Memorandum of Understanding

between

Maryland Department of the Environment

and

Maryland Department of Health and Mental Hygiene

December 2014
# MDE-DHMH 2014 MOU

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I. BACKGROUND

A. Purpose

The Maryland Department of the Environment (MDE), the Maryland Department of Health and Mental Hygiene (DHMH), and Maryland’s local health departments are the primary agencies responsible for managing environmental and public health programs and services in Maryland. Because of the inter-relatedness of environmental and public health science, policy development, and service delivery, many of these responsibilities have complementary components. For example, the DHMH programs governing food service facilities have components relating to water supply and sewerage that are core functions of MDE.

It is the objective of DHMH and MDE, in collaboration with Maryland’s local health departments and county environmental agencies, to implement these responsibilities with a recognition that there are programmatic activities within each agency that have a significant impact on the functions of the other. It is a further objective of DHMH and MDE to coordinate these activities to maintain the efficiency and effectiveness of environmental and public health service delivery in Maryland. This Memorandum of Understanding (MOU) is a statement of intent and provides operational level guidelines for the implementation of these shared responsibilities.

B. Layout of the Document

The core of this MOU discusses areas of mutual concern to the agencies. Sections II through V discuss general topics with relevance across the range of environmental health functions carried out by the agencies. These include Local Environmental Health (Section II), Communication and Strategic Planning (Section III), Data Management (Section IV), and Legal Representation (Section V).

Section VI, Areas of Agreement, includes 14 chapters that discuss specific areas of environmental health practice in Maryland. Each chapter is organized into five subsections:

1. *Public Health Significance*
   
   This section includes a succinct statement on the public health context for the chapter’s remaining content.

2. *Roles of the Agencies*

   This section describes the activity of the agencies in a particular area. Usually, the basis for agency involvement is statutory and regulatory. However, it may also reflect the unique resources of one or more agencies such as staff expertise, equipment, or a highly specialized program.

3. *Statutory and Regulatory Authorities*

   This section describes any legal mandates for agency involvement in a particular area. Usually, a citation from the Health-General and Environment Articles of the Annotated Code of Maryland or the Code of Maryland Regulations is included. Where no citation is
listed, one agency may not have a direct statutory or regulatory role but is able to contribute to the other's function because of a unique resource. Also, it is often the case that the agencies have general authority to pursue matters that have broad implications for the health of the public and the environment.

4. **Delegations and Agreements**

   This section is the substance of this MOU. The agreements within each area are based upon the needs of programmatic staff and reflect a consensus of the staff in those areas. Details in this section give the document an operational level of specificity and, consequently, are its greatest strength.

5. **Departmental Contacts**

   This section lists DHMH and MDE contacts to help make the document a useful reference tool. Contacts are usually listed at both the program and administration levels to account for organizational changes that may occur.

The content and level of detail in these sections varies from chapter to chapter based primarily on the needs of the program staff who are involved in the activity to which the chapter refers.

This same organization is used to a lesser degree in Sections II through V.

**C. Related Agreements and Supporting Documents**

Related agreements and supporting documents are listed in this MOU to enhance the document's usefulness as a reference tool. These agreements may be formal – other memoranda of understanding, regulatory delegations, and contracts. They may also be informal – descriptions of work practices, technical arrangements between program staff, and mutual acknowledgement of Departmental or programmatic goals. All related agreements listed were active at the time of execution of this MOU. Eventually, many of these related agreements will be modified. Some may even expire without replacement. The mention or omission of a particular formal agreement in this MOU does not validate or invalidate that agreement.

**D. Updating the Document**

The MOU has three prior versions, from 1987, 1999, and 2006. The authors recognize the importance of updating the MOU and agree on a scheduled review by a committee representing MDE, DHMH, Local Health Officers and Environmental Health Directors. In 2000, the Environmental Health Liaison Committee (EHLC) was organized for this purpose, and serves other functions that are discussed in the next section. The primary stakeholders – MDE, DHMH, Local Health Officers, and Local Environmental Health Directors – agree on the following: (1) the EHLC should review the MOU every 3 years, and (2) amendments and additions can be approved at any time upon the recommendation of the EHLC and become effective when signed by the Secretaries of both MDE and DHMH.
E. Environmental Health Liaison Committee

In addition to reviewing the MOU as described above, the EHLC serves to: (1) facilitate communication, planning, policy development, and service delivery in areas of mutual interest; (2) assess public health and environmental laws, regulations, policies and practices, as well as other laws, regulations, policies and practices that have public and environmental health implications; (3) ensure that these laws, regulations, policies and practices are supported by scientific evidence; and (4) address emerging public health issues and information. The EHLC meets every two months and is coordinated by MDE and DHMH.

F. Functional Roles, Statutes, and Governance

DHMH and MDE are authorized by the Governor and Legislature to adopt regulations to address environmental health concerns, under the authority of the Health-General and Environment articles. If not pre-empted by State laws and regulations and provided they are no less stringent than State requirements, local governments have varying degrees of authority, based on the State Constitution and statutory authority, to adopt ordinances and regulations to address environmental health concerns in their jurisdictions.

G. Definition of Local Environmental Health Authority

The term “Local Environmental Health Authority” is used extensively in this document. It refers to Health Officers and county officials in the following agencies who are authorized to administer and enforce health and environmental laws and to whom duties, powers, and functions have been delegated by DHMH or MDE.

Allegany County Health Department
Anne Arundel County Department of Health
Baltimore City Health Department
Baltimore County Department of Health and Human Services
Baltimore County Department of Environmental Protection & Sustainability
Calvert County Health Department
Caroline County Health Department
Carroll County Health Department
Cecil County Health Department
Charles County Health Department
Dorchester County Health Department
Frederick County Health Department
Garrett County Health Department
Harford County Health Department
Howard County Health Department
Kent County Health Department
Montgomery County Department of Health and Human Services
Montgomery County Department of Environmental Protection
Montgomery County Department of Permitting Services
Prince George’s County Health Department
Prince George’s County Department of the Environment
Queen Anne’s County Health Department
Somerset County Health Department
St. Mary’s County Health Department
Talbot County Health Department
Washington County Health Department
Wicomico County Health Department
Worcester County Health Department
Worcester County Department of Environmental Programs
II. LOCAL ENVIRONMENTAL HEALTH

1. Roles of the Agencies

Local Environmental Health Authorities

Local Environmental Health Authorities are responsible for a broad spectrum of public and environmental health-related laws and regulations, which are designed to protect citizens from illness, injury and death and to safeguard the environment from degradation. They respond to local ordinances and state laws and regulations primarily originating with the Departments of Health and Mental Hygiene and the Environment. From time to time, they also play a collaborative role with several other agencies and departments, including but not limited to Agriculture, Education, Housing, Natural Resources, and Transportation.

Local environmental health officials are usually the first responders to a wide variety of complaints and incidents involving environmental issues. These issues may be presented directly by citizens, legislators, other local and state agencies, businesses, non-profit organizations, and the media. The seriousness of these issues may range from simple nuisance complaints to environmental threats with long-term consequences. Accordingly, responses may range from routine inspection and report writing to enforcement orders and emergency management.

Department of the Environment and Department of Health and Mental Hygiene

The State agencies provide programmatic guidance for the implementation of public and environmental health-related statutes and regulations that are delegated to local jurisdictions.

2. Statutory and Regulatory Authorities

Various authorities are delegated to Local Environmental Health Authorities by the Secretaries of DHMH and MDE. Some local health officials also have specific statutory authorities granted directly to them in the Annotated Code of Maryland, Health-General and Environment Articles. Local environmental health officials also respond to county and municipal ordinances.

3. Delegations and Agreements

- DHMH and MDE agree to work with local environmental health directors and health officers to strengthen local environmental health in the State of Maryland.

- DHMH and MDE will meet with the Maryland Conference of Local Environmental Health Directors on a regular basis to discuss programmatic development and issues of common interest.

- DHMH and MDE agree to designate specific individuals or units as points of contact to assist with the following:
a. Facilitate communication between Local Environmental Health Authorities and the Departments.

b. Coordinate and provide technical assistance related to local environmental health as needed, including providing health-related data and analyses, as allowed by statutes, regulations, and policies that govern the confidentiality of health and other information.

c. Facilitate the review and approval of delegations and other agreements between Local Environmental Health Authorities and the Departments. DHMH, MDE, and Local Environmental Health Authorities agree that, whenever possible, standardization of delegations and agreements should guide the review and approval process. DHMH and MDE will provide updated written delegations and agreements to Local Environmental Health Authorities in a timely fashion when statutory or regulatory changes render the delegation agreement inadequate or incomplete. If delegated duties do not change, DHMH and MDE will, upon request of the delegated approving authority, provide written acknowledgement stating that existing delegations and agreements remain in effect.

d. Establish an inventory of current programs and develop evaluation criteria and mechanisms for those programs (conforming to Managing for Results methodologies).

e. Assist Local Environmental Health Authorities when appropriate in communicating with local and state elected officials.

f. Coordinate a unified approach to infrastructure maintenance and workforce development for environmental health at the state and local levels.

g. Provide consultation or technical assistance to Local Environmental Health Authorities regarding evidence-based and/or promising practices in the development of workforce capacity, training and education.

h. Assist in the development of training opportunities for the local environmental health workforce by establishing contacts with entities that promote the development of future environmental public health workers.

i. Assist in coordinating the development of environmental health-related legislation, regulations and policies.

j. Coordinate issues involving this MOU, monitoring its implementation, and evaluating desirable changes to it.

4. Departmental Contacts

For a complete listing of contacts, see the Contact List.
III. COMMUNICATION AND STRATEGIC PLANNING

Inter-Departmental Communication

Inter-departmental communication is a cross-cutting issue relevant to all sections of this MOU. Departments should be proactive in their communications and cognizant of the roles and responsibilities of their partners.

In 1998, the DHMH Office of Environmental Health Coordination was created in response to recommendations by a workgroup representing the major MDE and DHMH administrations. This Office, reorganized in 2006 as the Environmental Health Coordination Program (EHCP), and again in 2012 as the Environmental Health Bureau (EHB) in the Prevention and Health Promotion Administration, remains a communication and coordination locus for multi-agency environmental health issues.

The EHB is the general point of contact within DHMH for matters related to this MOU. The Science Services Administration is the point of contact at MDE. The Maryland Association of County Health Officers (MACHO) and the Maryland Conference of Local Environmental Health Directors are the points of contact for local jurisdictions.

In 2000, the Environmental Health Liaison Committee (EHLC) was organized to update this MOU and facilitate communication, planning, and policy development in areas of mutual interest to MDE, DHMH, Local Health Departments and Local Environmental Health Authorities.

Strategic Planning

State and local agencies expend considerable effort to determine future needs and develop long-range plans. All state agencies are required to clearly articulate their goals and objectives, develop performance measures, assess their success, and exercise the principles of continuous quality improvement.

Central strategic planning processes include or have included Managing For Results (MFR), the Healthy Maryland 2010 Project, the Maryland Profile of Environmental Health Practice (Johns Hopkins University, 2005), and Maryland Environment 2000. Numerous permanent and temporary advisory committees focus on special needs.

