Public Hearing

before

ASSEMBLY HOUSING
AND COMMUNITY DEVELOPMENT COMMITTEE

“The Committee will receive testimony from invited guests and the public on addressing mold, lead, and environmental concerns impacting affordable housing in the State”

LOCATION: Camden County College
Blackwood, New Jersey

DATE: October 16, 2018
10:00 a.m.

MEMBERS OF COMMITTEE PRESENT:

Assemblyman Benjie E. Wimberly, Chair
Assemblywoman Annette Chaparro, Vice Chair
Assemblyman William W. Spearman
Assemblywoman Shanique Speight
Assemblyman Robert D. Clifton

ALSO PRESENT:

Chris Jewett
Joseph Pezzulo
Office of Legislative Services
Committee Aides

Dorian Stanley
Assembly Majority
Committee Aide

Kristen Onto
Assembly Republican
Committee Aide

Meeting Recorded and Transcribed by
The Office of Legislative Services, Public Information Office,
Hearing Unit, State House Annex, PO 068, Trenton, New Jersey
PUBLIC HEARING NOTICE

The Assembly Housing and Community Development Committee will hold a public hearing on Tuesday, October 16, 2018 at 10:00 AM, Room 105, Connector Building - Civic Hall Atrium, Camden County College, Blackwood Campus, 200 College Drive, Blackwood, New Jersey.

The public may address comments and questions to Chris Jewett, Joe Pezzulo, Committee Aides, or make bill status and scheduling inquiries to Jaimie Cooper, Secretary, at (609) 847-3875, fax (609) 633-1228, or e-mail: OLSAideAHO@njleg.org. Written and electronic comments, questions and testimony submitted to the committee by the public, as well as recordings and transcripts, if any, of oral testimony, are government records and will be available to the public upon request.

The committee will receive testimony from invited guests and the public on addressing mold, lead, and environmental concerns impacting affordable housing in the State.

Those individuals presenting written testimony are asked to provide 15 copies to the committee aides on or prior to the date of the meeting.

Issued 10/5/18

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pnf: 1-71
Good morning.

At this time, we’re going to stand for the flag salute. (all recite Pledge of Allegiance)

At this time we’ll have our attendance.

MR. JEWETT (Committee Aide): Assemblyman Clifton.

ASSEMBLYMAN CLIFTON: Here.

MR. JEWETT: Assemblyman Spearman is joining us today.

ASSEMBLYMAN SPEARMAN: Present.

MR. JEWETT: And Assemblywoman Chaparro.

ASSEMBLYWOMAN ANNETTE CHAPARRO (Vice Chair): Here.

MR. JEWETT: And Chairman Wimberly.

ASSEMBLYMAN WIMBERLY: Here.

At this time-- This is our third hearing, and we plan on having hearings -- one more hearing in 2018; the next hearing will be November 29 at William Paterson University. And, in 2019, we will continue, and try to hit every part of the state; even parts, like Blackwood, that I could have taken a plane down here today, but-- (laughter) It is nice to get around the state and see different parts of New Jersey.

And at this time it is an honor and a privilege to have the President of the University here with us today, Mr. Donald Borden. We welcome you today, and we’d like you to bring greetings on behalf of the University.

DONALD A. BORDEN: Thank you, Assemblyman Wimberly.
It’s our honor to have members of the Assembly here on our campus.

When you talk about taking a plane down here to what people refer to as South Jersey -- I can tell you, in my role, I have to go up to the northern neck of the woods. And I wouldn’t trade that traffic that I deal with up there for anything down here. (laughter)

So we welcome you to this less-traveled part of the state. Certainly, we are very proud of what we do here. Assemblyman Spearman was a member of our Trustee Board, so it’s wonderful to have him back on campus today.

And I will just say -- speaking on behalf of the community colleges in New Jersey -- I think what we do is similar to what I know the Assembly tries to do. We try to take care of our constituents -- the students who we serve, and the communities, and businesses and industries that take our graduates and utilize their expertise to grow in our economy. We pride ourselves-- You know, a lot of people talk about community colleges being affordable. I think what’s often forgotten in that conversation is the outstanding instruction that goes on here as well.

Speaking to students who go to universities and colleges throughout Philadelphia and this region -- they compare our instructors and the quality of the course work they take with any of those universities that they attend. And I think, you know, affordable education and strong academic programs result in a very capable workforce that serves all of New Jersey.
So I just say that as a little commercial, since you’re all here for community colleges. I know that the Assembly regards what we do, just on a lot of the decisions that you make on our behalf as a sector.

And again, it’s great to have you here today, and having you doing purposeful work for the constituents who you serve.

So thank you very much.

ASSEMBLYMAN WIMBERLY: Thank you, Mr. President.

We appreciate you hosting us today.

MR. BORDEN: It’s our pleasure.

ASSEMBLYMAN WIMBERLY: And I think it’s only appropriate that we have Assemblyman Spearman bring greetings on behalf of his District.

ASSEMBLYMAN SPEARMAN: Good evening -- well, good morning, everyone.

I bring you greetings on behalf of Senator Nilsa Cruz-Perez, and Pat Jones, and the 5th District.

Welcome to Camden County College. I was lucky enough to serve on the Board here, as Don mentioned, for, I guess, Don -- what -- five years, four years?

MR. BORDEN: (off mike): Five years.

ASSEMBLYMAN SPEARMAN: Yes, five years.

And I am really a huge supporter of the county college system and what they do for our residents.

There are a lot of kids who wouldn’t be able to make it without county colleges. And I hope in the future we will continue to support the
county college system. And actually, I’m going to catch Don later on; I have a couple of ideas I want to bring by. (laughter)

Welcome; welcome to the 5th District.

ASSEMBLYMAN WIMBERLY: Thank, you Assemblyman.

So as we have done previously, we’re going to ask everybody who testifies today to stay within -- not go past four minutes. If you are less than four minutes, we really appreciate you.

But we’re going to start off today with Kelly McLaughlin from the Southern New Jersey -- I’m sorry; I don’t have my glasses on -- Perinatal Cooperative.

K E L L Y   M c L A U G H L I N: (Off mike) Yes.

ASSEMBLYMAN WIMBERLY: All right; is Kelly here?

Also Ben Haygood, Housing and Community Development Network of New Jersey.

Is Elyse Pivnick here?

B E N   H A Y G O O D: I don’t see Elyse, but she probably should be joining us any second now, Assemblyman.

ASSEMBLYMAN WIMBERLY: Okay, we’re fine.

MS. McLAUGHLIN: Oh, I go now?

ASSEMBLYMAN WIMBERLY: Yes, good morning; yes.

MS. McLAUGHLIN: Good morning.

So, good morning. Thank you, Chairman Wimberly, Vice Chairperson Chaparro, and members of the Committee for the opportunity to testify before you today.

As the Southern Regional Lead and Healthy Homes Coalition -- comprised of over 130 professionals in the fields of public health, health
care, housing, and social services, working together to eliminate childhood lead exposure -- our members are deeply concerned about the ever-growing need for housing to be free of lead hazards for all of the residents of our region and state.

In New Jersey, 2.4 million homes were built before 1978 -- before lead-based paint was banned -- representing two in every three New Jersey homes.

Every year, more than 5,800 New Jersey children test positive for elevated blood lead level, and 25 percent of all tested children have some detectable level of lead in their blood.

The Centers for Disease Control and Prevention states that there is no known identified safe blood lead level. Exposure to lead can seriously harm a child's health, increasing their risks for damage to the brain and nervous system; slowed growth and development; learning and behavior problems, such as reduced IQ, ADHD, juvenile delinquency, and criminal behavior; and hearing and speech problems.

The connection between health and housing has never been clearer when it comes to the subject of lead. Unfortunately, me and the members on my Coalition hear, time and time again, the heartbreaking stories of families in our communities that are unable to escape living in a lead-infested environment. The costs to remediate a home with lead-based paint hazards can cost tens of thousands of dollars, placing a financial burden on homeowners with children who have elevated blood lead levels.

For renters who live in pre-1978 homes, the situation is even more complex. Non-compliant landlords, the threat of eviction, and retaliation against tenants, insufficient relocation assistance, and simply
having nowhere else to go, are just some of hardships that many renters face when learning their homes are poisoning their child.

Lastly, we know that as long as renter-occupied homes remain hazardous, children who live in those homes will be at risk for exposure. The solution is to remove the lead hazards by holding landlords accountable for providing a safe, healthy, and affordable home for their tenants, and ensuring the availability of affordable remediation assistance for homeowners.

Every $1 spent on lead removal in homes yields a return of $17 in reduced costs associated with childhood lead exposure.

And I have some additional information about my Coalition, if you would like to receive it.

So that is it; thank you so much for all of your time.

ASSEMBLYMAN WIMBERLY: Any questions? (no response)
ASSEMBLYWOMAN CHAPARRO: No, not at this time.
ASSEMBLYMAN WIMBERLY: Thank you for that valuable information; obviously, something in New Jersey that’s been in the news way too often. And obviously, we’re now dealing with it in Newark, with the lead levels in the water.

So thank you for that information.

MS. McLAUGHLIN: Thank you.
MR. HAYGOOD: Thank you, Chairman.

And unfortunately, I’ll be mentioning a few things in the news as well. And unfortunately, that’s sometimes the only way we can make some change in some of these key issues.
But good morning; and thank you, Chairman Wimberly, and Vice Chair Chaparro, and members of the Committee, for this opportunity to testify today.

This is a really complex issue. I’m going to keep my comments really brief, because at the Network -- the Housing and Community Development Network of New Jersey -- we work with a wide variety of key partners, and some of them are in the audience today. People like Kelly, who run the Southern New Jersey Regional Lead and Healthy Homes Coalition; and then Chris Merkel, up there, in Monmouth Health, is part of the Central Coalition. The network is also working actively in the Northern Coalition; and we’re trying to bring folks together, because these are issues that are not new, unfortunately, to our communities.

Fourteen years ago, lead was found in the water here in Camden schools; 14 years ago. Today, after more than a decade, they are still using bottled water and water coolers at a cost of over $100,000 a year in Camden schools alone. Moreover, with over 80 percent of lead exposure coming from the housing in our community, this is only the tip of the iceberg.

Lead paint in the housing stock is by far the primary route of exposure. Approximately two out of every three homes -- as my colleague Kelly here said -- in New Jersey were built prior to 1978; and that means we have to assume that they have lead paint in their homes with their kids, because we don’t have the data that shows us specifically where that is.

I’m going to skip past some of the data -- because I’m not the subject matter expert here, and we have people who are talking through these -- and move on to yet another healthy homes toxin in our everyday
lives -- as community health workers, as community advocates -- and that’s mold. Astonishingly, in your community, there is a lack of any tenant regulations relating to mold. This has been clearly illustrated in the *Asbury Park Press* series “Renter Hell,” which I’m sure you’re familiar with.

Overall, there has been a failure to invest in our infrastructure. This is a complex issue. Affordable housing in itself is a complex issue; but when we start to bring in these issues that are becoming intertwined and are the same -- health is housing, in this case; housing is our health. We know that our zip code determines our lifespan much, much more than our genetic code these days. That is a fact. So if we know that -- we know that health is housing and housing is health, we have to invest in our infrastructure, especially in our cities, which are largely populated by poor, minority residents.

