state. We work collaboratively toward a meaningful public commitment and investment to ensure all Ohio children are safe from lead in their homes and communities.

Now is the Time for Action

Lead is a silent poison. Despite the danger of lead, it can be hard to confront because it is both invisible to the eye and the damage to a child can be delayed, making it difficult to address. Funding generally kicks in once a child is already lead poisoned. As a result, we are reactive rather than proactive in preventing poisoning and protecting children.

To achieve a lead-free future for our children, Ohio needs a comprehensive state action plan now to prevent children from ever being poisoned by lead in the first place. The scale of the problem in Ohio calls for a vigorous effort by tackling all known sources of lead, including lead in paint, dust, soil and water and systematically addressing each source.

The following 9-point action plan is intended to be both ambitious and pragmatic with a goal of eliminating primary sources of childhood lead exposure in Ohio by 2030.⁶

Action Plan for Lead-Free Children by 2030

- 1 | Help Homeowners & Landlords Eliminate Lead Hazards**
- 2 | Make Rental Housing Lead-Safe**
- 3 | Protect Children from Lead During Renovation & Demolition**
- 4 | Disclose Lead Hazards & Engage Ohioans**
- 5 | Empower Schools & Early Learning Programs to Keep Children Lead Safe**
- 6 | Remove Lead from Drinking Water**
- 7 | Build a Strong Lead Workforce**
- 8 | Research New Ways to Protect Children from Lead**
- 9 | Improve Supports for Children Exposed to Lead**

Ohio Leaders are Ready to Take Action Now for a Strong Ohio

Ohio has a Governor and a Legislature that understands the urgency and has shown a willingness to lead on this issue of lead poisoning. By harnessing shared expertise and committing adequate resources, Ohio is poised to take action that fundamentally changes how we confront the lead crisis and that can make our state a healthy place for economic growth and realizing the full potential of all of our children.

The Action Plan for Lead-Free Children by 2030 advances four overarching principles:

A primary prevention approach to lead hazard reduction is the top priority, one that focuses on lead-based paint hazards in pre-1978 housing in areas of greatest risk, particularly rental units. Rental property owners need to maintain their pre-1978 housing units as lead-safe. Contractors, managers of child caring facilities and rental property owners, must become trained and certified in lead-safe renovation practices.⁷

Replacement of lead service lines should also be prioritized to ensure drinking water is safe from lead hazards. Ohio has an estimated 650,000 lead service lines (LSL), which is second only to Illinois in the number of LSLs. Replacing LSLs in the homes of children born in 2019, would protect 35,000 children and result in a return of \$1.5 per dollar invested.⁸

New funding streams for lead hazard control must be created, including capitalizing the state lead poisoning prevention fund.⁹ Home repair, lead hazard control and weatherization programs – whether state, local or federally funded – should be aligned to maximize impact through a one-touch approach.¹⁰ Public funding should also strategically leverage private capital to advance investments in lead poisoning prevention. Home repair funding can complement lead hazard control in units with serious deficiencies in addition to lead hazards.

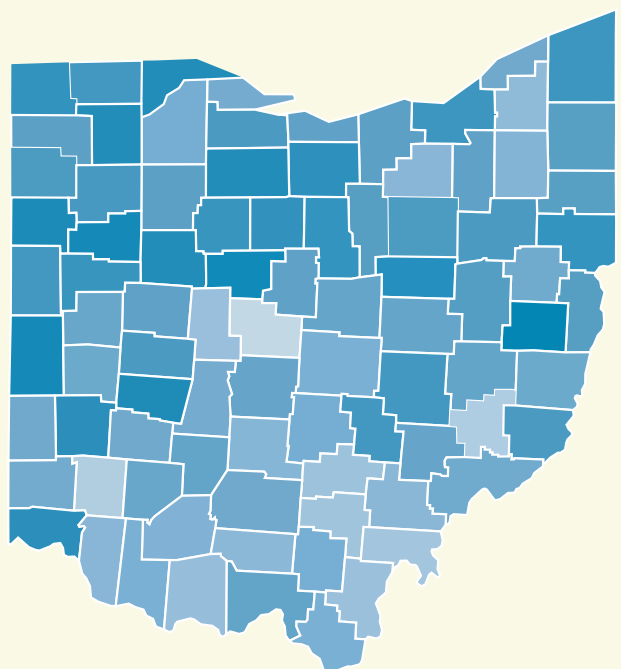
Parents of lead-exposed children must be engaged as active participants in lead hazard reduction. Connect lead poisoning prevention efforts to other programs assisting parents and young children, such as medical homes, maternal wellness, home visiting, child care, early intervention and housing and relocation assistance. A common statewide message about lead hazards must be adopted and an education and communication program that speaks to all constituencies should be put in place.

