Final Recommendations of the Lead and Copper Rule Working Group To the National Drinking Water Advisory Council

November 18, 2015



Introduction

- EPA identified key issues of the Lead & Copper Rule (LCR) that would benefit from input from stakeholders
- LCR Working Group (LCRWG) was formed under the auspice of National Drinking Water Advisory Council (NDWAC)
- 15 working group members, with representation from:
 - State regulators
 - Local health departments
 - Drinking water utilities (small/large systems; public/private)
 - Public interest groups (community, children's health, national NGOs)
 - NDWAC members



LCRWG Process

- Technical presentations on state of the science:
 - Corrosion control
 - Sample site selection
 - Lead sampling protocol
 - Copper public education
 - Lead service line replacement
- Seven, two-day, in-person meetings; a webinar up-date with the NDWAC; and a dozen small group calls to discuss issues, develop recommendations and prepare report



Background

- LCR is a treatment technique rule
 - Rule is not based on maximum contaminant levels but instead requires PWS to take actions to minimize exposure to public
 - Large systems required to reduce corrosivity of water and water quality parameter (WQP) monitoring (PWS > 50,000 pop.)
- If lead action level (AL) is exceeded, the following actions are triggered:
 - Conduct public education
 - Implement source water monitoring and if needed treatment
 - Install or optimize corrosion control treatment (CCT) (for PWS <50,000)
 - Implement Lead Service Line Replacement (LSLR), if corrosion control does not reduce lead and copper levels below the ALs



Considerations in Preparing the Report

(Section 2.1, pp 6-7)

- There is no safe level of lead. Lead-bearing plumbing materials in contact with drinking water may pose a risk at all times, not just when AL is exceeded.
- Proactive action to remove lead materials from contact with drinking water is needed.
- Source is in the service lines and in homes. Thus, elimination of lead materials is a shared responsibility.
 - PWSs, consumers, property owners and public health community all play important roles.
 - A holistic effort is required with cross-sector stakeholder partnerships, and creative financing are needed to remove the sources of lead

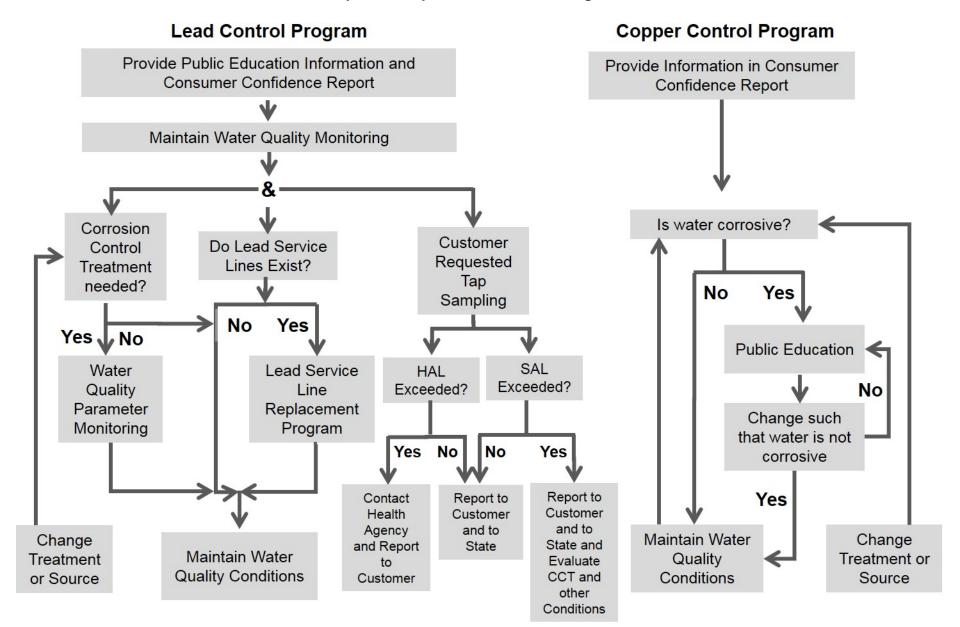


Considerations in Preparing the Report (Section 2.1, pp 6-7)

- The LCR should remain a treatment technique rule.
- The issues associated with lead and copper are different.
- CCT is complex, dynamic, and varies w/system conditions.
 - Better understanding of the science (and the complexities)
 - Attention to unintended consequences is important.
- Attention to what systems can implement and States are able to oversee and enforce also is important.
- PWS and state resources should be focused on actions that achieve the greatest health protection.

