- (C) THE SECRETARY SHALL TARGET EFFORTS TO PROMOTE AND TO PROVIDE LEAD POISONING SCREENING TO AREAS OF HIGHEST RISK, AS IDENTIFIED BY FACTORS INCLUDING, BUT-NOT LIMITED TO:
- (1) <u>CENSUS TRACT INFORMATION NOTING AREAS</u> <del>CENSUS TRACT INFORMATION NOTING AREAS GEOGRAPHIC AREAS</del> WITH LARGE CONCENTRATIONS OF PRE-1978 HOUSING: AND
- (2) HIGHEST RATES OF LEAD POISONING AS EVIDENCED BY INFORMATION PROVIDED TO AND BY THE CHILDHOOD LEAD REGISTRY ESTABLISHED AND MAINTAINED BY THE DEPARTMENT OF THE ENVIRONMENT.

## Article - Family Law

5-556.1.

WITHIN 30 DAYS AFTER A CHILD UNDER THE AGE OF 6 YEARS ENTERS CARE IN A FAMILY DAY CARE HOME, A PARENT OR GUARDIAN OF THE CHILD SHALL PROVIDE TO THE FAMILY DAY CARE HOME EVIDENCE OF AN APPROPRIATE SCREENING FOR LEAD POISONING. THIS EVIDENCE MAY INCLUDE DOCUMENTATION FROM THE CHILD'S CONTINUING CARE HEALTH CARE PROVIDER THAT THE CHILD WAS SCREENED THROUGH AN INITIAL QUESTIONNAIRE AND WAS DETERMINED NOT TO BE AT RISK FOR LEAD POISONING.

5-580.2.

WITHIN 30 DAYS AFTER A CHILD UNDER THE AGE OF 6 YEARS ENTERS CARE IN A CHILD CARE CENTER, A PARENT OR GUARDIAN OF THE CHILD SHALL PROVIDE TO THE CHILD CARE CENTER EVIDENCE OF AN APPROPRIATE SCREENING FOR LEAD POISONING. THIS EVIDENCE MAY INCLUDE DOCUMENTATION FROM THE CHILD'S CONTINUING CARE HEALTH CARE PROVIDER THAT THE CHILD WAS SCREENED THROUGH AN INITIAL QUESTIONNAIRE AND WAS DETERMINED NOT TO BE AT RISK FOR LEAD POISONING.

5-589.1.

WITHIN 30 DAYS AFTER A CHILD UNDER THE AGE OF 6 YEARS ENTERS CARE IN A CHILD CARE CENTER IN A STATE-OCCUPIED BUILDING, A PARENT OR GUARDIAN OF THE CHILD SHALL PROVIDE TO THE CHILD CARE CENTER EVIDENCE OF AN APPROPRIATE SCREENING FOR LEAD POISONING. THIS EVIDENCE MAY INCLUDE DOCUMENTATION FROM THE CHILD'S CONTINUING CARE HEALTH CARE PROVIDER THAT THE CHILD WAS SCREENED THROUGH AN INITIAL QUESTIONNAIRE AND WAS DETERMINED NOT TO BE AT RISK FOR LEAD POISONING.

SECTION 2. AND BE IT FURTHER ENACTED, That, on or before January 1, 1998, the Department of the Environment, in collaboration with the Department of Health and Mental Hygiene, the Office for Children, Youth and Families, the Department of Human Resources, the Department of Housing and Community Development, the Department of Education, the Department of Budget and Fiscal Planning, and representatives of local health and environmental departments, shall develop and report to the Governor and, subject to § 2–1312 of the State Government Article, to the General Assembly on a statewide plan for coordinated case management