

Important Information About Your Drinking Water

We're pleased to present to you the Annual Water Quality Report for 2016. This report is designed to inform you about the water quality and services we deliver to you every day. Maryland Environmental Service (MES), an Agency of the State of Maryland, operates the water treatment facility and prepared this report on behalf of Crownsville Hospital Center.

The Environmental Protection Agency (EPA) regulates Public Water Systems and the contaminants found in water through the implementation of the Safe Drinking Water Act (SDWA). The SDWA sets regulations and guidelines for how public water systems operate and identifies several hundred drinking water contaminants, establishes monitoring frequencies and limitations. The Maryland Department of the Environment (MDE) is responsible for the enforcement of the SDWA and routinely complete Sanitary Surveys as part of their ongoing inspection and monitoring program. MES provides safe dependable operations of the water system and is dedicated to consistently providing high quality drinking water that meets or exceeds the SDWA standards.

If you have any questions about this report or have questions concerning your water utility, please contact **Jay Janney** at **410-729-8200**, e-mail jjann@menv.com.

For More Information:

For the opportunity to ask more questions or participate in decisions that may affect your drinking water quality, please contact Mr. Rick Pendleton, Maintenance Dept for the Crownsville Hospital Center at 410-729-6000.

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The Crownsville Hospital Center water works consists of four drilled wells in the Magothy formation, a treatment facility, two 250,000 gallon elevated water storage tanks and a distribution network. After the water is pumped out of the wells, it is aerated, settled, filtered, and passed through an ion exchange unit to reduce contaminants and remove radium. Finally, disinfectant is added to protect against microbial contaminants. The Maryland Department of the Environment has performed an assessment of the source water. A copy of the results is available. Call Maryland Environmental Service at 410-729-8350

Some people may be more vulnerable to contaminants in drinking water than the general population. Immuno-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. EPA/CDC guidelines on appropriate means to lessen the risk of infection by Cryptosporidium and other microbial contaminants are available from the Safe Drinking Water Hotline (1-

Crownsville Hospital Center Treated Water Quality Report 2016

Definitions:

- ♦ Maximum Contaminant Level Goal (MCLG) The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.
- Maximum Contaminant Level (MCL) The highest level of a contaminant that is allowed in drinking
 water. MCLs are set as close to the MCLGs as feasible using the best available treatment technology.
- ◆ **Action Level** The concentration of a contaminant which, if exceeded, triggers treatment or other requirements which a water system must follow
- ◆ **Treatment Technique (TT)** A required process intended to reduce the level of a contaminant in drinking water
- ◆ Turbidity Relates to a condition where suspended particles are present in the water. Turbidity measurements are a way to describe the level of "cloudiness" of the

water.

- ◆ pCi/I Picocuries per liter. A measure of radiation.
- ♦ ppb parts per billion or micrograms per liter
- ◆ ppm parts per million or milligrams per liter

Special points of interest:

The water at the Crownsville Hospital Center is tested for over 120 different compounds.

The Crownsville Hospital Center Drinking Water met all of the State and Federal requirements.

Drinking Water, including bottled water, may reasonably be expected to contain at least small amounts of some compounds. The presence of these compounds does not necessarily indicate that water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's (EPA's) Safe Drinking Water Act Hotline (1-800-426-4791).

RADON:

We constantly monitor the water supply for various constituents. We have detected radon in the water supply in a sample collected on September 17, 2008. At this time, there is no Federal Regulation for radon levels in drinking water. Compared to radon entering the home through soil, radon entering the home through tap water will in most cases be a small source of radon in indoor air. Exposure to air transmitted radon over a long period of time may cause adverse health effects. The radon result of the September 2008 sample was 31.1 pCi/l (pCi/l = picocuries per liter, a measure of radioactivity). For additional information call the EPA radon hotline at 1-800-SOS-



