

# ADVISORY COUNCIL REGULAR MEETING

WEDNESDAY APRIL 8, 2009 9:00 A.M. 7<sup>TH</sup> FLOOR BOARD ROOM 939 ELLIS STREET SAN FRANCISCO, CA 94109

# AGENDA

## CALL TO ORDER

Opening Comments Roll Call Harold Brazil, Chairperson Clerk

# PUBLIC COMMENT PERIOD

**Public Comment on Non-Agenda Items, Pursuant to Government Code Section 54954.3.** The public has the opportunity to speak on any agenda item. All agendas for Advisory Council meetings and Committee meetings are posted at the District, 939 Ellis Street, San Francisco, at least 72 hours before a meeting. At the beginning of the meeting, an opportunity is also provided for the public to speak on any subject within the Council's or Committee's purview. Speakers are limited to five minutes each.

#### **CONSENT CALENDAR**

1. Approval of Minutes of the February 11, 2009 and the March 11, 2009 Advisory Council Meetings.

#### **DISCUSSION**

2. Continued discussion of Draft Report on the Advisory Council's February 11, 2009 Meeting on Air Quality and Public Health.

The Advisory Council will discuss a proposed <u>revised</u> draft report on the February 11, 2009 meeting with Air District staff and finalize the recommendations.

3. Discussion of Advisory Council Member attending the Annual Air & Waste Management Association (AWMA) Meeting in June.

The Advisory Council will discuss Council Members attending the annual AWMA meeting in June based on the Administrative Code that limits funding for no more than four (4) Members to attend outside meetings.

#### AIR DISTRICT OVERVIEW

4. Report of the Executive Officer/APCO

J. Broadbent/5052 jbroadbent@baaqmd.gov

*Mr.* Broadbent will provide an update on pending and planned Air District activities, policies and initiatives.

#### **OTHER BUSINESS**

5. Council Member Comments/Other Business

Council or staff members on their own initiative, or in response to questions posed by the public, may: ask a question for clarification, make a brief announcement or report on their own activities, provide a reference to staff about factual information, request staff to report back at a subsequent meeting concerning any matter or take action to direct staff to place a matter of business on a future agenda.

6. Time and Place of Next Meeting

9:00 a.m., Wednesday, May 13, 2009, 939 Ellis Street, San Francisco, CA 94109.

7. Adjournment

#### **CONTACT EXECUTIVE OFFICE - 939 ELLIS STREET SF, CA 94109**

(415) 749-5127 FAX: (415) 928-8560 BAAQMD homepage: www.baaqmd.gov

- To submit written comments on an agenda item in advance of the meeting.
- To request, in advance of the meeting, to be placed on the list to testify on an agenda item.
- To request special accommodations for those persons with disabilities notification to the Clerk's Office should be given in a timely manner, so that arrangements can be made accordingly.
- Any writing relating to an open session item on this Agenda that is distributed to all, or a majority of all, members of the body to which this Agenda relates shall be made available at the District's offices at 939 Ellis Street, San Francisco, CA 94109, at the time such writing is made available to all, or a majority of all, members of that body. Such writing(s) may also be posted on the District's website (<u>www.baaqmd.gov</u>) at that time.

# BAY AREA AIR QUALITY MANAGEMENT DISTRICT 939 Ellis Street, San Francisco, California 94109 (415) 771-6000

# EXECUTIVE OFFICE: MONTHLY CALENDAR OF DISTRICT MEETINGS

# **APRIL 2009**

TYPE OF MEETING	DAY	DATE	TIME	ROOM		
<b>Board of Directors Public Outreach</b> <b>Committee</b> (Meets 1st Thursday every other Month)	Thursday	2	9:30 a.m.	4 <sup>th</sup> Floor Conf. Room		
Advisory Council Regular Meeting	Wednesday	8	9:00 a.m.	Board Room		
<b>Board of Directors Climate Protection</b> <b>Committee</b> ( <i>Meets 2nd Thursday each Month</i> ) <i>TO BE RESCHEDULED</i>	Thursday	9	Immediately Following Legislative Cme. Meeting	4 <sup>th</sup> Floor Conf. Room		
<b>Board of Directors Regular Meeting</b> (Meets 1 <sup>st</sup> & 3 <sup>rd</sup> Wednesday of each Month)	Wednesday	15	9:45 a.m.	Board Room		
<b>Board of Directors Legislative Committee</b> (Meets 2 <sup>nd</sup> Thursday of each Month)	Wednesday	15	Immediately Following Board of Directors Regular Meeting	Board Room		
<b>Board of Directors Stationary Source</b> <b>Committee</b> (Meets 3 <sup>rd</sup> Monday Quarterly)	Monday	20	9:30 a.m.	Board Room		
Board of Directors Mobile Source Committee – (Meets 4 <sup>th</sup> Thursday of each Month)	Thursday	23	9:30 a.m.	4 <sup>th</sup> Floor Conf. Room		
<b>Board of Directors Budget &amp; Finance</b> <b>Committee</b> (Standing Committee Meeting Date Under Consideration)	Wednesday	29	9:30 a.m.	4 <sup>th</sup> Floor Conf. Room		
<u>MAY 2009</u>						
TYPE OF MEETING	DAY	DATE	TIME	ROOM		
<b>Board of Directors Regular Meeting</b> (Meets 1 <sup>st</sup> & 3 <sup>rd</sup> Wednesday of each Month)	Wednesday	6	9:45 a.m.	Board Room		

7

13

14

9:30 a.m.

9:00 a.m.

9:30 a.m.

Thursday

Wednesday

Thursday

Board of Directors Public Outreach Committee (Meets 1st Thursday every other Month) Advisory Council Regular Meeting

**Board of Directors Legislative Committee** (Meets 2<sup>nd</sup> Thursday of each Month) 4<sup>th</sup> Floor

Conf. Room

**Board Room** 

Conf. Room

4<sup>th</sup> Floor

# **MAY 2009**

TYPE OF MEETING	DAY	DATE	TIME	<u>ROOM</u>
Board of Directors Climate Protection Committee (Meets 2nd Thursday each Month)	Thursday	14	Immediately Following Legislative Cme. Meeting	4 <sup>th</sup> Floor Conf. Room
Joint Policy Committee	Friday	15	10:00 a.m.	MTC Auditorium 101 8 <sup>th</sup> Street Oakland, CA 94607
<b>Board of Directors Regular Meeting</b> (Meets 1 <sup>st</sup> & 3 <sup>rd</sup> Wednesday of each Month)	Wednesday	20	9:45 a.m.	Board Room
<b>Board of Directors Mobile Source</b> <b>Committee</b> – (Meets 4 <sup>th</sup> Thursday of each Month)	Thursday	28	9:30 a.m.	4 <sup>th</sup> Floor Conf. Room
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<b>Board of Directors Regular Meeting</b> (Meets 1 <sup>st</sup> & 3 <sup>rd</sup> Wednesday of each Month)	Wednesday	3	9:45 a.m.	Board Room
<b>Board of Directors Public Outreach</b> <b>Committee</b> (Meets 1st Thursday every other Month)	Thursday	4	9:30 a.m.	4 <sup>th</sup> Floor Conf. Room
<b>Board of Directors Legislative Committee</b> (Meets 2 <sup>nd</sup> Thursday of each Month)	Thursday	11	9:30 a.m.	4 <sup>th</sup> Floor Conf. Room
<b>Board of Directors Climate Protection</b> <b>Committee</b> ( <i>Meets 2nd Thursday each Month</i> )	Thursday	11	Immediately Following Legislative Cme. Meeting	4 <sup>th</sup> Floor Conf. Room
<b>Board of Directors Regular Meeting</b> (Meets 1 <sup>st</sup> & 3 <sup>rd</sup> Wednesday of each Month)	Wednesday	17	9:45 a.m.	Board Room
<b>Board of Directors Mobile Source</b> <b>Committee</b> – (Meets 4 <sup>th</sup> Thursday of each Month)	Thursday	25	9:30 a.m.	4 <sup>th</sup> Floor Conf. Room

JL – 4/02/09 (2:00 p.m.) P/Library/Forms/Calendar/Calendar/Moncal

Bay Area Air Quality Management District 939 Ellis Street San Francisco, CA 94109 (415) 749-5000

## **DRAFT MINUTES**

Advisory Council Special Meeting 10:30 a.m., Wednesday, February 11, 2009

# Call To Order

<b>Opening Comment:</b>	Chairperson	Brazil called	the meeting to	order at 9:05 a.m.
opening comment.	Champerson	Diuzii cuncu	the meeting to	01001 ut 7.05 u.m.

- Roll Call:
  Chairperson Harold Brazil; Vice Chairperson Jeffrey Bramlett, M.S.; Secretary Ken Blonski, M.S.; Council Members, Jennifer Bard, Louise Wells Bedsworth, Ph.D., Benjamin Bolles, Robert Bornstein, Ph.D., Emily Drennen, MPA, Karen Licavoli Farnkopf, MPH, Stan Hayes, John Holtzclaw, Ph.D., Robert Huang, Ph.D., Kraig Kurucz, M.S., Rosanna Lerma, P.E., Jane Martin, Dr.P.H., Sara Martin-Anderson, M.P.P., Kendal Oku, Neal Osborne, Jonathan Ruel, Dorothy Vura-Weis, M.D., M.P.H.
- Absent: Kraig Kurucz and Virginia Smyly
- Others Present: Vice Chairperson Wagenknecht and Director Shimansky
- **<u>Public Comments</u>** There were no public comments.

#### **CONSENT CALENDAR**

1. Approval of Minutes of January 14, 2009 Advisory Council Meeting.

**Committee Action:** Dr. Holtzclaw moved to approve the minutes of January 14, 2009; seconded by Ms. Drennen; carried unanimously without objection.

