

## **NEWHALL ADVISORY COMMITTEE**

### **Final Meeting Summary**

**June 16, 2005**

**6:30 pm – 9:05 pm**

**Members Attending:** Pastor George Bulgin, Mike Colaiacovo, Dr. Abdul Hamid, Scott Jackson, Pamala Moore, Henry Platt, Jr, Leonardo Melendez, Elizabeth Hayes, Rep. Peter Villano

**Alternates Attending:** Willa Taylor

**Absent:** Henry Blue, Loydon Henry-Phillip, Deloris McNair, Sheila Epps, Donald Eaton, Rhonda Hayward, LaNorma Webb, Roosevelt Young, Luther Cooper, Rev. Keith King

**Ex-Officio Members Attending:** Eileen Barnes, Shannon Pociu (DEP); Meg Harvey (DPH); Leslie Balch (QVHD); Arthur Bogan (Town of Hamden); Jimmy Young (Olin); Tom Chaplik (RWA),

**Others Attending:** Kevin Hood, ERI

**Technical and Public Participation Assistance:** Jill Barrett (FHI)

**Facilitator:** Kathleen Conway

### **Agreements Reached.**

- NAC members agreed that the May 19, 2005 Draft Meeting Summary should not be revised to add clarifications requested by the Town.

### **Action Steps**

- Two NAC members will draft a letter to the Commissioner of Environmental Protection for the NAC' review.
- The facilitator will work with members to develop agendas for the next several meetings for the July meeting.

## **Agenda Items**

### **Convening of Meeting, Introductions and Old Business**

The meeting convened at 6:35 pm. Members and other attendees introduced themselves. The May 19, 2005 draft meeting summary was approved with some typographical revisions. The Town's consultants had requested clarifications to some responses to the NAC's questions. The facilitator explained that her notes attempt to reflect what was actually said, the way it was said. A NAC member said that making changes like this was too "legalistic." He asked whether we have to add whatever anyone wants and questioned the time spent on going through the meeting summary. The NAC members agreed that the changes should not be made but simply retained as a request.

On May 21, 2005, several NAC members met with the Commissioner of Environmental Protection, Gina McCarthy, and Elsie Patton, DEP, Mayo Carl Amento, and his assistant and the facilitator at the Newhall Project Office and walked throughout the residential and Hamden Middle School areas. The NAC members showed the Commissioner and the Mayor several homes with structural damage on Newhall Street and Winchester Avenue, and met with some residents on these streets as well as on Bryden Terrace. Additionally, the group walked the

Hamden Middle School site. The NAC members reported to the NAC that the Commissioner got a good flavor of what was there. She was personable; she talked to people and people talked to her. She saw a well-rounded neighborhood with some properties that were kept up and others that were not. One member noted that tenants were hard on the land. The Commissioner noted to a NAC members that this remediation project looked like it would have to be a phased process. Several members offered to draft a letter to the Commissioner for the NAC as a whole to review.

### **Health Risks and Community Concerns Presentation by Meg Harvey and Kenny Foscue, CT Department of Public Health. (See Outline attached)**

Meg Harvey talked about health concerns regarding the presence of landfill waste and health and safety concerns regarding future soil remediation. To start, she explained how the Department makes decisions about health risks based on 3 factors:

- We must use accepted science methods
- We use the most health protective guidelines
- We try to determine if people have been exposed.

She stressed that people have to be exposed to high enough levels for a long enough time in order to get sick. But even then, exposure does not automatically mean you will get sick. The conclusions of the Public Health Assessment studies done on sample results from 2001 and 2002 show that no public health threat from lead, arsenic or PAHs exists. But because contamination is above the DEP Remediation Standard Regulations (“RSRs”), cleanup must be done.

### **Health Concerns Regarding the Presence of Landfill Waste**

**Past Conditions.** Children may have been exposed to high levels, tens of thousands of lead in parts per million, and could have had increased levels of lead in their blood in the 13 properties where the most contamination was found and cleaned up. However, Quinnipiac Valley Health Department said that there were no signs that children in the neighborhood have high lead blood level now. Neither the Health Survey nor published cancer rates for Hamden look unusual.