Prevalence of Risk of Lead-Based Paint Hazard

(percentage of housing units with children under age 7 present at least 8 hours per week that were built before 1980)



Source: Ohio Housing Finance Agency



The following provides more detail to the 9-point Action Plan for Lead-Free Children by 2030.

1 | Help Homeowners & Landlords Eliminate Lead Hazards

- Expand the SCHIP Lead Hazard Abatement Program to target housing and other properties, such as child care, in the highest risk communities and ensure removal of lead hazards.¹¹
- Identify a dedicated revenue source for the Ohio Lead Poisoning Prevention Fund. Make the Fund available to local governments and nonprofit organizations for a range of primary prevention activities and relocation, including private-public match funding. Create a window replacement program within the Fund targeted to pre-1978 rental and homeowner units in high-risk census-tracts. Fund relocation of families displaced due to private sector lead remediation activities. Establish both temporary and permanent lead safe housing for families residing in homes with documented lead hazards.
- Continue the new state lead abatement tax credit but include replacement of the private side of the lead service line (LSL) as an eligible lead abatement activity.¹² Increase the amount of the credit to cover LSL replacement in addition to lead-based paint abatement. Offer a refundable version of the state lead abatement tax credit to homeowners whose income tax liabilities are too low to claim the credit.

2 | Make Rental Housing Lead-Safe

- Develop a plan to transition the Ohio Lead Safe Rental Registry from a voluntary to a required registry over a 10-year period for all pre-1978 residential rental units.¹³ Reconcile differences in qualifications between the Ohio Lead Safe Rental Registry and local lead safe registries, such as those under development in Cleveland and Toledo, so that all properties listed in local registries are compliant with the Ohio Lead Safe Rental Registry.
- Provide assistance in partnership with local governments to address the cost of clearance testing, lead hazard control and certification in lead safe work practices to enable owners of pre-1978 rental properties to meet the qualifications for the Ohio Lead Safe Rental Registry.¹⁴
- Examine state housing subsidy policies to ensure that pre-1978 rental properties supported by public dollars are lead-safe.

3 | Protect Children from Lead During Renovation & Demolition

- Authorize transfer of authority for the federal Renovation Repair and Painting Rule Program (RRP) from the US EPA to the Ohio Department of Health (ODH) to ensure the use of lead safe work practices in pre-1978 professional property renovations.¹⁵
- Make RRP training and certification fees affordable for pre-1978 rental property owners. Provide low-cost or free RRP training and certification for low-income rental property owners, child-care facilities and preschools.
- Increase the percentage of RRP-certified firms serving high-risk communities through targeted outreach efforts to contractors with a business-friendly approach.
- Require contractors or rental property owners applying for a building permit for renovations on a pre-1978 unit to have RRP certification and use lead safe work practices.¹⁶
- Adopt protocols for demolition of pre-1978 properties to prevent lead hazards during and after demolition. These include effective community notification, adequate use of water hoses to minimize spread of dust, removing items with high lead content prior to full demolition, fencing and other barriers to control dust and keep children out, use of the picker method for demolition, removal and replacement of soil, and training for demolition workers in lead safety.¹⁷

4 | Disclose Lead Hazards & Engage Ohioans

- Ensure the public can access information about where lead hazards exist through effective education, disclosure and enforcement policies. Examples of access include: disclosure at point-of-sale/point-of-lease lead inspections; electronically linking lead hazard control orders to county auditor's property records; posting all lead hazard control orders to the Public Health Data Warehouse on the ODH public website;¹⁸ and, specific disclosure of lead inspections, lead risk assessments, lead hazard control orders, LSLs and lead remediation.
- Educate parents, physicians, nurses, educators, realtors, landlords, childcare operators and others on a continuing basis about lead hazards. Provide consumer centered, culturally competent education about lead, including information about the sources of lead (housing, soil, water, occupational sources and consumer products) and best practices to reduce lead exposure.
- Engage and meaningfully involve families who are affected by lead hazards in planning, implementation and evaluation of state programs. This includes appointing parents/grandparents of lead poisoned children to any existing or future, state and local, public councils, committees, and task forces convened to address lead (i.e. ODH Ohio Lead Advisory Council).
- Connect lead poisoning prevention efforts to other programs assisting mothers, fathers and young children, such as medical homes, maternal wellness, home visiting, child safety programming, child care and early intervention.