## **OVERVIEW**

2. Community Air Risk Evaluation (CARE) Program Overview

## Presenter: CARE Program Manager Phil Martien

**Objectives of CARE Program:** 

- Evaluate regional and community cancer and non-cancer health risks from ambient toxic air contaminants;
- Identify sensitive populations
- Focus health risk mitigation measures on locations with higher risk levels and sensitive populations

Inventory of Toxic Air Pollution Emissions

- Entire Bay Area 2005
- Cancer and non-cancer Toxicity-Weighted
- Diesel Particles constitute 86% of risk

## Model-Estimated Cancer Risk

- Emissions fed into air quality model to translate emissions into concentrations
- Expected cancer incidents per million people 70 year exposure
- Modeled concentrations weighted by health risk of each compound

## Demographic & Health Data

Mindful to reduce emissions for:

Population under 18Elderly populationsLow Income family populationsAsthma hospitalization rates

## Measured Trends in Toxic Air Contaminants

- Shows risk reduction
- Bay Area average cancer risk is decreasing
- Risk in some locations is high compared to average
- Local measurement studies are being done -regional modeling
   -demographic & health data
   -community input

## Local Studies and Measurements

- West Oakland health risk assessment done on local-scale modeling
- West Oakland trucks dominant source of cancer risk
- Uncertainty with numbers of trucks and where trucks were traveling
- Traffic survey conducted West Oakland Environmental Indicators Project
- Working to develop a measurement study saturation monitoring
- Through evaluations, 6 impacted communities identified (and incentives funding):
  - Concord (\$68,000), Richmond (\$1.6M), West Oakland (\$7.5M), East San Francisco (\$1,305,000), East Oakland/San Leandro (\$825,000), and San Jose (\$800,000)

# Community Outreach:

- > Two rounds of community meetings in impacted areas in 2008
- Discuss community concerns
- Seek input on projects to fund through the Air District's Grant and Incentive programs
- Provide community-specific information on toxic air contaminants and emission reductions
- Collaborate on local studies

Liaison with County Health Departments:

- *Bay Area Health Inequities Initiative (BARHII):* Attend and present at data work group meetings;
- Alameda: Discuss West Oakland Health Risk Assessment findings and implications
- *Contra Costa*: Participate in Forum on Cumulative Impacts of Pollution and transfer CARE emissions & modeling results.
- San Francisco: Review technical findings in support of legislation to reduce health impacts from traffic-related air pollution
- *Santa Clara:* Participate in Public health discussions at meetings on General Plans and Climate Change.

Land Use Considerations in Risk Reduction:

- Transportation is the largest source of ozone precursors, particles, toxic air contaminants, and greenhouse gases;
- It is critical to coordinate land use, transportation, and air quality planning to minimize impacts
- Continue focusing grants, outreach, monitoring and enforcement
- Collaboration with local officials is critical
- Develop targeted regulations indirect source rule
  - Address impacts of growth on both regional and local air quality
  - Reduce greenhouse gas emissions from land use
  - Support and implement CARE program goals and priorities

## Advisory Council Comments/Discussion:

Hayes: Questioned trends with asthma hospitalization rates. Martien: Tends to go up – counterintuitive in terms of regional trends seen in air quality; more to it than ambient air quality. Hayes: Questioned whether higher asthma hospitalization rates coincided with higher population densities or something else; to be covered by Dr. Iton.

Drennen: Questioned examples of successful projects funded through CARE. Martien: Those that reduce diesel emissions, large emission reduction projects also seen from cold iron and ship plug in's to electrical grids.

Martin: Alameda County asthma hospitalization trends have been flat or declining recently.

Bornstein: Questioned and confirmed that improvements related to both toxics as well as criteria pollutants. Confirmed a 7% reduction in cancer risk per year and previous data may not have included risk from diesel particulate.

Holtzclaw: Requested overview of truck clean-up requirements. Martien: ARB regulation requires diesel PM reductions and NOx reduction for all on-road trucks.

Lerma: Questioned if studies done for indoor air quality were being integrated. Martien: Indoor air quality and sources proposed to be focused in third phase of CARE program.

# **PRESENTATION**

- 3. Air Quality & Public Health Issues in Alameda, Contra Costa, San Francisco, and Santa Clara Counties
  - A. Alameda County Anthony Iton, MD, JD, MPH

# Health Officer & Director of Public Health

Dr. Iton introduced Bob Prentice, Executive Director of the Bay Area Regional Health Inequities Initiative:

- Group formed of 8 Bay Area counties and one city who work together to determine new ways of public health practice
- Addresses underlying structural issues that lead to adverse health outcomes in populations that are vulnerable and disenfranchised.

## Challenges:

- To work with the Air District to avoid viewing air quality in isolation and work to change the larger context of health;
- To recognize that the concept of cumulative and synergistic risk
- To identify opportunities to work across disciplines to create policies and practices that fundamentally alter power dynamics;
- To develop a participatory practice that meaningfully involves impacted communities in the policymaking process.

Dr. Iton presented a framework for health equity that helps guide public health practice; strategies are to change what individuals know about health, review genes and improve access to health care:

<u>Upstream:</u> Discriminatory beliefs; institutional power; social inequities <u>Downstream:</u> Risk factors & behaviors, disease and injury, mortality

Mortality Data Presented:

- Address level data collected
- Death certificates collected/analyzed
- Respiratory disease mortality rate
- Coronary hearth disease mortality rate
- Cost of being poor in Alameda County measured by death
- Of top five highest morality census tracts in Alameda County, 4 are in West Oakland

## Hospitalization and Morbidity Data Presented:

Asthma ED visit rate

Childhood (<5 years) asthma ED visit rate

COPD Ed visit rate (asthma not included)

Coronary heart disease hospitalization rate-zip code level and by neighborhood level

Congestive heart failure hospitalization rate-zip code level and by neighborhood level

COPD hospitalization-zip code level and by neighborhood level

## Health Costs of goods movement in San Francisco Bay Area:

Annual cost of air pollution from freight transport in Bay Area: \$153 million – for every dollar invested in mitigation, \$3-\$8 in health costs can be avoided:

- o 18 premature deaths \$151 million
- o 13 hospital admissions \$497,000

- o 284 asthma and other lower respiratory symptoms \$6,000
- 5,100 acute bronchitis \$10,000
- o 1,650 lost work days \$320,000
- o 17,875 minor restricted activity dates \$1.1 M
- o 5,042 lost school days \$471,000

## West Oakland Statistics:

- Highest mortality, lowest life expectancy
- Cumulative and synergistic toxic burden
- Enormous burden of chronic disease

## Goal:

A healthy economically vibrant sustainable community in West Oakland

-with good jobs, housing, education and clean environment

## Institutional Power:

Institutions play a powerful role in <u>changing</u> the conditions in neighborhoods.

## Institutional Practices:

- Work collaboratively and strategically with other institutions to create affirmative policy that recognizes and repairs injustice
- Recognize power imbalances which require the translation of research and work in a manner that is explicitly designed to bring community along in the process
- Understand our mandate in the context of the broader responsibility to protect vulnerable populations from harm

#### B. Contra Costa County Wendel Brunner, MD Director of Public Health

Presentation/Discussion:

- Relationship between Contra Costa Health Services and Air District Actions to control and regulate air pollution, improve air quality
- Met in low income communities in response to a refinery explosion
- Met with communities subsequently; education on laws and regulations of the Air District
- Formed environmental justice projects with Health Services, coordinated work with Hazardous Materials Commission and Environmental Health Advisory Board
- Air District adopts fist refinery flare control rule in nation
- Working with the City of Richmond to implement a Health Element for their General Plan
- Need to incorporate a variety of data sources to develop and promote support, good land use planning and good local land use policies
- Green Ports Initiative and the need to be more aggressive with port emissions controls, mitigate costs and health impact from goods movement at ports and throughout communities

# C. San Francisco City & County

## Rajiv Bhatia, MD, MPH Director of Occupational & Environmental Health

Dr. Bhatia introduced Tom Rivard, MS, REHS, San Francisco Department of Public Health, coauthor of *Air Pollution Hot Spots: Unregulated Health and Environmental Justice Issues in the United States.* 

Environmental Justice Gap:

- There are gaps in air quality monitoring and regulatory approaches that create environmental justice and health harms—enforcement and need for new regulations.
- Focus on CARE program on cancer and air toxics leaves a big gap in focus on criteria air pollutants, hot spots and environmental justice issues.
- Air District acts under its regulatory capacity to fill environmental justice and health gaps.
- In dealing with sources of air pollution, health problems are solved-trucks in West Oakland causes variety of problems.
- Kinds of patterns of disease and relationship with social conditions are the same regardless of county.
- Cannot blame all health burden of inequity on air pollution.
- Current regional monitoring system that drives almost all air quality control efforts is based on monitors that do not capture that variation.

Health Impacts of living near busy roadways

- School children at schools in proximity to high volume roadways experienced more asthma and bronchitis symptoms, more hospitalizations, and reduced lung capacity
- CARB determined that 10 ug/ m3 change in long term exposure to PM 2.5 is associated with a 10% mortality from all causes; these effects occur above and below current air quality standards
- Air toxics produced by vehicles are carcinogens

Assessment Methods are available for Air quality Hot Spot Assessment

- Relocation or addition of air quality monitors
- Portable monitors
- Air quality dispersion models EPA approved which could, from traffic and wind data, what air quality levels are near freeways
- Dose response functions for pollutants and health effects

Dr. Bhatia presented example of modeling vehicle PM 2.5 using CAL3QHCR during CEQA review of projects at Harrison and Beale Streets, San Francisco and I-800, West Oakland. Requirements were called for all residential projects built in a potential hot spot – Air Quality Assessment with mitigations.

San Francisco's Law for Traffic Pollution Hot Spots (HC Article 38)

- Identify areas with potential conflicts through Roadway Exposure Zone Map
- Establish a PM 2.5 based action level for mitigation
- Conduct site specific air quality modeling

- Mitigation via building design or engineered ventilation to remove 80% of outdoor PM 2.5
- Notification to buyer
- Maintenance requirements
- New San Francisco roadway exposure zone map and hot spot map as part of local ordinance.

