

STAKEHOLDER QUESTIONNAIRE
NGO

*“Once completed, this information is considered confidential
within the meaning of the Access to Information Act.”*

Name and Address:	_____

Telephone Number:	_____
Fax Number:	_____
E-mail Address:	_____

1. What is the nature or role of your organization?

- 2. Does your organization have a specific interest in, or experience with, children's lead-related health issues? If so, what type of interest or experience?**

3. What specific comments do you have on the lead content limits proposed by the Lead Risk Reduction Strategy for the five product groups included?

Group 1 Products (products likely to be ingested in significant quantities)

Group 2 Products (products intended to or likely to be placed in the mouth)

Group 3 Products (children's equipment, toys and other items, excluding those in groups 1 and 2)

Group 4 Products (products intended for preparing, serving, or storing food)

Group 5 Products (products intended or likely to be burned or melted)

4. Do you require clarification or additional information on the five product groups or on any other part of the Strategy document?

5. What are the impacts that you envisage should the Strategy proposals be implemented as regulation?

6. A stakeholder meeting has been tentatively scheduled to discuss the implications of the proposed Lead Risk Reduction Strategy. Would your organization be interested in attending?

7. What general comments do you have on the Lead Risk Reduction Strategy document?

8. Is your organization able and/or willing to assist Health Canada in public education initiatives related to the Strategy or to the prevention of lead exposure in children, (e.g. activities as distributing public health messages?)