MARYLAND DEPARTMENT OF THE ENVIRONMENT

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GOVERNOR'S LEAD POISONING PREVENTION COMMISSION

Approved Minutes AERIS Conference Room November 7, 2013

Members in Attendance

Patrick Connor (via phone), Karen Hornig, Melbourne Jenkins, Ed Landon, Pat McLaine, and Barbara Moore.

Members not in Attendance

Cheryl Hall, Delegate Nathaniel Oaks, Linda Roberts, and Mary Snyder-Vogel.

Guests in Attendance

Dr. Clifford Mitchell - DHMH, Shaketta Denson - CECLP, Hosanna Asfaw-Means - BCHD, Arthur Gray, Baltimore City Housing Department, Megan Ulrich – MDE, Ron Wineholt – AOBA, Eldesia Granger – DHMH, Jody Johnson – self, John O'Brien – MDE staff, John Krupinsky – MDE staff, Paula Montgomery – MDE Staff, and Tracy Smith – MDE staff.

Introductions

Pat McLaine started the meeting at 9:38 a.m. with introductions.

Future Meeting Dates

The next Lead Commission meeting is scheduled for Thursday, December 5, 2013 at MDE in the AERIS conference room. The Commission will meet from 9:30 a.m. - 11:30 a.m.

Approval of Minutes

Approval of minutes was deferred because too few Commissioners were in attendance.

Discussion

Dr. Cliff Mitchell asked if Commission letters had been sent to Congress concerning funding for the CDC Lead Poisoning Prevention Program. Letters were sent by FAX and mail on September 6, 2013.

Pat McLaine noted the Commission's interest in sending a letter to Housing Authorities regarding compliance with 24 CFR 35. This letter has not yet been drafted but will be circulated via email.

Agency updates

MDE – Paula Montgomery reported that MDE is finalizing the proposal to move forward with RRP. Most other states have just adopted RRP but they did not have similar work practices in place. Maryland is melding RRP in with current Maryland risk reduction requirements. This has been a concern for the regulated community and there has been some confusion but MDE believes that workable solutions can be found that do not jeopardize safe work practices and will

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continue to prevent lead exposures. MDE hopes to have draft RRP regulations by April. The abatement regulations, approved by EPA, will stay the same.

Ms. Montgomery reported that MDE is overhauling all of the Department's lead data bases, which are now in Fox-pro. Maryland Environmental Systems (MES) has been sub-contracted to do this work. Accreditation data bases will be up and running first and screen mock-ups are being finalized now. The next step will be the certification data base. Once the data bases are web-based, MDE will have the capacity to provide citizens access to compliance information,

Karen Hornig inquired about budget resources available for the updates. Ms. Montgomery noted that the rental registration fees were raised from \$15 to \$30, based on recommendations from a 2010 study. In addition, penalties and accreditation funds will be available to the program. Per the law, these funds go directly to MDE.

Pat McLaine noted that data is not static and regular updates will be necessary for the system to be accurate. Ms. Montgomery reported that she developed a survey (Survey Monkey) for MDE's 400 inspection contractors to assess their ability to upload certification information on-line. Currently, inspectors are issued fifty (50) paper certification forms in triplicate after being accredited.

Pat McLaine commented about issues related to the changeover from paper to on-line. Ed Landon commented about searching for certs on-line. Ms. Montgomery indicated that certs will be entered on-line (both data and forms) for searching. MDE is working on specific applications.

Ed Landon inquired if the system will be tied to GIS. Ms. Montgomery commented that the main link will be DAT (property numbers.); MES has better data. Mr. Landon commented that all state agencies are converting to GIS and are supposed to link to Maryland's "Do IT" GIS technology.

<u>DHMH</u> – Dr. Cliff Mitchell introduced Eldesia Granger who will be working on clinical management guidelines. He asked:

- a) What are other states doing for follow-up of 5-9 BLLs; how long will the children be followed?
- b) What case management is recommended for BLLs of 5-9?

The Point of Care Task Force is meeting next week. The Task Force has looked at the economics of testing and is also concerned about surveillance and reporting. The report is due on or before January 1, 2014. The Task Force has heard from other states using Point of Care testing – this does improve the patient experience and follow-up. There are issues associated with reimbursement (Medicaid and private insurance), administrative costs and professional testing.

Pat McLaine inquired if Commissioners had additional follow-up questions or concerns following last month's discussion. Pat McLaine noted that expanded use of Point of Care testing could increase screening, a long-time concern of the Commission.

Dr. Mitchell indicated that the Targeting Plan is still an internal document under review by DHMH and MDE but will be available for the Commission to review in January; this will be added to the January agenda. With regards to MDE surveillance data, DHMH is working with

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MDE to facilitate matching the Registry and Medicaid lead testing data. Commissioners indicated the need to continue to increase testing rates, an on-going discussion.

Barbara Moore asked what incentives were available to providers who did Point of Care testing. Dr. Mitchell indicated that providers using the technology feel they get much better follow-up and clients are pleased. Manufactures have provided incentives for purchase and rent. Reimbursement rates are an issue; in some situations, the blood draw, analysis and counseling are reimbursed separately. Fiscal incentives have not been discussed by the state. The current Medicaid contracts for laboratory testing bundle payments for lead testing with other tests. Pat McLaine commented that testing with WIC providers had been successful in Wisconsin.