Design and Mitigation Alternatives to Prevent Hot Spot Health Effects

- Relocate project away from traffic
- Relocate traffic, especially truck routes
- Design project to minimize use of automobile
- Locate air intakes away from traffic
- Include filtration

# Value of a Precautionary Approach

- Compliance with planning goals to prevent air quality impacts
- Protection of children's health and development
- Reduced medical and hospitalization costs
- Environmental justice
- Compliance with noise laws; increased traffic safety

## Causes of Variations in Urban Air Pollution Exposure:

Truck routes, urban canyons, restaurant exhausts, construction and demolition, diesel generators, recycling and waste handling, and inadequate building ventilation

## Air District Actions that Could Support Public Health:

- Place ambient air quality to capture the variation of regional exposure.
- Provide finer grained air pollution exposure data to county health departments so that they can conduct epidemiological investigations.
- Update the guidance for environmental review of air quality impacts to ensure adequate assessment and mitigation of air quality land use conflicts.
- Ensure hot spot analysis is conducted for regional projects (e.g. freeway expansions)
- Consider the San Francisco ordinance as a model regional ordinance.
- Conduct monitoring studies in urban sub environments to identify priority needs for land use planning, building design and building retrofits.
- Support container fees at the Port of Oakland.

Dr. Bhatia said in closing, the San Francisco Bay Area Health Impact Assessment Collaborative involves San Francisco Department of Public Health, UC Berkeley HIA Group, Human Impact Partners and the Health Development Measurement Tool.

D. Santa Clara County Marty Fenstersheib, MD, MPH Health Officer Background - Santa Clara County

- Most populous county in the Bay Area-over 1.8 million residents
- City of San Jose-largest in Bay Area and 10<sup>th</sup> largest in U.S.
- 15 cities

Transportation Profile:

- Limited mass transit infrastructure Light Rail, Cal Train, Bus System
- Nearly 1.2 million autos (25% of Bay Area)
- 262 miles of State highways
- Total miles traveled remains same, with slight decrease due to gas prices
- Numbers of rides per capita and change in revenue hours on regional transportation systems represents a 2%-2% increase over the last few years.
- Majority of people commute along in vehicles

Dr. Fenstersheib presented those at risk for exposure to TACs as people living closest to freeways, lowest income population, commuters spending extended time in their vehicles.

## Public Health Benefits of Reducing Vehicle-Related TACs:

- Reductions in particulate matter-decrease in premature deaths due to asthma, cardiovascular disease, and lung cancer
- Premature deaths linked to particulate matter-currently at levels comparable to deaths from traffic accidents and second-hand smoke

## Secondary Public Health Benefits of Reducing Vehicle-Related TACs:

• Greater use of transit, reduced usage of cars, and compact development -Connection to physical activity levels and obesity rates -Lower rates of injury and death due to car crashes

-Access to clinics, grocery stores, schools

Santa Clara County Government Initiatives:

-Santa Clara County Climate Action Team

- Eco Pass Program Commute survey and education of county employees
- County fleet-purchase of hybrids and low emission vehicles -Public Health Chronic Disease & Injury Prevention
- Working with city planners on incorporating health into general plans
- Traffic Safety Communities Network-identifying safe routes to school

## Recommendations for Collaboration with BAAQMD:

- Improved communications with Public Health Department
- Additional TAC data
- Support Health Impact Assessments
- Collaborate with resources

## PANEL DISCUSSION

- 4. Air Quality & Public Health Issues in the Bay Area
  - Osborne: Questioned why no data for Marin County regarding asthma hospitalization risks in CARE presentation. Martien: Air District did not generate data; Marin not available in data provided.
  - Bard: Suggested panel information be entered into testimony for Air District's CEQA guideline update process and the Clean Air Plan 2009 process. She questioned what percentage of the CARE program is dedicated to enforcing near term solutions that we know will have impacts today.
  - Martien: The data from CARE program today is used to start implementing measures, including enforcement of trucks in impacted communities and continue to develop new sources of information as it is gathered.
  - Broadbent: Through CARE Program efforts, the Air District is developing and implementing a CARE mitigation plan which will include dealing with land use decisions, or the indirect source regulatory initiative. The Board discussed this at their recent Retreat and a working group will be convened to develop the plan which will address disparate impacts.
  - Martien: The Air District wants to develop an ISR that addresses both the impacts of developing outside core urban areas while being mindful of not putting people at risk. The Cumulative Impacts Working Group will help to provide input into developing those regulations.
  - Dr. Bhatia: UC Berkeley program completing a health impact assessment of the Port's impacts on health that go beyond truck related diesel impacts study that CARB did. Diesel idling rule is enforceable by two Port police officers and by CARB officers.
  - Iton: Held asthma clinic at the Port of Oakland on February 10, 2009. The burden for using clean technology for independent truckers is expensive and they are a low income, immigrant population. Concession model has been adopted by the Ports of Long Beach and Los Angeles and encourages Port to contract with trucking companies to provide capital to upgrade truck fleets and quickly reduce diesel emissions on the communities.
  - Shimansky: Referred to Dr. Fenstersheib's comment on budget cuts and asked for comment.
  - Brunner: The role of public health has expanded to focus on environmental problems impacting health. In review of traditional public health and funding streams, it is difficult to move agencies to address new and more urgent public health problems for the community. There is a need to look at the focus of public health. The Air District is dealing with some of those key issues. He supported Air District being more aggressive in requiring ports to develop and implement plans.
  - Iton: Budget is challenge in Alameda County; engaged in strategic planning process to involve community in what they want in a public health agency. They are

reorganizing and developing resources to focus on work. Public health is funded by the federal and state government; other funds must be sought and the ability to work on certain areas is constrained. People are working in communities and analysts structuring their local policy agenda to address inequitable policies. We recognize the need to partner with the Air District and others to create a united front around imbedded issues; we need to change the power dynamics to make a difference.

- Bhatia: San Francisco Health Department is part of a large health department, they run a hospital, have a long-term care facility, provide mental and behavioral health services, facing a 25% general fund cut, and their model is that the polluter pays for assessment and compliance activities. 80% of revenue is from business regulation. They can ultimately get fee for service support or regulatory license fees, which are a small piece, but dialogue should extend to public health directors and also to environmental health directors who have a more historical responsibility for environmental quality issues.
- Fenstersheib: PM 2.5 hot spots are largely industries and busy roadways; thinks air quality analyses should be done of all new sources, look at environmental justice and hot spot impacts and also impacts on regional air quality and start to outline alternatives. General Plans serve to park new ideas; he suggested an Air Quality Prevention Element for general plans possibly be offered.
- > Iton: The concept of cumulative impacts should be included in EIR's.
- Bhatia: Must anticipate every barrier in formulating EIR's; must do the analysis and including the significance evaluation and outline of mitigations and alternatives. Comments must anticipate kinds of response from agencies.
- ➢ Fenstersheib: EIR's don't always add the health impact specifically; health impact assessment should be incorporated into the discussion of an EIR.
- Bhatia: Under California law, a mandatory finding of significance is an adverse direct or indirect health impact related to a change in the environment and an EIR must be written. The EIR must include a discussion of public health and safety effects of physical changes in the environment. In recent Bakersfield case, the Circuit Court found it was not enough to simply study the air quality impacts; they also had to study the health impacts of those air quality impacts in order to have a complete and adequate EIR.

# Public Comments:

<u>Margaret Gordon</u>, Port Commissioner, spoke of the need for buffer area between the Port and communities, permitting of mobile sources, enforcement of shipping companies, policy to review cumulative health impact assessment and mitigation, and permits to be reviewed by local Public Health officials.

<u>Sam Altshuler</u> spoke on physics of air pollution, suggested adding noise pollution within jurisdiction of the Air District, said Advisory Council looked at PM 1 and .1, and encouraged delving into lower levels which will identify greater health impacts per unit of pollution put into the air.

Karen G. Pierce, Bayview Hunters Point Community Advocates, recommended that the Air District promulgate target regulations related to mobile sources and biodiesel.

<u>Wafaa Aborashed</u>, Healthy 880 Communities, suggested better involvement with Public Health Officials, discussed transfer of pollution and impacts to communities surrounding freeways, asked for focus on land use permitting, cumulative impacts, and public health for schools.

Marie Harrison, Green Action, requested political influence and policy be used to improve air quality.

Linda Weiner, Bay Area Clean Air Task Force, urged individuals to watch "Unnatural Causes", said Senator Lowenthal is returning the former container bill; SB 974.

#### Key Questions/Efforts to date:

Targeting grant programs, enforcing mobile source air toxic control measures by CARB dealing with truck idling, drayage truck rule, launching of an indirect source rule, stationary source permitting, protecting sensitive receptors in communities.

#### Potential Next Steps/Additional Steps:

Broadbent: Questioned additional steps the Air District should take as an organization, given regulatory authority and resources. Concern: Recommendations only a part of a larger, complex situation:

- Work with the Public Health Departments to engage in testing;
- Research how and where health related impacts are occurring on a micro-scale level;
- Identify additional steps.

Iton: There has been an evolution in understanding how to address health disparities. It implies that they are static and our job is to try to mitigate them. They are largely predictable based upon structural inequities we see in communities. There is a tendency to narrow their inquiry to particular area of specialty and to ignore the underlying structural issues; a disproportional amount of power between constituencies. Their practice is to try to address overt issues like levels of air pollution and regulatory strategies to reduce pollution across the board, but also to look at ways of changing the power balance. It requires:

- Explicit focus on increasing the power of the communities that are disproportionately impacted by this;
- Hold yourself more accountable to communities;
- Translate resources and information in ways they can understand and apply;
- Resources are needed to do this.

Iton supported work with the Air District and long-term strategy to change how public health in the local community is practiced; A clear area in which we can make a difference is looking at data in very small areas.

Brunner: Recognized limited resources, the idea of data pushing policy whether or not you have legal mechanism is important, focusing attention on an issue can be an intervention and lead to policy that is more focused. They are trying to develop the Health Element in Richmond in a way

that identifies different pollution sources and working with Air District staff that has expertise on data and modeling. Irrespective of regulatory mechanisms, they can use this to drive local policy. Many factors contribute to hospitalization other than the amount of asthma people have; it is a measure of access to quality and outpatient care.

