


General-- <http://www.healthypeople.gov/2020/topics-objectives/topic/environmental-health/objectives>

Environmental Risk Factors and Health		
Objectives Ph1	Evidence-Based Sources	
	Healthy People 2020 (HP2020)	Other (write in source)
Lead		
OBJECTIVE ENV-1 Reduce to less than 3% the prevalence rate of children less than 6 years of age with confirmed blood lead levels at or above the CDC reference value (5 µg/dL).		The evidence-based resources are listed below for each of the strategies.
<i>Advocacy and Policy</i>		
<ul style="list-style-type: none"> Introduce policy that requires medical care providers to give anticipatory guidance to parents for children whose blood lead levels are at or above 5 µg/dL. 	Done	<p><i>DPH Requirements and Guidance for Childhood Lead Screening by Health Care Professionals in Connecticut (2013):</i> http://www.ct.gov/dph/lib/dph/environmental_health/lead/pdf/provider_letter-3-2-13_commissioner_signature.pdf</p> <p>Connecticut General Statutes 19a-110, and 19a-111, RCSA 19a-111-1 to 19a-111-11</p> <p><i>Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention Report of the Advisory Committee on Childhood Lead Poisoning Prevention of the Centers for Disease Control and Prevention (2012):</i> http://www.cdc.gov/nceh/lead/acclpp/final_document_030712.pdf</p> <p><i>Lead Poisoning in Young Children: a statement by the CDC (2005):</i> (original blood lead testing guidance document issued by HHS)</p>

Environmental Risk Factors and Health

Objectives Ph1	Evidence-Based Sources	
	Healthy People 2020 (HP2020)	Other (write in source)
<ul style="list-style-type: none"> Leverage existing Lead Poisoning Prevention and Control funding allocated to communities for increasing targeted lead poisoning prevention efforts that have been proven effective. 		<p><i>Eliminating Childhood Lead Poisoning: a federal strategy targeting lead paint hazards (2000):</i> http://www.cdc.gov/nceh/lead/about/fedstrategy2000.pdf</p> <p><i>40 CFR 745 Toxic Substances Control Act- <u>LEAD-BASED PAINT POISONING PREVENTION IN CERTAIN RESIDENTIAL STRUCTURES</u></i></p>
<i>Education and Training</i>		
<ul style="list-style-type: none"> Provide educational materials about reducing exposure to lead hazards to high risk families with children less than 6 years of age. 		<p><i>Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention Report of the Advisory Committee on Childhood Lead Poisoning Prevention of the Centers for Disease Control and Prevention (p. 32-xx, 2012):</i> http://www.cdc.gov/nceh/lead/acclpp/final_document_030712.pdf</p> <p><i>“Educate families, service providers, advocates, and public officials on primary prevention of lead exposure in homes and other child-occupied facilities, so that lead hazards are eliminated before children are exposed.”</i></p> <p><i>CGS 19a-111</i></p>

Environmental Risk Factors and Health

Objectives 	Evidence-Based Sources	
	Healthy People 2020 (HP2020)	Other (write in source)
<i>Partnership and Collaboration</i>		
<ul style="list-style-type: none"> Utilize existing coalitions and collaborations to develop programs to target all children less than 6 years of age and highest risk populations in urban areas. 		<p>Universal blood lead screening CGS section 19a-111g</p> <p>CGS 19a-111j: Financial assistance to local health departments for lead poisoning prevention efforts. The Community Tool Box (http://ctb.ku.edu). (Offers practical guidance on promoting community health. Tool kits provide outlines, examples, and links to tools for topics such as community assessment and evaluation.)</p> <p>CGS 19a-111a (a) Lead Poisoning Prevention Program: CT DPH “required to convene a meeting of partners, and state agencies at least once annually in order to coordinate lead poisoning prevention efforts in this state.”</p>
<ul style="list-style-type: none"> Partner with health care professionals to increase their ability to identify, prevent, and reduce environmental health threats, including lead, via technical assistance visits to providers, outreach to hospitals, and course(s) on environmental risk factors for children at the university level, school nurses. 		<p>CGS 19a-110a. Regional Lead poisoning treatment centers (state budget line item)</p> <p>EPIC training program approved and available--for educating health care professionals on lead testing via technical assistance to providers</p> <p>CT DPH-SCSU Environmental Public Health Training Course</p> <p>CGS 20-474-482: Licensure, certification, training course provider approval for workforce</p>
<ul style="list-style-type: none"> Partner with health care professionals to establish and enhance case management activities to align with 2012 CDC recommendations for childhood lead poisoning prevention and control. 		<p><i>Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention Report of the Advisory Committee on Childhood Lead Poisoning Prevention of the Centers for Disease Control and Prevention (p. 32-xx, 2012):</i> http://www.cdc.gov/nceh/lead/acclpp/final_document_030712.pdf</p>