1. Statutory and Regulatory Authorities

Md. Code Ann., State Finance and Procurement Article Title 3, Subtitle 10, Managing for Results

2. Delegations and Agreements

Department of the Environment and Department of Health and Mental Hygiene with Local Environmental Health Authorities
a. For those areas that fall within MDE’s jurisdiction and that have been delegated to Local Environmental Health Authorities, MDE will interact directly with the Local Environmental Health Authority.

b. DHMH, MDE, and Local Environmental Health Authorities agree to share information and expertise to assist one another in their respective strategic planning processes and to work collaboratively to examine and address the relationships between environmental quality and public health outcomes. Parties agree to assist each other in the planning, development and implementation of environmental public health improvement plans.

c. DHMH, MDE, and Local Environmental Health Authorities will exchange current lists of contact persons and programs in areas of joint interest.

d. Where a Departmental contact is not otherwise assigned in this MOU, DHMH and MDE agree to establish a point of contact for the purpose of coordinating activities between the two Departments and facilitating communication with Local Environmental Health Authorities. At DHMH the preliminary point of contact is the Environmental Health Bureau. At MDE the preliminary point of contact is the Science Services Administration.

e. The EHLC will meet bimonthly to coordinate efforts between MDE, DHMH, and Local Environmental Health Authorities on a variety of environmental health issues to improve services to clients and their families and to work generally toward the goals and objectives of their respective programs.

f. DHMH, MDE, and Local Environmental Health Authorities agree to work in a collaborative effort to resolve issues in program areas where policy issues are of mutual interest and may impact the delivery of services. Generally, the EHLC is available to serve this purpose. At times it may be necessary to establish informal workgroups and, when needed, advisory committees to work on issues of mutual concern. These workgroups and committees may include other state and local agencies and members of the community, and will be established with the concurrent approval of both Departments.

g. Where responses to the news media and press releases involve aspects of operations at MDE, DHMH, and/or Local Environmental Health Authorities, the interested parties will fully discuss the issues and their ramifications prior to issuing a public statement. The Communications Officer in each agency shall be the point of contact for these matters. Parties agree to share policies and procedures for urgent and non-urgent communications.

h. DHMH, MDE, and Local Environmental Health Authorities will coordinate efforts when developing and revising regulations of mutual interest. DHMH and MDE agree to provide consultation and education to Local Environmental Health Authorities on the meaning, purpose, and benefit of public health laws and how to apply those laws and regulations in a consistent manner.

i. DHMH, MDE, and Local Environmental Health Authorities will routinely share information regarding major enforcement actions, unless prohibited by law. Parties agree to coordinate notification of violations to the public, when required, and coordinate the sharing of information among appropriate agencies about enforcement activities, follow up activities, and trends or patterns, unless prohibited by law.

j. DHMH, MDE, and Local Environmental Health Authorities agree to give the highest priority to disasters and other emergencies having potential impacts on human and environmental health, and will clarify procedures. DHMH and MDE agree to provide consultation and technical assistance to Local Environmental Health Authorities on the accuracy and clarity of public health information associated with a public health emergency or investigation.
a. Where a public advisory is of interest to both Departments, DHMH and MDE agree to discuss the issues and their ramifications prior to release. The Public Information Officers in each Department shall coordinate the release of the advisory.
b. The Legislative Liaisons in each Department and designated representatives from the Local Environmental Health Authorities shall be the principal points of contact for inter-agency communication and coordination on legislative matters. The Departments agree to confer with each other and with Local Environmental Health Authorities on legislative matters when appropriate.

3. Departmental Contacts

For a complete listing of contacts, see the Contact List.
IV. DATA MANAGEMENT

Data resources are essential tools in environmental public health practice and are most efficiently sustained and improved through partnerships and coordinated planning. DHMH, MDE and Local Environmental Health Authorities will work toward streamlining data management and will strive to develop Internet-based systems to enhance the efficiency of communication of public health and environmental information across the State.

1. Roles of the Agencies

Department of the Environment

MDE has major responsibilities to assemble and develop data gathered from environmental samples and environmental observations, including data from the DHMH Laboratories Administration, other laboratories, and other internal and external data providers. MDE is responsible for the submission or transmission of these data to end users, such as internal MDE offices, local environmental health authorities, DHMH and other state agencies, and the U.S. EPA.

Department of Health and Mental Hygiene

DHMH is responsible for the collection, development, and dissemination of health data to internal DHMH offices, local environmental health authorities, and other external partners, including MDE. The DHMH Laboratories Administration is tasked with the production and reporting of data associated with environmental samples.

Local Environmental Health Authorities

Local Environmental Health Authorities are responsible for delegated disease and environmental surveillance.

2. Statutory and Regulatory Authorities

Other sections of this MOU cite various statutes and regulations pertaining to the collection and reporting of health, exposure, and environmental data. The following items specifically address the protection of public and non-public information.

- Specific provisions of Md. Code Ann. Health-General address issues of public and non-public health and medical data developed in conjunction with public health investigations:
  - Md. Code Ann. Health-General §§18-103 (reports and information related to communicable diseases)
  - Md. Code Ann. Health-General §§18-104 (information related to cancers that are caused by carcinogens and the incidence of those cancers)
  - Md. Code Ann. Health-General §§18-105 (information about diseases that are caused by toxic substances and the incidence of those diseases)
Md. Code Ann. Health-General §§18-201 (disease reports by physicians)
Md. Code Ann. Health-General §§18-202 (disease reports by hospitals and lodging facilities) and
Md. Code Ann. Health-General §§18-205 (disease reporting by laboratories)
Md. Code Ann. General Provisions § 4-329(b) (privacy of information related to medical and psychological information)


3. Delegations and Agreements

Department of the Environment and Department of Health and Mental Hygiene with Local Environmental Health Authorities

a. DHMH, MDE, and Local Environmental Health Authorities agree to abide by all statutes, regulations, and policies pertaining to the confidentiality and security of protected information.
b. All routine sharing of nonpublic data, or data that are not already publicly accessible, between DHMH, MDE, and Local Environmental Health Authorities shall be governed by formal Trading Partner Agreements, which will specify the roles and responsibilities of each data custodian.
c. DHMH, MDE, and Local Environmental Health Authorities agree to coordinate in the development of tools and methods for the analysis, visualization, and reporting of shared data. Parties agree to share data analyses in an effort to identify trends in health problems, environmental health hazards, and social and economic factors that affect the public’s health. DHMH and MDE agree to share data used in the development of public health policies, procedures, programs or interventions.
d. The EHLC shall discuss and coordinate information management strategies between state and local agencies to achieve efficient operations. Electronic means of data transfer will be established to the maximum extent possible.
e. Local Environmental Health Authorities will provide quarterly Environmental Health Performance Metrics data electronically to DHMH, which currently include data on food service facility inspections, certificates of potability issued for private wells, swimming pool operating permits and routine inspections, the number of new on-site sewage disposal systems installed, and the number of lots served by on-site sewage disposal created as part of a new subdivision. DHMH will serve as a repository for Environmental Health Performance Metrics and will make those data available to Local Environmental Health Authorities and MDE.
4. **Departmental Contacts**

For a complete listing of contacts, see the [Contact List](#).
V. LEGAL REPRESENTATION

The intent of this section of the MOU is to provide clear direction as to the provision of legal representation and counsel on matters related to programs administered by Maryland Department of the Environment (MDE), the Department of Health and Mental Hygiene (DHMH), and the local County or Municipal Authority. On matters where there is no clear determination of how the Local Environmental Health Authority is provided legal representation or counsel, it is agreed that all parties will convene in an expeditious fashion to determine the most appropriate legal representation.

Litigation, including appeals of licensing action, may require immediate or relatively rapid legal response. Therefore, litigation documents and appeals received should be referred immediately to the appropriate legal office to avoid a default judgment against the Local Environmental Health Authority, a county, MDE, or DHMH because deadlines for filing legal responses have not been met.

Department of the Environment with Local Environmental Health Authorities

The MDE, through the Office of the Attorney General, shall represent the Local Environmental Health Authority in litigation involving administrative appeals of permit denials where the denials are based on implementation of MDE laws and regulations. For example, MDE would represent an Approving Authority where it denied a sewage disposal system permit because a lot did not satisfy the requirements of COMAR 26.04.02.

A request for enforcement shall be submitted to the appropriate Administrative Director, who shall review it and, if appropriate, refer a request to the Office of the Attorney General. If the Administration Director does not refer to the Office of the Attorney General, the Local Environmental Health Authority shall be notified in writing within 30 days.

All referrals shall include a copy of the complaint, a completed litigation report, and a copy of the complete file. A litigation report shall include: (1) the name, address and telephone number of the opposing party, his lawyer, and all witnesses; (2) a description in narrative form of the facts and circumstances, including facts adverse to the claim, regarding the claim; (3) copies of all written and oral communications between the party or his lawyer and the Local Environmental Health Authority; (4) a description of efforts to settle the matter; and (5) a description of the regulatory history of the person involved.

MDE shall interpret State regulations and policies as necessary. A request for an interpretation may be made directly to MDE staff or in writing. Written requests may be submitted to the appropriate Administration Director, who shall review them, consult with MDE staff and the Local Environmental Health Authority and if appropriate, refer them to the Office of the Attorney General. MDE shall either respond to a written request or refer that request to the Office of the Attorney General within 30 days.

The Local Environmental Health Authority may confer with, and/or obtain legal counsel from the Office of the Attorney General as is necessary to discuss specific issues such as PIA requests or lawsuits impacting an individual Local Environmental Health Authority. If, however,
clarification of policy or regulation is needed, the appropriate MDE staff or the Administration Director shall be contacted as provided above.

Department of Health and Mental Hygiene with Local Environmental Health Authorities

In instances where license or permit denials or enforcement actions are based on Health-General laws, health regulations or directives, or authority delegated directly from DHMH, the Local Environmental Health Authority shall be represented by the DHMH through the Office of the Attorney General (for example, DHMH would represent the Local Environmental Health Authority at a hearing before the Office of Administrative Hearings for a contested case of food license suspension for failure to comply with the requirements of COMAR 10.15.03).

DHMH shall interpret State health regulations and policies as necessary. When requesting an interpretation of regulation or policy, the better practice is to submit the request in writing or by e-mail directly to DHMH. Written or e-mail requests may be submitted to the appropriate Division Chief or Program Director, who shall review the request, consult with appropriate DHMH and Local Environmental Health Authority staff, and if appropriate, the Office of the Attorney General. A written response shall be provided to the Local Environmental Health Authority within 30 days if possible, or as soon as practicable. Unless the interpretation is specific to a single county, DHMH shall disseminate the information in writing to all Local Environmental Health Authorities with an interest in the interpretation.

The Local Environmental Health Authority may confer with and/or obtain legal counsel from the DHMH Office of the Attorney General as is necessary to discuss specific health law issues, such as what warrants certain legal action or the recommended legal course of action. If however, clarification of a DHMH policy or regulation is needed, the appropriate DHMH staff or the Program Director shall be contacted as provided above.

County or Municipal Authority with Local Environmental Health Authority

In instances where law suits, permit denials, or enforcement actions are based on local ordinances, the Local Environmental Health Authority would be responsible for obtaining local legal representation. The Local Environmental Health Authority shall obtain assurances from the County/Municipal Authority or comparable entity that legal representation shall be provided to the Local Environmental Health Authority for those cases involving local code enforcement. It is suggested that the commitment for County/Municipal resources be provided in writing with a clear delineation of the County/Municipal legal responsibility and process for accessing legal support. In some situations (such as nuisance investigation and on-site sewage disposal requirements in Harford County Code), both State and County/Municipal codes are applicable. The Local Environmental Health Authority shall consider the applicability and enforceability of each code, taking into account the time frame for due process and appeal rights. It is recommended that code citation for denial or enforcement actions be limited to either the State or County/Municipal Code to clearly delineate the legal responsibility for representation. Where possible, the Local Environmental Health Authority shall coordinate with County or Municipal departments (such as Zoning and Public Works) to effect a joint legal approach. [Example: often trash complaints (health department) occur with zoning violations. Joint legal approach is not only more effective in securing compliance; it minimizes the legal resources necessary for enforcement.] All referrals to the County/Municipal Law Department for legal support should include a copy of the complaint, a completed litigation report, and a copy of the complete file, or other information requested by the local legal counsel.
VI. AREAS OF AGREEMENT

A. Air Protection

1. Public Health Significance

Air pollution is increasingly recognized as a major contributor to acute and chronic disease, including asthma and cardiovascular disease, and global climate change.

2. Roles of the Agencies

Department of the Environment

Within MDE, the Air and Radiation Management Administration (ARMA) has primary responsibility for air pollution matters. Odor and nuisance complaints that are related to landfills and other permitted solid waste facilities are handled by the Land Management Administration and local governments, in conjunction with ARMA; and those related to sewage treatment facilities are handled by the Water Management Administration and local governments.

Department of Health and Mental Hygiene

DHMH has a broad mandate to investigate the causes of disease and mortality, and to coordinate with other agencies in the prevention and mitigation of health threats.

The Clean Indoor Air Act (CIAA) of 2007 prohibits smoking in indoor areas open to the public, as well as in workplaces. The CIAA is enforced by local environmental health authorities, in conjunction with DHMH. Complaints are investigated and citations issued by Local Environmental Health Authorities, based on COMAR 10.19.04.

Local Environmental Health Authorities

Local Environmental Health Authorities may be responsible for the following activities: issuance of permits for outdoor burning; investigation and enforcement of local violations of the Clean Indoor Air Act, and investigation and enforcement of nuisance complaints.

3. Statutory and Regulatory Authorities

Department of the Environment

Under Md. Code Ann., Environment §2-103, MDE is the State agency charged with jurisdiction over emissions into the air and ambient air quality control. MDE is also responsible for monitoring ambient air quality in the State and for coordinating all State agency programs on ambient air quality control. Local jurisdictions may adopt local ordinances that establish emission standards or ambient air quality standards as long as they are not less stringent than standards set by MDE.
See also COMAR 26.11.07 on “Open Fires”.

Department of Health and Mental Hygiene


4. Delegations and Agreements

Department of the Environment with the DHMH Laboratories Administration

- The DHMH Laboratories Administration analyzes asbestos samples and particulate matter filters under a contract with MDE.