Bhatia: Specific CARE Program points:

- It has some important gaps;
- There are hot spots in the several districts of San Francisco and a large population of low income people not part of the CARE program;
- Toxic air contaminants have been a very hot button issue;
- There is a lot of exposure to PM 2.5 and ultra fine PM;
- He questioned if it was too messy to deal with a pollutant that is the subject of national ambient air quality standards;
- Possibly open Pandora's Box because there are important gaps in the monitoring system that we are not controlling.
- Or, because of important political drivers, he suspects the fear of cancer has a lot to do with drivers.

Specific Recommendation:

- Look at other pollutants. PM 2.5 is a toxic air contaminant and we should do an assessment for that pollutant, as well as NOx.
- It is good to look at emissions, but we should look at exposures. There are different distances. More dense communities are going to have a higher burden. Need an air quality monitoring system for the criteria air pollutants that get to the importance source of the regional bay area; freeway residential areas should get monitoring systems.

Many comments had to do with regulating mobile sources, truck distribution centers and land use. The Air District has some current legal limits in doing this. The environmental review process is one of the strongest hooks the Air District has to intervene in the process. CEQA provides a tool and instrument both for informing the agencies that own them, as well as informing the public. He concurs with making data publicly available, but it must be comprehensive data.

Fenstersheib: Key first step: Stronger collaboration with the South Bay that improves awareness, resources and grants, use and improve the data, begin to educate the community about the importance of what is in the air, and raising the level of awareness to policy makers.

## **Advisory Council Comments:**

- Sarah Martin-Anderson: Interested in knowing limitations or success stories with the land use planning community and transportation planning community around the idea of General Plans.
- Bhatia: The work around assessment and mitigation of planning new residential uses near roadways was very successful. Ordinance was supported because the developers knew if they were selling units near freeways, they need to provide some measure of protection and reassurance and this was a feasible solution. On the other hand, comments made to Caltrans to study the hot spots, look at how expanding a roadway will increase traffic,

increase pollution which will outweigh any efficiencies occurring with new regulation. There will be a net increase in pollution over time. Land use is suffering because of our transportation system; we are culturally dependent on cars and those two things have to be attacked simultaneously.

- Drennen: Questioned how AD can expand on the hot spot analysis done in San Francisco or do innovative programs like this.
- Bhatia: Baseline monitors show regional averages; the simplest way to look at hot spots are using dispersion models. Inputs are meteorology and traffic volume, traffic speeds and CARB emissions factors. Even though models have been tested and used in other countries for such purposes, we will need local validation studies and strategically locating new monitors.
- Drennen: The Air District has regulatory ability and ability to levy fees and pass those back to communities. She questioned new car registration fees to go back to transit operations and new truck registration fees that would go back to the CARE program.
- > Brunner: Suggested tax on gas or a VLF fee, which could drive good public policy.
- Iton: Thinks there is no other public agency that works better with communities than Public Health Agencies; relationships of trust historically; nature of work requires community accountability. He suggested sharing fees with public health departments to facilitate engagement of communities in these issues; translation of scientific information into information that communities can use effectively, and fund Heath Dept. staff to participate in these processes.
- Drennen: Suggested hiring an Air District Public Health Officer through Public Health Department Agencies.
- Brunner: Thinks Air District has expertise and has done a very good job in collaborating with the community in Contra Costa County and the Health Departments; supported partnership.
- Broadbent: Agrees, there are often cultural differences, success varies, it is something the AD is committed to and are contemplating proposing to the Board of having a Public Health Officer as part of the staff in the next budget session.
- Fenstersheib: Public health functions well as a convener-would welcome strong partnership.
- Hayes: Supports Public Health Officer and partnership with Public Health Departments. Questioned what pollutants are most important as a priority to obtain the greatest gain in public health.
- Iton: Suggestion to continue to collect data and ascertain policy strategies that will change data, correlate hospitalization data and emergency room data to whatever exposure data they can acquire; notion of constructing a gradient to show how things like a buffer could be used.
- Bhatia: The Air District's driver should be public's priorities and science and not the economic priorities of the regulated businesses. There is enough science and intuition to act. Translation issue is important because at the end of the day, politics prevent the airing of good policy recommendations. The CARE model might learn something from a participatory research model in terms of achieving goals.

- Margaret Gordon: West Oakland has community engagement with EPA through the Community Air Renew Evaluation Grant (federal grant). Community set up a preplanning process with EPA to develop a larger collaborative. The community had EPA meet with them along with AD, Public Health, CARB and the City and businesses to advance the priorities of the community; be able to understand the science in relationship to planning and to advocate and understand research. This is the only collaborative she knows of like it in northern California; suggested its template be used as a model for communities.
- ➤ Jane Martin: Asked Dr. Bhatia about the gap in air quality monitoring and she felt there was also a gap in health risk assessment as it is done for the West Oakland Health Risk Assessment and other permitting. The focus is mostly on the risk of cancer and other illnesses and not focused on mortality. The emerging literature is on the risk of the impact of PM 2.5 on mortality, so it seems like the practice is not keeping up with the science.
- Bhatia: The main gap with West Oakland Risk Assessment was not considering exposure cumulative. It did not add diesel engine PM; it looked at non-mortality and mortality impacts from PM 2.5 but only if they came from diesel engines. The freeways and commuters are generating a lot of PM 2.5 and this was not added to the diesel freight route PM 2.5. In the bigger picture, the gap in the Health Risk Assessment is to call it an assessment when you only look at air pollutant impacts. Health impacts are from noise and other sources.
- Martin: Questioned estimated impacts on mortality as increased by recent CARB research from 6% to 10%.
- Bhatia said there was a consensus process that CARB went through. It brought the best scientists in the world on long-term fine particulate exposure and long-term mortality and found that relationship was roughly 10 micrograms of change in PM 2.5 fine particulate equated to a 10% change in mortality all the way down to 5-7 micrograms. There was a range of estimates before that. Michael Jared's work in Los Angeles looks at intra-urban variation in a region like this, and the relationship is more like a 14% change in mortality with a 10 microgram increase in PM 2.5. The point is there is a consensus document at CARB on this dose response curve, but the fact is, we are not applying it right now.
- Holtzclaw: Focus on the politics—Get the State and MTC decision-makers to use money more effectively instead of widening freeways.
- Iton: This is a struggle of interests and balance of power; it only changes when you introduce new elements into the discussion. Health is a credible interest and it is not perceived as having an economic sub-agenda that could influence the politics of a situation; Change the power balance by bringing into the debate other interests and more boots in the ground to change the way decision makers see the cost of just bending to the usual political influences.
- Bhatia: Driving is a cultural way of life; there is political will behind GHG reductions around solving climate change; there is a hypocrisy with a State that passes AB 32 and a transportation bond that decides to spend exclusively on highway expansion. It should be called out. If this sets back the AB 32 climate change objective 5 years, it will make it that much harder.

Brazil: Questioned how truck data is used for the CARE Program. Martien: Staff is trying to understand and evaluate some assumptions made during the Health Risk Assessment; large portion of the risk was attributed to trucks, but also large uncertainties in truck travel, percentage of port-related trucks, and volumes of trucks in West Oakland. Survey is complete, but data still being analyzed. Some assumptions were correct and others will need refining. There may be implications in terms of fractions of port trucks that were assumed in the HRA versus what we are seeing on the ground. We will talk to the ARB about it, some assumptions are not big surprises, as there were some uncertainties and adjustments will need to be made.

# **OTHER BUSINESS**

Chairperson Brazil suggested members take information from today's meeting, digest it and the lead member representatives develop recommendations in the form of a report for the Board. He reported that the April symposium meeting is during Spring Break and requested staff conduct a poll.

- 8. **Time and Place of Next Meeting:** 9:00 a.m., Wednesday, March 11, 2009, 939 Ellis Street, San Francisco, CA 94109.
- 9. Adjournment: The meeting adjourned at 12:42 p.m.

Lisa Harper Clerk of the Boards

## BAY AREA AIR QUALITY MANAGEMENT DISTRICT Memorandum

То:	Chairperson Brazil and Members of the Advisory Council
From:	Jack P. Broadbent Executive Officer/APCO
Date:	April 1, 2009
Re:	Advisory Council's Draft Meeting Minutes of February 11, 2009 and March 11, 2009

## **RECOMMENDED ACTION**

Approve attached draft minutes of the Regular Advisory council's meeting of February 11, 2009 and March 11, 2009.

#### DISCUSSION

Attached for your review and approval are the draft minutes of the February 11, 2009 and March 11, 2009 meeting.

Respectfully submitted,

Jack P. Broadbent Executive Officer/APCO Bay Area Air Quality Management District 939 Ellis Street San Francisco, CA 94109 (415) 749-5000

## **DRAFT MINUTES**

Advisory Council Regular Meeting 9:00 a.m., Wednesday, March 11, 2009

# Call To Order

Opening Comment: Chairperson Brazil called the meeting to order at 9:06 a.m.

Roll Call: Chairperson Harold Brazil; Vice Chairperson Jeffrey Bramlett, M.S.; Council Members, Jennifer Bard, Louise Wells Bedsworth, Ph.D., Benjamin Bolles, Robert Bornstein, Ph.D., Emily Drennen, MPA, Karen Licavoli Farnkopf, MPH, Stan Hayes, John Holtzclaw, Ph.D., Robert Huang, Ph.D., Kraig Kurucz, M.S., Jane Martin, Dr.P.H., Sara Martin-Anderson, M.P.P., Neal Osborne, Jonathan Ruel, Dorothy Vura-Weis, M.D., M.P.H.

Absent: Secretary Ken Blonski, Rosanna Lerma, Kendal Oku

**<u>Public Comment</u>** There were no public comments.

## **ACTION**

## 1. Proposed Change in Advisory Council Meetings Schedule

#### **Staff Recommendation:**

Recommend Advisory Council approve the proposed change in the Advisory Council meetings schedule to provide for two (2) meetings to discuss the February 11, 2009 Meeting on Air Quality and Public Health with Air District Staff, and develop recommendations for the Report to the Air District Board of Directors. The first discussion meeting would be on March 11, 2009, as originally scheduled, and the second discussion meeting would be on April 8, 2009.

