

Trail Area Health & Environment Committee



MINUTES

Meeting: May 13, 2014
City of Trail – Committee Room #2
7:00 pm

Committee Members in Attendance:

Gord DeRosa, Alternate Chair, City of Trail
Brad McCandlish, BC Ministry of Environment
Mark Tinholt, Teck Trail Operations
Steve Como, USWA Local 480

Ron Joseph, Community Rep.
Jeannine Stefani, Interior Health
Graham Kenyon, Community Rep.
Cheryl Whittleton, Interior Health

Others in Attendance:

Bruce Enns, SNC-Lavalin
Andrea McCormick, SNC-Lavalin
Ruth Beck, Program Manager
Dawn Tomlin, Interior Health
Roland Scott, Community member

Richard Deane, Teck Trail Operations
Cindy Hall, SNC-Lavalin
Liz Anderson, Program Administrator
Angelique Rosenthal, Teck Trail Operations
Tayla Scott, Trail Champion

Note: *Jacquie Johnson's seat on the THEC has been replaced by Cheryl Whittleton (alternate Dawn Tomlin) as a representative from Interior Health in addition to Jeannine Stefani.*

MOTION to send flowers to Jacquie to thank her for her service to the THEC/THEP. Ron Joseph moved; Brad McCandlish seconded. Carried. A card for Jacquie was passed around during the meeting for the members to sign. In addition, Gord DeRosa welcomed Steve Como, the new USWA 480 representative, to the THEC.

MEETING MINUTES: March 4, 2014

MOTION to adopt the minutes from March 4, 2014; Mark Tinholt moved; Ron Joseph seconded. Carried.

Note: *There was a question March 4 regarding newborns and maternal blood lead levels (see page 4 in the Mar. 4 minutes). The minutes reflect what was said, but a study on maternal blood lead levels and newborns provides more precise and up-to-date information (to be presented later this meeting.)*

REPORTS & RECOMMENDATIONS:

Program Agreement:

Ruth Beck shared with the Committee that the draft THEP Agreement (THEPA) document is still under review and offered to clarify any questions. A discussion took place regarding the references provided in the THEPA document. Ruth Hull of INTRINSIK, the consultant supporting the development of THEPA, has been verifying the references. Mark Tinholt introduced the new Foreward and confirmed that Mayor Bogs has signed it. Mark also presented the revised map for the THEPA document and noted that we still need to describe the subtleties of what programs are offered where. For example, the Home Renovation Support Program is provided as a public service to some Lower Columbia communities where there is no history of metals deposition. Mark described the different areas on the map and asked if the Program should offer HRSP for homes built after 1976 in areas where there were historic metals deposited pre-KIVCET. It was agreed that this should be considered. Graham Kenyon commented that our program is evolving; when the THEPA comes out into the world, readers will see that we're moving into the world of children's healthy development and our program areas might evolve with it. Discussion followed and both Mark and Ruth commented that we could add the focus on healthy child development to the program description on the map. Ruth noted that the HELP on-site visit is going to look at how

children are doing across the lower Columbia region. Gord DeRosa asked Jeannine if our program offers services in cases where children spend time in a home in Trail but officially live outside the area. Jeannine replied that it's not always easy to identify those children, but if they are, blood lead testing is offered as well as Healthy Family Healthy Home visits to the Trail home. Cindy Hall added that our program offers visits to "caregivers" (*Note: which includes extended family for example*) if we know about them. In the THEPA document it's noted that we aim for properties where a child spends 3 or more days a week. Steve Como asked for clarification on how the HRSP addresses asbestos. Andrea replied that the Community Program Office gets a lot of questions about asbestos and mould, but it's not our program focus. Small scale asbestos and mould removal requires a lot of the same personal protective equipment and materials that we provide through the HRSP. The program doesn't recommend that people do their own asbestos removal. For homeowners asking about asbestos removal, we provide Worksafe BC and CMHC pamphlets as well as information on a lab that can test asbestos. As to disposal, the RDKB will take suspect materials, but requires notification. We avoid recommending methods of disposal as it should be a qualified contractor doing the removal. Our program focuses on protecting against unknowns and lead in the home environment where we provide information on how to keep lead dust down and also give the homeowner an opportunity to test lead paint. We don't want to encourage homeowners to do asbestos removal on their own.

Mark brought up that there is a clarification needed in the Fugitive Dust Reduction section of the THEPA document. The "plan, check, do" model of continuous improvement doesn't line up with the timelines (to achieve targets by 2018) and thus the wording will be revised appropriately.

Mark opened a discussion about calling the THEPA document "an Agreement". The term 'agreement' was meant to capture the spirit of community collaboration yet it was recognized that the document was not a contractual agreement. After legal review, it became clear that that the document could not be called an "agreement" without including a strong disclaimer on it not being a contractual "agreement", which detracts from the original intention. Cheryl Whittleton added Interior Health's perspective and commented that IH and the THEC have been working collaboratively for 20 yrs already. Cheryl's preference would be to change the wording to a Memorandum of Understanding toward continued collaboration. Brad McCandlish noted that there was a similar sentiment about the term 'agreement' from the Ministry of Environment; calling it an agreement connotes something legal. Graham presented his perspective on an alternative to the term 'agreement'. He added that the THEPA document could be a leader in presenting community, industry, and government collaboration as a model of how we achieve our goals. Graham proposed renaming the Agreement as "The Trail Area Health & Environment Program: Concurrence in Action". Discussion followed and Graham added that it's still important that the document expresses how the program has worked and reflects the commitment we have made. He added that he would like to see the writing at the front of the document rather than at the end.