This development has a tremendous impact on all investment in our State’s ability to create jobs and improve our tax base. This is a win-win-win-win for all people.

The Network has a series of recommendations, that are listed in the testimony that I left you, we have submitted to address some these environmental concerns. We have a wide variety of policy initiatives; however, a few key ones that address lead and mold, and that have been recurring issues for as long as I’ve been working on these issues, which has been quite a while.

Specifically, we encourage Legislators and the Administration to close the loophole allowing one- and two-family homes from being inspected for lead, okay? Currently, one- and two-family homes are not
being inspected for lead at rental turnover. Assembly Bill 1876 will close that loophole.

And also, additionally, to require a Lead-Safe Certificate prior to home sale and rental turnover. Assembly Bill 1877 will address that and require that certificate at rental turnover. There’s nothing currently required.

Additionally, regarding mold -- we additionally support Assembly Bill 1433, requiring the DCA to establish procedures for the inspection and abatement of mold in homes and schools, and certification programs for mold inspectors and workers. We think that’s the baseline minimum for mold in this state.

It is time to bring the health of New Jersey’s homes and communities to the forefront of our conversation.

Thank you for your time.

ASSEMBLYWOMAN CHAPARRO: Thank you.

ASSEMBLYMAN WIMBERLY: Thank you.

Do we have any questions?

ASSEMBLYWOMAN CHAPARRO: I’m saving my questions.

(laughter)

ASSEMBLYMAN WIMBERLY: Saving them? Okay.

ASSEMBLYMAN CLIFTON: I just have one quick question.

MR. HAYGOOD: Please.

ASSEMBLYMAN WIMBERLY: Yes, Assemblyman.

ASSEMBLYMAN CLIFTON: Lead inspection -- what is that? How does one go about-- One- and two-family homes are exempt. For the ones that aren’t exempt, what is the process to test the home for lead paint?
MR. HAYGOOD: I’m actually going to defer to some of my subject matter experts here.

So Kelly, if you don’t want to discuss that, I’m sure Chris could. But if you want to take a stab at it--

MS. McLAUGHLIN: Chris would probably be better.

MR. HAYGOOD: Yes; so Chris talks about it, yes.

Chris is going to be working directly with the County; and we’re really providing organizational capacity and support to these local boards of health.

But the bottom line is, is that the regulations -- they’ve found a way for them to get around inspecting one to two, so they are inspecting them higher than that; but there simply is no requirement for them to inspect one and twos.

But each county has a specific lead inspector, and they have to do it. There are certain triggers that require that action to occur.

And I think Chris could touch on that.

ASSEMBLYMAN CLIFTON: I’ll wait for Chris to come up.

MR. HAYGOOD: Thanks.

ASSEMBLYMAN CLIFTON: Thank you.

ASSEMBLYMAN WIMBERLY: Thank you very much.

We have Doctor Paschal Nwako from Camden County Health Center.

P A S C H A L  N W A K O, Ph.D.: (off mike) Yes.

ASSEMBLYMAN WIMBERLY: Thank you, Doc.

And Chris Merkel, Monmouth County Health Officer.
CHRISTOPHER P. MERKEL: Good morning, Mr. Chairman; good morning members of the Committee.

Thank you for the opportunity to speak before the Committee at this hearing.

I’d encourage the Committee to reach out to us in the future, if you have future Committee hearings on this topic or other public-related topics.

My name is Chris Merkel; I'm the Health Officer of the Monmouth County Health Department. I’m also with Dr. Nwako; we are both Executive Committee people on the New Jersey Association of County and City Officials. That is the State association that represents the majority of local health departments throughout the entire State of New Jersey.

So we are your subject matter experts when it comes to these public health-related issues.

So I have some testimony; and then if you have -- if you would like to ask some questions of us.

So we appreciate the opportunity this morning to speak to the Committee on the topic of lead and mold, and its effect on housing and affordable housing.

Local health departments throughout New Jersey deal with this issue on a regular basis, and we are the agencies delegated by statute to investigate childhood lead poisoning cases throughout the state. As per N.J.A.C. 8:51, the childhood lead poisoning regulation, local health departments investigate cases where a child has a blood lead level of 5 micrograms per deciliter or higher, based on regulations.
Health departments focus on identification and management of individual cases of elevated blood lead levels. They also oversee environmental interventions to control the identified lead hazards and prevent further exposure.

Part of the local health departments’ responsibility is to ensure responsible parties relocate the lead-burdened child or children to lead-safe housing. Most of the affordable housing is older housing stock, built pre-1978, when lead was starting to be phased out of paint. Older homes are more likely to contain lead-based paint, as we are aware.

According to the EPA, 87 percent of the homes built before 1940 contain lead-based paint; 69 percent of the homes built between 1940 and 1950 contain lead-based paint; and 24 percent of the homes built between 1960 and 1977 contain lead-based paint.

Since the majority of funding for the relocation of families with lead-burdened children is no longer available, health departments have found it increasingly difficult to get landlords to comply with the law. Most cases end up in court for months and, in extreme cases we’ve seen years, while the lead-burdened child is still exposed to lead-based paint chips and lead dust.

Most of the regulations local health departments enforce are responding to a child who has already been lead-burdened. More primary prevention efforts are needed to lessen the impact to the families and children. So we enforce regulations when the child is already poisoned; so we need to look for more primary prevention efforts, and help these children not get lead-burdened in the first place.
So I have a couple of recommendations on behalf of my Association.

Create laws requiring a lead hazard inspection prior to occupancy of the dwelling, as was already stated. This measure would be an effective method of primary prevention and help reduce the number of children with elevated blood lead levels.

Increasing collaboration between housing, community development, code enforcement, and health departments to increase the number of lead-safe housing units available would be an effective primary prevention strategy.

Increased enforcement of the EPA Renovation, Repair, and Painting -- otherwise known as RRP regulations -- would also assist, as New Jersey is not currently funded for enforcement of these regulations.

And also, last but not least, increase the amount of relocation funding -- again, as has already been discussed -- for lead-burdened children and their families.

We have a specific example, Mr. Chairman, going on right now.

One of my towns in Monmouth County -- we have a single mother with two special needs children. She rents; one of her children has an elevated blood lead level, and it has been a nightmare finding relocation for this family, even with DCA’s direct involvement. So that’s just one example of the problems that we see. This particular case has been in the court system for over six months; the court’s not moving on it. That’s another issue; these cases sit in court for months and months; even years. We had one -- over two years in court. And it’s an ongoing problem, because finding an affordable house for this single mother and her two
special needs children in Monmouth County, and across the state, has been very challenging just because of the housing costs.

And a lot of the older housing stock -- as I already testified -- is the affordable housing. And most of that, as we know, contains lead-based paint. So we have to ensure, by statute, that where we’re relocating the families is lead-safe. It’s very challenging to do that today.

ASSEMBLYMAN WIMBERLY: Any questions before we move on?

ASSEMBLYMAN SPEARMAN: No.

ASSEMBLYWOMAN CHAPARRO: I just -- I actually have a--

ASSEMBLYMAN WIMBERLY: I’m sorry; Chairwoman.

ASSEMBLYWOMAN CHAPARRO: Sorry; I just have-- It’s overwhelming, because -- especially in housing, whereas they’re under HUD rules. There are a lot of apartments that have mold or lead. And to help one family you have to help the next family, the next family. It just seems like an overwhelming number.

MR. MERKEL: It is.

ASSEMBLYWOMAN CHAPARRO: At what point -- how do we make sure that local municipalities do their part to step up, instead of-- It looks like the State takes a little bit longer, or it seems like everyone is pointing the finger as to where to go and how to--

MR. MERKEL: A lot of finger-pointing.

ASSEMBLYWOMAN CHAPARRO: Right. So in the meantime, families suffer.

MR. MERKEL: That’s correct.
ASSEMBLYWOMAN CHAPARRO: So there are also housing authorities where they claim to clean the mold, when all they’re doing is just painting over it.

MR. MERKEL: That’s correct.

ASSEMBLYWOMAN CHAPARRO: So we have a lot of work to do; but where can we start, especially locally, to just make sure that everyone does their part? Because it’s a lot of families. It’s not like we’re just trying to find one family and relocate them; there’s a long list, and I think that’s where it gets lost and, maybe, falls through the cracks -- because there are so many.

MR. MERKEL: Yes. Well, I don’t know that there’s any simple answer to your question, obviously.

ASSEMBLYWOMAN CHAPARRO: Right; there never is.

MR. MERKEL: But I believe that the inspections prior to CO -- Certificate of Occupancies -- would assist.

ASSEMBLYWOMAN CHAPARRO: Yes.

MR. MERKEL: I also think it also starts with a dialogue. We live in silos, here, in the State of New Jersey. So open communication amongst groups; getting Housing involved, Community Development involved, Health involved would be helpful.

ASSEMBLYWOMAN CHAPARRO: Right.

MR. MERKEL: You know, the example I gave you of the single mother with the two special needs children. You may -- the Committee may or may not know that we enforce different regulations, enforced by different State agencies, and those agencies typically don’t talk.

ASSEMBLYWOMAN CHAPARRO: Right.
MR. MERKEL: So that’s another issue.

ASSEMBLYMAN WIMBERLY: So where can the DCA step in and increase the supervision and the structure of this, as a recommendation, I’m asking?

MR. MERKEL: Well, what I would recommend is that the DCA talk to their counterparts at the Department of Health who actually oversee N.J.A.C. 8:51. Because DCA is more abatement and renovation; N.J.A.C. 5:17 speaks to the abatement and renovation of houses for lead paint hazards. But the State Department of Health deals with 8:51, which triggers an intervention once a child is found to be lead-burdened. So those two agencies, at the lower levels, need to communicate. We’re seeing, right now, that that’s not happening in the scenario that we’re dealing with.

ASSEMBLYMAN WIMBERLY: It’s not happening.

MR. MERKEL: It just doesn’t happen; and that’s part of the problem, in my opinion.

ASSEMBLYMAN WIMBERLY: Thank you.

One second; I’m sorry.

Assemblyman.

ASSEMBLYMAN CLIFTON: Yes, I just wanted to follow up on my question from the last--

MR. MERKEL: Yes.

ASSEMBLYMAN CLIFTON: So what’s the process for these inspections? How do you test for lead in a home?

MR. MERKEL: Yes, Assemblyman, when we get involved at the County Health level, it’s based on the N.J.A.C. 8:51 regulation. So when a child is found to have an elevated blood lead level, then that triggers
a nursing intervention by our Department. So we have a Public Health Nurse go out to the house, speak to the family, and try to find sources of lead within the home.

Also, a certain blood lead levels triggers the environmental investigation part, where our licensed -- they’re called *lead inspector risk assessors*. They go through a 40-hour class, they get certified, they take a State test to evaluate environmental lead hazards within the home. So they do a thorough investigation in conjunction with--

ASSEMBLYMAN CLIFTON: So they take paint samples--

MR. MERKEL: Yes.

ASSEMBLYMAN CLIFTON: --on window sills--

MR. MERKEL: They take paint chips samples, lead dust wipes; they can take soil samples, if they identify a playground at the house where the child plays, you know, to make sure they’re not eating-- Little children put everything in their mouth. So lead paint chips ingestion is how the lead gets into the body of the small children, and it can have irreparable health effects for the rest of their life.

