

# DRINKING WATER EMERGENCIES

## INTRODUCTION

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Drinking water in California comes from surface water sources including rivers, streams, lakes and reservoirs in addition to groundwater sources including springs, wells and other infrastructure. Surface water sources typically provide a larger portion of the drinking water supply although the amount can vary depending on annual precipitation. During periods of normal to high precipitation, surface water sources can make up a higher percentage of the drinking water supplies while the use of groundwater sources increases during periods of drought. Smaller water systems and private domestic systems that serve individual homes typically depend more heavily on groundwater.

The delivery of clean, safe and wholesome drinking water depends on integrated water quality management from source to tap. The provision of drinking water to the consumer involves:

- Surface water and/or groundwater sources
- Collection, treatment, storage, and distribution facilities
- Water system operators
- State and local agencies that provide regulatory oversight

The regulation of water systems is shared among state and local agencies in California. The State Water Resources Control Board (SWRCB) is responsible for the implementation of the federal Safe Drinking Water Act and has overall responsibility for implementation of the California Safe Drinking Water Act. The SWRCB's Division of Drinking Water is responsible for the regulatory oversight of over 7,600 Public Water Systems (PWS), defined as systems that have 15 or more service connections or serve at least 25 individuals daily at least 60 days out of the year.

The majority of PWS (approximately 63%) in California serve less than 200 service connections. Through a written agreement with the Local Health Officer (LHO), SWRCB may delegate its authority to regulate these PWS with less than 200 service connections to a local agency designated as the Local Primacy Agency (LPA). Currently, 30 LPAs exist in California (see list at end of chapter). The LPA is typically the local health department (LHD) or environmental health department (EHD).

Water systems with less than 15 service connections or that serve less than 25 individuals, as well as thousands of private domestic systems that serve individual homes, are outside the scope of regulatory authority of SWRCB. Water systems too small to be classified as PWSs, known as State Small Water Systems (5-14 service connections), are regulated at the county level. A few jurisdictions regulate even smaller systems called Local Small Water Systems (2-4

service connections), although the operation of these very small systems is unregulated in most counties. The operation of private domestic water systems is largely unregulated.

TYPE	SIZE	REGULATORY AGENCY
Public Water System	>200 service connections <sup>1</sup>	SWRCB Division of Drinking Water
≥15 service connections or ≥25 people	15-200 service connections	SWRCB Division of Drinking Water or LPA
State Small Water System	5-14 service connections, <25 residents	LHD/EHD
Local Small Water System	2-4 service connections, <25 residents	LHD/EHD (selected counties)
Domestic Water Systems	Individual homes	Operation not regulated

<sup>1</sup>A service connection is typically one home.

Although the vast majority of Californians are served by water systems that meet water quality standards, some water systems, commonly smaller systems, struggle to achieve compliance with applicable standards, typically due to resource challenges.

If a water system failure occurs, e.g., supply disruption, violation of a primary drinking water standard, or other condition with the potential for adverse effects on human health, the system operator is required to take corrective action and make notifications in coordination with the responsible regulatory agency in accordance with federal and state requirements. The federal Public Notification Rule requires that all PWSs notify their consumers any time a PWS violates a national primary drinking water standard or a situation poses a risk to public health.

OVERVIEW OF THE PUBLIC NOTIFICATION RULE	
<b>Title</b>	Public Notification Rule, 65 FR 25982, May 4, 2000.
<b>Purpose</b>	To notify the public of drinking water violations or situations that may pose a risk to public health.
<b>General Description</b>	The Public Notice Rule requires all PWSs to notify their consumers any time a PWS violates a national primary drinking water standard or has a situation posing a risk to public health. Notices must be provided to persons served (not just billing customers).
<b>Utilities Covered</b>	All PWSs
<b>Timing and Distribution</b>	Notices must be sent <u>within 24 hours</u> , <u>30 days</u> , or <u>one year</u> depending on the tier to which the violation is assigned. The clock for notification starts when the PWS learns of the violation.

