



CITY OF POMONA COUNCIL REPORT

September 9, 2019

To: Honorable Mayor and Members of the City Council

From: Linda Lowry, City Manager

Submitted By: Darron Poulsen, Water Resources Director

SUBJECT: PUBLIC HEARING - DRAFT 2019 WATER QUALITY PUBLIC HEALTH GOALS REPORT

RECOMMENDATION:

It is recommended that the City Council take the following actions:

1. Conduct a public hearing to accept comments on the Draft 2019 Water Quality Public Health Goals Report; and
2. Upon the conclusion of the public hearing, direct staff to incorporate appropriate comments received into the Final 2019 Water Quality Health Goals Report.

EXECUTIVE SUMMARY:

Pursuant to the Safe Drinking Water Act any public water system having water quality measurements exceed a Public Health Goal (PHG) must prepare a PHG Report, see Attachment No. 1. As the City met this requirement a Draft PHG Report was submitted to the State Water Resources Control Board (SWRCB) Division of Drinking Water (DDW) for review. To finalize the report, comments from DDW and the public at this public hearing will be incorporated into the Final PHG Report and resubmitted to DDW.

FISCAL IMPACT:

There is no fiscal impact with the proposed action.

PUBLIC NOTICING REQUIREMENTS:

A notice of the public hearing was published on August 22, 2019 and August 29, 2019, in the Inland Valley Daily Bulletin, see Attachment No. 2.

PREVIOUS RELATED ACTION:

None

DISCUSSION:

This item is to inform the public of the various drinking water standards and goals set by both the State and United States Environmental Protection Agency (USEPA). A PHG is a level of a chemical in drinking water that does not pose a significant health risk. The PHG established by the Office of Environmental Health Hazard Assessment (OEHHA) is not a regulatory standard. However, state law requires that when a Maximum Contaminant Level (MCL) is established, it be as close to the PHG as possible given the technological and financial limitations to do so. The PHG report includes the sampling results over the past three years and lists chemicals that exceeded the PHG.

To establish a PHG, the OEHHA collects all the health data available for a given chemical. Once the data is collected and analyzed, OEHHA then determines the cancer risks with the assumption that a person drinks water with that chemical every day for 70 years. Based on that criteria, OEHHA uses a one-in-one million risk level, that being, not more than one person out of a million developing cancer if exposed to the chemical.

As mentioned, there are several factors that are included in the development of a MCL, and it's these MCLs that drinking water providers must comply with. While MCLs continue to be refined by regulators, it is important to note that the City's drinking water met all current State and Federal drinking water standards. As long as drinking water complies with all MCLs, it is considered safe to drink, even if some chemicals exceed PHG levels. A PHG represents a health protective level for a chemical that drinking water providers should strive to achieve if it is feasible to do so. However, a PHG is not a boundary line between a "safe" and "dangerous" level of a chemical, and drinking water can still be considered acceptable for public consumption even if it contains a chemical at levels exceeding the PHG.

The City's local water included chemicals with levels higher than those set as PHGs, including: arsenic, tetrachloroethylene (PCE), trichloroethylene (TCE), 1,2-Dibromo-3-chloropropane (DBCP) also known as dibromochloropropane, hexavalent chrome, coliform bacteria, and radionuclides, including gross alpha, gross beta, combined radium, and uranium. The City is required to list the public health risks associated with each chemical outlined in the Draft PHG Report, acknowledge the best water treatment technology available to date, and include an estimate of the costs required to treat water to the level of the PHGs.

The following list briefly describes what must be addressed in the Public Health Goal Report:

- 1) Identify each chemical detected that exceeds the PHG;
- 2) Provide the numerical public health risk;
- 3) Identify the category of risk to public health;
- 4) Describe the "best available technology" (BAT), if available to remove or reduce chemical;
- 5) Estimate the total cost and the cost per customer to utilize the BAT described to reduce the concentration of the chemical; and
- 6) Briefly describe what action, if any, is intended to reduce the concentration of the chemical.

Both State and Federal regulators adopt BATs, which are the most effective methods available for removing a chemical. Because engineering designs are not required, costs are estimated for each given technology.

Finally, once all the comments from the Council and the public have been received, Staff will incorporate them where appropriate and send the final document to the State as required.

ALTERNATIVE:

The City Council may direct Staff to complete additional action not presented within this report.

Prepared by:

Nick Capogni
Water Quality Supervisor

ATTACHMENT:

Attachment No. 1 – Draft Public Health Goals Report for June 2019
Attachment No. 2 – Public Notice