

CHAPTER 36CONTROLLED AND PRECURSOR SUBSTANCE
REGULATION AND REPORTING

H.F. 122

AN ACT relating to requiring reports for certain precursor substances and extending an information program for drug prescribing and dispensing and providing an effective date.

Be It Enacted by the General Assembly of the State of Iowa:

Section 1. Section 124B.2, subsection 1, Code 2009, is amended by adding the following new paragraphs:

NEW PARAGRAPH. y. Iodine

NEW PARAGRAPH. z. N-phenethyl-4-piperidone (NPP)

Sec. 2. 2006 Iowa Acts, chapter 1147, section 10, is repealed.

Sec. 3. Sections 124.551 through 124.558, Code 2009, are repealed June 30, 2011.

Sec. 4. EFFECTIVE DATE. The section of this Act that repeals 2006 Iowa Acts, chapter 1147, section 10, being deemed of immediate importance, takes effect upon enactment.

Approved April 2, 2009

CHAPTER 37REGULATION OF MISCELLANEOUS
PUBLIC HEALTH-RELATED ACTIVITIES

H.F. 314

AN ACT relating to health-related activities and regulation by the department of public health and making penalties applicable.

Be It Enacted by the General Assembly of the State of Iowa:

DIVISION I

LEAD-SAFE RENOVATORS AND CHILD-OCCUPIED FACILITIES

Section 1. Section 135.105A, Code 2009, is amended to read as follows:

135.105A LEAD INSPECTOR, AND LEAD ABATER, AND LEAD-SAFE RENOVATOR TRAINING AND CERTIFICATION PROGRAM ESTABLISHED — CIVIL PENALTY.

1. The department shall establish a program for the training and certification of lead inspectors, ~~and lead abaters, and lead-safe renovators~~. The department shall maintain a listing, available to the public and to city and county health departments, of lead inspector, ~~and lead abater, and lead-safe renovator~~ training programs that have been approved by the department, and of lead inspectors, ~~and lead abaters, and lead-safe renovators~~ who have successfully completed the training program and have been certified by the department. A person may be certified as ~~both a lead inspector, and a lead abater, or a lead-safe renovator, or may be certified to provide two or more of such services~~. However, a person who is certified as ~~both a lead inspector~~

and a lead abater holds more than one such certification shall not provide both inspection service and also provide abatement services service or renovation service at the same site unless a written consent or waiver, following full disclosure by the person, is obtained from the owner or manager of the site.

~~2. The department shall also establish a program for the training of painting, demolition, and remodeling contractors and those who conduct interim controls of lead-based paint hazards. The training shall be completed on a voluntary basis.~~

~~3. 2.~~ A person who owns real property which includes a residential dwelling and who performs lead inspection, ~~or lead abatement, or renovation~~ of the residential dwelling is not required to obtain certification to perform these measures, unless the residential dwelling is occupied by a person other than the owner or a member of the owner's immediate family while the measures are being performed. However, the department shall encourage property owners who are not required to be certified to complete the applicable training course to ensure the use of appropriate and safe lead inspection and, lead abatement, or lead-safe renovation procedures.

~~4. 3.~~ Except as otherwise provided in this section, a person shall not perform lead abatement or lead inspections, and shall not perform renovations on target housing or a child-occupied facility, unless the person has completed a training program approved by the department and has obtained certification pursuant to this section. All lead abatement and lead inspections, ~~and lead inspector, and lead abater, and lead-safe renovation training programs, and renovations on target housing or a child-occupied facility~~, shall be performed and conducted in accordance with work practice standards established by the department. A person shall not conduct a training program for lead inspectors, ~~or lead abaters, or lead-safe renovators~~ unless the program has been submitted to and approved by the department.

~~4.~~ A person who violates this section is subject to a civil penalty not to exceed five thousand dollars for each offense.

5. The department shall adopt rules regarding minimum requirements for lead inspector, lead abater, and lead-safe renovator training programs, certification, work practice standards, and suspension and revocation requirements, and shall implement the training and certification programs. The department shall seek federal funding and shall establish fees in amounts sufficient to defray the cost of the programs. Fees received shall be considered repayment receipts as defined in section 8.2.

Sec. 2. Section 135.105C, Code 2009, is amended to read as follows:

135.105C RENOVATION, REMODELING, AND REPAINTING — LEAD HAZARD NOTIFICATION PROCESS ESTABLISHED.

