

NonCom Scoop

Newsletter for Minnesota's Noncommunity Public Water Systems

Spring/Summer

2017

Revised Total Coliform Rule – Important Reminders

By Chris O'Brien, Minnesota Department of Health

Previous editions of the *NonCom Scoop* have highlighted different aspects of the Revised Total Coliform Rule (RTCR), which went into effect on April 1, 2016. During the first year of implementation, the Minnesota Department of Health (MDH) and delegated local program staff have strived to provide a smooth transition for Minnesota's noncommunity public water systems. Although some systems have new requirements, many systems have experienced little change. This article will highlight some key reminders to help public water systems stay in compliance with the RTCR and avoid additional regulatory oversight.

Seasonal Systems – Seasonal public water systems that fully depressurize their distribution system during the off-season are required to start up their system with an approved start-up procedure. In 2016, MDH's focus was on increasing awareness of the new requirement, rather than taking enforcement action. **Beginning in 2017**, systems that fail to perform an approved start-up procedure and notify MDH of its completion will be in violation of the RTCR and placed on a monthly coliform bacteria sampling schedule. The system becomes responsible for collecting water samples as well as overnight shipping costs.

For more information on water system start up, see the information under 'Start-up Procedure' at [Start-up Procedure \(http://www.health.state.mn.us/divs/eh/water/ncom/transient.html\)](http://www.health.state.mn.us/divs/eh/water/ncom/transient.html). Please note that a functional pressure gauge is required to perform the integrity step of the State-approved start-up procedure.

Systems on a Reduced Annual Sample Schedule – New in 2017, an annual site visit inspection conducted by MDH or delegated local program staff is necessary for systems currently on a reduced (annual) coliform bacteria sampling schedule to stay on the reduced schedule. The purpose of the annual site visit is to verify that a public water system is free of sanitary defects. If sanitary defects are found and left uncorrected beyond 120 days (or other approved timeframe), the PWS is reassigned to a quarterly or monthly sampling schedule. The system becomes responsible for collecting the water samples as well as overnight shipment costs. It is anticipated that most annual site visit inspections will be conducted at the same time as sample collection. Systems on a reduced sampling schedule can help ensure they continue with the reduced schedule by working with their sanitarian so that timely and efficient annual site visits are accomplished.

During the annual site visit and sanitary survey inspections (conducted once every three years), MDH or delegated local program staff are looking for the following sanitary defects to determine if a system can remain on reduced (annual) monitoring:

- A missing well cap
- Damaged or defective well casing
- Seal between a hand pump well casing and concrete slab is not water tight
- Electrical wiring for a submersible pump is not properly enclosed in conduit
- A flooded well is in use
- Openings in a pump base exist that lead directly into the well casing
- Hazardous cross connections in the distribution system
- Pump or treatment system related cross connections
- Unprotected openings in a water storage tank
- For chlorinating systems, the required chlorine residual is not maintained

MDH recommends, to keep their water safe, that system owners and operators also inspect their system periodically and correct any sanitary defects. This also helps to ensure that a timely and efficient annual site visit inspection is accomplished and eligibility for a reduced (annual) monitoring schedule is maintained.

Please note that MDH or delegated local program staff may also identify other deficiencies in your water system and communicate this to you verbally or through the sanitary survey report. While it is expected that any identified deficiency be corrected, only certain deficiencies are considered 'sanitary defects' that may impact your sampling schedule. **A sanitary defect is a deficiency that can provide a pathway for microbial contamination to enter the system.** Your designated sanitarian will communicate any sanitary defects that must be corrected to maintain a reduced sampling schedule.

Please contact your designated sanitarian if you have questions. The link below will connect you to our MDH contact page or call 651-201-4700 or 888-345-0823. If you are in a delegated local program jurisdiction, please contact the appropriate office.

[Drinking Water Protection Contacts](http://www.health.state.mn.us/divs/eh/water/org/index.cfm)
(<http://www.health.state.mn.us/divs/eh/water/org/index.cfm>)

Harmful Algal Blooms:

How to stay safe recreating in Minnesota's waters this summer

What are Harmful Algal Blooms? Harmful algal blooms (HABs) are overgrowths of blue-green algae (cyanobacteria) that cause water quality problems in lakes, rivers, and ponds. In some cases, they produce toxins that are harmful to humans, pets, livestock, and waterfowl.