ASSEMBLYMAN CLIFTON: And if it’s found to be, then the owner has to remediate?

MR. MERKEL: That’s correct. If it’s found -- if lead hazards are found within the home, then we issue what’s called a *lead abatement order*, ordering the landlord to remediate those lead hazards using a certified lead abatement contractor that DCA has a list of.

ASSEMBLYMAN CLIFTON: Thank you.

MR. MERKEL: You’re welcome.
ASSEMBLYMAN WIMBERLY: Are there issues with staffing-- do you have enough staff to cover all of these inspections?

MR. MERKEL: That’s interesting, Mr. Chairman, that you bring that up. Because since the blood lead level has reduced to 5, I know some local health departments have found it challenging. I mean, Dr. Nwako can speak to Camden City; I mean, there are a lot-- many cases in the City of Camden, as we are aware of.

But it has been found challenging, because we’ve seen a dramatic increase in the amount of children-- Because once you lower the level and you start screening more children, you’re going to find more lead-burdened children.

ASSEMBLYMAN WIMBERLY: Okay.

And my last question for you-- in the State of New Jersey, are there particular areas that are experiencing, in particularly, lead issues?

MR. MERKEL: All across the state.

ASSEMBLYMAN WIMBERLY: It’s across, regardless of--

MR. MERKEL: It crosses geographical boundaries, it crosses socio-economic status boundaries, it crosses everything.

ASSEMBLYMAN WIMBERLY: And how about mold?

MR. MERKEL: Mold as well. I know I haven’t spoken directly about mold, because mold is more challenging. There are no regulations governing mold, so we do our best to work with housing inspectors and code officials in the municipalities. Because they are really the ones who can deal with this.

ASSEMBLYMAN WIMBERLY: And I got that.
Now, with your expertise, with the experiences of Sandy, and Floyd, and all these storms--

MR. MERKEL: Yes.

ASSEMBLYMAN WIMBERLY: --has this increased the mold problems that we’ve had in the State of New Jersey? Or is that just a national issue, or an East Coast issue?

MR. MERKEL: I would venture a guess and say it’s a national issue. Because the more water, the more storms we get-- We just saw Hurricane Michael blow through the Panhandle of Florida.

ASSEMBLYMAN WIMBERLY: And then with the temperatures, you know--

MR. MERKEL: Yes, high humidity, high temperature--

ASSEMBLYMAN WIMBERLY: --eight-five degrees in October--

MR. MERKEL: That does not help; that’s correct.

ASSEMBLYMAN WIMBERLY: --I mean, stuff like that. That doesn’t help; not at all.

MR. MERKEL: So yes--

ASSEMBLYMAN WIMBERLY: So this is an issue that we’ll be facing down the line, probably more with this--

MR. MERKEL: Well, we’re facing it now; yes, absolutely.

ASSEMBLYMAN WIMBERLY: Okay.

MR. MERKEL: Yes, yes, mold is an issue everywhere, wherever you have high humidity. A lot of the older housing stock -- you know, it’s incumbent upon the landlords to upkeep; sometimes they don’t.
So there are ongoing water intrusion issues. That’s where you run into a potential problem with health effects from mold.

ASSEMBLYMAN WIMBERLY: And that’s what I was looking for -- the words *water intrusion*.

MR. MERKEL: Water intrusion.

ASSEMBLYMAN WIMBERLY: A major problem, I’m sure. Those are the words I was looking for.

MR. MERKEL: Yes, absolutely.

ASSEMBLYMAN WIMBERLY: Okay, thank you. Thank you; we appreciate it.

MR. MERKEL: You’re welcome.

ASSEMBLYMAN WIMBERLY: Doc.

DR. NWAKO: Okay.

So my name is Dr. Paschal Nwako. I am the Camden County Health Officer.

I am also an Executive Council Member of the New Jersey Association of City and County Health Officials, like Chris. I am the President of the New Jersey Public Health Association, and I am the Immediate Past President of the New Jersey Environmental Health Association. All these associations deal with mold and lead issues on a daily basis.

But I am here today on behalf of the New Jersey Association of City and County Health Officials.

We appreciate the opportunity to speak to all of you regarding these health issues: mold and lead.
So public health departments, as Chris said -- we operate under N.J.A.C. 8:51. We regulate childhood lead poison to New Jersey residents. This is mostly lead in paints. But what we do not-- Not everybody knows that lead does not only come from lead paint; it comes from other things like toys, like water. Everybody has heard about Flint, Michigan.

So we lay a lot of emphasis on lead paint, but we forget a lot of things. It comes from candies that children eat, traditional medicine, sindoor; it comes from jewelry, artificial turfs. Like children who go to play -- football, soccer, basketball, everything -- those are artificial turfs that they play -- that’s lead.

So all these issues combined to so many health issues that we face here in Camden County. In 2016, 9,127 children who are between the ages of less than 1 year to 6 years were screened for lead in Camden County. But 44,284 children were unscreened because we can’t force their parents to screen their children for lead.

ASSEMBLYMAN WIMBERLY: Now, where is this screening taking place? Is it during school period, or how is it--

DR. NWAKO: So it’s usually with a high lead level, and people who allow their children to be screened by their physician. So like Chris said, we get these cases when the children are already poisoned. So we need to prevent them from getting poisoned--

ASSEMBLYMAN WIMBERLY: And I don’t want to cut you off--

DR. NWAKO: Yes

ASSEMBLYMAN WIMBERLY: --because we’ll go in here, but--
DR. NWAKO: Sure.

ASSEMBLYMAN WIMBERLY: But the solution to screening in these high-lead areas -- what is your recommendation?

DR. NWAKO: The recommendation is to make it a law that all the children would be screened at some certain point.

ASSEMBLYMAN WIMBERLY: At what age? So you’re saying when they’re 6; where are we at?

DR. NWAKO: So we want them to be screened before they get to 6 years old.

ASSEMBLYMAN WIMBERLY: Okay.

MR. MERKEL: That’s what the law allows. And there is a provision that children need to be screened, but--

ASSEMBLYMAN WIMBERLY: And this is a law in Michigan, or anywhere else, that we could just take it and not--

DR. NWAKO: In some areas of the United States -- yes, they have that law; but we don’t. I think something is going on in the Assembly right now regarding that.

MR. MERKEL: Yes. There is a screening provision in New Jersey. The problem is, Mr. Chairman, that physicians give a script to the parents, and then the parents don’t follow up. So that’s a huge gap there. There is no follow-up after the doctors say, “Oh, here’s a script. Go get your kids lead-screened at the lab.” And if they do, great; if they don’t, then there’s your problem, there’s the gap there. There is no follow-up with physicians.

ASSEMBLYWOMAN CHAPARRO: Can I just ask a question?

ASSEMBLYMAN WIMBERLY: Yes, sure.
ASSEMBLYWOMAN CHAPARRO: So a couple of years ago -- when this whole thing with Flint, and water, and schools that had lead -- there was a lot of testing done in communities; Hoboken was one of them. There were these agencies that were coming in -- State and County -- that were coming in and testing anybody that wanted to be tested. Do we know what the follow-up of that was? How many kids were tested? Where did it go from there? Because we didn’t hear anything else after that.

DR. NWAKO: I can tell you about Camden County.

ASSEMBLYWOMAN CHAPARRO: Okay; because it was across the state, I know that. There were a lot of people who were panicking -- they were doing these tests.

ASSEMBLYMAN WIMBERLY: Well, yes, it was pretty concerning that you’re just giving somebody a script and saying, “Okay,” like -- and then there’s-- I was a classroom teacher--

ASSEMBLYWOMAN CHAPARRO: Well, this was actually testing. They were actually testing them at the scene.

ASSEMBLYMAN WIMBERLY: Well, then, the concern, I guess, is the follow-up.

ASSEMBLYWOMAN CHAPARRO: Right. So what happened with those stats?

DR. NWAKO: Well, the thing is, if you have in place this law, that if you have to go into daycare, or into preschool, or into a kindergarten, you have to have a lead test that shows that that child is clear of lead--

ASSEMBLYWOMAN CHAPARRO: Okay.
DR. NWAKO: --that would make it more stringent, and that would make parents make sure that they get their children tested.

ASSEMBLYWOMAN CHAPARRO: Right.

DR. NWAKO: So they get that prescription to go to test for lead, they have to follow up on that because their children will not get into daycare or into schools. But we don’t have that in place right now.

MR. MERKEL: I can’t -- we can’t speak to other jurisdictions--

DR. NWAKO: Yes.

MR. MERKEL: --what they did or did not do. I know there was a big campaign in Newark, maybe a year or two ago, to screen a lot of children.

But generally speaking, Mr. Chairman, we have a very low screening rate in this state. And we want to increase the screening rate. It’s sort of a double-edged sword, because if you increase the screening rate, then we will see more cases that the local health departments, that are already understaffed, will have to undertake. But certainly, our main mission is the public health and the protection of the children.

ASSEMBLYMAN WIMBERLY: I mean, that’s the bottom line.

MR. MERKEL: That is the bottom line.

ASSEMBLYMAN WIMBERLY: I don’t think there’s a double sword there.

MR. MERKEL: That is the bottom line.

DR. NWAKO: Okay, so let me go ahead.

ASSEMBLYMAN WIMBERLY: I’m sorry, Doctor.
DR. NWAKO: There must be a collaboration between so many agencies within each municipality; so between the health department, code enforcement, planning board, zoning board, and municipal housing departments to ensure health equity at all levels. So if you don’t have that collaboration, the left hand doesn’t know what the right hand is doing. And municipalities that have those entities coming together, working together, have proved that people live longer and healthier in those municipalities than when things don’t work together.

So I want to go into mold. Like Chris said, we do have regulations for mold, and that is a problem.

So the aftermath of Hurricane Sandy, a lot of houses had mold. We can only tell those people who live in those houses -- whether they are renting or they are their personal homes -- to fix the problem, water intrusion, and go see a physician.

But in other states, that’s not how it’s regulated. They have regulations. In Camden County, we do it differently. We might be the only county in the State of New Jersey that does have a mold inspector, somebody who really has to go out there. But it’s not regulated, so we can -- when we get to court, it’s hard for us to really win the case. But we try our best and make sure we don’t get to court. We try to work with the owners, with the responsible party, to fix the problem.

So we have an inspector who is trained nationally in mold regulations and remediations because we have a unique situation down here in the South, in Camden County.

So mold cannot survive without water. That’s the only thing that will survive -- that will make mold survive. Because of that, if you
eliminate water, you eliminate mold. So water intrusion -- it doesn’t matter if it’s a new home, an old home, anything in between -- you can get mold in your house. So we need regulation in the State of New Jersey to be able to regulate mold.

MR. MERKEL: Yes, and there are only guidelines, Mr. Chairman, for mold remediation. You may or may not be aware that anybody can call themselves a mold remediation expert in the State of New Jersey. There is no certification for testing or mold remediation. So, you know, somebody who has no experience in mold remediation can start a company tomorrow and call themselves John Doe’s Mold Expert Company, and tout themselves as a mold remediation specialist, where they have no experience.

ASSEMBLYMAN WIMBERLY: And do you have legislative recommendations for that so we can control that more, or address that with the Administration?

DR. NWAKO: We can come up with something.