1. a. A person who performs renovation, remodeling, or repainting services ~~of for~~ target housing or a child-occupied facility for compensation shall provide an approved lead hazard information pamphlet to the owner and occupant of the housing or facility prior to commencing the services. The department shall adopt rules to implement the renovation, remodeling, and repainting lead hazard notification process under this section.

b. The rules shall include but are not limited to an authorization that the lead hazard notification to parents or guardians of the children attending a child-occupied facility may be completed by posting an informational sign and a copy of the approved lead hazard information pamphlet. The rules shall also address requirements for notification of parents or guardians of the children visiting a child-occupied facility when the facility is vacant for an extended period of time.

2. For the purpose of this section and section 135.105A, “target unless the context otherwise requires:

a. (1) “Child-occupied facility” means a building, or portion of a building, constructed prior to 1978, that is described by all of the following:

(a) The building is visited on a regular basis by the same child, who is less than six years of age, on at least two different days within any week. For purposes of this paragraph “a”, a week is a Sunday through Saturday period.

(b) Each day's visit by the child lasts at least three hours, and the combined annual visits total at least sixty hours.

(2) A child-occupied facility may include but is not limited to a child care center, preschool, or kindergarten classroom. A child-occupied facility also includes common areas that are routinely used by children who are less than six years of age, such as restrooms and cafeterias, and the exterior walls and adjoining space of the building that are immediately adjacent to the child-occupied facility or the common areas routinely used by children under the age of six years.

b. "Target housing" means housing constructed prior to 1978 with the exception of housing for the elderly or for persons with disabilities and housing that does not contain a bedroom, unless at least one child, under six years of age, resides or is expected to reside in the housing. ~~The department shall adopt rules to implement the renovation, remodeling, and repainting lead hazard notification process.~~

3. A person who violates this section is subject to a civil penalty not to exceed five thousand dollars for each offense.

DIVISION II NEWBORN AND INFANT HEARING SCREENING

Sec. 3. Section 135.131, Code 2009, is amended to read as follows:

135.131 UNIVERSAL NEWBORN AND INFANT HEARING SCREENING.

1. For the purposes of this section, unless the context otherwise requires:

a. "Birth center" means birth center as defined in section 135.61.

b. "Birthing hospital" means a private or public hospital licensed pursuant to chapter 135B that has a licensed obstetric unit or is licensed to provide obstetric services.

2. ~~Beginning January 1, 2004, all~~ All newborns and infants born in this state shall be screened for hearing loss in accordance with this section. The person required to perform the screening shall use at least one of the following procedures:

a. Automated or diagnostic auditory brainstem response.

b. Otoacoustic emissions.

c. Any other technology approved by the department.

3. ~~a. Beginning January 1, 2004, a~~ A birthing hospital shall screen every newborn delivered in the hospital for hearing loss prior to discharge of the newborn from the birthing hospital. A birthing hospital that transfers a newborn for acute care prior to completion of the hearing screening shall notify the receiving facility of the status of the hearing screening. The receiving facility shall be responsible for completion of the newborn hearing screening.

b. The birthing hospital or other facility completing the hearing screening under this subsection shall report the results of the screening to the parent or guardian of the newborn and to the department in a manner prescribed by rule of the department. The birthing hospital or other facility shall also report the results of the hearing screening to the primary care provider of the newborn or infant upon discharge from the birthing hospital or other facility. If the newborn or infant was not tested prior to discharge, the birthing hospital or other facility shall report the status of the hearing screening to the primary care provider of the newborn or infant.

4. ~~Beginning January 1, 2004, a~~ A birth center shall refer the newborn to a licensed audiologist, physician, or hospital for screening for hearing loss prior to discharge of the newborn from the birth center. The hearing screening shall be completed within thirty days following discharge of the newborn. The person completing the hearing screening shall report the results of the screening to the parent or guardian of the newborn and to the department in a manner prescribed by rule of the department. Such person shall also report the results of the screening to the primary care provider of the newborn.

5. ~~Beginning January 1, 2004, if~~ If a newborn is delivered in a location other than a birthing hospital or a birth center, the physician or other health care professional who undertakes the pediatric care of the newborn or infant shall ensure that the hearing screening is performed within three months of the date of the newborn's or infant's birth. The physician or other

health care professional shall report the results of the hearing screening to the parent or guardian of the newborn or infant, to the primary care provider of the newborn or infant, and to the department in a manner prescribed by rule of the department.

6. A birthing hospital, birth center, physician, or other health care professional required to report information under subsection 3, 4, or 5 shall report all of the following information to the department relating to a newborn's or infant's hearing screening, as applicable:

a. The name, address, and telephone number, if available, of the mother of the newborn or infant.

b. The primary care provider at the time of the newborn's or infant's discharge from the birthing hospital or birth center for the newborn or infant.

c. The results of the hearing screening.

d. Any rescreenings and the diagnostic audiological assessment procedures used.

e. Any known risk indicators for hearing loss of the newborn or infant.

f. Other information specified in rules adopted by the department.