When are HABs most likely to occur? Blue-green algae prefer warm, calm, sunny weather and warm water higher than 75 °F. They will often be found on the downwind side of a lake or in a secluded bay or shoreline.

What do HABs look like? Algal blooms often look like foamy or spilled paint, pea soup or floating mats or scum. They range in color from green to blue-green to gray. It is possible for there to be very little algae visible in the water (green clumps or strands) or on shore and for harmful toxins to be present.

How do I know if the water is safe? You cannot tell if a bloom is toxic by looking at it. Rashes, eye irritation, sore throat, vomiting, diarrhea, and headaches are all symptoms that can occur if you contact or ingest algae-laden water. If an algal bloom is present, you should take precautions to keep children and pets out of the water.

How can recreational users prepare for HABs? The following advice is recommended for recreating in any lake, river, or stream:

- It is important to have other water sources (besides untreated lake or stream water) available for drinking, cooking and bathing; especially for infants and small children.
- It takes multiple treatment steps to ensure removal of algal toxins, therefore it MDH does not recommend relying on treatment, such as filters.
- Do not boil water for drinking as it will not destroy toxins and could actually increase harmful toxin levels.
- Water can be used for handwashing, bathing, dishwashing, or laundry, although skin irritation, such as a rash may occur from exposure when handwashing and bathing. Supervise young children when bathing to prevent accidental ingestion. It is recommended to provide a final rinse of skin with uncontaminated water, especially for items that go into the mouths of infants and young children (i.e., teething rings, nipples, bottles, toys, silverware).
- Rinse off pets immediately after contact with the water. Licking algae off their coats increases exposure to harmful toxins.

If you think you or your pets are experiencing adverse health effects due to contact with, or ingestion of, lake water/algae, seek medical/veterinary attention immediately.

Our general advice to recreational users is “When in doubt, stay out”!

For more information:

Minnesota Pollution Control Agency

[MPCA and Harmful Algal Blooms \(https://www.pca.state.mn.us/water/blue-green-algae-and-harmful-algal-blooms\)](https://www.pca.state.mn.us/water/blue-green-algae-and-harmful-algal-blooms)

Minnesota Department of Health

[MDH and Harmful Algal Blooms \(http://www.health.state.mn.us/divs/idepc/diseases/hab/\)](http://www.health.state.mn.us/divs/idepc/diseases/hab/)



Fact Sheet at a Glance

Collecting Drinking Water Samples

In Minnesota, samples from noncommunity public water supply systems are most often collected either by the Minnesota Department of Health (MDH) or by the local health department.

All **nontransient** public water supply systems are required to collect lead and copper samples. Some systems may be required to collect additional samples if they are treating the water to remove a regulated contaminant and/or have a population over 1000. In these cases, MDH will supply the system with the necessary bottles and precise guidelines for taking the samples. [Drinking Water Sampling- Nontransient \(http://www.health.state.mn.us/divs/eh/water/ncom/nontranssampling.html\)](http://www.health.state.mn.us/divs/eh/water/ncom/nontranssampling.html)

Occasionally, a **transient** facility will be required to collect its own bacteria or nitrates samples. In these cases, MDH will supply the facility with the necessary sample bottles and precise guidelines for taking the samples to ensure that they provide an accurate picture of drinking water quality. [Drinking Water Sampling -Transient \(http://www.health.state.mn.us/divs/eh/water/ncom/transsampling.html\)](http://www.health.state.mn.us/divs/eh/water/ncom/transsampling.html)