ACTION: Ruth Beck to email the draft Signatory Page to THEC members for their feedback.

Ruth stated that the Emerging Leaders Program meeting at Teck last week resulted in some feedback: this is an important time to talk about how unique our collaborative group is. The feedback was that this type of collaborative model is unheard of by them in the rest of the world and they envy it. Gord suggested that feedback on the THEPA Document be given and that we target July 8th as completion of the document for endorsement. Ruth reminded the Committee that the Family Health Section is timed to come from IH in June (comments from IH for RB et al. to work on). So if not by July 8th, the document should be ready for the meeting after that. Ruth added that the Ministry of Environment (MoE) will need to review the plan as a Wide Area Remediation Plan (WARP), but we won't need to wait for their comments to complete the document for our purposes. Mark commented that we're not sure if the MoE will accept the document as is for a WARP, or if a separate sub-set of the document will be required, but he will start the conversation.

Mark shared that Teck and IH have recently met and are reviewing the agreement for cost-sharing the Family Health program costs, and that this discussion will be brought to the THEC in the future. Cheryl added that such a unique program is often scrutinized in health authority budget decisions, but IH is committed to continuing to support the program. Discussion followed about financial contributions to the program.

Mark opened discussion regarding blood lead screening for outlying communities. The recommendation by the Medical Health Office (MHO) was that testing occur every five years. Elected officials from the corresponding jurisdictions had time to consider this recommendation and all are in agreement (based on email correspondence with Ruth Beck).

MOTION: that the THEPA Document incorporate the MHO recommendations to test the blood lead levels of children from outlying communities (Warfield, Oasis, Casino and Waneta) every 5 years. Mark Tinholt moved; Brad McCandlish seconded. Carried.

Jeannine added that she will now send out letters to the families that participated in the fall with an update about testing every 5 years.

Family Health:

IH Update – Jeannine Stefani; report attached

Jeannine presented the Interior Health update. There is one new Case Management (CM) family, and 2 children from the fall clinic continue to have CM levels. Jeannine summarized her Healthy Family (HF) visits. Jeannine has found that cold calls are difficult when booking new families for a visit; people are unaware of the program without some form of introduction. As such, Jeannine has started giving blankets when visiting newborns and during baby clinics. This promotes 'tummy time' and opens the door to the Healthy Family Healthy Home (HFHH) program. Other Public Health Nurses (PHNs) are also handing out blankets to new parents and it's helping with introducing the program. Jeannine has also asked PHNs to join in on some HF visits: one nurse has come so far and two more are scheduled.

Fall clinic preparation has begun. Jeannine is compiling the invitee list and looking at dates for the clinics (sometime between Sept 15 and Oct 3). Jeannine noted that "Ready, Set, Learn" on May 23 in Glenmerry should be added to the list of educational opportunities/community engagement activities undertaken.

Jeannine also presented the Family Action Network (FAN) update. The Regional Capacity Building Coordinator has been hired: Christy Anderson.

Jeannine noted the invitation to the FAN Advisory Group meeting, May 29, 10am-12pm. The meeting will include an update on FAN projects and a forum for providing input into development of a "one-stop shop" resource database. This will be an important meeting to attend. Gord added that he would let Dieter know.

Ruth let the Committee know that a letter has been received from Dr. Andrew Larder (see attached). Dr. Rob Parker is replacing Dr. Larder as the Medical Health Officer for environmental health issues related to Teck Trail. Dr. Larder has also been participating on the WARP Steering committee and will need to be replaced.

Air Quality:

Air Quality Technical Working Group Update – Ron Joseph; report attached

Ron Joseph presented the Air Quality Technical Working Group (AQTWG) minutes. Mark spoke to how we might examine lead dust issues related to furnaces and air conditioners. He noted that the Canada Mortgage and Housing Corporation (CMHC) studied air conditioners and found that houses using them had less dust. The AQTWG will be looking at finding an expert and discussing if they could develop a study design to test the various questions. There was a discussion regarding acid mist from the Electrolytic and Melting facility (zinc electrolysis). The available ambient data for the acid mist meets community standards, but the wind direction and vegetation may need further study.

Teck Update – Mark Tinholt; report attached

The Teck Air Quality report was presented by Mark. He noted that he will simplify the presentation going forward now that the AQTWG is active. Gord requested a public-friendly presentation.

Home & Garden:

Community Program Office Report – Cindy Hall and Andrea McCormick; report attached

Cindy Hall and Andrea McCormick provided the Home and Garden update. Cindy pointed out that the community is becoming more aware of the Healthy Families Healthy Homes program and noted that there have been 23 requests for enrolment that arose from word of mouth. Cindy also noted two corrections to the H&G Report: (a) 78 families are currently on the Healthy Homes scheduling list (some from last year

plus new additions, and (b) The 90% participation rate is actually lower when you include families that have either 'declined' or are 'silent', meaning we have tried to contact them 3 times without success. (Note: rate to be calculated and presented at the next meeting. Also, those that moved out of the program area aren't included in the calculation). Andrea provided an update on soil sampling and remediation. Discussion followed regarding the new Upper Cap Concentration (UCC) of 4000 ppm for lead in soil. **ACTION:** Andrea to amend her graph to show in a different colour the properties being remediated that were sampled in previous years to distinguish them from those assessed this year. Andrea noted 12 yards sampled previously (with results below the previous UCC of 5000 ppm) that have lead concentrations that exceed the new UCC. Some families have declined remediation in the past, but we're re-offering it to every property over 4000ppm lead. Gord asked if there is a correlation between high blood lead levels in children and high lead in soil. Andrea replied that there isn't a direct relationship and Mark added that there is a correlation between low blood lead and good groundcover.