#### **Staff Overview:**

Director of Technical Services Gary Kendall:

- Productive February meeting;
- Program and policy implications for the Air District;
- More time needed for a thorough discussion to ensure recommendations developed are meaningful;
- Recognized new Advisory Council members.

## Executive Officer/APCO Jack Broadbent:

• Recommended Advisory Council discuss and finalize findings and recommendations to the Board of Directors.

#### Introductory Comments:

- Dr. Bornstein: Supported recommendation; suggested Advisory Council consider holding 3 symposia or hold 9 meetings plus January, and keep open a possibility for the third meeting in each cycle to agendize additional items from Advisory Council Members.
- Broadbent/Roggenkamp: Administrative Code would need to be amended if schedule changes.
- Dr. Holtzclaw: Supported recommendation and confirmed transportation meeting will be delayed for one month.

<u>MOTION:</u> Dr. Holtzclaw made a motion to approve the staff recommendation; Mr. Kurucz seconded the motion.

#### DISCUSSION:

- Bard: Proposed not changing format or elimination of topics; make adjustments as needed.
- > Bolles: Supported staff recommendation and multi-tasking.
- Bornstein: Presentations require an entire meeting unless there is one speaker; however, the idea is to have several speakers. Staff and members must compile, review and discuss reports which would be presented to the Board of Directors.
- Bolles: Questioned use of ad hoc committees.
- Brazil: Suggested not multi-tasking for the current topic; Concept is to obtain input from the full Advisory Council as opposed to limiting work to ad hoc committees.
- Broadbent/Roggenkamp: Discussed speaker and presentation logistics. Staff supports continuing approach; good recommendations have come out of work done to date and two meetings are recommended.
- ➤ Vura-Weis: Reminded Members of the varying meeting times; 9-11AM and 9-12 noon.
- Bornstein: Believed it was better to conduct three symposia very well. Next year, the Council will understand the process better and perhaps a fourth one could be held.
- Members: Recognized staff's recommendation and agreed that further adjustments could be made in future, as needed.

**ACTION:** Dr. Holtzclaw made a motion to recommend that the Advisory Council approve the proposed change in the Advisory Council meetings schedule to provide for two (2) meetings to discuss the February 11, 2009 Meeting on Air Quality and Public Health with Air District Staff, and develop recommendations for the Report to the Air District Board of Directors. The first discussion meeting would be on March 11, 2009, as originally scheduled, and the second discussion meeting would be on April 8, 2009; seconded by Mr. Kurucz; motion carried unanimously without objection.

## Public Comment:

<u>Ken Kloc</u>, Environmental Law and Justice Clinic, Golden Gate University, commended Air District staff for innovative work with CARE program and proposed amendments to help close a few gaps in some of the recommendations:

- 1. <u>Recommendation 1</u>: "Consider establishing a PM 2.5 action level <u>and a PM 10 action</u> <u>level</u>". He said PM 10 air quality standards are still enforced; that it incorporates PM 2.5 and is toxic.
- 2. In the CARE program, the Air District has identified 6 impacted communities; however, there could be a large group of small neighborhoods and any one block could be heavily impacted by cumulative sources. He asked to incorporate into cumulative impact concepts some protections or measures to identify whether the issue is great. He suggested the gap for stationary sources be addressed in the recommendations for sources emitting PM 2.5 and PM 10 at levels below the major source category of emissions.
- 3. He supported the Air District's work with rules for indirect sources and suggested engaging in an indirect source inventory.
- Bard: Requested an explanation of a stationary source below major first categories. Kloc: It is one that has the potential to emit more than 100 tons per year of any criteria air pollutant; a facility that emits 70-90 tons of PM will not undergo an air modeling process and it also does not get covered by the Toxics Hot Spot Rule because PM is not on the list of air toxic contaminants. Sources that are old also represent the data gap and some have been grandfathered into the rules so they do not have to go through the same stringent permitting process as newer sources do.
- Huang: Requested examples: Kloc: 1) Glass factory in East Oakland that has three glass furnaces; 2 are new and were permitted under more stringent processes and abatement devices. One is old and emits more than 50 tons a year of PM; 2) Steel company in Bay Area that is a synthetic minor source. It does not have to go through the major source permitting requirements and it emits more than 10 tons a year.
- Broadbent: Major source definition is 100 tons or more, which is often subject to Title V permitting program. The Air District has a new source review program that is as, or more stringent than, the federal program that applies to much lower levels.
- Bateman: Regarding impacted smaller communities, the District is developing a regulatory program for establishing more stringent permitting requirements but has not defined the boundaries of what those communities could be. They could be based on individual grid cells as having impacts above a certain level.
- Regarding PM gap, the threshold for doing a modeling analysis for new and modified sources is a facility that has 100 tons per year of a criteria pollutant. Facilities over that level that have projects that increase emissions by smaller thresholds also triggers modeling. But the first step is that one must be a major source for a criteria pollutant. PM is not on the toxics list because it is a criteria air pollutant; however, the Cal EPA Office of Environmental Health Hazard Assessment is actually looking at a methodology whereby impacts of overall PM could be considered in health risk assessments along with other toxic air contaminants. The Air District has identified PM as a second phase in terms of more stringent permitting requirements and by that time, Cal EPA will have done more in establishing its methodology for addressing PM along with other toxic air contaminants in terms of health risk assessment methodology.

- Kurucz: Questioned if there is an environmental process for air pollution to be considered when building highways. Roggenkamp: Caltrans would be the project lead for state highway systems and would conduct an environmental review process under CEQA. If an EIR is prepared, air quality would be reviewed and the Air District often comments on such documents. City or county agencies would be responsible for their own local roads and they would review air quality impacts, as well.
- Kurucz: Believed Mr. Kloc's third comment relates specifically to Recommendations 6 and 9. His second comment on indirect sources that could lead to small impacted areas and traffic has to do with stationary sources which would not seem to be the reason a hot spot exists. Mr. Kloc said from a cumulative impacts approach, you want to look at the combined impact of whatever stationary sources are present--freeways, indirect sources, and truck traffic. Once that cumulative review is done and everything is added up, you would want to ensure you are under all standards.
- Dr. Bedsworth: Confirmed the major source is 100 tons per year of any single criteria air pollutant. Kloc: Under the California Clean Air Act, we have very stringent requirements that trigger best available control technology at much lower levels of emissions at 10 pounds a day. Previously, he was referring to the requirement for air quality impact analysis for modeling analysis.
- Broadbent: Agreed the glass company example dates back prior to the time many permitting requirements were put into place. He clarified with Mr. Kloc that his third recommendation related to the need for an inventory of trips, and suggested recommendations be considered by the Advisory Council.

## 2. Discussion of Draft Report Relative to the Advisory Council's February 11, 2009 Meeting on Air Quality and Public Health

- Drennen: Supported recommendation for the Air District to conduct outreach through Public Health Departments.
- Bornstein: Believed that the Summary included most of the technical content from the February minutes.
- Holtzclaw: Questioned if the Air District has plans to look at grandfathered sources. Bunger: The District has a large number of sources that have been around for decades. Periodically they are revisited, standards are continually being addressed, rule development is driven by changes in technology, and some are the subject of enforcement. As PM is reviewed, this will be something identified in planning processes.
- Holtzclaw: Suggested going back and looking at older sources to control PM, looking at restricting those sources of heavy diesel, making equipment diesel-free, taking mobile sources outside of the heavily impacted area from the Port, and start making recommendations and including this in the Clean Ports Initiative.
- Hilken: Over 85% cancer risk is from diesel PM and this is the District's major focus. Air District does not have regulatory authority over tailpipe emissions. The ARB has a robust program for addressing a range of diesel sources and has adopted stricter regulations for on-road trucks. Significant reductions are expected as fleets turn over. There are many District grant and incentive programs, expanded enforcement programs, increased focus on mobile

sources, enforcement of idling limits at the Port for trucks and also for locomotives. Compliance and Enforcement Division is looking at ways of expanding efforts to work with ARB to ensure rules are being complied with. Regarding railroads, the inventory shows locomotives are a small part of overall emissions, and diesel trucks and ships are by far a large source.

- Brazil: Questioned if there will ever be a diesel-free port. Hilken: spoke of cleaner, ultra low sulfur diesel. Mr. Bunger noted that as EPA has examined engine classes and set new regulatory on-road limits. In the future, diesel trucks will have similar emission controls as gasoline engine vehicles have and, therefore, be much cleaner.
- Hayes: Acknowledged the Air District's role in protecting and improving health. He was struck by Dr. Iton's information on poverty versus life expectancy as well as the confluence of heavy vehicle traffic, emissions from freeways, and asked to hear what the Air District could do to regulate traffic on roadways, given legal limitations.
- Roggenkamp: Focusing on land uses or land uses in conjunction with roadways would help to address the issue. SB 375 focuses on GHG's, looking at the land use transportation connection and reducing VMT. The Air District will be pursuing an indirect source rule focusing on land uses but not necessarily regulating roadways.
- Kurucz: Supported recommendations and the in-depth review, clarified that Recommendation #4's use of the word "that" means it has a double standard and suggested the use of ", which" so that it has the extra, added benefit but not an original goal. The way it is stated should be so they accomplish both.
- Kendall: Suggested the subgroup of the Advisory Council address questions. He noted that Dr. Bhatia's discussed a new ordinance in San Francisco that deals with siting new housing adjacent to a high volume roadway. It requires an analysis of emissions and a determination through modeling what the annual average impact is from the emissions from the roadway. If above .2 micrograms per cubic meter, items such as an HVAC system is required which takes out 80% of fine particles. This raises the question of whether the Air District should recommend other cities and counties consider such an approach or ordinance.
- Martin-Anderson: Regarding the poverty connection which is the take-away from the presentations, there is a definite link to political power, political agency, there are reasons freeways are there and that BART is above ground. She felt HVAC and land use answers was a bit late for impacted communities, noted there is not a lot of new housing, and she hoped that the agency focuses on helping people who are there now who do not have the political, agency or power to speak to decision-makers. Regarding considering roadway stationary sources, docked boats or docked rails, she questioned learning more about any legal precedents. Ms. Roggenkamp said the District would never classify a roadway as a stationary source; it could be a source, but not one where the District has regulatory control over at this time. Exposure to individuals on the roadways is because they are on the roadways. Those next to the roadway is because the land uses were placed next to the roadway, which are two different types of exposure.
- Martin-Anderson: Dr. Bhatia interestingly suggested considering roadways as stationary sources and something that the District could regulate more generally.
- Kurucz: Given commute and goods movement patterns, scientists could model this and see the impact around it. However, if a permit was issued to the Golden Gate Bridge, they could

not do anything about it. And, if something could be done to meter the cars like neighborhoods do, cars will find another route. Therefore, treating a roadway as a source does not provide the solution.