Overview of Recommended Revised Lead and Copper Rule Framework

Note: Compliance steps are embedded throughout the framework





Overview of Recommendations (Section 3, pp 10-11)

- The LCRWG's proposed improvements to the LCR make some fundamental changes:
 - Proactive approach to actions previously triggered by lead action level exceedance
 - All systems work with customers to remove LSLs
 - Stronger public education requirements for all systems
 - Establish a household action level; results to health dept. if exceeded
 - Separate requirements for copper; focus on systems w/ aggressive water
- Improvements to CCT and monitoring
- Complementary critical actions
- LCRWG conclusion: Taken as a whole, this will achieve more public health protection than the current rule



Complementary Critical Actions

(Section 4, pp 40-42)

- Revisions to LCR are important but not sufficient.
- EPA can take a leadership role in a national effort with other partners to reduce lead in drinking water that includes, but is not limited to:
 - EPA working across all offices and with other federal agencies on integrated approach to action and education (HUD, CDC)
 - State and local policies to support LSLR and to assist customers (e.g. inspection/disclosure on sale of homes, building code requirements upon substantial renovation, priority in SRF funding)
 - Enhanced cooperation among state and local health departments on childhood lead poisoning, screening and prevention that includes a focus on drinking water as a source

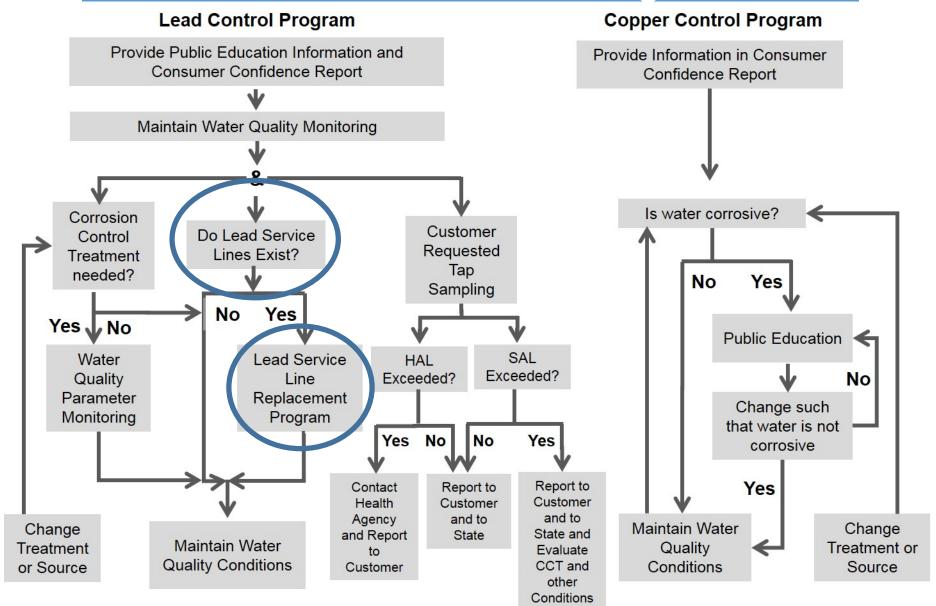


Complementary Critical Actions

(Section 4, pp 40-42)

- Critical to a national effort to reduce lead in drinking water includes: [continued]
 - EPA/CDC and PWS efforts to educate healthcare providers and health departments about health threats due to exposure of lead in drinking water
 - Financial assistance programs for low-income customers
 - Engaging experts in community-based risk communication to improve PE approaches
 - Additional research on CCT, tap flushing, defining water aggressive to copper, etc.
 - National clearinghouse of best practices as a resource both for the public and for small systems (templates)

