



State of Louisiana
Louisiana Department of Health
Office of Public Health

February 9, 2018

The Honorable Fred H. Mills, Jr., Chairman
Senate Health and Welfare Committee
P.O. Box 94183, Capitol Station
Baton Rouge, LA 70804

The Honorable Frank A. Hoffmann, Chairman
House Health and Welfare Committee
P.O. Box 94062, Capitol Station
Baton Rouge, LA 70804

The Honorable Marcus Hunter, Representative
House Health and Welfare Committee Member
P.O. Box 94062, Capitol Station
Baton Rouge, LA 70804

RE: Act 263 and House Resolution 156 Interim Report

Dear Chairman Mills, Chairman Hoffmann and Representative Hunter:

The Louisiana Department of Health (LDH) submits the enclosed interim report regarding the collaborative effort to study and evaluate the conditions of drinking water systems throughout the State of Louisiana.

Act 263 is an opportunity to bring broader attention to the declining public drinking water infrastructure in the state. In 2017, there were over 1,400 Boil Advisories issued statewide mainly due to line breaks and repairs. The American Society of Civil Engineers 2017 Report Card for Louisiana's infrastructure rated the Louisiana drinking water systems with a D-.

Act 263 of 2017 Regular Legislative Session, tasked LDH to evaluate the issues and conditions of drinking water treatment and distribution through the evaluation of sanitary survey results for each water utility system by 2020. LDH was tasked to submit interim progress reports yearly until final report submission. The ultimate goal is to develop recommendations collaboratively with stakeholders, technical experts, water utility system owners, operators, community members and legislators from areas with known public water quality issues.

Year 1 Sanitary Survey Report: In 2017, 435 surveys were conducted by LDH statewide. The Sanitary Surveys are conducted using federal guidelines which require a thorough on-site inspection and audit of the management, operations, and physical condition of the public drinking water system. These inspections are performed every three years at a community water system (municipalities, rural districts, subdivisions, etc.) and every five years at a non-community water

system (schools, restaurants, businesses, etc.). Additionally, surveys may be performed at an increased frequency due to compliance and enforcement procedures. All findings from the inspection are documented and categorized as: 1) a significant deficiency, 2) a deficiency, or 3) a recommendation. The federal requirements define a significant deficiency as a defect in design, operation, or maintenance, or a failure or malfunction of the sources, treatment, storage, or distribution system that is causing or has the potential to cause contamination of the drinking water system.

Sanitary Survey Summary: Of the 22 defined significant deficiencies (one additional deficiency is undefined), four account for the preponderance of citations to Public Water Systems (PWS).

Deficiency

Pathway for Contamination – 132 citations

Maintenance or Repair – 57 citations

Cross Connection Control/ Backflow Protection – 61 citations

Security – 49 citations

A full listing of the 23 significant deficiencies, number of citations and the number of public water systems cited for each can be found in detail in Appendix A of this report.

Preliminary Findings:

1. The sanitary surveys alone do not indicate whether the water is safe to drink.

Sanitary surveys alone should not be used as primary indicator for a poorly performing system. Drinking water systems are complex, requiring multiple factors to review and monitor. Sanitary surveys provide a reference point and historical record over time so as to track the construction, modification, maintenance, and mitigation measures taken by the water system operators to maintain naturally aging infrastructure. An older system may have been cited deficiencies for repairs and can still produce safe drinking water if the stage of the repair(s) has not yet eroded the integrity of the infrastructure.

2. Water Quality Testing determines whether water is safe to drink.

Bacteriological testing is conducted monthly and indicates whether the water has been contaminated and is unsafe to drink. Chemical testing is conducted every three years at each public water supply well, and annually at surface water treatment systems to determine any potential chemical contamination. Certainly, poor infrastructure could pose a risk for potential contamination, but public drinking water systems use treatment processes to maintain compliant drinking water. Water Quality Testing alone should not be used as the sole indicator for a poorly performing operation. Drinking water systems are complex, and the treatment of raw water must also be properly managed.

3. At-Risk Private Water Systems have an Administrative Order (AO) and/or extensive penalties.

The enforcement process is outlined in Appendix B of the report. In short, a Notice of Violation denoting significant deficiencies and/or recommendations is provided to the water system with a 90-day correction period. Failure to correct the deficiency results in an AO. Failure to comply with the AO, results in penalties. In 2017, 31 Administrative Orders were issued and two

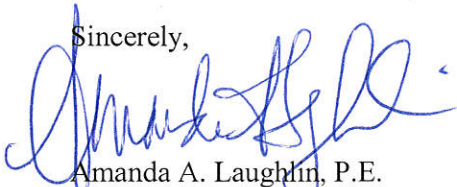
Imposition of Penalties in the amount of \$160,000. As of date, there are 67 water systems anticipated to receive an AO based on their violation history.

Limitations: There are limited solutions at this stage of enforcement. As a regulator, LDH has judicial branch authority to enforce payment of penalties; however, LDH may not be able collect penalties due to the water systems lack of funds. In fact, penalties may indicate a systemic problem of a water system with a demographically poorer tax-payer base that lacks funds to invest in other infrastructure problems, let alone water infrastructure. As documented in the Legislative Auditor's Report of March 2017 on Water Rates in Louisiana, funds collected by communities fall short of the operating costs to maintain the water system. As a regulator, LDH does not have the executive authority to ensure that community/tax payer revenues generated by the jurisdiction (town, city, municipality) through water fees are applied to the maintenance and operation of the water system. The (limited and temporary) solution is to place the water utility company in receivership, in which a receiver is appointed by LDH to run the company. Often times, receivership is not an option as the community funds available are insufficient to attract a managing entity willing to take on a failing water system.

Collaborative Engagement: LDH will continue collaborative review and engaged discussion and input from stakeholders, technical experts, water utility system owners, operators, community members and legislators from areas with known public water quality issues. A kick-off Water Committee meeting in October 11, 2017 began discussions on the current status of drinking water infrastructure in LA. Preliminary review of the sanitary survey summary findings was held on January 8, 2018 to engage in deliberation and seek recommendations and solutions to improve drinking water quality. All of the Water Committee meeting information will be posted at the following website: www.ldh.la.gov/Watercommittee.

Should you have any questions regarding the information contained in this correspondence, please do not hesitate to contact my office at 225-342-7499. An electronic copy of this report and associated Appendices can be found at the following website: <http://ldh.la.gov/index.cfm/page/2968>.

Sincerely,



Amanda A. Laughlin, P.E.
LDH/OPH Chief Engineer

cc: Jimmy Guidry, M.D., State Health Officer