# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATA AT A GLANCE</td>
<td>1</td>
</tr>
<tr>
<td>INTRODUCTION</td>
<td>2</td>
</tr>
<tr>
<td>OHIO LEAD ADVISORY COUNCIL (OLAC)</td>
<td>3</td>
</tr>
<tr>
<td>2018 KEY ACCOMPLISHMENTS</td>
<td>4</td>
</tr>
<tr>
<td>2017 OHIO CHILDHOOD LEAD TESTING STATISTICS</td>
<td>7</td>
</tr>
</tbody>
</table>
DATA AT A GLANCE

169,547 children were tested for lead poisoning in Ohio.

1,013 individuals and 344 firms were certified for lead-based paint activities by the end of Federal Fiscal Year 2017.

There were 4,707 children with confirmed blood lead levels of 5 μg/dL** or greater. This was 2.78% of the total tested population.

778 notifications for lead abatement projects were received during Federal Fiscal Year 2017.

There were 1,394 children with confirmed blood lead levels of 10 μg/dL** or greater. This was 0.82% of the total tested population.

**Micrograms per deciliter
There is no safe level of lead in the body. The primary source of lead exposure in children with elevated lead levels is deteriorated lead-based paint (dust). Other potential lead exposure sources include soil, water, and consumer products.

The Ohio Department of Health (ODH) has administered a comprehensive statewide lead poisoning prevention program since 1991. The Ohio Lead Advisory Council (OLAC) provides the Director of Health with advice regarding the policies the childhood lead poisoning prevention program should emphasize, preferred methods of financing the program, and any other matter relevant to the program’s operation.

ODH’s lead program provides guidelines on lead testing and medical management, educates healthcare providers, conducts surveillance and case management, conducts public health lead investigations (either directly or through local delegated boards of health), licenses the professional workforce, approves lead laboratories, and provides compliance assistance and monitoring. ODH receives funding for lead poisoning prevention from the U.S. Centers for Disease Control and Prevention, U.S. Department of Housing and Urban Development, U.S. Environmental Protection Agency, Ohio Development Services Agency, Ohio Housing Finance Agency and General Revenue Funds.

When a child under six years of age is identified with an elevated blood lead level (lead poisoning), ODH or its delegated authority conducts a public health lead investigation to determine the probable source of lead exposure. If an investigation identifies an existing lead hazard, a Lead Hazard Control Order is issued ordering the property owner to control the lead hazard. If a property owner refuses to control an identified lead hazard, an order to vacate the property is issued, declaring it unsafe for human occupation, especially for children younger than 6 years of age and pregnant women.

In 2018, the ODH Director of Health delegated the authority to conduct public health lead investigations to the following local health jurisdictions in accordance with Ohio Revised Code 3472.34:

- Cincinnati Health Department
- Cleveland Department of Public Health
- Columbus Public Health
- Cuyahoga County Board of Health
- Franklin County Public Health
- Hamilton County General Health District
- Lorain County General Health District
- Public Health-Dayton & Montgomery County
- Summit County Public Health
- Toledo-Lucas County Health Department
- Zanesville-Muskingum County Health Department

Visit www.cdc.gov/nceh/lead to learn more
The Ohio Lead Advisory Council (OLAC) was established within the Ohio Revised Code Chapter 3742.32. OLAC is tasked with providing the Director of Health with advice regarding the policies the childhood lead poisoning prevention program should emphasize, preferred methods of financing the program, and any other matter relevant to the program’s operation.

The mission of OLAC is to engage all stakeholders in the process of actively working toward the elimination of all sources of lead poisoning in the state. Stakeholders include state agencies, local public health jurisdictions, housing agencies, property owners, health care providers, and advocates for children and lead-safe housing.

OLAC consists of nine appointed members representing the following agencies and organizations:

- Ohio Department of Medicaid
- Ohio Department of Job and Family Services, Bureau of Child Care
- Ohio Environmental Protection Agency
- Ohio Department of Education
- Ohio Development Services Agency
- Ohio Apartment Owners' Association
- Ohio Healthy Homes Network
- Ohio Environmental Health Association
- Ohio representative of the American Coatings Association

OLAC meets quarterly and works on activities focused on eliminating childhood lead poisoning as a public health issue. In 2018, the group met on January 25, April 26, July 12 and October 11.