7. The department may share information with agencies and persons involved with newborn and infant hearing screenings, follow-up, and intervention services, including the local birth-to-three coordinator or similar agency, the local area education agency, and local health care providers. The department shall adopt rules to protect the confidentiality of the individuals involved.

~~8. An area education agency with which information is shared pursuant to subsection 7 audiologist who provides services addressed by this section shall conduct diagnostic audiological assessments of newborns and infants in accordance with standards specified in rules adopted by the department. The audiologist shall report all of the following information to the department relating to a newborn's or infant's hearing, follow-up, diagnostic audiological assessment, and intervention services, as applicable:~~

a. The name, address, and telephone number, if available, of the mother of the newborn or infant.

b. The results of the hearing screening and any rescreenings, including the diagnostic audiological assessment procedures used.

c. The nature of any follow-up or other intervention services provided to the newborn or infant.

d. Any known risk indicators for hearing loss of the newborn or infant.

e. Other information specified in rules adopted by the department.

9. This section shall not apply if the parent objects to the screening. If a parent objects to the screening, the birthing hospital, birth center, physician, or other health care professional required to report information under subsection 3, 4, or 5 to the department shall obtain a written refusal from the parent, shall document the refusal in the newborn's or infant's medical record, and shall report the refusal to the department in the manner prescribed by rule of the department.

10. A person who acts in good faith in complying with this section shall not be civilly or criminally liable for reporting the information required to be reported by this section.

DIVISION III PUBLIC HEALTH DISASTER AUTHORITY

Sec. 4. Section 135.140, subsection 6, paragraph b, Code 2009, is amended by adding the following new subparagraph:

NEW SUBPARAGRAPH. (4) Short-term or long-term physical or behavioral health consequences to a large number of the affected population.

Sec. 5. Section 135.140, subsection 7, Code 2009, is amended to read as follows:

7. "Public health response team" means a team of professionals, including licensed health care providers, nonmedical professionals skilled and trained in disaster or emergency response, and public health practitioners, which is sponsored by a hospital or other entity and

approved by the department to provide disaster ~~medical~~ assistance in the event of a disaster or threatened disaster.

Sec. 6. Section 135.141, subsection 2, paragraphs b, g, and i, Code 2009, are amended to read as follows:

b. Coordinate with federal, state, and local agencies and officials, and private agencies, organizations, companies, and persons, the administration of emergency planning, response, and recovery matters that involve the public health.

g. Conduct or coordinate public information activities regarding emergency and disaster planning, response, and recovery matters that involve the public health.

i. Establish and coordinate other programs or activities as necessary for the prevention, detection, management, and containment of public health disasters, and for the recovery from such disasters.

Sec. 7. Section 135.143, subsection 1, paragraph b, Code 2009, is amended by adding the following new subparagraphs:

NEW SUBPARAGRAPH. (6) During or after a natural occurrence or incident, including but not limited to fire, flood, storm, drought, earthquake, tornado, or windstorm.

NEW SUBPARAGRAPH. (7) During or after a man-made occurrence or incident, including but not limited to an attack, spill, or explosion.

Sec. 8. Section 135.143, Code 2009, is amended by adding the following new subsection:

NEW SUBSECTION. 1A. The department shall provide by rule a process for registration and approval of public health response team members and sponsor entities and shall authorize specific public health response teams, which may include but are not limited to disaster assistance teams and environmental health response teams. The department may expedite the registration and approval process during a disaster, threatened disaster, or other incident described in subsection 1.

Sec. 9. Section 135.144, Code 2009, is amended by adding the following new subsection:

NEW SUBSECTION. 12. Temporarily reassign department employees for purposes of response and recovery efforts, to the extent such employees consent to the reassignments.

Approved April 2, 2009

CHAPTER 38

CONFINEMENT FEEDING OPERATIONS — STOCKPILING DRY MANURE

H.F. 735

AN ACT providing for the stockpiling of dry manure originating from confinement feeding operations, making penalties applicable, and providing an effective date.

Be It Enacted by the General Assembly of the State of Iowa:

Section 1. Section 459.102, Code 2009, is amended by adding the following new subsections:

NEW SUBSECTION. 20A. “Designated area” means a known sinkhole, a cistern, an abandoned well, an unplugged agricultural drainage well, an agricultural drainage well surface in-