- > Bolles: Suggested taxing heavy diesel at rush hour.
- Bunger: Felt Dr. Bhatia was talking on a conceptual modeling issue and looking at how people are being exposed in communities relative to sources and how land is being used.
- Vura-Weis: The Advisory Council supports implementation of port container fees. She questioned additional recommendations such as incentive programs, additional advocacy work, and specifically whether roadways are defined as stationary sources. She questioned reasonable methods of mitigation, such as walls or chemical compounds that would disperse or break down emissions.
- Roggenkamp: ARB will set targets under Recommendation #4; the Air District can participate in the process. She agreed that additional resources could be recommended for added enforcement. She agreed the Air District can accomplish Recommendation 6 and can work to do it better.
- Bedsworth: Two of the biggest initiatives are focused on preventing future harm in new development and sources, but more important is to emphasize the need for actions that will protect and reduce risks for existing burdens and to make this distinction.
- Kendall: The ARB has a very aggressive program that will require by 2023, all heavy duty diesel vehicles must meet the 2010 standard; otherwise called the Accelerated Replacement Rule. The 2010 standard is the equivalent of putting on catalytic converters on light duty gas vehicles resulting in low emissions with the use of ultra low sulfur diesel fuel required by State and Federal regulations. Regarding an indirect source rule, the Air District focuses its grant and incentive funding on impacted communities identified through the CARE program. However, if there is an indirect source rule in place and mitigation could not be achieved, fees would be paid and could be dedicated to where they would do the most good and provide the greatest health benefits. To get to this point, new vehicle standards and accelerated fleet turnover programs are needed. Other things can then be done such as the indirect source rule. He also referred to sound impacts and insulation at the airport, and similarly, HVAC systems could be funded for heavily impacted areas.
- Martin-Anderson discussed the subgroup having some process issues with the emerging issues portion of the report. She saw it as not quite ready to be final recommendations, but rather something interesting that came out of the work.
- Ms. Roggenkamp agreed the work can evolve over time. In terms of key points, she questioned whether the key points were those heard from presenters or key points that the group drew from and concluded from the presentations.
- Martin-Anderson: There were 10 running themes that the group prioritized. Ms. Roggenkamp suggested that the Advisory Council bring some key themes or interpretation/evaluation as those most important.
- Licavoli-Farnkopf: Referred to roadways and stationary sources, which may be addressed in Recommendation #6. They are stationary in the sense that the data is consistent in those particular areas. Where this be becomes important is for cumulative impacts; it is a roadway

and cannot be ignored. Ms. Roggenkamp noted the roadway emissions are incorporated in the CARE Program, but it is an area the Air District has not regulated to date.

- Drennen: Suggested that roadways as stationary sources could be a central question for the transportation session to be focused in two meetings—how much can the Air District regulate roadways, what ways is it being done, ways to do it further, discussion of indirect source review and ideas for reducing VMT.
- Kurucz: In securing speakers, he asked to show what emission projections look like after the implementation of some of the future effective rules so the Advisory Council understands how it plays out--whether there are identified gaps in the near term or whether there is need to focus somewhere else.
- Brazil: Asked for specific comments on the draft and suggested starting with "Key Points", and taking one section at a time. He confirmed with Ms. Martin-Anderson that the same subgroup would be incorporating changes to the draft. At the next meeting, the document should be fine-tuned such that it can be ready to be forwarded to the Board of Directors. Advisory Council Members suggested first beginning with a discussion of the Recommendations.

## **Discussion: Original Draft Recommendations:**

- 1. Incorporate Fine PM into the CARE Program and require "hot spot" analysis of regional projects. Also, incorporate this hot spot analysis into updated CEQA guidelines. Consider establishing a PM 2.5 action level. Consider additional localized saturation monitoring studies along freeway corridors and in impacted areas, like the CARE Program West Oakland Measurement Study.
- 2. Collect data at the <u>neighborhood</u> level, through monitoring or modeling, and through *community based participatory methods*, like the CARE Program West Oakland Onroad Diesel Truck Survey, to better assess localized impact. Data should be <u>understandable</u> enough that community residents can use it to push for change. Conduct monitoring to confirm modeling results (ambient concentrations) of PM emissions from major roadways.
- 3. Add a Health Officer (HO) position to the BAAQMD staff, similar to the position at the South Coast AQMD. The HO could provide guidance on decision making, help educate the public on health impacts of air pollution, and assist local governments with land use planning strategies that reduce air pollution and greenhouse gasses.
- 4. Set strong regional GHG reduction targets that will have co-benefits of reducing air pollution in impacted communities
- 5. Increase technical assistance to local jurisdictions for land use planning, such as establishing General Plan best practices and commenting on EIR's.
- 6. Identify roadways as sources for TACs and criteria air pollutants. BAAQMD can provide technical assistance by preparing a methodology for measuring this source in Environmental Review processes and providing mitigation strategies.
- 7. Be more aggressive in requiring pollution reduction plans from major polluters, such as ports, and in monitoring implementation of those plans.
- 8. Support implementation of Container Fees at Ports to pay for air pollution mitigation and public health programs (rather than for congestion relief, which means an increase in PM and GHG), and support the anticipated state level resurrected Lowenthal bill.

Investigate other strategies to fund emissions reduction and transit, such as gas taxes and increased vehicle license fees.

- 9. Implement Indirect Source Rules (ISR) and ensure protection for overburdened communities
- 10. Incorporate appropriate recommendations from the health officer presentations into the public hearing process for the CEQA Guidelines update and the Clean Air Plan 2008. Present this full report to the Board of Directors.
- Licavoli-Farnkopf suggested including PM 10.
- Hayes: The trigger level for significance for PM 2.5 is a very small fraction of the standard and almost always guarantees that it is significant. To the extent it is not in CEQA, it should be included. Mr. Hilken agreed and said they anticipate having recommended thresholds of significance for both PM 2.5 and PM 10 in the revised CEQA guidelines.
- Kurucz: Confirmed that the existing PM 10 threshold was not a fraction of the standard, but was based on regulations--80 pounds per day as the threshold.
- Kurucz: Was not inclined to add PM 10 because the PM 2.5 has the greater health effect and anything that generates particles in the PM 2.5 range would also generate in the PM 10 range.
- Hayes: There is a course fraction standard from 2.5 to 10 and sub 2.5 is predominantly driven by combustion products, autos, trucks, and construction equipment. But, this does not mean particles that are larger than 2.5 microns are not also an issue.
- Brazil: Questioned and confirmed that CEQA did not necessarily require a hot spot analysis already. The questionnaire has questions regarding air quality, project consistency with clean air plans and local impacts, and this is what the local air district guidance documents are intended to do—to provide that further detailed recommendations for lead agencies.
- Hayes: Believed one could worry about emissions generated by a new project and trigger their significance by comparison to some action level, but one should also worry about the construction for new residential units and impacts of existing sources.
- Brazil: Confirmed that it was possible to incorporate fine PM 2.5 analysis as part of the CARE program. Mr. Hilken said the Board and Executive Officer/APCO established the CARE Program because we have a well-established regulatory and planning program for the criteria pollutants. The CARE Program could augment that and could focus more resources on toxic air contaminants, but the issue of fine PM has come up a lot and he agreed with Mr. Hayes' comments—to look at Air District programs and address fine PM. The land use issues are serious; discussions with ABAG and MTC promote SMART growth and infill development, and we identify existing areas already impacted, especially with fine PM. The District has done some modeling, local scale monitoring at some of the priority development areas and looking at what those PM 2.5 levels might be similar to what San Francisco has done. It is an extremely important issue to balance infill/SMART growth objectives with the impacted communities' question.
- Hilken: Suggested and Advisory Council agreed, that a generally-worded recommendation about considering PM 2.5 in CEQA guidelines, land use guidance, CARE Program and other programs to get to the local land use impacts would provide good direction for staff. He noted that Recommendations #1 and #6 address many of these issues.

- Bard: In coming up with recommendations, it was difficult to distill down what was presented. A lot of information is added in Recommendation #1 and there is some overlap with #6. The hot spot analysis referred to not only high impact communities, but also brings in the analysis of roadway exposures. It gets back to what authority the Air District has and what ways can we address them under such authority. She asked to include PM 10 as an extra measure for protections from the courser particles on the roadways, as well.
- Vura-Weis: Suggested that the order of recommendations might be modified; 1) items needing more data; and 2) steps to take with that data.
- > Brazil: Clarified roadway exposure related to new roadway construction.
- Holtzclaw: Regarding #1 and #6, San Francisco's laws deal with trying to modify and reduce pollution in residences. He questioned if analysis had been done of an elevation aspect and whether above a certain elevation, filtering the air could be exempted.
- Kendall: For course particles, Dr. Holtzclaw is right. For ozone, when you get above the surfaces where ozone can expend itself by reacting with rubber and plants, levels can be even higher. Fine PM 2.5 and PM 1 behaves like a gas; he could not estimate the height to which you would have similar concentrations to what is measured at the surface other than to say fine PM is more like a gas than a particle.
- Holtzclaw: For an annual average, it might not be a problem because wind may push it to downwind breathers. Mr. Kendall said the annual average is generally lower because anytime there is a longer averaging time you incorporate different meteorological situations that result in lower ambient concentrations. Therefore, he did not know if it would affect the vertical structure.
- Bard: Felt Recommendation #1 was most important. She asked for more discussion of setting the PM 2.5 action level and discuss recommendations of the Advisory Council with respect to direction to staff.

