

MCEH CoIIN Change Package Louisiana State Team

Key:

- The changes listed here are the changes that the **Louisiana** state team decided to test throughout the CoIIN. *This is not the complete MCEH CoIIN Change Package.*
- The majority of the changes that Louisiana decided to test have been ranked by “leverage” from 1 (low leverage, not very important) to 5 (high leverage, very important). You will find these rankings in the third, right-most column of the Louisiana State Team MCEH CoIIN Change Package.
- Under each Primary Driver heading there is a short “recommendations” section that is specific to that primary driver. This data was gathered at the MCEH CoIIN Harvest on 5/5/2020.
- **Text in red highlights specific activities/adaptations to each MCEH CoIIN change idea that Louisiana performed.**

Primary Driver 1: Clinical Settings		5
<p>Recommendations on leverage points:</p> <ol style="list-style-type: none"> 1. Educate parents to build trust with them on the importance of lead testing, signs and symptoms of lead poisoning. 2. Have educational materials in different languages. 3. Host trainings directed at public health professionals, clinical providers and other prevention partners about childhood lead prevention, policies and interventions for child lead prevention 4. Start small: small group, small focus, start with a sub-population or a pilot population. 5. Update testing guidelines and standards 6. Provide CDC reference chart (when to retest) to providers 7. Enforcement of legislation for mandated testing. 8. Enforcement of reporting. 		
Secondary Driver	Change Idea	Rank Change Idea from 1-5 1 = low leverage 5 = high leverage
Prevention and Mitigation	Provide training for pediatricians, family doctors, and care coordinators on signs and symptoms of lead exposure, treatment protocols, community resources (Head Start, Parent Training & Information Centers, etc.), navigating school accommodations, and local reimbursement processes.	5

	<ul style="list-style-type: none"> • Provided by LSU AgrCenter Staff and three Regional Outreach Specialists 	
	<p>Host trainings directed at public health professionals, clinical providers and other prevention partners about childhood lead prevention, policies and interventions</p> <ul style="list-style-type: none"> • Louisiana Healthy Homes and Childhood Lead Poisoning Prevention Program (LHHCLPPP) Program Manager Trained 85 clinical providers and public health professionals at Excelth Clinical Staff Training 	5
	<p>Establish Medicaid lead poisoning prevention pilot projects.</p> <ul style="list-style-type: none"> • Annual data linkage with Medicaid Claims data to track BLL of Medicaid- enrolled children. 	5
	<p>Educate parents about lead prevention and exposure at Crescent City WIC Clinic at the Patient Enrollment and Voucher Certifications Appointments.</p> <ul style="list-style-type: none"> • Provided by LHHCLPPP Staff-Regional Outreach Specialist 	5
	<p>Educate parents about the importance of testing their homes for lead, ways to keep home safe from lead poisoning and distributed Lead Smart Testing kits. (Provided by LHHCLPPP Staff-Regional Outreach Specialist)</p>	5
Identification and Exposure	<p>Create parent post cards on blood lead testing rates</p> <ul style="list-style-type: none"> • LHHCLPPP Staff and Communication, Innovation and Action Team 	5
	<p>Create a performance measure for blood lead testing of Medicaid-enrolled children and make publicly available its estimate of Medicaid-enrolled children tested for lead by age 2.</p>	5
	<p>Leverage partnerships with Women, Infant and Children (WIC) clinics, local health clinics, Federally Qualified Health Centers, and school-based health centers provide blood lead screening tests within the scope of their services. Encourage these providers to administer blood lead screening tests while Medicaid and CHIP children are visiting these clinics for other services.</p> <ul style="list-style-type: none"> • LHHCLPPP Staff and LHHCLPPP Contractor-LSU AgCenter 	5
	<p>Provide updated Physician Flyer that promotes universal testing guidelines/procedures for providers</p> <ul style="list-style-type: none"> • LHHCLPPP Staff and Communication, Innovation and Action Team 	5
	<p>Collect census tract level data on BLL results in collaboration with community-based organizations, local health agencies, CDC.</p> <ul style="list-style-type: none"> • Collect zip code level data 	5
	<p>Require laboratories to electronically submit all blood lead test results to local and state health departments within a week of the result so the information can be aggregated to assist with prevention and response efforts³</p>	5
Treatment and Mitigation	<p>Use of claim data to ensure test and confirmatory tests (ex: Mississippi)</p> <ul style="list-style-type: none"> • In-Progress- Matching with Medicaid claim data to ensure testing and follow up 	5
	<p>Co-locate treatment with WIC in areas of high lead exposure</p>	5