Find and Remove LSLs as Long-term Goal



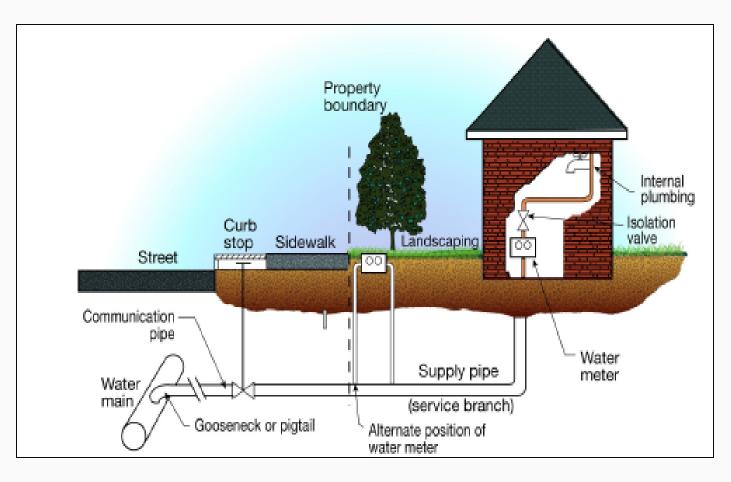


Lead Service Line Replacement Background (Section 3.1, pp 13-14)

- Under the current LCR:
 - LSL replacement triggered by a lead action level exceedance
 - Action is required in a short time frame; results in many partial lead service line replacements (PLSLR)
 - The replacement requirement stops with two consecutive rounds of sampling being under the AL



Lead Service Line Replacement Background





Lead Service Line Replacement Background (Section 3.1, pp 13-14)

- Science Advisory Board evaluation of effectiveness of PLSLRs concluded:
 - PLSLR does not reliably reduce lead in the short-term
 - PLSLR often associated with short-term elevated drinking water lead levels for some period of time
 - Full LSLR appears in general to effectively and reliably achieve long-term reduction of lead levels in drinking water



Proactive Lead Service Line Replacement (Section 3.1.2, pp 16-18)

- All systems should establish LSLR programs, which set replacement goals, engage customers in implementing those goals, and provide improved access to information
- Recommended framework:
 - Assume lines are lead if prior to a certain date, unless PWS can demonstrate otherwise (incentive for accurate inventory)
 - Targeted outreach to customers with LSLs
 - No penalty for customer refusal; no credit for partial LSLR



Proactive Lead Service Line Replacement (Section 3.1.2, pp 16-18)

- Recommended framework continued:
 - Interim replacement milestones (3 year reporting); credit for lines determined not to be lead; increasing actions if milestones are not met (see Appendix Tables 1 and 2)
 - Failure to meet target is not a violation; failure to increase actions is
 - SOPs for planned maintenance, emergency repairs, etc.
 (EPA guidance/templates for small and medium systems.)

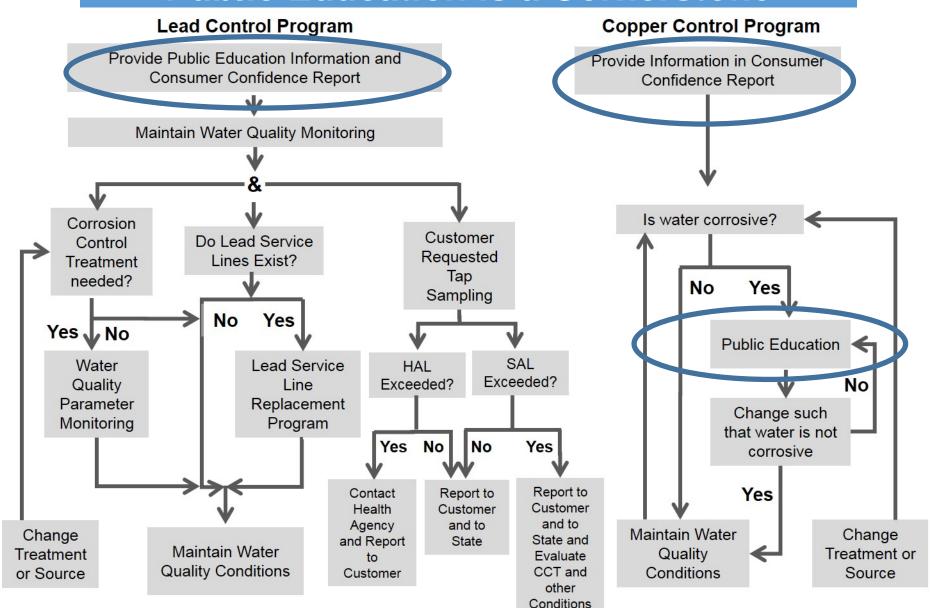


Proactive Lead Service Line Replacement

• Benefits:

- Primary source of lead in contact with drinking water will be largely removed over time
- Reduced public health risk and costs of corrosion control treatment
- Improved process for planning and replacing LSLs (e.g. can include in capital improvement programs)
- Improved awareness of location of LSLs and PLSLs
- Improved communication with consumers and public health partners about the risks of lead in drinking water
- Reduced risk/consequences from treatment upsets or source water changes

Public Education is a Cornerstone





Stronger Public Education Requirements (Section 3.2, pp 19-21)

- Customers and PWSs share responsibility for reducing exposure to lead; therefore, public education (PE) and customer outreach is critical
- Should convey, among other information:
 - The risk of lead in drinking water and the likelihood that water in one's home contains lead
 - Importance of LSL replacement
 - Shared responsibility nature of the LCR
 - Availability of additional information on measures to minimize exposure through the National Clearinghouse (flushing, POU)



Stronger Public Education Requirements

- LCRWG recommends EPA establish a national lead information clearinghouse (3.2.1, pp 21-23) and include the following LCR revisions:
 - New customer outreach and targeted outreach to consumers with LSLs and vulnerable populations (3.2.2, p 23)
 - Revise the current CCR language to address LSLs and update health statements (3.2.3, pp 23-24)
 - Add requirements for public access to information (e.g. household action level, water quality parameters, LSLR program, etc.) and better access to monitoring info through SDWIS Prime (3.2.4, pp 24-25)
 - Outreach to public health partners (3.2.5, pp 26-28)



Stronger Public Education Requirements

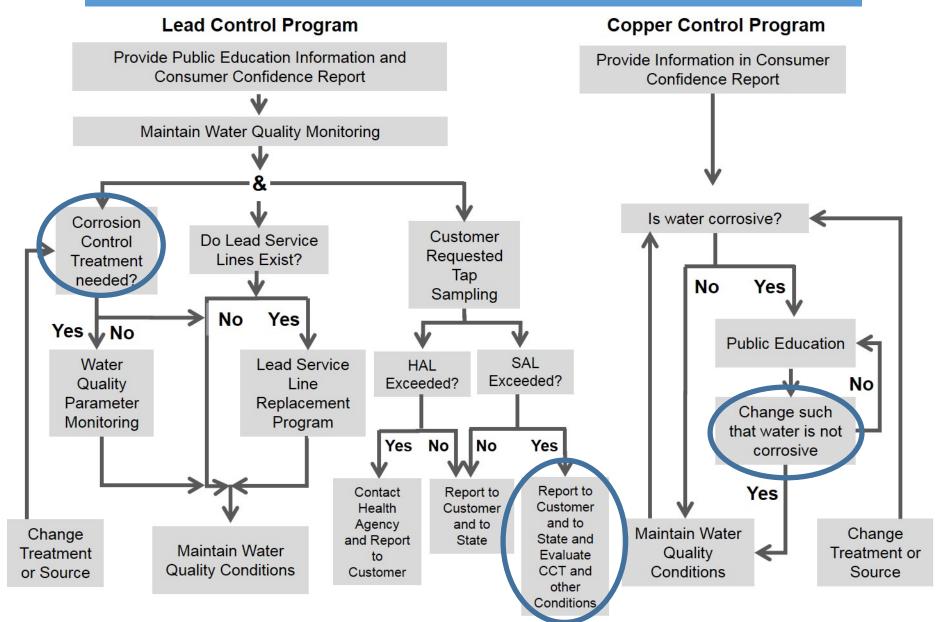
- National lead information clearinghouse: (Section 3.2.1, pp 21-23)
 - Consult stakeholders and experts in community-based risk communication for best methods
 - Health risks and sources of lead exposure in drinking water (vulnerable populations, no level of lead is safe)
 - How to have your water tested, blood lead level (BLL) tested and limitations to both
 - Specific information for homes with LSLs
 - PE (and other) templates for PWS use (to provide guidance on best practices and reduce burden)
 - And more...