**TIER 1 (IMMEDIATE NOTICE, WITHIN 24 HOURS)**

Tier 1 Public Notice is required to be issued as soon as practical but no later than 24 hours after the PWS learns of the violation or situation including:

- Distribution system sample violation when fecal coliform or *E. coli* are present; failure to test for fecal coliform or *E. coli* after initial total coliform distribution system sample tests positive.
- Nitrate, nitrite, or total nitrate and nitrite maximum contaminant level (MCL) violation; failure to take confirmation sample.
- Special notice for non-community water systems (NCWSs) with nitrate exceedances between 10 mg/L and 20 mg/L, where system is allowed to exceed 10 mg/L by primacy agency.
- Chlorine dioxide maximum residual disinfectant level (MRDL) violation when one or more of the samples taken in the distribution system exceeds the MRDL on the day after a chlorine dioxide measurement taken at the entrance to the distribution system exceeds the MRDL, or when required samples are not taken in the distribution system.
- Exceedance of maximum allowable turbidity level if elevated to a Tier 1 notice by primacy agency.
- Waterborne disease outbreak or other waterborne emergency.
- Detection of *E. coli*, enterococci, or coliphage in a ground water source sample.
- Other violations or situations determined by the primacy agency.

A Tier 2 Public Notice is required to be issued as soon as practical or within 30 days. Repeat notice every 3 months until violation or situation is resolved.

- All MCL, MRDL, and treatment technique violations, except where Tier 1 notice is required.
- Monitoring violations if elevated to Tier 2 notice by primacy agency.
- Failure to comply with variance and exemption conditions.
- For ground water systems providing 4-log treatment and conducting Ground Water Rule (GWR) compliance monitoring, failure to maintain required treatment for more than 4 hours.
- Failure to take any required corrective action or be in compliance with a corrective action plan for a fecal indicator-positive ground water source sample.
- Failure to take any required corrective action or be in compliance with a corrective action plan for a significant deficiency under the GWR.
- Special public notice for repeated failure to conduct monitoring for *Cryptosporidium*.

**Turbidity consultation** is required when a PWS has a treatment technique violation resulting from a single exceedance of the maximum allowable turbidity limit or an MCL violation resulting from an exceedance of the 2-day turbidity limit. The PWS must consult their primacy agency within 24 hours. Primacy agencies will then determine whether a Tier 1 Public Notice is necessary. If consultation does not occur within 24 hours, violations are automatically elevated to require Tier 1 Public Notice.

**TIER 3 (ANNUAL NOTICE)**

- A Tier 3 Public Notice is required to be issued within 12 months and repeated annually for unresolved violations.
- All monitoring or testing procedure violations, unless primacy agency elevates to Tier 2, including failure to conduct benchmarking and profiling (surface water systems) and failure to develop a monitoring plan (disinfecting systems).
- Operating under a variance and exemption.
- Special public notice for availability of unregulated contaminant monitoring results.
- Special public notice for fluoride secondary maximum contaminant level (SMCL) exceedance.

Maximum Contaminant Levels (MCLs) have been established for individual drinking water contaminants based on exposure to an estimated water intake typical for a healthy, average individual. Certain populations, e.g., hemodialysis patients, are exposed to far greater volumes of water than healthy, average individuals, making such patients particularly vulnerable to water quality problems due to the risk of cumulative exposure. An average hemodialysis patient may be exposed to nearly 600 liters of water per week, while a more typical exposure for a healthy individual is 15-20 liters of water. Dialysis facilities conduct additional treatment of incoming municipal water but rely upon the source water meeting Safe Drinking Water Act standards. If a dialysis center or hospital performing dialysis is informed of an MCL exceedance in the drinking water supply or other condition that poses a risk to health, it may be possible for the facility to take further action to treat the water. However, being unaware of an MCL exceedance has the potential to lead to unnecessary adverse health implications in vulnerable populations.

Similarly, food processors, as well as water and beverage bottlers, must be made aware when the water supply has been compromised.

There are three types of Unsafe Water Notices, these are Tier 1 notices:

- Boil Water Notice – Indicates that a water supply is unsafe due to microbiological contamination that can be inactivated by boiling water at a rolling boil for at least one minute. (At altitudes above 5,000 feet, water should be held at rolling boil for at least three minutes.) Consumers are advised to boil water intended for drinking, food preparation, brushing teeth and washing dishes, or disinfect using 1/8 teaspoon fresh, unscented, liquid household bleach per gallon of water and allow to stand for 30 minutes before using. Boiling or disinfecting water can kill most disease-causing microorganisms that may be present in the water.
- Do Not Drink Notice – Indicates that a water supply is unsafe due to a contaminant that cannot be removed by boiling or disinfection. Consumers are advised to use an alternate source of water for drinking, food preparation, and brushing teeth. This notice is used

when the contaminant is known (e.g., nitrate contamination), the contaminant does not pose a health threat due to bodily contact, and boiling or disinfecting the water will not remove the contamination.

- Do Not Use Notice – Indicates that a water supply is unsafe due to suspected or unknown contamination, or a known contaminant that poses a health threat upon bodily contact. Consumers are advised to use an alternate supply of water for all purposes including drinking, food preparation, brushing teeth and personal hygiene, and other household uses. A Do Not Use Notice can be issued as a precaution when water quality is uncertain.