<u>DHCD (State)</u> – Ed Landon indicated that he attended the International Code hearing. The International Property Maintenance Code for 2015 will be adopted for Maryland. There are still no worker protection items in the code. The national committee of 13 persons did not include references to RRP in the document. Jane Malone, National Center for Healthy Housing, is now on the committee. The ICC will publish all codes in April 2014; DHCD would adopt effective January 1, 2015. Maryland adopts the updated code every 3 years. More information is available at the website iccsafe.org.

Ed Landon reported that there was no legislation about lead yet this year. Patrick Connor noted that the IPMC people try to keep the code focused on their needs but are supportive of RRP.

Approval of Minutes

Sufficient members now being present, there were motions to approve minutes:

July minutes –Ed Landon moved, Mel Jenkins seconded, all in favor. September minutes – Ed Landon moved, Karen Hornig seconded, all in favor. October minutes – Ed Landon moved, Barbara Moore seconded, all in favor.

There was no discussion or opposition to approval of the minutes.

Baltimore City Health Department – Hosanna Asfaw-Means reported that the City just finished Lead Week activities, conducted with Park West, a Federally Qualified Health Center. Thirty (30) people were tested at the West End Community Health Fair. BCHD worked with partners in housing to provide screening. Health literature was placed in all public libraries, in English and Spanish. Two community events were held at libraries for parents of toddlers (Mother on the Goose program) and were well received. Families were engaged. BCHD is still working on BLL 5- 9 cases, making home visits and telephone follow-up as requested. They mail literature out and encourage repeat testing within 3-6 months. Many families do not want home visits. Providers are telling families to come back in 6 – 9 months for re-testing, which was the OLD CDC recommendation, before the 2012 Recommendations. The City had an increase in BLLs greater than 10μg/dL in the first quarter of FY 14; reasons are not known, possibly warmer weather.

The City's goal is to have a more strategic plan for testing, education and outreach. The problem areas in the City are the same for many diseases.

Medicaid Reimbursement – BCHD is trying to set up a meeting with DHMH. The City is losing money; 70 inspections have been performed this year. Pat McLaine commented that the Commission is concerned and that this is definitely on everyone's radar.

Child Care Administration – No one present.

<u>Maryland Insurance Administration</u> – Nothing to report.

Baltimore City Housing – Nothing to report

Other Business

Barbara Moore noted that she had received four phone calls in the last month; two from Pennsylvania and two from Maryland regarding provider contacts for adults with high BLs and recommendations for treatment. Most elevated BLLs are occupationally related. Dr. Mitchell indicated DHMH wanted to hear about such cases.

MDE is running an adult registry (Dr. Keyvan). CDC has eliminated the ABLES program for adult BLL surveillance; there is no longer funding to MDE for this work. MDE does not receive blood lead reports for adults by statute (EBL reporting goes through MOSH, reported by the employer). However, all labs report BLLLs to MDE. Dr. Keyvan and Dr. Mitchell communicate about this on a regular basis.

With regards to occupational reporting, Pat McLaine commented on MOSH's rules. Employers must monitor employees and maintain an OSHA 300 log. MOSH does not maintain surveillance data. Clinical resources for adult care for individuals with high BLLs include Dr. Brian Schwartz @ Johns Hopkins and Dr. Melissa McDiarmid @ the University of Maryland's Occupational Health Program.

Shaketta Denson from the Coalition reported she was at Park West for the screening of children; they did venous testing. The Coalition also went to a library in Wicomico County, where they also went on a school tour and worked with Head Start using their Derek the Dinosaur coloring books. Shaketta Denson noted that many more people are getting tested for pre-school, but there appear to be major barriers reaching out to the Latino population, possibly due to their immigration status. The Coalition notes difficulties with follow-up and lack of response to phone calls. There are also problems with language barriers. There are immigration settlement programs and some protection is afforded. Karen Hornig asked if local governments were required to report immigration concerns to local police. Concerns were expressed about legal retaliation.

Patrick asked if someone was submitting Notice of Defects (NODs) in cases involving Hispanic families. BCHD and the Coalition are doing this and landlords are calling because they have a NOD. Patrick asked if owners were responding in 30 days. Shaketta Denson indicated they were not, and were threatening families and putting them out. Paula Montgomery noted that NOD triggers a modified risk reduction, which can be satisfied by moving a tenant out or getting the risk reduction done. In cases with EBLLs, BCHD also has authority to order abatement. MDE can now go directly to circuit court to take action.

Shaketta Denson indicated that landlords are using status to evict or intimidate tenants. By the time that MDE gets involved, the family is already moved out. Patrick Connor asked if the house was identified, does the City follow up? Hosanna Asfaw-Means indicated that if there was an open violation, the City does a drive by every 3 months to see if the property is occupied. Patrick Connor noted that he thought the City had a green sticker that was put on a building with violations. Under Baltimore City Health ordinance, if there is an outstanding violation, a notice must be posted on the property. Patrick will check with Myrna Knowlton.

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Paula Montgomery noted that there was a need to clean up reporting and follow-up of vacant properties.

Karen Hornig indicated that with regards to undocumented immigrants, there was probably very little we can do to solve this problem. The population exists off the grid in many ways and is very vulnerable. Without community service workers speaking Spanish and helping with case management, we will probably be unable to make inroads.

A motion was made to adjourn by Ed Landon at 11:05, seconded by Karen Hornig, all in favor. The meeting adjourned at 11:02.

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