



**Ontario Public Health Association**  
 l'Association pour la santé publique de l'Ontario  
 Established/Établi 1949

The mission of OPHA is to provide leadership on issues affecting the public's health and to strengthen the impact of people who are active in public and community health throughout Ontario.

44 Victoria St., Suite 502  
 Toronto, ON M5C 1Y2

Tel: (416) 367-3313  
 Fax: (416) 367-2844  
 E-mail: admin@opha.on.ca  
[www.opha.on.ca](http://www.opha.on.ca)

**President**  
 Ellen Wodchis  
 E-mail: president@opha.on.ca

**Executive Director**  
 Pegeen Walsh  
 E-mail: PWalsh@opha.on.ca

**Constituent Societies**

Association of Ontario  
 Health Centres (AOHC)

Association of Public Health  
 Epidemiologists in Ontario (APHEO)

Association of Supervisors of  
 Public Health Inspectors of Ontario  
 (ASPHIO)

Canadian Institute of Public Health  
 Inspectors (Ontario Branch) (CIPHIO)

Community Health Nurses'  
 Initiatives Group (RNAO)

Health Promotion Ontario (HPO)

Ontario Association of Public  
 Health Dentistry (OAPHD)

Ontario Association of Public Health  
 Nursing Leaders, (OAPHNL)

Ontario Dietitians in Public Health  
 (ODPH)

Ontario Society of Physical Activity  
 Promoters in Public Health (OSPAPPH)

Charitable Registration  
 Number 11924 8771 RR0001

February 7, 2018

Lubna Hussain, Manager  
 Ministry of the Environment and Climate Change  
 Environmental Sciences and Standards Division  
 Standards Development Branch  
 40 St. Clair Avenue West, Floor 7  
 Toronto Ontario  
 M4V 1M2

Dear Lubna Hussain,

**RE: OPHA Response – EBR # 013-1680 Cumulative Effects Assessment in Air Approvals**

The Ontario Public Health Association (OPHA) appreciates the opportunity to comment on the Ministry of the Environment and Climate Change's proposed policy for Cumulative Effects Assessment (CEA) in air approvals to more effectively consider cumulative impacts from multiple air pollution sources, both industrial and non-industrial. We are also grateful to be able to participate on the MOECC's Air Standards/Local Air Quality Regulation External Working Group as it provides public health units, industry and other stakeholders the opportunity to come together and determine how to best protect communities from exposure to air pollution. With a mandate under the Ontario Public Health Standards to increase awareness of health impacts of outdoor air pollutants, the public health sector plays an important role in supporting evidence based policy in this area.

Created in 1949, the Ontario Public Health Association (OPHA) is a not-for-profit organization committed to providing leadership on issues affecting the public's health and strengthening the impact of people who are active in public and community health throughout Ontario. Our mission is achieved by providing professional development timely information and analysis on public health issues, access to multi-disciplinary networks, advocacy on healthy public policy and expertise and consultation.

We would like to acknowledge the MOECC for taking initiative to address cumulative effects and encourage the MOECC to build upon this first step by working towards continuous improvement to extend the policy to include additional chemicals (carcinogens and non-carcinogens) and CEA areas. OPHA requests that the MOECC consider the following recommendations:

**General**

- The Proposal provides a framework for the approvals of new and expanding facilities under O. Reg. 419, focusing on two areas (Hamilton and Sarnia) and two contaminants (benzene and benzo[a]pyrene). Throughout discussions with the Reg.

419 External Working Group, this initiative was referred to as a “first step proposal” or pilot. This terminology has been removed from the Proposal. OPHA recommends that the MOECC re-introduce this wording to demonstrate that this initiative is the first step in a process and not the end goal.

- Currently, the Proposal does not contain evaluation criteria for the policy. OPHA encourages the MOECC to define goals, evaluation endpoints and a timeline to be able to evaluate the performance of the CEA policy and ensure that it is meeting its objectives.
- Risk communication and stakeholder involvement are important aspects of risk management. The Proposal and Discussion Paper currently provide few details regarding community engagement and stakeholder involvement in the CEA process. It is recommended that additional detail be provided regarding who the stakeholders are, how the MOECC will engage with them and what their role will be in the process. Key stakeholders should include other relevant Ministries (e.g., Ministry of Transportation, Ministry of Health and Long-term Care), regional governments/municipalities and local public health units.

