CITY COUNCIL MEETING MINUTES COUNCIL CHAMBER, CITY HALL 701 E. BROADWAY, COLUMBIA, MISSOURI NOVEMBER 4, 2013

INTRODUCTORY

The City Council of the City of Columbia, Missouri met for a regular meeting at 7:00 p.m. on Monday, November 4, 2013, in the Council Chamber of the City of Columbia, Missouri. The Pledge of Allegiance was recited, and the roll was taken with the following results: Council Members SKALA, THOMAS, NAUSER, HOPPE, MCDAVID, SCHMIDT and TRAPP were present. The City Manager, City Counselor, City Clerk and various Department Heads were also present.

APPROVAL OF THE MINUTES

The minutes of the regular meeting of October 21, 2013 were approved unanimously by voice vote on a motion by Ms. Nauser and a second by Mr. Skala.

APPROVAL AND ADJUSTMENT OF AGENDA INCLUDING CONSENT AGENDA

The agenda, including the consent agenda, was approved unanimously by voice vote on a motion by Mr. Skala and a second by Ms. Nauser.

SPECIAL ITEMS

None.

APPOINTMENTS TO BOARDS AND COMMISSIONS

None.

SCHEDULED PUBLIC COMMENT

<u>Dan Viets – Amending City marijuana ordinances.</u>

Dan Viets explained he was speaking on behalf of the Missouri Civil Liberties Association and explained the Association recently voted to request the Council to consider amending Columbia's marijuana ordinances to expand coverage to include the cultivation of a few plants for personal use. In 2004, 61 percent of Columbia voters had indicated marijuana laws should be the lowest enforcement priority for the community, and he believed those laws had worked well as they had saved the eligibility of federal student aid for education for many. He commented that the attitude of the American public had evolved considerably since 2004, and noted a Gallop poll recently indicated 58 percent of Americans of voting age felt it was time to tax and regulate cannabis as was done with alcohol. The Association was requesting something similar to what the voters in Colorado had recently approved, and that was for the cultivation of up to six plants. This had been in effect for about six months in Colorado, and he was not aware of any instance of any alleged problem that had resulted from it. He pointed out they were not asking Council to legalize anything. They only wanted the Council to bring the prosecution of such offenses under City ordinances. He believed this had the potential to reduce the violence associated with the money involved with the black market trade of cannabis. He pointed out the City would not be setting a precedent by changing these laws, and referred to Chillicothe, Missouri, as they had a similar ordinance. Their ordinance was not limited to six plants and likely had harsher penalties than what they were recommending for Columbia, but his point was that there was precedent for cities in Missouri to cover this type of activity under city ordinance. He asked for those in the audience that were in support of the Missouri Civil Liberties Association's proposal to stand, and approximately 25 people stood.

<u>Kate Shannon – Need for Clark Lane sidewalks.</u>

Kate Shannon explained the approximately 20 people standing in the aisle behind her were residents of the Clark Lane area and other Columbians that supported sidewalks along Clark Lane. They were opposed to the proposed plan of asphalt extensions for Clark Lane, and had over 1,000 signatures in favor of sidewalks and against the asphalt extensions. She was shocked with the proposed solution of narrowing the lanes by one foot on each side and adding asphalt extensions as she did not feel that was a solution as it provided a false sense of security for those that walked along Clark Lane. She commented that she had never seen a set up such as the one the City was proposing for Clark Lane whereby pedestrians were permitted and expected to take up space on the shoulder of the road. She believed it was confusing and unsafe. She was concerned about motorists who might not be cautious, pedestrians that might not realize how close they were to the road, and children who were not paying attention. She wondered if the Council would put their children in the same danger as they were putting the residents who used Clark Lane. She understood Clark Lane was not designed with neighborhoods, apartment complexes and golf courses in mind, but did not feel the City's proposed solution was acceptable. She asked the Council to provide safe, smooth, clearly defined and disabled accessible sidewalks with a buffer between the street and the sidewalk. She reiterated the residents of the area wanted sidewalks and asked the Council to listen to its citizens as they felt the asphalt extensions and the narrowing of the road would only make Clark Lane more dangerous. She provided a handout of her comments.

<u>Troy Balthazor – Need for disabled to have sidewalks on Clark Lane.</u>

Troy Balthazor, 3615 Chatham, stated he was representing the Mid-Missouri Advocacy Coalition and the Coalition was in support of safe and well constructed pedestrian facilities on Clark Lane, immediately east of Highway 63. They understood the City had committed to providing pedestrian facilities in the Clark Lane area in 2014. They supported the development of sidewalks and/or pedways that were consistent with the City's model street standards, and felt engineers and planners could develop and execute plans for sidewalks that could be integrated with future development. They questioned why a sidewalk or pedway could not be provided in the area to maximize safety and meet City standards. They understood an issue was gaining easements or other access for the land required for the project, but did not know why that would not be included in the commitment to move up the development of pedestrian facilities. Their desire was for a separate and safe pedestrian facility to be built in 2014, but the City's plan was to expand the asphalt surface to provide a non-separated path of travel. If that approach was taken, they asked the City and others involved to look very hard for ways to create the safest conditions possible. He wondered if a

temporary barrier was being considered, if the speed limit would be reduced, whether signage would be incorporated, etc. The Coalition thanked Mr. Thomas for his efforts to clearly identify the reasons the separate and compliant pedestrian facilities could not be accomplished, and respected the efforts of Mr. Skala and others that had made an effort toward finding a solution to the problem for the past several years. He did not believe any other area in the City required as much pedestrian facility attention as the Clark Lane corridor. He pointed out the Disabilities Commission had identified improvements for a safe pedestrian route at Clark Lane as their top priority in terms pedestrian routes and street developments.

<u>Benton Berigan – Amending City marijuana ordinances.</u>

Benton Berigan stated he was the President of the NORMAL Chapter of the University of Missouri-Columbia and asked that the Council amend the City's marijuana ordinance to include cultivation. He believed this would allow patients that fell under the medical marijuana ordinance to legally obtain marijuana for their own personal use and would eliminate the criminal gateway effect. He explained the theory of the gateway effect suggested marijuana led to the use of harder of drugs, but there was no evidence to support a relationship between marijuana usage and the use of hard drugs. With regard to a criminal gateway effect, he felt that because marijuana had to be purchased through the black market and drug dealers, people became desensitized to the law and were exposed to harmful drugs. He noted an extensive study, which had been conducted by the World Health Organization within seventeen different countries in 2010, had evaluated the patterns of drug use and the initiation of drug use. The degree of drug exposure had more of an impact and was a powerful predictor of harder drug use than marijuana usage alone. He believed amending the marijuana ordinance to include cultivation would close this gateway.

PUBLIC HEARINGS

B314-13 <u>Authorizing an upgrade of the railroad active warning device at the Columbia Terminal Railroad's (COLT) intersection with North Browns Station Road; calling for bids through the Purchasing Division; appropriating funds; authorizing a supplemental agreement for highway/rail crossing signal improvements with the Missouri Highways and Transportation Commission.</u>

The bill was given second reading by the Clerk.

Mr. Johnsen provided a staff report.

Mr. Skala understood the City would not pay anything as they would be reimbursed. Mr. Johnsen stated that was correct. He explained the City would bid the construction work and pay for the cost of the construction, but would be reimbursed by MoDOT.

Mr. Thomas understood the money would originally be taken from the water and light fund reserve, and asked how long it would take from the time the money was appropriated from that account to the time it was reimbursed by MoDOT. Mr. Johnsen replied it would be reimbursed upon completion, so he anticipated reimbursement by the beginning of next summer. Mr. Thomas asked if the City had a policy with respect to the use of the water and light fund reserve. Mr. Johnsen replied it was typically for any water and light operational need. He explained the railroad operated as a separate fund, and it was fairly common for

the reserve fund to loan money to railroad fund for reimbursement since the railroad fund did not have a large fund balance.

Mayor McDavid opened the public hearing.

There being no comment, Mayor McDavid closed the public hearing.

Mr. Skala did not believe there was any exposure or risk to the City and noted he would support this.

