27 January 2017

To: Secretariat
Health Committee
Parliament House

Wellington

SUBMISSION OF THE CHRISTCHURCH CITY COUNCIL ON THE HEALTH (FLUORIDATION OF DRINKING WATER) AMENDMENT BILL

Introduction

- 1) The Christchurch City Council (**the Council**) thanks the Committee for the opportunity to make this submission. This submission was approved by the full Council at its meeting on 26 January 2017.
- 2) The Council wishes to appear in support of its submission, and will be represented by Mayor Lianne Dalziel.
- 3) The Council invites the Select Committee to Christchurch to hear submissions from the Council and other Christchurch residents, and would be happy to assist with facilities for that purpose.
- 4) The Council's key submissions on this Bill are:
 - i) It opposes the Bill and submits that the local authority must continue as the decision-maker because there is a requirement under the Local Government Act 2002 (LGA) for Councils to consider community views before making such a decision.
 - ii) If the Bill is to be enacted with a new decision-maker that can direct the Council to fluoridate drinking water, then central government must fully fund both the costs of the initial fluoridation and the ongoing operational costs (i.e. if District Health Boards (DHBs) are given power to make the decision, as proposed in the Bill, the costs would be covered by central government, not the DHB).

Background

- 5) The Council is a territorial authority and drinking water supplier responsible for 55 water supply pump stations in Christchurch (around 155 wells) plus six water supply schemes on Banks Peninsula.
- 6) The Christchurch urban area is exceptionally fortunate in having access to highquality groundwater from aquifers beneath the District, predominantly in the Christchurch urban area. Currently consumers served by the public water supplies within the Christchurch district are provided with high quality groundwater that requires no further treatment, affording them some of the best water in the world¹.

¹ Christchurch groundwater has very low natural levels of fluoride; generally less than 0.1 mg/litre. There is not currently any fluoridation of public water supplies in Christchurch. The former Waimairi County

- 7) The water sourced from the Christchurch-West Melton aquifer system requires no treatment as it already falls below the thresholds for microbial, chemical and radiological contaminants set out in the Drinking-water Standards New Zealand.
- 8) While the Christchurch public have not been consulted directly to understand their views on fluoridation of the city's water supply they have in previous years been consulted on their attitudes towards additives in the water supply. The Christchurch public are well aware of the fact that there are currently no additives in the water supply and many have tasted water in other places were additives such as chlorine and fluoride have been added.
- 9) While the data from the last customer survey is dated it is the best record we have of the attitudes shared by the residents of Christchurch. At the time of that survey regardless of people's attitudes toward water use and conservation, all were in agreement regarding the desire not to have additives in the water. Having 'quality' water with no chlorine or other additives was one of the key sources of pride in Christchurch water².
- 10) Council staff have provided a rough estimate of the costs of fluoridating Council's water supplies (there has been not site by site assessment or in depth investigation as yet). They estimate the Council would need around 70 dosing sites, with a likely setup cost of \$80 \$150, 000 per site (plastic tank and dosing pump or, hopper bin and stainless "shaker" auger), which would be a total of \$10.5m.
- 11) The costs to Christchurch to dose the total minimum production of around 50 million cubic metres of water a year, is estimated at about:

120 ton of sodium silico: NZ \$1350 / tonne; or
220 ton of hydroflorosilic: NZ \$950 / tonne

12) The estimated chemical cost would be 160,000 to \$200,000 per year plus operation and maintenance costs of around \$250,000 a year. This means it could be as high as around \$500,000 a year to keep a fluoridated water supply operational.

Submission 1: Consultation provisions are required

- 13) Any decisions affecting the Council's water supply will be an important issue both for the Council itself and our communities. There is a great deal of community sensitivity to the issue of fluoridation in particular.
- 14) Section 8 of the Bill requires DHBs to consider scientific evidence on adding fluoride to drinking water, and whether the benefits of adding fluoride to drinking water outweigh the financial costs, taking into account local oral health status, population numbers, and financial cost and savings.

Council, which came within the Council in 1989, used to fluoridate its water but this ceased in September 1986.

² Market Research Report for: Qualitative Investigation Into Attitudes and Perceptions Towards Water and Water Use. - Opinions market Research Ltd