5 | Empower Schools & Early Learning Programs to Keep Children Lead Safe

- Fund policies and practices that allow school districts and early childhood facilities to protect children through the identification and remediation of lead paint and water hazards.
- Ensure early childhood and K-12 educators and administrators have the necessary education, training, tools and supports to: identify sources of lead exposure; reduce potential lead exposure; support children and families in getting tested for lead poisoning; and, accommodate the health and education needs of lead exposed and poisoned young children in their programs through developmentally appropriate and evidence-based responses and interventions.
- Explore cross-sector collaboration to empower professionals who interact with children and families in their home, learning environments, clinical environments and communities to connect them to resources that support them leading a life free of lead hazards.

6 | Remove Lead from Drinking Water

- Immediately implement key provisions of US EPA's proposed revisions to its Lead and Copper Rule (LCR) including requiring public water systems (PWS) in the state to: 1) develop and make publicly available a comprehensive inventory and mapping of lead, galvanized, and unknown service line materials that includes the number of lines and the location of each line (covering both the public and private portions of the lines); 2) find and fix any compliance sampling results that exceed 15 parts per billion (ppb); 3) establish a trigger level of no more than 10 ppb for reevaluating corrosion control and begin replacing LSLs at a rate approved by Ohio EPA; and, 4) prepare a plan to implement the above requirements and submit the plan to the Ohio EPA.¹⁹
- To complement the above changes, take the following actions to reduce lead in drinking water:
 - Ban existing residential LSLs after December 31, 2025 but delay enforcement to allow time for implementation until 2035.²⁰
 - Provide state assistance to Ohio EPA for statewide mapping and to PWS for LSL replacement and mapping, particularly for low-income customers, schools and daycare facilities. Leverage Ohio EPA's drinking water loan fund and identify new sources of funding to assist PWS.
 - Authorize PWS to assist customers with grants and/or repayment of loans for LSL replacement through water and property tax bills.²¹
 - Discontinue partial LSL replacement and couple or identify funding sources to support the replacement of private and public LSLs.²²
 - Authorize the Ohio EPA to provide grants to low-income or small rate-based communities as well as authorize the funds to be provided as a grant to community members for their LSL or galvanized pipe to be replaced.

- Adopt a health-based standard for lead in drinking water. Include LSL replacement in public health lead hazard control orders when the level of lead in drinking water exceeds the health-based standard.²³
- Provide water filters to customers, schools and daycare facilities with lead levels above the health-based standard for lead in drinking water until the LSL or galvanized line can be replaced. Provide water filters for six months after the replacement of a LSL.

7 | Build a Strong Lead Workforce

- Fund training programs that incorporate lead-safe work practice certification, support lead hazard control contractor training and licensure and provide apprenticeships for newly licensed lead contractors and workers. Explore partnership with *OhioMeansJobs* to support lead training and apprenticeships.
- Provide incentives for existing renovation contractors to obtain lead abatement contractor or worker training and licensure, including free training and licensure, assistance with liability insurance, small business training and mentoring, and access to small business loans.
- Fund collaborations with institutions, such as community colleges and vocational schools, and community programs, such as those for returning citizens, to expand the lead workforce.

8 | Research New Ways to Protect Children from Lead

- Explore strategies that will protect children from lead hazards in early childhood education programs and schools.
- Examine all publicly funded child placements by child serving agencies, including foster care homes and residential facilities, to ensure those living environments are lead-safe.
- Fill gaps in research to better target state and local prevention and response efforts. Partner with local government, research institutions and philanthropic organizations to conduct research to identify sources of lead exposure and populations at greatest risk.
- Provide local public health departments with a detailed risk analysis of lead poisoning by jurisdiction at the census tract level every 5 years.
- Evaluate federal, local and state lead hazard abatement and control programs as well as local lead poisoning prevention ordinances to determine program effectiveness at child lead poisoning prevention.