Stronger Public Education Requirements

- CCR revision recommendations: (Section 3.2.3, pp 23-24)
 - Update public health statements to reflect current understandings and science
 - Clarification that CWS compliance with federal regulations is not an indication of individual household lead levels
 - The role of the public to protect themselves from lead exposure
 - Link CCR and national clearinghouse website

Corrosion Control Treatment is Retained





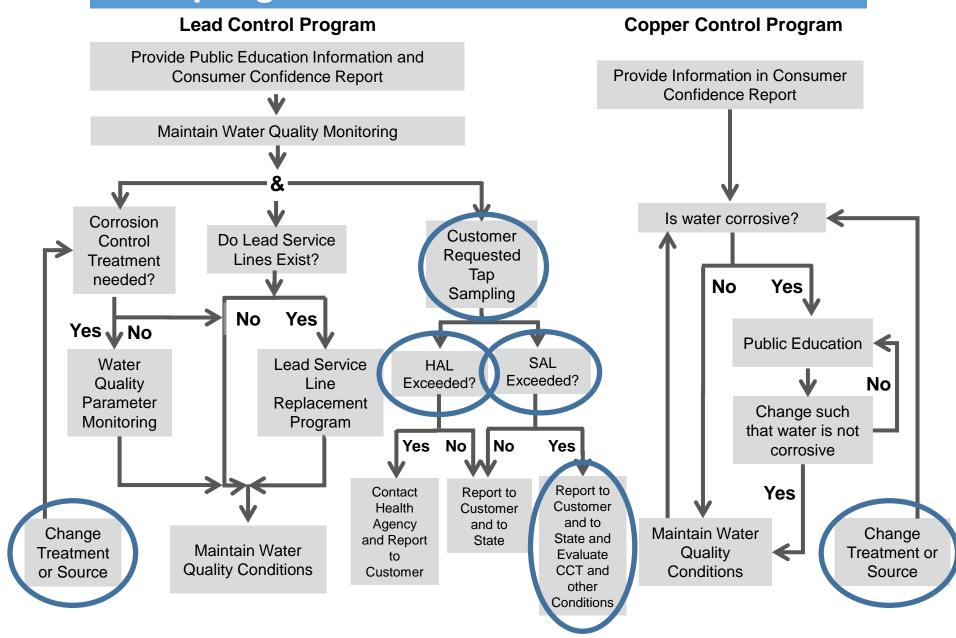
Improve Corrosion Control Treatment

(Section 3.3.1, pp 29-30)

LCRWG recommends:

- EPA release a revised CCT guidance manual and update regularly to reflect new science
- EPA provide increased assistance to PWSs and primacy agencies
- PWS review of updates to guidance to determine if CCT is based on best science
- CCT reassessment when PWS changes treatment or source
- Better use of water quality parameters (WQPs) for process control
- More rigorous data review, control charts, process controls
- PWSs not practicing CCT demonstrate water quality characteristics remain in place

Sampling: Continuous & Customer Initiated





Modify Tap Sampling Requirements

- Currently PWSs conduct tap sampling for lead, with sample site selection tiers and first draw sampling protocol. If the AL is exceeded, small/med systems triggered to CCT and all systems must do PE and LSLR until results are under the AL for two monitoring periods
- Issues with current approach:
 - Sampling protocol may not capture the highest lead levels (not from LSL, inconsistent sampling from customers, variability among properties, etc.)
 - Recruitment is difficult and labor intensive
 - Sampling is infrequent and in relatively few homes
 - Implications for CCT are complicated



Modify Tap Sampling Requirements

(Section 3.4, pp 30-31)

- Voluntary customer initiated tap sampling (with PE encouraging sampling) to provide customers with information and PWS's with data to identify and correct unanticipated problems
 - Targeted outreach to customers with LSLs and vulnerable populations; available to any customer
- Tap sampling results will be used to:
 - Inform and empower individual households to reduce risk
 - Report to health officials when monitoring exceeds a "household action level"
 - Evaluate effectiveness of CCT and guide reassessment

