

By the Committee on Health and Human Services Appropriations;
and Senator Miller

603-2321-05

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 appropriation;

19 providing contingencies for appropriation;

20 providing effective dates.

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22 Be It Enacted by the Legislature of the State of Florida:

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24 Section 1. Popular name.--This act may be cited as the

25 "Lead Poisoning Prevention Screening and Education Act."

26 Section 2. Legislative findings.--

27 (1) Nearly 300,000 American children may have levels

28 of lead in their blood in excess of 10 micrograms per

29 deciliter (ug/dL). Unless prevented or treated, elevated

30 blood-lead levels in egregious cases may result in impairment

31 of the ability to think, concentrate, and learn.

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;

1 (b) A unit within a hotel, motel, or similar seasonal
2 or transient facility, unless such unit is occupied by one or
3 more persons at risk for a period exceeding 30 days;

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
8 residential dwelling or a facility occupied by a person at
9 risk which contains a mass-per-area concentration of lead
10 equal to or exceeding 40 ug/ft² on floors or 250 ug/ft² on
11 interior windowsills based on wipe samples.

12 (3) "Elevated blood-lead level" means a quantity of
13 lead in whole venous blood, expressed in micrograms per
14 deciliter (ug/dL), which exceeds 10 ug/dL or such other level
15 as specifically provided in this act.

16 (4) "Lead-based paint" means paint or other surface
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
19 per million (ppm) by weight.

20 (5) "Lead-based-paint hazard" means paint-lead hazards
21 and dust-lead hazards.

22 (6) "Owner" means a person, firm, corporation,
23 nonprofit organization, partnership, government, guardian,
24 conservator, receiver, trustee, executor, or other judicial
25 officer, or other entity which, alone or with others, owns,
26 holds, or controls the freehold or leasehold title or part of
27 the title to property, with or without actually possessing it.
28 The definition includes a vendee who possesses the title, but
29 does not include a mortgagee or an owner of a reversionary
30 interest under a ground rent lease. The term includes any

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1 authorized agent of the owner, including a property manager or
2 leasing agent.

3 (7) "Paint-lead hazard" means any one of the
4 following:

5 (a) Any lead-based paint on a friction surface that is
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
9 the dust-lead-hazard levels defined in subsection (2);

10 (b) Any damaged or otherwise deteriorated lead-based
11 paint on an impact surface that is caused by impact from a
12 related building material, such as a door knob that knocks
13 into a wall or a door that knocks against its door frame;

14 (c) Any chewable lead-based painted surface on which
15 there is evidence of teeth marks; or

16 (d) Any other deteriorated lead-based paint in or on
17 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
20 years or a pregnant woman who resides or regularly spends at
21 least 24 hours per week in an affected property.

22 (9) "Secretary" means the secretary of the Department
23 of Health or a designee chosen by the secretary to administer
24 the Lead Poisoning Prevention Screening and Education Act.

25 (10) "Tenant" means the individual named as the lessee
26 in a lease, rental agreement, or occupancy agreement for a
27 dwelling unit.

28 Section 4. Educational programs.--

29 (1) LEAD POISONING PREVENTION EDUCATIONAL PROGRAM
30 ESTABLISHED.--In order to achieve the purposes of this act, a
31 statewide, multifaceted, ongoing educational program designed

1 to meet the needs of tenants, property owners, health care
2 providers, early childhood educators, care providers, and
3 realtors is established.

4 (2) PUBLIC INFORMATION INITIATIVE.--The Governor, in
5 conjunction with the Secretary of Health and his or her
6 designee, shall sponsor a series of public service
7 announcements on radio, television, the Internet, and print
8 media about the nature of lead-based-paint hazards, the
9 importance of standards for lead poisoning prevention in
10 properties, and the purposes and responsibilities set forth in
11 this act. In developing and coordinating this public
12 information initiative, the sponsors shall seek the
13 participation and involvement of private industry
14 organizations, including those involved in real estate,
15 insurance, mortgage banking, and pediatrics.

16 (3) DISTRIBUTION OF LITERATURE ABOUT CHILDHOOD LEAD
17 POISONING.--By January 1, 2006, the Secretary of Health or his
18 or her designee shall develop culturally and linguistically
19 appropriate information pamphlets regarding childhood lead
20 poisoning, the importance of testing for elevated blood-lead
21 levels, prevention of childhood lead poisoning, treatment of
22 childhood lead poisoning, and where appropriate, the
23 requirements of this act. These information pamphlets shall be
24 distributed to parents or the other legal guardians of
25 children 6 years of age or younger on the following occasions:

26 (a) By a health care provider at the time of a child's
27 birth and at the time of any childhood immunization or
28 vaccination unless it is established that such information
29 pamphlet has been provided previously to the parent or legal
30 guardian by the health care provider within the prior 12
31 months.