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Contaminant	Highest Level Allowed (EPA's MCL)	Highest Level Detected	Ideal Goal (EPA's MCLG)
Regulated at the Treatment Plant			
Combined Radium (226 & 228) (2016 Testing) Typical Source of Contamination: Erosion of natural deposits	5 pCi/l	1.3 pCi/l	n/a
Gross Alpha (2016 Testing) Typical Source of Contamination: Erosion of natural deposits * Please read page 4 of the Consumer Confidence report for	15 pCi/l	0.0 pCi/l*	0.0 pCi/l
Regulated in the Distribution System	more information on Gross	Tipha Dinters	
Total Trihalomethane (TTHM) (2016 Testing) Typical Source of Contamination: By-product of drinking water	80 ppb er disinfection	29.6 ppb (Range: 15.8 ppb to 29	n/a 2.6 ppb)
Haloacetic Acids (HAA5) (2016 Testing) Typical Source of Contamination: By-product of drinking water	60 ppb er disinfection	7.2 ppb (Range: 4.5 ppb to 7.2	n/a ppb)
Chlorine Water additive used to control microbes * Annual Average of results	4 ppm	1.00 ppm * Range (0.13 - 1.62)	4 ppm
Regulated in the Distribution System	Action Level	90th percentile	Ideal Goal
Copper (2014 Testing)	1300 ppb	136 ppb	1300 ppb
Typical Source of Contamination: Corrosion of household plun Lead (2014 Testing) Typical Source of Contamination: Corrosion of household plun	15 ppb	6 ppb	0 ppb

The table above lists all the drinking water contaminants that were detected during the 2016 calendar year.

The presence of these compounds in the water does not necessarily indicate that the water poses a health risk. Unless otherwise noted, the data presented in the table is from testing done January 1 – December 31, 2016.

The State requires us to monitor for certain contaminants less than once per year because the concentrations of these contaminants are not expected to vary significantly from year to year.

Water Security is Everyone's Responsibility

Water system security continues to be an enormously important issue. If you notice suspicious activities in or around local water utilities, such as persons cutting or climbing facility fencing, loitering, tampering with equipment or other similar activities, please contact your local law enforcement agency immediately by dialing 911.

Sources of Drinking Water

The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs and wells. As water travels over the surface of the land or through the ground, it dissolves naturally-occurring minerals and, in some cases radioactive material, and can pick up substances resulting from the presence of animals or from human activity.

In order to ensure that tap water is safe to drink, EPA prescribes regulations which limit the amount of certain compounds in water provided by public water systems. We treat our water according to EPA's regulations. Food and Drug Administration regulations establish limits for contaminants in bottled water which must provide the same protection for public health.



Lead Prevention

If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. The Crownsville Hospital Center is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your drinking water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the EPA Safe Drinking Water Hotline at 1-800-426-4791 or at http://www.epa.gov/safewater/lead.

Important Information Regarding Gross Alpha Emitters:

Alpha emitters are naturally occurring radiations in soil, air and water. These emitters generally occur when certain elements decay or break down in the environment. The emitters enter drinking water through various methods including the erosion of natural deposits. There are no immediate health risks from consuming water that contains gross alpha, however some people who drink water containing alpha emitters in excess of the MCL over many years may have an increased risk of getting cancer. Currently, the highest level of gross alpha detected is 0.0 pCi/L which is below the 15 pCi/L MCL.





Larry Hogan Governor

Boyd Rutherford Lieutenant Governor

Ben Grumbles Secretary

Consumer Confidence Report Certification

Water Supply Syste	em Name: Crownsville Hospital Center
PWSID: 002-0009	County: Anne Arundel
Certi CCR	r Confidence Report due to customers and to MDE no later than July 1 st ; ification of Delivery due to MDE no later than October 1 st each year. and Certification are best delivered together by email attachment if possible.
appropriate notices	Consumer Confidence Report for the year 2016 has been distributed to customers (and sof availability have been given) in accordance with COMAR 26.04.01 by <u>July 1, 2017</u> . I further ort is correct and consistent with compliance monitoring data previously submitted to MDE.
Certified by:	Name Jay Janney
	Signature TitleEnvironmental Specialist
	Phone # 410-729-8361
Specific details on	CCR distribution: (<u>Date</u> all that apply)
5/31/17 Date CCR	was delivered to MDE.
5/31/17 Date CCR	was distributed by mail.
□Appro	was distributed by other methods. List methods of delivery: ved electronic delivery plan is on file with MDE. (Check if applicable) ce of CCR availability was published.
efforts in	faith efforts were used to reach non-bill paying consumers. Those necluded the following recommended methods: **Date* of posting the CCR on the Internet at: **Date* of mailing the CCR to postal patrons (bulk mail) within the service area (attach zip codes). **Date* of advertising availability of the CCR in news media (attach copy of announcement). **Date* of publication of CCR in local newspaper (attach copy). **Date* of delivery of multiple copies to single bill addresses serving several persons such as: apartments, businesses, and large private employers. **Date* of delivery to community organizations (attach a list).
□ Mo □ MC	
Date posted	stems serving 100,000 or more persons: d CCR on a publicly accessible Internet site. List Internet address: delivered to other agencies or additional methods used. (Optional, attach list or description).
MDE/WMA/COM.0	25 (Revised 3/2016)

