

Despite progress in reducing lead poisoning, over 4,800 children in New Jersey were identified with elevated blood lead levels (EBL) at or above 5 micrograms per deciliter ( $\mu\text{g}/\text{dL}$ ) in 2016. The state's low-income communities of color are particularly vulnerable to lead exposure, and the lifelong health effects associated with it, because of a lack access to lead poisoning prevention resources and lead-safe, affordable housing.

The analysis and recommendations in the 2018 New Jersey Lead Poisoning Prevention Action Plan provide comprehensive action steps to eliminate childhood lead poisoning in ten years in New Jersey. Key policy reforms and investment in infrastructure will increase the safety of the environment, and risk-based prevention services will prevent lead poisoning in New Jersey's most vulnerable children. Using these strategies, New Jersey can ensure that children realize their full potential unburdened by lead's toxic legacy.

## Top 10 Recommended Actions to Eliminate Lead Poisoning In New Jersey in 10 Years

### Address the Causal Sources of Lead Exposure:

1. **Require all rental and owner-occupied housing to be certified to be lead safe.** Make receipt of a Certificate of Habitability a requirement for legally renting a property, and include requirements for intact paint and other specific lead hazard reduction provisions recommended by the New Jersey Department of Community Affairs (NJDEA). Require inspection and disclosure of lead hazards at time of sale. *Responsible Partners: Governor and NJ Legislature*
2. **Require all rental housing to be regularly inspected.** Implement a targeted, proactive mandatory housing code inspection protocol, in place of the current complaint-based system. For example, allow local or state inspectors to conduct inspections in all of the properties of an owner who is found to have violations in any property. Mandate that local housing code enforcement officials conduct periodic inspections for 1 and 2 unit rental properties, and provide resources to fully support these activities. *Responsible Partners: NJ Department of Community Affairs and Local Departments of Housing or Code Enforcement Officials, Governor and NJ Legislature*
3. **Create a dedicated and sustainable source of funding for the New Jersey Lead Hazard Control Assistance Fund.** Sustainably fund the New Jersey Lead Hazard Control Assistance Fund, which funds the state Lead Safe Home Remediation Pilot Program, and increase funding above its current annual \$10 million level. Re-instate the direct input of funds from the paint surcharge (rather than the current year-to-year budget allocation), and potentially add additional revenue through taxation of paint manufacturers with facilities in New Jersey. *Responsible Partners: Governor and NJ Legislature*
4. **Require plans and provide funding to replace the entire length of lead service lines (pipes bringing drinking water into homes and buildings).** Require utilities to develop plans establishing annual lead service line replacement goals and commit resources to replace the entire length of lead service lines and ban partial LSL replacements. *Responsible Partners: NJ Board of Public Utilities, supported by infrastructure investment by NJ Legislature and the Governor, implemented by NJ Environmental Infrastructure Trust*
5. **Create new financing mechanisms to support investment in water infrastructure and housing.** Develop and expand financing mechanisms through public and/or quasi-public

agencies, using private investment to support infrastructure and housing repairs in sectors that are not supported by the traditional investment market. Develop low interest loans or other subsidized financing for property owners to proactively address lead hazards in housing, in partnership with New Jersey Housing and Mortgage Financing Agency. *Responsible Partners: NJ Environmental Infrastructure Trust, NJ Housing and Mortgage Finance Agency, with the Governor's Office*

- 6. Require state agencies to collaborate and publicly share data, and to collect data by risk factors to improve targeting of at-risk populations.** Mandate that New Jersey Department of Health Childhood Lead Program and New Jersey Department of Community Affairs engage in regular data sharing through public portals, and consider adding a mapping function to existing state data portals for both health and housing. Track elevated blood lead levels by risk factors like race, ethnicity and poverty, and assist local health departments in analyzing lead exposure risk at the census tract or neighborhood level for improved targeting of lead screening and outreach efforts. *Responsible Partners: NJ Department of Community Affairs and NJ Department of Health*

#### **Invest in Targeted Primary Prevention:**

- 7. Support Medicaid investment in lead poisoning prevention and lead hazard removal.** The NJ Department of Human Services should issue or amend policies and regulatory guidance to encourage Medicaid Managed Care Organizations to support and invest in public health case management, environmental investigation and lead hazard remediation to prevent lead poisoning and mitigate the impacts of lead exposure for children under six. *Responsible Partners: NJ Department of Human Services, with direction from the Governor's Office*
- 8. Provide targeted services to families and children at greatest risk for lead poisoning.** Provide targeted lead poisoning primary prevention services, including outreach and education, health promotion, case management and lead hazard remediation to families with young children and pregnant women who reside in the census tracts with highest EBL prevalence. Evaluate the individual and community-level impacts of this risk-based primary prevention strategy, and expand services to additional communities around the state. *Responsible Partners: Community providers, Medicaid Managed Care Organization Partners, with support from NJ Department of Health and NJ Department of Human Services*

#### **Support Best Practices in Services to Mitigate Lead's Impact:**

- 9. Increase early childhood screening for lead poisoning.** Increase blood lead testing by directly supporting pediatric practices in obtaining and using a Lead Care II analyzer through professional training and funding, and further incentivizing universal lead screening for Medicaid recipients at 1 and 2 years old using incentive payments and penalties to providers and Managed Care Organizations. *Responsible Partner: NJ Department of Health*
- 10. Integrate State health and housing lead services and eliminate barriers to access.** Integrate NJDOH Childhood Lead Poisoning Prevention Program services, including referral, case management and home visitation with NJDCA Lead Safe Homes Pilot Program so that more children with elevated blood lead levels have access to health and housing services. Address the tenant citizenship status documentation requirement to access remediation resources. *Responsible Partners: NJ Department of Health, NJ Department of Community Affairs and Lead Safe-Home Remediation Pilot Program Administrators*