MR. MERKEL: Yes, we can--

DR. NWAKO: (Indiscernible).

MR. MERKEL: --think about it. The tricky part is that there’s no standard, there are no laws--

ASSEMBLYMAN WIMBERLY: Is there a national standard that we can look to other--

MR. MERKEL: There are national standards that we can look at, yes.

ASSEMBLYMAN WIMBERLY: Then that’s what we’ll look into.
DR. NWAKO: Yes.

MR. MERKEL: Yes, there are.

So the State Department of Health maintains a mold remediation company list. But anybody can request to get on that list.

ASSEMBLYMAN WIMBERLY: I get that; and I guess we dealt with a lot of that during the storms -- and people came in, not being qualified to do what they have to do.

MR. MERKEL: That’s correct.

ASSEMBLYMAN WIMBERLY: And Doc, just real quick, can you give me a little more information on the New Jersey Environment and Health Association--

DR. NWAKO: Okay.

ASSEMBLYMAN WIMBERLY: -- and what it encompasses, as far as the State of New Jersey?

DR. NWAKO: Okay, so the New Jersey Environmental Health Association is a group of inspectors, those boots-on-the-ground that go out and inspect. They inspect restaurants, they inspect grocery stores, they inspect homes for mice, rats, roaches, bedbugs, in between. If you call for overgrown weeds or pools in the backyard that are full of mosquitos, those are the boots-on-the-ground who come out.

So I represent them in the State of New Jersey. Right now, we are about 650 members. But there are more people in New Jersey with that license; they are registered environmental health specialists. So we are the health inspectors in New Jersey.

And every day we receive calls regarding lead and mold. Most of the inspectors do have a lead license; because you have to have a
different license, like Chris said, to go and inspect, and test for lead in buildings. So inspectors find it easier to have both the registered environmental health specialist license and the lead license.

So we represent -- it's an association that represents those inspectors. Our website is www.njeha.org. So that's what we do; every year, twice a year, we have conferences, three-day conferences in Atlantic City at the Tropicana and somewhere else in North Jersey, to complement those inspectors in the south and in the north of New Jersey.

ASSEMBLYMAN WIMBERLY: All right; we appreciate it. And I'll talk to you offline afterwards to get more information.

Thank you very much.

DR. NWAKO: Thank you.

MR. MERKEL: Thank you.

ASSEMBLYMAN WIMBERLY: I'm sorry, guys. Stay still, there.

Any questions?

ASSEMBLYWOMAN CHAPARRO: Well, I just -- I just have a question.

ASSEMBLYMAN WIMBERLY: There are a lot of questions and concerns. (laughter)

ASSEMBLYWOMAN CHAPARRO: So if I understood -- you said there is no regulation governing mold.

DR. NWAKO: In New Jersey.

ASSEMBLYWOMAN CHAPARRO: In New Jersey.

DR. NWAKO: Correct.
ASSEMBLYWOMAN CHAPARRO: Okay. But New Jersey Health Department has this whole guideline for New Jersey residents on mold--

DR. NWAKO: Yes

ASSEMBLYWOMAN CHAPARRO: -- and how to -- basic tips for hiring consultants or remediation contractors.

ASSEMBLYMAN WIMBERLY: Who do not have to be certified.

ASSEMBLYWOMAN CHAPARRO: Right. So--

DR. NWAKO: There is no certification for mold contractors in New Jersey.

MR. MERKEL: Yes, and you have to be wary, because a lot of these companies-- Well, you have to remember, mold is everywhere, right?

ASSEMBLYWOMAN CHAPARRO: Right.

MR. MERKEL: So if somebody goes in and tests for mold, well, you’re going to find mold in the house, because it’s everywhere. And then they’ll say, “Oh, well, we can take care of that for you.” So you have to be very--

ASSEMBLYMAN WIMBERLY: And then you have predators who -- go on senior citizens, and people who are not aware, and things of that nature.

MR. MERKEL: Yes, sir; yes. You have to be very careful.

ASSEMBLYMAN WIMBERLY: So we definitely need some regulations.
MR. MERKEL: And there are many regulations about lead abatement; there are tons of regulations. There’s nothing regarding mold. Mold is very tricky, because mold affects everybody differently.

ASSEMBLYWOMAN CHAPARRO: Right.

MR. MERKEL: You may be affected differently than somebody else with a high level of mold and, you know, a compromised immune system. People -- the elderly, the young are more susceptible to higher levels of mold within a dwelling. And remember, people can be affected by outdoor molds as well.

DR. NWAKO: Yes.

MR. MERKEL: So it’s seasonal allergies. So it’s very tricky.

ASSEMBLYWOMAN CHAPARRO: Okay, thank you.

ASSEMBLYMAN WIMBERLY: Assemblyman.

ASSEMBLYMAN SPEARMAN: Yes, tell me a little bit more about mold, really quick. How many types of mold are there that are harmful to people? Are there, like, hundreds, thousands?

DR. NWAKO: Okay, so let me take a stab at it.

MR. MERKEL: You want-- (laughter) Go ahead, go ahead.

DR. NWAKO: So there are a lot of molds -- in color-wise, in structure-wise. And it grows everywhere. We have mold in this room right now.

So when we go out to test for mold, what we use is the outside test that we -- the outside mold level, and then we compare it with the inside mold level. If the inside is more than the outside, we know that there is something growing mold inside this environment.
So like Chris said, we can have -- I can walk into a room now with a high level of mold and I’ll start sneezing. You will not, if you are not asthmatic, if you’re not immune compromised, you’re not going through cancer treatment or things like that. Mold affects children and the elderly more than it affects a younger person. So the treatment-- Mold can cause more problems, like, if you’re going to treatment for a different kind of disease, and then you inhale mold, it can even cause more problems to you than initially when you don’t have -- you didn’t come in contact with that mold inside a dwelling.

So people overlook mold; but it can really kill. It causes a lot of health issues.

So that’s as much as I can tell you now about mold, right here, where were sitting. But it’s a huge, huge problem in the State of New Jersey.

MR. MERKEL: If I may just elaborate--

DR. NWAKO: Sure.

MR. MERKEL: --just for a moment.

So just to add to what Dr. Nwako was saying. There are tons of different species of mold. Some are good; some can cause ill health effects in people. I mean, you have to remember, some of our antibiotics were derived from mold: penicillium, the species of mold was created to use penicillin. So there are lot of things that mold does in nature that are good. It breaks down dead matter and those different things. It has a very important role in our environment. Where we run into a problem with health, when we talk about ill health effects in people and mold, it’s where an ongoing water intrusion problem has persisted and it has not been dealt
with. Mold typically starts growing within 24 to 48 hours within a structure; and when we see rapid mold growth of mold spores within a dwelling, when people inhale them they can get pretty sick. It really affects children who have underlying health conditions -- asthma, like the Doc said, cancer patients. It can really hospitalize them and make them gravely ill.

So that’s why we encourage people to -- when there is a water intrusion problem--. We’re seeing more in the news now with the schools that close up for the summer, no fresh air ventilation into the building; and they wonder, when they walk into the school in August and September, why there’s mold growing on the books and everywhere. It’s because they closed the school up for the summer, and there was no ventilation going into the building.

So that’s a quick summation about mold.

ASSEMBLYMAN SPEARMAN: Yes. I understand mold is a problem; I understand that it affects some people adversely.

What I am having a difficult time with is understanding how, through legislation -- other than requiring that people who do inspections or remediations for mold -- requiring them to have some type of certifications. I understand we need to do that; that’s something that can be done.

What I’m trying to get a grip on is, with all the different types of mold -- as you’ve just mentioned, some molds are beneficial -- it seems to me in order to prepare legislation, we’d have to, kind of, figure out what molds are bad, what molds are good, and how we could stop those molds. Do you understand what I’m saying?

MR. MERKEL: Yes.
ASSEMBLYMAN SPEARMAN: It just seems like a huge problem that’s difficult get a grip on.

MR. MERKEL: Yes.

ASSEMBLYMAN SPEARMAN: And that’s what I’m trying to understand.

MR. MERKEL: And Assemblyman, you--

ASSEMBLYMAN SPEARMAN: And it sounds like, maybe, I need to do a little more research.

DR. NWAKO: Yes; Florida is a state that got it together regarding mold regulations. If anybody can look at Florida’s standards, that’s the-- And they are also tied to the Federal standards.

So we need regulation; and the standards are cumbersome and they are difficult to understand. But it’s something that affects health. So the good part, the bad part -- it needs to be remediated. If you have a leaking water faucet underneath the sink that eats the wood, and then mold will grow in the floor, that’s a problem.

The kind of regulation we’re looking at is just for us to be able to take people to court and really win the case -- that the person who caused the mold to grow in the property did not remove it. So, say, for instance, the landlord rented a property to me; and then I found mold around the baseboard. And I called the landlord so many times; the landlord did not come to fix it. Along the line, one of my children started to get sick, asthmatic, bronchitis, things like that, during that period. I would personally tie it to that mold issue, okay?

So when we get to court -- at this point, nothing will happen, because we don’t have regulations for mold. But we can deal with the fact
that that landlord, or the person who caused the problem, fixed (sic) the problem during that time. But the underlying medical condition -- nobody will talk about that. That’s what we’re facing.

MR. MERKEL: Yes, any potential legislation, Assemblyman, I believe would need to be centered around stronger housing and construction codes and code enforcement; property maintenance ordinances dealing with water intrusion and timely repair of those issues.

When you start talking about health, and mold, and its effect on people, it’s very, very tricky. Because like I said previously, everybody is affected differently, health-wise. So that’s why you don’t see national standards about, “This level of mold is good, versus this mold level is bad.” I don’t think you’re ever going to see legislation centered around that, because it’s too hard to guess. It’s a medical issue. You don’t know the underlying health condition of the individuals--

ASSEMBLYMAN WIMBERLY: You guys have done a great job covering-- I’ve learned more about mold in the last 20 minutes than I’ve known my whole life. (laughter)

MR. MERKEL: Okay; we could talk all day.

ASSEMBLYMAN WIMBERLY: Yes, but put it this way. We’re going to invite you again for the next time we have an issue -- regardless of what it is -- to come in.

MR. MERKEL: Our pleasure; thank you.

DR. NWAKO: Thank you.

ASSEMBLYMAN WIMBERLY: So any more questions, Assemblyman? Anybody else?

ASSEMBLYWOMAN CHAPARRO: I’ll wait. (laughter)
ASSEMBLYMAN WIMBERLY: Thank you, guys.

MR. MERKEL: We can talk off line.

Thank you, Mr. Chairman.

DR. NWAKO: Thank you.

ASSEMBLYMAN WIMBERLY: We appreciate you; thank you.

Next, we have Nicholas Kikis, from the New Jersey Apartment Association.

And Nick, I apologize for butchering your name every time we get--

NICHOLAS KIKIS: (off mike) You said it better than most.

ASSEMBLYMAN WIMBERLY: Yes.

MR. KIKIS: I basically respond to anything. (laughter)

Good morning, Mr. Chairman, and members of the Committee.

My name is Nicholas Kikis; I am with the New Jersey Apartment Association. We represent the professional owners, managers, and developers of rental housing here in New Jersey.

I wanted to focus my testimony-- I’ve given you a written testimony as well. I wanted to focus my verbal remarks on two topics -- the key topics of this Committee hearing that we heard about earlier -- lead and mold.

