



Legislation Details (With Text)

**File #:** 19-784  
**Type:** Consent Calendar      **Status:** Agenda Ready  
**File created:** 7/9/2019      **In control:** Public Works Commission.old  
**On agenda:** 7/17/2019      **Final action:**  
**Title:** Public Hearing to Consider Acceptance of Public Works Utilities Division Public Health Goals Report  
**Attachments:** 1. 2019-0626 -- Public Health Goals Report Memo - FINAL.pdf, 2. 2019-0626 -- Public Health Goals Report - FINAL.pdf

| Date | Ver. | Action By | Action | Result |
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**PUBLIC WORKS COMMISSION  
REQUEST FOR ACTION**

**SUBMITTED TO:** Chairman and Members of the Commission

**SUBMITTED BY:** Tom Herbel, PE, Acting Director of Public Works

**Subject:**

Public Hearing to Consider Acceptance of Public Works Utilities Division Public Health Goals Report

**Statement of Issue:**

The California Health and Safety Code mandates that a report on Public Health Goals (PHGs) for water purveyors with more than 10,000 water service connections be prepared every three years, by July 1, if any water quality measurements have exceeded PHGs.

The report must be presented to the governing body and then be the subject of a public hearing to hear public comment and consider acceptance. The report was presented to the City Council via the attached memo. The City Attorney has opined that the public hearing may be delegated to the Public Works Commission..

**Funding Source:**

Not Applicable.

**Recommended Action:**

Motion to:

Accept the Public Works Utilities Division Public Health Goals Report..end

**Alternative Action(s):**

Do not accept the report and instruct staff on how to proceed.

**Analysis:**

PHGs are **non-enforceable goals** established by the California EPA Office of Environmental Health Hazard Assessment (OEHHA), and are based solely on public health risk considerations. None of the practical risk-management factors that are considered by the US Environmental Protection Agency or the California State Division of Drinking Water in setting drinking water standards, known as Maximum Contaminant Level (MCLs), are considered in setting the PHGs. These factors include analytical detection capability, treatment technology available, benefits and costs. The PHGs are not enforceable and are not required to be met by any public water system. MCLGs are the federal equivalent to PHGs.

Information required in the report includes: (1) the health considerations associated with the goal or standard, (2) the category or type of risk to health that could be associated with each constituent, (3) the best treatment technology available that could be used to reduce the constituent level and (4) an estimate of the cost to install that treatment if it is appropriate and feasible.

All of the water quality data collected throughout our water system between 2016 and 2018 for purposes of determining compliance with drinking water standards was considered. This data was summarized in our 2016, 2017 and 2018 annual Consumer Confidence Reports, which are mailed to all of our customers by July 1. The following table provides a summary of results for the last three-year period.

| Constituent | PHG/MCLG    | MCL/Action Level | Actual    |
|-------------|-------------|------------------|-----------|
| Arsenic     | 0.004 ppb   | 10 ppb           | 2.40 ppb  |
| Lead        | 0.0002 mg/L | 0.015 mg/L       | 0.007mg/L |

All City wells meet all State and Federal drinking water standards set to protect public health. Treatment processes to reduce the levels of constituents shown above, which are already significantly below the MCL, to the PHGs established by OEHHA, would cost millions of dollars annually. In addition, it is not certain these processes would be effective in reducing the already low levels to the PHG. Therefore, no action is proposed at this time.

**Attachment(s):**

1. June 26, 2019 Memo to Mayor and City Council
2. 2019 Public Health Goals and Report