Andrea presented updated figures for Home Renovation Support Program (HRSP) requests. She noted that she attended a lead-safe renovators' workshop in Spokane organized by a Washington State Contractor Association in order to support contractors to comply with US EPA practices for lead abatement. The learnings from that workshop will help THEP to expand the HRSP to engage contractors. She added that the monitoring of a roof renovation in Trail last year didn't find a lot of outdoor lead spread during the project. The dust had the same level of lead content (~10,000 ppm) that we typically see in Trail area dustfall. This is a higher level than what we typically see in soil but the contractor put tarps on the yard to contain dust and debris from getting into the soil. Dust wipe sampling showed lead stirred up during the roof renovation stayed low in the home.

Cindy presented on community outreach and engagement. She attended a Community Mapping workshop that aims to map where services and supports are to address substance abuse. This is a good resource for Cindy. Cindy noted that Ready Set Learn is May 23, and the Teddy Bear Picnic is hosted by Success by 6. The Community Program Office has a draw for a 100\$ Gift Certificate to Home Hardware and will draw the winner on June 1st.

Program Planning & Operations:

Program Manager's Report – Ruth Beck; report attached

Ruth reviewed the Spring 2014 Newsletter and the poster for the Putting Children and Families First events, June 10 and 11.

Ruth presented a draft FAQ (not for distribution yet) to respond to questions about health risks for pregnant women and newborn babies. The gist is that there is no risk as long as pregnant women avoid atypical exposures such as from home renovations, dust generated from lead paint, and other atypical exposures. This FAQ will be looked at by the MHO before distributing; the draft is open to comments and questions from THEC.

Discussion took place about calcium bonding with lead and being released into the blood when a bone breaks. Jeannine added that lead can mimic calcium, which is why you want a child to have good consumption of calcium. Gord pointed out that the word "virtually", in the draft FAQ is ambiguous and unhelpful. Ruth noted Gord's point and stated that the MHO will review the FAQ and approve all wording.

Dawn Tomlin and Steve Como requested copies of the THEPA Document (Liz to provide).

MOTION to adjourn. Ron Joseph moved; Mark Tinholt seconded. Carried.
Meeting adjourned 9:05pm

Trail Area Health and Environment Committee

Interior Health Report

May 13, 2014

1. February clinic results

- One new case management family (CM), home visit done
- Two children from fall clinic remain at CM levels, repeated home visits done

2. Healthy Family (HF) visits

- 25 done in 2014
- 14 done since last meeting
- 9 more booked, 9 moved, 3 declined
- 62 remain on list, 21 of those have had at least one attempted contact.
- Offering other Trail office Public Health Nurses (PHN) to join me on a Healthy Family visit and PHNs are also helping to distribute the Healthy Family blankets at baby visit and baby clinics. This is so they have a better understanding of the Healthy Family /Healthy Home program when they communicate with families that I haven't met yet.

3. Fall Clinic Prep

- 209 children presently on incomplete list to be invited to Fall blood lead clinic
- Still reviewing data sources to ensure list complete as possible.
- In process of finalizing clinic dates

4. Community Education

- Attending the following with the Home and Garden Program
 - o Beaver Valley Adventure Picnic June 9th
 - o Prenatal Class June 12th
 - o Teddy Bear Picnic June 26th
 - o Expectant Parent Event date to be confirmed

5. Continuing Education

- Attending "Putting Children and Families First" Public Forum June 10th



Interior Health

May 6, 2014

Mayor Dieter Bogs, Chair
Trail Area Health and Environment Committee
1394 Pine Avenue
Trail, BC V1R 4E6

Dear Mayor Bogs,

Re: Medical Health Officer Support

Just a brief note to confirm that my colleague Dr. Rob Parker (rob.parker@interiorhealth.ca; (250) 868-7832) will be replacing me as the lead for all environmental health issues related to Teck Trail Operations.

This change is effective immediately and is due to a reassignment of responsibilities within the Medical Health Officer team.

I have greatly enjoyed working with the Committee and I look forward to watching your continued success in protecting and improving the health of the residents of Trail.

Yours sincerely,

Dr. Andrew Larder, FRCPC
Senior Medical Health Officer

AL/lis

c: Cheryl Whittleton, CIHS Administrator, Kootenay Boundary
Dr. Rob Parker, Medical Health Officer

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Senior Medical Health Officer
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Trail Area Health & Environment Committee Air Quality Technical Working Group MINUTES



Meeting: Monday, April 28, 2014

In Attendance:

Mark Tinholt, Teck, Secretary
Ron Joseph, Community Rep, Chair
Brad McCandlish, BC MoE (via phone)
Graham Kenyon, Community Rep
Gord DeRosa, City of Trail
Bill Jankola, Teck
Richard Deane, Teck
Suzanne Belanger, Teck
Angelique Rosenthal, Teck

Regrets:

Dieter Bogs, City of Trail

MEETING MINUTES:

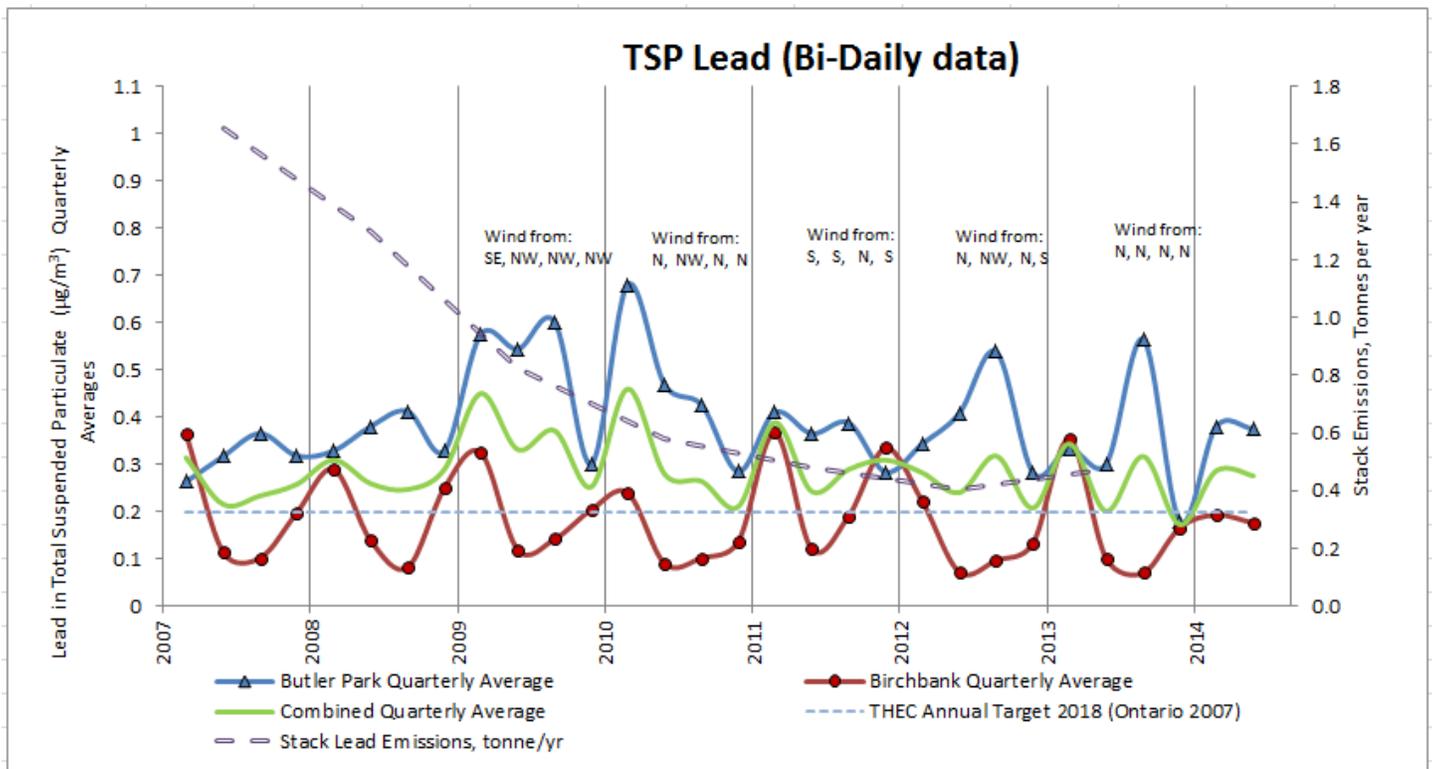
1. Topics included (largely a repeat of the Feb 3 agenda since most could not make that meeting):
 - o Annual Dustfall data review
 - o Household furnace intakes/filters
 - o Fugitive Dust Reduction Program update
 - Air Quality Section of THEP
 - SFU Fugitive Dust calculations
 - Project Update
 - o E&M acid mist studies update
2. Household furnace discussion points:
 - o Discussed questions regarding the role of furnace/air filters in home air quality; also identified that air conditioners circulate a lot of air in the summer and may be a more important factor to consider.
 - o Recommendation:
 - Collect air conditioner and furnace model/ air filter data during HFHH (e.g. what type of heating and air conditioners are in the home, are filters in place, how often changed), then could examine correlation of air filter issues with case management situations.
 - Consider an air conditioner and furnace study – this would first require a proper study design. Identified first step is to have a HVAC expert do a presentation on the types/mechanics of household furnaces and air filters.
3. Fugitive Dust update:
 - o Discussed concern that the “plan-do-check” model outlined in the THEP document does not fit with a schedule for sufficient projects to be implemented by 2018. Teck to revisit the language in the THEP document.
4. E&M update:
 - o Available data reviewed, Teck planning some additional sampling
 - o A sulphide-like odour was reported to be coming from a highway sewer manhole located between E&M and the overpass. Teck to follow-up
 - o General discussion of procedures during SO₂ excursions; Teck proposes that a FAQ be prepared.
5. Next meeting: to be scheduled Q2 2014