	<ul style="list-style-type: none"> Partnership between LHHCLPPP Staff and Crescent City WIC Staff 	
	Distribute guidance documents for follow-up care for children who are identified with EBLL ¹	5
	Screen exposed children for adequate iron and calcium levels and prescribe supplements or food if needed ⁷	5
	<ul style="list-style-type: none"> Partnership between LHHCLPPP Staff and Crescent City WIC Staff 	
Policy	Adopt the CDC reference level for lead poisoning prevention actions ²	5
	Ensure that state Medicaid policies and program materials on blood lead screening are in compliance with federal Medicaid requirements ⁸	5
	Enact universal blood lead testing for children 1-2 years old (Maryland) ²	5
	Require that lead be a reportable disease	5

Primary Driver 2: Housing		4
Recommendations: <ol style="list-style-type: none"> Leverage partnerships with home visiting programs. Require environmental investigations in the home for EBLL children (including paint and water risk). Relocate family when property cannot be abated. Intake and enrollment of eligible families into the HUD Lead Based Paint Control Program. Refer families into the lead abatement programs in the state of Louisiana. 		
Secondary Driver	Change Idea	Rank Change Idea from 1-5 1 = low leverage 5 = high leverage
Prevention and Remediation	Educate property owners and contractors on lead including resources on how to pay or fund lead abatement	5
	Local health departments, and MIECHV promote and request home testing for lead before and during a woman's pregnancy <ul style="list-style-type: none"> Partnership between LHHCLPPP and MIECHV 	5
	Offer low-interest loans, tax credits and other incentives to property owners for financially accessible lead paint hazard control ³	1

	<ul style="list-style-type: none"> • Provided by LHHCLPPP through grant funding from the HUD Lead Hazard Control Grant 	
	Remove or cover lead paint hazards in homes built before 1978 where any children under 6 live. (MA)	5
	Increase the number of lead-certified home contractors within the state	4
	Require home inspections and remediation for lead (including paint and water risks) Louisiana	5
	Prohibit landlords for re-renting units that poisoned a child or where lead has been found ^{3,5}	5
Identification and Exposure	Collect census tract level data on water, dust, paint and soil of homes in collaboration with community-based organizations, local health agencies, CDC ³	2
	Partner with MIECHV, CDC's Healthy Homes and local health departments to provide educational resources to all parents while home visits to children and pregnant women who have EBLLs and assist their families with referrals to housing, health and other resources	5
Treatment and Mitigation	Relocate families as needed when property cannot be quickly abated	5

Primary Driver 3: Child Care and Schools		4
Recommendations:		
<ol style="list-style-type: none"> 1. Train day care workers and parents on childhood lead poisoning prevention. 2. Train child care coordinators statewide on childhood lead poisoning prevention. 		
Secondary Driver	Change Idea	Rank Change Idea from 1-5 1 = low leverage 5 = high leverage
Prevention and Remediation	Train school and child care staff to utilize checklists such as the Eco-Healthy Child Care Program and Healthy Schools Network for lead prevention <ul style="list-style-type: none"> • LHHCLPPP through its contract partnership with LSU-AgCenter 	5
	Implement the EPA's 3T recommendation to test water for lead <ul style="list-style-type: none"> • New grant partnership between LHHCLPP, LSU-AgCenter and the Safe Drinking Water Program) 	2
Identification of Exposure	Train school nurses how to identify children at risk for lead toxicity and how to make referrals to health care providers <ul style="list-style-type: none"> • LHHCLPPP through its contract partnership with LSU-AgCenter 	2

	Collect census tract level data on water, dust, paint and soil of schools, child care facilities in collaboration with community-based organizations, local health agencies, CDC. In-progress- Collect zip code level data	5
Policy	Enact mandatory BLL testing and documentation before entering child care or school (NY, RI, MD) In-progress- BLL testing is required for enrolling in Head start	4

Primary Driver 4: Community		5
Recommendations: n/a		
1. Provide education and outreach to the community during National Healthy Month and National Lead Week.		
Secondary Driver	Change Idea	Rank Change Idea from 1-5 1 = low leverage 5 = high leverage
Prevention and Remediation	Provide educational outreach concerning lead poisoning risks and interventions in targeted high-risk areas	5
	Offer training opportunities for the community on policy content and procedures for ease of implementation	4
Policy	Align lead standards in dust and soil with blood lead guidance	5
	Promote feedback loops with common, shared vision between state and local policy makers to shape norms and intolerance for lead exposure <ul style="list-style-type: none"> LHHCLPPP State Advisory Board and Regional Healthy Homes Coalitions 	5

Primary Driver 5: Products & Industry		5
Recommendations:		
Secondary Drivers	Change Idea	Rank Change Idea from 1-5 1 = low leverage 5 = high leverage
Prevention and Remediation	Identify and educate parents who are exposed to lead at work about the dangers of take-home lead exposure	5