



Iowa Environmental Health Association
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IEHA 2016 Legislative Position Statements



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Unsewered Community Revolving Loan Fund

Position Statement

Policy Recommendations:

Authorize the funding of this program through a combination of state and federal money as soon as it is fiscally possible.

Background:

More than 400 small communities in the state are considered to be “unsewered” or “under-sewered”. Most of these communities either have inadequate centralized waste collection and treatment systems or a collection of private systems that may or may not be adequate to meet the needs of the community. Many of these small systems or collections of systems illegally discharge untreated human waste into ditches, streams or land drain tiles, or to the surface of the ground. Most of the unsewered communities are incorporated towns of less than 500 persons, unincorporated villages that have reverted to county control, or pockets of small subdivisions scattered throughout a county. In 2009, House File 468 created the unsewered community revolving loan fund program to provide no-interest loans for the purposes of installing sewage disposal systems in small cities and unincorporated subdivisions.

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Radon Remediation and Testing

Position Statement

Policy Recommendations:

Enact legislation that requires the following minimum standards:

A radon test must be conducted in all homes, new or existing, before the home is sold.

Install a passive radon resistant system in all new homes. These systems are easy to install and add very little to the construction cost (\$300-\$500).

Background:

Radon is a cancer-causing natural radioactive gas that you cannot see, smell or taste. It is the first leading cause of lung cancer among non-smokers and the second leading cause of lung cancer overall. It is responsible for about 21,000 deaths every year in the US. The EPA also estimates that long-term exposure to radon potentially causes approximately 400 deaths each year in Iowa. Based on data collected from radon home tests, the Iowa Department of Public Health (IDPH) estimates that as many as 50-70% of homes across Iowa have elevated radon levels where remediation is recommended.

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Childhood Lead Poisoning

Position Statement

Policy Recommendations:

Appropriate enough funds to allow the Iowa Department of Public Health to continue its crucial role as a technical advisor to local childhood lead poisoning prevention programs (CLPPP), and increase funding levels for local CLPPP programs.

Background:

Childhood lead poisoning is endemic to Iowa. Of Iowa children born in 2004, 97.7% were tested at least once before the age of six years, and 3.7% of these children were lead-poisoned (in eight counties, more than 9 percent of the children were lead-poisoned). At the national level, the rate of lead poisoning among children under the age of six years is so low that it is no longer reported. All homes built prior to 1978 are likely to contain lead-based paint (Iowa ranks in the top six states with the oldest housing stock), and lead-based paint hazards are the leading cause of childhood lead poisoning. Children under the age of six years old are at highest risk of poisoning due to hand to mouth activity. In 2009, the Iowa General Assembly passed a law requiring all children to have proof of a blood lead test prior to entering kindergarten. The percentage of children tested for lead poisoning has increased greatly, as has the percentage of younger children in general. While estimates of the cost of remediation range from \$5,000-\$20,000 per home, funding to remediate lead hazards is minimal if not non-existent in most Iowa communities.

Further complicating Iowa's ability to help their children, the Centers for Disease Control (CDC) eliminated a \$594,000.00 grant which the Iowa Department of Public Health (IDPH) has historically received annually. This resulted in a 25% reduction in funds going to local health departments for lead poisoning surveillance activities, and, more importantly, essentially eliminated the technical capacity at the state level. As IDPH keeps less than 5.0% of state funds allocated to the lead poisoning prevention program, staff time will now be used for enforcement activities related to contractors and inspectors, rather than the tracking and treatment of poisoned children.

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Sale of Unpasteurized “Raw” Milk

Position Statement

Policy Recommendations:

Firmly support pasteurization of milk in Iowa to protect the health of its citizens.

Background:

Pasteurization is simply the process of heating raw milk to 161°F for 20 seconds to kill any disease-causing bacteria that may be present. Since raw milk and its products provide an ideal environment in which bacteria can grow, pasteurization is necessary to prevent illness, especially in children.

In the past five years, there have been 51 outbreaks due to raw milk consumption reported to the CDC. These outbreaks have made 710 people ill and hospitalized more than 30 including 6 children who suffered kidney failure. The cost of an outbreak can include medical bills as high as \$1 Million and public health staff can spend more than 250 hours (average) investigating an illness outbreak related to raw milk.

Raw milk accounts for approximately 1-3% of all milk sales in the United States while it is responsible for 97-99% of all milk-related outbreaks. The CDC has calculated that outbreaks related to raw milk occur 150 times more often than outbreaks associated with pasteurized milk.

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Bottle and Can Deposit

Position Statement

Policy Recommendations:

Expand the current law to include all beverage containers and increase the deposit and/or handling fees. Any increase in handling fees should be used to support and encourage bottle and can recycling centers. A study conducted at Iowa State University determined that this expansion would create over 300 jobs in Iowa, result in 506 million additional bottles/cans being recycled every year and use less space in Iowa's existing landfills.

Background:

Iowa's Beverage Containers Deposit Law, known as the "Bottle Bill," has reduced the litter removal costs to highway and park departments, resulting in tax savings to the citizens of Iowa. Easy access to recyclers is essential for this success to continue.

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Local Public Health Funding

Position Statement

Policy Recommendations:

The legislature should allocate funding directly to LPHAs for program implementation. More specifically, direct funding should support emergency and bioterrorism response activities, core public and environmental health programs, public health modernization, and community wellness initiatives.