Trail Health & Environment Committee – Teck Report May 13, 2014

Air Quality Program

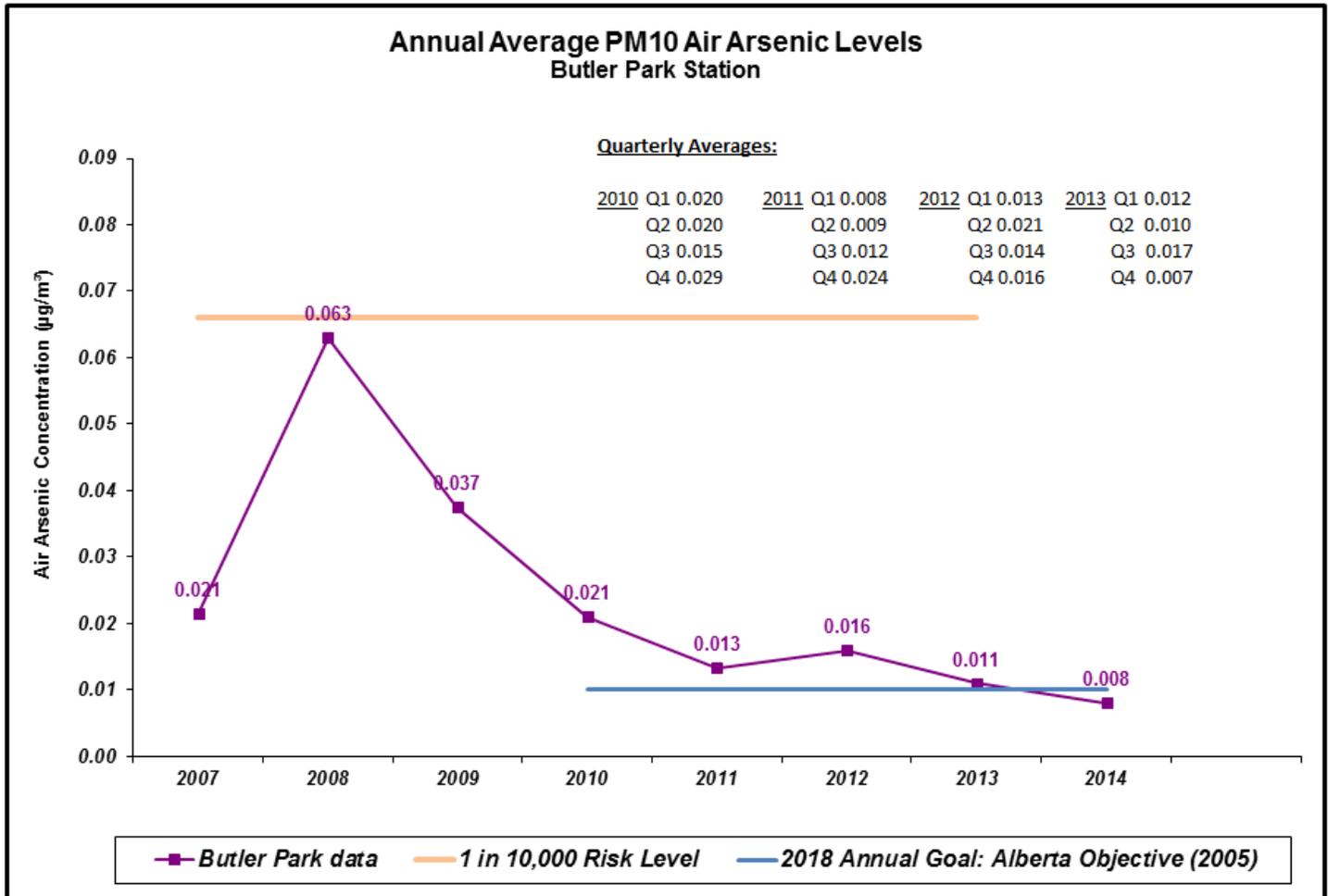
Lead – Total Suspended Particulate:

- The first graph shows ambient (community) levels for the Butler Park and Birchbank monitoring stations based on quarterly averages of Bi-Daily data (rather than NAPS -6 day- data), measured stack emissions (annual basis), as well as predominant wind direction (quarterly, as measured at Maintenance Services Building). More detailed data (e.g. box-plots) are reviewed at the Air Quality Technical Working Group meetings.
- The most recent averages for April 2014 were 0.375 $\mu\text{g}/\text{m}^3$ for Butler Park and 0.175 $\mu\text{g}/\text{m}^3$ for Birchbank, similar to the first quarter of 2014.
- Quarterly averages for Lead in ambient air at Butler Park continue to follow a typical seasonal trend, with varying influences of predominant wind. The combined average is generally consistent with previous years, with some seasonal variation.
- Both real-time XACT monitors (one at Butler Park and the second at Duncan, located north of Metallurgical Operations) are operational.
- Measured stack emissions have continued to be less than 0.5 tonnes/year. The discrepancy in trends between stack emissions and measured TSP in air is believed to be sourced from fugitive dust.
- Trail smelter's releases of lead to air are still amongst lowest in industry.



Arsenic- PM10:

- Arsenic in ambient (community) air had returned to pre-2004 levels in 2011. Improvements appear to be the results of actions taken at the Continuous Drossing Furnace and Refinery Scrubber Stack.
- 2013 yearly average was 0.011 $\mu\text{g}/\text{m}^3$, similar to previous 2 years. The average for 2014 year to date is 0.008 $\mu\text{g}/\text{m}^3$.
- Trail smelter's releases of arsenic to air are amongst lowest in industry.



Trail Area Health & Environment Committee
Home & Garden Program Update
May 13th, 2014

Since last report, the H&G Team has started the soil assessment, remediation and yard improvement programs for 2014. Healthy Home visits have continued to be offered to qualifying families. The Community Program Office has noticed an increase in interest in the Healthy Families Healthy Homes Program from families who have heard of the Program through word-of-mouth and have requested enrolment (23 new requests since Jan. 1 2014).

