2023 Lead Hazard Mitigation Program Annual Report

January 1, 2023 – December 31, 2023

FEBRUARY 2024



This report is written in accordance with Lead Hazard Mitigation of the R.I. Gen. Laws § 42-128.1-1.5 and includes the below items as well as other related efforts of the Rhode Island Department of Health Lead Poisoning Prevention Program:

- Educating people with regard to lead hazards and how they can be avoided, mitigated, and/or abated;
- Coordinating the enforcement of laws pertaining to lead hazard control, mitigation and abatement, including the *Lead Poisoning Prevention Act*, Chapter 24.6 of Title 23, and minimum housing codes and standards; and
- Coordinating efforts with local governments and other agencies to improve housing conditions.

Lead Poisoning Prevention

Background

Lead exposure remains a significant public health concern in Rhode Island because much of the State's housing was built before 1978 and has a high likelihood of having lead-based paint. Despite progress in reducing lead exposure in Rhode Island, elevated blood lead levels remain an issue for children under six years old and people who are pregnant. Health disparities in who is harmed by lead contamination persist for those living in the Core Cities.

Rhode Island's aging housing infrastructure is a principal contributor to lead exposure, particularly affecting children in their own homes. Research by HousingWorks RI, utilizing Census data, has identified approximately 125,000 rental units built before 1980. Only 11% of these units have a valid lead certificate¹ and by focusing on these properties, the Department can increase the percentage of units that have been inspected and received the appropriate Certificate of Lead Conformance. This exposure to lead hazards can significantly impair a child's developmental capabilities, including growth, cognitive function, learning capacity, relaxation, and the formation of critical early life relationships. It can have profound implications for a child's educational outcomes.²

While the State has made progress in reducing childhood lead poisoning, the issue remains prevalent. An estimated 2.31% of Rhode Island children were reported to have elevated blood lead levels (EBLL) for the first time in 2023, which is the slightly higher than seen in 2022. Currently, in Rhode Island an EBLL is equal to or above 5 micrograms of lead per deciliter of blood (mcg/dL).³ An estimated 4.85% of Rhode Island children entering kindergarten in 2023 have had an EBLL. This is an increase over 2022, which coincides with the Department's increased screening efforts as well the increased rates of lead exposure seen during COVID-19. This prevalence of lead exposure underscores the need for ongoing and targeted public health initiatives, especially to bridge the gap in lead poisoning rates that disproportionately influence low-income communities, minority groups, and residents in high-risk areas.

¹ <u>2023HFB.pdf (d337wih8hx5yft.cloudfront.net)</u>

² Lead Exposure (rilds.org)

³ The CDC lowered the reference value for EBLL to 3.5 mcg/dL in 2021.

Data Point	# of Tests	Number of Kids with First Positive Test	%
Kids Entering 2023 Kindergarten	11,025	535	4.85%
% 2023 Child w/ First Time EBLL 5.0 and above	25,519	589	2.31%
Kids Entering 2022 Kindergarten	11,469	425	3.71%
% Child 2022 w/ First Time EBLL 5.0 and above	23,676	391	1.65%

FY23 Kindergarteners Starting School with EBLL

The Rhode Island Department of Health (RIDOH) has the authority to administer and enforce lead laws to prevent childhood lead poisoning per R.I. Gen Law Chapter 42-128.1⁴ (*the Lead Hazard Mitigation Act*), R.I. Gen Law Chapter 23-24.6⁵, Lead Poisoning Prevention Regulation (216- RICR-50-15-3)⁶, and the Lead Hazard Mitigation Regulations (860- RICR-00-00-2)⁷.

All lead-related responsibilities fall under the Lead Poisoning Prevention Program (LPPP) in the Division of Environmental Health at RIDOH under the Center for Healthy Homes and Environment. The LPPP takes a multi-pronged approach to addressing and preventing Rhode Island's residents' exposure to lead. LPPP leverages state and federal funding from multiple sources including the Housing Resource Commission, Centers for Disease Control and Prevention, and from the US Environmental Protection Agency's *Toxic Substances Control Act*. Braiding these programs together has increased primary and secondary lead poisoning prevention activities with a focus on ending social, demographic, and geographical disparities. The program is comprised/funded through the following components.