- The DHMH Laboratories Administration analyzes and visually identifies, on an as-needed basis, dust and dirt samples collected as a result of nuisance complaints.

Department of the Environment with Washington County Health Department

- Memorandum of Agreement between the Washington County Health Department and ARMA detailing a cooperative arrangement between the two agencies relating to air pollution matters, including response to complaints, issuance of Notices of Violation, and permit assistance.

Department of the Environment with Local Environmental Health Authorities

- COMAR 26.11.07, which governs open burning, contains specific authorization for certain local officials, who are called “control officers,” to review applications for open burning and to issue permits, subject to review by MDE. The term “control officer” is defined at COMAR 26.11.01.01B(12) and includes the health officer in some counties and different county officials in other counties. MDE issues open burning approvals directly in Caroline County.

- Investigates nuisance complaints related to open burning, including wood boiler emissions.

5. Departmental Contacts

For a complete listing of contacts, see the Contact List.

Department of the Environment

Air and Radiation Management Administration

Department of Health and Mental Hygiene

Prevention and Health Promotion Administration
• Environmental Health Bureau

Laboratories Administration
• Division of Environmental Chemistry
B. Radiation Protection

1. Public Health Significance

There are both natural and human-caused sources of radiation in the environment that have the potential to cause chronic health effects, primarily through damage to cells resulting in cancer. Sources of concern include naturally occurring radionuclides in water; radon gas in homes; radiation sources used in energy facilities, industry, and health care; and radioactive waste.

2. Roles of the Agencies

Department of the Environment

MDE is the State agency vested with responsibility for the control of sources of radiation in the State. As such, MDE has promulgated extensive regulations requiring licensing of certain users of radioactive material and registration and/or certification of x-ray machines. Under an agreement with the federal Nuclear Regulatory Commission (NRC), the State’s licensing program operates in lieu of the federal program. The NRC retains licensing authority over certain facilities, including nuclear power plants and federal facilities. Radiological samples are sometimes collected during inspections of licensed facilities, and those samples are sent to the DHMH laboratory for analysis.

Department of Health and Mental Hygiene

DHMH has a broad mandate to investigate the causes of disease and mortality, and to coordinate with other agencies in the prevention and mitigation of health threats. For emergency response related to radiation incidents, DHMH supports and coordinates with MDE formally through the Ingestion Pathway Committee, and as needed in other cases.

Local Environmental Health Authorities

Local Environmental Health Authorities, together with local emergency responders and emergency preparedness, will often be the first points of contact for emergency responders and they coordinate with MDE and DHMH in incidents involving nuclear materials or radiation protection. Local Environmental Health Authorities have specific responsibilities under the State’s Fixed Nuclear Facility Contingency Plan (formerly Annex Q), including issues involving potassium iodide distribution, monitoring and decontamination of potentially-exposed individuals, and food safety.

3. Statutory and Regulatory Authorities

Department of the Environment

Md. Code Ann., Environment Title 8 - Radiation

Department of Health and Mental Hygiene
4. **Delegations and Agreements**

*Department of the Environment with DHMH Laboratories Administration*

- The DHMH Laboratories Administration analyzes radiological samples collected during inspections of licensed facilities by MDE.

- MDE and the DHMH Laboratories Administration collaborate on the Radiation Emergency Response Plan.

5. **Departmental Contacts**

For a complete listing of contacts, see the [Contact List](#).

*Department of the Environment*

Air and Radiation Management Administration

*Department of Health and Mental Hygiene*

Laboratories Administration
  - Division of Environmental Chemistry
C. Low-Level Radioactive Waste

1. Public Health Significance

Low-level radioactive waste is generated in numerous settings, including health care, manufacturing, and research. Maryland transports low-level radioactive waste to out-of-state disposal facilities.

2. Roles of the Agencies

Department of the Environment

a. The Secretary of MDE has been appointed by the Governor to serve as a member of the Appalachian States Low-Level Radioactive Waste Commission. The Commission is the governing body for the Appalachian States Low-Level Radioactive Waste Compact, an interstate agreement entered into by Maryland, Pennsylvania, Delaware and West Virginia in 1986. The Compact provides necessary authority for development of a regional low-level radioactive waste disposal facility.


c. The Controlled Hazardous Substance (CHS) Advisory Council was established in 1982 by the Maryland General Assembly to advise and assist MDE on (1) identifying any hazardous substance as a CHS, and (2) developing rules and regulations for the management and disposal of CHS. Low-Level radioactive waste is included in the definition of CHS.

Department of Health and Mental Hygiene

The Secretary of DHMH also has been appointed by the Governor to serve as a member of the Appalachian States Low-Level Radioactive Waste Commission.

3. Statutory and Regulatory Authorities

Department of the Environment and Department of Health and Mental Hygiene

Md. Code Ann., Environment Title 7

4. Delegations and Agreements

None

5. Departmental Contacts

For a complete listing of contacts, see the Contact List.
*Department of the Environment*

Land Management Administration
- Waste Diversion and Utilization Program

*Department of Health and Mental Hygiene*

Prevention and Health Promotion Administration
- Environmental Health Bureau
D. Drinking Water Protection

1. Public Health Significance

Provision of safe and adequate drinking water is a fundamental public health protection for individuals and the community.

2. Roles of the Agencies

Department of the Environment

a. Implements and enforces standards for public drinking water systems in Maryland.
b. Issues construction permits for community and non-transient community water supply systems.
c. Approves well sites for community and non-transient non-community water systems. Under certain emergency circumstances, MDE may verbally give the Local Environmental Health Authority approval to sign the well construction permit.
d. Issues certificates of potability for community and non-transient non-community water system wells.
e. Implements the Certification of Drinking Water Quality Laboratories.
f. Oversees permitting for non-public well construction delegated to local approving authorities.
g. Assists local jurisdictions in development of source water and watershed protection programs.
h. Assists local jurisdictions with the issuance of boil water advisory and public notifications.
i. Manages State water resources through permitting of water withdrawals from ground and surface water sources including rivers, lakes, and springs. All public water systems are required to obtain a water appropriation permit; this is required for issuing well construction permits for public water systems. Certain non-community water systems that use less than 5,000 gallons per day may file for an exemption.
j. Oversees delegated program for oversight of transient non-community water systems.
k. Reviews and approves county water and sewerage plans.
l. Provides review and technical assistance for local jurisdictions developing Water Resources Elements of their Comprehensive Plans.
m. Requires water systems and local jurisdictions to track their capacity; when a certain threshold is reached, requires local jurisdictions to cease issuance of building permits.

Department of Health and Mental Hygiene

a. DHMH has a broad mandate to investigate the causes of disease and mortality, and to coordinate with other agencies in the prevention and mitigation of health threats.
b. DHMH will lead investigations of waterborne disease outbreaks with the assistance of MDE.
c. DHMH Laboratories Administration provides lab support in this area.
Local Environmental Health Authorities

a. Implement the private (non-public) well construction program which includes:
   i. Approve site locations and issue permits for private wells, and wells used for
      irrigation, geothermal heating or cooling, and agricultural purposes.
   ii. Issue Certificates of Potability for private wells.
   iii. Perform or oversee all water sampling necessary to issue a Certificate of Potability.
   iv. Verify that required treatment devices achieve performance standards to comply
       with potability criteria.
   v. Perform well construction inspections such as grouting, pitless adapter installation
       and sealing of abandoned wells.
   vi. Inform and educate the public on interpreting water quality test data. Give advice
       on remedial action which can be taken to improve water quality.
   vii. Maintain local databases of water quality data.
   viii. Implement provisions of well construction regulation COMAR 26.04.04 for non-
        public water supplies, including enforcement activities related to well construction.

b. Except in non-delegated counties, implement Safe Drinking Water Act activities for
   Transient Non-Community Water Systems, which includes:
   i. Monitor water quality according to COMAR 26.04.01.
   ii. Conduct sanitary surveys of all active transient non-community water supplies at
       least once every five years.
   iii. Data management – maintain an up-to-date inventory of transient non-community
        systems.
   iv. Enforcement – take compliance/enforcement actions.
   v. Investigate complaints regarding transient non-community systems.
   vi. Oversee testing for transient non-community systems with vulnerable sources to
       determine if the sources are classified as ground water under direct influence
       (GWUDI)
   vii. Approve well site locations for transient non-community systems and issue permits
       for well construction after consultation with MDE.
   viii. Issue Certificates of Potability for transient non-community wells.

c. Approve subdivision plats based on adequacy of water and sewerage systems, except in those
   Counties where delegation of approval has been authorized to another County agency for
   subdivisions utilizing community water and sewer systems.

d. Verify adequacy of water supply and sewerage prior to the approval of building permits for
   properties served, or to be served, by an on-site sewage disposal system, a private well water
   supply, and/or a public water system.

e. Assure that building permits are issued only where it is determined that water and sewer
   systems are adequate and available. The delegated Local Environmental Health Authority
   accomplishes this by monitoring the status of the local building permit process, and either
   signing-off each building permit or approving water and sewer allocation requests. The
   Approving Authority may request whatever information is necessary to determine if systems
   are adequate and available.

3. Statutory and Regulatory Authorities

Department of the Environment

Environment Article Title 1 Subtitles 3, 4, & 6
4. **Delegations and Agreements**

For programs delegated to counties by MDE, MDE’s Water Management Administration will:

- Set regulatory standards.
- Provide training as resources are available in general, and in response to Local Environmental Health Authority requests or in response to regulatory changes.
- Provide technical assistance.
- Provide legal support for contested cases and enforcement concerning State regulations.
- Develop statewide program policy.
- Provide information on available capacity on water and wastewater facilities.
- Provide a list of MDE contacts for referral of questions at headquarters and regional offices.

**Department of the Environment with Local Environmental Health Authorities**

- Local Environmental Health Authorities will notify the Water Supply Program prior to issuing any well permits for community or non-transient non-community water systems to enable MDE to approve the well location, as needed.

- Water Management Administration delegates the implementation of the following regulations:
  
  i. **COMAR 26.04.01: “Quality of Drinking Water in Maryland”**

     Responsibility for Transient Non-Community Water Systems:
     
     − Delegation agreements have been executed in the following counties:
       Allegany, Anne Arundel, Baltimore, Calvert, Caroline, Carroll, Charles, Dorchester, Frederick, Garrett, Harford, Howard, Kent, Queen Anne's, St. Mary's, Somerset, Talbot, Washington, and Worcester
     
     − Funding amounts are updated annually through a separate agreement.

     MDE Water Supply Program implements regulations directly for:
     
     − community water systems
     
     − non-transient non-community water systems
     
     − transient non-community water systems in non-delegated counties (Montgomery, Prince George’s, Cecil, and Wicomico counties)

  
  ii. **COMAR 26.04.03: “Water Supply and Sewerage Systems in the Subdivision of Land in Maryland”**

  iii. **COMAR 26.04.04: “Well Construction”**

  iv. **COMAR 26.04.05: “Shared Facilities”**
Department of Health and Mental Hygiene with Local Environmental Health Authorities

• The Laboratories Administration at DHMH agrees to provide laboratory services at no cost to Local Environmental Health Authorities to support the required water quality testing of private wells under the above listed delegated programs.

• The Laboratories Administration at DHMH agrees to assist a local jurisdiction with conducting laboratory tests.

• In facilities licensed or permitted to operate by DHMH, DHMH and/or Local Environmental Health Authorities will:
  i. Conduct licensing assessments for food service facilities, day care, nursing homes, food handling/processing, etc. facilities
  ii. Take specific, appropriate emergency response enforcement actions for issues not involving MDE-permitted activities.

Department of the Environment with Department of Health and Mental Hygiene

• The Laboratories Administration at DHMH and the Water Management Administration at MDE have an MOU that is renewed annually, under which DHMH provides analytical support for public drinking water laboratories.

Department of the Environment with Department of Health and Mental Hygiene and Local Environmental Health Authorities

• DHMH and Local Environmental Health Authorities will provide support to MDE Water Management Administration for permitting and permit enforcement actions for sewage and water supply activities, if requested by MDE and as resources permit.

5. Departmental Contacts

For a complete listing of contacts, see the Contact List.

Department of the Environment

Water Management Administration
  • Water Supply Program
  • Wastewater Permits Program
  • Compliance Program

Department of Health and Mental Hygiene

Prevention and Health Promotion Administration
  • Environmental Health Bureau
  • Infectious Disease Bureau
Laboratories Administration
    • Division of Environmental Chemistry
E. Fluoridation

1. Public Health Significance

Optimal fluoridation of community water supplies has been found to be a safe and effective public health measure for the prevention of tooth decay and is the single most effective measure to prevent this disease and to improve oral health over a lifetime. It is an important issue for collaboration between MDE and DHMH given that approximately 85 percent of Maryland residents live on community water systems that have optimal fluoride levels.