1. Healthy Homes Program

a. Update on in-home visits (*as of May 3rd*):

- i. **28** visits since last report (*incl. 7 Case Management families*) for a total of **35** families who have received a visit as of January 1st.
- ii. **14** families scheduled for a visit in the coming weeks
- iii. **79** families currently on the Healthy Homes scheduling list

Note: 90% participation rate - 4 families declined a HH visit, 6 have moved out of the Program Area, and 7 are "silent" (no response after three attempts to contact).

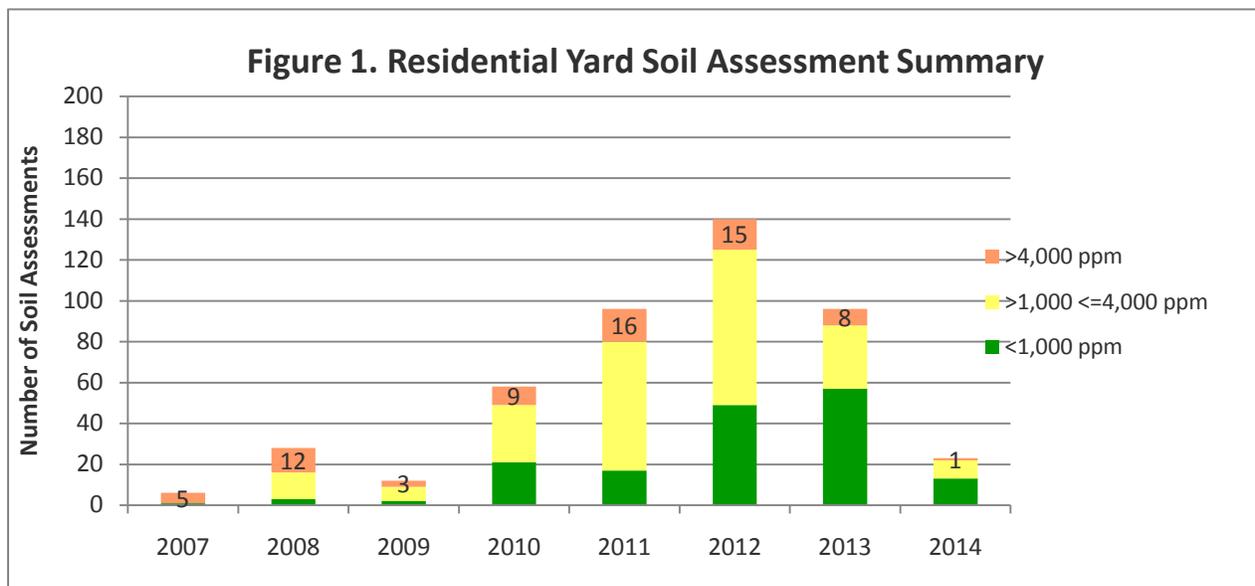
b. Supports provided to families as of January 1st and up to April 30th:

- i. 33 Dust-buster kits
- ii. 14 Garden kits
- iii. 10 Sandboxes
- iv. 58 Vacuums