Environmental Risk Factors and Health

Objectives Ph1	Evidence-Based Sources	
	Healthy People 2020 (HP2020)	Other (write in source)
<ul style="list-style-type: none"> Partner with health care professionals to improve provider compliance with mandated lead testing requirements; increasing mandatory lead testing for all children at least 1 time per year until they reach 3 years of age. 		<p><i>Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention Report of the Advisory Committee on Childhood Lead Poisoning Prevention of the Centers for Disease Control and Prevention (p. 32-xx, 2012):</i> http://www.cdc.gov/nceh/lead/acclpp/final_document_030712.pdf</p> <p><i>DPH Requirements and Guidance for Childhood Lead Screening by Health Care Professionals in Connecticut (2013):</i> http://www.ct.gov/dph/lib/dph/environmental_health/lead/pdf/provider_letter-3-2-13_commissioner_signature.pdf</p>
<i>Planning & Development</i>		
<ul style="list-style-type: none"> Identify high risk areas (pre 1978 housing with low socio-economic status families) in communities, and develop a plan to reduce exposure to lead-based painted surfaces. 		<p><i>Eliminating Childhood Lead Poisoning: a federal strategy targeting lead paint hazards (2000):</i> http://www.cdc.gov/nceh/lead/about/fedstrategy2000.pdf</p> <p><i>Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention Report of the Advisory Committee on Childhood Lead Poisoning Prevention of the Centers for Disease Control and Prevention (p. 32-xx, 2012):</i> http://www.cdc.gov/nceh/lead/acclpp/final_document_030712.pdf</p>
<ul style="list-style-type: none"> Explore options for infrastructure/capacity to address lead poisoning, to address abatement or remediation issues effectively in a timely manner. 		<p>Too vague and the charge is to “explore” – should this be advocacy, or is the plan referencing timeliness of completion of lead abatement and remediation work in child-occupied facilities and homes, or funding for that work, or should the evidence-based practice be a study demonstrating all different methods?</p>

Environmental Risk Factors and Health

Objectives Ph1	Evidence-Based Sources	
	Healthy People 2020 (HP2020)	Other (write in source)
<i>Surveillance</i>		
<ul style="list-style-type: none"> Develop a program to conduct inspections on units in pre-1978 rental housing; exploring collaborations with HUD inspectors with Healthy Homes inspections. 		<p><i>Ten Effective Strategies for Preventing Childhood Lead Poisoning Through Code Enforcement, HUD (Revised April 25, 2002)-word document downloaded</i></p> <p><i>Title 10 federal laws (HUD, EPA, CPSC) pertain to all things lead- inspecting housing units, establishment of standards for ID'ing lead-based paint and lead-based paint hazards, criteria and definitions for inspection, risk assessment and other work practices, the framework for our nation's attempt to address lead hazards in pre-1978 units, rental housing, single-family housing, etc., and to promote healthy homes</i></p>

STEP 2: Are We Employing Evidence-Based Strategies?

Environmental Risk Factors and Health

Objective ENV-4 Reduce by 10% the average number of days/year the AQI exceeds 50 Ph1	Evidence-Based Sources	
	Healthy People 2020 (HP2020)	Other (write in source)
Strategies <i>Advocacy and Policy</i> Seek to limit the amount of air pollution transported into the state of Connecticut from upwind sources, through legal actions under the Clean Air Act and voluntary actions with other states.		EPA- Clean Air Act (CAA), Numerous state and citizen lawsuits and related court decisions (CT Attorney General)
Work with employers to promote telecommuting, electronic meetings, and other alternatives, to reduce the number of cars on the road on forecasted poor air quality days.		EPA, state and federal DOT
Advocate for municipalities to increase their use of electric vehicles for their fleets.		California Low Emission Vehicle Rules (Cal-LEV adopted by CT)
Develop and propose policy (or regulation) on banning outdoor wood burning (i.e., fireplaces, fire pits) and indoor wood burning stoves on forecasted poor air quality days. Exceptions would be for sole sources of heat in heating season.		EPA CAA, California, Oregon and Washington State Rules
Implement regulations that would require outdated wood stoves that do not comply with US EPA standards to be replaced when houses change ownership.		EPA CAA, Oregon DEQ

STEP 2: Are We Employing Evidence-Based Strategies?