2. Roles of the Agencies

Department of the Environment

MDE Water Management Administration regulates public water systems. MDE tracks and reviews the fluoride concentration of all community water systems. Technical assistance is provided to water system operators on operation and safety issues related to water treatment.

Department of Health and Mental Hygiene

Collaboration opportunities for DHMH Office of Oral Health and MDE Water Management Administration include data and information sharing, community water fluoridation monitoring activities, training of water operators, and related grant writing and application. Further, the Centers for Disease Control and Prevention (CDC) has developed a water fluoridation surveillance system for the States that both MDE and DHMH can utilize. In December 2010, the CDC issued new guidelines for fluoridation of water systems; 0.7 milligrams per liter fluoride is considered the optimal concentration.

Local Environmental Health Authorities

Local Environmental Health Authorities serve an important role in education as well as monitoring of fluoride levels, responding to either under- or over-flouridation.

3. Statutory and Regulatory Authorities

Department of the Environment

COMAR 26.04.01

4. Delegations and Agreements

• MDE and DHMH agree to work together to ensure that Maryland residents receive an optimal concentration of fluoride in their community drinking water. In furtherance of this
goal, DHMH and MDE agree to meet annually to discuss and establish a framework for fluoridation activities in Maryland.

- DHMH agrees to notify MDE when State funding is available for fluoride treatment systems in order to discuss potential candidates for the fiscal year. MDE agrees to contact water systems for potential interest in the addition of fluoridation equipment.

- MDE and DHMH agree to provide information to public water systems that are considering the addition of fluoride treatment, and to assist in public meetings for the purpose of responding to the public’s concerns.

- MDE agrees to provide fluoride data on public water systems to DHMH staff to use as background data for evaluating dental health in Maryland counties and to assist with periodic updates to the CDC on public water system fluoridation for Maryland.

- MDE agrees to notify Local Environmental Health Authorities when there are changes in fluoridation practices in their jurisdiction. This includes, but is not limited to, the addition of fluoride to the drinking water, or the removal of fluoridation equipment by a community water system.

5. **Departmental Contacts**

For a complete listing of contacts, see the [Contact List](#).

**Department of the Environment**

Water Management Administration
- Water Supply Program

**Department Of Health and Mental Hygiene**

Family Health Administration
- Office of Oral Health
F. Wastewater Management

1. Public Health Significance

Sanitary disposal of wastewater directly relates to water supplies for drinking and recreational use and is a fundamental public health protection that is essential to individuals and communities.

2. Roles of the Agencies

Department of the Environment

a. Issues construction permits and individual groundwater discharge permits for on-site sewage disposal systems with a design flow greater than 10,000 gallons per day (gpd); the Department may require an applicant for a system with a maximum daily flow of less than 10,000 gpd to obtain an Individual Groundwater Discharge Permit if specific project characteristics warrant additional monitoring or control or special permit requirements.

b. Oversees delegated onsite sewage disposal programs.

c. Administers the Bay Restoration Fund (BRF) on a State scale, distributing funds to local jurisdictions to administer at a County scale for upgrading or installing onsite sewage disposal systems for eligible properties.

d. Evaluates technologies to be considered best available technologies (BAT) for removing nitrogen from onsite sewage disposal systems.

e. Issues and enforces permits for industrial and municipal National Pollutant Discharge Elimination System (NPDES) surface water discharges.

f. Issues and enforces permits for groundwater discharges.

g. Performs compliance inspections for NPDES and Groundwater Discharge permits that may include sampling.

h. Reviews and approves county water and sewerage plans.

i. Provides review and technical assistance for local jurisdictions developing Water Resources Elements of their Comprehensive Plans.

j. Maintains a database for BAT installations and BAT operation and maintenance.

Department of Health and Mental Hygiene

a. DHMH has a broad mandate to investigate the causes of disease and mortality, and to coordinate with other agencies in the prevention and mitigation of health threats.

b. DHMH will lead investigations of waterborne disease outbreaks with the assistance of MDE.

c. DHMH Laboratories Administration provides lab support in this area.

Local Environmental Health Authorities

a. Perform percolation testing and soil evaluations to determine if a site is suitable for an on-site sewage disposal system and what type of system is appropriate.

b. Provide minimum design requirements, issues permits and inspects the installation of on-site sewage disposal systems.
c. Investigate complaints of sewage discharge or failing septic system and take enforcement action to correct problems.
d. Where appropriate, administer the Bay Restoration Fund Program, which includes identifying and prioritizing applicants and distributing funds (directly or through third party vendors) to contractors for BAT upgrades.
e. Oversee BAT installations, making site visits and doing any testing that might be required; working with installers and inspecting installation; recording agreements; keeping a database of installations; tracking maintenance agreements and maintenance; and taking enforcement actions.
f. Receive reports of overflows and by-passes of wastewater at a sanitary sewer system, combined sewer system or wastewater treatment plant.
g. Direct the owner or operator of the system that had the overflow or bypass on how to proceed with public notification in accordance with COMAR 26.08.10.
h. Direct the owner or operator in the sampling of surface water testing for fecal coliform, \( E.\text{coli} \), Enterococci, or any other specific organism.
i. Advise the owner or operator when signs posted following an overflow may be removed.
j. Approve subdivision plats determining adequacy of water and sewerage systems, except in those Counties where delegation of approval has been authorized to another County agency for subdivisions utilizing community water and sewer systems.
k. Verify adequacy of water supply and sewerage prior to the issuance of building permits for properties served, or to be served, by an on-site sewage disposal system, a private well water supply, and/or a public water system.
l. Assure that building permits are issued only where it is determined that water and sewer systems are adequate and available. The delegated Local Environmental Health Authority accomplishes this by monitoring the status of the local building permit process, and either signing-off each building permit or approving water and sewer allocation requests. The Approving Authority may request whatever information is necessary to determine if systems are adequate and available.

**Department of the Environment with Local Environmental Health Authorities**

a. Review plans and proposals for onsite sewage disposal systems with a design flow equal to or greater than 5,000 gpd, or if a groundwater discharge permit is required to protect the waters of the State.
b. Review and approve nitrogen removing technologies for use with onsite sewage disposal systems with design flows of 1500 gpd or greater and less than 5000 gpd or with effluent not typical of domestic wastewater.

### 3. Statutory and Regulatory Authorities

**Department of the Environment**

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Department of Health and Mental Hygiene


4. Delegations and Agreements

In programs delegated to counties by MDE, MDE’s Water Management Administration will:
- Set regulatory standards.
- Provide training as resources are available in general, and in response to Local Environmental Health Authority requests or in response to regulatory changes.
- Provide technical assistance.
- Provide legal support for contested cases and enforcement concerning State regulations.
- Develop statewide program policy.
- Provide information on available capacity on water and wastewater facilities.
- Provide a list of MDE contacts for referral of questions at headquarters and regional offices.

Department of the Environment with Local Environmental Health Authorities

• Water Management Administration delegates the implementation of the following regulations:
  i. COMAR 26.04.02: “Sewage Disposal and Certain Water Systems for Homes and Other Establishments in the Counties of Maryland where a Public Sewage System is not Available”
  ii. COMAR 26.04.03: “Water Supply and Sewerage Systems in the Subdivision of Land in Maryland”
  iii. COMAR 26.04.05: “Shared Facilities”

• The following agreements delegate authority to the Local Environmental Health Authorities
  i. To administer and enforce certain sections of COMAR relating to septage management, such as inspecting and permitting septage vehicles, investigating complaints regarding local handling of septage, enforcement actions, and providing MDE with annual reports of all permits issued and/or denied.
  ii. Septage Waste delegation agreements with the following local jurisdictions: Allegany County, Baltimore County, Calvert County, Caroline County, Cecil County, Charles County, Dorchester County, Frederick County, Garrett County, Howard County, Kent County, Montgomery County, Prince George’s County, Queen Anne’s County, St. Mary’s County, Talbot County, Washington County, Wicomico County, and Worcester County.
  iii. Septage Complaints:
    1. Septage complaints related to MDE permitted facilities are handled by MDE.
    2. Local jurisdictions handle septage complaints not related to MDE permitted facilities.
  iv. Vehicle Inspections: Septage waste MOUs delegate inspection of septage transporting vehicles to all counties.
Department of Health and Mental Hygiene with Local Environmental Health Authorities

• The Laboratories Administration at DHMH agrees to provide laboratory services at no cost to Local Environmental Health Authorities to support the required wastewater quality testing of on-site sewage disposal systems under the above listed delegated programs.

• The Laboratories Administration at DHMH agrees to assist a local jurisdiction with conducting laboratory tests.

• In facilities licensed or permitted to operate by DHMH, DHMH and/or Local Environmental Health Authorities will:
  i. Conduct licensing assessments for food service facilities, day care, nursing homes, food handling/processing, etc. facilities.
  ii. Take specific, appropriate emergency response enforcement actions for issues not involving MDE-permitted activities.

Department of the Environment with Department of Health and Mental Hygiene

• MDE & DHMH will coordinate in implementation and enforcement of COMAR 26.08.04, Permits and COMAR 10.17.01, Public Swimming Pools, to ensure that proposed plans comply with the agencies' respective requirements.

• DHMH will update MDE on new pool and spa chemicals and water treatment processes that may affect the environment through the discharge of pool and spa wastewater to waters of the State.

• DHMH will provide support, as requested by MDE, for NPDES Compliance Sampling Inspection activities.

Department of the Environment with Department of Health and Mental Hygiene and Local Environmental Health Authorities

• DHMH and Local Environmental Health Authorities will provide support to MDE Water Management Administration for permitting and permit enforcement actions for sewage and water supply activities, if requested by MDE and as resources permit.

5. Departmental Contacts

For a complete listing of contacts, see the Contact List.

Department of the Environment

Water Management Administration
• Wastewater Permits Program
• Compliance Program
Department of Health and Mental Hygiene

Prevention and Health Promotion Administration
- Environmental Health Bureau
- Infectious Disease Bureau

Laboratories Administration
- Division of Environmental Chemistry
G. Recreational Water Management and Surface Water Protection

1. Public Health Significance

Water, because it is essential for life, is also a common vehicle for many different exposures that can affect health. These include chemical, physical, and infectious agents.

2. Roles of the Agencies

Department of the Environment

a. Oversees and delegates statewide program for monitoring and notification of bathing beaches.
b. Responds to fish kills and harmful algal blooms by investigating water resources and taking corrective actions as necessary to protect the public and natural resources.
c. Conducts routine monitoring for identification and enumeration of phytoplankton. Also conducts lab analysis for toxin if needed.
d. Investigates and undertakes corrective action related to complaints of water pollution activities impacting waters of the State.
e. Develops and maintains water quality standards, assesses use attainment of the State’s waters, and assembles and manages water, sediment, tissue, biological, and bacteriological data for use in these programs.
f. Collects samples and tracks contaminant levels in fish and shellfish resources and issues consumption advisories to protect public health.
g. Provides outreach about fish and shellfish consumption advisories and related information to partners such as Maryland Women, Infants, and Children (WIC) centers, DHMH and Local Environmental Health Authorities.
h. Focuses outreach efforts at various popular fishing locations, especially those which may be frequented by subsistence fishermen.
i. Implements wetlands protection.
j. Oversees local stormwater management program implementation ensuring compliance with State law and regulation, and regulates State and federal agency construction projects for both stormwater management and erosion & sediment control.
k. Issues and enforces NPDES municipal waste water and stormwater permits. Also issues and enforces NPDES private waste water and industrial permits.
l. Implements stormwater management except where regulated by local Counties.
m. Delegates erosion and sediment control enforcement authority to localities.
n. Issues and enforces Dam Safety permits.

Department of Health and Mental Hygiene

a. DHMH has a broad mandate to investigate the causes of disease and mortality, and to coordinate with other agencies in the prevention and mitigation of health threats.
b. Serves as a resource for MDE and Local Environmental Health Authorities on risk communication regarding fish and shellfish consumption.
c. DHMH Laboratories Administration provides lab support in this area.
Local Environmental Health Authorities

a. Manage delegated program for monitoring and notification of bathing beaches statewide. Local Environmental Health Authorities are responsible for pathogen indicator monitoring and providing prompt notification of an advisory or closure in the event of elevated risk to bathers.
b. May perform shoreline surveys to identify pollution sources and/or implements corrective actions.

Department of the Environment with Department of Health and Mental Hygiene

a. MDE, DHMH, and the Maryland Department of Natural Resources collaborate to manage a statewide Harmful Algal Bloom (HAB) surveillance program. This program includes routine monitoring by MDE and DNR, field response, laboratory analysis, and management actions as appropriate to protect public health and the environment. When indicated, Enzyme-Linked Immunosorbent Assay (ELISA) is performed by an MDE laboratory to evaluate for specific algal toxins (e.g. Microcystins) in drinking water reservoirs and recreational waters. MDE also tests shellfish tissue from coastal bay locations for okadaic acid, an algal toxin that can cause diarrhetic shellfish poisoning.
b. MDE and DHMH collaborate to evaluate known and emerging environmental hazards that may be found in recreational waters, and lead statewide public communication efforts regarding these hazards when needed.
c. MDE and DHMH will lead investigations of waterborne disease outbreaks.

