

Auckland Regional Public Health Service

Rātonga Hauora ā Iwi o Tamaki Makaurau



Working with the people of Auckland, Waitemata and Counties Manukau

Auckland Regional Public Health Service

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Submission on *Contaminated Land Management Guidelines*

Thank you for the opportunity for Auckland Regional Public Health Service (ARPHS) to provide a submission on proposed revisions to:

- *Contaminated Land Management Guideline No. 1: Reporting on Contaminated Sites in New Zealand;*
- *Contaminated Land Management Guideline No. 5: Site Investigation and Analysis of Soils.*

The following submission represents the views of the Auckland Regional Public Health Service and does not necessarily reflect the views of the three District Health Boards it serves. Please refer to Appendix 1 for more information on ARPHS.

The primary contact point for this submission is:

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Yours sincerely,

A blue ink signature of Jane McEntee, written in a cursive style.

Jane McEntee
General Manager
Auckland Regional Public Health Service

A black ink signature of Dr. David Sinclair, written in a cursive style.

Dr. David Sinclair
Medical Officer of Health
Auckland Regional Public Health Service

Draft Revision to the Contaminated Land Management Guidelines 1 and 5

1. The Auckland Regional Public Health Service (ARPHS) seeks to ensure that assessment and development of contaminated land is undertaken in a manner where the risk(s) to human health (including residents, neighbours or workers in an industrial setting) are mitigated. We are particularly interested in any contaminated sites that are re-developed as (or adjacent to) schools, recreational areas or residential areas.
2. ARPHS supports the proposed revision to both revised Contaminated Land Management Guidelines. Our comments on the guidelines are limited in that ARPHS is not directly involved with generating contaminated site assessments. Our role is primarily in reviewing assessments and providing advice on health risks and risk communication to councils and Worksafe, as well as property owners. Hence we are less familiar with the detailed working of the National Environmental Standard for Assessing and Managing Contaminants in Soil to Protect Human Health (NES-MCS) and associated guidelines than are councils and consultants.
3. From this perspective, our reasons for supporting the revised versions of the contaminated land management guideline are that:
 - The overall structure and the manner in which the information is presented appears clearer and more coherent in both revised documents;
 - There is better linkage and referencing between the reporting and site investigation guidelines. For instance, the introductory sections provide useful information about the scope of each guideline.
 - Revised guideline No.5 provides greater explanation about why each step in the site investigation process under the NES-MCS is necessary, and is clearer about how an investigation should be undertaken. This will provide greater assistance to those parties (i.e. non-practitioners) which are unfamiliar with the site investigation and analysis processes for managing contaminated land.
4. In addition to factors listed for Preliminary Site Investigation (Section 2.2 of Guideline 5), information on blood or tissue levels of contaminants, combined with exposure history, may be useful in developing the site assessment plan where there has been significant human or animal exposure. For example, chemical injuries arising from exposure to environmental contaminants may have been notified to the Medical Officer of Health, who may be able to provide information on exposure.
5. Assessment of groundwater contamination resulting from contaminated land is only briefly mentioned in Guideline 5. Some aspects of groundwater contamination assessment are referred to in the *National Environmental Standard for Sources of Human Drinking Water* and the *National Policy Statement for Freshwater Management*. However, we support a consistent detailed methodology across all these areas. These assessments are important following large or prolonged contamination events, or where there are fluctuating water table levels. For example, plume modelling is useful where large spillages occur upstream of potential agricultural, industrial or community ground water supply extraction.

6. Remediation Action Plans (Guideline 1, Section 2.6.2) could include information on preventing further contamination where appropriate (e.g. placement and operation of tanks used to hold contaminated liquids or soil prior to removal).
7. There may be additional requirements for specific situations, such as legal issues related to the decontamination of methamphetamine laboratories, which may affect Site Management Plans and Remediation Action Plans (Guideline 1, Sections 2.5 and 2.6).
8. Thank you for the opportunity to provide feedback on the proposed revisions to the contaminated land management guidelines.

Appendix 1 - Auckland Regional Public Health Service

Auckland Regional Public Health Service (ARPHS) provides public health services for the three district health boards (DHBs) in the Auckland region (Auckland, Counties Manukau and Waitemata District Health Boards).

ARPHS has a statutory obligation under the New Zealand Public Health and Disability Act 2000 to improve, promote and protect the health of people and communities in the Auckland region. The Medical Officer of Health has an enforcement and regulatory role under the Health Act 1956 and other legislative designations to protect the health of the community.

ARPHS' primary role is to improve population health. It actively seeks to influence any initiatives or proposals that may affect population health in the Auckland region to maximise their positive impact and minimise possible negative effects on population health.

The Auckland region faces a number of public health challenges through changing demographics, increasingly diverse communities, increasing incidence of lifestyle-related health conditions such as obesity and type 2 diabetes, infrastructure requirements, the balancing of transport needs, and the reconciliation of urban design and urban intensification issues.