On lead: One of the things I’ve wanted to highlight is, as it relates to multi-family housing, the New Jersey Apartment Association worked with the Legislature, worked with Senator Rice, as well as some of the leadership at the time, to really enact in New Jersey a very comprehensive set of regulations as it pertains to mold in family housing.
The Lead Hazard Control Assistance Act put significant standards, as it relates to maintaining multi-family rental housing in a safe way. And we’ve seen these regulations to be effective. Since they were adopted in -- or, I guess, the Bill was 2003; from 2003 to 2016, there has been a 600 percent reduction in cases of children with elevated blood lead levels. There is certainly still more work to be done, but the reductions we’ve seen have been dramatic.

To date, very few cases of lead poisoning are sourced to professionally managed rental housing. It’s a testament to the efforts that the industry has taken to remove lead, where feasible; to manage lead safely in place, where removal has not been feasible; as well as the DCA, as part of the five-year inspection, comes out and does an inspection to ensure that multi-family housing doesn’t have issues like chipping and peeling paint, or things of that nature.

One of the things about lead-based paint is, if you’re pre-1978 there’s a presumption -- unless you’re tested to be lead-free -- there’s a presumption that there’s lead in the property. That means that the owner needs to take certain steps to make sure that the property is lead-safe.

That means, when doing any sort of maintenance activity that could disturb the lead-based paint, the owner needs to make sure to, first, notify the tenants; they have to close off the worksite to make sure that dust doesn’t spread. They have to follow lead-safe work practices, which includes avoiding creating dust in the first place, cleaning up with a HEPA vacuum cleaner after the work is complete, and then doing dust wipe samples to determine that the worksite was appropriately cleaned and verified prior to anyone returning to that area.
That’s the requirement as part of State regulations. We’ve adopted HUD regulations; this is also a requirement under Federal regulations to meet the Renovation, Repair, and Painting rule, which is administered, currently, in New Jersey, by the Environmental Protection Agency.

So that’s a key pathway for lead exposure. And these regulations are effective at trying to control and mitigate that.

Additionally, friction surfaces -- things like doorjambs, window frames, where the paint could be disturbed just by normal use -- apartment owners are required to remove lead from those components.

And then chipping and peeling paint continues to be a large source. That’s where an apartment owner can proactively -- and, actually, is legally required to -- inspect that dwelling at every turnover, as well as annually, to ensure that there is no chipping and peeling paint. And that’s part of the DCA five-year inspection -- they’re looking at properties to ensure that the paint remains intact.

I really just wanted to, kind of, give that general overview, Assemblyman, to your question earlier: What processes and inspections take place for multi-family housing? The DCA five-year inspection -- there’s a special surcharge that’s paid for DCA to conduct a lead-safety inspection. So that’s certainly part of the comprehensive framework that’s out there.

As it pertains to mold -- as the gentlemen before me testified, there are literally hundreds of thousands of species of mold; they affect different people differently. Mold, as was mentioned, is everywhere in our environment. So it’s difficult to develop a specific standard where you say,
“This type of mold is a problem, or this species is a problem.” This isn’t, “This quantity is problem; this quantity isn’t.”

I think the approach that makes the most sense is to focus not on mold itself, but to focus on water -- moisture intrusion, water intrusion. There have been examples where there have been significant housing code issues that have led to mold growing and developing. Those housing code issues can be cited by building inspectors, and under existing regulations -- if there’s a pipe leak, a leaking roof, water coming in through windows, or things like that. Those should be the basis for citations, and owners should be held to certain standards.

The legislation that was mentioned to certify mold remediation contractors I think is an important part of the toolkit as well. We’ve been working with Assemblyman Benson on that in a piece of legislation.

The standards that it would develop would be primarily around not identifying species, but identifying -- all right, how much mold is there, is it on a porous surface, if it’s a non-porous surface, what type of treatment techniques should be undertaken in those different circumstances. And that’s where there really is literature and, I think, good guidance that New Jersey could mirror. New York City, for example, has guidance on remediation of mold that is very effective.

One of the things that I think oftentimes people are geared toward is doing mold testing where you’re looking at exactly what species, what counts, things like that. It’s maybe necessary in some circumstances; as a general rule of thumb, however, the primary thing to do is to look for water, is to look for moisture. If you can see the mold and test it to see that
it’s there, it is there. You need to take care of the water source, and then clean the mold to make sure that the issue is taken care of.

So with that, if there are any questions.

ASSEMBLYMAN WIMBERLY: Do we have any questions for Nick?

ASSEMBLYWOMAN CHAPARRO: I have a couple.

ASSEMBLYMAN WIMBERLY: Yes, go ahead.

ASSEMBLYWOMAN CHAPARRO: Just for the record, who do you represent?

MR. KIKIS: I apologize; the New Jersey Apartment Association. So we represent the professional apartment owners, managers, and developers. Part of our membership is-- There’s about 600,000 apartments here in the State of New Jersey; our membership includes about 200,000 of those apartments. Primarily they’re owned by, essentially-- Entirely, they’re owned by the professional property management companies.

ASSEMBLYWOMAN CHAPARRO: Right.

MR. KIKIS: They have professional staffs that are on-site at these properties; you know, maintenance as well as property management.

ASSEMBLYWOMAN CHAPARRO: Right. So chances are there is no rent controlled property owners that you represent. There are some?

MR. KIKIS: No, we definitely have members who have rent control from-- Market rate housing is rent controlled. A lot of our members do affordable housing--

ASSEMBLYWOMAN CHAPARRO: Right.
MR. KIKIS: --including affordable housing development. You know, and those projects, once they’re complete, are under affordability controls, which is, essentially, rent control for--

ASSEMBLYWOMAN CHAPARRO: Do you recommend that tenants do home testing? Are there home kits for mold? Are you aware of that?

MR. KIKIS: If somebody were to do testing, they should be doing it through an environmental company.

ASSEMBLYWOMAN CHAPARRO: Okay.

MR. KIKIS: They should be -- there should be standards around those environmental companies to give guidance when testing is warranted.

I would say 9 times out of 10, though, when testing is done, it really isn’t warranted. It’s costly for a tenant who, say, does; it’s a costly undertaking. But the results are very difficult to interpret, because there’s mold everywhere.

ASSEMBLYWOMAN CHAPARRO: Right.

MR. KIKIS: So you will see mold; and the test can’t really tell you that that mold is a problem. You can somewhat tell yourself. If you’re developing symptoms as a result of it, that mold is a problem for you. Then the question is moisture, and how to address it. So there are certain things -- a leaking pipe, you know, would be an example; or a leaking roof. That would be under the landlord’s control.

There are also things that are under the tenant’s control as well.

ASSEMBLYWOMAN CHAPARRO: Air conditioner?
MR. KIKIS: You know, running your air conditioning in a humid summer. We were talking about the schools being closed up, as giving an example of the type of environment that could allow mold to develop. Running the fan when you’re taking a shower; cleaning a bathroom, cleaning around the caulking, you know, things of that nature are all a part of addressing mold.

ASSEMBLYWOMAN CHAPARRO: Okay; thank you.

ASSEMBLYMAN WIMBERLY: Assemblywoman Speight.

ASSEMBLYWOMAN SPEIGHT: I apologize for being late.

ASSEMBLYMAN WIMBERLY: Welcome.

ASSEMBLYWOMAN SPEIGHT: I’m not sure if you’re able to answer this question, but when it comes to, I guess, mold and the lead, and, I guess, new development housing, and mold and/or lead in water -- with the piping, if it’s a new development home, is that the municipality piping that’s responsible for lead that is possible, you know, for that home to have lead or mold in that water?

MR. KIKIS: So as it relates to lead, you know, housing today is built -- everything built after the Lead and Copper Rule has certain Federal standards, as it relates to the piping; it’s part of the specific development. You know, that being said, kind of, downstream, at a certain point, it’s going to be connected to the municipal line. So it really depends on development; you know, exactly how and where that connection is going to take place. But as we’ve seen in -- and the City of Newark is an example -- there is significant infrastructure needs to replace lead service lines, and lead water mains, and things of that nature.
ASSEMBLYMAN WIMBERLY: But there are regulations in place for new developments, yes?

MR. KIKIS: There are regulations in place for new developments; there are also regulations in place for running municipal water systems.

ASSEMBLYWOMAN SPEIGHT: Thank you.

ASSEMBLYMAN WIMBERLY: Assemblyman.

ASSEMBLYMAN SPEARMAN: Two questions, actually. The first -- it sounds to me like you’re agreeing with our health officials in saying that the two things we really need to focus on are providing requirements for inspectors for mold so that anybody just can’t say they’re a mold inspector and a remediator.

And it also sounds to me that you’re suggesting -- you agree with the health inspectors when they talk about using the codes -- the housing codes to fix -- require repair of leaking water problems that lead to mold. So that when you see a mold problem, or what could be a mold problem, you really need to fix the problem -- you really need to fix the water problem.

MR. KIKIS: Fix the underlying cause.

ASSEMBLYMAN SPEARMAN: Yes.

MR. KIKIS: Yes.

ASSEMBLYMAN SPEARMAN: Yes.

MR. KIKIS: So you can clean the mold, but if you don’t remove the water, it’s going to come back.

ASSEMBLYMAN SPEARMAN: Exactly; that’s what I hear both you guys saying.
Okay; that’s all.

ASSEMBLYMAN WIMBERLY: Assemblyman, any questions?

ASSEMBLYMAN CLIFTON: No questions.

ASSEMBLYMAN WIMBERLY: Thanks.

MR. KIKIS: Thank you.

ASSEMBLYMAN WIMBERLY: We appreciate it.

Elyse Pivnick, from Isles, Inc.

ELYSE PIVNICK: Good morning.

ASSEMBLYMAN WIMBERLY: Good morning.

MS. PIVNICK: So, Elyse Pivnick here; I’m the Senior Director of Environmental Health at Isles, a Trenton-based community development organization founded 37 years ago to foster more self-reliant families in healthy, sustainable communities.

I’ve been working in the community development field for over 30 years, and I serve on the Board of the National Center for Healthy Housing.

I’m here to convey key problems in some of our New Jersey housing that can adversely affect our health. More specifically, I’m here to talk about substandard housing.

Let New Jersey become the leading state in the nation by taking a stand that substandard housing will no longer be tolerated in our fine state; and by creating policies to back up this principle.

Isles is the home of the New Jersey Healthy Homes Training Center, funded in part by the New Jersey Department of Health. We teach courses to housing inspectors, community health workers, educators,
parents -- basically, anyone who is interested in this topic. And we educate them about the principles of a healthy home.

A healthy home is the opposite of a substandard home. A healthy home will be dry. Damp houses that have leaking roofs, windows, and plumbing provide a nurturing environment for mites, roaches, rodents, and mold, all of which are associated with asthma.

Healthy housing will be pest-free. Studies show a causal relationship between the exposure to mice and cockroaches, and asthma episodes in children. They come into the house through small cracks and holes leading into the house from the outside. The biggest trigger for asthma in our oldest cities is mice and cockroaches.

The house will be safe. A majority of injuries among children and seniors occur in the home. Falls are the most frequent cause of residential injuries to children and seniors.