3. Statutory and Regulatory Authorities

Federal

The primary goal of the Clean Water Act is to “restore and maintain the chemical, physical and biological integrity of the Nation’s waters,” and its requirements focus on attaining these fishable swimmable goals. The U.S. Environmental Protection Agency has interpreted the term, "fishable," to mean "edible." According to the Clean Water Act, "States shall identify specifically those navigable waters, the quality of which is adequate to provide for the protection and propagation of a balanced population of shellfish, fish, and wildlife and recreational activities in and on the water."

Department of the Environment

Md. Code Ann., Environment §5-203 – This statute requires MDE to study water resources of the State to provide sufficient information to formulate a program and perform its duties. Finfish and shellfish are considered water resources of the State.

Md. Code Ann., Environment §9-314 and §9-321 – These statutes provide MDE with authority related to water quality standards and effluent standards for waters of the State (§9-314) and water quality monitoring of the Chesapeake Bay (§9-321).
Department of Health and Mental Hygiene


4. **Delegations and Agreements**

Department of the Environment with Local Environmental Health Authorities

- Science Services Administration delegates the implementation of the following regulations:
  - i. COMAR 26.08.09: “Public Bathing Beaches”

- Local Environmental Health Authorities will:
  - i. Process permits, monitor water quality, provide public notification, and maintain and operate permitted beach(es) in accordance with COMAR 26.08.09.02 through 26.08.09.06.
  - ii. Monitor local beach(es) in accordance with COMAR 26.08.09.07.
  - iii. Issue notification when indicator organism density exceeds the recreational water quality standard or when there is a health hazard in accordance with 26.08.09.08, and promptly notify public and MDE of this notification.
  - iv. Maintain a list of all beaches in their jurisdiction and update MDE when there are changes to list or monitoring priority (Tier) for each beach.
  - v. Perform a sanitary survey before opening a beach, and share survey information with MDE.
  - vi. Communicate with MDE when beach information is requested or to provide updates about status of beaches in their jurisdiction.

Department of Health and Mental Hygiene with Local Environmental Health Authorities

- The Laboratories Administration at DHMH agrees to provide laboratory services at no cost to Local Environmental Health Authorities to support the required water quality testing of bathing beaches and public swimming pools under the above listed delegated programs.

- The Laboratories Administration at DHMH agrees to assist a local jurisdiction by conducting laboratory tests.

Department of the Environment with Department of Health and Mental Hygiene

- MDE and DHMH will coordinate in implementation and enforcement of COMAR 26.08.04, Permits and COMAR 10.17.01, Public Swimming Pools, to ensure that proposed plans comply with the agencies' respective requirements.
• DHMH will update MDE on new pool and spa chemicals and water treatment processes that may affect the environment through the discharge of pool and spa wastewater to waters of the State.

• DHMH will provide support, as requested by MDE, for NPDES Compliance Sampling Inspection activities.

*Department of the Environment and Department of Health and Mental Hygiene with Local Environmental Health Authorities*

• MDE, DHMH, and Local Environmental Health Authorities will work together to develop and implement communication to the public regarding harmful algal blooms and other environmental hazards that may be found in recreational waters.

• MDE will communicate all fish and shellfish consumption advisories and related information to DHMH and Local Environmental Health Authorities.

5. **Departmental Contacts**

For a complete listing of contacts, see the [Contact List](#).

*Department of the Environment*

Science Services Administration
- Environmental Assessment and Standards Program
- Water Quality Protection and Restoration Program

Water Management Administration
- Wastewater Permits Program
- Compliance Program

Office of Communications

*Department of Health and Mental Hygiene*

Prevention and Health Promotion Administration
- Environmental Health Bureau
- Infectious Disease Bureau
H. Shellfish Protection

1. Public Health Significance

Commercial and recreational shellfish harvesting in Maryland waters are important activities in the Chesapeake Bay, its tributaries, and Maryland’s coastal bays. MDE, DHMH, DNR, and local authorities collectively monitor and regulate these activities to ensure the safety of the source waters and the harvested foods. Commercial shellfish harvesting is also controlled under guidelines of the National Shellfish Sanitation Program (NSSP). Maryland is a member of the Interstate Shellfish Sanitation Conference; compliance with the NSSP assures interstate commerce for Maryland’s shellfish and shellfish industry.

2. Roles of the Agencies

Department of the Environment

a. Monitors bacteriological water quality of shellfish growing waters and shellstock.
b. Conducts shoreline surveys in areas adjacent to shellfish harvesting areas to determine pollution sources affecting those areas.
c. Performs comprehensive sanitary survey reports for each shellfish growing area. Reviews and evaluates bacteriological data and sanitary survey information to certify that harvesting areas conform to the standards of the NSSP.
d. Continually assesses all harvesting areas to ensure they are correctly classified. All areas that may pose a risk are legally closed to harvesting.
e. Implements emergency closures when necessary.
f. Monitors Maryland’s coastal bays collecting samples for identification and enumeration of algal species as part of a contingency plan for potentially harmful algae required under the NSSP.
g. Notifies DNR, DHMH, Industry, and the public when any harvesting area is reclassified.
h. Determines if growing waters should be closed to harvesting following an illness outbreak from waterborne pathogens or toxins from harmful algae associated with the consumption of shellfish.

Department of Health and Mental Hygiene

a. DHMH has a broad mandate to investigate the causes of disease and mortality, and to coordinate with other agencies in the prevention and mitigation of health threats.
b. DHMH Laboratories Administration provides lab support in this area.

Department of the Environment and Department of Health and Mental Hygiene

a. MDE and DHMH work with DNR, federal regulators, and the shellfish industry to ensure the State shellfish program meets NSSP standards and is effectively and efficiently operated.
b. MDE, DHMH, and DNR collaborate to implement closures, recalls, and harvest restrictions in the event that shellfish or shellfish harvesting waters pose a risk and if shellfish bioaccumulate algal toxins at action levels set by the NSSP.
3. **Statutory and Regulatory Authorities**

**Federal**

The National Shellfish Sanitation Program (NSSP) is the federal/state cooperative program recognized by the US Food and Drug Administration (FDA) and the Interstate Shellfish Sanitation Conference (ISSC) for the sanitary control of shellfish produced and sold for human consumption. The purpose of the NSSP is to promote and improve the sanitation of shellfish (oysters, clams, mussels, and scallops) moving in interstate commerce through federal/state cooperation and uniformity of State shellfish programs.

**Department of the Environment**

Environment Article Titles 1, 4, 9, & 10
Natural Resources §4-742. Restrictions on taking of shellfish from polluted waters.
COMAR 26.08.01-04

**Department of Health and Mental Hygiene**


4. **Delegations and Agreements**

**Department of the Environment with Department of Health and Mental Hygiene**

- Lab support
  - Central and regional DHMH microbiology laboratories perform necessary water and shellstock analysis for bacteriological quality.
  - DHMH lab activities must conform to NSSP requirements including maintenance of USFDA certification of labs and laboratory certification officers.
- Information Exchange
  - Information shall be shared freely between MDE and DHMH concerning shellfish harvesting waters, relaying operations, and sample results, as needed, to respond to public inquiries and facilitate management of the shellfish program.
  - MDE and DHMH will discuss matters relating to the shellfish program on an ongoing basis and will discuss their positions relating to NSSP issues prior to acting as Maryland's voting delegates at the annual NSSP meetings.

- A formal MOU, required by the NSSP, exists among MDE, DHMH, and DNR. It defines State agency responsibilities for conducting the shellfish sanitation program.

**Department of the Environment with Local Environmental Health Authorities**

- MDE and Local Environmental Health Authorities will work together to ensure that sewage violations uncovered during shoreline surveys are corrected and no longer present a source of pollution to shellfish growing waters.
5. Departmental Contacts

For a complete listing of contacts, see the Contact List.

Department of the Environment

Science Services Administration
  • Environmental Assessment and Standards Program

Department of Health and Mental Hygiene

Prevention and Health Promotion Administration
  • Environmental Health Bureau
  • Infectious Disease Bureau

Laboratories Administration
I. Land Management

1. Public Health Significance

Land-based sources of environmental hazards are complex and are regulated under numerous Federal, State, and local authorities. These include hazards associated with housing, recreation, neighborhoods, consumer products, and solid wastes including special (regulated) medical wastes.

2. Roles of the Agencies

Department of the Environment

1. Solid Waste Program (SWP)
   a. Issues refuse disposal permits for municipal landfills (refuse, garbage, commercial and non-hazardous industrial waste), rubble landfills (construction and demolition debris), industrial waste landfills, land-clearing debris landfills, incinerators, transfer stations, and processing facilities.
   b. Oversees and reviews data from environmental monitoring at solid waste disposal facilities.
   c. Reviews closure and post-closure plans for solid waste disposal facilities.
   d. Inspects operations at permitted facilities and investigates complaints regarding illegal dumps that are systems of refuse disposal as defined in statute and regulations.
   e. Issues permits for facilities that recycle natural wood wastes such as tree stumps, brush and limbs, root mats, logs, leaves, grass clippings, and other natural vegetative materials.
   f. Conducts compliance inspections of hazardous waste generators, Treatment, Storage, and Disposal facilities, and transporters of hazardous wastes, responds to hazardous waste complaints, and conducts enforcement activities related to violations of hazardous waste laws, regulations, and permits.
   g. Conducts compliance inspections of sewage sludge utilization sites, responds to sewage sludge utilization complaints, and conducts enforcement activities related to violations of sewage sludge utilization laws, regulations, and permits.
   h. Conducts compliance inspections of scrap tire sites, responds to scrap tire complaints, and conducts enforcement activities related to violations of scrap tire laws, regulations, and licenses.
   i. Performs groundwater monitoring evaluations at permitted landfills or other landfills that fall under the SWP's regulatory authority.

2. Waste Diversion and Utilization Program
   a. Regulates the discharges from animal feeding operations.
   b. Regulates the utilization of sewage sludge (treatment, land application, transportation, incineration, disposal, and others) in the State.
   c. Provides assistance and guidance to County recycling programs, reports on market development for recyclable materials, and encourages recycling and source reduction.
through outreach and education activities.
d. Oversees mercury switch law that requires the removal of mercury switches from end-of-life vehicles.
e. Oversees scrap tire cleanup projects.
f. Issues licenses or approvals for scrap tire collection facilities, haulers, and recyclers, and substitute fuel/tire derived fuel facilities (Counties may have their own permitting system).
g. Prepares annual reports to the Legislature concerning the management of solid waste, mercury switches, and scrap tires in Maryland.
h. Issue permits for treatment, storage, and disposal (TSD) facilities that manage hazardous waste.
i. Develops regulations to maintain consistency with the federal Resource Conservation and Recovery Act (RCRA) program and obtains authority to implement the regulations from the federal government.
j. Oversees and enforces the State’s electronics recycling law.
k. Provides oversight on generation and management of low-level radioactive waste, and provides staff support for MDE’s participation in activities of the Appalachian States Low-level Radioactive Waste Commission.

3. Operational Services Program

a. Tracks and identifies generators and transporters of hazardous waste through the issuance of United States Environmental Protection Agency (EPA) identification numbers and a manifesting system for hazardous waste from point of generation to point of disposal.
b. Manages a Federal/State biennial reporting system for over 5,000 businesses possessing EPA identification numbers.
c. Certifies transporters of hazardous waste and special medical waste.
d. Identifies and tracks generators of special medical waste through the issuance of a Maryland identification number.