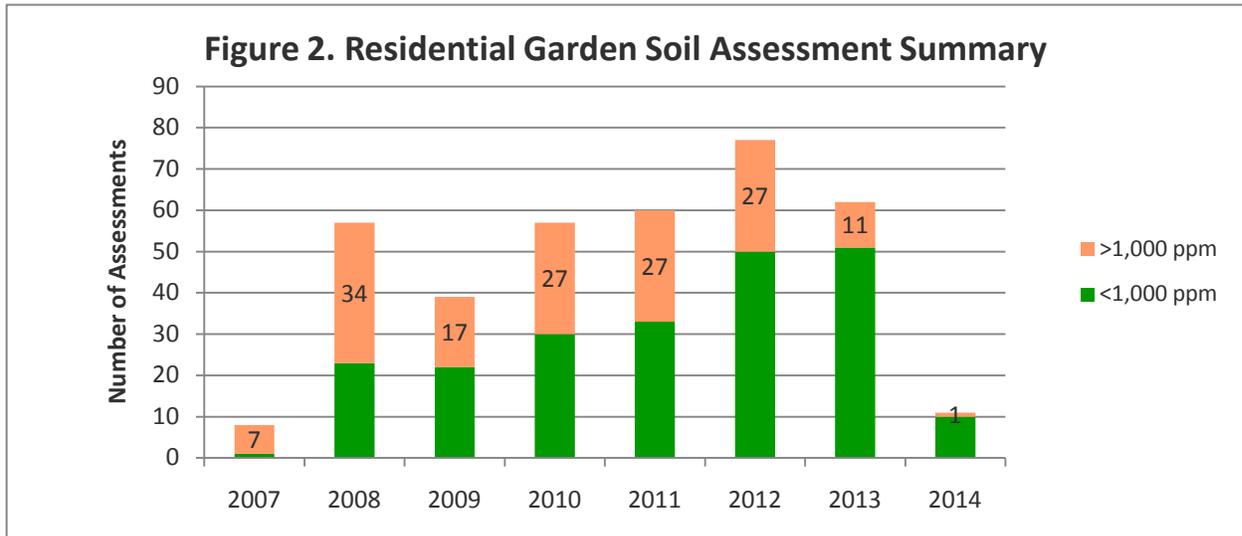
2. Soil Programs – up to April 30, 2014

a. Yard soil assessment completed at **40** properties

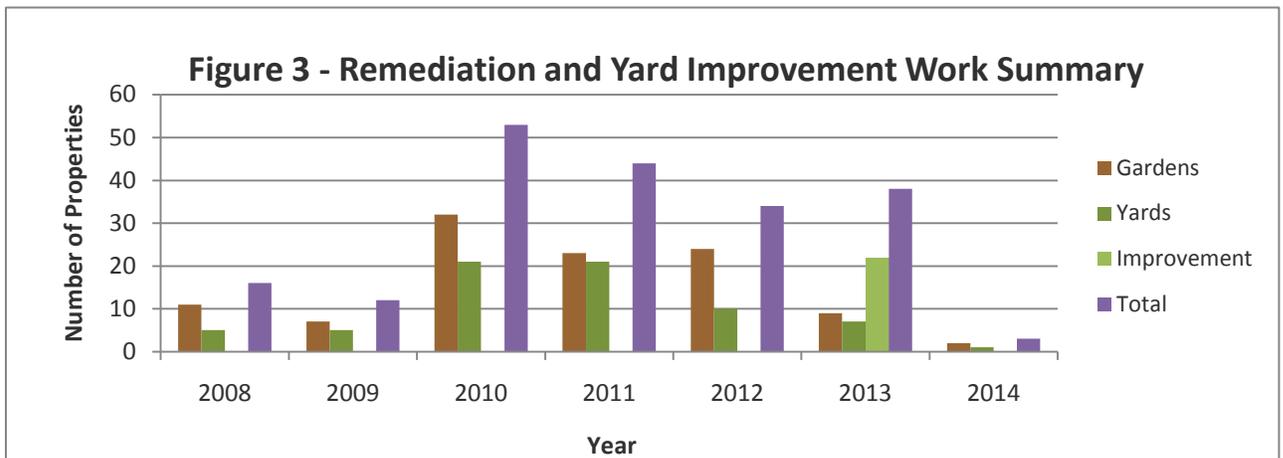
- i. **37** yard assessments were part of the Healthy Homes Program (HH)
 - 4 HH soil assessment requests in the queue
- ii. **3** yards have been completed through community assessment
 - 70 community assessment requests from 2013/2014 are in the queue
- iii. Results for 23 properties shown below, with 17 results pending. To date, 1 is > 4,000 ppm lead, the trigger for remediation.



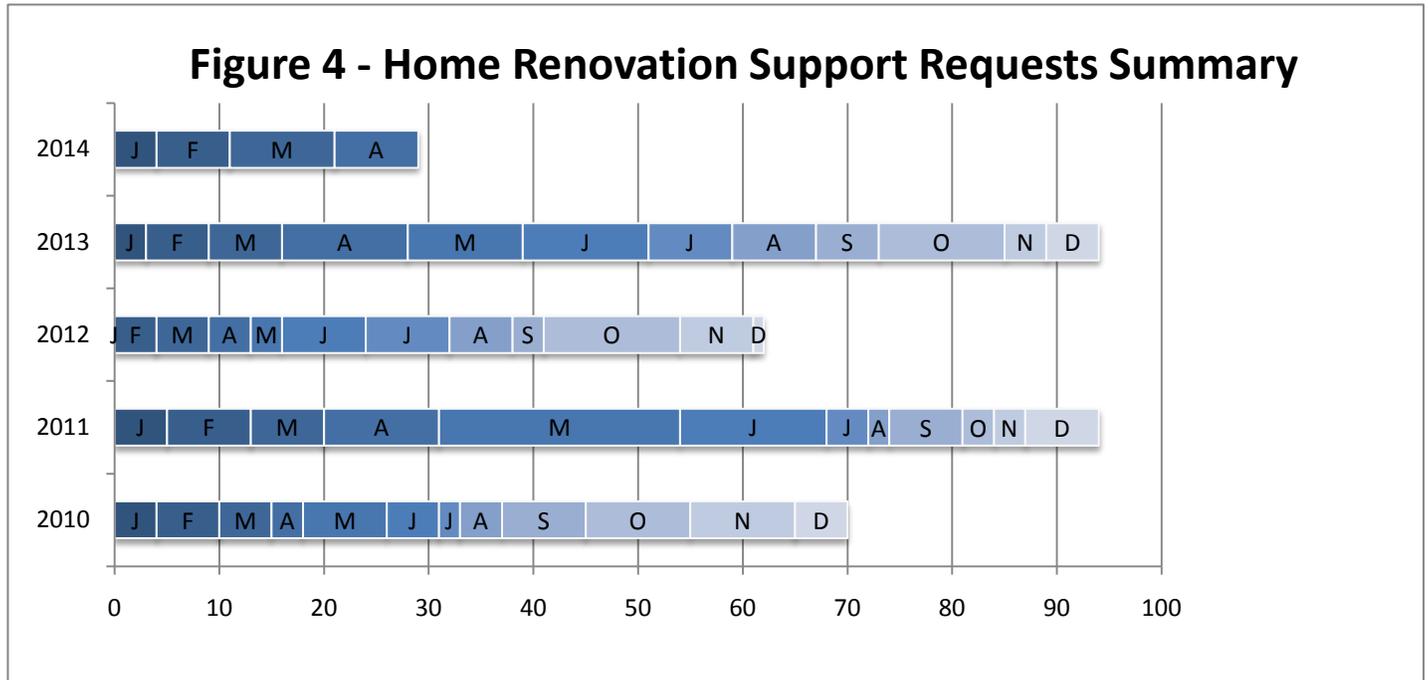
- b. **26** Vegetable garden assessments completed (11 independent of yards)
 - To date: 1 is > 1,000 ppm and waiting for results for 15 gardens
 - There are no outstanding garden assessment requests in the queue