1 (b) By the owner or operator of any child care
2 facility or preschool or kindergarten class on or before
3 October 15 of the calendar year.

4 Section 5. Screening program.--

5 (1) The secretary shall establish a program for early
6 identification of persons at risk of having elevated
7 blood-lead levels. Such program shall systematically screen
8 children under 6 years of age in the target populations
9 identified in subsection (2) for the presence of elevated
10 blood-lead levels. Children within the specified target
11 populations shall be screened with a blood-lead test at age 12
12 months and age 24 months, or between the ages of 36 months and
13 72 months if they have not previously been screened. The
14 secretary shall, after consultation with recognized
15 professional medical groups and such other sources as the
16 secretary deems appropriate, promulgate rules establishing:

17 (a) The means by which and the intervals at which such
18 children under 6 years of age shall be screened for lead
19 poisoning and elevated blood-lead levels.

20 (b) Guidelines for the medical followup on children
21 found to have elevated blood-lead levels.

22 (2) In developing screening programs to identify
23 persons at risk with elevated blood-lead levels, priority
24 shall be given to persons within the following categories:

25 (a) All children enrolled in the Medicaid program at
26 ages 12 months and 24 months, or between the ages of 36 months
27 and 72 months if they have not previously been screened.

28 (b) Children under the age of 6 years exhibiting
29 delayed cognitive development or other symptoms of childhood
30 lead poisoning.

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1 (c) Persons at risk residing in the same household, or
2 recently residing in the same household, as another person at
3 risk with a blood-lead level of 10 ug/dL or greater.

4 (d) Persons at risk residing, or who have recently
5 resided, in buildings or geographical areas in which
6 significant numbers of cases of lead poisoning or elevated
7 blood-lead levels have recently been reported.

8 (e) Persons at risk residing, or who have recently
9 resided, in an affected property contained in a building that
10 during the preceding 3 years has been subject to enforcement
11 for violations of lead-poisoning-prevention statutes,
12 ordinances, rules, or regulations as specified by the
13 secretary.

14 (f) Persons at risk residing, or who have recently
15 resided, in a room or group of rooms contained in a building
16 whose owner also owns a building containing affected
17 properties which during the preceding 3 years has been subject
18 to an enforcement action for a violation of lead poisoning
19 prevention statutes, ordinances, rules, or regulations.

20 (g) Persons at risk residing in other buildings or
21 geographical areas in which the secretary reasonably
22 determines there to be a significant risk of affected
23 individuals having a blood-lead level of 10 ug/dL or greater.

24 (3) The secretary shall maintain comprehensive records
25 of all screenings conducted pursuant to this section. Such
26 records shall be indexed geographically and by owner in order
27 to determine the location of areas of relatively high
28 incidence of lead poisoning and other elevated blood-lead
29 levels.

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1 All cases or probable cases of lead poisoning found in the
2 course of screenings conducted pursuant to this section shall
3 be reported to the affected individual, to his or her parent
4 or legal guardian if he or she is a minor, and to the
5 secretary.

6 Section 6. For the 2005-2006 fiscal year, \$308,000 in
7 recurring general revenue funds is appropriated to the
8 Department of Health for the purposes of this act. For the
9 2005-2006 fiscal year, \$1 million is appropriated to the
10 Administrative Trust Fund in the Department of Health for the
11 purposes of this act.

12 Section 7. Sections 4, 5, and 6 of this act shall take
13 effect only upon the Department of Health receiving a federal
14 lead poisoning prevention grant of \$1 million or greater.

15 Section 8. Except as otherwise expressly provided in
16 this act, this act shall take effect, July 1, 2005.

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18 STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
19 COMMITTEE SUBSTITUTE FOR
20 Senate Bill 1498

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22 - Appropriates \$308,000 in recurring general revenue funds
to the Department of Health.
23 - Appropriates \$1 million to the Administrative Trust Fund
24 in the Department of Health.
25 - Specifies that certain sections take effect only upon the
26 Department of Health receiving a federal lead poisoning
prevention grant of \$1 million or greater.
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