### ***Questions from the Cumulative Effects Assessment Discussion Paper***

#### **What other information should be considered in defining areas where CEA policy applies?**

- The Ministry is developing an Air Zone Management Framework (AZMF) in order to implement the Air Quality Management System (AQMS) to achieve the Canadian Ambient Air Quality Standards. The Proposal and Discussion Paper indicate that it is through these programs that emissions from non-industrial sources would be addressed; however, the MOECC has not defined how this would occur. The MOECC should provide more detail as to how the CEA will work in conjunction with the AQMS. The framework should include how the MOECC will engage, communicate and work with other stakeholders, including other Ministries, regional governments/municipalities, emitters of the contaminants, and local communities.
- As discussed in the Reg. 419 External Working Group meetings, the CEA should apply to all new and expanding facilities in areas where Ambient Air Quality Criteria (AAQCs) are exceeded. CEA should not be limited to areas where industry is the major contributor of a contaminant. In the spirit of protecting air quality, facilities that wish to open or expand in areas with air sheds that are already impacted by non-industrial sources (e.g., transportation) should be required to go through the CEA and limit their emissions, if possible. The Discussion Paper states that the CEA is a framework that aims to protect local communities from the effects of air pollution by regulating contaminants from various sources. The ultimate goal of the CEA to protect local communities will not be achieved if it is only applied to areas where industry is the major contributor. Industries should not be allowed to worsen already impacted air sheds solely because they are not the major contributor of a contaminant.
- Defining areas where the CEA policy applies should be based on rigorously conducted and reviewed scientific evidence. OPHA agrees with the use of ambient air quality monitoring data (both from the MOECC stations as well as the federal National Air Pollution Surveillance Program), data from the National Pollutant Release Inventory and compliance monitoring required by the MOECC. As well, we recommend that the MOECC evaluate the data contained in the Toxic Reduction Act database as well as the data from Toronto’s ChemTRAC program. This data should inform the decision to conduct further assessments (for example, multi-source modelling). The proposal is not clear about what concentration of a pollutant would trigger the MOECC to conduct multi-source modelling, but we recommend that it be done when the concentration of a contaminant reached 90 per cent of the annual Ambient Air Quality Criteria (AAQC).

#### **Are there other requirements that should be considered for each of the action levels?**

- Table 5.4: Action level 2 states that facilities **may** be required to include best available pollution control methods. Please provide additional information regarding situations when the inclusion of best available pollution control measures will be required. Do situations where pollution control measures are not required relate solely to facilities using site-specific and technical standards?

### **What should the Ministry focus on as priorities for future steps?**

OPHA thanks the MOECC for undertaking this much needed first step. In the future, the policy should evolve to include:

- Expanding the policy to apply to areas of AAQC exceedances beyond Sarnia and Hamilton to ensure that the health of all Ontarians is protected;
- Consideration of additional chemicals (carcinogens, non-carcinogens, precursor gases contributing to PM and ozone);
- The evaluation of cumulative effects from multiple chemicals with similar modes of action; and,
- The CEA should also be applied to new or expanding facilities in areas where AAQCs are exceeded but where industry is not the major contributor.

OPHA would like to thank the MOECC for considering these comments. We would be pleased to discuss these comments further.

Sincerely,



Pegeen Walsh  
Executive Director, OPHA

### **About OPHA**

*Created in 1949, the Ontario Public Health Association (OPHA) is a non-partisan, non-profit organization that brings together a broad spectrum of groups and individuals concerned about people's health. OPHA's members come from various backgrounds and sectors— from the various disciplines in public health, health care, academic, non-profit to the private sector. They are united by OPHA's mission of providing leadership on issues affecting the public's health and strengthening the impact of people active in public and community health throughout Ontario. This mission is achieved through professional development, information and analysis on issues effecting community and public health, access to multidisciplinary networks, advocacy on health public policy and the provision of expertise and consultation.*