- 1. Environmental Health Capacity Grant Program (EHCG)
- 2. Environmental Lead Program (ELP)
- 3. Lead Hazard Mitigation Program (LHMP)
- 4. Childhood Lead Poisoning Prevention Program (CLPPP)

Lead Hazard Mitigation Program

Programmatic Focus

The LHMP focuses on increasing the number of rental housing units in Rhode Island that have passed a Lead Hazard Mitigation inspection. RIDOH's licensed Lead Inspectors and Industrial Hygienists issue a Certificate of Lead Conformance (CLC) if the property is deemed to be safe from lead hazards. CLC's

⁴ webserver.rilegislature.gov//Statutes/TITLE42/42-128.1/INDEX.htm

⁵ webserver.rilegislature.gov//Statutes/TITLE23/23-24. 6/INDEX.htm

⁶ Lead Poisoning Prevention (216-RICR-50-15-3) - Rhode Island Department of State

⁷ <u>REG 10357 20181213151817.pdf (SECURED) (risos-apa-production-public.s3.amazonaws.com)</u>

represent the most robust primary prevention method against lead exposure in Rhode Island. Focusing on the approximately 125,000 rental units built before 1980, will increase compliance and provide a healthy housing environment safe from the dangers of lead hazards. This targeted focus is crucial in preventing children's exposure to lead, thereby safeguarding their health and well-being.

RIDOH relies on existing lead hazard education courses for property owners, realtors, and foster families offered by the Rhode Island Realtors Association for Realtors and Childhood Lead Action Project (CLAP) for landlords. These courses undergo curriculum review to ensure they meet LHMP standards. Developing and managing the curriculum internally would be too costly. All external vendors are required to create and offer such courses within regulatory guidelines. External vendors are encouraged to develop training materials in Spanish for the current fiscal year.

Program Objectives

- Decrease the rates of lead poisoning in Rhode Island through primary prevention
- Increase the number of rental properties with a CLC
- Educate Rhode Islanders regarding lead hazards and mitigation
- Inform landlords about their legal responsibilities, promote property remediation, and highlight available programs funded by the U.S. Department of Housing and Urban Development (HUD) and state tax credits
- Assess lead hazard liability insurance availability, in cooperation with the Department of Business Regulation; and
- Coordinate with municipalities to enforce lead hazard control laws, thereby ensuring compliance with the *Lead Poisoning Prevention Act* Chapter 24.6 of Title 23 and minimum housing codes and standards.

Childhood Lead Prevention Program Database

CLPPP operates a dynamic, comprehensive lead surveillance database system, which is regularly updated to meet program needs. The Program gathers both historical and real-time individual and address data, enabling the identification of lead-exposed children and facilitating their connection to support services. CLPPP also uses surveillance data to pinpoint high-risk areas, enhancing intervention efforts and ensuring the timely dissemination of current lead data. The database allows for both private lead inspectors and state hygienists to update properties' compliance with lead laws and regulations. Updated training curriculums are provided regularly to these individuals, so they are kept current with any updates to the system.

LHMP has been actively working to reduce lead poisoning rates by ensuring more rental properties comply with Rhode Island's lead hazard regulations. By analyzing tax records against database data, LHMP has enhanced the monitoring of property owner compliance, initially focusing on the Core Cities. Partnering with the <u>Rhode Island Longitudinal Data System (RILDS)</u>, LHMP identified non-compliant landlords in specific municipalities through a comparison of tax assessor's records and programmatic data. The goal of the pilot project was to complete the analysis of a single core city. LHMP exceeded this goal by expanding its outreach beyond Providence to include Central Falls and Woonsocket landlords.

