By Senator Miller

18-1079-05 See HB 495

1	A bill to be entitled
2	An act relating to the Lead Poisoning
3	Prevention Screening and Education Act;
4	providing a popular name; providing legislative
5	findings; providing definitions; providing for
6	the establishment of a statewide comprehensive
7	educational program on lead poisoning
8	prevention; providing for a public information
9	initiative; providing for distribution of
10	literature about childhood lead poisoning;
11	requiring the establishment of a screening
12	program for early identification of persons at
13	risk of elevated levels of lead in the blood;
14	providing for screening of children; providing
15	for prioritization of screening; providing for
16	the maintenance of records of screenings;
17	providing for reporting of cases of lead
18	poisoning; providing an effective date.
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20	Be It Enacted by the Legislature of the State of Florida:
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22	Section 1. Popular nameThis act may be cited as the
23	"Lead Poisoning Prevention Screening and Education Act."
24	Section 2. <u>Legislative findings</u>
25	(1) Nearly 300,000 American children may have levels
26	of lead in their blood in excess of 10 micrograms per
27	deciliter (ug/dL). Unless prevented or treated, elevated
28	blood-lead levels in eqregious cases may result in impairment
29	of the ability to think, concentrate, and learn.
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1	(2) A significant cause of lead poisoning in children
2	is the ingestion of lead particles from deteriorating
3	lead-based paint in older, poorly maintained residences.
4	(3) Childhood lead poisoning can be prevented if
5	parents, property-owners, health professionals, and those who
6	work with young children are informed about the risks of
7	childhood lead poisoning and how to prevent it.
8	(4) Knowledge of lead-based-paint hazards, their
9	control, mitigation, abatement, and risk avoidance is not
10	sufficiently widespread.
11	(5) Most children who live in older homes and who
12	otherwise may be at risk for childhood lead poisoning are not
13	tested for the presence of elevated lead levels in their
14	blood.
15	(6) Testing for elevated lead levels in the blood can
16	lead to the mitigation or prevention of the harmful effects of
17	childhood lead poisoning and may also prevent similar injuries
18	to other children living in the same household.
19	Section 3. Definitions As used in this act, the
20	term:
21	(1) "Affected property" means a room or group of rooms
22	within a property constructed before January 1, 1960, or
23	within a property constructed between January 1, 1960, and
24	January 1, 1978, where the owner has actual knowledge of the
25	presence of lead-based paint, that form a single independent
26	habitable dwelling unit for occupation by one or more
27	individuals and that has living facilities with permanent
28	provisions for living, sleeping, eating, cooking, and
29	sanitation. Affected property does not include:
30	(a) An area not used for living, sleeping, eating,
31	cooking, or sanitation, such as an unfinished basement;

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(b) A unit within a hotel, motel, or similar seasonal 2 or transient facility, unless such unit is occupied by one or more persons at risk for a period exceeding 30 days; 3 4 (c) An area that is secured and inaccessible to 5 occupants; or 6 (d) A unit that is not offered for rent. 7 (2) "Dust-lead hazard" means surface dust in a residential dwelling or a facility occupied by a person at 8 risk which contains a mass-per-area concentration of lead 9 10 equal to or exceeding 40 uq/ft2 on floors or 250 uq/ft2 on interior windowsills based on wipe samples. 11 (3) "Elevated blood-lead level" means a quantity of 12 13 lead in whole venous blood, expressed in micrograms per deciliter (ug/dL), which exceeds 10 ug/dL or such other level 14 as specifically provided in this act. 15 (4) "Lead-based paint" means paint or other surface 16 17 coatings that contain lead equal to or exceeding 1.0 milligram 18 per square centimeter, 0.5 percent by weight, or 5,000 parts per million (ppm) by weight. 19 (5) "Lead-based-paint hazard" means paint-lead hazards 2.0 21 and dust-lead hazards. 22 (6) "Owner" means a person, firm, corporation, 23 nonprofit organization, partnership, government, quardian, conservator, receiver, trustee, executor, or other judicial 2.4 officer, or other entity which, alone or with others, owns, 2.5 holds, or controls the freehold or leasehold title or part of 2.6 27 the title to property, with or without actually possessing it. 2.8 The definition includes a vendee who possesses the title, but 29 does not include a mortgagee or an owner of a reversionary interest under a ground rent lease. The term includes any 30

authorized agent of the owner, including a property manager or 2 leasing agent. (7) "Paint-lead hazard" means any one of the 3 4 following: (a) Any lead-based paint on a friction surface that is 5 6 subject to abrasion and where the dust-lead levels on the 7 nearest horizontal surface underneath the friction surface, 8 such as the windowsill or floor, are equal to or greater than the dust-lead-hazard levels defined in subsection (2); 9 10 (b) Any damaged or otherwise deteriorated lead-based paint on an impact surface that is caused by impact from a 11 12 related building material, such as a door knob that knocks 13 into a wall or a door that knocks against its door frame; (c) Any chewable lead-based painted surface on which 14 there is evidence of teeth marks; or 15 (d) Any other deteriorated lead-based paint in or on 16 the exterior of any residential building or any facility 18 occupied by a person at risk. 19 (8) "Person at risk" means a child under the age of 6 years or a prequant woman who resides or regularly spends at 2.0 21 <u>least 24 hours per week in an affected property.</u> 22 (9) "Secretary" means the secretary of the Department 23 of Health or a designee chosen by the secretary to administer the Lead Poisoning Prevention Screening and Education Act. 2.4 (10) "Tenant" means the individual named as the lessee 25 in a lease, rental agreement, or occupancy agreement for a 26 2.7 dwelling unit. 2.8 Section 4. Educational programs. --(1) LEAD POISONING PREVENTION EDUCATIONAL PROGRAM 29 ESTABLISHED .-- In order to achieve the purposes of this act, a 30 statewide, multifaceted, ongoing educational program designed 31

