

LEAD TESTING IN SCHOOLS AND CHILD CARE PROGRAMS DRINKING WATER GRANT

For Grant Fiscal Years 18-20

ARKANSAS DEPARTMENT OF EDUCATION



and

ARKANSAS DEPARTMENT OF HEALTH



UPDATED OCTOBER 2023

Summary Statement

The State of Arkansas Department of Education (DOE) is committed to addressing lead in drinking water in our schools and child care facilities, and overall reduction of childhood lead exposure across our state. This is why, in 2019, Governor Asa Hutchinson committed Arkansas to the statewide initiative to test schools and child care facilities using EPA's *3Ts for Reducing Lead in Drinking Water*. Arkansas is eager to start the work in partnership with the Arkansas Department of Health (DOH) and the Arkansas Division of Child Care & Early Childhood Education (DCCECE) to test schools and child care facilities for lead exposure.

With the funding appropriated under section 1464(d) of the Safe Drinking Water Act, amended by the Water Infrastructure Improvement Act (WIIN) section 2107, Arkansas DOE plans to begin the Initiative in testing our schools and child care facilities. This will include the prioritization of facilities serving younger children (ages 6 and under), underserved and low- income communities, and facilities that are older and more likely to contain lead plumbing.

Arkansas DOE is using EPA's 3Ts guidance as a model to: (1) **Communicate**, throughout the implementation of the program, the results and important lead information to the public, parents, teachers, and the larger community; (2) **Train** on the risks of lead in drinking water and testing for lead, as well as developing key partnerships to support the program; (3) **Test** using appropriate testing protocols and a certified laboratory; and (4) **Take Action**, including the development of a plan for responding to results of testing conducted and addressing potential elevated lead where necessary.

SCOPE OF WORK

This section is a discussion of the Arkansas's plan to develop and implement the lead testing program in schools and child care facilities and how these programs meet goals as they relate to the reduction of lead in drinking water exposure in children. The scope of work contained in this project description includes the following categories and information.

- I. STATE GOALS AND PRIORITIES
- II. PROGRAM IMPLEMENTATION AND ACTIVITIES
- III. ROLES AND RESPONSIBILITIES
- IV. TIMELINE AND MILESTONES
- V. WIIN PROGRAMMATIC PRIORITIES AND EPA'S STRATEGIC PLAN LINKAGE
- VI. ANTICIPATED OUTCOMES/OUTPUTS
- VII. BUDGET NARRATIVE

I. STATE/TERRITORY GOALS AND PRIORITIES:

Arkansas has approximately 478,318 students enrolled in a total of 1,048 public schools in 238 school districts, and 26 Open-Enrollment Charter Schools. In these public schools, Arkansas has identified approximately 4,521 buildings excluding maintenance, transportation, athletic, unused and greenhouse buildings. Arkansas also has the capacity to serve 144,262 children participating in regular child care and early childhood education centers which include Head Start and state funded pre-k at 1,604 facilities. Arkansas DOE has identified goals and priorities consistent with the priorities outlined in EPA's State Lead Testing in School and Child Care Program Drinking Water Grant Implementation Document (found here: www.epa.gov/safewater/grants).

In accordance with the America's Waters Infrastructure Act (AWIA) of 2018, which amended the SDWA section 1464(d), Arkansas DOE will assist in voluntary testing for lead contamination in drinking water at schools and child care facilities that are in low-income areas. This is described based upon the affordability criteria established by the State under SDWA section 1452(d)(3). This may include Schools with at least 50% of the children receiving free and reduced lunch and Head Start facilities, for example.

Other priorities will include elementary and child care programs that primarily care for children 6 years and under; older facilities that are more likely to contain lead plumbing (e.g. facilities built before lead ban of 1986); and established and sustainable child care programs without factors indicating that the building may not be serving as a child care facility in the future.

