



Insider News

Lead and Healthy Homes
Division Newsletter
August 2020



Indiana State
Department of Health

Report Finds Adults with High Blood Lead Levels in Early Childhood Show Higher Dependence on Public Systems as Adults

As reported in [the daily](#), a Case Western Reserve University communication publication, a recent study from Case Western shows that numerous negative issues associated with lead poisoning follow children well into adulthood – building on the evidence linking elevated blood-lead levels with a host of harmful outcomes in education, behavior, and health. The study followed 10,000 children who experienced elevated blood-lead levels before age 3 through age 23. Using public data to track the life outcomes, these children were compared to a control group of students who had similar backgrounds and childhood variables, like year of birth, race, factors like low birth weight, and a calculated [“Opportunity Index” for the neighborhood where the child was born](#), who did not have elevated lead levels.

“With these findings, we now have conclusive evidence that having elevated levels of lead not only presents a host of problems for Cleveland’s children – these issues continue to manifest into adulthood,” said Claudia Coulton, the study’s co-author, a Distinguished University Professor and co-director of the Poverty Center at the Mandel School.

“It’s clear,” she said. “Lead poisoning in early childhood can altogether shift the trajectory of a person’s life at key stages of development and leave lasting long-term consequences.”

When evaluating the results of the data, researchers conclusively determined that elevated levels of lead not only presented problems for those children in the study, but these issues continue to manifest into adulthood.

Adults who had experienced **childhood** lead poisoning were 34% more likely to be incarcerated (age 18 to 23) by the age of 23 and were more likely to have relied on public assistance programs, such as Temporary Assistance for Needy Families (53% more likely), homeless services (40% more likely), and Supplemental Nutrition

Assistance Program (17% more likely). The study also revealed that children who were exposed to lead consistently were less likely to meet educational benchmarks like third-grade readiness and state testing requirements and showed lower rates of graduating high school and college.

“Documenting the downstream consequences (increased involvement in the juvenile justice system, adult incarceration, homelessness) of lead poisoning can help society acknowledge and appreciate the costs of inaction – and to target resources where they are most needed,” said Rob Fischer, an associate professor at the Mandel School and a study co-author. “All of the outcomes examined in this study are costly to the people who experience them, the systems that serve them, and society at large.”

More information about the study can be found [here](#).

New Resources:

- [ISDH Laboratory Blood Lead Specimen Collection and Shipping Guidance](#)
- [ISDH Laboratory Blood Lead Specimen Collection and Shipping Guidance for WIC Program Participation](#)

Lead & Healthy Homes

Website Highlight

****Emergency Radon Rule Amendment – July 8, 2020****

On July 8, 2020, an emergency radon rule amendment **revising the certification and standards requirements regarding radon testing, mitigation, and laboratory analysis**, in accordance with the requirements of House Enrolled Act (HEA) 1334 from the 2020 Legislative Session, was passed by the ISDH Executive Board. The changes approved will impact, among other things, updates to current industry standards of practice, a modification of license terms, and national and state credential requirements. This information, and more about the changes, can be found [here](#).

Indoor Air Quality Tools for Schools Action Kit

The United States Environmental Protection Agency's (EPA's) *Indoor Air Quality (IAQ) Tools for Schools* program shows schools how to carry out a practical plan to improve indoor air problems at little or no cost using straightforward activities and in-house staff. IAQ is becoming an increasingly important issue in our nation's schools as childhood asthma is a leading cause of chronic disease-related school absenteeism in the U.S. The number of reported missed school days among children with asthma was 12.4 million in 2003, 10.4 million in 2008, and 13.8 million in 2013 (CDC). A good IAQ assists schools with their core mission – educating children. The IAQ Tools for Schools Action Kit provides clear and

easily applied guidance that will help schools develop and implement an IAQ Management Plan, identify and resolve existing IAQ issues in buildings currently being utilized, and prevent future IAQ problems. An FAQ and resource section is also available to answer questions and provide additional guidance and information. Complete information about the IAQ Tools for Schools Action Kit is found [here](#).



Does this brochure look familiar? Do you provide this FREE brochure to your families as a part of your education on lead toxicity prevention?