to meet the needs of tenants, property owners, health care 2 providers, early childhood educators, care providers, and realtors is established. 3 4 (2) PUBLIC INFORMATION INITIATIVE. -- The Governor, in conjunction with the Secretary of Health and his or her 5 6 designee, shall sponsor a series of public service 7 announcements on radio, television, the Internet, and print media about the nature of lead-based-paint hazards, the 8 importance of standards for lead poisoning prevention in 9 10 properties, and the purposes and responsibilities set forth in this act. In developing and coordinating this public 11 12 information initiative, the sponsors shall seek the 13 participation and involvement of private industry organizations, including those involved in real estate, 14 15 insurance, mortgage banking, and pediatrics. (3) DISTRIBUTION OF LITERATURE ABOUT CHILDHOOD LEAD 16 POISONING. -- By January 1, 2006, the Secretary of Health or his or her designee shall develop culturally and linguistically 18 appropriate information pamphlets regarding childhood lead 19 poisoning, the importance of testing for elevated blood-lead 2.0 21 levels, prevention of childhood lead poisoning, treatment of 2.2 childhood lead poisoning, and where appropriate, the 23 requirements of this act. These information pamphlets shall be distributed to parents or the other legal quardians of 2.4 children 6 years of age or younger on the following occasions: 2.5 (a) By the owner of any affected property or his or 2.6 2.7 her agents or employees at the time of the initiation of a 2.8 rental agreement with a new tenant whose household includes a person at risk or any other woman of childbearing age. 29 30 (b) By a health care provider at the time of a child's

birth and at the time of any childhood immunization or

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vaccination unless it is established that such information 2 pamphlet has been provided previously to the parent or legal quardian by the health care provider within the prior 12 3 4 months. 5 (c) By the owner or operator of any child care 6 facility or preschool or kindergarten class on or before 7 October 15 of the calendar year. 8 Section 5. <u>Screening program.--</u> 9 (1) The secretary shall establish a program for early 10 identification of persons at risk of having elevated blood-lead levels. Such program shall systematically screen 11 12 children under 6 years of age in the target populations 13 identified in subsection (2) for the presence of elevated blood-lead levels. Children within the specified target 14 populations shall be screened with a blood-lead test at age 12 15 months and age 24 months, or between the ages of 36 months and 16 72 months if they have not previously been screened. The 18 secretary shall, after consultation with recognized professional medical groups and such other sources as the 19 secretary deems appropriate, promulgate rules establishing: 2.0 21 (a) The means by which and the intervals at which such 2.2 children under 6 years of age shall be screened for lead 23 poisoning and elevated blood-lead levels. (b) Guidelines for the medical followup on children 2.4 found to have elevated blood-lead levels. 2.5 (2) In developing screening programs to identify 26 2.7 persons at risk with elevated blood-lead levels, priority 2.8 shall be given to persons within the following categories: (a) All children enrolled in the Medicaid program at 29 ages 12 months and 24 months, or between the ages of 36 months 30 and 72 months if they have not previously been screened. 31

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(b) Children under the age of 6 years exhibiting 2 delayed cognitive development or other symptoms of childhood 3 lead poisoning. 4 (c) Persons at risk residing in the same household, or recently residing in the same household, as another person at 5 6 risk with a blood-lead level of 10 ug/dL or greater. 7 (d) Persons at risk residing, or who have recently 8 resided, in buildings or geographical areas in which significant numbers of cases of lead poisoning or elevated 9 10 blood-lead levels have recently been reported. (e) Persons at risk residing, or who have recently 11 12 resided, in an affected property contained in a building that 13 during the preceding 3 years has been subject to enforcement for violations of lead-poisoning-prevention statutes, 14 15 ordinances, rules, or regulations as specified by the 16 secretary. 17 (f) Persons at risk residing, or who have recently 18 resided, in a room or group of rooms contained in a building whose owner also owns a building containing affected 19 properties which during the preceding 3 years has been subject 2.0 21 to an enforcement action for a violation of lead poisoning prevention statutes, ordinances, rules, or regulations. 2.2 23 (q) Persons at risk residing in other buildings or geographical areas in which the secretary reasonably 2.4 determines there to be a significant risk of affected 2.5 individuals having a blood-lead level of 10 ug/dL or greater. 2.6 27 (3) The secretary shall maintain comprehensive records 2.8 of all screenings conducted pursuant to this section. Such records shall be indexed geographically and by owner in order 29

to determine the location of areas of relatively high

incidence of lead poisoning and other elevated blood-lead <u>levels.</u> All cases or probable cases of lead poisoning found in the course of screenings conducted pursuant to this section shall be reported to the affected individual, to his or her parent or legal quardian if he or she is a minor, and to the secretary. Section 6. This act shall take effect July 1, 2005.