It is Arkansas DOE's goal to reduce lead exposure at these facilities by testing for lead, identifying potential lead sources, and taking action. Using the priorities listed above, this testing effort includes the goals of:

- a. Testing all outlets used for consumption at 50% of the total child care facilities in the state with a plan to continue testing after the project period.
- b. Testing all outlets used for consumption at 15% of the total school buildings in the state with a plan to continue testing after the project period. This subset will be prioritized in low-income areas and elementary grades.
- c. Providing education about lead and the importance of testing to all school districts.
- d. Provide funding to replace existing drinking water fountains and sinks with new lead-free fixtures when lead is found over the action level (0.015 mg/L lead).

II. PROGRAM IMPLEMENTATION AND ACTIVITIES:

Arkansas DOE is utilizing EPA's 3Ts guidance (www.epa.gov/safewater/3ts) to implement the water testing plan. This includes efforts to (1) **Communicate**, throughout the implementation of

the program, the results and important lead information to the public, parents, teachers, and the larger community; (2) **Train** on the risks of lead in drinking water and testing for lead, as well as developing key partnerships to support the program; (3) **Test** using appropriate testing protocols and a certified laboratory; and (4) **Take Action**, including the development of a plan for responding to results of testing conducted and addressing potential elevated lead where necessary. Below are specific activities included in these key elements:

a. **Communication:** Arkansas DOE will establish key partnerships to support the program as well as keeping the public informed (see more on partnerships in Appendix A). Arkansas recognizes that timely dissemination of communication materials is of the utmost importance. Therefore, information about the sampling program and lead in drinking water will be shared before the lead in drinking water sampling program begins, after obtaining the results of testing, when/if corrective measures are decided upon (and in the event no corrective measures are appropriate because the lead levels are low), and in response to periodic interest in the program. Specifically:

- Notifications will occur at least 30 days prior to testing at that facility
- Testing results will be shared with the school or child care community as soon as possible, but no later than 30 days following the receipt of the final results.
- Press releases and public meetings will be held, in collaboration with school district and child care program leaders.
- General public education and updates to the testing website will be made on an ongoing basis and can be accessed by the public (<http://dese.ade.arkansas.gov/divisions/learning-services/school-health-services/lead-testing-opportunity>).

Arkansas DOE and DOH will be using a variety of methods to communicate and be transparent throughout this program with the goal of reaching the target audiences; including: press releases, Commissioner's Memos, electronic fliers for schools, articles for staff newsletters, presentations, email and websites

(<http://dese.ade.arkansas.gov/divisions/learning-services/school-health-services/lead-testing-opportunity>), and social media. There will also be an email address,

Kathy.McFarland@arkansas.gov, made available for any additional questions or requests for information: In addition, schools and child care facilities may make available, in the administrative offices and on their public website, if applicable, a copy of the results of any voluntary testing.

Arkansas DOE along with DOH has identified our target audiences as: the school or child care community (e.g. parents, teachers, and staff), the building community, the larger community, local community organizations (e.g. local health officials, environmental health specialists, doctors, and nurses, Lead Poisoning Prevention Programs, and civic and faith-based groups), and the drinking water community (e.g. utilities serving these facilities).

- b. **Training:** Training will include education and training on the risks of lead in drinking water, as well as key partnerships to support the program (see more on partnerships in

Appendix A). Arkansas will also post resources and materials on its website for access by the public. Training will include the causes and health effects of lead in drinking water; as well as training on program plan and sampling procedures.

Arkansas DOH intends to provide training to DOE staff in a train-the-trainer model. The DOE will then train district staff to perform sampling method indicated in the EPA's 3Ts guidance.

The training video for Training is located here:

<https://www.youtube.com/watch?v=nj1kBKggHJM>

- c. **Testing:** Arkansas DOE will be utilizing EPA's 3Ts guidance 2-step sampling protocol, as described at https://www.epa.gov/sites/production/files/2018-09/documents/module_5_3ts_2-step_sampling_protocol_508.pdf, and the Arkansas DOE will collaborate with DOH to issue an RFP to contract a laboratory, which is certified to test lead in drinking water, to process and analyze samples collected under this program. To reach as many facilities as possible, we will be taking the initial 250 mL first draw sample at each tap and following up with the flush samples at locations identified with elevated lead.

