

US EPA ARCHIVE DOCUMENT

Columbus XL Kick-off Meeting Summary
May 16, 2000
City of Columbus Water Division Offices
Dublin Road; Columbus, Ohio

Pre-meeting Ohio EPA, U.S. EPA, City of Columbus
12:30pm

Meeting Participants: Lynn Kelly, P.E., Deputy Administrator/Supply, City of Columbus Division of Water, Gary Garver, City of Columbus Health Department, Ken Button, City of Columbus Water Division, Joan Tanaka, U.S. EPA, Region V, Chicago, IL, Kristina Heinemann, U.S. EPA, Washington, DC, Rob Elias, U.S. EPA, Office of Research and Development, RTP, NC, Miguel Del Toral, U.S. EPA, Region V, Drinking Water Program, Susan Ashbrook, City of Columbus Attorney, Kirk Leifheit, Ohio EPA, Carolyn O'Neal, Ohio EPA. Melinda Holland, ENVision, Inc, the meeting facilitator was also present.

A pre-meeting of all the identified direct participant stakeholders to prepare for the stakeholder kick-off meeting later in the day was held. Prior to a discussion of the meeting itself participants discussed several issues raised by the City of Columbus. Among these issues was a modification/clarification of the original (formal) proposal submitted to EPA in June 1999.

- The City of Columbus attorney specifically requested that the 3 year window of flexibility for replacement of Lead Service Lines (LSLs) be available at anytime during the 15 year project period regardless of whether there had been a previous water treatment change. The City noted that there could be reasons for an Lead Action Level exceedance that were not tied to a previous drinking water treatment change and wanted the flexibility available through the XL project to apply to those additional circumstances.
- The City of Columbus requested that the Safe Drinking Water Act (SDWA) variance to provide regulatory flexibility from the U.S. EPA not be issued unless and until there is an action level exceedance. The City would like to work out the language of the variance and keep it on hold unless and until the City exceeds the action level;
- The City of Columbus would like a clearer definition of what constitutes a major drinking water treatment change for the purposes of shifting to increased drinking water monitoring; and
- The City of Columbus would like the Final Project Agreement (FPA) to define the duration of the increased drinking water monitoring period (i.e., when can they go back to reduced monitoring following a treatment change).

U.S. EPA agreed to consider each of the requests noted above. Specifically U.S. EPA asked for additional time to consider granting regulatory flexibility for a Lead Action Level exceedance not tied to a drinking water treatment change. During this discussion the City noted that their most current monitoring for lead at the tap indicated levels at 4, 3, 3, and 1 ppb. There are currently

28,000 LSLs in the City of Columbus. Formerly there were 10,000 more, but through various construction projects the number has been reduced down to 28,000.

Stakeholder Kick-off Meeting

3:00 PM

Stakeholder Meeting Participants: Phil Hyde, Ohio Department of Health (ODH); Barb Nixon, ODH; Pam Young, Columbus Health Department (CHD); Deborah Gray, Ohio State University/CHD; Diana Brady, CHD; Sean Hubert, CHD; Steve Gladman, Columbus Apartments; Larry Metzger, Columbus Realtors; Thomas Rathbun; Tania Leeatoa, Columbus Urban League; Mike Pompili, CHD; Dan Chatfield, ODH; Art Strauss, Simply Living; Susan Choe, Columbus Legal Aid Society; and Ted Woods.

Facilitator: Melinda Holland, ENVision, Inc.

The Meeting Agenda was followed as outlined. Meeting participants introduced themselves. Any participant who had not signed in was encouraged to do so. Any participant who wished to obtain a copy of any of the documents available was encouraged to leave their name and address on the document request list. Melinda Holland, the meeting facilitator, outlined the meeting process and Joan Tanaka and Kristina Heinemann from the U.S. EPA briefly described Project XL and Project XL Final Project Agreements, the implementing agreements for XL projects.

Lynn Kelly, the City of Columbus Water Division and Gary Garver, the City of Columbus Health Department outlined the City of Columbus operations with respect to the supply of drinking water and the Childhood Lead Poisoning prevention Program. A few highlights are noted below:

- 1,002,000 people are served by the Columbus Water Division
- Several sources of drinking water were noted, among them the Hoover Reservoir, Allen Creek, Scioto River (?), and groundwater sources at the Parsons Avenue wellfield and South wellfield.
- The water treatment process was described: zinc orthophosphate is added, the pH is kept above 7.2 for corrosion control.

Lynn Kelly briefly described the City's past experience in controlling for disinfection byproducts, tri-halomethanes (THM) and haloacetic acid (HAA). The initial MCL (federal drinking water standard) was set at 100 ppb. The City reported no difficulty in meeting this level in their drinking water. EPA promulgated new standards for disinfection by-products and set levels for the MCLs lower at 80 ppb for THM and 60 for HAA. The City, using conventional treatment techniques was still able to readily comply with these new levels set by the Stage 1 EPA regulations for controlling disinfection byproducts. When levels for EPA Stage 2 requirements were floated by the Agency as possible further limits to THM and HAAs at 40 and 30 respectively, the City made a water treatment change from alum to ferric chloride. Ferric chloride worked well in controlling for THM's but subsequent lead and copper monitoring indicated that the City had exceeded the Lead Action Level. The City stopped using ferric chloride and switched back to alum.