The database will be upgraded by the end of the fiscal year to include Presumptive Compliance Certificates of Lead Conformance for multiunit complexes. Property owners with buildings containing ten or more units may apply for presumptive compliance if these buildings were constructed post-1960 (or post-1950 on federally owned land). Other stipulations require owners to have no outstanding Notices of Violation and have no history of multiple lead poisonings. This system streamlines compliance verification in coordination with licensed professionals, aiming to enhance lead safety in residential rentals. LHMP and RIDOH Center for Public Health Communications developed a publication to help landlords understand if a property is eligible to apply for <u>Presumptive Compliance</u>.

The desired outcome of LHMP is to increase the number of rental units that meet the criteria for safe and affordable housing. When a child's lead screening shows an EBLL over 5 mcg/dL, a lead hazard inspection is conducted where they live. The type of inspection is dependent on the EBLL. For children with an EBLL of 5.0- 9.9 mcg/dL, a Lead Hazard Mitigation Inspection is conducted, and for children with EBLL over 10.0 mcg/dL, a Comprehensive Environmental Lead Inspection (CELI) is conducted. After conducting the inspections, reports are produced that pinpoint the lead hazards requiring remediation. These reports are then provided to landlords to inform them of necessary actions and are available to tenants upon request. Property owners are sent notices to ensure conformance with the *Lead Hazard Mitigation Act*, emphasizing the need to address the lead hazards identified in the inspection. Cases where property owners were unresponsive are referred to Municipal Code Enforcement (EBLL of 5.0-9.9 mcg/dL) or the Attorney General's (AG) office (EBLL of 10 mcg/dL) for further action.

The LPPP staff and AG staff developed and distributed <u>Guidance for Local Code Enforcement on Lead</u> <u>Hazard Violations</u>. This document underscores the authority of city and town officials to issue a Notice of Violation for properties built before 1978 that lack the required CLC. Under <u>Section 305.3 of the</u> <u>Property Maintenance Code</u>, local code enforcement officers are empowered to enforce the lead safety requirements stipulated in the *Lead Hazard Mitigation Act* and *Lead Poisoning Prevention Act*.

In 2023, RIDOH initiated a total of 321 Lead Hazard Mitigation cases. Out of these, 29% (94 cases) remain open, while 71% (227 cases) have been successfully closed. The open cases are either within the standard 90-day enforcement period or have been granted extensions due to pre-approved construction schedules. A majority of the open cases reported in FY22, have now been closed, and a majority of FY23 cases are expected to be closed by start of FY24.

Number of LHMP Investigations					
	Total Cases	Open	Closed		
FY22 Lead Hazard Mitigation Cases	276	4%	96%		
FY23 Lead Hazard Mitigation Cases	321	29%	71%		

The achievement of programmatic goals would not be attainable without municipal group coordination. As such, our program collaborates with Lead Poisoning Prevention Coordination Groups (LPPCG) who are already established in the four Core Cities. LPPCGs work with the communities for assistance with communication efforts to increase lead safety, promote lead-safe housing, and protect the (Core) City's children and families from lead exposure. These groups have helped maximize the promotion of having a lead inspection, mitigating lead hazards, and obtaining a CLC. Meetings are organized based on community needs and are held so participants from RIDOH, the municipalities, community non-profit partners, and local lead centers, Health Equity Zones, school departments, case managers, and public can freely discuss public records about lead hazards and lead safety, including city housing code violations, state lead violations, and properties where lead-related repairs are being done. RIDOH is continuing to foster the development of additional Lead Poisoning Prevention Coordination Groups and, to this end, has made new connections in Cranston and Newport. RIDOH has also effectively partnered with various community organizations to enhance and extend its lead safety messaging, including CLAP, the City of Central Falls Communications Director, the Central Falls School Department, RI Housing, and the Rhode Island Parent Information Network's (RIPIN) Communications Director. These partners support RIDOH by reposting various social media content, thus broadening audience engagement and reach. Furthermore, the partnership with the City of Central Falls Communications Director has led to including the <u>Rhode Island Department of Health:</u> <u>Environmental Lead Program</u> information on the City's website. Additionally, program information has been integrated into KIDSNET publications, the <u>KidsCount</u> Data Book, and expanded in the housing and health chapter of Housing Works RI Annual Factbook.