Arkansas DOE will be working with the DOH and districts to develop sampling plans and conduct initial site assessment, as well as collect initial and follow-up flush samples at identified facilities. Arkansas anticipates:

- 802 child care facilities to be tested;
- 678 school buildings to be tested; and
- 10% of the taps to require additional sampling (e.g. follow-up flush sampling). All

sampling efforts under this program will be properly coded and recorded using the coding system and record keeping recommendations identified in EPA's 3Ts guidance.

The training video for Testing is located here:

<https://www.youtube.com/watch?v=Huiy6GWfBkQ>

- d. **Taking Action:** Arkansas has developed a plan for responding to results of testing conducted and addressing potential elevated lead where necessary. Responses to results will follow remediation recommendations in the 3Ts guidance. The Initiative includes action at sample sites with results above the state action level of 15 parts per billion (the action level in the federal Lead and Copper Rule). This plan also includes the sampling post-remediation to ensure efforts to reduce lead levels were effective. Plumbing fixtures used for consumption over the action level will be replaced by the facility up to an amount determined by the State. More on remediation can be found here: https://www.epa.gov/system/files/documents/2023-07/Final_FY23_ImplementationDoc_VoluntarySchoolandChildCareLeadTestingReductionGrantProgram_508.pdf.

III. ROLES AND RESPONSIBILITIES:

A list of roles and responsibilities are listed below, and potential project partners are identified in Appendix A.

<p>3Ts Program Contact: This person will act as the point of contact for your 3Ts Program and help coordinate the communication efforts.</p>	<p>Kathy McFarland kathy.mcfarland@arkansas.gov 501-661-2623</p>
<p>Public Communications Team: Communicate testing plans, results, and remediation efforts to the public. The public consists of, but is not limited to, the school community, media outlets, civic groups, etc.</p>	<p>School District Public Information Officers (PIO) and web application that provides education about testing and testing results. Also, provide a template letter for communication to the public about results and health effects, testing program and potential remediation options.</p>
<p>Public Email Contact: This person will monitor the email address (TBD) to ensure questions and concerns are being responded to.</p>	<p>Kathy McFarland kathy.mcfarland@arkansas.gov 501-661-2623</p>
<p>Website and Social Media Contact: This person will make sure websites and social media stay up to date with the latest information.</p>	<p>Kimberly Mundell kimberly.mundell@arkansas.gov (501) 683-4788</p>
<p>Sampling Plan and Execution Contact: This person will lead the effort to develop a sampling plan for the school. They will also engage with other program points of contact and external resources and partners as appropriate.</p>	<p>Kathy McFarland kathy.mcfarland@arkansas.gov 501-661-2623</p>
<p>Testing Contractor Contact: Works with laboratories interest groups, schools and other partners supporting and interested in the 3Ts Program to maintain communication</p>	<p>Kathy McFarland kathy.mcfarland@arkansas.gov 501-661-2623</p>

IV. TIMELINE AND MILESTONES FOR THE CURRENT FISCAL YEAR:

A detailed timeline for the project, including milestones for specific tasks, can be found below.

- 2023 Quarter 1: Review data and those above 15ppb and list the daycares and schools to receive remediation and an estimate of type of work and cost. Discuss how remediation will be completed such as purchases and contractor work or plumbing. Plan for remediation.
- 2024 Quarter 2: Travel to (or send a state contact) a workshop with R6 and R9 states in New Mexico or attend virtually to discuss WIIN 2107. Facilities begin to make remediation purchases and plumbing adjustments.
- 2024 Quarter 3: Make marketing outreach examples listed here that are being looked at as potential marketing methods.
- 2024 Quarter 4: Discuss daycares and remediation locations.