Lynn Kelly indicated that the City believed that it would be impossible to sample and replace 2000 LSLs as is required by the Lead and Copper Rule (under the SDWA) when a water system exceeds the Lead Action Level. As a result the City sought relief from the LSL sampling and replacement requirements through an XL proposal to the EPA. The program proposed by Columbus was modeled after a similar proposal submitted by the Portland Water Bureau in 1997.

In conclusion Lynn Kelly reported that approximately four weeks prior to the May 16 meeting the EPA had publicized “a new look” at the Stage 2 requirements for controlling disinfection by-products. This “new look” consists of seven options -- four of which the City believes it would not have difficulty complying with. As a result the City is less certain as to what, if any, water treatment change they would be making in the near future. None-the-less the City still believes that it would face significant obstacles in meeting the LSL requirements and thus remains interested in pursuing flexibility through the XL project.

Lynn Kelly spoke about the City’s new request for additional flexibility if the action level were exceeded, but not as a result of a treatment change.

Gary Garver of the Columbus Health Department next reported on the Childhood Lead Poisoning Prevention Program and Lead Safe Columbus. The program proposed through the XL project would provide a long period of stable funding for controlling childhood exposure to household lead paint and dust. The program is comprehensive and provides for investigation of homes and medical oversight. In Columbus there are 10,000 reports of Elevated Blood Lead Levels (EBLLs) per year. The additional funding that would result from the XL project would allow the City to take a proactive approach. Over nine years, since 1991, there has been a 38% reduction in Blood Lead Levels (BLLs) in Columbus. In that same time period there has never been a documented case where a child was poisoned by lead in drinking water.

Miguel Del Toral briefly described the XL process that the City’s proposal had been through and highlighted the fact that EPA had decided the proposal had merit and had entered into Final Project Agreement negotiations with the City. In deciding to move forward with the proposal EPA noted several conditions in the selection letter sent to the City (EPA’s selection letter was distributed at the stakeholder meeting). Miguel mentioned some of the conditions in his presentation to the group, notably the condition that the City consult with the State of Ohio and EPA before making a treatment change that might affect the concentration of lead in drinking water. Miguel also noted the City’s recent request to dissociate a change in water treatment with the flexibility provided by EPA. The City’s request would mean that if the Lead Action Level were exceeded for any reason, the Water Division would be eligible for the requested flexibility under XL.

Kirk Leifheit from the Ohio EPA stated the State’s support for the XL project.

Q & A Session – Project Stakeholders

Q: Where is Lead Safe Columbus Program (LSCP) funding coming from?

A: Lynn Kelly - City water funds are completely separate from the general funds and cannot be

used for other than water purposes. Funding for LSCP is possible because by transferring funds to the LSCP the Water Division avoids the expense of possibly testing and possibly replacing LSLs. The City's expenses regarding LSL sampling/replacement are as follows: sampling -- \$200/lead service line connection; replacement --- \$3000/connection; monitoring --- \$400,000/year; \$60,000/year

Q: Where are areas with LSLs? Do residents know? What is the density of the population in those areas? Will residents be informed if service lines to their home would have been replaced? Residents have a right to know if they are exposed to high lead levels. Is it beneficial to delay the LSL replacement if it must be done eventually? Which portion of the lines are we talking about? There is a problem with the lead paint program (some kind of loophole?) whereby a property owner can claim that they don't know anything about lead paint levels on the property.

A: Gary Garver - The law has been changed to require testing (full disclosure) when properties are sold so that people can't say they don't know what the levels are. Gradually the ability of people to say "I don't know" will be diminished – the greater the visibility [of lead issues] the less chance people can hide [information on potential exposure to lead]. There is no law currently that forces property owners to do assessments.

Lynn Kelly - re: where the LSLs are - The older parts of Columbus have the LSLs. The City quit using them after the 1940s. There are a total of approximately 28,000 LSLs in the City. Of 2000 LSL sites, only 19 have lead pipes from the home to the shut-off point. The City replaces the portion of the pipe that it owns. During routine maintenance or street repairs, LSLs are replaced with copper pipe. There is tin/lead solder in household plumbing that is a source of lead in drinking water. Houses built around 1997 are more likely to have elevated levels of lead at the tap. Some newer houses have plastic lines. The City uses copper pipes. If the Lead Action Level is exceeded there will be public notice to all Water Division customers. Notification of an Action Level exceedance will also appear in the Consumer Confidence Report (CCR) that is mailed out to all Water Division customers on an annual basis.

Q: Are there new studies on the corrosion control treatment the City installed (or attempted to install) in 1997, or new treatment options available to minimize the likelihood of lead levels rising.