Background:

For years, the Iowa legislature and, consequently, state offices, have placed increased financial demands on local public health agencies (LPHAs). For example, currently in Iowa, no state funding is directly appropriated to LPHAs for emergency preparedness activities. Funds passed down from the Public Health Emergency Preparedness Cooperative Agreement often do not reach LPHAs. Similarly, public health modernization may be establishing new directions for public health in Iowa, but limited state funding will likely place the burden of fiscal responsibility on the shoulders of LPHAs. Unfunded mandates, additional program requirements without funding increases, and rising costs of existing programs all require a stretched dollar.

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Zoning and Subdivision Wastewater System Review

Position Statement

Policy Recommendations:

Require preliminary and final plats for residential developments be reviewed by the local board of health or authorized representative of the board of health prior to approval by the zoning commission and the governing body.

Background:

Many subdivisions in Iowa have inadequate sewer systems. Existing subdivisions were built without provisions for future on-site wastewater treatment and disposal needs. This lack of planning has caused financial hardship for some homeowners when the conventional systems prove inadequate and more expensive alternatives are required. Current zoning and subdivision regulations do not require that subdivision plans be reviewed or approved by the local board of health or its representative. By failing to require coordination with the entity that must develop and approve on-site wastewater treatment and disposal systems, developers may plat the property with inadequate lot sizes and fail to account for the needs of future waste disposal in the subdivision.

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Surface Water Quality

Position Statement

Policy Recommendations:

Testing of surface water should be continued in order to protect the health and safety of the public and aquatic life. The pollution source should be found, a notice should be posted in the affected area, the pollution should be cleaned up, and another notice stating the pollution has been removed should be posted. Cooperation between the Iowa Department of Natural Resources, the Iowa Department of Agriculture and Land Stewardship and local health and conservation entities needs to continue.

Background:

Increased pollution and water run-off has led to contamination of Iowa's wetlands, lakes and streams. This has an adverse affect on public health and public enjoyment of the waters, and the propagation and protection of fish, shellfish, and wildlife.

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Master Matrix Review and Livestock Feeding Operations Setback

Position Statement

Policy Recommendations:

Pass legislation that addresses deficiencies in the existing law and the master matrix. At minimum, this legislation should:

- Direct the Department of Natural Resources (DNR) to review the master matrix program with input from the Iowa State Association of Counties and the Iowa State Association of County Supervisors, among other stakeholders, to determine if separation distances are adequate to protect human health, the environment, property values, and community quality of life.
- Afford county and city owned wetlands the same special setback protections as state and federally owned “designated wetlands,” as found in Iowa Code §459.102(21).
- Designate waterfowl production areas, whether managed by DNR or not, as “public use areas” for applying setbacks; and amend Iowa Code §459.205(1) as follows: 1. A confinement feeding operation structure, if the structure is part of a confinement feeding operation which qualifies as a small animal feeding operation. However, this subsection shall not apply to the following: a) If the confinement feeding operation structure is an unformed manure storage structure. b) If the small animal feeding operation is no longer a small animal feeding operation due to common ownership or management of an adjacent confinement feeding operation as provided in Iowa Code §459. 201.

Background:

It has been several years since the setbacks pertaining to livestock feeding operations were enacted by the legislature. In the intervening years it has become apparent that there are some lands that are not adequately protected by the law and the master matrix. In addition, some loopholes allow confinement feeding operations to bypass intended setback distances from homes and public use areas.

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Alternative Energy Resources

Position Statement

Policy Recommendations:

The Legislature should provide grants to local governments to develop the capacity to conserve energy through these improved practices in technology.

Background:

Iowa's agricultural producers, educational institutions and industries are developing and using renewable fuels, such as E85 and biodiesel, and alternative energy resources, such as wind power and geothermal. Increasing the supply and quality of environmentally friendly renewable fuels and alternative energy resources will boost local industry and economic growth, reduce harmful emissions, provide a less costly fuel energy supply and reduce the dependence on foreign oil. This must be accomplished in a manner that balances the benefits achieved against the local environmental impacts of such production.

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Outdoor Air Quality

Position Statement

Policy Recommendations:

The Legislature should provide funding (through grants or appropriations) to support these two existing air quality programs. Funding should also be provided to start air quality programs in other counties across the state. The revenue generated by the IDNR through the permitting process should go to that agency and not into the general fund.

Background:

Poor air quality is unhealthy for everyone, but especially for children, senior citizens and people with respiratory conditions like asthma. With cleaner air, there are fewer trips to the emergency room and lower respiratory illness rates. It also keeps Iowa's wildlife and plant life thriving. Cleaner, healthier air requires local, regional and state partners that include the Iowa DNR, communities, business and industry, organizations and private citizens to provide the knowledge and tools necessary to create workable solutions to air quality issues.

Currently, DNR has delegated the authority to two local departments to conduct programs for the abatement, control, and prevention of air pollution in their respective county. These local departments are the Linn County Health Department Air Quality Division and the Polk County Public Works Air Quality Division. Program emphasis is placed on the collection and assessment of information regarding air quality, the permitting of sources of air emissions, the enforcement of emission limits and the attainment and maintenance of ambient air quality standards.

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Maintenance of Public Health Laws and Regulations

Position Statement

Policy Recommendations:

Proposals to change public health protections in the law should be initiated in response to new evidence based on sound scientific principles of disease prevention and environmental protection. Policy changes which affect current public health laws and regulations should be required to have an impact statement or assessment from the State Board of Health and/or organizations representing local public health agencies. Public health policy should not be made in a scientific vacuum but should have a thorough review by those charged with implementing the policies.

Background:

Public health laws and regulations are intended to protect the health of all Iowans. Such laws and regulations, therefore, must be based on sound scientific principles. State and Local Boards of Health are established to provide unbiased and apolitical direction to public health policy and implementation and establish an additional layer of protection from direct political manipulation on important matters of public health.

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