The LPPP will also continue to partner with Rhode Island's 39 cities and towns to share new lead law changes and to provide technical support that addresses lead-related challenges as they emerge, ensuring effective implementation and enforcement of lead safety measures.

Program Progress

Increase in Certificates of Lead Conformance

RIDOH has seen a notable increase in the issuance of valid CLCs. In its third year, the LHMP saw the issuance of 5,376 CLCs by both private and State Lead Inspectors. This number rose significantly in the program's fourth year, with a total of 7,796 CLCs being issued, a growth of approximately 33%. This upward trend demonstrates the program's effectiveness in enhancing lead safety compliance across Rhode Island, contributing to a healthier and safer environment for residents, especially children.

Certificates Issued	Number in 2022	Number in 2023	% Difference
Lead Conformance	15	19	26.7%
Certificate -			
Condominium			
Lead Conformance-	21	136	548%
Exterior/Previous Interior			
Lead Conformance-	396	574	44.9%
Interior			
Lead Conformance-	4,942	7,067	43.0%
Interior/Exterior			
Grand Total	5,374	7,796	32.9%

Central Falls Public Housing Authority (CFPHA) Pilot Project

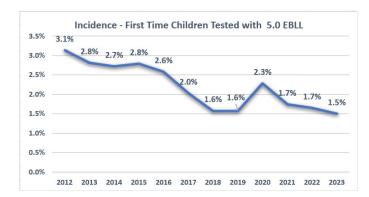
Our program has invested in building tracking and surveillance capacity in RIDOH's CLPPP database this past year. RIDOH's CHHE data team developed reporting measures to better monitor property owner compliance. These new measures enabled the program to implement a pilot project with the CFPHA to educate landlords missing a required CLC on how to obtain one. A list of 586 properties was cross-referenced to CLPPP to identify properties missing a required CLC, with 11 properties excluded due to a non-Rhode Island address. Of the remaining 575 properties, only 32% had valid certificates and the remaining properties either had an expired certificate (45%) or never had a CLC (23%).

LHMP coordinated with CFPHA to communicate with landlords of non-CLC containing properties, offering guidance on the steps needed to comply with the Lead Hazard Mitigation standards. RIDOH made recommendations for CHPA to send reminder notices to all properties with a CLC about renewal

requirements 90 days before the expiration date. The replication of this project in other cities and towns is being explored.

Decrease in Statewide Lead Poisoning Incidence

The incidence rate of lead poisoning throughout the state is generally decreasing, as shown by the graph below. While overall state rates are declining, the Program will continue using incidence rates in each of the municipalities to identify high-risk jurisdictions to guide future educational outreach activities.



State Incidence Rates for Children with Elevated Blood Lead Levels Equal or Greater than 5 mcg/dL

Increases in Lead Inspectors and Workers

The LHMP Program has seen a slight increase in the number of lead inspectors, and a substantial increase in the number of lead inspectors-in-training. As communications efforts from the Department regarding the need for property owners to have a CLC increased, more professionals are accessing the lead inspector course. With increased market demand for lead abatement and mitigation, in the number of lead workers also increased. Unfortunately, the Department has seen a slight decrease in the number of lead contractors and Renovation, Repair and Painting (RRP) providers due to death, retirements, and firms not renewing their license. This can be attributed to a variety of factors, including, amount of capital overhead required, notification and paperwork requirements, as well as long term liability for short term HUD compensated mitigations. These issues as well as the total cost, class costs, and loss of wage costs, are additional deterrents keeping contractors or firms from acquiring lead licenses. Possible solutions to address this issue are discussed in the Future Initiatives section of this report.

