Comparison of Option Approaches

Doug Owen
TWG Representative
TCRDS Federal Advisory Committee Meeting
May 21, 2008

This Presentation

Objectives

Provisions

System compliance

Improvement

Research

Comparison of Option Approaches

Similarities in Overall Approach Among Options

1. Combination of MCL and Treatment Technique
2. Routine monitoring can be reduced based upon criteria
3. Reduced monitoring will return to routine monitoring based upon criteria
4. Repeat sampling required based upon TC/EC occurrence
5. Assessment triggered by TC occurrence
6. Corrective action based upon deficiencies found in assessment

Similarities Among Options B through F
(Compared to Option A, Current TCR Provisions)

Category	Retain from Current TCR	Modify from Current TCR
Indicators	Total Coliform, *E. coli*	Eliminate Fecal Coliform
MCLG	*E. coli*	Eliminate Total Coliform and Fecal Coliform MCLG (1)

1. Relationship to follow-up action is critical component of eliminating MCLG for TC

Similarities Among Options B through F
(Compared to Option A, Current TCR Provisions)

Category	Retain from Current TCR	Modify from Current TCR
Monitoring	Framework for large systems	1. Modify repeat sample locations to allow flexibility
	CWS < 1000	1. Allow reduced monitoring for GW systems meeting different criteria
	NCWS < 1000	1. Allow reduced monitoring for GW systems meeting different criteria

1. Relationship to follow-up action is critical component of eliminating MCLG for TC

Similarities Among Options B through F

(Compared to Option A, Current TCR Provisions)

Category	Retain from Current TCR	Modify from Current TCR
Triggers for assessment	N/A	Non-acute MCL definition
Assessment and corrective action	N/A	Systems respond to TC/EC occurrence, with assessment and correction as stipulated in each option.
Violations	Acute for *E. Coli* with confirmation	1. Eliminate non-acute monthly MCL (current 5 % trigger retained for action) (1) 2. Include failure to take triggered action

1. Relationship to follow-up action is critical component of eliminating MCL for TC+

Variation in some proposed elements

Category	Variation in proposals
Routine Monitoring: CWS < 1000	1. Same as current TCR 2. Minimum of 1 sample/month
Routine Monitoring: NCWS < 1000	1. Same as current TCR 2. Increase GW NCWS < 1000 from 1/qtr to 1/mo
Routine Monitoring: Large Systems	1. Same as current TCR 2. GW systems treating < 4 log virus inactivation, 1 sample at each POE for all systems > 1000
Repeat monitoring: All sizes & categories	1. Collect repeat samples at original site and locations that help verify and determine extent 2. Based on sampling site plan

Variation in some proposed elements

Category	Variation in proposals
Additional routines in next month for systems collecting < 5 samples (< 4100 population)	1. Same as current TCR 2. Eliminate because follow-up action required 3. 2/month and follow-up action 4. 1/month and follow-up action

Variation in some proposed elements

Category	Variation in proposals
Criteria for reduced monitoring (CWS and NCWS < 1000 only)	1. No M & R violations 2. CWS on GW that disinfect 3. CWS on GW that show monitoring history demonstrating negligible TC occurrence 4. NCWS supplied by a protected GW source and is free of sanitary defects 5. NCWS state licensure includes minimum level of training and testing 6. System has corrected any deficiencies from sanitary surveys 7. Regular (semi-annual, 18 months?) site visits

Variation in some proposed elements

Category	Variation in proposals
Action Levels: All sizes & categories	1. Three; initial self-assessment, detailed self-assessment, directed assessment 2. Three; basic self-assessment, full/assisted assessment, response to M & R violation 3. Two; self-assessment with reporting to State, State or third-party assessment 4. Three; count resets if deficiencies are corrected
Assessment Elements	1. Refer to option descriptions
Approach to corrections	1. Correct deficiencies associated with underlying cause of occurrence 2. Correct all deficiencies

Overarching issues to be discussed

1. What are the relative benefits/drawbacks of routine monitoring approaches for small systems?
2. What are the appropriate criteria to make a determination that reduced monitoring is acceptable?
3. What is the appropriate level of assessment and corrective actions that should be specified and who has the authority to make determinations?
   a. Who does assessments?
   b. What goes into rule language and/or guidance?