B314-13 was given third reading with the vote recorded as follows: VOTING YES: SKALA, THOMAS, NAUSER, HOPPE, MCDAVID, SCHMIDT, TRAPP. VOTING NO: NO ONE. Bill declared enacted, reading as follows:

B315-13 <u>Authorizing construction of repairs to the Hinkson Creek Trail bridge in Capen Park; calling for bids through the Purchasing Division; appropriating funds; authorizing a recreational trails program project agreement with the State of Missouri, Department of Natural Resources.</u>

The bill was given second reading by the Clerk.

Mr. Griggs provided a staff report.

Ms. Hoppe noted the staff report indicated \$100,000 would come from the park sales tax fund, but only \$67,000 would really be coming from that fund. Mr. Griggs stated that was correct. He explained the project had originally been estimated to cost \$200,000, but they now only expected it to cost \$167,000, and the grant would pay for part of the cost so they only anticipated using \$67,000 of the park sales tax fund.

Mr. Thomas understood there would be a signed detour while the bridge was out of commission, and asked if they had determined the route of the detour. Mr. Griggs replied it was not easy due to Rock Quarry Road. They planned to do this work during the winter months and would work with the Public Works Department to develop signage and alternate routing.

Mr. Skala pointed out there was a typo in Section 6 of the ordinance in that a zero was missing from \$100,000 and suggested that be corrected.

Mayor McDavid opened the public hearing.

There being no comment, Mayor McDavid closed the public hearing.

Mayor McDavid commented that this was part of a 1.5 mile stretch from the Grindstone Nature Area that crossed the Hinkson Creek four times and the Grindstone Creek once, and was a spectacularly beautiful stretch. He was glad to see this bridge would be repaired.

Ms. Hoppe agreed it was a beautiful stretch and was glad City staff was aware of the need for the bridge to be repaired so it was safe for those that used it.

Mr. Skala stated he was appreciative of the emphasis of City staff on maintenance.

B315-13 was given third reading with the vote recorded as follows: VOTING YES: SKALA, THOMAS, NAUSER, HOPPE, MCDAVID, SCHMIDT, TRAPP. VOTING NO: NO ONE. Bill declared enacted, reading as follows:

R228-13 Adopting a Citizen Participation Plan in connection with development of the 2015-2019 Consolidated Plan for prioritization and expenditure of HUD entitlement grant funds.

The resolution was read by the Clerk.

Mr. Teddy provided a staff report.

Mayor McDavid opened the public hearing.

There being no comment, Mayor McDavid closed the public hearing.

The vote on R228-13 was recorded as follows: VOTING YES: SKALA, THOMAS, NAUSER, HOPPE, MCDAVID, SCHMIDT, TRAPP. VOTING NO: NO ONE. Resolution declared adopted, reading as follows:

OLD BUSINESS

B310-13 <u>Authorizing Amendment No. 1 to the air service agreement with American Airlines, Inc.</u>

The bill was given second reading by the Clerk.

Mr. Matthes provided a staff report.

Mr. Thomas understood the staff report indicated another \$500,000 would need to be put into the contingency fund. Mr. Matthes explained one year would be added to the current arrangement for the one flight. They had three flights for two years and this would add a flight and carry it for a second year, so this meant they would go from a \$3 million guarantee to a \$500,000 guarantee for the added year. Mr. Thomas understood the City would not have to find that \$500,000 and physically transfer it to the escrow account. Mr. Matthes stated that was correct as it was already in the account.

Mr. Skala understood the initial \$23,000 had been paid by the interest of the fund. Mr. Matthes explained the benefit of this arrangement was that real dollars had been provided instead of pledged dollars, and the City had invested the money, which had more than paid for the original \$23,000.

Mr. Skala asked if the stipulated incentives had changed from the current arrangement in terms of landing fees, etc. Mr. Matthes replied the City would continue to waive landing fees throughout the term of this amendment. Mr. Skala understood it was just an extension. Mr. Matthes stated that was correct. They applied the same deal to the new flight. He pointed out they were actually able to guarantee the new flight for a lower amount as well.

Mayor McDavid understood this had a three month bi-party termination without cause should anything unforeseen occur. Mr. Matthes stated that was correct.

Mayor McDavid commented that their previous partner had not been highly committed to this area and was excited to know the City's market projections had proven to be accurate in terms of demand at the Columbia Regional Airport. He felt this flight through Chicago would be popular because this was how people would get to the east and northeast from Columbia because it would allow people to leave in the morning and get back in the evening. He pointed out a stipulation in the contract was that the City would pay more if aviation fuel was higher than \$3.30 per gallon, and it was currently at about \$2.80 per gallon. He understood that was pro-rated, which meant the City was guaranteeing a \$100 ticket to Chicago and a \$125 ticket to Dallas. He noted the airline was charging more, but thought this additional supply would bring down that cost, which was great news for the Mid-Missouri area.

Mr. Skala stated it was nice to see this kind of public-private partnership work and the capacity being driven by interest because it meant they were filling seats.

Mayor McDavid pointed out this was an agreement between Columbia, the University of Missouri, Boone County, Jefferson City, Cole County and a group of investors from the private sector, so it was truly a multi-party and multi-jurisdictional effort.

Mr. Skala made a motion to amend B310-13 per the amendment sheet. The motion was seconded by Ms. Nauser and approved unanimously by voice vote.

B310-13, as amended, was given third reading with the vote recorded as follows: VOTING YES: SKALA, THOMAS, NAUSER, HOPPE, MCDAVID, SCHMIDT, TRAPP. VOTING NO: NO ONE. Bill declared enacted, reading as follows:

CONSENT AGENDA

The following bills were given second reading and the resolutions were read by the Clerk.

- B301-13 Approving the C-P Development Plan of Lot 2 Katy Place Heights located on the southeast corner of Forum Boulevard and Forum Katy Parkway.
- B302-13 Rezoning property located on the south side of Southland Drive and west of Rock Quarry Road from A-1 to R-1.
- Approving the Final Plat of Southland Plat 1 located on the south side of Southland Drive and west of Rock Quarry Road; authorizing a performance contract; granting a variance from the Subdivision Regulations relating to sidewalk construction.
- Approving the Final Plat of The Villas at Old Hawthorne Plat 8, a Replat of a portion of Lot 5 of Old Hawthorne Plat 1, located on the east side of Diamond Creek Lane and south of Old Hawthorne Drive East; authorizing a performance contract.
- B305-13 Approving the Final Plat of West Lawn Plat 4 located at the termini of Leland Ridge Road and Tiernan Drive; authorizing a performance contract.
- B306-13 Approving the Final Plat of Sutter Industrial, Plat 3, a Replat of Lot 1A of Sutter Industrial, Plat 2, located on the northeast corner of Paris Road and Waco Road.
- B307-13 <u>Vacating a sewer easement on Lot 102 within The Village at Wyndham Ridge, Plat No. 1-A, located on the east side of Scott Boulevard and south of Thornbrook Terrace.</u>
- B308-13 Vacating a utility easement on Lot 17 and Lot 18 within Arbor Falls Plat
 No. 3, located on the south side of Euliss Drive and approximately 600
 feet south of Pergola Drive.
- B309-13 <u>Authorizing an STP-Urban Program agreement with the Missouri Highways and Transportation Commission for the Keene Street pavement improvement project from I-70 Drive Southeast to East Broadway; appropriating funds.</u>
- B311-13 <u>Authorizing an intergovernmental cooperation agreement with The Curators of the University of Missouri for integrated shuttle bus service on campus.</u>
- B312-13 Authorizing an airport aid agreement with the Missouri Highways and Transportation Commission for aircraft rescue and firefighting training assistance at the Columbia Regional Airport.