A: Ken Button said that the City knows that ferric chloride (actually the sulfate to chloride ratio change) was one of the factors that caused the exceedance in 1997. They also increased the dosage of zinc orthophosphate. Ken stressed that the key is to maintain the Optimal Water Quality Parameters values/ranges. Lynn Kelly - The City will do pilot studies (on a bench scale using "coupons" that simulate actual conditions in the water distribution system) before putting in full-scale treatment. There is no lead in the water sources (treatment plants or water mains) - It all comes from plumbing materials.

Q: What is planned for educational programs?

A: Gary Garver - Plan to do 'Train the trainer' programs. Train community groups and have them train folks. Train maintenance crews, first time homebuyers financial institutions, Section 8

landlords, etc.

Q: What protection does homeowner who has to re-plumb his home have? What City code prohibits the use of lead materials?

A: Lynn Kelly - There is a Federal lead ban in effect. Fixtures are limited to 8% lead. Some manufacturers produce lead free fixtures.

Facilitator, Melinda Holland of ENVision, Inc. suspended the Q&A portion of the meeting and went over options for stakeholder involvement in the project and development of the Final Project Agreement. Melinda asked that any of the stakeholders present who wished to participate directly in the development of the FPA speak to her at the conclusion of the meeting.

Stakeholder Participation

- Two individuals expressed interest in being direct participants in negotiating the FPA and three others people expressed interest in commenting on the FPA.
- There were no comments on the tentative schedule distributed to the group.
- Any of those who were interested in being direct participants were asked to contact Gary Garver by Friday (5/26).

Q&A Continued

Q: Would routine tap monitoring for lead be required? If so, and this shows an AL exceedance, would the City be exempt from LSL testing/replacement?

A: Gary Garver summarized the monitoring EPA set as a condition of project selection.

Stakeholder Comment: One stakeholder expressed concern that EPA is using 1991 CDC information which says 10 ug/dL is a problem [from CDC chart of Actionable Lead Levels] when there is a more recent report that suggests that there are damaging health effects at 5 ug/dL. The specific concern is that the XLC proposal says that nothing will be done unless the lead blood level is above 10 ug/dL. There is nothing preventing the City or State from having more stringent standards than the Feds.

A: Gary Garver responded that once the CDC revises its intervention program the City will make corresponding adjustments. He also stated that the City cannot unilaterally choose to lower standards.

Stakeholder Comment: Favor intervention more quickly, at levels of blood lead below 10 ug/dL.

A: Gary Garver - Ten years ago, the intervention level was 25ug/dL, now it's 10, and there is

plenty of information showing health effects at lower levels. Gary mentioned that below 10 ug/dL, public education is as effective as other activities such as direct intervention. The City has seen positive effects from education and training at 19 ug/dL and above. A nurse with the Lead Safe Columbus Program also added that although intervention is done only above 10ug/dL, in daycare centers nurses are doing public education [at levels below 10], but it is not documented.

Miguel Deltoral mentioned that people can suggest ideas on LSCP reporting/tracking, etc, as part of comments on the draft FPA.

7:00pm Stakeholder Kick-off Meeting

Stakeholder Meeting Participants: Diann (Watkins) White; Barb Nixon, ODH; Phil Hyde, ODH; JoAnne St. Clair; and Art Strauss, Simply Living.

The same U.S. EPA, City and Ohio EPA presentations were repeated for the 7pm meeting.

Q & A

Q: Are LSLs going to be replaced as part of routine maintenance?

A: Lynn Kelly - yes. Gary Garver clarified that in 1997, the sites which exceeded the AL were non-LSL sites and newer houses. It was the lead/tin solder. Lynn Kelly - 10 to 1 they found that the lead/tin solder sites contributed more than LSLs. In addition over time the lead service lines have become coated with insoluble solids that have accumulated on the pipes. [This provides a layer of coating between the drinking water and the lead pipe, i.e., the water has less contact with the lead pipe and is therefore less likely to pick up lead from the pipe.]

Stakeholder Involvement

Melinda Holland requested that anyone interested in being a direct participant in the FPA negotiations notify Gary Garver by Friday (5/26).

Comment: Meeting location was not ideal. Evening session was a good idea.

A: Melinda Holland -- Future meetings could be held at schools, churches, etc.

Comment: Two meetings was not a good idea. Would like the City/agency folks present with general public together in an evening session to share ideas.

Comment: Found it valuable to have health department folks present.

Q: What did Columbus do from 1991 (when the LSCP started) to 1995 regarding the 1989 requirement that all medicaid eligible children be tested for lead?

A: Gary Garver - There is a State law requiring all lead levels for children to be reported. Data

became reliable only starting with 1995. From 1989 to 1991, only Cleveland, Akron and Cincinnati had lead programs. Columbus only started with the CDC program in 1991.

Nationally, less than 20% of medicaid eligible children are screened for lead. In Ohio, it is approximately 10%. There is no data available for Columbus.

Action Items

- Provide any Gary Garver any additional names for the project mailing list
- Inform Gary Garver by May 26 of interest in being a direct participant stakeholder.