**Current Conditions.** Some yards have contamination above DEP standards but below EPA immediate cleanup trigger levels. We do not know where all the contamination is yet because DEP is still conducting testing and finding fill.

**Public Health Assessment Recommendations.** The recommendations were to expand the neighborhood survey based on further testing and evaluation of the sampling data and offer free blood lead testing.

**Why not do a Health Study?** The Department must use established scientific practice to determine whether to do a Health Study. There must be:

- Contamination
- Exposure to contamination
- Exposure to levels that are high enough to cause disease

### ***Questions asked before conducting Health Studies.***

**Has enough time passed?** Many diseases have a latency period from several years to many years before showing up.

**Are there other causes?** Many different things could cause cancer and there are many forms of cancer, i.e., lung, liver, etc. Some contaminants cause a specific form of cancer. For example, exposure to asbestos can cause a special lung cancer.

**Is there a cluster of specific type of disease?** People would notice a group of same type cancers in a neighborhood. Additionally, they have the same environmental chemical exposure. It is rare to have documented clusters. Only 3 studies nationally have documented a clear link between exposure, contaminants and disease in a particular group of people.

**Has science found links between the chemical and the health problems?** There must be evidence in the scientific literature linking, for example, diabetes and lead. But there is no biologic plausibility for lead causing diabetes. Lead is linked to slower learning and reduced growth in children.

**Exposure.** In this neighborhood, there is the potential for exposure but that does not mean there was exposure.

- You have to come into contact with the chemical in the soil and it has gotten into your body by breathing, eating, touching. There is **no** exposure from drinking water.
- If you are not exposed, it can't make you sick

**Is there enough exposure for a study? Is there background information?** There has to be enough exposure to reasonably believe that there is potential for health symptoms. High contaminant levels were found in a small number of homes (13) that were cleaned up by EPA. We do not believe there were many children; and when children are grown, you would not find blood lead levels that persist. Also, there are other exposures from, for instance, lead paint and other household products. From the time we started collecting information in 1978, we have not seen high blood levels. PAHs and arsenic levels are not high enough or widespread enough.

- We cannot easily find children exposed to high levels in the past. There is no way of assessing symptoms in the past.
- There is no strong evidence that these symptoms persist into adulthood.
- Without background information, we can't make comparisons

Data on slow learning is not systematically collected in the United States while cancer is easily tracked through a tumor registry in Connecticut since 1935.

**Neighborhood Concerns about Illnesses.** Residents have concerns about cancer, diabetes and high blood levels. But we are not saying that these illnesses are not higher here. There are multiple factors for different cancers – lack of access to health care; diet, higher proportion of older people; higher incidence of certain diseases, certain ethnic groups, smoking, diet, heredity and environment. One out of three people are diagnosed with cancer.

- There is no biological plausibility link between lead and cancer.
- You suspect environmental exposures if there are lots of the same type of cancer, for example, 6 or 7 children diagnosed with childhood leukemia.

- We have more experience with exposure to high levels in the workplace, for example, bladder cancer at Upjohn and specific type of brain cancer at Pratt & Whitney in North Haven.
- Diabetes is more prevalent in Latinos, African-Americans than whites; multiple sclerosis in white women than white men; autism in boys than girls.

### **Health and Safety Concerns relating to Soil Remediation**

**Health Concerns.** Dust generated during cleanup and during truck transport of contaminated soil; truck diesel emissions and noise.

**Safety Concerns.** Truck traffic and physical hazards (holes and machinery)

**Measures exist for minimizing health and safety impacts during cleanup.** We are not providing a complete list. These are possibilities that have been used at other cleanup areas that are established and known to work. The Potentially Responsible Parties will submit a proposed Health & Safety Plan that the NAC will have an opportunity to provide input.

**Dust.** Finer particles are more dangerous and are measured in microns (“PM 2.5”). They are linked with many health effects: premature death, aggravated asthma, acute respiratory symptoms, chronic bronchitis, increased risk of lung cancer, heart attacks; and certain people are more susceptible: elderly, infants and people with heart/lung disease. Additionally, there is the potential for exposure to contaminants in the soil – lead, arsenic and PAHs.