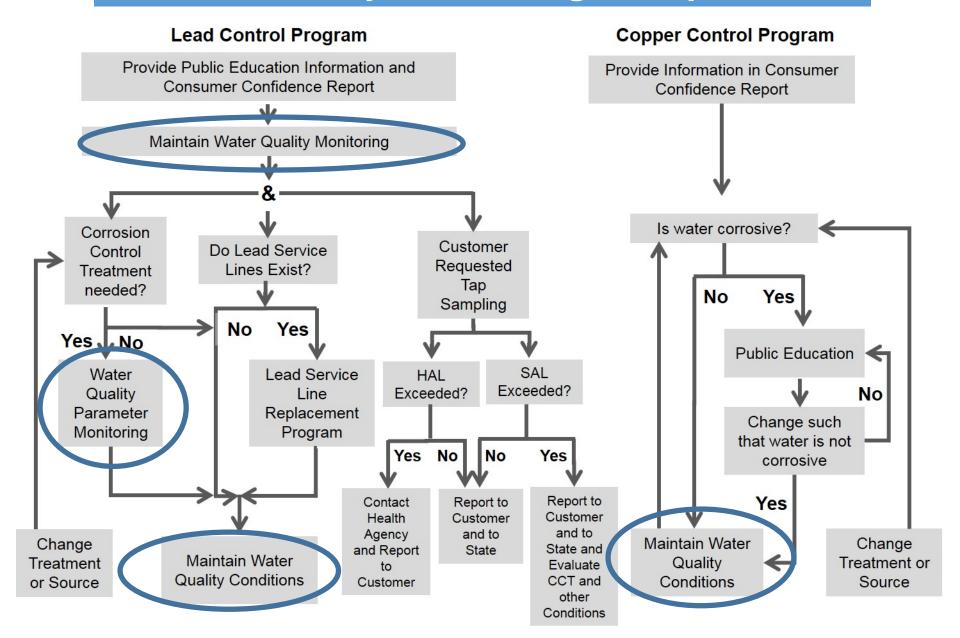


Assessing the Effectiveness of CCT

(Section 3.4.2, pp 33)

- Tap samples would be reported to primacy agency on a routine bases, and include information on sampling protocols used
- The PWS should maintain the data for review to identify trends and changes; data would be available for public review
- Data to be reviewed during sanitary surveys
- Annually, at the request of the primacy agency, the PWS would provide a report which includes the three most current years of data
- If the 90th percentile of the three years of data exceeds the "System Action Level" then the PWS must assess the cause and potentially reevaluate CCT or take other actions prescribed by the primacy agency
- Source water and treatment changes would necessitate a review of the tap sampling data in consultation with the primacy agency

Water Quality Monitoring is Expanded



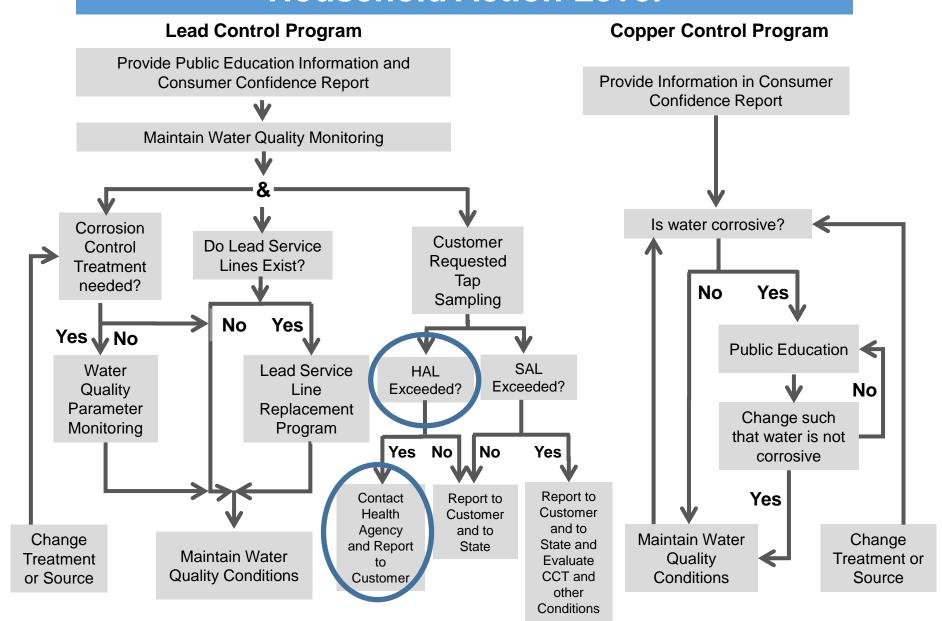


WQP Monitoring Requirements

(Section 3.4.1, p 31)