Upcoming Training

Class D Small Public Water Systems

Date	Location
TBD	TBD

Class E Small Public Water Systems

Date	Location
April 11	Long Lake
April 26	Cohasset
May 2	Willmar
May 9	Rochester



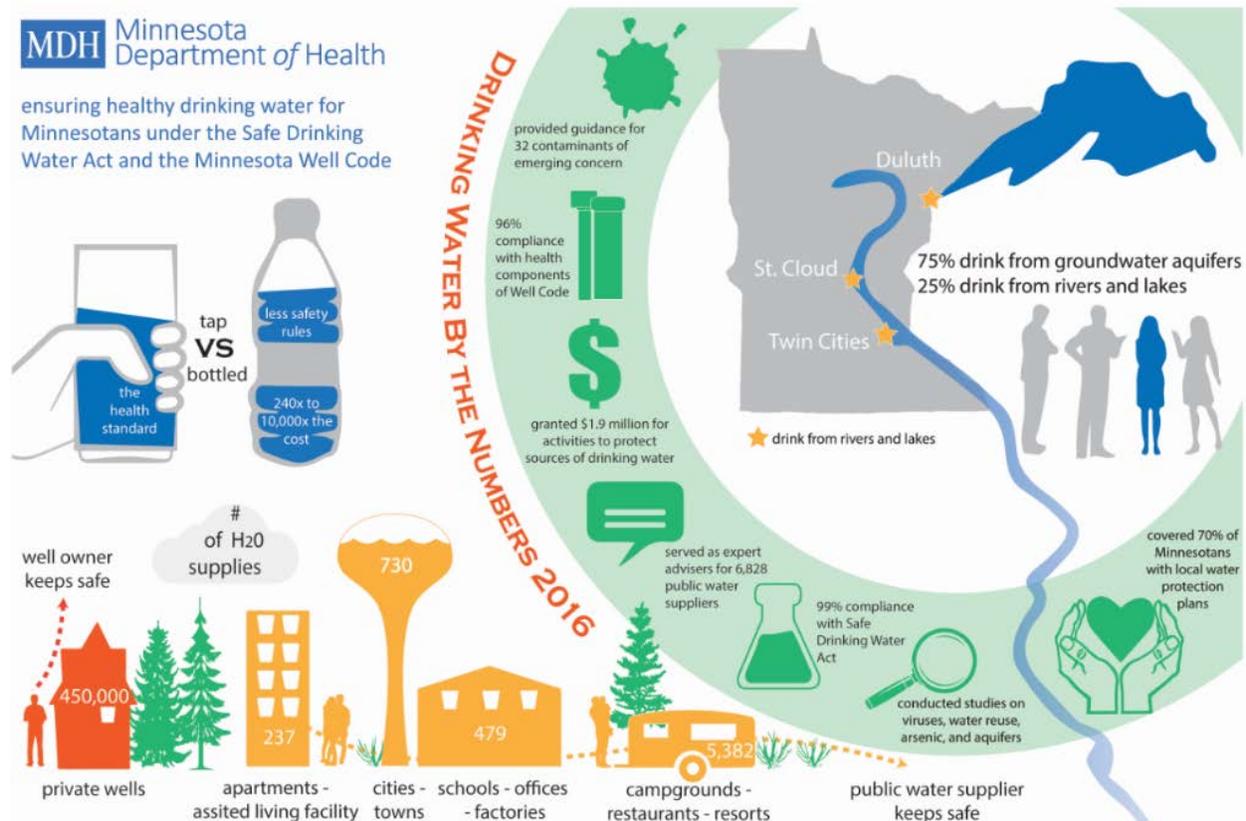
If you have any questions regarding plan review, call 651-201-4700

Minnesota Rural Water Association offers all trainings

For more information on the courses and upcoming events, visit Minnesota Rural Water Association at [Minnesota Rural Water Association \(http://www.mrwa.com/\)](http://www.mrwa.com/)

Drinking Water by the Numbers 2016

Minnesota Department of Health Drinking Water by the Numbers 2016. Minnesota Department of Health ensures healthy drinking water for Minnesotans under the Safe Drinking Water Act and the Minnesota Well Code.



Title: Drinking Water by the Numbers 2016 Infographic

Minnesota Department of Health Drinking Water by the Numbers 2016. Minnesota Department of Health ensures healthy drinking water for Minnesotans under the Safe Drinking Water Act and the Minnesota Well Code.

Random Facts: Tap water is the health standard vs. bottled water - which has less safety rules and is 240 to 10,000 times the cost of tap water. Seventy five percent of Minnesotans drink from groundwater aquifers. Twenty five percent of Minnesotans drink from rivers and lakes – including people in major cities of Twin Cities, St Cloud and Duluth.

Number of water supplies in Minnesota: Minnesota has 450,000 private wells - which the private well owner is responsible for keeping safe. Minnesota has a number of public water suppliers- which the public water supplier keeps safe, including: 237 apartments/assisted living facilities, 730 cities and towns, 479 schools offices and factories, and 5,382 campgrounds restaurants and resorts.

MDH activities in 2016: MDH provided guidance for 32 contaminants of emerging concern; 96% compliance with health components of the Well Code; granted \$1.9 Million for activities to protect sources of drinking water; served as expert advisors for 6,828 public water suppliers; 99% compliance with safe drinking water act; conducted studies on viruses, water reuse, arsenic, and aquifers; and covered 70% of Minnesotans with local water protection plans.

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