- B313-13 <u>Accepting certain streets for public use and maintenance.</u>
- Accepting a grant from the State of Missouri, Department of Natural Resources for the design and printing of trails system maps and guides and the installation of trail mile markers along the MKT Trail, Scott's Branch Trail, Hominy Creek Trail, Bear Creek Trail, Hinkson Creek Trail, County House Branch Trail and future Grindstone Trail; authorizing a recreational trails program project agreement; appropriating funds.
- B317-13 Renaming the Old 63 Roadside Park to the Sterling W. Wyatt Park.
- B318-13 <u>Authorizing a contract with the Missouri Department of Transportation Traffic and Highway Safety Division for a DWI enforcement unit; appropriating funds.</u>
- B319-13 Authorizing a contract with the Missouri Department of Transportation Traffic and Highway Safety Division for occupant protection safety checkpoints relating to seat belt and child restraint violations; appropriating funds.
- B320-13 Authorizing a contract with the Missouri Department of Transportation Traffic and Highway Safety Division for DWI enforcement relating to sobriety checkpoints and saturation patrols; appropriating funds.
- B321-13 <u>Authorizing a contract with the Missouri Department of Transportation Traffic and Highway Safety Division to conduct special traffic enforcement of hazardous moving violations; appropriating funds.</u>
- Authorizing a subrecipient monitoring agreement with Boone County,

 Missouri relating to acceptance of the FY 2013 Justice Assistance Grant

 (JAG) Program Award to purchase equipment for the Police Department;

 appropriating funds.
- Authorizing a program services contract with the Missouri Department of Health and Senior Services for the Healthy Families America program; appropriating funds; amending the FY 2014 Annual Budget and Classification Plan to add a social services specialist position in the Public Health and Human Services Department Human Services Division.
- R221-13

 Setting a public hearing: construction of a sidewalk on the east side of Ashland Road, between Stadium Boulevard and East Campus Loop Drive, and a raised island and signals at the intersection of Ashland Road and Stadium Boulevard.
- R222-13 Setting a public hearing: proposed policy relating to the repair, maintenance and restoration of brick paved streets in the City of Columbia.
- R223-13

 Authorizing the temporary closure of a sidewalk along a portion of the south side of Walnut Street, between Short Street and College Avenue, to allow for the construction of a new apartment building.
- Authorizing an agreement for professional engineering services with Structure Consulting Group, LLC to analyze the City's energy management needs and prepare technical specifications for the future acquisition of an Energy Management System.
- R225-13 Approving the Preliminary Plat of Discovery Park Subdivision located west of the U.S. Highway 63 and Discovery Parkway interchange; granting a variance to the Subdivision Regulations (Case No. 13-182).

R226-13 <u>Approving amendments to the City of Columbia, Missouri Strategic Plan – 2012-2015.</u>

The bills were given third reading and the resolutions were read with the vote recorded as follows: VOTING YES: SKALA, THOMAS, NAUSER, HOPPE, MCDAVID, SCHMIDT, TRAPP. VOTING NO: NO ONE. Bills declared enacted and resolutions declared adopted, reading as follows:

NEW BUSINESS

R227-13 <u>Discontinuing the addition of fluoridating agents to adjust the fluoride</u> concentration in the water processed at the City of Columbia water treatment plant.

The resolution was read by the Clerk.

Mr. Matthes and Ms. Browning provided a staff report.

Paul Reed stated he retired as a dentist in 1991, but prior to then he was in charge of the Bureau of Dental Health for the State Health Department, and during his tenure, they would assist communities in fluoridating their water systems. He pointed out individuals had to have five supporting upper teeth and five supporting lower teeth in order to qualify during World War II, and there were a significant number of eighteen year olds that could not meet that requirement, and were therefore unable to enlist. He commented that there were three dental schools in Missouri when he attended dental school, but now there was only one. He noted the screenings he conducted on children in the old days were horrible and stated he had been told by a person from the State Department of Education that the main reason children did not show up for school other than for the common cold was due to dental health. He pointed out he began working in 1976, and shortly thereafter, many dentists were going bankrupt due to the lack of work. Dentists had now discovered cosmetic dentistry, which alleviated that issue. He felt discontinuing the fluoridation of water would take a step backwards in terms of the dental health of children.

Tim Coyle, 1600 Birmingham Court, commented that very few people enjoyed going to the dentist to have their teeth drilled or pulled. He explained Dr. Jim Elliot had practiced prior to the water supply being fluoridated, and at a recent Dental Society meeting, he acknowledged the amazing change in the dental health of the kids that came through his office as he had previously seen 3-4 cavities per kid per visit annually. Dr. Coyle noted a lot of kids that came through his office did not have any fillings, which he believed was attributable to the fluoride in the water. He provided some statistics and pointed out over 58,000 visits to the emergency room in the State of Missouri were a result of dental problems. This was 10.3 visits per 1,000. In that same year in Boone County, 1,338 emergency room visits were attributable to dental problems, which was 7.7 visits per 1,000. He thought the ratio in Boone County was less due to fluoride in the water supply. He noted each visit to the emergency room cost about \$300, which equaled about \$400,000 per year in Boone County, and pointed out those problems were not fixed in the emergency room. The patient only received a prescription and was told to go to the dentist. He thought the discontinuation of fluoridating the water supply would create an additional drain on emergency rooms. He commented that there were many dentists in the audience and he would be surprised if very many were in favor of removing fluoride from the water. They all made a living by fixing teeth, but they did not want to fix any more than was necessary.

Tom Coyle explained he had been a practicing dentist since 1974 and pointed out the fluoridating of water had been recognized as a major public health achievement in the twentieth century. He understood Columbia had been doing it for about 40 years, and thought it would be a tragic mistake to stop fluoridating the water supply for children as fluoride was important for developing teeth. He hoped the Council would not make that mistake.

Bethany Baillargeon provided a handout, and explained she was a dentist and the Dental Director of the Community Health Center of Central Missouri. She stated she was representing the Missouri Coalition of Oral Health and noted they strongly encouraged the Council to act to continue fluoridation of the community water supply. The Coalition was a non-profit advocacy organization that represented community stakeholders, medical and dental providers, and policy makers, and its mission was to improve the oral health of all Missourians through sound public policy and public awareness. The Coalition adopted a policy statement in November 2012 strongly supporting community water fluoridation. Fluoridation was the most practical way to prevent dental decay and to reduce the incidents of dental infections associated with other systemic diseases because it had the potential to reach the broadest spectrum of the population. She commented that studies showed fluoridation of public water safely prevented cavities and saved money. The Center for Disease Control and Prevention hailed the fluoridation of drinking water as one of the greatest public health achievements of the twentieth century. She pointed out this nation had over 65 years of experience in safely and effectively reducing tooth decay through community water fluoridation. While the effectiveness of fluoridation in reducing tooth decay had prompted manufacturers to add fluoride to products such as toothpaste, mouth rinse and some bottled waters, its preventative benefits were most cost-effective when delivered to all residents of the community through water fluoridation. The American Dental Association reported the life time cost of fluoridation for an individual to be less than the cost of a single dental filling and the CDC estimated every one dollar invested in this preventive measure yielded approximately \$38 of savings in dental treatment costs. She commented that ending water fluoridation might reduce expenses for the public water system, but would inevitably lead to higher dental costs for community members as individuals and families paid for tooth fillings, extractions and emergency room services. She stated tooth decay, a preventable infectious disease, was the single-most common chronic childhood disease, and fluoridation was the most practical way to prevent tooth decay. She pointed out public water fluoridation did not discriminate as it provided all members of the community with the ability to reduce dental disease. She believed public water fluoridation was the best choice for Columbia.

Sujatha Sivaraman explained she was a pediatric dentist that worked at the federally qualified health center of the Family Dental Center with children from Boone County and the surrounding counties. She noted she had been trained in the United States and in India, where there were varied levels of fluoride. She had been exposed to several different kinds of patients with different levels of fluoride and had not really seen any hazardous effect of fluoride on those patients, which included children. She pointed out she had practiced in

three different states and mainly treated the underserved populations. She stated she strongly believed in water fluoridation and felt decreasing the fluoride levels in the water would increase the burden of oral disease.

Virginia Dooley, 3711 Lansing Avenue, stated she had been in dentistry for 36 years and her father, who had practiced prior to her, started his career just after World War II, and his career was closely linked to original testing, discovery and approval of fluoride in the United States. She thought it made sense to use a cost-effective and safe level of fluoride in the drinking water as it was difficult to titrate levels of fluoride when providing moms and kids supplements. Although she was in favor of personal freedom, she believed the fluoridation of the water supply was necessary for the benefit of the community based on many years of study. She pointed out there was not a "good old boy" system in the dental community. Studies were harshly reviewed so the scientific community could rely on the studies. She believed the effects of water fluoridation also helped the adult population as adults showed more root structure as they aged and the root surface of the tooth was very susceptible to decay. She referred to a study conducted by the University of North Carolina and the University of Adele in Australia, which showed the benefit of fluoride for adults. She stated she was in full support of fluoridating the water supply.