Environmental Risk Factors and Health		
Objective ENV-4 Reduce by 10% the average number of days/year the AQI exceeds 50 Ph1	Evidence-Based Sources	
	Healthy People 2020 (HP2020)	Other (write in source)
Provide incentives for and reward behaviors of people, organizations, companies that improve the air quality.		EPA, CT DEEP
<i>Communications</i> Publicize the benefits of public transportation in general and as an alternative transportation, to reduce the number of cars on the road on forecasted poor air quality days.		EPA CAA, state and federal DOT
Increase awareness of the 3-minute vehicle idling law, through driver training curriculum, driver's license testing, and when renewing licenses and registrations.		EPA CAA, CT DEEP
<i>Partnership and Collaboration</i> Enhance existing partnerships with State agencies, universities and private businesses to assess the feasibility of initiating statewide use of "green" technologies (e.g., "green" buildings, renewable energy, energy efficiency, and "green" chemistry) that can help reduce use of energy, water, and other resources and decrease pollution		EPA, CT DEEP, federal Dept. of Energy

STEP 2: Are We Employing Evidence-Based Strategies?

Environmental Risk Factors and Health

Objective ENV-4 Reduce by 10% the average number of days/year the AQI exceeds 50 Ph1	Evidence-Based Sources	
	Healthy People 2020 (HP2020)	Other (write in source)
<i>Planning & Development</i> Work with public transportation entities to develop efficient, direct bus routes. Continue to retrofit buses to reduce emissions by installing control devices such as diesel particulate filters, diesel oxidation catalysts, and closed crankcase ventilation systems on diesel-powered engines, to reduce exhaust emissions.		EPA, CT DEEP, federal and state DOT
Promote cleaner vehicle use by installing more electric vehicle charging stations.		EPA, Cal-LEV, CT DEEP
<ul style="list-style-type: none"> Identify wood burning units of greatest concern and develop a phase-out plan. 		EPA, VT DEC

STEP 2: Are We Employing Evidence-Based Strategies?

**ENVIRONMENTAL HEALTH ACTION TEAM (AWARENESS OF AQI)
SOURCES OF EVIDENCE-BASED STRATEGIES**

Objective 5 Strategies

<i>Communications</i>	Healthy People 2020	
<ul style="list-style-type: none"> • Provide public information and data to encourage sound decision making about outdoor activity on poor air quality days. 		<p align="center">EPA, CT DEEP, http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/healthy_environment/ebi/ http://www.asthma.ca/adults/pdfs/asoc_aqhi_032011.pdf Canadian assessment of AQI awareness & promotion http://ncair.org/airaware/ North Carolina program</p>
<ul style="list-style-type: none"> • Develop a comprehensive, standardized alert process to alert the public, and specifically reach at-risk populations, in the event of poor air quality. 		<p align="center">EPA, CT DEEP http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/plan/healthy_environment/ebi/ http://www.asthma.ca/adults/pdfs/asoc_aqhi_032011.pdf Canadian assessment of AQI awareness & promotion http://ncair.org/airaware/ North Carolina program</p>
<i>Education and Training</i>		
<ul style="list-style-type: none"> • Develop and implement a plan for education and outreach about poor air quality days for at-risk populations. 		<p align="center"> http://www.epa.gov/airnow/airaware/aqaw-mediakit.pdf http://www.airnow.gov/index.cfm?action=flag_program.index http://www.slocleanair.org/images/cms/upload/files/AirQuality_HealthCampaign_PresentationPDF.pdf campaign San Luis Obispo http://www.cleanaircampaign.org/ Teachers Guide to AQ Awareness Week</p>