Unsafe water notices can be issued by the water system operator, SWRCB, LPA, or LHO. Under most circumstances, SWRCB or LPA, who have direct regulatory jurisdiction over water systems, will prescribe an unsafe water notice to the affected water system operator who is responsible for providing the notification to its consumers. The LHO is empowered to take measures, including the issuance of Unsafe Water Notices, to prevent the spread of communicable or reportable diseases. Furthermore, during a declared emergency, the LHO may take any preventive measure that may be necessary to protect and preserve the public health from any public health hazard, including the issuance of Unsafe Water Notices. To ensure coordination among involved agencies, the LHO should consult with SWRCB when considering the issuance of an unsafe water notice.

There may be critical situations where the water system operator may not be able to contact SWRCB, LPA or LHO and will issue an unsafe water notice quickly to protect its customers. To ensure that a consistent message is conveyed, it is important that all partners (SWRCB, PWS, LHO, LPA) coordinate with each other.

When an area-wide, multi-jurisdictional unsafe water situation arises, care must be taken to ensure that all responsible agencies are contacted in order to develop a coordinated message prior to issuing any type of unsafe water notice. If interagency coordination cannot be achieved, notification of all agencies should be done as soon as possible. Without proper coordination, the issuance of varying notices to the public can lead to confusion and undermine the credibility of the involved agencies.

Whenever a water system does not or is incapable of issuing an unsafe water notice, the SWRCB can and will issue the unsafe water notice to the general public through the press and media.

The issuance of an Unsafe Water Notice should be considered, at a minimum, an *unusual event* that triggers increased communication and coordination between water systems, regulatory agencies and public health and medical partners (local and state) if there is a potential threat to public health.

In addition to public notification, it is also important that the water system notify the regulatory agency and health officials in accordance with its emergency notification plan of water disruption and/or quality issues in order to protect public health, including the health of vulnerable populations.

## RESPONSE ACTIONS

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Drinking water emergencies may result from the disruption or contamination of water supplies caused by infrastructure or operational failures, natural disasters, accidents or intentional acts of sabotage, and terrorism. Regardless of the cause, close coordination between water system operators, regulatory agencies, state and local health officials and other partners is necessary to minimize threats to public health.

### Emergency Drinking Water

Emergency response actions may include the procurement and distribution of emergency supplies of drinking water, such as bottled water, until a water system is restored to safe operation. If the water system operator does not have adequate resources or the capability to supply drinking water during an emergency, the operator should coordinate with and submit a resource request to the appropriate local agency in accordance with SEMS and local policies and procedures. For guidance and assistance with procurement and distribution of emergency alternate drinking water, please refer to the California Governor's Office of Emergency Services (Cal OES) guidance titled Emergency Drinking Water Procurement & Distribution Planning Guidance, May 2014 at <http://www.caloes.ca.gov/PlanningPreparednessSite/Documents/EmergencyDrinkingWaterProcurementDistributionPlanningGuidance2014.pdf>.

### Regulatory Agency

The regulatory agency may be the SWRCB or a local agency depending on the water system size and location. The regulatory agency is typically notified of an incident such as a service disruption or an unsafe water condition by the water system operator; however, notification may also be made by regulatory agency field staff, the California State Warning Center (CSWC), or the affected jurisdiction.

Upon learning of a service disruption, failure of a primary drinking water standard, or any condition that could adversely impact public health, the regulatory agency should:

- Contact the affected water system(s) for water system status information and/or send a representative to assess the impact on the water system(s).

- Notify local and state health officials as follows, depending on the type of regulatory agency:
  - SWRCB:
    - Notify the LHO of all occurrences that trigger Tier I public notification, and initial occurrences that trigger Tier 2 public notification. SWRCB District Engineers are the main point of contact with each LHO (or responsible local agency) in their district and are responsible for communicating such disruptions in water quality.
    - Notify the California Department of Public Health (CDPH) Duty Officer Program of all occurrences that trigger Tier I public notification, and initial occurrences that trigger Tier 2 public notification, cancellation of any Unsafe Water Notice, and any other significant water quality issues or threats not included in Tier I or Tier II notifications. CDPH Duty Officer Program will notify CDPH Program(s) that may be affected or involved in response.
    - Provide a representative to the Medical and Health Coordination Center (MHCC) to coordinate the reporting of water system status information, upon request of the MHCC
  - LPA: Notify the LHO of all occurrences that trigger Tier I public notification, and initial occurrences that trigger Tier 2 public notification
  - Local Agency (for State Small Systems and Local Small Water Systems): Notify the LHO of all occurrences that trigger public notification or other conditions that pose a threat to public health
- Provide technical assistance to the affected water system(s) to assist with the restoration of safe drinking water
- Coordinate with local and state public health agencies to maintain awareness of water system status information
- Assist water system operator(s) with resource requests:
  - Emergency Alternate Drinking Water requests are typically made through the emergency management agency for the Operational Area (or Operational Area Emergency Operations Center (EOC) if activated). The Medical and Health Operational Area Coordination (MHOAC) Program should be notified of such Emergency Drinking Water requests.
- The regulatory agency may ask the respective LHO or State Health Officer to issue an area-wide Unsafe Water Notice