**Measures to reduce dust.** All of the measures have been used successfully in the past, for example, at the 13 homes where EPA conducted cleanups. Dust did not leave the working area based on real time monitoring that instantly provided readings on dust levels.

- Real time dust monitoring
- Dust suppression by watering
- Air sampling
- Covering soil in trucks and stockpiles
- Dedicated equipment in construction area
- Washing trucks and wheels
- Stopping work if windy
- Keeping windows
- Temporary resident relocation during construction at property (more for safety issues).

### ***Conducting Indoor Air Sampling during Construction.***

- First goal is to prevent dust from leaving site.
- Difficult to test indoors because of other factors affecting results: lead and arsenic in paint; smoking (lead, arsenic and PAHs)
- Asphalt, car exhaust and wood burning stoves (PAHs)

**Measures to reduce diesel emissions impacts:** minimize idling of trucks (regulated by DEP regulations; use of more efficient fuel; and extra emissions control devices on trucks

**Measures to reduce noise:** comply with Hamden’s noise ordinance (7 am – 9 am Monday through Saturday, close windows and monitor noise levels.

- NAC question: Does it specify decibels? We need to check Hamden noise ordinance.

- Residents could think about different hours and times.

### *Safety Concerns*

- Truck traffic: designated routes and hours of operation
- Physical Hazards: resident relocations; machinery secured when not in use; and temporary fencing.

### **NAC Questions and Response**

- 1. Q: If children have been exposed to lead and have learning disabilities, as adults, does it go away?**

**A:** Some studies say the impact is not measurable. There are a few studies with findings that there is a link to violent behavior problems in teenagers.
- 2. Q: If you looked at town wide cancer rates, wouldn't there be dilution?**

**A:** Yes. But the level of contaminants linked with cancer, arsenic and PAHs, are not high enough to cause cancer.
- 3. Q: Can you study this neighborhood? Can you get information just from this neighborhood?**

**A:** Information from exposure to lead is not available from many years ago. QVHD manually checked all its files from 1975 and did not find any instances of high blood lead levels except in relation to lead paint. It is certain though because many children visit grandparents often in Newhall but would not be tested by QVHD.
- 4. Q: Is it technically possible to study cancer rates in this neighborhood?**

**A:** Yes, by census blocks; possibly by zip code. But the cancer registry will only tell you if the person when residing in Connecticut was diagnosed with cancer. It will not tell you if a person was exposed here and diagnosed in Vermont. And, it will not tell you if the person residing in Connecticut was diagnosed here but moved recently from Vermont.

It is important to note that even if we did the study, the results would not change the remedy from occurring. It would not change the cleanup standards. If the factors for doing a health study are not there, we cannot do one. There has to be exposure for a long enough time at high enough levels.
- 5. Q: You said dust could cause lung cancer. What about people in the neighborhood who may be affected by dust?**

**A:** Measures would be taken to prevent dust from leaving the construction area.
- 6. Q: Have you evaluated the Malcolm Piernie report?**

**A:** We looked at samples taken in bare spots. Contaminants at deep levels are not relevant to exposure. There were 8 homes where DEP conducted a temporary cleanup by covering the bare spots.
- 7. Q: This presentation contained information in general. Did you review recent data specific to this neighborhood?**

**A:** We have not formally written up a report on the Malcom Piernie report.
- 8. Q: Do you plan doing a report on all the recent data.**

**A:** We have identified 100 residents where contaminants are over the standards but under the trigger requiring immediate cleanup. We have used 400 to 1200 parts per million (“PPM”) as the criteria. These are the people that are in the so-called “grey area.” We asked a DEP employee who is also a NAC member to call people in the “grey area.” These meetings will take all of the summer.

**Comment from NAC member:** I received a call from a NAC member about these meetings and only then learned she was a DEP employee. Isn’t there a conflict if a NAC member is also a DEP employee? We discussed this when forming the NAC criteria. There would a conflict if a member worked for an agency. I want to know if there is anyone else working for the agencies?