Pursuant to the bylaws, OLAC has two elected positions. The 2018 Chairperson was Joshua Niese, former Ohio Environmental Health Association’s (OEHA) representative, and Vice Chairperson was Patricia Barnes, Ohio Healthy Homes Network (OHHN) representative. Partly into the year, Joshua Niese was no longer with the OEHA, resulting in him stepping down from his position as the 2018 Chairperson, therefore, Vice Chairperson Patricia Barnes assumed the role as Chairperson. At the last quarterly meeting of the calendar year (October 11), elections were held for 2019, and OHHN representative Patricia Barnes was elected Chairperson, and OEHA representative Niki Lemin was elected Vice Chairperson.
2018 KEY ACCOMPLISHMENTS

Continued working with ODH’s delegated local health departments to strengthen efforts to investigate and close child lead poisoning cases and ensure that Ohio’s children are not living in housing with known lead hazards:

Expanded the definition of a “public health lead investigator” to assist delegated local boards of health with recruiting and hiring qualified public health lead investigators. The previous regulation required an individual who conducts a public health lead investigation to be licensed as a lead risk assessor in Ohio and be a registered sanitarian or sanitarian-in-training. The revised rule still requires an individual to be licensed as a lead risk assessor, but he or she may take a course prescribed by the Director of Health and complete a 40-hour internship in lieu of being a registered sanitarian or sanitarian-in-training. The revised rule also allows an individual who is a registered nurse or a certified health education specialist and has attended ODH case management training to conduct public health lead investigations for children under six years of age whose blood lead level is between 5 μg/dL and less than 10 μg/dL.

Made blood lead testing data available in the Ohio Public Health Data Warehouse on the ODH website. The purpose of this Data Warehouse module is to make childhood blood lead level data reported to the ODH more accessible to public health professionals and the general public. The data consists of blood lead levels for Ohio children under 6 years of age. This section of the warehouse contains both tables and visualizations of the data. The list is updated daily and is available at http://publicapps.odh.ohio.gov/EDW/DataCatalog.

Promoted April’s Healthy Homes Awareness Month (HHAM). The purpose of HHAM is to provide local health jurisdictions the opportunity to educate and raise awareness in their communities about the benefits of having a lead safe and healthy home. During HHAM 2018, ODH awarded 15 local health jurisdictions up to $10,000 each to increase public awareness about lead poisoning prevention and the tenants of a healthy home (Keep It: Dry, Clean, Safe, Well-Ventilated, Pest Free, Contaminant Free and Well Maintained). The majority of HHAM activities focused on public outreach through billboards, banners, radio, television, digital advertising, social media and local public transportation advertising to disseminate educational messages about lead poisoning prevention and healthy homes. Several local health jurisdictions also pursued in-person outreach, which included attending health fairs, hosting trainings, hosting community meetings, providing materials to daycare centers and WIC clinics. In addition, some local health jurisdictions visited physicians’ offices and provided staff with materials focused on increasing awareness and knowledge about childhood lead poisoning and increasing blood lead testing of at risk children.
Increased public awareness about the dangers of lead exposure and the importance of child blood lead testing through a public awareness campaign targeting parents and guardians of children most at risk for lead exposure living in high-risk ZIP Codes. The $200,000 campaign utilized billboards, social media, transit and radio advertising, and ran from mid-September to the beginning November, including a heavy rotation during National Lead Poisoning Prevention Week (October 21-27, 2018).

Received funding from the Centers for Disease Control and Prevention (CDC) to support childhood lead surveillance and other lead poisoning prevention and educational activities. CDC awarded $600,705 for the project period from September 30, 2018 – September 29, 2019 and 600,705 from September 30, 2019 – September 29, 2020.

Continued work on the $3,231,610 Lead-Based Paint Hazard Control grant that was awarded by the U.S. Department of Housing and Urban Development for grant period November 2, 2015 – November 1, 2018. The Ohio Development Services Agency’s Housing Trust Fund has dedicated $100,000 and the Ohio Housing Finance Agency has dedicated $200,000 to serve as match funds for the grant. As of November 2018, a total of 192 properties have been made lead-safe since the grant started.

Collaborated with Ohio Department of Medicaid (ODM) to start a statewide lead abatement project. In December 2017, the Centers for Medicare & Medicaid Services approved a State Plan Amendment that permits Ohio to implement a health services initiative utilizing State Children’s Health Insurance (SCHIP) funds to provide lead abatement services in the homes of low-income children and pregnant women. ODH and ODM will prioritize services to property owners and families whose properties are subject to lead hazard control orders issued by ODH or one of its delegated boards of health. These prioritized properties have undergone a thorough lead investigation and lead risk assessment which has identified hazards contributing to an eligible child’s elevated blood lead level of 10 micrograms/deciliter or higher. In 2018, ODH has referred 159 properties, and completed abatement on 6 properties.

Began developing an online lead-safe rental housing registry in collaboration with the Ohio Housing Finance Agency and its existing Ohio Housing Locator website (https://www.ohiohousinglocator.org/). The rental locator can be used to search for affordable and accessible rental housing located throughout Ohio. “Lead-safe” will be added to the rental locator’s existing filtering criteria. In order for a rental unit to be listed as “lead-safe” in the rental locator, property owners must demonstrate that lead-safe maintenance practices and dust sampling are performed by an individual who has successfully completed a training program approved by ODH.
Awarded a grant for $748,514 from the U.S. Environmental Protection Agency to administer and enforce its authorized lead accreditation and certification program. The grant period is for Federal Fiscal Years 2017 and 2018 (October 1, 2016 – September 30, 2018). ODH received 845 original lead abatement project notifications and conducted 258 on-site inspections of such projects during the second year of the grant. There were 1,016 individuals and 344 firms certified by ODH for lead-based paint activities at the end of Federal Fiscal Year 2017.