4. Oil Control Program

a. Responsible for investigation and remediation of groundwater contamination related to petroleum products and by-products.
b. Regulates activities involving aboveground and underground oil storage facilities (Above-Ground Storage Tanks, or ASTs, and Underground Storage Tanks, or USTs), oil-contaminated soil treatment facilities, marine oil facilities and tank vessels, oil transfer operations, used oil management, spills, illegal dumping, improper handling and non-compliance, and improperly abandoned and unregistered USTs.
c. Issues oil operations permits for facilities that store (aboveground), transport, or transfer oil or store and treat oil contaminated soils in Maryland; issues licenses to businesses that transfer oil into the State from out-of-State; and certifies individuals who install, repair, upgrade, or remove UST systems.
d. Inspects aboveground oil storage facilities to determine compliance with appropriate codes, standards and regulations.
e. Oversees the upgrade and replacement of USTs for motor fuels (gasoline, diesel), which require non-corrosive tanks or corrosion protection, spill/overfill protection, and automatic leak/release detection by December 22, 1998.
f. Oversees the removal of USTs that are not in compliance with federal and state
requirements.
g. Oversees the remediation of oil-contaminated sites and conducts UST compliance
inspections, including vapor recovery systems.
h. Oversees the third party Compliance Inspection certification.
i. Administers the Oil Contaminated Site Environmental Cleanup Fund, which
reimburses UST owners for certain cleanup costs incurred after October 1993.
j. Cooperates with MDE's Emergency Response Division in emergency and non-
emergency responses to oil spills.
k. Maintains a partnership with Maryland Environmental Service (MES) for recycling
used oil.
l. Manages an UST notification database. In accordance with Environment Article 4-
411.2 of the Annotated Code of Maryland, MDE notifies the Local Environmental
Health Authority within 14 days of a finding that a groundwater monitoring well
sample taken from a high-risk groundwater use area, as defined by the Department,
contains methyl tertiary butyl ether (MTBE) at or in excess of 20 parts per billion;
benzene at or in excess of 5 parts per billion; or a combination of benzene, toluene,
ethyl benzene, and xylene at or in excess of 100 parts per billion.
m. Issues discharge permits for oil-related activities.

5. Land Restoration Program

a. Conducts preliminary assessments, site investigations, and environmental site
investigations to identify sites that may be contaminated by hazardous waste and
prioritizes sites for cleanup.
b. Oversees those cleanups and conducts cost recovery activities.
c. Conducts federally-funded assessments of eligible Brownfields to determine whether
there are further environmental cleanup requirements at those sites.
d. Participates in decision-making at all phases of environmental investigations and
oversees cleanups to ensure that the State's requirements are met at sites on the
National Priorities List (NPL).
e. Implements the Voluntary Cleanup Program to encourage voluntary cleanup and
redevelopment of sites contaminated, or perceived to be contaminated, by hazardous
wastes.
f. Oversees and monitors cleanups of hazardous waste to ensure that State requirements
are met at Department of Defense (DoD) facilities, formerly used DoD facilities and
selected other Federal agencies with property in Maryland.
g. Oversees ground water remediation at hazardous waste sites.

Department of Health and Mental Hygiene

a. DHMH has a broad mandate to investigate the causes of disease and mortality, and to
coordinate with other agencies in the prevention and mitigation of health threats.
b. DHMH has specific regulatory authority for special (regulated) medical wastes, in
conjunction with MDE.
c. DHMH Laboratories Administration provides lab support in this area.

Local Environmental Health Authorities

a. Solid Waste Nuisance Complaints: Local Environmental Health Authorities will investigate
solid waste nuisance complaints (except those involving systematic refuse disposal) under
the authority of MDE.

3. **Statutory and Regulatory Authorities**

*Department of the Environment*

**Solid Waste Program**

Md. Code Ann., Environment Title 7, Hazardous Materials and Hazardous Substances
Md. Code Ann., Environment Title 9, Water, Ice, and Sanitary Facilities, Subtitles 2, 3, 5 and 17 (Regulation by State; Water Pollution Control; County Water and Sewerage Plans; Office of Recycling)
COMAR Title 26, Subtitle 4, Regulation of Water Supply, Sewage Disposal, and Solid Waste; includes chapters on: Solid Waste Management; Natural Wood Waste Recycling Facilities; and Management of Coal Combustion Byproducts.

**Operational Services Program**

Md. Code Ann., Environment Title 7, Hazardous Materials and Hazardous Substances
COMAR Title 26, Subtitle 13, Disposal of Controlled Hazardous Substances

**Oil Control Program**

Md. Code Ann., Environment Title 4, Water Management, Subtitles 4, 5, 6, and 7 (Water Pollution Control and Abatement; Penalty and Fines, Prosecution; Underground Storage Tank Upgrade and Replacement Fund; Oil Contaminated Site Environmental Cleanup Fund)
COMAR Title 26, Subtitle 10, Oil Pollution and Tank Management

**Land Restoration Program**

Md. Code Ann., Environment Title 7, Hazardous Materials and Hazardous Substances, Subtitles 2 and 5 (Controlled Hazardous Substances; Voluntary Cleanup Program)
COMAR Title 26, Subtitle 14, Hazardous Substances Response Plan

**Waste Diversion and Utilization Program**

**Federal Clean Water Act**

Md. Code Ann., Environment Title 9, Water, Ice, and Sanitary Facilities, Subtitles 2, 3, 5, and 17 (Regulation by State; Water Pollution Control; County Water and Sewerage Plans; Office of Recycling)
Md. Code Ann., Environment Title 6, Toxic, Carcinogenic, and Flammable Substances, Subtitle 9 (Mercury)
Md. Code Ann., Environment Title 7, Hazardous Materials and Hazardous Substances
COMAR Title 26, Subtitle 4, Regulation of Water Supply, Sewage Disposal, and Solid Waste; includes chapters on: Storage, Collection, Transferring, Hauling, Recycling and Processing of Scrap Tires; and Sewage Sludge Management.
COMAR Title 26, Subtitle 8, Water Pollution
COMAR Title 26, Subtitle 13, Disposal of Controlled Hazardous Substances
Department of Health and Mental Hygiene and Local Environmental Health Authorities


COMAR Title 10, Subtitle 6, Handling, Treatment, and Disposal of Special Medical Waste

4. **Delegations and Agreements**

**Department of the Environment with Local Environmental Health Authorities**

- MDE will inform Local Environmental Health Authorities in a timely manner of confirmed water pollution incidents that could result in impacts to domestic, commercial, or public water supplies, or as otherwise provided by law (e.g., MTBE notifications), as determined by the Department. MDE will also respond to requests for information from Local Environmental Health Authorities concerning groundwater cases within its purview in a timely manner as required by law. Local Environmental Health Authorities may be called upon to provide information.

- In the case of confirmed or suspected groundwater contamination at a landfill, MDE oversees the onsite sampling and investigation, and the Local Environmental Health Authority performs or oversees necessary offsite and domestic well sampling.

- If there is evidence of domestic well contamination by chemicals or oil, after taking the first sample, the Local Environmental Health Authority will notify the appropriate MDE regulatory program.

- MDE is the State agency vested with the responsibility for the investigation and remediation of groundwater contamination related to petroleum products and their by-products.

- MDE will provide advice to Local Environmental Health Authorities on the groundwater and geological conditions upon request.

- All counties have access to MDE well and groundwater sampling files.

- MDE maintains lists of contaminated sites, including CERCLA and LUST sites, which are available to counties upon request.

- The Local Environmental Health Authority will assist MDE with groundwater investigations based on the extent of the contamination and the availability of local resources.

- MDE will provide notification to the Local Environmental Health Authority and local residents concerning findings of certain petroleum-related compounds within the groundwater unless the Local Environmental Health Authority agrees to provide notification to local residents.
• Medical Waste: Incidental dumping of medical waste is the Local Environmental Health Authority’s responsibility unless the amount is too large for the local jurisdiction to handle and requires assistance from MDE.

**MDE Solid Waste Program with Local Environmental Health Authorities**

• Solid Waste Nuisance Complaints: Local Environmental Health Authorities will investigate solid waste nuisance complaints (except those involving systematic refuse disposal) under the authority of MDE.

**MDE Waste Diversion and Utilization Program with Local Environmental Health Authorities**

• MDE has agreements with the following four parties involving supplemental sewage sludge monitoring and site inspections, and may have similar agreements with others in the future:
  i. Commissioners of Queen Anne’s County
  ii. Caroline County Health Department
  iii. Worcester County Health Department
  iv. Cecil County Health Department

• Imported Sewage Sludge: Local jurisdictions that have sewage sludge imported into their boundaries or service area can request a contract for funds from MDE for supplemental inspections and monitoring of the sewage sludge utilization activities in their jurisdictions (see listed supplemental sewage sludge MOUs above).

5. **Departmental Contacts**

For a complete listing of contacts, see the [Contact List](#).

**Department of the Environment**

Land Management Administration
- Solid Waste Program
- Waste Diversion and Utilization Program
- Operational Services Program
- Oil Control Program
- Land Restoration Program

**Department of Health and Mental Hygiene**

Prevention and Health Promotion Administration
- Environmental Health Bureau
J. Lead

1. Public Health Significance

Controlling sources of lead in the environment and minimizing human exposure have been paramount in stemming the impact and effects of lead poisoning. Lead exposure is considered one of the most impactful public health issues; ongoing efforts and resources to reduce lead poisoning and improve outcomes of those exposed remain a top priority for all involved.

2. Roles of the Agencies

Department of the Environment

a. Serves as the lead agency for lead poisoning prevention, lead case management tracking, and lead case investigation.
b. Maintains the Childhood Lead Registry and provides surveillance data for State and local agencies.
c. Refers elevated blood lead levels to Local Health Departments.
d. Provides case management guidance, coordination and consultation.
e. Conducts or oversees local environmental investigation of confirmed lead poisoned child cases, provides environmental investigation guidance, and provides technical consultation.
f. Maintains the Adult Lead Registry and coordinates with Maryland Occupational Safety and Health for case management.
g. Maintains the Lead Rental Property Registry of residential rental dwellings built before 1950 that have been registered in compliance with Environment Article Title 6 Subtitle 8, Reduction of Lead Risk in Housing.
h. Enforces rental unit registration, treatment, and inspection requirements under Environment Article Title 6 Subtitle 8.
i. Maintains inspection certificates issued for rental unit for compliance with lead risk reduction standards under Environment Article Title 6 Subtitle 8.
j. Accredits abatement services contractors, lead training providers, inspectors, and supervisors working in lead paint abatement and provides field oversight.
k. Provides outreach and education to parents, tenants, property owners, health care providers, laboratories, and other parties.
l. Provides and oversees MOUs and contracts with Local Environmental Health Authorities and non-profit agencies for lead poisoning prevention outreach.
m. Manages federal grant funds as available, including the EPA TSCA grant, and provides technical consultation for Baltimore City and State HCD HUD Lead Abatement grants.

Department of Health and Mental Hygiene

a. Serves as the lead agency for childhood lead screening.
b. Administers the Childhood Lead Screening Program to assure the appropriate screening of children in Maryland in accordance with Md. Code Ann., Health-General §18-106.
c. Identifies areas of highest risk for childhood lead poisoning and targets efforts to increase screening.
d. Provides technical assistance and consultation to Local Environmental Health Authorities, health-care providers, child care providers, and other groups.
e. Coordinates with public and private child programs to promote and enhance screening.
f. Oversees implementation of Medicaid EPSDT Lead Screening, diagnosis, and treatment requirements, and Healthy Start case management as applicable.
g. Provides and oversees MOUs and contracts with non-profit agencies for childhood lead detection and prevention efforts.

Local Environmental Health Authorities

a. Provide nurse case management with notice of elevated blood-lead level for children with elevated blood lead levels, consistent with State agency recommendations.
b. Perform environmental investigation for lead poisoned child cases (Baltimore City and Prince Georges County) or coordinate with the MDE regional lead Environmental Health Specialist who performs environmental investigation for lead poisoned child cases (all other counties).
c. Perform other lead-related activities based on local need and resources including but not limited to: community outreach and education programs, collaboration with community organizations, coordination with local health care providers for screening promotion and case management coordination, coordination with other local services including housing and child health services.

3. Statutory and Regulatory Authorities

Department of the Environment

Environment Article, Title 6 Subtitle 3 Blood Lead Reporting
Subtitle 7 Occupational Diseases
Subtitle 8 Reduction of Lead Risk in Housing
Subtitle 10 Accreditation of Lead Paint Abatement Services

COMAR 26.02.01, 06, 07 Occupational, Industrial, and Residential Hazards
COMAR 26.16.01-.06 Lead

Department of Health and Mental Hygiene

Md. Code Ann., Health-General §18-106 – (Childhood) Lead Poisoning Screening Program

COMAR 10.09.23 Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Screening Services
COMAR 10.09.38 Healthy Start Program

4. Delegations and Agreements

Department of the Environment with Department of Health and Mental Hygiene

The following are informal agreements:
• MDE agrees to be available for consultation to DHMH regarding the environmental control of lead hazards.

• DHMH Office of Health Care Quality agrees to provide technical consultation and enforcement support related to certification of laboratories for blood lead analysis.

• MDE and DHMH agree to share, as allowed by statute and regulation, data and data analysis as needed for screening assessment and risk targeting, including Childhood Lead Registry and Medicaid data.

• MDE and DHMH agree to coordinate technical assistance and consultation related to lead screening, outreach, and case management for Local Health Departments and other agencies.

• MDE and DHMH agree to coordinate the development of standards; and outreach activities to health care providers, managed care organizations, HMOs, and the Local Health Department regarding screening, diagnosis, treatment, and case management.

