

Air and Climate Public Advisory Committee

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<http://www.mwcog.org/environment/committee/>

The Air and Climate Public Advisory Committee (ACPAC) is an advisory body to the Metropolitan Washington Air Quality Committee (MWAQC) and the Climate, Energy, and Environment Policy Committee (CEEPC)

Draft Meeting Minutes

Monday, May 20, 2013

Room 1

5:30 P.M.-7:30 P.M.

ACPAC members: Bill Butler, Gretchen Goldman, Ravi Gupta, Raphael Isaac, Andrew Kambour, Sally Kane, Katherine Lizotte, Brian McFarland, Caroline Petti, John Reed, Glenna Tinney

Staff: Joan Rohlfs, Leah Boggs, Sunil Kumar

1. Call to Order, Adoption of Agenda, Approval of Minutes

The agenda and minutes from April 15, 2013 were approved with no changes.

2. Health Risks of Air Pollution (Dr. Tee Guidotti, Medical Advisory Services)

Dr. Tee Guidotti provided a thorough overview of the health risks from fine particle matter and ozone. Dr. Guidotti pointed out that until 1990, general consensus for particulate matter (PM) was that the effects on human health were minor. Since then, technology for exposure assessment has improved and extensive efforts related to validation, confirmatory replication, stringent review, and critical analysis of its effects were undertaken. He went on to explain that total suspended particulates (TSP) are the most common unit of measurement.

- Particle distribution observed
- PM10 introduced: effect observed
- PM2.5 followed: more effect
- PM1.0 followed: ultrafines

The relative risks of fine particulate matter are in order of 1.03 to 1.15, with attributable risk resulting in thousands of deaths in major cities. Dr. Guidotti pointed out that the most susceptible population is the elderly. He went on to describe ozone as a secondary pollutant and a highly oxidizing gas produced from mobile sources. Some of the health impacts are:

- *Primary* effect on peripheral airways,
- *Secondary* effect on cardiovascular system, morbidity,
- Provocation of asthma,
- Causation of asthma,
- Major issue in children's environmental health, and

- Aggravate allergies.

The key takeaways were summarized as, reducing the standard for fine particulate air pollution and ozone will:

- allow more Americans to live,
- improve the health of the American people overall and particularly those who live in cities,
- allow Americans with asthma, heart disease, diabetes, and a high risk for stroke to manage their health risks more easily,
- push improvements in pollution, but especially source control, that will reduce many forms of pollutions together,
- improve health and quality of life and productivity, and
- lead to more efficient and therefore advanced and competitive technologies.

3. Congestion Mitigation and Air Quality Program and Projects in the Region (Ron Kirby, Director, COG DTP)

Ron provided an overview of the new national performance-based planning goals under MAP-21, Moving Ahead for Progress in the 21st Century Act, which was signed into law by President Obama in July 2012. MAP-21 restructures core highway formula programs and requires the metropolitan transportation planning process to use a performance-based approach to support national goals. Ron explained that the new goals relate to the Scope of the Metropolitan Planning Process and were added to the previous law and do not replace previous goals.

The performance measures required by MAP-21 are limited to the following programs:

1. National Highway Performance Program
2. Highway Safety Improvement Program
3. Congestion Mitigation and Air Quality Program (CMAQ)
4. National Freight Movement

The focus of TPB for FY 2014 was summarized as:

1. Responsibilities to be coordinated with States/transit agencies and
2. Explicit TPB Responsibilities for Congestion Mitigation and Air Quality

Regarding CMAQ, Ron pointed out that TPB is required to set performance targets for the new program - a new undertaking. US DOT must first establish performance measures by April 1, 2014m with targets set by October 1, 2015.

4. Member Time (Ravi Gupta, INOVA)

Dr. Ravi Gupta briefed the members on the sustainability initiatives at Inova health Systems. Following programs have been implemented there:

1. Waste, Energy, Water Management
2. Environmental Preferable Purchasing
3. Healthy Foods
4. Alternative Transportation

5. Green Building
6. Health Information Technology
7. Employee Engagement
8. Community Benefit

Dr. Gupta described the targets the Inova health Systems has set up for different types of wastes being generated in their hospitals. He also mentioned various other action taken such as, retrofitting with induction lighting, upgrading HVAC equipment, IT upgrades, Building LEED certification, which all contributed to a decrease in the energy uses across the system. He further described efforts such as, minimization of chemical use, reduction in waste generation, and energy and water conservation.

5. Next Meeting Date

The Chair recommended having other presentations for ACPAC from John Reed and Gretchen Goldman. It was also suggested establishing subcommittees on health and pollution concerns. This should be a discussion/agenda item for the June meeting.

Next meeting: June 17, 2013 – 5:30pm – 7:30pm
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