Contracted with the University of Cincinnati to complete an evaluation of the Pediatric Lead Assessment Network Education Training (PLANET). PLANET was originally developed by ODH in 2000 to increase health care provider knowledge of childhood lead poisoning and the importance of blood lead testing. In 2007, PLANET was evaluated to determine the influence of PLANET training on physician lead testing rates and to assess the PLANET program. The evaluation recommended an ongoing, thorough evaluation of the PLANET program, modifications to the delivery of PLANET, and the provision of additional tools/mechanisms related to lead testing and lead poisoning prevention education. In response to these recommendations, the PLANET material was condensed into an office-based intervention flipchart. This most recent evaluation of PLANET focused on validating PLANET’s effectiveness as an educational tool for healthcare providers. Based on the evaluation results ODH plans to develop a plan for a statewide dissemination/training to health care professionals.

The Lead Licensure program provided a memo to all approved lead training providers outlining topics to be emphasized during initial and refresher training courses. These areas of emphasis were pinpointed during record audits performed by Lead Licensure staff. Additionally, ODH requested that the training providers review with the regulated community that one criteria used to determine which licensee’s records are audited will be their compliance, or lack thereof, related to the lead monthly summary reporting requirements.
In 2017 (the most recent finalized data available), 169,547 Ohio children under age 6 received a blood lead screening test, a 4.5 percent increase compared to the 162,185 children tested in 2016. The distribution of tests by blood lead level is depicted in Table 1. Ohio’s threshold for an elevated blood lead level was updated in November 2014 from 10 micrograms per deciliter (μg/dL) to 5 μg/dL based on new guidance from the Centers for Disease Control and Prevention (CDC) Advisory Council on Lead Poisoning Prevention. All blood lead levels at or above this threshold are now considered to be elevated blood lead levels. In 2017, there were 1,394 Ohio children with confirmed blood lead levels of 10 μg/dL or greater (0.82% of the total tested population), and 4,707 children with confirmed blood lead levels of 5 μg/dL or greater (2.78% of the total tested population). This 2017 data shows a slight increase in the number of children with confirmed elevated blood lead levels compared to 2016 data. However, there was a significant increase in the total number of children tested. There was also a significant decrease in the number of children with unconfirmed elevated blood lead levels, from 1,848 in 2016 to 1,314 in 2017. This indicates that more children received appropriate follow-up lead testing in 2017, which enabled more children to receive appropriate case management services. All data obtained for the statistics on the following pages were obtained from the Healthy Housing and Lead Poisoning Surveillance System (HHLPSS) at ODH.

Blood Lead Testing Statistics for Ohio Children, 2017

Starting in November 2014, the State of Ohio required that all screening blood lead levels of 5 μg/dL or greater be confirmed by a venous blood draw, consistent with the new definition of an elevated blood lead level and the body of scientific literature demonstrating adverse health effects at lower blood lead levels. This new definition significantly increases the prevalence of children considered to be lead poisoned in Ohio.

Table 1

<table>
<thead>
<tr>
<th>State of Ohio</th>
<th>Total Children Tested</th>
<th>0–4 μg/dL</th>
<th>5–9 μg/dL</th>
<th>10–44 μg/dL</th>
<th>≥45 μg/dL</th>
<th>Total ≥5 μg/dL</th>
<th>% Tested with ≥5 μg/dL</th>
<th>Total ≥10 μg/dL</th>
<th>% Tested with ≥10 μg/dL</th>
<th>5–9 μg/dL</th>
<th>≥10 μg/dL</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL</td>
<td>169,547</td>
<td>163,326</td>
<td>3,313</td>
<td>1,371</td>
<td>23</td>
<td>4,707</td>
<td>2.78%</td>
<td>1,394</td>
<td>0.82%</td>
<td>1,314</td>
<td>200</td>
</tr>
</tbody>
</table>

i. The table above contains data for children less than 72 months (6 years) of age at the time of test.
ii. Blood lead levels reflect the highest confirmed test if a confirmed test exists for the child or the highest test for the year otherwise.
iii. Unconfirmed blood lead levels are defined as tests for children who had a capillary test of 5 μg/dL or greater and did not receive a confirmatory test.
The prevalence of confirmed blood lead levels ≥10 μg/dL is a measure of the proportion of children tested less than 6 years of age who were identified to have confirmed blood lead levels ≥10 μg/dL in a calendar year. The figure shows a decline in the prevalence of children with blood lead levels ≥10 μg/dL from 8.7 percent in 1999 to approximately 0.8 percent in 2017. The observed prevalence of confirmed blood lead levels ≥10 μg/dL has remained consistent since 2013.

Note: Children tested for lead more than once in a calendar year were counted only once. Only the highest confirmed blood lead level was used for a child during the year if a confirmed test existed, or the highest test for the year otherwise.