• DHMH agrees to advise MDE and Local Environmental Health Authorities of any problem identified as related to lead in food samples taken in Maryland.

Department of the Environment with Local Health Departments

The following is a formal agreement:

• MOU with Baltimore City Health Department for nurse case management, environmental case investigation and enforcement, data management, reporting, and outreach.

The following is an informal agreement:

• Local Health Departments agree to coordinate with MDE regarding nurse case management, environmental investigation, and enforcement for specific cases.

Department of the Environment and Department of Health and Mental Hygiene with Local Health Departments

• DHMH and MDE, with Local Health Departments, will coordinate training and oversight efforts for screening, case management, and outreach.

5. Departmental Contacts

For a complete listing of contacts, see the Contact List.

Department of the Environment

Land Management Administration

• Lead surveillance data, case management, outreach, rental registration: Lead Surveillance and Health Division
- Environmental investigation, Environment Article Title 6 Subtitle 8 enforcement: Lead Enforcement Division
- Lead abatement services provider accreditation, rental registry: Lead Accreditation and Oversight Division

Department of Health and Mental Hygiene

Prevention and Health Promotion Administration
- Environmental Health Bureau
K. Noise

1. Public Health Significance

The public health impacts from exposure to various forms of noise may extend beyond annoyance, use and enjoyment of property and include cardiovascular effects and other potential risks.

2. Roles of the Agencies

*Department of the Environment*

Statewide environmental noise standards were established by Maryland law in 1974. These noise standards were implemented and enforced by MDE’s predecessor at DHMH and then MDE until 2005, when funding for field-oriented compliance and enforcement activities was removed by legislative action. MDE then provided local jurisdictions with limited technical support and enforcement training, and entered into delegation agreements that provided certain jurisdictions with full enforcement authority. In 2012, enforcement authority for State noise standards was formally removed from MDE and transferred to local political subdivisions through passage and implementation of HB 190. However, MDE retains statutory authority to adopt and revise environmental noise standards.

Specific environmental noise standards for highway traffic noise and aviation-related noise are handled by the Maryland Department of Transportation (State Highway Administration and Maryland Aviation Administration). Both federal (23 CFR 772) and state (Transportation Article, § 5-208, Annotated Code of Maryland and COMAR 11.03) statutes provide the basis for this governing authority.

*Department of Health and Mental Hygiene*

DHMH has a broad mandate to investigate the causes of disease and mortality, and to coordinate with other agencies in the prevention and mitigation of health threats.

*Local Environmental Health Authorities*

With passage and implementation of HB 190, local political subdivisions have authority to adopt and enforce environmental noise standards without a formal delegation agreement from MDE. While not mandatory, local political subdivisions may choose to adopt noise standards and noise control rules if consideration is given to items such as: scientific information regarding characteristics and measurements of noise, property designations, and zoning. Agencies likely to be tasked with these requirements include local law enforcement agencies and Local Environmental Health Authorities. Some local political subdivisions have existing local noise control programs. Existing exemptions for particular activities (i.e., trapshooting, skeetshooting or other target shooting) apply in many local political subdivisions.
3. Statutory and Regulatory Authorities

Department of the Environment

Md. Code Ann., Environment Title 3
COMAR 26.02.03

Department Health and Mental Hygiene


Local Governments

There are various local codes and regulations for political subdivisions currently enforcing environmental noise standards.

4. Delegations and Agreements

To the extent that resources are available, MDE, DHMH, and Local Environmental Health Authorities will work cooperatively on this issue.

5. Departmental Contacts

For a complete listing of contacts, see the Contact List.

Department of the Environment

Science Services Administration
- Environmental Assessments and Standards Program
L. Disease Investigation

1. Public Health Significance

One of the primary functions of health and environmental agencies is surveillance and active evaluation of exposure, disease, illness, and other health outcomes as they relate to environmental factors, in order to protect public health.

2. Roles of the Agencies

Both DHMH and MDE are mandated to investigate “the influence of locality, employment, habit, and other conditions on health.”

Department of the Environment

MDE is charged to investigate “the causes of disease and mortality to the extent that they may relate to environmental factors (Md. Code Ann., Environment § 1-405).” MDE has responsibility for the surveillance of childhood blood lead levels.

Department of Health and Mental Hygiene

DHMH’s responsibilities are stated more broadly as the investigation of “the causes of disease and, particularly, the causes of epidemics (Md. Code Ann., Health-General § 18-101).” In the area of surveillance, DHMH has responsibility for the surveillance of diseases due to communicable agents, carcinogens, and toxic substances.

Local Environmental Health Authorities

Because of their responsibilities and presence in the community, Local Environmental Health Authorities may be the first agencies to receive reports of environmentally-related disease. Local Health Departments are the agencies responsible for local disease investigations. Where a local environmental agency is established independently of the Local Health Department, the local environmental agency is responsible for expeditiously referring reports of diseases or conditions thought to be related to environmental exposures to the Local Health Department for investigation and collection of surveillance data. Independent local environmental agencies may be called upon to assist the investigation of environmentally-related conditions by providing site assessments, collection of environmental samples, and other activities within the purview of an environmental professional. DHMH and MDE serve as a resource to Local Health Departments regarding issues related to such investigations.

3. Statutory and Regulatory Authorities

Department of the Environment

COMAR 26.02.06
Maryland Cancer Registry (MCR)

DHMH is required under Md. Code Ann., Health-General §18-204 to establish and maintain the MCR. Md. Code Ann., Health-General §§18-203-204 permits the publication and use of cancer data reported to MCR. Information collected in the MCR is not a medical record under Md. Code Ann., Health-General §4-301. It is protected under the confidentiality requirements of Md. Code Ann., Health-General §§4-101 et seq.

4. Delegations and Agreements

Department of the Environment with Department of Health and Mental Hygiene and Local Environmental Health Authorities

- Where MDE and DHMH have determined that pollutants or environmental factors may be causing human illness, each Department will provide technical and field support as necessary to assist the other, Local Health Departments, and independent local environmental agencies in the investigation of disease events. In these situations, these governmental entities agree to consult each other and coordinate the evaluation of hazards and exposure pathways, field measurements, epidemiological investigations, and assessment of disease.

- When an investigation is limited to a single jurisdiction, the Local Health Department is the lead agency in the management and investigation of disease events, including disease clusters. Upon request, the State provides consultation and support. When an investigation involves more than one jurisdiction or exceeds the capacity of the Local Health Department, DHMH will assume primary responsibility for the investigation. When a Local Health Department needs assistance, the Prevention and Health Promotion Administration at DHMH is the point of contact and coordinates activities between agencies.

- DHMH and MDE may independently initiate investigations of disease, health conditions, or mortality related to environmental factors. Local Environmental Health Authorities will be notified of these activities prior to their initiation and of their results prior to public release of the information.

- MDE, DHMH, Local Health Departments, and independent local environmental agencies agree to provide one another with the results of studies, investigations, surveillance activities, and laboratory and statistical analyses addressing the impact of toxic substances and other environmental factors on public health, consistent with restrictions on protected information.

- DHMH, MDE, Local Health Departments, and independent local environmental agencies will adhere to all statutes, regulations, and policies related to the confidentiality and security of protected information.
• DHMH, including various component programs such as the Maryland Cancer Registry, is a resource for the epidemiological methods and analyses that establish the existence of spatial and temporal trends and unusual patterns of disease. MDE is a resource for epidemiological, toxicological, and risk assessment support when issues involve environmental contamination. Specific environmental concerns can be referred to MDE or DHMH, as appropriate, without linking the concerns to an alleged disease event. DHMH, MDE, and Local Health Departments have established a formal protocol to respond to public inquiries regarding possible cancer clusters.

• Local Health Departments have initial responsibility for addressing reports of suspected environmentally-related illnesses and hazards in schools. MDE and DHMH will refer inquiries regarding perceived health threats in schools to the Local Health Department for initial management and will assist the Health Officer as necessary. MDE and DHMH will provide consultation and technical assistance to the Local Health Department during an investigation.

• DHMH and MDE have authority to receive and investigate reports of occupational disease from physicians, and MDE has authority to forward the reports to the Maryland Department of Labor, Licensing and Regulation. DHMH has a general mandate for investigating disease outbreaks, including those in the workplace. Both agencies agree to assist one another and the Maryland Department of Labor, Licensing, and Regulation as necessary during the investigation of disease outbreaks in the workplace.

5. Departmental Contacts

For a complete listing of contacts, see the Contact List.

Department of the Environment

Air and Radiation Management Administration
  • Air Quality Compliance Program

Land Management Administration

Science Services Administration

Water Management Administration

Department of Health and Mental Hygiene

Prevention and Health Promotion Administration
  • Cancer and Chronic Disease Bureau
  • Environmental Health Bureau
  • Infectious Disease Bureau
M. Emergency Preparedness and Response

1. Public Health Significance

Homeland Security Presidential Directive – 5 directed the development of a new National Response Plan that incorporates an “all hazards” approach. In order to be compatible with that plan, this MOU supports all hazards planning as outlined in the State of Maryland’s Emergency Operations Plan and all appropriate annexes.

2. Roles of the Agencies

Department of Health and Mental Hygiene

As outlined in Maryland’s Emergency Operations Plan, DHMH has a mandate to conduct surveillance to detect cases and outbreaks of diseases and conditions which may threaten the public health; investigate the causes of disease and mortality; take actions to protect the public health and mitigate the effect of diseases and conditions; undertake training exercises and improvement planning; and coordinate with other federal, State, and local agencies in the prevention, mitigation, and recovery from health threats. Specific emergency response roles of DHMH include the following:

a. Coordinate and provide support to local emergency medical and health operations for the containment, identification, treatment and pre- and/or post-exposure prophylaxis of radiological, biological, and chemical contaminants.

b. Provide traditional and enhanced surveillance systems, as well as disseminate data to appropriate local, state, and federal agencies.

c. Provide overall coordination for evaluation and mitigation of public health hazards resulting from an incident including those related to contamination of food or dairy products.

d. In coordination with the US Food and Drug Administration, Local Environmental Health Authorities and MDE, assure the safe disposal of contaminated food and dairy products, and reopening of food facilities. With Maryland Department of Agriculture and MDE, assist in animal and crop disposal when indicated.

e. In coordination with Federal agencies and MDE, advise local government of criteria for safe reentry into structures and evacuated area and when those criteria have been met.

f. Coordinate and provide necessary crisis counseling to responders, residents, and workers impacted by the incident.

g. Lead and provide guidance and direction to statewide, regional and local development of public health information announcements for the incident. Leadership roles in developing public health information announcements may shift according to the nature of the emergency, the roles of state agencies in response and mitigation of specific events or hazards or in the event of a declaration of a State of Emergency or a Catastrophic Health Emergency by the Governor or a declaration that an event is of national significance.

h. Issue protective action orders to protect human and environmental health.

i. In the anticipation of, early detection of, and response to public health emergencies, Local Environmental Health Authorities and/or Local Health Departments perform functions delegated by DHMH and MDE, such as the collection of clinical and environmental samples, disease control measures (including isolation and quarantine), disease surveillance,
dissemination of public information, inspection of facilities and businesses, interviewing and investigation of cases, and distribution of prophylaxis and treatment medications/vaccines.

j. The DHMH Laboratories Administration provides environmental chemistry, microbiological, and radiological testing in the event of a public health emergency. Specific emergency response roles of the Laboratories Administration include:
   i. Provide laboratory support services for sentinel and Biosafety Level 3 (BSL-3) laboratories.
   ii. Provide expertise and assistance in preparation and shipment of specimens for testing. Information for collection and submission of clinical specimens in emergency response activities can be found in the publication “Guide to Public Health Laboratory Services” (http://www.dhmh.state.md.us/labs/html/guileilabserv.html).
   iii. Maintain operations of BSL-3 laboratories as appropriate.
   iv. Integrate services with local, State, and federal partners for the appropriate level of biosafety during the testing of specimens.
   v. Maintain the Biological Agents Registry (BAR) to include information on all persons who possess, maintain, transfer, or receive a biological agent (Select Agent) and to establish methods and mechanisms to release information from the BAR to specified trusted partners including MDE and Local Health Departments.

The role of the DHMH Laboratories Administration in routine activities is described in Section N (Laboratory Services) of this MOU.