Michael Murrah, 2600 Forum Boulevard, stated he had been a dentist in Columbia for the past 17 years and had practiced for a total of 40 years. He noted he agreed with all of the comments made thus far and pointed out he had worked in non-fluoridated communities in the past where he had seen kids with 20 teeth come in with 20 cavities. He commented that the health, bright smiles, and bright and healthy futures of Columbia children were in the hands of the Council, and asked that they be informed prior to making a decision.

Steven Westgate, 2004 Katy Lane, provided a handout, and commented that at the last Council Meeting, he felt the integrity and credibility of the Board of Health had been publicly disparaged in terms of the qualifications of its members without any facts on which to base such an allegation. In addition, the Chair of the Board of Health had been grilled in a hostile manner. He felt these acts made citizens wary of continuing service to the community and believed an apology was in order. He wondered who had the expertise if the Board of Health was not qualified to review the issue of fluoridation. He referred to the handout he provided, which was a partial list of national organizations recommending fluoridation. He stated the anti-fluoridation group was aggressive and wanted to argue in a public forum, and believed the City Council was unqualified to judge the scientific merits of their case. He suggested the Council allow the current process to stand. The Council had sent the issue to the Board of Health, and the Board of Health had met for several months and had lively and open debates. The anti-fluoridation group had their say in an open forum and the Board of Health voted to recommend continuing fluoridation of the water. He felt a vote against fluoridation would make people less likely to serve on City boards in the future and would be contrary to the recommendation of some impressive national advisory groups. He also felt a vote against fluoridation would set a dangerous precedent where any outspoken or aggressive group could come to Council on any number of issues, such as allowing unpasteurized milk, voting against specific food and restaurant safety rules, etc. He asked the Council not to send this to a community vote as it would damage the process.

addition, the only benefit would be that the Council was not responsible for the decision made. He asked the Council to not damage the system of City governance through its volunteers, expert opinions and City boards with an intemperate decision to appease a vocal group of dissenters as their voices had been heard in the appropriate forum. They could proceed to the next proper form for their dissent, which was to put this on a City election by petition.

Kyna Byerly, 1305 Woodhill Road, commented that she was not a dentist or physician, but was a mom of three children. She explained she lived on a farm for a long period of her life and drank well water, and had cavities in almost every tooth in her mouth. She hated going to the dentist and detested the painful procedures she had to go through. She did not want her children to have to go through the same pain and wanted them to be cavity free, which they had been thus far. She asked the Council to keep fluoride in the water and stated all of the moms and families she had spoken with supported the continuation of fluoride in the water supply as well.

Kyle Lisenby stated he was a dentist practicing in Columbia and resided in the Fifth Ward. He understood a question at the previous meeting involved what would happen if water fluoridation was discontinued. He noted dental decay could be expected to increase over time if community water fluoridation was discontinued. He did not believe topical products in varnishes and polishes were enough to overcome the challenge. He referred to a United States study of 6-7 year old children in the Journal of Public Health, which indicated children who had resided in an optimally fluoridated community and moved to a nonfluoridated community in Michigan had shown an increase of 11 percent in decayed, missing and filled tooth surfaces over a three year period. He referred to another study out of Antigo, Wisconsin, which fluoridated its water from June 1949 through 1960, and the study followed children over a 5 ½ year period after ceasing water fluoridation. The second grade children had a 200 percent increase in decay over those of the same age in 1960, the fourth graders had a 70 percent increase in decay over those of the same age in 1960 and the sixth graders had a 91 percent increase in decay over those of the same age in 1960. As a result, the residents of Antigo started water fluoridation in October 1965 due to the deterioration of public health in the community.

Ms. Hoppe asked for the dates of those studies. Dr. Lisenby replied the first study he referred to was dated 1989 and the second one was in 1970.

Matthew Harden stated he was a dentist practicing in Columbia and resided in the Second Ward. He believed fluoride was a safe and effective tool for reducing tooth decay. He noted he had a six month old daughter and wanted her water fluoridated as well. He commented that he was in support of keeping fluoride in the water.

Ellen Thomas, 2616 Hillshire Drive, commented that she was pediatrician with Tiger Pediatrics, which was the largest group of pediatricians in private practice in Columbia, and they had not seen any of the purported problems with goiter that supposedly should happen at the levels of fluoridation they had. She noted dental health affected other aspects of health, and provided the example of dental decay in pregnant women leading to premature delivery as prematurity was a problem for the premature child. They saw children with abscesses waiting to get into the dentist, and while there were many wonderful dentists in

Columbia, there was a big problem in terms of access to dental care for children in the community. She commented that her children were born in England, which did not have fluoridated water, and giving children fluoride drops was a pain because it was difficult to determine fluoride levels and the amount that needed to be provided to the child on a daily basis. She believed this would least likely be done for the children most at risk because of chaos in their caregivers' private lives. Fluoride in the water was cheap, effective and non-discriminatory as it affected everyone.

Judith Miles commented that she was a pediatrician that had been practicing in Columbia for 35 years and was a researcher with a PhD in genetics and biochemistry. She stated she was active in research and her grants were supported by the National Institute of Health and many other organizations. She explained she also reviewed scientific papers for numerous journals. Due to her background, she felt she had an advantage in being able to understand the statistics and knowing good science versus quasi-science. She believed the Board of Health had submitted an excellent and complete report, and pointed to the recommendations of many organizations, to include the American Academy of Pediatrics, the CDC, NIH, etc. She felt the Council should take the advice of those experts as they understood the science and could review the statistics to ensure they made sense and should not listen to a small group of people that did not have the science behind them. She noted she supported the continuation of fluoridating the water supply.

Kristin Sohl, 4800 Newcastle Drive, stated she was a pediatrician and an autism specialist at the Thompson Center, which meant she cared for kids with special health care needs on a daily basis. She pointed out fluoride affected everyone that drank water within the City limits, and this meant children without access to dental care were able to be protected due to the fluoride in the water. She noted some children could not go to the dentist due to behavioral issues or could not handle being outside of their comfort zone due to autism, but they were still protected since the City put fluoride in the water supply. She commented that dental carries was still a major issue even with this protection as she saw children with dental carries on a daily basis. She did not want the City to take a step backwards in terms of public health in order to appease a few groups who might not understand the science or have a full picture of the socio-economic issues in the community. She was in favor of personal freedom, but pointed out children were not able to make the decision for themselves in terms of fluoride, and many families who struggled to buy food were not going to purchase toothpaste. Fluoridating the water supply was simple and costeffective and the evidence showed it was safe. She noted dentists were paid to fill cavities, but they were here in support of fluoride to help Council understand its importance.

Sally Beth Lyon explained she was a member of the Board of Health and the Chief Academic Officer for the Columbia Public Schools, and affirmed her vote in support of the recommendation of the Board of Health for the City to continue water fluoridation. She believed the Board of Health had been transparent, inclusive and thorough in its investigation of the questions before it as they had considered all points of view and had exhaustively studied the science and opinion on all sides of the issue. She felt they had decided based on fact over hyperbole even as all voices were considered. She understood a targeted approach, such as the application for dental varnish for individual children through a school

program, had been suggested as a substitute for water fluoridation. She provided data from a similar program as it suggested such an alternative would not reach the children most at risk. Through a partnership with the Department of Health and Human Services, the University of Missouri and the Lichtenstein Foundation, the Columbia Public Schools were able to offer free influenza vaccination to pre-kindergarten through eighth grade children at the schools, and for the past two years, the rate of vaccination in the high poverty schools had been 30 percent and averaged 43 percent in the more affluent schools. For one reason or another, the children whose families struggle with the stress of poverty were less likely to be immunized. She believed water fluoridation had a positive impact on all children's dental health and should be continued.

Haley Matoza, 2405 Lubbock Court, stated she was a third year biology major at the University of Missouri-Columbia with an interest in public policy. She explained the American Public Health Association policy on community water fluoridation indicated several reviews had considered its ethics and had concluded it was ethical in part because it led to the reduction in health inequalities and ill-health, particularly in vulnerable groups. In addition, it provided an economic benefit to society and individuals. Since populations did not remain static with people moving to and from areas, it was not feasible to receive individual consent. The most appropriate way of deciding whether fluoride should be added to the water supply was to rely on democratic decision-making procedures informing those empowered by the public to make such health decisions, which in Columbia was the City Council. She asked the Council to keep Columbia's water optimally fluoridated as it was good public health policy.