The EPA's FREE "Protect Your Family From Lead in Your Home" (PYF) pamphlet provides valuable information about how lead enters a child's body, the devastating health effects it can cause, and suggestions for simple steps to protect yourself from lead hazards. The EPA has updated its lead pamphlet to include the new dust-lead hazard standards that were effective Jan. 6, 2020. These standards are referenced on page 6 of the brochure. The EPA does not require users to discard older versions of this brochure; however, in order to ensure that the updated information is provided to homeowners and families, the EPA has provided a PYF supplement page that should also be provided if using prior versions of the

PYF document. If the brochures you provide are not dated January 2020, please also provide the supplement page, which can be found [here](#). The PYF brochure and several other helpful educational resources are available to be ordered, free of charge, from the [ISDH Lead and Healthy Homes Division](#). Availability and quantity may be limited.

State Healthy Housing Fact Sheets

Statistically, the home is the most dangerous place for U.S. families. Nearly six million families live in housing rivaling that of developing countries, with broken heating and plumbing, crumbling foundations, and leaking roofs. Millions more in all 50 states live in housing with serious health and safety hazards, including mold, exposed wiring, radon, toxic chemicals, and missing smoke detectors. [The National Center for Healthy Housing](#) provides fact sheets for each of the 50 states, plus Puerto Rico, Guam, the District of Columbia, and the U.S. as a whole. Each sheet contains embedded hyperlinks to the reference source materials used for the healthy housing-related facts presented in each sheet. For example, according to the 2019 sheets, in the U.S. each year **35 million U.S. homes** place their occupants at risk, **270,000 children** aged 1-5 years old have elevated blood lead levels, and **31,000 older adults** die from unintentional falls. [Indiana's 2019 Healthy Housing Fact Sheet](#) also provides valuable information on topics related to unhealthy conditions found in hazardous housing in Indiana and a list of federal programs and grants that provide funding in the state to support programs and services. 2020 Fact Sheets coming soon.

Case Management Tip

NBS, Transitions, and Dedication

The [American Public Health Association](#) states that “public health promotes and protects the health of people and the communities where they live, learn, work and play. While a doctor treats people who are sick, those of us working in public health try to prevent people from getting sick or injured in the first place. We also promote wellness by encouraging healthy behaviors.” Your hard work and continued focus on lead cases is greatly appreciated, despite the additional work that has been added to your routine responsibilities during this unusual time! It is a statement of your dedication to public health and the health and safety of the children in our county.

On Feb. 3, 2020, the new **NBS Lead Case Management Module** was officially launched statewide and now functions as the required avenue for receiving and documenting all lead lab and case management activities provided to children with elevated blood-lead levels. Transitioning to the new system has not been without its challenges, and we would like to thank all the PHNs/case managers who have jumped into using the new NBS module feet first, helping us to identify and correct some of the kinks in the system. Because NBS is the required case management system, all PHNs/case managers should be using it to document and report all activities.

Important Reminders...

1. The Lead program uses “Notifications” in a different way as compared to other diseases and conditions in NBS. **A Notification will be created by the LHD and**

sent to ISDH multiple times for each patient throughout the period that the case is open, rather than only when closing a case, as is done for other diseases and conditions in NBS. See the [Indiana NBS Lead Case Management Module User Guide](#) and the newly added single-page reference document [“When Do I Submit a “Notification”?](#) for more information about when and how Notifications are to be sent.

2. Notifications only need to be sent to ISDH for activities related to children who have or have had a BLL of 10 µg/dL or higher. They do not need to be sent for children with BLLs in the 5-9.9 µg/dL range.
3. The Lead program uses the Documents Requiring Review (DRR) queue of NBS in a slightly different way than the other diseases and conditions using NBS. Because all blood lead labs are being reported through the DRR, it is very important that PHNs/case managers **DO** open and review the DRR queue **daily** and appropriately clear any lead labs that may be found. Each lab should be either associated with a case investigation that is already open or used to open a new case investigation as needed.

Contact Teresa Kirby, tkirby@isdh.in.gov, 317-233-8606, or Lyland Murphy Ward, lmurphyward@isdh.in.gov, 317-233-1356, for questions and assistance.

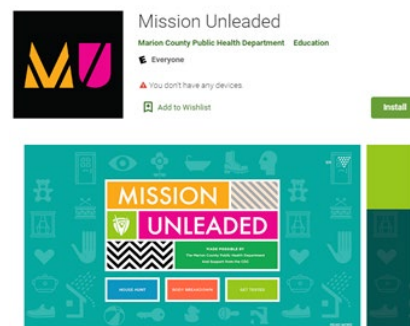
Risk Assessment Tip

The health and safety of all parties involved with in-home field activities, including risk assessments and home visits, is a priority, especially during this time of quarantine and caution as a result of COVID-19. As you are reviewing your policies and

procedures, consider this information when developing your guidance.

