

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Jewel Mullen, M.D., M.P.H., M.P.A.
Commissioner

Dannel P. Malloy
Governor
Nancy Wyman
Lt. Governor

EHS Circular Letter #2015-16

Date: April 20, 2015

To: Directors of Health
Licensed Lead Consultants
Licensed Lead Consultant Contractors
Lead Training Providers

From: Francesca Provenzano, MPH, CHES, RS
Epidemiologist 4
Lead and Healthy Homes Program

Re: Lead Inspection and Testing Summary Form and E-Reports to DPH (only)

A fundamental function of the Connecticut Department of Public Health (DPH) Lead and Healthy Homes Program (L&HHP) is to prevent childhood lead poisoning. The notification of existing lead hazards in the home of a child provides the Local Director of Health, and L&HHP with an opportunity for early intervention. It also enables the local health department to begin a dialogue with a property owner, prior to a property owner attempting to inappropriately correct any identified lead-based paint hazards. To prevent lead poisoning, both state and local health rely upon the timely reporting of known lead-based paint hazards at the homes of young children.

This memorandum is written to emphasize the reporting requirements and appropriate use of the DPH *Lead Inspection and Testing Summary Form*. The form has been revised to make it consistent with the Childhood Lead Poisoning Prevention and Control (CLPPC) regulations (see attached). The latest form can also be found on the DPH website at:

www.ct.gov/dph/lib/dph/environmental_health/lead/pdf/leadinfm.pdf.

The CLPPC regulations, Section 19a-111-3(d) Report of Inspection requires that:

Whenever an inspector finds a toxic level of lead requiring abatement, the inspector shall report this to the owner, local director of health, and the commissioner. This report shall include a properly completed copy of the inspection form prescribed by the department and shall be postmarked and sent by certified mail or hand delivered by the end of the second working day following completion of the inspection....



Phone: (860) 509-7299 • Fax: (860) 509-7295 • VP: (860) 899-1611
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
www.ct.gov/dph

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Submitting the *Lead Inspection and Testing Summary Form* to the DPH Commissioner, Local Director of Health, and owner of a property is required when a DPH-certified lead inspector/risk assessor (or trained code enforcement official) finds a toxic level of lead requiring lead abatement. Lead abatement is routinely required:

- (1) When a child resides in a dwelling unit and defective lead-based surfaces on the interior, exterior, or common areas are identified by a DPH-certified lead inspector/risk assessor (or code enforcement official) utilizing accepted testing methods;
- (2) When a severely poisoned child resides in a dwelling unit, and lead-based chewable surfaces (whether or not that surface is defective), and lead-based movable parts of windows and surfaces that rub against movable parts of windows are identified by a DPH-certified lead inspector/risk assessor (or code enforcement official) utilizing accepted testing methods; or
- (3) When a child resides in a dwelling unit and the exterior soil or sand areas that are not covered by grass, sod, other live ground covers, wood chips, gravel, artificial turf, or similar covering are identified by a DPH-certified lead inspector/risk assessor (or code enforcement official) to contain lead concentrations in excess of 400 parts per million.

The L&HHP has noted that *Lead Inspection and Testing Summary Forms* have not been submitted for several Housing and Urban Development (HUD) Lead Hazard Control Grant lead abatement projects, or when a private consultant is hired to conduct an inspection on behalf of a local health department. If a DPH-certified lead inspector/risk assessor is hired to conduct a lead inspection on behalf of a municipality, then it is still the responsibility of the individual inspector to report his or her findings to the owner, Local Director of Health, and DPH.

A *Lead Inspection and Testing Summary Form* does not need to be submitted to the Local Director of Health or DPH, if the inspection is not associated with required lead abatement according to the CLPPC regulations. This may occur when a client requests lead abatement services for his or her property based on a presumption of lead-based paint, or when a client requests lead abatement services for his or her property where no children under the age of six reside, or when federal funding is used to rehabilitate a property and where there are no children in residence. For example, if a HUD-funded rehabilitation project exceeds \$25,000 for a single-family home, then HUD requires a full lead inspection, and lead abatement of the property, regardless of the age of occupants. Even though lead abatement is required by HUD on such a rehabilitation project, there may be no intersection with the CLPPC regulations (i.e., no children under the age of six are in residence). DPH licensure/certification requirements would still apply to such contractually-obligated lead abatement projects, but reporting inspection results would not be required.

It is expected that all DPH-certified lead inspectors/risk assessors complete all applicable fields on the *Lead Inspection and Testing Summary Form* accurately, and that it is reviewed thoroughly before submission to the local Director of Health, owner and DPH.

Effective immediately, inspectors may elect to submit the *Lead Inspection and Testing Summary Form* electronically to the DPH (only). The reporting method for the local Director of Health and owner of a property remains unchanged.

Lead Inspection and Testing Summary Forms may be submitted to the DPH at the following email address: DPH.LeadReports@ct.gov

Should you have any questions regarding the *Lead Inspection and Testing Summary Form* please contact the Lead and Healthy Homes Program at 860-509-7299. We look forward to your continued collaboration.

cc: Suzanne Blancaflor, MS, MPH, Chief, Environmental Health Section
Ellen Blaschinski, RS, MBA, Chief, Regulatory Services Branch