- c. Remediation and Yard Improvement Work
 - i. Work started on April 25th, 2014
 - Yard Improvement for Healthy Homes families:
 - a. 14 properties have yard improvement work planned
 - b. 13 properties require evaluation to determine if improvement is recommended
 - Yard remediation is now being offered to properties with soil > 4,000 ppm lead
 - a. 1 full yard remediation is in progress
 - b. 12 properties will be offered remediation
 - Garden Remediation
 - a. 2 are in progress
 - b. 5 scheduled for completion by the end of May



3. Home Renovation Support and Radon kits
 - a. Total HRSP requests (March and April): 18 requests, 3 of those were re-orders (plus 12 enquiries)
 - b. Radon kits – 2 kits given out



Further to the Home Reno Support Program report, Andrea McCormick attended a US Environmental Protection Agency Lead Safe Certification Program for building contractors in Spokane Washington this past March. The eight-hour training was hosted by the Northwest Independent Contractors Association and covered a range of topics that apply to the EPA’s “Renovate Right” program and lead-safe work practices. The training session provided useful information in terms of THEP developing a program for building contractors here in Trail.

4. Community Outreach and Engagement
 - a. Community Program Office Public Contact Summary
 - i. March : Total **55**: 44 walk-ins and 11 phone calls
 - ii. April: Total **81**: 53 walk-ins and 28 phone calls
 - b. Engagement Activities
 - i. Attended: May 6th - Community Mapping Workshop – hosted by the Trail Area Creating Caring Communities Committee
 - ii. Hosted:
 - May 10th - Home & Garden Days Open House at the Community Program Office as part of Trail Silver City Days
 - iii. Upcoming:
 - May 24th – Home & Garden Day, on location all day at both Trail Home Hardware and Columbia Valley Greenhouse
 - June 12th – HFHH presentation with Jeannine (IH) to a prenatal group
 - June 23rd - Ready Set Learn, Glenmerry Elementary School
 - June 25th - Teddy Bear Picnic at Gyro Park, hosted by Child Care Resource and Referral (CCRR)

THEP Program Manager's Report May 13, 2014

1. Program Agreement

One of my continuing priorities over the past year has been the THEP Agreement. Working closely with Ruth Hull and Mark Tinholt, I have been participating in discussions about how best to incorporate the input that we've received.

2. Second phase literature review

Plans for the "on-site visit" events of June 10 and 11 are well under way. We have developed a poster for the public events; it is available electronically and in hard copy to be distributed by e-mail and by hand. The program for the events is as follows:

- Event 1 – Tuesday, June 10 afternoon – by invitation. This event goes from 12:45 to 4:30 and is divided into two parts:
 - Part 1a: Discussion of the literature review and selection of key points for the Executive Summary – Open to THEP Lit Review Reviewers Group only.
 - Part 1b: Discussion of the literature related to family in-home visiting - Additional participants are Trail FAIR, MCF and IH professionals who conduct family in-home visits.
- Event 2 – June 10 evening – At the public forum, Joanne Schroeder from the Human Early Learning Partnership at UBC will give a presentation on 'how our children are faring' and the importance of the early years of life. She will comment on the Early Development Instrument (EDI) results, the Child Poverty Report Card and Census data and will also provide the provincial and national context. The public forum includes time for public input through a facilitated small group process.
- Event 3 – June 11, morning – This includes a debrief of the public input received and learnings to date from events 1 and 2 as well as determining some action plans. This discussion may be supported by the literature review and specifically the section on community collaboration to promote children's healthy development.

3. Communications

Over the past couple of months, we've reordered a large proportion of our educational print materials for this year, developed the Spring Newsletter and started to develop a fun educational handout (may be more like playing cards) for families with the main message "summer is the most important time to keep dust down". The summer communications piece includes 6 key messages related to keeping the dust down in the home and yard as well as the importance of washing hands and eating healthy regular meals. Some of our Healthy Families Health Homes families are sending us great photos of their kids using our sandboxes, doidy cups etc. We're using these wherever we can in our newsletter and other communications. We hope to get more family photos in future where the family is enthusiastic about it: we always obtain signed photo consent forms.

We've also booked the same radio ads on EZ Rock this year. They will air from May 19 to September 21 basically the same as last year. There are 6 ads with different educational messages. Each airs for a three week period. We're making a couple of small changes to the scripts: (1) to update the name of the THEC by adding "Area", and (2) for the ads running in July and August we're inserting a new key message that "summer is the most important time to keep dust down". The EZ Rock contract includes \$300 of web ads, which pays for 9100 "impressions", ie. view of the ad that shows up on the top banner or the RHS "big box" on the EZ Rock home page when that site gets a hit. We have 5 web ads based on our five

Health Tips posters and running over the same time period as the radio ads. We're updating the wording this year to make sure it all fits with our approved messaging.

4. Teck Emerging Leaders Program (ELP) Conversation

On May 8, Cindy, Andrea, Graham, Dieter and I met with a group of 10 emerging leaders from Teck Resources' Emerging Leaders Program (worldwide). We had wide-ranging discussions and answered questions on such topics as the successes of the THEC, how it got started, how we engage the community, the involvement of parents in the THEC, what issues and concerns our families mention during the in-home visits, and what we see for the future including what we would think of as "success" in future. This was the 4th cohort of the Emerging Leaders Program. Steve Hilts participated in the ELP several years ago.

5. FAQ for the THEC

At the last meeting, the THEC raised a question about the blood lead levels of pregnant women and newborns. We have developed a draft FAQ for the THEC to respond to this question.