

Memorandum

To: House Committee on Education
From: Reeva Murphy, Deputy Commissioner, Child Development Division
Re: *Corrected Memo* S.40 – Lead testing/remediation
Date: March 20, 2019

Thanks for inviting me to testify on Senate bill 40 related to testing and remediation of lead in the drinking water of schools and child care programs.

We agree that ingestion of lead has a negative impact on the healthy development of children. Younger children with small body mass and in a critical and rapidly evolving developmental phase are particularly vulnerable to these negative impacts. CDD staff are not experts in the science of food safety and look to our colleagues at Department of Health for guidance on what is reasonably safe for children and how we ensure that what children eat and drink in child care and early learning programs is safe for their developing bodies and brains.

For that reason, CDD has long required testing for lead in drinking water of regulated child care programs. Christel Michaud, CDD Director of Licensing and I can answer any technical questions you may have about current regulations, enforcement and remediation. We have copies of the regulations and guidance bookmarked to current regulations. These are also available on-line at <https://dcf.vermont.gov/cdd/laws-regs/childcare>.

Our current regulations were developed in collaboration with VDH and the Agency of Natural Resources in 2014 and 2015 accessing information and standards available at that time. The action level currently established for child care and early learning programs is 15 parts per billion consistent with the U.S. E.P.A.'s Lead and Copper Rule. Lead negatively impacts the development of young children, so logically, the less lead that children ingest, the better.

According to February 2019 data from VDH related to Family CC Homes, if the action level of 5 ppb becomes the new standard, less than 2.8%, 14 of 486 FCCH, would not be in compliance with this standard and would need to remediate. VDH staff estimates that it would be a few hundred dollars to purchase a treatment system with annual operating costs of between \$20 to \$150 (data provided below). That said, current child care regulations only test the 'first draw' and the bill as written includes a first draw and flushed sample which better represents the pipes in the home and is therefore more protective of safety. All 486 homes would need to test again to collect and submit a flushed sample.



Also, currently when unsafe levels of any toxin are detected in drinking water in child care and early learning programs, we require programs to use bottled water which conform to a standard of 5 parts per billion. Therefore, we support the 5 parts per billion.

The protocols for testing for environmental toxins in schools and child care and early learning programs have been very different which one of the reasons we believe that all early childhood programs be held to the higher standards in child care regulations. That said, child safety is always our greatest concern and we are more than willing to adapt our standards and protocols to new standards. It may take additional resources to support child care and early learning programs through the change. We will continue to work with our colleagues at Health and ANR to establish safe standards and protocols to protect Vermont children.

ADDITIONAL INFORMATION

Results for 486 home based childcares that collected first draw samples. Duplicates were removed and only the highest result for homes with more than one test is included in the numbers below. (STARLIMS data extract up to 2/15/19)

> 1 ppb: 73 homes (15.0%)

> 3 ppb: 22 homes (4.5%)

> 5 ppb: 14 homes (2.8%)

≥15 ppb: 5 homes (1.0%)

From CDD Licensing Guidance Manuals (2016)

Lead Water Testing – Both registered and licensed Initial Licensure (rule 2.3.7.10)

Required to test water for the presence of lead even if permits are in place and/or bottled water is being used.

- Conduct first draw lead sample test by collecting water sample when water has been sitting in the plumbing inside the building either overnight or for at least six hours without being used. (The lab will provide sample collection instructions)
- The sample must be sent to and analyzed by a Vermont Certified Drinking Water Lab. The test result must be less than 0.015 mg/L.
- Include lead sample results with initial licensure application. Keep paper documentation of test results on site and available for CDD review.
- If the lead test result is above 0.015 mg/L, water may be remedied and retested for compliance. Bottled water must be used for any water system not in compliance. Water may be provided by you or families.

Annual Licensing Requirement (rule 2.3.8.7) and License Renewal (rule 2.3.9.5.1)

Only FCCHs that tested above 0.015 mg/L for lead on the first draw lead test must send a flush

sample test annually to a Vermont Certified Drinking Water Lab.

- Keep paper documentation of water testing results at the FCCH and available for CDD review.
- At license renewal, update the license renewal application with results. Bacterial and Chemical Water Testing
 - Both registered and licensed Initial Licensure – Systems with Permits (e.g. municipality, towns, and neighborhoods)

Bacterial and chemical water testing is regularly conducted and monitored in water supply systems that have a permit from the Vermont Agency of Natural Resources to serve more than 24 individuals. Therefore, CDD does not request additional bacterial or chemical testing for FCCHs who obtain their water from this type of permitted system.

Initial Licensure – Systems (e.g. local springs and wells) without Permits (for licensed FCCH rule 2.3.7.11 and for registered FCCH rule 2.3.7.12)

FCCHs without a permitted water supply system must complete the bacterial and chemical water testing for CDD.

Conduct chemical (arsenic, uranium, nitrite, manganese, nitrate, and fluoride) and bacterial (total coliform) tests using a Vermont Certified Drinking Water Lab and include results with initial licensure application. ∞

Keep paper documentation at the FCCH and available for CDD review.

Results must meet Vermont Drinking water standards. Accepted levels are listed in Appendix II. ∞ Bottled water must be used for any water system not in compliance with standards. Water may be provided by you or families.

Water may be remedied and retested for compliance.

Licensing Renewal – Systems (e.g. local springs and wells) without Permits (for licensed FCCH rule 2.3.9.5.3) and (for registered FCCH rule 2.3.9.5.4) 21

For FCCHs not required to have a drinking water permit and/or not connected to a permitted system (e.g. municipal system), chemical testing is required every six years. Send a water sample to a Vermont Certified Drinking Water Lab.

- Update the license renewal application with results. This is only required every six years.
- Keep paper documentation at the FCCH and available for CDD review.

Resources

Vermont Department of Health Laboratory has a child care water test kit to meet the licensing requirements. Test kits may be obtained by calling the lab: (802) 338-4736 or 1 (800) 660-9997.

List of other Vermont Certified Drinking Water Labs that may be used:

<http://healthvermont.gov/public-health-laboratory/laboratory-certification-orapproval/drinking-water-laboratory>

Vermont Department of Health child care drinking water fact sheets:

<http://healthvermont.gov/health-environment/chemicals-childrens-products/child-careproviders>

Vermont Department of Health Testing Recommendations:

<http://healthvermont.gov/public-health-laboratory/drinking-water-testing/what-shouldyou-test>

Appendix II contains a chart on Water System Testing and Safety

Guidelines. Due Dates Checklist on CDD website:

<http://dcf.vermont.gov/cdd/forms-child-care-providers>