Numbers of Lead Professionals	SFY22	SFY23	% Difference
Lead Inspectors	31	32	3.2%
Lead Assessors	13	23	76.9%
Lead Contractors	40	38	-5.0%
Lead Renovation Firms	793	733	-7.6%
Lead Inspectors-in-Training	9	13	44.4%
Lead Workers	46	55	19.6%

Education and Outreach

The Program is dedicated to developing public health outreach campaigns as a primary prevention approach. The Program's messaging is targeted to an array of stakeholders, including property owners and tenants, as well as parents and caregivers, healthcare professionals, and public health workers. The focus of our education and outreach campaigns covers the full array of overall program objectives.

RIDOH uses various communication methods to educate and inform communities throughout Rhode Island, with many of the communication efforts happening in the Core Cities. These efforts included billboards, social media posts, and a Public Health Out Loud podcast episode.

Bilingual messaging was used on eight billboards in the Core Cities. Examples of the billboards used are below.



Strategic and targeted social media content in both English and Spanish was posted throughout the year on RIDOH's platforms, including Facebook, X (formerly Twitter), Instagram, and NextDoor. Examples of social media posts are below.



Future Initiatives in FY24

Lead Workforce Development

LHMP is working on several workforce development solutions to address the shortage of lead professionals in the State. One of the initiatives is an outreach program with state vocational and municipal construction technology programs, where high-performing high school seniors enrolled in

these programs will receive a scholarship for the lead workers class as well as a waiver for licensing fees for the first year. LHMP is also looking to address the shortage of lead contractors through a similar program with scholarships for the lead contractor course and license, helping to offset some of the costs and entice more tradespeople to become licensed lead contractors.

Replication of Pilot Project

LHMP is collaborating with the Providence Public Housing Authority (PPHA) to replicate the programmatic success seen in the Central Falls pilot project educating property owners lacking a CLC. RIDOH will provide technical support to develop a compliance plan for PPHA units to meet new lead laws, which may include strategies like extending CLC expirations through <u>Affidavits of Completion of Visual Inspection</u> and issuing Presumptive Compliance Certificates when appropriate. Additionally, LHMP will help create a guide listing the necessary steps for landlords to take to comply with Lead Hazard Mitigation standards.

Empowering Rhode Island's Home Visiting Offices

The LHMP team is focusing on building relationships with home visiting services and community health workers (CHWs) who interact with Rhode Island's most vulnerable populations. LHMP will offer trainings on visually recognizing lead hazards during family assessments and referring families to the LPPP for further intervention. This initiative aims to enhance early detection and intervention for lead exposure risks. First Connections, Parents as Teachers, Nurse Family Partnership, and Healthy Families America are some of the organizations RIDOH currently works with.

Adopting a Lower Reference Value

RIDOH continues to strive to model its program protocol after EPA and CDC policies. In 2021, the CDC lowered the EBLL reference value to 3.5 mcg/dL for intervention. Any statewide changes would require a change in regulations, as well as additional funding for staffing. Lowering Rhode Island's EBLL to align with the new CDC reference value would generate an estimated 900 new cases annually. Focusing on what could be implemented in the interim, RIDOH has advised healthcare providers to rescreen children within three months of elevated blood sample results between 3.5-4.9 mcg/dL. RIDOH is also considering expanding its non-medical case management to include children within this range. Based on 2022 and 2023 data, this change could mean an additional600 more Lead Hazard Mitigation inspections.

Lowering Dust Levels

In January 2022, RIDOH aligned its dust level standards with EPA guidance. RIDOH continues to monitor for updates regarding EPA's ongoing review, which may lower these standards in the future. Discussions on the cost-effectiveness of EPA's proposed stricter dust-lead standards are ongoing. As the EPA makes decisions, the Program will adapt its policies to ensure continued compliance and effectiveness in lead hazard mitigation.