Maryland Code of Regulations

26.04.01.20-2 Consumer Confidence Report Delivery

- (G.) Report Delivery and Record Keeping.
- (1) Except as provided in §H of this regulation, each supplier of water to a community water system shall mail or otherwise directly deliver one copy of the report to each customer.
- (2) The supplier of water to a community water system shall make a good faith effort to reach consumers who do not get water bills, using means recommended by the State. Good faith effort will be tailored to the consumers who are served by the system but are not bill-paying customers, such as renters or workers. A good faith effort to reach consumers would include a mix of methods appropriate to the particular system such as: posting the reports on the Internet; mailing to postal patrons in metropolitan areas; advertising the availability of the report in the news media; publication in a local newspaper; posting in public places such as cafeterias or lunch rooms of public buildings; delivery of multiple copies for distribution by single-biller customers such as apartment buildings or large private employers; or delivery to community organizations.
- (3) Not later than the date the system is required to distribute the report to its customers, each supplier of water for a community water system shall mail a copy of the report to the State, followed within 3 months by a certification that the report has been distributed to customers, and that the information is correct and consistent with the compliance monitoring data previously submitted to the State.
- (4) Not later than the date the system is required to distribute the report to its customers, each community water system shall deliver the report to any other agency or clearinghouse identified by the State.
 - (5) Each community water system shall make its reports available to the public upon request.
- (6) Each community water system serving 100,000 or more persons shall post its current year's report to a publicly accessible site on the Internet.
- (7) Any supplier of water subject to this regulation shall retain copies of its consumer confidence report for no less than 3 years.

SYSTEMS SERVING < 10,000

- (H.) The requirement of §G(1), (5) and (6) of this regulation for a supplier of water to a community water systems serving less than 10,000 persons has been waived. Such systems shall:
- (1) Publish the reports in one or more local newspapers serving the area in which the system is located;
- (2) Publish a notice in the newspaper, or by other means approved by the State, that informs the customers that the reports will not be mailed; and
 - (3) Make the reports available to the public upon request.

SYSTEMS SERVING ≤ 500

(I.) Supplier of water to systems serving 500 or fewer persons may forego the requirements of paragraphs §H (1) and (2) if they provide notice at least once per year to their customers by mail, door-to-door delivery or by posting in an appropriate location that the report is available upon request.

Crownsville State Hospital, PWSID 002-0009

Address list:

(5 copies)

Mr. William Norton Fairfield Nursing and Rehabilitation Center 1454 Fairfield Loop Crownsville MD 21032

(10 copies)

Department of General Services 100 Community Place Crownsville MD 21032

(4 copies)

Attn: Ms. Jacobs- Director
Play and Learn at Community Place
50 Community Place
Crownsville MD 21032

(4 copies)

Ms. Christina M. Koch, LCSW-C Child Advocacy Center 41 Community Place Crownsville MD 21032

(4 copies)

Gaudenzia 107 Circle Drive Crownsville MD 21032

(4 copies)

Mr. Peter D'Souza – Executive Director Hope House 26 Marbury Road Crownsville MD 21032 (4 copies)

Attn: Blanca Ramos- Director Chrysalis House 1570 Crownsville Road Crownsville MD 21032

(4 copies)

Mr. Rick Pendleton Maintenance Department 1520 Crownsville Road Crownsville MD 21032

(3 copies)

Anne Arundel County Food Bank P.O. Box 650 Crownsville, MD 21032

(3 copies)

Anne Arundel County Criminal Investigative Division 41 Community Place Crownsville MD 21032

(3 copies)
Anne Arundel County Fairgrounds
1450 Generals Hwy
Crownsville MD 21032