Fred Christman explained he was a dentist with offices at 9 West Boulevard North and believed the City currently had an excellent system in terms of fluoride in the water supply as it kept teeth healthy and strong. The underprivileged drank the same water as those that were more privileged. He reiterated he thought Columbia had a good system and that it should be kept intact.

Lori Henderson stated she practiced pediatric dentistry at 2800 Forum Boulevard. She explained the Council had asked the Board of Health to investigate the City's water fluoridation program last fall and after five hours of testimony and extensive literature review, the Board of Health voted to recommend the continued use of hydrofluorosilicic acid (HFSA) to adjust the levels of fluoride in the drinking water to 0.7 parts per million, which was considered optimal for the prevention of tooth decay. She pointed out that scientific evidence confirmed fluoride from natural ground water sources was not better or safer than optimally fluoridated water and noted approved fluoride additives tended to disassociate quickly, completely releasing fluoride ion into the drinking water. Columbia water contained and was closely monitored at 0.7 parts per million fluoride ion. She commented that water systems were regulated to assure public safety and representatives of the Department of Natural Resources helped to develop the 2012 recommended standard for waterworks, which Ms. Nauser had correctly referred to as the 10 State Standard at the previous meeting. In order to assure the quality of the products used to adjust fluoride levels, those products had to be NSF 60 Standard certified. She requested and received the certificates for Mosaic, the City's

current HFSA vendor, from the Water and Light Department, so she believed the City was in compliance with the standards expected for the water system to be safe.

Elizabeth Hussey, 655 N. Route O, Rocheport, explained she was the veterinary member of the Columbia Board of Health, which meant she was not an expert in the world of water fluoridation, but felt the question of whether water fluoridation was a public good had been answered in the affirmative as she did not presume to contradict the Center for Disease Control.

Victoria Bradford, 1711 Louise Circle, stated she was a third year biology and predental student at the University of Missouri and had become interested in the effort to continue water fluoridation in Columbia. She provided information from the largest U.S. study conducted to determine the cost-effectiveness of various tooth decay prevention strategies for school aged children. The National Preventive Dentistry demonstration program assessed the cost-effectiveness of combinations of school-based dental preventive and dental care procedures, and involved 20,052 first, second and fifth graders from five fluoridated and five non-fluoridated communities. These children were examined at baseline and assigned to one of six treatment regimens. Four years later, 9,566 members of the group were examined again, and the analyses of their dental examination data showed dental health lessons, brushing and flossing, fluoride tablets and mouth rinsing, and professionally applied topical fluorides were not effective in reducing a substantial amount of dental decay even when the procedures were used together. Children who were especially susceptible to decay did not benefit appreciably more than any of the preventive measures than did children in general. She commented that the annual per capita costs were \$23.00 for sealant or fluoride gel applications and \$3.29 for fluoride mouth rinsing. Communal water fluoridation was reaffirmed as the most cost-effective means of reducing tooth decay in children.

Daniel Redmond, 2301 Silverleaf Court, explained he was against water fluoridation because he did not want it and pointed out the Council had voted against a Board of Health recommendation previously. He stated there were quite a few epidemiological studies, and the largest one, done in Kingston and Newberry, determined there was no statistical difference. He noted 98 percent of Europe and most of the rest of the world did not fluoridate, and they had a similar decline in dental carries. He described how hydrofluorosilicic acid (HFSA) was produced, and explained most of it came from North Africa where phosphate ore was mined. It was then processed into a superphosphate fertilizer by various manufacturers around the world. He understood a wet scrubber system grabbed and cleaned the different items in the smoke from the smokestacks at the phosphate ore plants. Approximately 25 percent of the scrubber was what was sold to municipalities as HFSA and it was debatable as to whether or not it completely disassociated as that was dependent on the biological pH. The other 75 percent was wastewater and the waste that was kept out of the air from the emissions of the smokestacks. As a result, anything in the ground could be in that product, which included lead, so they were adding small amounts of lead and other items to the water. He commented that he did not believe the standard that had been discussed called for a certificate of analysis. He understood they were supposed to have the list of all of the known or suspected contaminants, and that had not been provided. As a result, he wondered what was being put into the water. He did not believe there would be an issue if it was pharmaceutical grade sodium fluoride, but at this time, they did not know what was in the water supply since the manufacturer and supplier would not respond.

Eugene Elkin, 3406 Rangeline, commented that it had been repeated many times how fluoride would gather in the body and stay for many years. He read from a paper presented by Dr. William Hersey, a University of Missouri professor who was also a former Vice President of EPA Headquarters Union of Scientists and Professionals, which referred to various studies and indicated there was not need to swallow fluoride to experience its effect as the CDC admitted the fluoride effect on dental health was primarily after permanent teeth were in and exposed to fluoride on their surfaces. He noted the recent peer review study from Hartford showed higher exposure to fluoride by children meant lower IQ's. He wondered how many children's IQ's they were willing to sacrifice for a slight hope that fluoridated water prevented some tooth carries.

Mahree Skala, 5201 Gasconade Drive, stated she was a public health consultant and a member of the Board of Health, and wanted to address the question raised at the last meeting as to whether the Board of Health had looked at whether the funds used for community water fluoridation could be more effectively utilized for other approaches to improve oral health. She explained they had reviewed data regarding the cost-effectiveness of water fluoridation and other potential interventions. In addition, they had established a subcommittee to explore what was already being done in Columbia in terms of oral health education and to make recommendations on how to strengthen it. She noted Dr. Henderson had provided the Board of Health information on four alternative interventions, which included a school-based dental sealant program. The average cost of that program nationally was about \$40 per child, so the \$35,000 per year the City spent on water fluoridation would not go very far in implementing it. Another alternative was a preventive dental visit, and the average cost of it was about \$224 per child. She pointed out the average cost of treatment for a child with carries was \$500, which was equivalent to 70 children if they spent only \$35,000. The fourth alternative reviewed was a tooth paste voucher program, which would cost about \$10 per person per year, and could reach about 3,500 people. She noted community fluoridation reached over 100,000 people and they could not find evidence that providing toothpaste alone would be an effective intervention. She explained the Task Force on Community Preventive Services recommended only two community based oral health interventions as proven to being effective, and those were community water fluoridation and school based dental sealants. They recommended both as both attacked the problem in different ways. She noted sealants would only help with certain permanent teeth in children of a certain age as they did not help pre-school children or adults. In addition, sealants were not a substitute for community water fluoridation. They were an adjunct to community water fluoridation.

Amy Bremer, 2301 Silverleaf Court, stated Dr. Malaker, who was on the Board of Health and a Medicaid dentist, saw a large cross section of socio-economic classes in Columbia and had voted to end water fluoridation because he believed the main issue in whether a child had cavities or not was whether they brushed their teeth. She noted many of the dentists that had spoken had indicated there was still a large problem in Columbia with

cavities, so she wondered how well fluoridation of the water supply was working if they still had this problem. She was concerned about not knowing the full list of contaminants in the hydrofluorosilicic acid (HFSA) used to fluoridate the water supply. She explained she had contacted the supplier as a consumer, but had not been provided the information. She commented that soda, beer, etc. when purchased at the grocery store was labeled, and felt she had the right to the same information for her drinking water. She noted Dr. Henderson had indicated previously that the City was tightly controlling the optimal amount of fluoride, but the data she received from the water plant for a two week period around this time last year indicated it varied as much as 30 percent. As a result, anyone with a known health condition trying to control their intake of fluoride would have to call the water plant every couple of hours to know the amount of fluoride in the water in order to control dosage. She pointed out the Oral Health Division of the CDC consisted of about 30 people, so reference to the CDC supporting water fluoridation did not include that many people. In addition, the scientists in the EPA were against fluoridation, and only the bureaucrats were in favor of it. She noted many of these agencies had been wrong in the past and provided lead in paint and gasoline, asbestos, ibuprofen dosages, BPA, etc. as examples. She stated the citizens of Wichita and Portland had voted to not fluoridate their water supplies.