And the housing will be contaminant-free. Chemical exposures, lead, radon, pesticides, volatile organic compounds -- that’s that stuff that smells really bad -- and environmental tobacco smoke are all contaminants for residents. Exposure to asbestos, radon gas, and carbon monoxide is higher indoors than outside.

A healthy home will be well ventilated. Studies show increasing the fresh air supply in a home improves respiratory health. It will be well maintained, and it will be thermally controlled. So tenants and homeowners are at risk for various problems related to prolonged exposure to excessive heat or cold.

So all of our jurisdictions have housing codes that state that the conditions stated are not acceptable.
There are two bills before the Legislature, 1876 and 1877, that will require landlords to provide safe housing for their tenants who often live in our most vulnerable housing.

We also need to assign resources to convey this message more deeply to the community so our people know to seek and demand healthier housing for our families.

I’ve been doing this work for a long time, and it continues to amaze me how few people associate their health to the quality of their living environment in their home. And I wish I could run a public health campaign that would shout that from the treetops.

So I just want to talk a little bit about lead. So in 2016, over 4,000 children in New Jersey were found to have elevated blood lead levels. And so what does an elevated blood lead level mean? We always hear lower IQ and behavior problems, and I kind of feel like those are, kind of, a hyphenated phrase. Let me just put some meat on the bones to this.

So a child experiences a compromised, long-term memory. For example, a student who has worked so hard on Monday to learn their multiplication tables -- has done it -- wakes up on Tuesday, they’re gone. They have reduced auditory processing; so it makes it difficult, for example, to hear the difference between S as in Sam and F as in Frank, thereby impeding the ability to read.

If you are a lead-poisoned child or a lead-burdened child, you have poor impulse control -- an inability to control your behavior. So think about those kids who you hear about who just can’t sit still in class. They’re constantly demonstrating or exhibiting what we call bad behavior.
Okay; and the one that always gets me is the inability to learn, no matter how hard a child tries. And there’s a great photo -- for me, at least -- of a child sitting in a hallway, head on their knees; and it’s a picture of despair.

And then, disruption in classrooms by children frustrated by their failure to learn, who make it difficult for other children to learn. Lower test scores for individuals -- and entire school districts -- that have a disproportionate number of children with elevated blood lead levels. And a disproportionate number of low-income males incarcerated, unemployed, and aimless. How many of you know that boys display stronger neurological effects of lead compared to girls?

And then I’ll just talk a little bit about asthma. One in 11 children and 1 in 12 adults in this country have asthma. Youngsters with uncontrolled asthma miss six school days in a six month-period, compared to 2.6 missed school days. And for those of you who may not know this, you can go to the doctor and get a boatload of medicine for your asthma. But of you are returning home to that same environment that is filled with asthma triggers, it just doesn’t make a difference. You’re never going to get ahead of the game.

Asthma is a leading chronic disease among children and adolescents, and there are wide disparities among asthma sufferers. Rates of hospitalizations and deaths due to asthma are both three times higher among African Americans than whites; children have two times the rate of ER visits compared to adults.

I know we’re talking a lot about inspections and how to make our homes healthy and the like. I want to bring a very important issue to
your attention that, right now, in this state, you can get a Section 8 certificate as a landlord and never have to have had your houses inspected for lead. And I think that is wrong, and I am hoping that we can change it from DCA regulations; but maybe we have to do it through legislation.

And I was just speaking with someone in Monmouth -- one of the case managers -- and they can point to at least four cases in the last year where a child was lead poisoned in a Section 8 house. It is a crime; it is wrong that we allow landlords to get permission to rent their house in the Section 8 program and not require that it be tested for lead and become lead-safe.

So these are not hopeless situations; they are preventable conditions and preventable situations.

And I did hear the gentleman previous to me talk about how there are protocols in place for inspections; that no rental house would ever be on the market if it hadn’t been inspected for lead, etc. So our cyclical inspections program only inspects units -- buildings that have three units or more. In a city like Trenton, where I work, most of the housing is two units or one unit; and so none of those houses are getting the protection of our good ideas and good government.

So I think we can change that; and that’s Bill 1876. We’re trying to extend the protections that are given for buildings that are three or more units to the ones that are two and one.

And I’m told when this legislation was originally passed, that it was meant to be for all units; and there was a last-minute change, and it was pulled out at the last minute. So it was originally intended to be for all
units. So we should be protecting all of our children, even those who live in buildings with two units or one-unit rentals.

Any questions?

ASSEMBLYMAN WIMBERLY: Thank you.

Yes, Assemblywoman.

ASSEMBLYWOMAN SPEIGHT: Do you have any data in reference to the children who have been exposed to mold and lead?

MS. PIVNICK: I don’t-- Lead, yes, and I am happy to share that with you. And we did a table -- actually, Isles did a table a few years ago when the Flint situation broke into the news. It showed that there are 11 cities in New Jersey with higher rates of lead poisoning among those children tested than in Flint that same year. So we have a high level.

And by the way, the numbers that you see from the Department of Health are just a snapshot of a single year. It doesn’t give you cumulative data; so the numbers are much higher. If you look at the number of children, or percentage of children who are starting kindergarten with high leads, it’s much different than what the annual report of lead poisoning tells you. And I would be happy to share all that information with you.

We have the information for 13 years of kindergarten, starting in 2012 going backwards, for five cities in New Jersey. You can see what the incidents of lead poisoning were for children starting kindergarten.

ASSEMBLYWOMAN SPEIGHT: And that would be urban areas more so?

MS. PIVNICK: I have five cities: I have Irvington, New Brunswick, Trenton, Newark, and Camden, yes.
ASSEMBLYWOMAN SPEIGHT: Thank you.
ASSEMBLYMAN WIMBERLY: Sure.
ASSEMBLYWOMAN CHAPARRO: So I have a lot of questions.

MS. PIVNICK: Go.

ASSEMBLYWOMAN CHAPARRO: So a lot of things that you said personally struck me and just came to my head -- when you said about children with asthma, especially who grew up in the Housing Authority.

Out of six of us, I have one brother who had severe asthma; rushed to the hospital, looked like near death. And, you know, medication after medication-- None of us had asthma, but he did.

MS. PIVNICK: Yes.

ASSEMBLYWOMAN CHAPARRO: I don’t have to begin to tell you -- of course, roach-infested; all kinds of stuff.

One of the things that I remember the doctor telling my mother about my brother was, he may outgrow it. He continued to have visits to the emergency room, pumps; all that stuff. You know when he outgrew it? When he left the Housing Authority.

MS. PIVNICK: Yes.

ASSEMBLYWOMAN CHAPARRO: He moved out. He’s a young man; he moved out. And it took him, maybe, a couple of years to really control it. But (knocks table) knock on wood, he hasn’t had an asthma attack.

MS. PIVNICK: He’s lucky.
ASSEMBLYWOMAN CHAPARRO: I don’t think he has been using the pump. And it didn’t strike me until you said that.

But there are a couple of things -- that I know you said it’s preventable. Education is huge.

MS. PIVNICK: Huge.

ASSEMBLYWOMAN CHAPARRO: Huge; and how do we attack that when we have families that are not only struggling to feed their kids, pay their bills, maybe keep their apartment clean to make sure-- But now you, of course, step out of your apartment, and it’s drug infested and violent. So there are so many components; it’s overwhelming for a mom or a dad, a family to protect your family at many levels.

How do we make sure that doctors, when -- especially children in vulnerable situations like Housing Authority, poor areas -- that when you come in, instead of giving them a pump and saying, “He has asthma,” or “She has asthma,” that they, maybe, test them for lead instantly. Because what you said, if they have-- It’s not going to help if they go back to the same situation.

MS. PIVNICK: Right, yes. I wish -- and this is one thing, actually, we’re working on -- that a doctor could give a prescription for a healthier home to remove all asthma triggers. And one of the things that we’re working on is trying to be able to use Medicaid funds for healthy home inspections. When a newborn comes home from the hospital, that that home could be inspected using Medicaid dollars. And, you know, try to clean up the house before a child starts its life in that house. None of this is easy, you know.

ASSEMBLYWOMAN CHAPARRO: Right.
MS. PIVNICK: The other thing we’re working on, in terms of education -- and maybe you folks would like to help us on this -- is we have an army of people who go into the homes of low-income people, which are often associated with substandard housing -- right? -- is you have Home Visitors through Maternal Childcare; you have Parents as Teachers; you have Nurse-Family Partnerships. And that group of professionals could be very helpful in both doing healthy home assessment and in working with the family over time.

And the beauty of working with Home Visitors is they go to the household regularly, right? When Isles goes in and does a home inspection, we go once, maybe twice. But you have someone who is building relationships with the family. And we have trained-- We did a pilot in Trenton with one of the social service agencies, where we trained their community health workers. We got it integrated into the protocol that was used, etc. And it was great, until we ran out of money.

So we’d like to see, actually, the Department of Children and Families take this on and insist that it become part of the protocol, instead of us trying to give an incentive through funding to do it.

So it’s a great way to make use of our resources more efficiently. You have people going into the homes.

And I welcome you all to come attend our Healthy Homes Training Course. It is eye-opening, I think, for most people who attend, because you think you’re going in there to help people -- your clients -- with their homes, and within 10 minutes you have a question about your own basement. So everybody has healthy homes issues.
And there’s a lot to learn, and there are things to correct. It’s not— You know, people say, “Well, there’s not enough money to correct all the problems.” Well, it doesn’t take money to move a baby’s crib from one corner of the room -- where there’s chipping and peeling paint falling into that crib -- to another room, or to just the other side of the room. There are things we can do, once you have knowledge. Knowledge gives you a lot of power.

ASSEMBLYWOMAN CHAPARRO: Right.

MS. PIVNICK: And you can also start to demand better housing.

ASSEMBLYWOMAN CHAPARRO: Right. And I think one of the things, besides the education, is also letting people know that it’s much more serious. Because not all tenants report their leaky faucets--

MS. PIVNICK: Of course not.

ASSEMBLYWOMAN CHAPARRO: --or they wait, and wait, and wait, because maybe they had a bad experience with maintenance coming on time. Or they don’t want them to come during a certain time because they’re not around. So they just let it wait; and they just put a little pot underneath it and think it’s okay.

MS. PIVNICK: Yes, you know--

ASSEMBLYWOMAN CHAPARRO: And the damage is done. So we have to really educate people on how important it is.

MS. PIVNICK: It’s heartbreaking -- some of the situations I’ve seen. I remember going into a house where the six-month-old had asthma. I was like, “What? A six-month-old?” And then I said, “Well, you know--” I was looking at a stain on the ceiling. And I said, “Well, do you have any
water or moisture problems?” And she opens up the closet, and I see a contractor’s bucket filled with water because the roof has been leaking for I don’t know how long.

And we can do better; we can do better. Let’s demand that our housing be--

ASSEMBLYMAN WIMBERLY: And that’s, obviously, you know-- I am a product of public housing myself, and I understand that. But also our schools; you know, our children are spending seven, eight hours a day in schools. And when you have buildings, as was stated earlier, that have been closed down all summer-- And the City of Paterson has 19 schools over 100 years old--

MS. PIVNICK: Yes.

ASSEMBLYMAN WIMBERLY: --with no ventilation. So now the kid leaves and has an asthma problem; you go into that building.

ASSEMBLYWOMAN CHAPARRO: Right.

