

Arizona Department of Health Services Creates Coalition for Lead Poisoning Prevention

Arizona's Department of Health Services uses a health in all policies (HIAP) approach to advance the state childhood lead poisoning prevention program

Background

In 2014, the Arizona Department of Health Services (ADHS) received funding from the CDC Childhood Lead Poisoning Prevention Program (CLPPP) to conduct state lead poisoning prevention activities. In 2015, the Centers for Medicare and Medicaid Services approved Arizona's state Medicaid program to conduct targeted screenings based on lead exposure risk. In 2019, this program was updated to require all children participating in Medicaid to be tested for lead exposure at ages 12 and 24 months.

The ADHS' [Childhood Lead Poisoning Prevention Program](#) (ACLPPP) team consists of two or three staff members who provide educational information regarding childhood lead poisoning prevention and encourage blood lead testing in high risk areas. The team offers environmental sampling support to families when a child has an elevated blood lead level, and they actively engage other state agencies and partner organizations to conduct training, outreach, and educational activities.

Steps Taken

ACLPPP frequently collaborates with other programs within the state health department and with external state agencies and community organizations.

ACLPPP's internal public health partners include [Arizona's Supplemental Nutrition Program for Women, Infants, and Children](#); the [Arizona Immunization Program](#); Arizona's [Environmental Public Health Tracking Program](#); Arizona's [Maternal, Infant and Early Childhood Home Visiting Program](#); ADHS' [Bureau of Child Care Licensing](#); the Arizona [Adult Lead Poisoning program](#); and ADHS [Information Technology Services](#).

In October 2018, ADHS established the Lead Poisoning Prevention Coalition, which consists of partners like [Arizona's Medicaid agency](#), county health departments, Arizona Department of Housing's lead abatement program, Head Start programs, onsite LeadCare II testing providers, a refugee resettlement program, and a liaison for tribal communities. This coalition convenes both in person and virtually, and coalition members have access to an online community platform to post updates, share resources, and engage in forum discussions. Although participation in the coalition is voluntary, ADHS' leadership has empowered partners to become champions and has enhanced sustainability of the coalition's lead poisoning prevention activities. Partners are encouraged to collaborate beyond the coalition and utilize the online platform to engage in information sharing, requests for technical assistance, and offers of institutional support.

Results

ACLPPP conducts approximately 15 in-home investigations and processes roughly 65,000 individual test results per year. In 2017, ACLPPP discovered that 321 Arizonan children under 6 had elevated blood lead levels (BLL), categorized as 5 µg/dL or higher.

As a result of its partnership-building efforts, ACLPPP has grown from simply sharing information with its partners to implementing a collaborative framework to engage stakeholders in a HIAP approach. ACLPPP promotes preventing childhood lead poisoning through direct collaborations with nine Head Start

- ADHS processes approximately 65,000 BLL test results per year.
- ADHS collaborated with partners to create a state [lead risk map](#).
- ADHS led a [yearlong project](#) to test drinking water in more than 1,000 child care facilities.

programs, more than 30 LeadCare II private providers, refugee resettlement communities, and tribal groups in Arizona. ACLPPP also partners with the state immunization program to conduct outreach, including a pilot program where ADHS staff discuss blood lead screening recommendations with health care providers during vaccine assessment visits.

[Arizona Health Start](#), one of the state's home visiting programs, collaborates with ACLPPP to carry out a state-funded program that encourages families to get blood lead testing from their primary care providers. ACLPPP also works closely with the state's 15 county health departments as local champions in conducting outreach for lead poisoning prevention. Three of these county health departments established formal data sharing agreements to allow health departments to match addresses for elevated blood lead level cases with public housing addresses. This helps the housing agency identify homes in need of lead inspection. ACLPPP also established an agreement with the state Medicaid program to facilitate data sharing with health plan contractors.

In addition to sharing health data and metrics, ACLPPP utilizes an electronic BLL database system to flag health records with BLLs of 5 µg/dL or higher and indicate the need for additional blood lead testing. Depending on the BLL test results, ACLPPP utilizes a tiered follow-up approach:

- A BLL greater than 5 µg/dL prompts a letter to the child's family with a lead poisoning informational brochure and a fax to the family's provider with recommendations for follow-up.
- A BLL greater than 10 µg/dL prompts a phone interview between the child's family and state health agency staff and a mailed lead poisoning home investigation kit, if needed.
- A BLL greater than 20 µg/dL prompts a home visit by ACLPPP staff to collect environmental samples of potential lead sources (e.g. paint, dust, imported spices and makeup) for testing.

Clinicians, including LeadCare II reporters who conduct their own testing, can report findings directly into the electronic BLL database system, which includes BLLs for both adults and children. Beginning in 2016, ACLPPP collaborated with the state's environmental public health tracking and geographic information system divisions to generate a [lead risk map](#) to visualize blood lead data combined with census data. This map shows which areas are considered high-risk zones for lead poisoning and aims to encourage community members to get tested for lead exposure.

In addition to conducting surveillance and outreach, ACLPPP also provides health-based technical assistance to non-health partners to address community concerns. For example, ACLPPP established an initiative to work with the state's child care licensing bureau to educate facility managers about lead poisoning. In collaboration with this bureau, ACLPPP led a [yearlong project](#) in 2017 to test drinking water in more than 1,000 child care facilities by collecting samples and testing them for lead in the state laboratory. These testing results were shared with schools, facilities, and parents along with informational materials on tap flushing protocols.

Lessons Learned

ACLPPP recognizes that opportunities for lead poisoning prevention policy change exist, and ADHS is making an effort to empower its coalition partners to become advocates for lead poisoning prevention. Every five years, ACLPPP reviews the state lead rules and solicits public comments. Given the wide breadth of its partnerships, ACLPPP benefits from cross-sectoral input into this strategic planning process to revise or maintain its rules.

Most of ACLPPP's efforts are focused on educating partners about lead and sharing information with stakeholders to encourage healthy policies regarding lead exposure. Initially, it took time for the thirty coalition partners to get comfortable with an online platform. However, participation in the virtual forum has grown to more than seventy members and has facilitated informal collaborations for cross-sector lead poisoning prevention activities.

For additional information, visit Arizona Department of Health Services' [Lead Poisoning](#) web page, or contact:

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