Paul Modesitt, 2200 Powell Drive, commented that the use of and improvements to toothpaste and toothbrushes was the reason for the reduction in cavities. comments had been made regarding people without money and the effect of not having fluoride in the water for their children, and felt those people should not have as many children or learn to be more responsible. He did not believe his health should be compromised for that reason. He explained he became interested in this issue because he was having some health problems and had been better since not drinking fluoridated water. He felt they received more than enough fluoride from toothpaste and the naturally occurring fluoride in the drinking water. He drank a lot of water, and would likely receive more than the federal limit due to the City fluoridating its water supply. He wondered how much was too much, and believed the public was receiving too much fluoride. He commented that if the public school saw children with bad teeth, it should be addressed, and noted he was not opposed to public health funds going toward fixing children's teeth. He stated he felt brushing one's teeth was sufficient if done properly. He pointed out the fluoride recommendations pertained to topical methods, and not ingestion. Ingestion was causing too many things to go into his bones and body.

Kevin Gamble, 326 Crown Point, stated none of the health professionals had been able to provide actual data on the efficacy of fluoride in Columbia, Missouri. There were many variables to include base levels of fluoride currently in the water. In addition, there was no effort to isolate the effect of fluoride from all of the other variables in terms of nutrition, access to dental health care, etc. and how that had changed over time. He believed those items had an equal or more significant impact on dental health than the small amount of fluoride added to the base line amount in the water supply. He commented that none of the health professionals had the qualifications or the right to diagnose or treat individuals they had not seen, and the water fluoridation program essentially prescribed a medical treatment without examination, proper diagnosis and oversight by a medical professional. He

wondered if this was an appropriate way to practice medicine. He stated there was no analogous situation to fluoridation as it was currently practiced. The most commonly cited analogy was the vaccination program, but that was an opt in program and overseen by individual medical professionals dealing with individual patients analyzed for risk factors, potential side effects, etc. He thought they should question the application of such a mandatory, non-opt in program. He noted his family had only ingested non-fluoridated water for the past four years, and all of them had perfectly healthy teeth. He did not believe fluoride was a critical component of dental health. It could supplement dental health when given in a medically appropriate way and context, but the mass fluoridation of water was not necessary.

Corbin Marchack, 2550 Winding Trail, stated he had been a dentist in Central Missouri since 2005 and noted he treated a large population of Medicaid, underserved and special needs patients. He felt he and his family were health conscious people that ate a lot of organic food, and explained he was comfortable with his family drinking fluoridated water. He had looked at a lot of studies and information trying to determine if there was something he had missed, and trying to decide which studies were good and which ones were bad was difficult. He felt this controversy was based upon a conspiracy theory, and wondered what the incentive was for dentists if that was the case. He noted he was also the father of a special needs child who already received several medications on a daily basis. Having to give him another pill or drop or worrying about cavities, etc. on top of the medical issues he already had was a concern to him. He commented that he believed this impacted more than children as it impacted adults in a positive manner as well.

Lynelle Phillips, 2004 Katy Lane, stated she was the nursing member of the Board of Health and had 25 years of experience in public health. She described how the Board of Health had dealt with reviewing all of the epidemiological studies that had been provided to them during this process. She explained the most accepted process for systematically reviewing epidemiological studies that alleged a cause and effect association was known as Hills criteria, which included strength, temporality, dose response, consistency, biological plausibility, specificity and coherence. Strength involved reviewing the alleged quantifiable risk of a study. She pointed out some of the recent studies from the U.S. and Ireland involving fluoridated water and bone cancer had very low risk ratios, meaning a weak or null association, and was the reason most national experts concluded the association between consuming fluoridated water and bone cancer was not credible or significant to public health. Dose response involved a relationship between exposure dose and disease. The study conducted in China found a potential association between fluoride exposure and decreased IQ in children, but the dose associated with this outcome was over 10 times higher than what they experienced in Columbia. As a result, most experts concluded that study based on dose was irrelevant to Columbia. Consistency involved how well the cause and effect study meshed with previous research. She explained the U.S. Preventative Services Task Force recently compiled over 200 studies that consistently concluded the benefits of fluoridation substantially outweighed the risk, and this led the Board of Health to believe in the credible association of fluoridated water and oral health, particularly for low income populations. As a result of the Hills criteria review, she was confident in her vote to maintain fluoridation of the Columbia water supply.

Ms. Hoppe asked if the Board of Health had reviewed or measured the amount of fluoride the average person in Columbia was consuming at different ages based on all fluoride sources, to include toothpaste, food, drinks, etc. Ms. Phillips replied a typical adult would consume two liters of water per day and a child would consume approximately one liter of water per day, and a dose could be estimated based on those assumptions. She was not sure how much other external oral sources of fluoride would contribute, but noted the U.S. EPA had lowered the recommended level to 0.7 parts per million from 1 part per million due to the external sources of fluoride in society.

Debra Howenstine, 5065 Clearview Road, explained she was a family physician that had worked in Columbia for the past 25 years and had raised two children on the Columbia water supply. She noted she had also served on an Oral Health Task Force in 2009, and the Task Force had looked at oral health problems around the State of Missouri and proposed goals and strategies to address some of the problems identified. She noted it was a 40 member Task Force that had met over five months and an oral health report was a product of the group. She stated one of the strategies that had been identified by the group was to increase the number of people that had fluoridation in their water at adequate levels. The Task Force had looked at a lot of literature and best practices when developing the strategy in terms of effectiveness. She explained they did not spend much time looking at potential hazards, but when she had recently learned members of the community had expressed concerns about the safety of fluoride additives to the water supply, she reviewed the literature and science on that subject. She noted studies for both sides of the issue existed, and as a result, she looked at how well the studies were done. She believed the benefits outweighed the risks when looking at the risks and benefits of fluoridating the water supply, and stated she was in support of continuing the fluoridation of the water supply. provided a handout of a list of 30 physicians in the community that supported the continued fluoridation of water.

Monta Welch, 2808 Greenbriar Drive, stated she was speaking on behalf of the People's Visioning, and pointed out fluoride was once prescribed as a thyroid drug in Europe and was no longer used in that way. She explained most European countries did not fluoridate their water supply. In addition, Israel was discontinuing fluoridation of their water supply as of 2014. She did not believe these countries felt this was an issue for their populations in terms of dental health. She commented that the United States had an obesity epidemic and thyroid drugs could potentially impact obesity. The health professionals that had spoken on the issue had indicated fluoride would possibly benefit the public, but could not be definitive in their statement. She stated her own dentist had indicated diet had a lot to do with oral health in addition to dental maintenance, such as brushing one's teeth. She referred to information she had sent to the Council via e-mail that indicated an improvement in dental health slightly before the fluoridation of the water supply. As a result, she thought it was erroneous to suggest the improvement was solely due to fluoride. She commented that Dr. Hersey, who was the former Vice President of the National EPA Headquarters Union of Scientists and Professionals, had indicated the EPA's risk and cost data showed the fluoridation chemical, hydrofluorosilicic acid (HFSA), contained enough arsenic to cause the broader U.S. society to spend \$1 billion annually in treating lung and bladder cancer caused by the resulting added arsenic in fluoridated drinking water.

Alyce Turner, 1204 Fieldcrest, commented that when she moved from Boone County to the City of Columbia, she was pleased her son would have access to fluoridated water. She noted she was in support of continuing fluoridation in the public water supply. In response to the comments made by the previous speaker in terms of Israel and European countries not fluoridating their water supply, she understood those countries had a different social net and their healthcare system covered their entire population. She felt those countries could make those decisions knowing dental care was more accessible.

Michael Szewczyk stated he was the Chair of the Board of Health and explained the members of the Board had spent the necessary time to investigate the issue. In addition, while they were not PhD scientists, they were qualified to look at the information as the Board included nurses, doctors, veterinarians, etc. He read a 1985 quote from historian, Donald McNeil, who called the fluoride debate America's longest war and had indicated a constant since the 1950's was the widespread and often successful efforts, by a passionate minority to keep fluoride out of the drinking water. Dr. Szewczyk commented that this debate had occurred in thousands of communities over the years, and in some cases the fluoride remained in the water supply, and in other cases it was no longer added to the water supply. He understood a speaker had indicated the hydrofluorosilicic acid (HFSA) had come from the scraping of smokestacks, but he could not find evidence of HFSA being produced in that manner. In most cases, the HFSA was mined directly. He also understood a speaker had indicated there was lead in the water, but the analysis from the Water and Light Department staff showed there was no lead in the HFSA product. He agreed there was lead in the end water, but that was a product of the pipes used. With regard to the effectiveness of fluoride in the water supply in Columbia, he did not believe they would ever have that information unless someone did a study specific to Columbia.

