



Connecticut Environmental Health Association

February 25, 2019

Testimony Presented Before the Public Health Committee

Re: House Bill Number 7133; An Act Concerning Blood Lead Level Requirements

Dear Committee Co-Chairpersons, Ranking Members of the Public Health Committee,

My name is Brian Falkner, I am the Lead and Housing Committee Chair for the Connecticut Environmental Health Association (CEHA). I am also a Registered Sanitarian in the State of Connecticut employed by the City of New Britain performing Lead inspections with fifteen years of experience. My colleagues and I are responsible state wide for the rapid response and enforcement of the lead statutes/regulations, for this reason I oppose HB 7133.

I believe the current regulations provide the necessary interventions between State of Connecticut DPH, Local Health, Pediatricians and Parents/Guardians. At this time local health departments provide case management services for children with blood levels equal to or greater than 5 micrograms per deciliter. This is including but not limited to education, site visits and dust wipe sampling.

Under the current regulation Local Health Departments are required to complete an epidemiological investigation including a comprehensive lead inspection when children are found to have a venous blood test that is equal to or greater than 20 micrograms per deciliter or two tests that are more than three months apart that are between 15-19 micrograms per deciliter. Health departments are required to respond within 5 days of notification to complete these inspections and services. The findings are provided to the landlord in the form of a legal notice and if the orders are not corrected the case is sent to housing court. Local Health Departments are providing these services with limited staff and resources.

The current regulations provide the necessary services to protect children. To bring the regulations to the proposed level, local health departments would require a significant increase in finances, staff members and equipment. For instance, during any typical year, the City of New Britain investigates up to ten childhood blood lead poisonings. The proposed action level of 5 micrograms per deciliter would increase mandated inspections to upwards of seventy cases annually. The burden to staff this increase in work would be shared by not only local health departments but the state laboratory and the court system where almost all of these types of enforcement actions end up because of challenging statutory time lines.

I fully support the vision behind this bill and its intent of reducing lead exposure to children. However with the limited staffing and funding, the progressive expectations of HB #7133 are too great to properly enforce.

Respectfully submitted,

Brian Falkner, R.S.