Q: When should risk assessors be going back into homes to complete risk assessments?

A: Risk assessments previously delayed due to COVID or those where only exterior assessments were completed should be scheduled for full (interior and exterior) completion as soon as possible. All LHDs have been provided PPE by ISDH in sufficient quantities to conduct these activities safely. This includes masking and *Continued on next page*



The Lead Poisoning Prevention Program of the Marion County Public Health Department has developed a lead education app that helps the user identify common household lead hazards and how lead impacts the body. The interactive tool uses augmented reality to engage the user in fun and creative ways. Entering a house, the user is challenged to find all the lead hazards and, once located, is provided with information about the hazards and how those hazards can be mitigated, as well as the impact lead has on both children and adults. The Mission Unleaded app can be accessed in English, Spanish, and Burmese in the Apple and Google Play Stores. Consider downloading and sharing, and possibly adding this option to your education resources.

Risk Assessment Tip

Continued from previous page
 glove wearing as appropriate. Risk assessors should continue to try to minimize direct contact with families as much as possible, relying on phone and written communication to gain background information, conduct interviews, and deliver report results. Homes with members who are under quarantine or who are experiencing symptoms similar to those of COVID-19 may be delayed to ensure that household members have time to secure testing or wait out the 10-day quarantine period.

Q: What are minimum PPE requirements for LHD/ISDH staff entering homes?

- A: ■ Mask, gloves, and hand sanitizer
- Request adult homeowners wear a mask
 - If available: take masks for family to wear while in the house during the risk assessment if they don't have one

Q: What if local/municipal guidance does not allow for a return to in-home assessments?

A: Please notify ISDH of the restriction, including the affected region, conflicting guidance, and affected home(s).

Q: What should be considered when scheduling appointments?

- A: ■ Ask if anyone has been symptomatic or been tested positive within the past 7-10 days.

- Ask about household members to wear a mask during the inspection. Determine your comfort level with conducting the inspection if household members refuse.
- Assess whether your staff/agency would be comfortable with conducting an inspection if the family would prefer to not be in the home during the inspection.

For questions and assistance, contact:

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Expand Your Expertise and Knowledge through the [2020 Virtual Conference on Lead and Healthy Housing](#). A great learning event that will provide you with over 30 conference sessions, **streaming live Aug. 31 – Sept. 11, 2020, and on demand through Oct. 31, 2020**. Your paid registration provides you with access during the live presentations, where you can interact with

presenters, as well as on-demand access after each of the live presentations has been completed. More details, including registration information, are available [here](#).

Cub Scout Activity Pin Recall



On July 1, 2020, the U.S. Consumer Product Safety Commission reported the recall of the Boy Scouts of America Cub Scout Outdoor Activity Pin. The pin's face and shaft contain levels of lead that exceed the federal lead content ban. Consumers should contact Boy Scouts of America at 800-323-0736 from 8 a.m. to 7 p.m. ET Monday through Friday or at www.scoutshop.org and click on "Product Recall" for more information, or take recalled pins to any Boy Scouts of America retail store for a full refund.

BOLO:

ISDH is in need of your assistance in gathering some information concerning your experiences with Medicaid billing practices, specifically information about LHD processes for billing Medicaid, if any obstacles are being encountered, and if claims are being paid by Medicaid. During the month of August, be on the lookout for an email from Sarah Newman that will contain a survey for you to complete as a way to provide your feedback. Participation in the survey will be very much appreciated.

MO (Missed Opportunity) Represents the Difference Between the Number of Claims Generated and the Number of Tests Reported to ISDH

	2019 QUARTER 1 (JAN. – MARCH)				2020 QUARTER 1 (JAN. – MARCH)			
	Medicaid Lead Claims	BL Tests Reported to the State	MO	MO Rate	Medicaid Lead Claims	BL Tests Reported to the State	MO	MO Rate
ANTHEM	4939	1883	3056	61.87%	5784	1571	4213	72.84%
CARESOURCE	2458	1045	1413	57.49%	1834	506	1328	72.41%
FFS	715	206	509	71.19%	689	130	559	81.13%
MDWISE	3662	1407	2255	61.58%	3790	1047	2743	72.37%
MANAGED HEALTH SERVICES	5639	1538	4101	72.73%	3873	972	2901	74.90%