Kenneth Ogawa stated he was a physician and a dentist and noted he practiced at the University of Missouri Student Health Center. He explained he had worked in a variety of setting and listed some other places he had worked. He thought it was important to remember that public health practices like optimum water fluoridation were developed based on best scientific evidence and were intended to provide the most good for a large number of people in a fiscally responsible way. Community water fluoridation was based on overwhelming scientific evidence of effectiveness and safety, and over 65 years of experience. It benefited young and old people, the rich and the poor, and in Columbia it cost less than \$0.50 per person per year. He felt optimal water fluoridation was sound public health policy and should be continued.

Mayor McDavid commented that he grew up pre-fluoride in Desoto, Missouri, and would go to the dentist as boy wondering if he had six or four cavities that year. He also noted there were no local anesthetics. He believed it was nice to raise his kids in Columbia that never had cavities. He stated he would vote against this resolution to discontinue fluoride on the basis of the recommendation of the Board of Health.

Ms. Nauser apologized to Dr. Szewczyk and explained she did not mean to question him so vigorously at the previous meeting, but believed she had the duty, like all citizens, to question everything the government did. She stated she was aware of the certificate of analysis for Mosaic, the manufacturer of the hydrofluorosilicic acid (HFSA) used by the City. She noted she was not a proponent or opponent of fluoride. Her concern was with regard to the due diligence of the provider of the chemical the City put in its water supply. The NSF Standard 60 document had a disclaimer indicating they were not responsible to anyone for the use of or reliance upon their standard. In addition, the American Waterworks Association specifically stated in their fluoride chemical standards that the purchaser could require an affidavit from the manufacturer or supplier that the fluoride chemical provided and the purchaser's documents complied with all applicable requirements of the Standard 60. She had requested this information from Mosaic and had not received anything indicating they were in compliance with the Standard 60, and this was a concern to her. This was different than the certificate of analysis since it would indicate they followed the appropriate standards. She commented that far more people had contacted her indicating they wanted to keep fluoride in the water, and as their duly elected representative, she would honor their wishes by not voting to take fluoride out of the water supply while continuing to ensure the manufacturer was following the appropriate standards.

Ms. Hoppe thanked the Board of Health for their work on this issue as she thought it was good to hold a hearing on this controversial issue. She felt it was evident that drinking fluoride was not something those sensitive to it should do, and that they had options of purchasing non-fluoridated water or filtering water prior to drinking. She stated the majority of the community was in favor of fluoride in the water supply, and thought this could be addressed by the vote of the people if there was a question. She commented that she believed a bigger issue, which she had raised in the past, was the potential pharmaceuticals in the water as there were no regulations at the city, state or federal levels. She referred to Report E from the April 7, 2008 Council Meeting, which was in response to her request, and thought that was an issue that needed to be addressed in the future as it was a bigger issue than fluoride. She noted Dr. Malaker had voted against the recommendation to continue adding fluoride to the water supply and she respected his opinion as his experience had shown that dental carries had more to do with what was consumed in terms of diet and how teeth were brushed than it did with drinking fluoride. As a community, she believed they needed to look at what they could do beyond fluoride to help people address dental problems as there were so many people that could not afford dental care and could only manage the pain through medication. She understood the Board of Health was looking into ways to improve the dental health of the community, and suggested they look beyond fluoride in terms of nutrition. She believed the dialogue regarding fluoride was good as it provided information to the public to decide whether they wanted to consume fluoridated water or nonfluoridated water through filtration or a different source.

Mr. Skala stated he could identify with the comments of Mayor McDavid as he was a pre-fluoride kid with 5-6 cavities as well, and his teeth improved as fluoride was put in the water supply. Although he was not expert on fluoride or some of the toxins mentions, he had a background in comparative psychology with behavioral toxicology and teratology, and as a result, he independently reviewed the studies provided to him. He pointed out there was no certainty in science. It was just a preponderance of the evidence, and the preponderance of

the evidence suggested the studies that were pro-fluoride were constructed much more carefully than the studies that were anti-fluoridate. Metadata was the result of not having data. He commented that he felt he had to rely on the experts from the Board of Health and noted the evidence suggested they were in a better place with the addition of fluoride than they would have been without it. He stated he would support the continuation of using fluoride in the water supply. He pointed out the Board of Health had to decide whether the seven parts per million would be reduced to four parts per million and whether to use the hydrofluorosilicic acid (HFSA) as the best agent, and the Board recommended both the seven parts per million and the use of HFSA.

Mr. Trapp commented that he was a sociologist and believed this was a case of confirmation bias as everyone was apt to believe facts that supported what they already believed and would discount facts that ran counter to those beliefs. He pointed out there was a scientific consensus on this issue, and listed a few of the organizations that supported the fluoridation of the community water supply. He noted these organizations had assessed the data and lowered the amount recommended due to change, and believed the recommended level would continue to be reduced as people continued to improve their oral health and as improvements were made to the medical system. The lack of dental care for those he encountered was appalling. He routinely saw people go to the emergency room for pain medication because there was not a single dentist in Boone County that would accept Medicaid for adults. Those needing free dental care had to drive to Kansas. He understood there were some sliding scale dentists and dentists that would try to work with adult clients, but it was very difficult. Since fluoride at high levels was neurotoxic, he agreed it likely carried some risk for some people at lower levels, but pointed out there was also a great benefit since there were huge costs to the discontinuation of fluoridation as cavities could lead to other health problems, which could then result in death. He felt fluoridation had to be continued if it reduced the potential of cavities. He reiterated the organizations he previously listed would continue to analyze the data, and as people's oral health conditions improved and dental access improved, the fluoride levels would continue to be reduced to the point they discontinued fluoridation of the water supply. He did not believe this was a debate as he did not feel there were two sides to this issue. This was an easy decision. He pointed out he had done his due diligence by reading the e-mails received and reviewing the Chinese studies and the links to the anti-fluoride websites funded by the reverse osmosis filtration industry. He noted the reverse osmosis filtration industry was the only group that benefited from this debate. As a policy maker, he reviewed the facts and would vote against this resolution as he felt they should continue fluoridation of the water supply. He encouraged the public to weigh the evidence or to talk to their dentists as a public referendum on this issue concerned him.

Mr. Thomas stated he agreed there was nothing wrong with questioning cultural norms and thanked the proponents of terminating the fluoridation program for asking legitimate questions. He believed the process in discussing this issue had been good and noted the overwhelming weight of evidence clearly supported the program. He was happy to see the dentists, doctors, public health experts, scientists, etc. getting involved in this public policy debate, and urged them to stay engaged as there were a lot of issues that could

benefit from more scientific public policy advocacy. He stated he would vote against the resolution to terminate the fluoridation program.

The vote on R227-13 was recorded as follows: VOTING YES: NO ONE. VOTING NO: SKALA, THOMAS, NAUSER, HOPPE, MCDAVID, SCHMIDT, TRAPP. Resolution declared defeated.

INTRODUCTION AND FIRST READING

The following bills were introduced by the Mayor unless otherwise indicated, and all were given first reading.