**ENVIRONMENTAL HEALTH ACTION TEAM (AWARENESS OF AQI)
SOURCES OF EVIDENCE-BASED STRATEGIES**

Objective 5 Strategies

<i>Partnership and Collaboration</i>		
<ul style="list-style-type: none"> • Encourage schools to develop a list of at-risk children and design specific alternative indoor recess activities for those children on “bad air” days. 		<p align="center"> http://www.airnow.gov/index.cfm?action=flag_program.educational School-based health centers are required to identify children with asthma – list development. Work with school wellness committees to make decisions (evidence-based) to direct indoors. http://www.cleanaircampaign.org/ Teachers Guide to AQ Awareness Week </p>
<i>Research, Surveillance</i>		
<ul style="list-style-type: none"> • Establish baseline measurement of at-risk populations’ level of awareness of forecasted poor air quality days. 		<p> http://www.cdc.gov/asthma/asthmadata.htm surveillance in general but not of awareness levels http://hints.cancer.gov/ this looks at measuring risk perception as it relates to cancer, screening, awareness campaigns. No AQI specific file://tos-file01/redirected/aboissevain/Downloads/paper162048_1.pdf </p>

Environmental Risk Factors and Health

Objectives Ph1	Sources of Evidence-Based Strategies							
	Guide to Clinical Preventive Services (CPS)	US Preventive Services Task Force (USPSTF)	CDC Community Health Improvement Navigator	National Prevention Strategy (NPS)	CDC Prevention Status Reports	CDC Winnable Battles	Healthy People 2020 (HP2020)	Other (write in source)
Healthy Homes								Consider different title- Healthy Housing (??)
OBJECTIVE ENV-6 (DEVELOPMENTAL) Increase the enforcement of minimum housing code standards through the collaboration of code enforcement agencies.			Yes	Yes				Consider change to language: enhancement and through increased funding (to be reworded by group)
Advocacy and Policy								
<ul style="list-style-type: none"> Adopt a strong housing code Adopt a statewide property maintenance code 								NCHH http://www.nchh.org/Home.aspx National Healthy Housing Standard http://www.nchh.org/Policy/NationalHealthyHousingStandard.aspx
<ul style="list-style-type: none"> Establish incentives for property owners to comply with the new CT's laws on health and safety cooperatively, such as tax breaks and directing federal, state and local housing rehabilitation funding to those who comply. 	Yes	Yes		Yes				
<ul style="list-style-type: none"> Fund code enforcement programs appropriately to adequately staff, comprehensively train and monitor code compliance efforts of code officials. 		Yes	Yes					CDBG http://portal.hud.gov/hudportal/HUD?src=/program_offices/comm_planning/communitydevelopment/programs NCHH http://www.nchh.org/Home.aspx
Communications								
<ul style="list-style-type: none"> Develop media or other awareness campaigns to inform property owners and others of the importance of code, and the benefits of cooperative compliance 		Yes		Yes				Robert Wood Johnson Foundation http://www.rwjf.org/en/how-we-work/focus-areas.html#healthycommunities <i>JD-suggested general public, selectpersons, etc.</i>

Planning and Development								
<ul style="list-style-type: none"> Establish a statewide minimum housing code for the State of Connecticut by proposing legislation to adopt in 2016. 								NCHH http://www.nchh.org/Home.aspx National Healthy Housing Standard http://www.nchh.org/Policy/NationalHealthyHousingStandard.aspx
Research, Surveillance								
<ul style="list-style-type: none"> Establish baseline measurement of “sub-standard housing” 	Yes	Yes					Yes	NCHH http://www.nchh.org/Home.aspx National Healthy Housing Standard http://www.nchh.org/Policy/NationalHealthyHousingStandard.aspx

- Guide to Community Preventative Services – Includes recommendations from US Preventative Services Task Force (USPSTF)**
 - Health Equity & Housing: <http://www.thecommunityguide.org/healthequity/housing/housing.html>
 - Tenant Based Rental Assistance Programs: <http://www.thecommunityguide.org/healthequity/housing/tenantrental.html>
 - Promoting Health Equity Through Education Program and Policies: <http://www.thecommunityguide.org/healthequity/education/index.html>
 - Health Communication & Social Media: <http://www.thecommunityguide.org/healthcommunication/index.html>
- CDC Community Health Improvement Navigator**
 - Making the Case for Collaborative Community Health Improvement: <http://www.cdc.gov/chinav/case/index.html>
 - Tools for Successful CHI Efforts: <http://www.cdc.gov/chinav/tools/index.html>
- National Prevention Strategy (NPS)**
 - Overview of Strategy (attn. to “vision” – collaboration): <http://www.surgeongeneral.gov/priorities/prevention/strategy/index.html>
 - Clinical and Community and Preventative Services: <http://www.surgeongeneral.gov/priorities/prevention/strategy/clinical-and-community-preventive-services.html>
- Healthy People 2020 (HP2020)**
 - Social Detriments of Health: <http://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health>