**MOTION:** Ms. Bard made a motion to add PM 10 to Recommendation #1; Dr. Holtzclaw seconded the motion.

- Brazil: Agreed there was consensus for adding PM 10 and suggested bulleting #1 out and adding more of an outline form to break it down to separate recommendations. Dr. Bedsworth supported breaking it out in bullets, as there are many steps being recommended. She questioned whether they all contributed to a single goal for the Air District to achieve, suggested outlining the recommended goal or objective and then actions under the goal, and agreed this could be delegated to the subgroup.
- Hayes: Suggested incorporating PM 2.5 and PM 10 more fully into District programs, including CARE, CEQA and possible hot spot analyses of regional projects, and then fold in Recommendation #6 into it. He suggested deleting the first sentence; "Identify roadways as sources for TACs and criteria air pollutants." The new sentence would read, "BAAQMD is encouraged to provide additional technical assistance by preparing methodologies for evaluating roadway sources in Environmental Review processes and providing mitigation strategies."
- He suggested putting the last item in #1 into #2 because it relates more to data gathering and amending it to read: "Consider additional <u>air pollution-related public health studies</u> including

localized saturation monitoring studies along freeway corridors and in impacted areas, like the CARE Program West Oakland Measurement Study."

- ➤ Hayes: Suggested amendment of #2 as follows:
  - 11. Collect data at the <u>neighborhood</u> level, through monitoring or modeling, and through *community based participatory methods*, like the CARE Program West Oakland Onroad Diesel Truck Survey, to better assess localized impact. Data should be <u>understandable</u> enough that community residents can use it to push for change. <del>Conduct monitoring to confirm modeling results (ambient concentrations) of PM emissions from major roadways</del>.
- Kendall: Referred to the comment about PM 2.5 action levels and he suggested using general recommendations versus specific recommendations, as there are multiple places where they could be; in permitting, CEQA analysis, part of CARE, take the form of pounds of emissions or incremental concentrations. He suggested having staff determine which make sense in which particular context.
- Ruel: Reframing #1 to focus on incorporating fine PM into Air District programs makes sense. He did not want to lose the emphasis on hot spot analysis.
- Ruel: It might make sense to a mention of the add hot spots to #5 to; "Increase technical assistance to local jurisdictions for land use planning, such as establishing General Plan best practices and commenting on EIR's, and encouraging other Bay Area governments to adopt a program similar to San Francisco's and the role of the District in supporting that."
- Kurucz: Referred to #9 and asked for amendment: "Implement Indirect Source Rules (ISR) and to ensure protection for overburdened communities".
- ➤ Hayes: Suggested changing #9's use of the word, "overburdened". He said he would want circumstances to be addressed wherever they exist without regard to whether a cumulative effect from other things might be on the community. He questioned if the intent was to limit it to overburdened communities or to apply it to all communities that are impacted.
- Martin: Will adjust wording.
- Bard: Potentially, a developer would mitigate to the extent they can or pay into a fund, so the idea is that any project is not allowed to pollute and impact these communities more severely, and she felt this was the intention for #9.
- Hayes: In thinking about San Francisco and Dr. Bhatia's comments, in a corridor-based approach, if you were within a corridor the width of which was dependent upon the traffic volume and the locations of which corresponded to the major roadways, anybody inside that building had to deal with the impacts, and it is this broad approach he would want to see. He did not want to see someone transfer the benefits to someplace else such they would continue to impact and overburden a portion of the community by putting the money somewhere else where the benefits do not accrue to the same people impacted.
- Brazil: Requested that an updated draft be included in the agenda packet, and Mr. Kendall agreed this could be done and the subcommittee of volunteers would work to ensure this occurs.
- Kendall: Commented on key points: One of the take away messages he got from Dr. Bhatia's presentation is that for every one microgram per cubic meter you reduce fine PM, you get a

1% reduction in health effects. This is another key point that emphasizes why it is important to focus on fine PM.

- Holtzclaw: Still bothered by the idea that we will just filter the air in apartments rather than cleaning up the air. Possibly as a temporary measure, we could require filtering in new places, but ultimately, the overall goal is to clean up the ambient air.
- Vura-Weis: Believed there is a social responsibility to recognize that some areas are more impacted and deserve more resources for mitigations and perhaps a different level of regulation.
- Hayes: Suggested also indicating that the Advisory Council supports staff's efforts to funnel discretionary resources into impacted communities.
- Drennen: The hot spot analyses should be context-specific and take sensitive receptors in mind. She questioned whether members were interested in conducting an objective review of the effectiveness of the District's existing in-house communication efforts with communities. If found more effectiveness is needed, partnerships with the local health agencies could be instituted to conduct additional outreach.
- ➢ Huang: Confirmed that some of the recommendations were prioritized and he suggested using bullet points rather than numbers, suggested focusing on recommendations which the Advisory Council wants the Board to focus on, and suggested identify which are short-term and long-range.
- Bard: Suggested rephrasing Recommendation #4; the key word is "strong". She noted that the ARB will set regional targets and will do it with stakeholder input, so the idea is that, "<u>The Air District would take leadership in advocating for setting...</u>very strong targets that will have co-benefits of reducing air pollution in impacted communities." This will overlap with transportation, which also will assist reaching reduction targets.
- Martin: Referred to Recommendation #10 and suggested addressing redundancy to reduce the total number of recommendations.
- ➤ Hayes: We want strong GHG reduction targets regionally but also, we have a role as a District in helping to facilitate the development of implementation strategies because these will be pushed out to various jurisdictions in the Bay Area to try to implement. If one were to do this, one would want the results to be something that would maximize the air quality benefits of those reductions, and the District would play a key role in helping to identify the nexus between GHG reductions and traditional air programs.
- > Brazil: Thanked all Advisory Council members, staff and presenters for their comments.
- Kendall: supported reducing and arranging recommendations in priority order and making them concise.
- Bolles: Confirmed with Ms. Roggeknamp that a Transportation GHGs Meeting would not be held on April 8, 2009, which was voted upon by the Advisory Council; the next meeting would finish up the report on Air Quality and Public Health. Mr. Kendall agreed two meetings are needed to finalize the report to the Board of Directors, and the schedule can be discussed at the next meeting. Staff has a list of desired speakers which will be confirmed for future meetings, and he noted that the November meeting falls on Veterans Day, which will need to be discussed and rescheduled.

- ➢ Kurucz: Requested for the next meeting there be an ability for an interactive, on-screen, administrative process in order to finalize recommendations.
- Kendall: Suggested that Advisory Council members forward any and all comments to Sarah Martin-Anderson and Mr. Kendall.

#### **Revised (Incorporated) Recommendations for Subgroup Review:**

(SUGGESTION TO USE BULLET POINTS AND OUTLINE FORM INSTEAD OF NUMBERING; IDENTIFY WHICH ARE SHORT-TERM AND LONG-RANGE ITEMS; OUTLINE GOAL AND THEN LIST ACTIONS UNDER GOALS)

- 1. Incorporate Fine PM into the CARE Program and require "hot spot" analysis of regional projects. Also, incorporate this hot spot analysis into updated CEQA guidelines. Consider establishing a PM 2.5 action level and a PM 10 action level. (MOVE INTO #2)--Consider additional localized saturation monitoring studies along freeway corridors and in impacted areas, like the CARE Program West Oakland Measurement Study.
- 2. Collect data at the <u>neighborhood</u> level, through monitoring or modeling, and through *community based participatory methods*, like the CARE Program West Oakland Onroad Diesel Truck Survey, to better assess localized impact. Data should be <u>understandable</u> enough that community residents can use it to push for change. Conduct monitoring to confirm modeling results (ambient concentrations) of PM emissions from major roadways. (MOVED FROM #1)--Consider additional air pollution-related public health studies including localized saturation monitoring studies along freeway corridors and in impacted areas, like the CARE Program West Oakland Measurement Study.
- 3. Add a Health Officer (HO) position to the BAAQMD staff, similar to the position at the South Coast AQMD. The HO could provide guidance on decision making, help educate the public on health impacts of air pollution, and assist local governments with land use planning strategies that reduce air pollution and greenhouse gasses.
- 4. <u>The Air District will take leadership in advocating for setting Set</u> strong regional GHG reduction targets <u>which</u> that will have co-benefits of reducing air pollution in impacted communities.
- 5. Increase technical assistance to local jurisdictions for land use planning, such as establishing General Plan best practices and commenting on EIR's, and encouraging other Bay Area governments to adopt a program similar to San Francisco's and the role of the District in supporting that.
- Identify roadways as sources for TACs and criteria air pollutants. BAAQMD is encouraged toean provide technical assistance by preparing a methodologiesy for evaluating roadway sources measuring this source in Environmental Review processes and providing mitigation strategies.

- 7. Be more aggressive in requiring pollution reduction plans from major polluters, such as ports, and in monitoring implementation of those plans.
- 8. Support implementation of Container Fees at Ports to pay for air pollution mitigation and public health programs (rather than for congestion relief, which means an increase in PM and GHG), and support the anticipated state level resurrected Lowenthal bill. Investigate other strategies to fund emissions reduction and transit, such as gas taxes and increased vehicle license fees.
- 9. Implement Indirect Source Rules (ISR) and to ensure protection for overburdened communities. (SUGGESTION TO CHANGE WORD, "overburdened")
- 10. (SUGGESTION TO INCORPORATE ITEM INTO ANOTHER RECOMMENDATION TO REDUCE TOTAL NUMBER OF BULLETS) Incorporate appropriate recommendations from the health officer presentations into the public hearing process for the CEQA Guidelines update and the Clean Air Plan 2008. Present this full report to the Board of Directors.

