The Massachusetts Department of Public Health's Childhood Lead Poisoning Prevention Program (CLPPP) has amended its Lead Poisoning Prevention and Control Regulation. Notably, the new regulation amends the definition of "Accessible, Mouthable Surfaces" and creates a new type of lead hazard, both of which impact the number and type of surfaces which must be de-leaded. Details of these and other policy changes are found below.

Please refer to our website or contact CLPPP at 800-532-9571 with any questions.

**When Do the Changes Go into Effect?**

- **All changes go into Effect December 1, 2017**

- Deleading work that began *before December 1, 2017* can be completed to the abatement standards in place at the time of the deleading notification *if*:

  1. The submitted deleading notification includes the "start work date" prior to 12/1/17; *and*
  2. The work is completed and passes a final deleading re-inspection on or before January 1, 2018.

**What are the Changes to Deleading Requirements?**

- **Accessible, Mouthable Surfaces**
  - The following must be deleded:
    - Window sills that are 5 feet or less from a floor, stair tread, or ground
    - Hand rails and railing caps
  - Surfaces like baseboards, door and window casings, and outside corners of walls that are in good condition no longer require deleading.

- **Friction Surfaces**
  - Doors (edges), door jambs, and stair treads are lead hazards. They must be deleded at all points of potential friction where the components meet. Stair treads need to be abated in their entirety from the balusters to the wall – or they can be covered.
What are the Changes to Acceptable Deleading Methods and Re-inspection Requirements?

- **Encapsulation:** Can now be used for Exterior Accessible, Mouthable Surfaces if:
  1) The existing paint or coating is well adhered and
  2) The surfaces assessment requirements are met.

- **Repainting/Sealing:** Floors where loose lead paint was made intact for compliance must be repainted and pass a dust wipe sample (alternatively, these surfaces can be covered).

- **Coating Removal Using Chemicals:** All doors and woodwork where chemical stripping, including off-site dipping, was utilized, will now be subject to re-inspection to ensure that the components are repainted prior to occupancy.
The Massachusetts Department of Public Health’s Childhood Lead Poisoning Prevention Program (CLPPP) has amended its Lead Poisoning Prevention and Control Regulation which will go into effect December 1, 2017. Notably, it lowers the blood lead level in the regulatory definition of Lead Poisoning, establishes a new Blood Lead Level of Concern category, and institutes additional screening guidelines for these blood lead levels. Details of these and other changes are found below. Please refer to our website or contact CLPPP at 800-532-9571 with any questions.

How Will this Affect your Practice?

- **Mandatory Screening Schedule Remains the Same**
  - Screen all children at 9-12 months and again at ages 2 & 3
  - Continue to screen children 4 and over if High Risk
    - **Lives in a High Risk Community**: A list of these communities can be found at: mass.gov/dph/clppp: “Lead Research and Statistics”
    - **Lives in a High Risk Environment**: Other poisoned children in the same home or pre-1978 homes under renovation

- **Changes to Regulatory Blood Lead Level Categories**
  - **Lead Poisoning**: Venous Blood Levels ≥ 10 μg/dL *(reduced from 25 μg/dL)*
  - **Blood Lead Level of Concern**: Venous Blood Levels 5 to <10 μg/dL *(new regulatory category)*

- **Changes to Screening and Reporting Thresholds**
  - Capillary tests ≥ 5 μg/dL now require venous confirmatory re-screening *(recommended within 2 months)*
  - Continue to report all Blood Levels to CLPPP
    - **BLL 10 μg/dL or greater** *(reduced from 25 μg/dL)*: Report within 3 business days of testing
    - **BLL < 10 μg/dL**: Report within 7 business days of testing
  - Provide parents/guardians with proof of screening for entry into daycare and pre-K programs in addition to kindergarten.
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