9 | Improve Supports for Children Exposed to Lead

- Ensure statewide access to developmental and neuropsychological assessments and appropriate high-quality programs for children with elevated blood lead levels. Provide a funding level that is adequate to assist all children with lead poisoning who request or are referred to Part C Early Intervention services.²⁴
- Ensure access to appropriate public educational, behavioral and social-emotional supports for children with a history of lead poisoning to improve their opportunities for positive educational outcomes and reduce use of school removal.
- Improve blood lead testing among children at high risk of exposure and find and remediate the sources of their exposure. Ohio Departments of Health and Medicaid should work with parents of lead-poisoned children, managed care organizations, health providers and others to remove barriers to blood lead testing and reporting, and to reduce sources of lead in children's home environments.
- Establish state and local blood lead testing goals for 1-year old and 2-year old children and for Medicaid-eligible children less than 6 years of age. Reports on state and local blood lead testing rates and progress towards goals should be easily accessible to the public. Require blood lead testing within a reasonable period of days of enrollment (i.e. 45 days) in state subsidized child care. Provide information and resources for families with children who have tested with elevated blood levels of 5 or above, including risk assessments if requested.

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- ³Fischer, R., Steh, S., Chan, T. . “Early Childhood Lead Exposure among Cleveland Kindergarteners by Neighborhood and School Enrollment.” (Jan. 2019). <https://dailymedia.case.edu/wp-content/uploads/2019/01/07095808/Lead-Report-CMSD.pdf>
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- ⁵See for example, Altarum analysis estimates the cost of the lifetime lead poisoning burden in Ohio at \$2.8 billion. New Online Tool Calculates the Cost and Economic Benefits of Preventing Childhood Lead Poisoning in the United States, Value of Prevention, Ohio, 2019. <http://valueofleadprevention.org/calculations.php?state=Ohio>. Similar cost-estimate analysis have been conducted by the Healthy Justice Advocacy Clinic, Columbia Law School, The Cost of Lead Poisoning in Ohio (2019) at <https://www.law.columbia.edu/experiential/clinics/health-justice-advocacy-clinic>
- ⁶This Plan was informed by “10 Policies to Prevent and Respond to Childhood Lead Exposure,” Health Impact Project, Pew Charitable trust and Robert Wood Johnson Foundation, (August 30, 2017) <https://www.pewtrusts.org/en/research-and-analysis/reports/2017/08/10-policies-to-prevent-and-respond-to-childhood-lead-exposure>
- ⁷U.S. Environmental Protection Agency, Lead Renovation, Repair and Painting Program. <https://www.epa.gov/lead>
- ⁸Environmental Defense Fund, “State efforts to support LSL replacement”. <https://www.edf.org/health/state-efforts-support-lsl-replacement>
- ⁹Ohio Revised Code, 3742.46 Lead poisoning prevention fund. <http://codes.ohio.gov/orc/3742.46>
- ¹⁰US EPA’s Drinking Water State Revolving Loan Fund, H2Ohio, and US EPA’s Lead Testing in School and Child Care Program Drinking Water Grant (WIIN Act) should be coordinated and aligned with state funding for lead hazard control and abatement to ensure a one-touch approach.
- ¹¹Lead hazards addressed through the program should include private lead service lines and galvanized pipes. The SCHIP Lead Hazard Abatement Program is formally known as the Medicaid Lead Hazard Abatement Grant. <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/childhood-lead-poisoning/for-homeowners-and-renters/schip-grant>
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- ¹⁹Proposed revisions to the US EPA Lead and Copper Rule, 40 CFR 141 and 40 CFR 142, can be found at <https://www.epa.gov/ground-water-and-drinking-water/proposed-revisions-lead-and-copper-rule>
- ²⁰The US EPA defines Lead Service Lines to include galvanized lines and service lines of unknown material. Federal Register Notice, National Primary Drinking Water Regulations: Proposed Lead and Copper Rule Revisions, <https://www.govinfo.gov/content/pkg/FR-2019-11-13/pdf/2019-22705.pdf>
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- ²²Partial LSL replacements release lead particulates when the line is disturbed. See Lead Service Line Replacement Collaborative, Introduction to Lead and Lead Service Line Replacement <https://www.lslr-collaborative.org/intro-to-lsl-replacement.html>
- ²³The Ohio Department of Health has health-based standards for lead in paint, dust and soil but not water. Ohio Revised Code, Ch. 3742: Lead Abatement. Definitions. <http://codes.ohio.gov/orc/3742>
- ²⁴Ohio Department of Developmental Disabilities, Early Intervention Program. <https://ohioearlyintervention.org>

FOR MORE INFORMATION, PLEASE CONTACT THE
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