

Rhode Island—Impact Statement

In 2011, 200 children were newly diagnosed with lead poisoning in Rhode Island. The CDC's advisory committee on lead poisoning recently recommended that the threshold for intervention be lowered from the current level of 10ug/dl to 5ug/dl. Last year, over 1,300 tested at this action level.

The Rhode Island Department of Health (DOH) follows up on these cases, inspects the homes, and orders repairs to units with lead hazards. The DOH issued and completed 482 abatement or lead hazard control orders annually, and follows or manages roughly 185 open childhood lead poisoning cases and 225 open environmental cases. Medicaid reimburses at a flat rate for inspections and hourly charges for case management, so it does not fully cover the costs associated with DOH's lead protection work. The DOH maintains a surveillance system to capture and aggregate the results of blood tests for lead. Using this system, the DOH accumulated 26,894 blood test records in 2010. The surveillance data enables the CLPPP to identify high-risk areas for lead poisoning and track patterns over time. Visit

<http://www.health.ri.gov/programs/childhoodleadpoisoningprevention/index.php>

for more information generated from DOH's surveillance data usage. DOH publications are available there as well.

The Rhode Island DOH also oversees the licensure of renovation firms and workers trained in the Renovation, Repair, and Painting (RRP) Rule, the most important legislation enacted by EPA in the last 20 years. To date, over 500 firms and 1700 workers have received RRP licenses under the DOH. The DOH responds to any lead-based complaints by the public directly and performs Compliance and Enforcement checks of RRP-related issues to prevent problems from evolving out of lead hazard work activities. DOH has engaged in several outreach activities to educate the public about the dangers of lead-based paint and the importance of working lead-safe and partnered with City Year volunteers for a soil remediation day, where cited properties were cleaned up for homeowners with financial hardships.

DOH and the Rhode Island Lead Centers collaborated with six local municipalities to enforce code violations at the local level. DOH's partnership with the Department of Education led to strengthening of environmental compliance reporting for school districts—showing conformance with lead, radon, and asbestos regulations. CDC funding enables this program to respond to emerging lead threats. For example, in some cases, multiple children in the same family may have elevated blood lead levels.

The CDC-funded environmental health professional conducts an environmental inspection to identify a lead hazard in the home or child care facility.

The DOH received \$830,678 in FY10, which paid for six full-time staff positions for grantees and four sub-grantee jobs. Rhode Island was also able to support eight

subcontracts with a cumulative value of \$139,464 using these funds. By comparison, the FY11 funding level is only \$594,000—a 28% cut. The 2012 Omnibus Budget will result in further reductions in vital services, the complete elimination of several important programs and a loss of 6 positions for an already underfunded Program. The surveillance system will be seriously compromised and without the surveillance data, there will be no way to treat the existing threat or track a possible resurgence in blood lead levels.