- 15) However, the Bill does not require any consideration of the views of the Council as the drinking water supplier, or any requirement for community consultation. In comparison, under section 78 of the LGA, the Council must give consideration to the views and preferences of persons likely to be affected by, or to have an interest in, the matter. A decision to fluoridate water is likely to be a significant decision under the LGA, which means greater effort is needed to become aware of and consider community views.
- 16) It is important for decision-makers to understand how the community feels on such an issue and to weigh those views alongside other matters relevant to the decision. Involving the community in a decision, through consultation, means the final decision is more likely to be successfully implemented.
- 17) For this reason the Council opposes the Bill and submits that decision-making on the fluoridation of drinking water should remain with the Council.
- 18) If the Council is to make the decision it would also need to consider the matters described in section 8 of the Bill, when considering advantages and disadvantages of different options, through the decision-making requirements in section 77 of the LGA:
 - "(a) seek to identify all reasonably practicable options for the achievement of the objective of a decision; and
 - (b) assess the options in terms of their advantages and disadvantages; and
 - (c) if any of the options identified under paragraph (a) involves a significant decision in relation to land or a body of water, take into account the relationship of Māori and their culture and traditions with their ancestral land, water, sites, waahi tapu, valued flora and fauna, and other taonga."
- 19) The Council submits that if the Bill is to be enacted as proposed then section 8 **must** include a requirement for the decision-maker to consider community views, either by consulting with affected communities prior to making a decision to fluoridate a water supply, or, as a minimum, to inform them and seek comments prior to a decision to fluoridate.
- 20) There should also be a clear duty in the Bill requiring the decision-maker to consult, communicate and work with the affected Council in respect of any proposal considering fluoridation.

Submission 2: Funding

- 21) The Cabinet paper supporting the Bill requires Councils to continue to meet the direct costs of fluoridation for both existing and new schemes. The Bill as drafted does not appear to change that position. If the Bill is enacted to allow another decision-maker to direct the Council to fluoridate some or all of its drinking water then the Council should not be required to fund and implement such a decision.
- 22) If the Council is required to fund another decision-maker's decision to fluoridate drinking water, then that cost will ultimately be met by the Council's ratepayers, without the Council having any control over the decision. This type of expense is

usually planned for, and would be consulted on as part of a council's long term plan (and then subsequent annual plans).

- 23) The Council submits that central government must be responsible for funding the costs associated with a decision to fluoridate the water supply. This is entirely appropriate given the benefits of such a decision will be reduced dental and health costs for the government.
- 24) Making the service provider responsible for the cost, and not the decision-maker, is also inconsistent with a basic principle of public finance: agencies that are responsible for the expenditure of public finance should also be held accountable for that expenditure. Where accountability is unclear, this means there are few incentives on the principal agency to make responsible allocation decisions.
- 25) For that reason, Council also submits that if the Bill is to be made, the decision-maker should be the Director General of Health, and not DHBs. As the Regulatory Impact Statement on the Bill states:
 - "The boards of DHBs would face the same scrutiny that territorial authorities have experienced at election time, and the election of anti-fluoride advocates could lead to a stalemate or a reversal of fluoridation in some areas. Secondly, DHB decision-making would not rule out a series of locally-fought campaigns over fluoridation".
- 26) However, Council's submission that central government must fully fund both the costs of the initial fluoridation and the ongoing operational costs, remains the same even if it is to be the DHBs that are given power to make the decision.
- 27) Council notes that while the Government formerly provided funding assistance for water fluoridation through the Sanitary Works Subsidy Scheme, that scheme has now closed. Although the Ministry of Health website indicates some funding may be available to assist with the set-up costs of fluoridating local drinking-water supplies there are a number of 'rules' around this possible funding, and it appears it would not be available to larger councils such as Christchurch.

Minor submission

28) Finally, a minor submission which should also be considered, irrespective of the decision-maker: the proposed deletion of s69O(3)(c) by the Bill does not appear to mean something must be included in the standards about fluoride being added to drinking water before a direction can be made under new s69ZJA. It would be helpful if this was clarified.

Conclusion

- 29) The Council emphasises the points of difference for Christchurch and its water supply, as set out in paragraphs 5, 6 and 7 of this submission, as well as the significant costs to fluoridate the drinking water supply discussed in paragraphs 10-12.
- 30) The Council opposes the Bill because the decision-maker proposed in the Bill is not required to consult with the community on a decision to fluoridate drinking water. The legislation should remain unaltered with local authorities continuing

as the decision-maker because there is a requirement in the LGA for community views to be considered.

- 31) If the Council is the decision-maker it is also required to consider all reasonably practicable options. This is not a requirement made of the decision-maker under the Bill.
- 32) If the Bill is to be made then section 8 of the Bill must include a requirement to consider community views, and to consult with the affected Council.
- 33) If there is to be a new decision-maker able to direct the Council to fluoridate drinking water, then central government must fully fund the costs of both the initial fluoridation and the ongoing operational costs.
- 34) If you would like to discuss any points raised in this submission, or any additional information, please contact Judith Cheyne (Senior Solicitor, Legal Services Unit, phone 03 941-8649, email: judith.cheyne@ccc.govt.nz) or John Mackie (Head of Three Waters and Waste, phone 03 941 6548, email: john.mackie@ccc.govt.nz).

Yours faithfully

Lianne Dalziel

Mayor

CHRISTCHURCH CITY COUNCIL