ASSEMBLYMAN WIMBERLY: And, you know, come June or come May, now, when it’s 90 degrees, that child can’t breathe anymore. And you’re dealing with lead, and mice, and roaches. So you know, you leave one environment, and you go to there.

MS. PIVNICK: Absolutely.

ASSEMBLYMAN WIMBERLY: So we have to tie into our inspection process these public buildings and facilities -- be it the YMCA that’s 100 years old, or the Boys and Girls Club that has been flooded out, and our kids are going there for five, six hours a day to deal with these same issues.

MS. PIVNICK: Absolutely.
ASSEMBLYMAN WIMBERLY: This is outstanding. Any other questions? Assemblyman? (no response) Thank you very much; we appreciate it.

Next, we have Bruce Shapiro from the New Jersey Realtors.

B R U C E   S H A P I R O: Good morning, Mr. Chairman, and members of the Committee.

I think it’s still morning.

Bruce Shapiro, representing New Jersey Realtors.

I want to thank you for holding this hearing today, as it is on a very important issue concerning lead, and mold, and the issues that do affect our housing and the affordability of them.

And I think there’s been a lot of good testimony on both sides all around this morning. And as you heard earlier from, I think, the first speaker, New Jersey obviously does have one of the oldest housing stocks in the country. And unfortunately, with that does come the issues surrounding lead, and mold, and other environmental issues that can affect the health of children, the elderly, and those with conditions such as asthma or other immune disorders.

You heard how many pre-1978 homes are obviously in the state earlier. We have some data that of those, over 480,000 of them are owned by seniors, those aged 65 or older. So that does tie into that issue.

And you also heard about the costs associated with dealing with some of these issues. I’ll look at lead paint for example. The average cost to conduct a lead paint inspection is about $500 to $1,000, depending on the size of the home; whether it’s an apartment, a full house. And if lead
paint is found, it will cost about $15 per square foot to remediate that if you’re going to do that.

So seeing as how we’re here in Camden County, we did some research. And in the City of Camden, for example, we found that the average square footage of homes is about 1,354 square feet, right now, of those that are for sale. So if you would have to do remediation in one of those homes, you’re looking at over $20,000, which is about the average.

Now, according to our statistics, earlier this summer, for the most recent stats we have in July, the median home sale price in Camden was $39,000; meaning that if you were going to do remediation at the time of sale, you could see a 47 percent decrease in the home value because you have to address those costs. And we’re not arguing that you shouldn’t address lead, or mold, or any of these issues.

So the question that we’ve come up with -- and, you know, we’ve heard this as these hearings have been going on for some time -- is how do we fund the remediation cost, especially in an area where the homes are just not selling for the prices in some of the neighboring towns?

And there are a few recommendations that we’ve had -- we’ve presented to the Legislature over the years.

The first is to enact SCR-26, which is a constitutional amendment that would go on the ballot, stating that the existing tax that’s paid when you buy a can of paint in New Jersey -- that the funding would be dedicated to lead hazard remediation activities. As we saw, over the years, on both sides the funding might not have gone to its intended purposes. This would dedicate those funds. And it is estimated, under the
OLS statement, I believe, to bring in $7 million to $14 million a year. That’s obviously a drop in the bucket, but it’s a step in the right direction.

One of the areas we’ve been bringing up in our meetings with members of the Legislature on this issue is that in order to address this issue -- kind of once and for all, not piecemeal -- when a home is being sold or rented, let’s take the existing revenue that’s brought in when the home is sold from the realty transfer fee -- which, in the current fiscal year, 2019, the Governor’s budget estimated it would bring in $379 million. Let’s take a portion of those funds and create a pilot program -- whether it be in the DCA, the DEP, the Department of Health, or in coordination with all three -- and create a program for the towns that are most affected by this, as a start, based on Department of Health statistics. So that, once and for all, we can address these issues, whether it’s lead paint, lead in the soil -- which is another issue that was touched on earlier today -- or mold; so that we can address these issues, once and for all, in all of the homes in New Jersey that were built prior to 1978 when lead paint was remediated.

We believe that that’s the way to address the issue, but not -- also tying it to the time of sale on a property in New Jersey -- which as you saw, just with the statistic we referenced in Camden, would make that $39,000 home nearly unsellable. Or for the seller of the home -- potentially that person would not be able to pay for the cost of doing the testing. But if there was this pot of money available, that could be addressed.

So we just wanted to bring a few of these issues and these recommendations to your attention. And we’d obviously be happy to work with you, Mr. Chair, or any of the members of the Committee to bring --
kind of flesh these ideas out and maybe bring them into solutions, moving forward.

And with that, I’m happy to answer any questions that the members of the Committee might have.

ASSEMBLYMAN WIMBERLY: Lead remediation.

MR. SHAPIRO: Sure.

ASSEMBLYMAN WIMBERLY: A one-family home, average cost to--

MR. SHAPIRO: So depending on the size of the home -- for example, the one in Camden -- 1,300 square feet was about $20,000. The statistics we’ve read have said they could be anywhere between, really, $20,000 to $35,000 for remediation. And once again, that depends on whether you just have to remediate in one room, whether it’s a two-bedroom house, four-bedroom house. So--

ASSEMBLYMAN WIMBERLY: But the average cost is going to be--

MR. SHAPIRO: Yes; we believe the average cost is around $20,000.

ASSEMBLYMAN WIMBERLY: Do we have any questions here?

ASSEMBLYWOMAN CHAPARRO: Yes--

ASSEMBLYMAN SPEARMAN: One question; I’m sorry.

ASSEMBLYMAN WIMBERLY: Yes, Mr. Assemblyman.

ASSEMBLYMAN SPEARMAN: You said legislation that would put a fee on paint sales that could be used for lead remediation was SDR-26?
MR. SHAPIRO: SCR-26. So right now, when you go into Home Depot, or wherever, and you purchase a can of paint, there is an existing portion of the tax that you pay set aside, under the original legislation, to go to lead hazard remediation activities. The SCR-26 that I referenced would simply constitutionally dedicate the funds so that the money could not be moved to other purposes in the budget cycle.

ASSEMBLYWOMAN SPEIGHT: With the lead remediation, can you just explain the process a little bit, and just why the cost is so high for a one-family?

MR. SHAPIRO: Sure; and, obviously, I would defer more to some of the health officials as to the specifics of the lead remediation.

It could range from any number of activities. In some areas -- you’ve seen it -- we’ve painted; but that’s really just covering over the problem. If we’re talking about lead paint, you could be talking about having to actually scrape and strip all the lead paint out of a room. If it’s mold remediation, for example, as you heard -- I’ll use the example that I had. I live in a condo in New Brunswick and, unfortunately, a few years ago, while I was out of town for a week, the air conditioning unit in the condo above mine -- I live on the first floor -- malfunctioned, through no fault of the person up there; because their unit was functioning, probably they didn’t know.

Unfortunately, when I got home there was water all over my bathroom floor, and you could see the ceiling -- which was previously white a week ago -- was now black. And within two hours of my arriving home, it collapsed. I had no idea how to deal with that myself, but I did it through my insurance company. And in talking with a few friends who had gone
through this, had a company come in to do proper remediation. They actually ran a fan for a week in the bathroom to kind of clear the air in there, in addition to stripping out all the old wood in the ceiling and completely replacing it.

With regards to lead, it can range on any number of activities. But I would defer more to some of the professionals who deal with that type of remediation.

ASSEMBLYMAN WIMBERLY: We definitely understand that, yes.

ASSEMBLYWOMAN SPEIGHT: Thank you.

ASSEMBLYMAN WIMBERLY: Any other questions?

ASSEMBLYWOMAN CHAPARRO: I just have a question.

MR. SHAPIRO: Sure.

ASSEMBLYWOMAN CHAPARRO: For real estate, when someone’s buying a home--

MR. SHAPIRO: Yes.

ASSEMBLYWOMAN CHAPARRO: --they have an inspection before they actually buy a home, correct?

MR. SHAPIRO: Correct. Traditionally, you’ll have -- you’ll hire your own inspector, as the buyer; because you want to see if there is anything with the property. And that is something that they may look at.

You might also have a municipal inspection. Some towns have certificates of occupancy -- others do not -- where they just come in and do the fire inspection to make sure you have a fire extinguisher, smoke detector, a carbon monoxide protector. But in some towns they do a full inspection.
ASSEMBLYWOMAN CHAPARRO: So I know-- I’m just trying-- To do this lead remediation -- right? -- that’s the one that you said was -- could cost $39,000. Is that the one that you said--

MR. SHAPIRO: Well, the average home sale price in Camden was $39,000. It was about $20,000, on average, we believe was the number; still a hefty number.

ASSEMBLYWOMAN CHAPARRO: So I guess my question -- what I’m trying to get at-- Let’s say you do that; okay, that’s nice and everything. But when the person buys the home -- if there’s a contaminated tank they didn’t know about, or termites, then once that sale is through, that’s their problem, correct?

MR. SHAPIRO: I mean, there are some other ways that you could address it if, for whatever reason-- When you sell a home, there is a form that the seller fills out, the disclosure form, where there are various items that are stated such as, for example, if there are termites on the property.

But with regards to lead or any other item, if disclosed and the inspection catches it, and you purchase the home--

ASSEMBLYWOMAN CHAPARRO: Right.

MR. SHAPIRO: --then obviously once the sale goes through and you want to remediate that, you, as the now-owner of the property, would do that. You could also -- if it’s caught on an inspection while the sale is going through, negotiate with the buyer, “Well, I want to knock $20,000 off the price of the home--”

ASSEMBLYWOMAN CHAPARRO: Right.
MR. SHAPIRO: “--for me to cover the cost.” Or, as a condition of the sale -- say I want this addressed before my family moves in there. If you have a young child and you know about it, you might want it done before you take ownership of the property and move in.

ASSEMBLYWOMAN CHAPARRO: Okay; thank you.

ASSEMBLYMAN WIMBERLY: Do we have any more questions? (no response)

Is there anybody who wanted to testify who did not sign up?
Assemblywoman.

ASSEMBLYWOMAN SPEIGHT: I’m just-- I’m not sure if he’s able to answer this question.

How often is the municipalities’ piping checked just to make sure that lead is not in their piping?

MR. SHAPIRO: That I don’t have an answer for.

ASSEMBLYWOMAN SPEIGHT: Yes, because--

ASSEMBLYMAN WIMBERLY: Doc?

ASSEMBLYWOMAN CHAPARRO: Doc. (laughter)

DR. NWAKO: (off mike) Okay, so--

ASSEMBLYMAN WIMBERLY: We need you to come back up. (laughter)

MR. SHAPIRO: Do you want me to stay, or let him--

ASSEMBLYMAN WIMBERLY: You’re good; thank you.

ASSEMBLYWOMAN CHAPARRO: Thank you.

ASSEMBLYMAN WIMBERLY: Thank you very much.

DR. NWAKO: So repeat your question.
ASSEMBLYWOMAN SPEIGHT: How often are the municipalities -- their piping is checked to make sure lead is not in their pipelines?