**Faciliator:** can we hold this question until after the NAC has asked all its questions about the health concerns and the presentation? Question held until end of presentation and questioning.

**9. Q: Has the Town Building Department been provided information on what properties digging is not allowed?**

**A:** DEP stated that all departments have been notified in addition to Call Before You Dig.

**Comment:** NAC members commented that on occasion digging has occurred and been reported to DEP. Also, a NAC member commented that the Town Sewer crew was digging on his street.

In a specific incidence reported to DEP about digging in a yard, DEP talked to the Building Department and a permit had been issued. As regards the Town Sewer Department, the department was notified of the area impacted and what precautions to take.

**Comment:** A NAC member noted that they were digging and had no protective clothing or anything.

**10. Q: What if you were digging years ago but there is no effect for 20 years? How would you know now?**

**A:** You need to look at the concentration of contamination and the length of time of exposure.

**11. Q: If the levels at the surface are not enough to make anyone sick, what if people dug deeper at higher levels?**

A single exposure at high levels would not be long enough to get sick.

**12. Q: What methodology did you use to look at data on disease symptoms?**

**A:** Quinnipiac Valley Health Department manually reviewed the files in 2004.

**13. Q: If people find that they have health problems, have moved and are concerned, what should they do?**

**A:** A NAC member noted that she receives inquiries at the Newhall Project Office.

**14. Q: You haven’t answered the question as to when and if there will be a Department of Public Health report on the recent data to evaluate whether earlier Health Assessment Report would have to be changed.**

**A:** The Department has set a priority on meeting with the people identified in the “gray” areas. We do not have the staff or the time to write a formal report on the recent sampling results. We have looked at the results. This is how we identified the 100 people.

**15. Q: Can you look at just the hot spots in the new data and get back to us this summer?**

**A:** Yes, that is doable by the end of the summer.

### **Agenda for Next NAC Meeting**

DEP will be presenting its evaluation of the recent report. NAC members questioned when they would receive an evaluation of the testing outside the Consent Order. DEP stated that the testing had not been completed and that they still had not found the end of the fill. NAC members wanted to know if DEP could be more specific as to where they were still finding fill. DEP responded that the deep fill continues west of St. Mary’s and south of Goodrich Street and that the data is still coming in.

The NAC discussed future meetings and what information they needed. A NAC member stated the NAC needs more guidance in determining what information it needs. A NAC member had requested that the Town attend a meeting so members could ask about the Town’s plans and questions about tax abatement. The facilitator will work with the NAC members to plan content ahead for future meetings.

Since the meeting was over the scheduled time, ex-officio and other attendees were given the choice of leaving while the members returned to the question that had been held.

### ***NAC discussion relating to NAC membership and conflict-of-interest as DEP employee.***

**NAC Member.** An employee of DEP should not be a member of the NAC. When we started this group, we discussed conflict of interest issues that may arise if a NAC member is an employee of the DEP. If this is a principle, I want to know if anyone else is acting as an employee of any agencies.

**DEP Response.** The NAC member in question is both a resident and member of the community. The Newhall Project Office acts as a document repository and office. It needed to be staffed. Initially, we retained the NAC member as a temporary worker to keep the office open, to field phone calls and to refer calls to DEP. In her current capacity, she is subcontracted by the environmental consultant. The Environmental Justice unit noticed the job to the public and the NAC member was chosen as the best candidate.

**DPH Response.** The NAC member in question called DPH and asked about the people in the gray area and whether there had been any follow up to the restrictions against digging and recommendations. We had already determined that a follow up would be desirable. We asked the NAC member to call and set up appointments on behalf of the Department of Health with the 100 people identified as having lead over 400 parts per million (“ppm”) but under the immediate action level of 1200 ppm.

**DEP Comment.** There is no conflict. When she staffs the office, she is working for DEP. When she attends a NAC meeting, she attends as a resident and a member of the community.

Following no further comment and because it was close to 9 pm, the NAC decided to table the discussion.. The NAC adjourned at 8:55 pm.