

February 14, 2023

Federal-Provincial-Territorial Committee on Drinking Water water-eau@hc-sc.gc.ca

RE: Guidance on Sampling and Mitigation Measures for Controlling Corrosion

The Canadian Water and Wastewater Association (CWWA) is the professional association representing Canada's water and wastewater professionals and serves as THE national voice for municipal water utilities. For almost 40 years, the CWWA has collaborated with Health Canada and the Committee for Drinking Water to support the development of practical and effective policies and guidance to Canada's water utilities. To achieve this, the CWWA has formed committees of experts, utility leaders and academics, to review and provide practical comments to the federal government and it agencies. One such committee is our CWWA Drinking Water Committee.

The following is a Summary of Committee Comments on Health Canada Consultation Document – Guidance on Sampling and Mitigation Measures for Controlling Corrosion (released for public consultation on January 12, 2023 until Feb 15, 2023):

The CWWA Drinking Water Committee members have reviewed the consultation document and we have a number of concerns with it. Overall, we feel that the document has several shortcomings that should be addressed and the release of the document in its current state would have a significant adverse impact on water systems in the country. Our committee members, or their organizations, will be submitting separate, detailed responses to the public consultation document. Here are some of the main points and concern with the document that emerged from our committee discussions:

- 1. Jurisdiction and responsibilities: The document defines the distribution system as including both the municipal distribution system (typically the responsibility of the municipality or utility) and building plumbing distribution systems (typically the responsibility of the building owner or manager). As written, the document implies, or could be construed as implying, that utilities have responsibility for building plumbing systems, including implementing the recommended monitor programs within buildings and potentially addressing sources of lead release within the plumbing systems. Utilities do not have the jurisdiction nor the resources to assume these responsibilities. We would like a revised document to make a clear distinction between responsibilities of utilities and other authorities. The term "responsible authority" is used in the document, rather loosely at times, and could benefit from more precise application.
- 2. Overall document focus: Although it is presented as a general corrosion control document, the document focuses heavily on lead and on procedures for sampling for lead. Other metals, such as copper, are treated lightly. This is important because strategies for lead might conflict with strategies for other metals, such as copper. In addition, there is little information or guidance on how a utility might develop and implement a corrosion control program in response to testing results. There needs to be guidance for utilities on how to effectively understand, monitor and evaluate corrosion control. There should also be greater emphasis on lead service line removal programs as this is one of the primary ways that water systems will reduce lead at the tap.

- 3. **Alignment with Lead MAC Technical Document**: Other than adoption of the MAC of 0.005 ug/L as a trigger point, it is not clear how this document aligns with the Lead MAC technical document that was published in 2019. We suggest Health Canada consider adding wording to the Corrosion Control document to highlight the touchpoints and alignment with the Lead technical document.
- 4. **Literature review**: The literature review seems to be dated and missed some important work on corrosion control that has been done in Canada and with Canadian utilities. For example, the work done by Dr. Gagnon's team at Dalhousie with Halifax Water was not included.
- 5. **Recommended sampling protocols**: The recommended sampling approach for lead at the tap, as described in Section A.2.5, is confusing and conflicting at times. This section on the number and selection of sites for residential monitoring requires clarification. According to the proposed sampling protocols, sampling efforts would be significant and likely beyond the resources available to a utility.
- 6. **RDT Sampling:** The document relies heavily on random daytime (RDT) sampling as one of the alternatives for assessing corrosion control. In our committee members' experience, RDT sampling is quite variable and, consequently, a large number of samples is required in order to properly assess population exposure. This does not seem to align with the recommended sampling protocols in Section A.2.5 and Table.2 in particular. RDT sampling should be used for an overall system assessment and population exposure assessment, but it should not be used to identify lead sources in buildings and for monitoring sentinel sites.
- 7. **Corrosion Indices:** While these have been misinterpreted at times, we were concerned that there was virtually no mention of these indices in the document, other than discouraging their use. Since some major utilities use these indices to monitor corrosion in their distribution systems, additional information on why their use should be discontinued would be beneficial.
- 8. **Review Period:** While the document was posted for public comment on December 17, the list serve, which most of our members rely on to be informed of new guidelines for consultation did not share the document until January. This resulted in a much shorter period to review such an important document.

We would like to offer to meet with Health Canada in the near future to review and discuss the committee concerns and to help determine a path forward. We feel that the Corrosion Control document will be a critical guidance document that will be referred to by utilities, government regulators, consultants, members of the public and other stakeholders. We would like to offer our utility operations perspective and expertise to Health Canada as they revise the document for final publication.

Sincerely,

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