V. WIIN PROGRAMMATIC PRIORITIES AND EPA'S STRATEGIC PLAN:

The principal objective of the assistance to be awarded under this program is to provide grants to states to help local education agencies to test schools and child care facilities for lead contamination in drinking water, utilizing EPA's 3Ts guidance or applicable state regulations or guidance that are not less stringent. The objective of the Program is to: (1) Reduce children's exposure to lead in drinking water; (2) Help states target funding toward schools and child care programs unable to pay for testing; (3) Utilize the 3Ts model or model no less stringent to establish best practices for a lead in drinking water prevention program; (4) Foster sustainable partnerships at the state and local level to allow for more efficient use of existing resources and exchange of information among experts in various educational and health sectors; and (5) Enhance community, parent, and teacher cooperation and trust.

The activities described in this workplan support the WIIN Programmatic Priorities and EPA's FY 2018-22 Strategic Plan, Goal 1, "Core Mission: Deliver real results to provide Americans with clean air, land, and water, and ensure chemical safety," Objective 1.2, "Provide for Clean and Safe Drinking Water: Ensure waters are clean through improved water infrastructure and, in partnership with states and tribes, sustainably manage programs to support drinking water, aquatic ecosystems, and recreational, economic, and subsistence activities."

VI. ANTICIPATED OUTCOMES/OUTPUTS:

Outputs and outcomes expected to be achieved under the agreement are described below.

Outputs for this project include: (1) Use the EPA's 3Ts for Reducing Lead in Drinking Water guidance to implement the state program; (2) Development of a state lead testing in drinking water in schools and child care facilities management strategy that supports a robust training, monitoring, and maintenance plan that protects children from lead exposure now and in the future; (3) Prioritization of testing to target vulnerable communities and populations: schools and child care programs in underserved and/or low-income communities; elementary and child care programs that primarily care for children 6 years and under; and older facilities that are more likely to contain lead plumbing; (4) Providing results of any voluntary testing for lead contamination in school and child care facility drinking water carried out using grant funds and notifying parents, teachers, and organizations of the availability of the results; (5) Developing a regular lead testing program under the Initiative; and (6) Establishment of routine practices such as those outlined in the 3Ts guidance.

Outcomes: for this project include: (1) Schools or child care programs, unable to pay for testing, implementing a testing program and mitigating lead exposure by utilizing the 3Ts toolkit in determining best action to take for remediation; (2) The reduction of children's

exposure to lead in drinking water; (3) Improvement of staff and community knowledge on lead in drinking water and other environmental harms; and (5) Water quality improvement

and lead exposure reduction in drinking water; and (6) Establishment of routine practices such as those outlined in the 3Ts guidance.

Other outcomes include: (1) Fostering sustainable partnerships at the state and local level to allow for a more efficient use of resources and the exchange of information among experts in various areas of school, child care, utility, and health sectors; and (2) The enhancement of community, parent, and teacher trust.

VII. BUDGET NARRATIVE:

Following is a detailed line-item budget and associated justification for activities proposed for the cooperative agreement with the Arkansas Department of Health.

Costs:

	2024	2025
Direct Costs		
Salary (0.5 FTE)	\$ 23,000	\$ 24,150
Fringe	\$ 7,130	\$ 7,728
Supplies	\$ 2,000	\$ 2,000
Travel (approx. 30 trips @250/trip)	\$ 7,500	\$ 7,500
Remediation (approx. 60 fixtures @ \$1,500)	\$ 90,000	\$ 90,000
Lab Fees (Contractual)	\$ 191,179	\$ 191,179
Total Direct Costs:	\$ 320,809	\$ 322,557
Indirect Costs (20.94%) of Salary & Fringe	\$ 6,309	\$ 6,675
Total Cost	\$ 327,118	\$ 329,232

APPENDIX A: PARTNERS UNDER THIS PROGRAM

Below are partners that will be involved in this program.

- Local Health Departments
- Water Utilities
- School Principals/Directors
- School board
- School nurse, Cafeteria staff, Athletics staff, and Teachers
- Parents and Parent Teacher Associations (PTAs)
- Local plumbing and construction contractors/suppliers
- Community Health Nurses (CHNs) and Community Health Promotion Specialists (CHPs) - located at cooperatives and employed by ADH.