- Tailor WQPs based on the individual PWS's CCT plan, increase the frequency of WQP monitoring for process control, and ensure sites are representative of the distribution system (DS)
- EPA should review and consider adding to the list of WQPs in the LCR based on new science
 - The new information would be disseminated through EPA's CCT guidance manual
- WQP data should support a more rigorous review process such as control charting and other techniques to fine tune operations, reduce variability in DS and detect excursions

Household Action Level



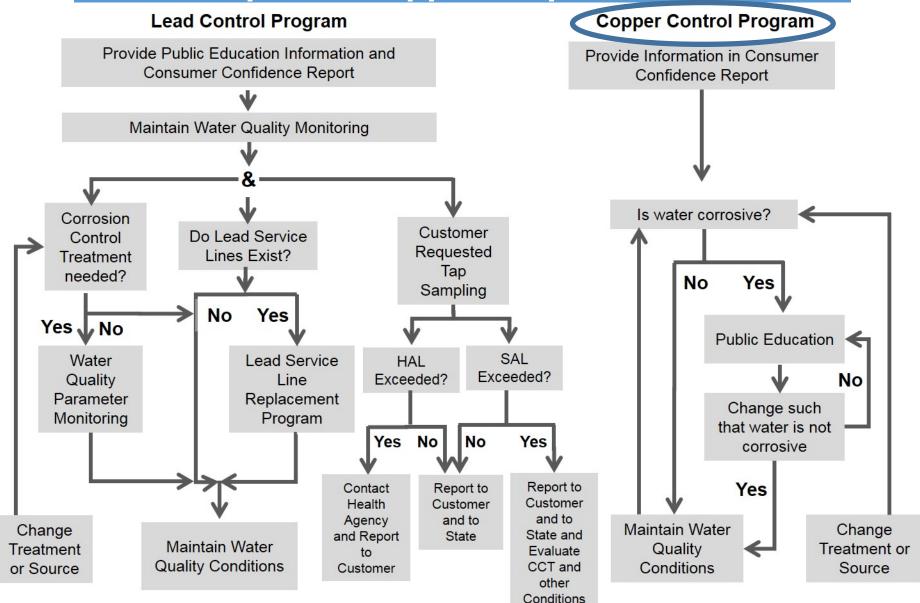


Establish a Household Action Level

(Section 3.5, pp 36-37)

- Current lead action level ("system action level") is based on 90th percentile of collected tap samples
- Household action level would be based on lead concentration necessary to elevate BLL ≥ 5 µg/dL in a healthy, formula fed infant
 - Based on CDC level of concern
- PWS to notify local health department when result of tap sampling is greater than household action level – health department to take action it deems best

Separate Copper Requirements





Separate Requirements for Copper

(Section 3.6.1, pp 38-39)

- Actions should be based on aggressiveness of water to copper not routine in-home monitoring
- EPA should develop criteria to define water that is not aggressive to copper for purposes of the LCR
- PWSs can choose among options to demonstrate water is not aggressive to copper:
 - WQP monitoring
 - One-time evaluation with tap sampling for copper at homes with new copper
 - Pipe loop study
 - CCT to change water chemistry



Separate Requirements for Copper

(Section 3.6.1, pp 38-39)

- For non-aggressive waters, continue to demonstrate that water is not aggressive to copper
- For systems with water aggressive to copper, initiate and maintain a PE program to inform:
 - Owners of new homes at initiation of service; and
 - Owners of renovated homes or to all customers routinely
- EPA should consider whether and under what circumstances CCT should be required (LCRWG assumes this would be a limited set of circumstances, but option should exist)
- Long-term treatment or source water changes may result in a demonstration of continued non-aggressiveness of water