- PR229-13 Adopting a policy relating to the repair, maintenance and restoration of brick paved streets. Adopting the "Neighborhood Traffic Management Program" for calming PR230-13 traffic on residential streets in the City of Columbia. B324-13 Abrogating the Final Plat of Discovery Park Subdivision Plat 1 located west of the U.S. Highway 63 and Discovery Parkway interchange. B325-13 Approving the Final Plat of Discovery Park Subdivision Plat 2-A, a Replat of Discovery Park Subdivision Plat 1, located west of the U.S. Highway 63 and Discovery Parkway interchange; authorizing a performance contract. B326-13 Approving the Final Plat of Westcliff, Plat 3 located on the northwest side of Labrador Drive; authorizing a performance contract. B327-13 Approving the Final Plat of Fox Lair, Plat No. 2 located northwest of <u>Labrador Drive</u>; authorizing a performance contract. Authorizing a contract with Consolidated Public Water Supply District No. B328-13 1 of Boone County, Missouri for replacement of a waterline along Scott Boulevard as part of the Scott Boulevard Phase 2 roadway improvement project.
- B329-13 Appropriating funds for the improvement and rehabilitation of sanitary sewer pipes and manholes in the Bear Creek and Flat Branch Creek watersheds.
- B330-13 Appropriating funds for the purchase of rear-loading containers from Civic Recycling.
- B331-13 Accepting quit claim deeds for sewer and road relinquishment purposes.
- B332-13 <u>Accepting conveyances for utility purposes.</u>
- B333-13 Accepting grants from the Youth Community Coalition (YC2) to be used by the Police Department for enforcement activities; appropriating funds.
- B334-13 Amending the agreement with Community Foundation of Central Missouri and Greater Horizons to rename the "Columbia Arts Foundation" to the "Columbia Arts Fund."
- B335-13 Authorizing a PCS Antenna Agreement with Sprint Spectrum, L.P. relating to the lease of property and space on the Walnut Street water tower (15 East Walnut Street).
- B336-13 <u>Authorizing a PCS Antenna Agreement and Memorandum of Agreement with T-Mobile USA Tower LLC relating to the lease of property at Fire Station No. 5 (1400 Ballenger Place).</u>

- B337-13 <u>Authorizing an agreement with Tyler Technologies, Inc. for the Columbia Financial Enterprise Resource System (COFERS) project.</u>
- B338-13 <u>Appropriating funds for the Columbia Financial Enterprise Resource System (COFERS) project.</u>

REPORTS AND PETITIONS

REP158-13 Street Closure Request – Air Force ROTC.

Mayor McDavid made a motion to approve the street closure as requested. The motion was seconded by Ms. Hoppe and approved unanimously by voice vote.

REP159-13 Parking Prohibition on Morningside Drive.

- Mr. Glascock provided a staff report.
- Ms. Hoppe understood staff planned to move forward with this. Mr. Glascock stated yes.

Ms. Hoppe noted she had heard from more than four people that they wanted this parking prohibition. She also understood it was a fire safety issue.

REP160-13 Intra-Departmental Transfer of Funds Request.

Mayor McDavid understood this report had been provided for informational purposes.

COMMENTS BY PUBLIC, COUNCIL AND STAFF

Greg Ahrens, 1504 Sylvan Lane, stated he recently noticed Walnut was in bad shape from College to about Short Street as there were potholes and dips, and the substrata was subsiding below the asphalt. He suspected the large trucks involved in delivering materials to the construction sites in the area were the cause as Walnut was not meant to carry those types of loads. He understood the road would need to be fixed and wondered if the City could recoup the costs from those damaging the roads, so it did not all fall on the citizens to pay for the repairs.

Mayor McDavid asked for a report regarding the surcharge on the utility bills for clarification purposes for all of the payment methods. He understood there was an online petition protesting the surcharge. He thought it was obvious why there was a surcharge for credit cards, but there were other forms of payment for which there was a charge, and he wanted clarification.

Mr. Thomas passed on his sympathies to the family of Ennis Patrick, who was riding his bicycle when he was killed on I-70 earlier in the week. No one was specifically to blame for the incident, but they had a culture of designing transportation systems that neglected people who walked, rode bikes or were unable to own or drive a car. He felt this was another reminder of this culture.

Mr. Thomas urged staff to continue looking into whether the City could provide a separated sidewalk on Clark Lane for the many people that did not have access to a car, and

to emphasize the fact the community should not be designed to work for only those that had access to cars.

Mr. Thomas asked for a report with the evaluations that had been performed of the inflow and infiltration program in the pilot study basin along with the plans to continue to evaluate the effectiveness of the program if it were to continue and be expanded.

Ms. Hoppe commented that she had raised the need to assess street damage in the past where there was intensive development with large trucks, and understood an ordinance had not yet been drafted. Mr. Matthes stated staff was still researching the issue as they needed to determine how they could attribute the street damage to a particular development. In some cases it was obvious, but in others, it was not as obvious. Ms. Hoppe thought before and after pictures could be taken where they knew large developments were being constructed. She understood the damage on Walnut was likely due to a combination of the Short Street garage, Brookside and some other developments in the area. Mr. Matthes noted there was a lot of development on that stretch. He stated they would fix Walnut when the work was done, and patch it until then. Ms. Hoppe thought this was an issue that needed to be addressed because the citizens were incurring a huge expense. She had noticed serious curb damage by the new development near Stephens College, further east on Walnut, by the Hagan development, where a building had been demolished.

Ms. Hoppe asked for an ordinance to be drafted to allow the cultivation of up to six marijuana plants to be reclassified as a misdemeanor with a fine of up to \$250 similar to the ordinance involving the possession of 1.25 ounces of marijuana that had been passed by the public in 2004.

Ms. Hoppe recalled she had asked staff to look into joining the National League of Cities insurance program for private owners for private sewer and water lines. The owner could pay a monthly fee for insurance in case the private line needed to be repaired because of leakage. She asked that an ordinance be drafted for consideration if they had not already voted on the issue in the past. She provided a handout of information regarding the program, which she had recently received in the mail.

Ms. Hoppe commented that the Water and Light Advisory Board, in June, had unanimously requested the Council to increase the renewable energy standard to the goal of 30 percent by 2028, 15 percent by December 31, 2017, and 25 percent by 2022. She provided draft language and asked that an ordinance to be prepared for Council consideration.

Ms. Hoppe explained Report E received on April 7, 2008 included suggestions of what the City could do to reduce pharmaceuticals in the water, and stated she wanted to know if they had moved forward with any of those suggestions. She understood they had implemented an education program regarding how people should dispose of pharmaceuticals, but that was quite a while ago. If the City had not moved forward with the suggestions, she wanted to know if they could move forward.

Ms. Nauser asked if and how the City would be informing citizens of the new snow policy and routes. Mr. Matthes replied they were getting ready to do some significant marketing of the snow route method to remind people to move their vehicles from the streets on to driveways. Ms. Nauser asked if the City would publish the priority streets so citizens knew which streets would be affected. She understood that information was on the website. Mr. Matthes replied the information was still on the web.

Mr. Skala agreed a report regarding the utility surcharge was needed as he had received many calls and e-mails regarding the \$4.60 charge.

Mr. Skala asked for a report with comparisons from other cities that had hybrid programs involving trip generation, to include Milwaukee and Lincoln. He also asked that the report that had been in the Columbia Tribune on December 6, 2012 regarding development fees be included as it showed how Columbia compared with other communities.

Mr. Skala commented that he had been approached by a citizen with regard to reviewing the noise ordinance in terms of dog barking. The ordinance currently provided for one complaint per bark. He asked for a report regarding the language and for recommendations on what could be done to improve it. He suggested a review of other community ordinances.

Mr. Skala understood the Council had agreed to allow the consult to review and provide recommendations on the C-2 zoning issue, but wondered if they might need to move forward sooner due to the flurry of activity in order to ensure high density residential developments accommodated the pressures they tended to put on the immediate areas.

Mr. Skala stated he was constantly perplexed by the controversy surrounding Clark Lane. He provided the history of this project as the discussion had begun in 2005. He understood GetAbout funds would be used, but pointed out the sidewalks could not be installed next year since they did not have the money, the necessary easements, etc. He noted they were dependent on 2015 money at this time. He agreed this was a public safety issue. If they did not add shoulders that could be used in the future improvement of the road, nothing would change. He did not understand why they were not in agreement that these shoulders provided a safer environment than what was there now. He noted an informational meeting regarding this project was scheduled for 5:30 p.m. at Blue Ridge School on November 6, 2013, and invited the public to attend.

Mr. Trapp commented that he understood one of the ways to justify a tower at the Columbia Regional Airport was by the number of flights, and thought they might have made a strategic error by not supporting general aviation like some of the smaller airports as it was lowering the overall number of flights. He understood this could impact the City's ability to keep the tower and the number of people willing to use the airport in the future. He asked the Airport Advisory Board to look at what they could do to be more welcoming with regard to

general aviation. He understood that could include T-shaped hangers, self-service gas, etc. He felt the entire community would benefit with more traffic at the airport.

Mr. Trapp noted tomorrow was an election day and hoped people would get out and vote.

The meeting adjourned at 9:47 p.m.

Respectfully submitted,

Sheela Amin City Clerk