DR. NWAKO: Okay. So--

ASSEMBLYWOMAN SPEIGHT: Because that leads to, basically, the homes; and, you know, the landlords pay a water bill, and they have to go and pay the water bill to the city. And sometimes that lead is coming into the homes that they have purchased. And my thing is, the municipality and landlords have to work together. So how are they working together and how is the municipality being checked, making sure they are doing what they have to do, so the landlords have to do what they have to do? So I’m just trying to make sure that the piping in these municipalities is up-to-date and -- you know, in their piping. Because sometimes landlords do what they have to do; but if the municipality is not making sure their piping is straight, you know, as far as the lead and stuff, how are we going to make sure that we’re doing what we have to do for these houses?

DR. NWAKO: Okay. So last year, during our New Jersey Environmental Health Conference in Atlantic City, we had a national expert who has testified in the Senate and the House of Representatives. It’s a huge problem in the United States. As a homeowner, I have a brand-new home; but I cannot guarantee the water coming through this municipal water system into my house.

It would take billions and trillions of dollars to dig up every pipe leading from the source of water to your house around the United States. Municipalities have now started -- since Flint, Michigan -- they have now been aware of what’s going on.
The pipe underneath your house might not be PVC pipe; it might be a lead pipe. And municipalities, from the time this country was formed, have been using lead pipes to lay down -- to carry water from the source that is produced to the source that is used. So it’s only about the 1990s that people have started realizing that that’s not a good way of transporting water.

So they are using PVC pipes instead of lead pipes. In some areas they still use lead pipes. So it is a huge problem.

What we advise every homeowner in Camden County is to periodically test your water. What we advise homeowners is -- which I tell my own children -- when you wake up in the morning, flush your water at least for one minute. If you use the bathroom, flush the toilet; make sure that’s running water. If possible -- if possible -- check your water system; check all your faucets in your house, especially the one in the kitchen. Test the water once every three months to see if you have lead.

What happens if you have lead and it’s not from your property? What can you do? It’s a huge problem; it’s a big problem around not only in New Jersey, but around the United States. And it would take a form of legislation from the feds -- something -- for all the municipalities to dig up their lead pipes and install PVC pipes. But it’s not happening right now; and the onus is on the people using the water to make sure that their water is free of lead.

If you test your water and you have lead in the water, use bottled water to cook or to drink. That’s the only way to circumvent the situation. But we do have an environmental health issue in the United States, and that’s lead.
ASSEMBLYWOMAN SPEIGHT: So with the landlords -- so we’re holding landlords accountable for things municipalities are not doing -- even though I know it’s a United States issue.

DR. NWAKO: Yes.

ASSEMBLYWOMAN SPEIGHT: So they’re trying to fix the problem, but the problem is not going to be fixed until the municipalities and the United States fix the problem, basically, for certain issues.

DR. NWAKO: Yes.

Okay, so let me take you back again. Every one of you who owns a home gets a water sample, quarterly or biannually, a water sample use letter from your water department. You see it in the mail; it comes in the mail and itsays “You don’t have any microorganisms; you don’t have X, you don’t Y; and you have lead.”

ASSEMBLYWOMAN SPEIGHT: That comes from the municipality?

DR. NWAKO: The municipal water system. They send it--

ASSEMBLYWOMAN SPEIGHT: They might just give them that so they don’t have any problems. (laughter)

DR. NWAKO: Well, they usually send it in the mail, if you own a home.

So that report is what we call a cross-sectional study. If they come and test the water at that time, and there is no lead, that doesn’t mean if they test it a second time, if there is lead, they don’t need to report that. So it’s at the point of testing, that particular testing, that they will report to you.
So if, for instance, the water department of this town sent me a report and said, “Oh, the lead level is -- there is no lead in the water;” then they can test a week later and say that there is lead in the water.

Because what happens -- maybe a chunk of what comes out of the pipe falls into the water; and then, at that point, they do the testing, and that shows up. So you cannot-- Sometimes you don’t blame them; sometimes they know there’s lead in the water, but they don’t report it.

And it’s an EPA-- It’s a huge thing in EPA, Environmental Protection Agency in Washington D.C. So they know about this. The only solution is to dig up all the pipes from the production to the source; from the source to the houses that use that water. So it’s a huge tax; some municipalities have started digging, but it takes time. Now, in Camden City, they have started digging. It’s a process. It might take them 20 years, 25 years; but municipalities are doing that these days.

ASSEMBLYMAN WIMBERLY: Doc, you’ve said a lot, so we will definitely be inviting you back for our next hearing.

And I know, in 2019, we plan on being in Newark. So we will make sure that they’re there, because there are a lot of questions for them there.

Assemblyman.

ASSEMBLYMAN SPEARMAN: Just one statement and one question.

DR. NWAKO: Sure.

ASSEMBLYMAN SPEARMAN: In the City of Camden, we did do a cleaning and lining project in the early 2000s. And we have been replacing lead lines from the street to the house.
My question is, on the Federal level, the EPA does not require that all lead lines be replaced in all water services throughout the country? That’s not a requirement right now?

DR. NWAKO: That’s the issue. It’s not a requirement, because it’s a huge tax to the municipalities, all right? So it’s not a law, as of now. It’s something that they need to do; but even if they do it, how do you regulate that? Because there are some municipalities -- most municipalities cannot afford to do it.

ASSEMBLYMAN SPEARMAN: Thanks.

ASSEMBLYMAN WIMBERLY: At this time, we’re going to close out, as we have nobody else testifying.

I will ask each Assemblyperson if they have a closing statement.

ASSEMBLYWOMAN CHAPARRO: If I could just--

ASSEMBLYMAN WIMBERLY: Vice Chair, yes.

ASSEMBLYWOMAN CHAPARRO: It’s a lot; it’s a lot to process. But it’s-- On that topic alone, it makes me think-- So you make landlords accountable for lead paint and remediation. But there’s a possibility that the water that’s going into that home may be contaminated with lead, and it’s not a Federal requirement to replace them.

So it’s this big monster; how do we attack it, how do we educate people, where do we go, where do we start? Seems like, if we start here, there’s still something over here. Then when we get to there, there is something over here. It’s this vicious cycle.

But in the meantime, lives are being compromised. And someone who is testing their home can do everything right, but then the water is a problem. And because it’s so expensive for the municipality to
change that, it becomes this other thing. So it seems like we’re making these rules and regulations for the easier things -- which is the landlords, the apartments, who’s responsible, educating people to report it. But you have to look in the mirror, too.

So it’s a lot to process; it’s a lot of work we have to do. And where to start? I wish I knew an easy answer.

But I do appreciate your testimonies and your information. There’s a lot of reading we have to do, and a lot of work that we have to attack.

DR. NWAKO: Read about Flint, Michigan. It’s a very important case study--

ASSEMBLYWOMAN CHAPARRO: Yes.

DR. NWAKO: --regarding lead in water in the United States. Because they knew there was a problem; they knew the pipes had lead.

ASSEMBLYWOMAN CHAPARRO: Right.

DR. NWAKO: But it’s about education. Like, if you hear today that you need to test your water, or you need to flush your water all the time before you use it for cooking--

ASSEMBLYWOMAN CHAPARRO: Right.

DR. NWAKO: --if you don’t have lead. So it’s all about education; yes.

ASSEMBLYWOMAN CHAPARRO: It is about education. Because, you know, the person who doesn’t have that background, that expertise, and it’s just a single mom or a single dad at home -- they’re not going to question a doctor or a professional who is telling them, “Everything
is okay.” They know something is wrong, but they just-- So education is big-- to let them know it’s okay to challenge your professional.

MR. MERKEL: If I may, just real quick; I know you want to wrap up, Mr. Chairman.

ASSEMBLYMAN WIMBERLY: Yes, briefly, if you could wrap up.

ASSEMBLYWOMAN CHAPARRO: Yes.

MR. MERKEL: I understand; we’ve been here for a while. So I just want to reiterate what the doctor was talking about. This is an ongoing issue. Typically, the EPA Lead and Copper Rule speaks to municipal water systems; but it doesn’t address once the pipes come into a building. So I know New Jersey has legislation specifically for schools to test; well, we’re finding -- surprise, surprise -- that a lot of schools have lead in their water because of the aging infrastructure. So now what do you do? Now you know there’s a problem, but there’s no money to remediate it. So it sort of opened Pandora’s box, in my opinion.

ASSEMBLYMAN WIMBERLY: And then we’re spending hundreds of thousands of dollars on bottled water and other things here.

DR. NWAKO: Yes.

MR. MERKEL: Well, that’s why the City of Camden’s been on bottled water for how many years.

DR. NWAKO: Yes.

ASSEMBLYMAN WIMBERLY: And so have other municipalities. And that’s not just a New Jersey issue, obviously; it’s a national issue.
MR. MERKEL: You’re talking about billions of dollars replacing old leaded pipes. It’s a major problem.

ASSEMBLYMAN WIMBERLY: Yes, this is a major problem. And when you start to amass billions of dollars, unfortunately, in America, like you said, “We want, you know--” “Well, you know, get a filter, you know, flush your tank.” But in the meantime, you know, we had people testify earlier about the impact that it has on the health of our children and the health of our residents in general.

DR. NWAKO: Correct.

ASSEMBLYMAN WIMBERLY: In particular, our young people, when it comes to their ability to learn and do things like that.

MR. MERKEL: Right.

ASSEMBLYMAN WIMBERLY: So this is a major Federal issue; this is not a State of New Jersey issue.

DR. NWAKO: It is. And EPA -- they recommend-- They know the problem. They know we had lead pipes buried underneath the earth from the day the country was formed. But what can they do? They can recommend that we change it. But they can’t really--

ASSEMBLYMAN WIMBERLY: We get it; we understand. But we’re going to ask you to come back--

DR. NWAKO: How do you regulate that?

ASSEMBLYMAN WIMBERLY: We want more of information from Flint, and everywhere else.

MR. MERKEL: Thank you.

DR. NWAKO: Thank you.
ASSEMBLYMAN WIMBERLY: Assemblywoman Speight, anything to close out with?

ASSEMBLYWOMAN SPEIGHT: Just thank you, Chairman, for having this meeting. This was very informative to me. I didn’t know there was a good mold and a bad mold. It’s just a lot to learn, moving forward. And just knowing that this impacts a lot of our children and it can impact the residents in this state, and not knowing -- I didn’t know that it was costing this much for the Camden school district.

So it’s a lot that we have to do, and a lot that we have to do moving forward.

So thank you, and thank you for all the information you gave us.

ASSEMBLYMAN WIMBERLY: Thank you, Assemblywoman. Assemblyman.

ASSEMBLYMAN CLIFTON: Thank you, Mr. Chairman. No comment.

ASSEMBLYMAN WIMBERLY: No comment?

So, at this time, we would like to thank all of our people who testified today.

As stated earlier, this was our third hearing. Our fourth hearing will be November 29 at William Paterson University at 10 a.m. You can contact OLS for additional information.

And I do-- As stated earlier, in 2019 we will have another series of hearings. And I know we want to get to Hudson County, and we want to get to Essex County, and down to Atlantic County, also, towards Atlantic City and different places. We want -- I want to cover the state; that’s the
bottom line, because there are so many issues that we face outside of just affordable housing, but they all tie in to each other.

So that’s our goal, as a Committee; and I think we look forward to addressing that.

We thank Camden County Community College, and President Borden, for hosting us today; and we thank our staff for their outstanding job.

Everybody have a safe trip home.

Thank you.

Meeting’s adjourned.

(HEARING CONCLUDED)