## **OTHER BUSINESS:**

- 3. Council Member Comments/Other Business None
- 4. Time and Place of Next Meeting: 9:00 a.m. Wednesday, April 8, 2009, 939 Ellis Street, San Francisco, CA 94109
- 5. Adjournment: The meeting adjourned at 11:19 a.m.

Lisa Harper Clerk of the Boards

## BAY AREA AIR QUALITY MANAGEMENT DISTRICT Memorandum

То:	Chairperson Harold Brazil and Members of the Advisory Council
From:	Jack P. Broadbent, Executive Officer
Date:	April 1, 2009
Det	Continued Discussion of Dwoft Deport on the Advisory C

Re: Continued Discussion of Draft Report on the Advisory Council's February 11, 2009 Advisory Meeting on Air Quality and Public Health

The attached *revised* draft report on the February 11, 2009 Advisory Council Meeting on Air Quality and Public Health was prepared by Advisory Council members Sarah Martin-Anderson, Jenny Bard, Karen Licavoli Farnkopf, Jane Martin, and Dorothy Vura-Weis.

The Advisory Council will discuss the *revised* draft report with Air District Staff and finalize the recommendations.

Respectfully submitted,

Jack P. Broadbent Executive Officer/APCO

Prepared by: <u>Gary Kendall</u> Reviewed by: <u>Jean Roggenkamp</u>

## REVISED DRAFT REPORT ON THE FEBRUARY 11, 2009 ADVISORY COUNCIL MEETING ON AIR QUALITY AND PUBLIC HEALTH FOR DISCUSSION BY THE ADVISORY COUNCIL

#### **SUMMARY**

The following presentations were made at the February 11, 2009 Advisory Council Meeting on Air Quality and Public Health:

- 1. Community Air Risk Evaluation Program (CARE) Overview by Phil Martien, PhD, CARE Program Manager, Bay Area Air Quality Management District.
- 2. **Public Health, Air Quality, & Equity** by Dr. Anthony Iton. Dr. Iton is the Alameda County Health Officer. His primary interest is the health of disadvantaged populations and the contributions of race, class, wealth, education, geography, and employment to health status. He has asserted that the biggest single contributor to our country's vulnerability to bioterrorism is the lack of a universal system of health insurance for all Americans. Dr. Iton collaborated with California Newsreel in the creation of *Unnatural Causes ... Is Inequality Making Us Sick?* This is currently being shown on public television stations across the country.
- 3. *Health Disparities in Contra Costa* by Dr. Wendel Brunner. Dr. Brunner is the Director of Public Health for the Contra Costa County Health Services Department. Contra Costa has a population of over one million people with 18 cities in the San Francisco Bay Area. The Health Department has been working the City of Richmond to develop and implement a Health Element for the Richmond General Plan. Since he became public health director nearly 20 years ago, Dr. Brunner has stood boldly behind movements such as environmental justice, an effort to force government and industry to counter years of neglect suffered by poor minority neighborhoods.
- 4. Air Pollution Hot Spots: Unregulated Health and Environmental Justice Issues in the United States by Dr. Rajiv Bahtia. Since 1998, Dr. Bahtia has served as the Director of Occupational and Environmental Health for the City and County of San Francisco's Department of Public Health. Bhatia is also an Assistant Clinical Professor of Medicine at the University of California at San Francisco and teaches a course in the Health Impact Assessment of Public Policy at UC Berkeley.
- 5. *Air Quality and Public Health Santa Clara County* by Dr. Martin Fenstershieb. Dr. Fenstersheib has been the Health Officer for Santa Clara County since 1994. He has been active at the local, state and national levels in the area of disaster

6. preparedness since 1997. Dr. Fenstersheib has made various presentations about Pandemic Influenza to various community groups and organizations. Dr. Fenstersheib is the VP of the Santa Clara County Medical Association and the past President of the California Conference of Local Health Officials.

The speakers discussed health disparities related to air quality and potential mitigation measures in Alameda, Contra Costa, Santa Clara and San Francisco counties.

## **DISCUSSION MEETING**

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#### KEY POINTS – for discussion by Advisory Council

- 1. <u>Public Health Impact:</u> Ill health is concentrated in low-income communities of color. Health and social inequities are positively correlated with exposure to sources of air pollution, such as freeways and industrial sources.
- 2. <u>Need for improved data:</u> Communities need to be armed with information and tools to protect public health. Air quality data is not presented in a form that is easily accessible or usable to either public health or the general public. This concern applies both to the content of the data (e.g., quantitative data, geographies represented) and the language (reading level) of the data presented. More detailed and localized data are needed to assist public health departments in assessing health impacts from air pollution sources. Data drives policy.
- 3. <u>Specific pollutant effects</u>: PM 2.5 has greater health impacts than ozone and toxic air contaminants (TACs), 10 times more than ozone and 20 times more than TACs in California. Federal and State programs geared towards criteria pollutants address regional targets and do not identify hotspots. This represents an important gap in monitoring.
- 4. <u>Pollution sources</u>: BAAQMD must be more proactive in regulating mobile sources of pollution within the legal constraints. Indirect Source Review is important for this reason. BAAQMD should recognize roadways as a source to be measured—much of the data made the connection between roadways and health outcomes in the bordering communities. Areas within 500 feet of roadways are generally the most impacted and there are reliable models of air dispersion to predict pollution accumulation.
- 5. <u>Involvement in Land Use Planning</u>: Integration of public health into land use decision-making is critical, but the financial constraints of Public Health Departments necessitate BAAQMD cooperation and guidance in this process. The Environmental Impact Report (EIR) process provides a mechanism for the air district to require mitigation of health impacts from land use planning. Don't limit what BAAQMD does, or what data it makes available, to what is within the regulatory jurisdiction.
- 6. <u>Leadership Role:</u> BAAQMD can foster greater improvement in public health, and in community relations, by expanding its leadership role beyond what it is legally required to do. If we have strong regional targets to reduce greenhouse gases (GHG), we get the co-benefits of reduction in all pollution.
- 7. <u>Public Health Approaches</u>: BAAQMD is a fellow health agency whose charge is to improve air quality in order to protect public health. There was a theme of collaboration. Public health agencies have a strong relationship with the community and can facilitate linkages between BAAQMD and community groups. One of the ways to create change is to shift the status quo imbalance of

power (industry and policymakers vs. community). This imbalance is the root cause of health inequity. BAAQMD can play an important role in helping communities advocate for themselves.

8. <u>Cumulative Impacts Approach</u>: A cumulative impacts approach recognizes that criteria air pollutant sources may also produce localized hot-spots in some neighborhoods, similar to toxic air contaminant sources, and that some criteria air pollutant sources may need additional controls to protect people on smaller geographic scale than on an urban scale or regionally. The Bay Area Air Quality Management District has already recognized the need for a cumulative impacts approach by adopting Resolution 2008-10. New rules are needed to address current gaps in monitoring and health risk assessment.

#### EMERGING ISSUES – for discussion by Advisory Council

- 1. Health disparities and the relationship to cumulative impacts.
- 2. Noise pollution has negative health impacts, and is often present in the same locations as other pollutants.
- 3. Roadways are currently unregulated sources, falling outside the focus of both BAAQMD and CARB.
- 4. The use of Health Impacts Assessments is a promising part of the Environmental Review process.
- 5. The study of the health impacts of fine PM is a growing field in environmental health research.

## RECOMMENDATIONS – for discussion by Advisory Council

- 1. Integrate consideration of both fine and coarse PM into all Air District programs, including the CARE Program, and establish PM fine and PM coarse health-based action levels for permitting.
- 2. Review current rules to identify potential gaps in permitting related to the establishment of PM action levels noted above, including non major sources.
- 3. Develop additional new source and existing source rules using a cumulative impacts approach to limiting health risk at the geographic scale of one or several city blocks.
- 4. Conduct additional studies along freeway corridors and in areas impacted by multiple pollution sources, including localized saturation monitoring studies such as the CARE Program West Oakland Measurement Study.
- 5. Require "hot spot" analysis of regional projects (roadway expansion).
- 6. Implement expanded air quality modeling beyond identified toxic hot spots (to include micro areas).
- 7. Develop an indirect source inventory for the Bay Area that identifies both small and large indirect sources of air pollution.
- 8. Present air pollution data in simple, understandable language and format and make it easily available to community stakeholders.
- 9. Work with local Public Health Departments to engage community residents on air pollution issues, and use participatory methods, like the CARE Program West Oakland On-road Diesel Truck Survey, to better assess localized impact.
- 10. Conduct a review of the effectiveness of current community outreach efforts at the Air District and develop an outreach program based on best practices.
- 11. Develop land use best practices for local planning agencies to reduce air pollution and greenhouse gases and increase technical assistance on methods for Environmental Impact Review processes, hot spot analyses, and mitigation strategies.
- 12. Add a Health Officer position to the BAAQMD staff, similar to the position at the South Coast AQMD. The Health Officer could provide guidance on decision making, act as a community liaison, monitor health outcomes related to air quality, and assist local governments with land use planning strategies that reduce air pollution and greenhouse gasses.

- 13. Increase enforcement and be more aggressive in requiring pollution reduction plans from major polluters, such as ports, facilities, and in monitoring implementation of those plans in highly polluted areas.
- 14. Establish more stringent requirements for large and small point sources in impacted communities, including grandfathered sources.
- 15. Implement Indirect Source Rules (ISR) in order to ensure protection for overburdened communities and incorporate them in updated CEQA guidelines.
- 16. Support strong regional greenhouse gas reduction targets through the AB 32 and SB 375 implementation process, to maximize air quality co-benefits.
- 17. Support implementation of container fees at ports to pay for air pollution mitigation and public health programs and support the upcoming Lowenthal bill.
- 18. Investigate other strategies to fund emissions reduction and transit, such as gas taxes, increased vehicle license fees, and incentive programs, and support legislation to implement those strategies.