**Department of the Environment**

As outlined in the State of Maryland’s Emergency Operations Plan, MDE is the State agency responsible for response, mitigation, and recovery from drinking water contamination, petroleum and chemical releases, nuclear power plant and radiation emergencies, shellfish growing water closures, and fish kill and pollution investigations. The DHMH Laboratories Administration supports MDE in this effort. MDE is also the recipient for chemical use, storage, and release information under federal and state community right-to-know statutes. Specific emergency response roles of MDE include:

a. Coordinate the implementation of environmental sampling and monitoring strategies for potential and actual incidents which may impact air, land, water, or biota and define the implications results may have on response and recovery operations.

b. Utilize data collected to define the impacted area.

c. Support the implementation of the necessary protective actions and guidance for emergency workers and the area at risk based on the assessment of the data received in sampling and monitoring.

d. Support the analysis and assessment of meteorological data and any impact it may have on effectively managing the incident.

e. Develop and recommend effective countermeasures strategies to address adverse environmental impacts relating to the incident.

f. Assist in the development of public information announcements for the incident, with special reference to incidents involving drinking water contamination, petroleum and chemical releases, nuclear power plant and radiation emergencies, and fish kill and ambient water pollution investigations.

g. Assist in the development of a long-term environmental restoration site plan to include goals, options, strategies, etc.
h. Provide technical assistance to federal, State and local agencies and private contractors regarding environmental issues that will arise during the removal, storage, reduction, and disposal of contaminated and uncontaminated debris as well as the selection, establishment, management, and closure of debris storage and reduction sites.

i. Receive and store chemical use, storage, and release information under federal and state community right-to-know statutes.

j. MDE, DHMH, and the Maryland Department of Natural Resources collaborate to manage a statewide Harmful Algal Bloom (HAB) surveillance program. This program includes routine monitoring by MDE and DNR, field response, laboratory analysis, and management actions as appropriate to protect public health and the environment.

k. Assists in the review of drinking water treatment systems in the event of a waterborne disease outbreak. If necessary, work with the facility to determine appropriate treatment to correct and prevent the water contamination. In particular, investigations related to Legionnaire’s Disease, Cryptosporidiosis, and Giardiasis may be related to drinking water.

3. Statutory and Regulatory Authorities

Department of Health and Mental Hygiene

Md. Code Ann., Health-General §18-102(b) – Contagious and infectious diseases; Regulations.

Department of the Environment

Oil and Chemical Emergency Response

Md. Code Ann., Environment §§4-406 et seq. - (Oil)
Md. Code Ann., Environment §§7-218-222 - (Chemical)

Nuclear Power Plant and other Radiation Emergency Response

Md. Code Ann., Environment §8-105

Fish Kill and Water Pollution Emergency Response

Md. Code Ann., Environment §4-405

Chemical Emergency Planning and Community Right-to-Know

Md. Code Ann., Environment §§6-501-504

Drinking Water Security

4. **Delegations and Agreements**

Programmatic delegations and agreements are covered in the specific sections of this MOU dealing with these programs and are not listed here.

5. **Departmental Contacts**

For a complete listing of contacts, see the Contact List.

*Department of the Environment*

a. The MDE call-in number for all emergencies is 866-633-4686 (866-MDE-GOTO).
b. For emergencies related to nuclear power plants, oil and chemicals, the lead program is Emergency Preparedness & Planning.
c. For other radiation emergencies, the lead program is the Air and Radiation Management Administration’s Radiological Health Program.
d. For shellfish growing water closures, the lead is Science Services Administration’s Environmental Assessment and Standards Program.
e. For fish kill and water pollution emergencies, the lead is the Science Services Administration’s Water Quality Protection and Restoration Program.
f. For chemical emergency planning and Community Right-to-Know, the lead is the Science Services Administration’s Environmental Assessment and Standards Program.
g. For drinking water security, the lead is the Water Management Administration’s Water Supply Program.

*Department of Health and Mental Hygiene*

The DHMH call-in number for all emergencies is 410-795-7365. The toll-free number specifically for environmental health questions and concerns that is staffed during the day is 866-703-3266.

*Office of Preparedness and Response*

Prevention and Health Promotion Administration
- Environmental Health Bureau
- Infectious Disease Bureau

Laboratories Administration
- Division of Diagnostic and Public Health Microbiology
- Division of Drinking Water Laboratory Certification Program
- Division of Molecular Biology
• Division of Virology and Immunology
• Division of Environmental Microbiology
• Division of Environmental Chemistry
• Office of Laboratory Emergency Preparedness and Response
N. Laboratory Services

1. Public Health Significance

Laboratory services are essential to a range of environmental health activities in Maryland, including routine functions and non-routine evaluations.

2. Roles of the Agencies

Department of the Environment

MDE will consult and coordinate with the DHMH Laboratories Administration in a timely manner to allow the DHMH Laboratories Administration to provide services in an efficient and effective way.

Department of Health and Mental Hygiene Laboratories Administration

The DHMH Laboratories Administration will provide laboratory analyses for various environmental matrices for toxic contaminants that may affect public health or the environment in Maryland. The Laboratories Administration publication, “A Guide to Environmental Laboratory Services” (http://dhmh.maryland.gov/laboratories/docs/enviroguide.pdf), contains types of tests routinely performed, sample container requirements, preservatives, required sample size, holding times, and sample analysis turnaround time information for environmental samples.

In addition to technical services for laboratory analyses, the Laboratories Administration also provides services as expert witnesses and legal testimony, sample and waste disposal, sanitarian training, documentation, and various levels of data reporting.

The role of the DHMH Laboratories Administration in emergency response activities is described in Section M (Emergency Preparedness and Response) of this MOU.

3. Statutory and Regulatory Authorities

Budget authorizations. Under Md. Code Ann., Health-General §§17-101, 17-102, the Secretary of DHMH shall maintain public health laboratories to provide testing and regulatory support of environmental and regulatory public health programs. A public health laboratory shall provide services in connection with sewage, a trade waste, a nuisance, a water supply, milk, and any inquiry about any other matter that the Secretary requires.

Under 40 CFR 142.10, the State must provide assurance to EPA of the availability to the State of laboratory facilities certified by EPA, and capable of performing analytical measurements of all contaminants specified in the State primary drinking water regulations. The status of the principle state laboratory functions are reviewed annually by EPA-Region III. DHMH-Central Laboratory, and if necessary, other laboratories, are evaluated for compliance with this mandate.
4. **Delegations and Agreements**

Separate individual agreements (MOUs) will be developed between the DHMH Laboratories Administration and each administration in MDE in order to define and compile the necessary technical aspects of these analyses including data quality objectives such as detection limits and turnaround times.

MDE and DHMH agree on the following goals for the environmental laboratory support services:

- a. To identify and prioritize tests that should be done by the Laboratories Administration.
- b. To work jointly to develop budgets for environmental testing.
- c. To upgrade or replace obsolete environmental laboratory instruments and equipment
- d. To provide environmental laboratory support that will allow MDE to meet its mission to protect public health and the environment in Maryland.
- e. To be responsive to changing needs presented by emergent problems and new scientific approaches to those problems.
- f. To evaluate laboratory services based on a set of performance goals specified in the individual MOUs.

5. **Departmental Contacts**

For a complete listing of contacts, see the [Contact List](#).
VII. TERMINATION OF THE MEMORANDUM

The terms of this agreement remain in effect until terminated by mutual agreement or withdrawal by either DHMH or MDE.
VII. APPROVAL

Robert M. Summers  
Secretary  
Department of the Environment

Joshua M. Sharfstein  
Secretary  
Department of Health and Mental Hygiene

12-23-14  
Date

12/26/14  
Date

Nancy Wyllie  
Assistant Attorney General  
Department of the Environment  
Approved as to Form and Legal Sufficiency this 23rd day of December, 2014

Claire Pui  
Assistant Attorney General  
Department of Health and Mental Hygiene  
Approved as to Form and Legal Sufficiency this 23rd day of December, 2014
VIII. ENDORSEMENT

President
Maryland Association of County
Health Officers

1/5/15
Date

President
Maryland Conference of
Local Environmental Health Directors

12/30/2014
Date
APPENDIX A. ACRONYMS

<table>
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<tr>
<th>Acronym</th>
<th>Full Form</th>
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<td>BAR</td>
<td>Biological Agents Registry Program</td>
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<td>BRAC</td>
<td>Base Realignment and Closure</td>
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<td>BSL-3</td>
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<td>CERCLA</td>
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<td>EHCP</td>
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<td>EHLC</td>
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<td>EPA</td>
<td>U.S. Environmental Protection Agency</td>
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<td>EPSDT</td>
<td>Early and Periodic Screening, Diagnosis &amp; Treatment</td>
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<td>FDA</td>
<td>U.S. Food and Drug Administration</td>
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<tr>
<td>GWUDI</td>
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<td>Leaking Underground Storage Tank</td>
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<td>Maryland Department of Agriculture</td>
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<td>MDE</td>
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<td>TMDL</td>
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<td>TSCA</td>
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<td>UST</td>
<td>Underground Storage Tanks</td>
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WMA  Water Management Administration
APPENDIX B. CONTACT LIST

Contact Information for Programs Listed in the MOU

Department of the Environment – 410-537-_____

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<td>Shellfish – Bacterial Assessments Division</td>
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<tr>
<td>Annapolis Field Office</td>
<td>443-482-2700</td>
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<tr>
<td>Fish Kill and Harmful Algae Bloom</td>
<td>443-482-2731</td>
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<td>Emergency Response</td>
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Department of Health and Mental Hygiene – 410-767-_____

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<td>Office of Food Protection</td>
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<td>Office of Information Technology</td>
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<td><strong>Family Health Administration</strong></td>
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<td>Maternal and Child Health Bureau</td>
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<td>Maryland Cancer Registry</td>
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<td><strong>Laboratories Administration</strong></td>
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<td>▪ Air Quality Laboratory</td>
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<td>▪ General Chemistry Laboratory</td>
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<td>▪ Multi-Element Laboratory</td>
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<td>▪ Nutrients Laboratory</td>
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<td>▪ Pesticides Laboratory</td>
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<td>▪ Radiation Laboratory</td>
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<td>▪ Trace Organics Laboratory</td>
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<tr>
<td>Division of Environmental Microbiology</td>
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<td>Division of Childhood and Newborn Screening</td>
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<td>▪ Blood Lead Laboratory</td>
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<td>▪ Environmental Lead Laboratory</td>
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<tr>
<td>Southern Maryland Regional Laboratory</td>
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<td>Western Maryland Regional Laboratory</td>
<td>301-777-2115</td>
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<td>Eastern Shore Regional Laboratory</td>
<td>410-219-9005</td>
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<td><strong>Emergency</strong></td>
<td>410-795-7365</td>
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<tr>
<td><strong>Environmental Health Help Line</strong></td>
<td>866-703-3266</td>
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### Local Environmental Health Authorities

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<thead>
<tr>
<th>Agency</th>
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<tbody>
<tr>
<td>Allegany County Health Dept.</td>
<td>(301) 759-5040</td>
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<tr>
<td>Anne Arundel County Dept. of Health</td>
<td>(410) 222-7191</td>
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<tr>
<td>Baltimore City Health Dept.</td>
<td>(410) 396-4422</td>
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<tr>
<td>Baltimore County Health Dept.</td>
<td>(410) 887-6006</td>
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<tr>
<td>Baltimore County Department of Environmental Protection &amp; Sustainability</td>
<td>(410) 887-3776</td>
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<tr>
<td>Calvert County Health Dept.</td>
<td>(410) 535-3922</td>
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<tr>
<td>Caroline County Health Dept.</td>
<td>(410) 479-8045</td>
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<tr>
<td>Carroll County Health Dept.</td>
<td>(410) 876-1884</td>
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<td>Cecil County Health Dept.</td>
<td>(410) 996-5160</td>
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<td>Charles County Health Dept.</td>
<td>(301) 609-6751</td>
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<tr>
<td>Dorchester County Health Dept.</td>
<td>(410) 228-1167</td>
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<td>Frederick County Health Dept.</td>
<td>(301) 600-1715</td>
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<td>Garrett County Health Dept.</td>
<td>(301) 334-7760</td>
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<td>Harford County Health Dept.</td>
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<td>Howard County Health Dept.</td>
<td>(410) 313-2640</td>
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<tr>
<td>Kent County Health Dept.</td>
<td>(410) 778-1361</td>
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<tr>
<td>Montgomery County Dept. of Health &amp; Human Services</td>
<td>(240) 777-3831</td>
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<td>Health Department</td>
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<tr>
<td>Montgomery County Department of Environmental Protection</td>
<td>(240) 777-7700</td>
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<tr>
<td>Montgomery County Department of Permitting Services</td>
<td>(240) 777-6300</td>
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<td>Prince George's County Health Dept.</td>
<td>(301) 883-7605</td>
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<td>Queen Anne's County Health Dept.</td>
<td>(410) 758-2281</td>
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<td>St. Mary's County Health Dept.</td>
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<td>Washington County Health Dept.</td>
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<td>Worcester County Health Dept.</td>
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<td>Worcester County Department of Environmental Programs</td>
<td>(410) 632-1220</td>
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