- Coordinate with the affected jurisdiction or send an Agency Representative, depending on staff availability and the needs of the emergency, to the appropriate location (e.g., Incident Command Post, Area Command, Department Operations Center (DOC), EOC, Regional Emergency Operations Center (EOC), or State Operations Center (SOC))

### **Local Health Department (LHD)/Environmental Health Department (EHD)**

The LHD/EHD should receive notification of all occurrences that trigger Tier 1 public notification and Tier 2 public notification through the LHO, water system operator, regulatory agency, or SWRCB. Upon notification, the LHD/EHD should:

- Notify:
  - Local and state agencies in accordance with statutory and regulatory requirements and local policies and procedures; and
  - MHOAC Program partners as necessary.
- Take action, as needed, to protect public health. As a precaution, the LHO may issue an area-wide Unsafe Water Notice in coordination with the involved regulatory agency. The LHO should notify other health partners as needed when a notice has been issued and/or lifted.
- Assist with drinking water-related resource requests. Emergency Alternate Drinking Water requests are made through the emergency management agency for the Operational Area (or Operational Area EOC if activated). Assistance may also be required with the distribution of emergency alternate drinking water.
- Provide water system status information to MHOAC Program partners, e.g., Local Emergency Medical Services Agency (LEMSA), in accordance with local policies and procedures.
- Coordinate with affected field-level entities, MHOAC Program partners, Incident Command/Unified Command and DOCs/EOCs in accordance with local policies and procedures.
- If medical and health resources are needed that cannot be obtained through existing agreements or commercial vendors, request resources through the MHOAC Program in accordance with local policies and procedures. Local policies and procedures will determine the appropriate contact within the MHOAC Program since MHOAC Program functions are typically shared between multiple departments including the LHD, EHD, LEMSAs and mental/behavioral health agency. Include required logistical support (“wrap around services”) such as food, lodging, and fuel as part of the resource request. If non-medical and health resources are needed, request resources through the appropriate

local agency in accordance with local policies and procedures and inform the MHOAC Program.

### **MHOAC Program**

The MHOAC Program should receive notification of occurrences that trigger Tier 1 or Tier 2 public notification or other condition that poses a threat to public health. Upon notification, the MHOAC Program should:

- Notify:
  - RDMHC Program
  - CDPH and EMSA Duty Officer Programs (or the MHCC, if activated)
  - Emergency management agency for the Operational Area (or the Operational Area EOC if activated)
- Assist with drinking water-related resource requests. Emergency Alternate Drinking Water requests are made through the emergency management agency for the Operational Area (or Operational Area EOC if activated).
- Attempt to fill resource requests within the Operational Area or by utilizing existing agreements (including day-to-day agreements, memoranda of understanding, or other emergency assistance agreements).
- If requested resources (other than emergency drinking water) cannot be obtained within the Operational Area or through existing agreements, prepare a Resource Request that includes the need for logistical support (“wrap around services”) such as food, lodging, and fuel. Submit the resource request to the:
  - RDMHC Program, which will begin to coordinate the resource acquisition process; confirm receipt by the RDMHC Program
  - Emergency management agency for the Operational Area (or Operational Area EOC if activated). Confirm receipt and entry into the resource tracking system used by Cal OES (currently, Cal EOC)
- Notify the requestor of the outcome of the request and delivery details if the request is filled.
- Prepare a Flash Report or Medical and Health Situation Report. Be sure to include water system status information as it becomes available. The initial Medical and Health Situation Report may be provided verbally to the RDMHC Program under pressing circumstances.

- Within two hours of incident recognition, submit a Flash Report or Medical and Health Situation Report to the:
  - RDMHC Program
  - CDPH and EMSA Duty Officer Programs (or MHCC if activated)
  - Emergency management agency for the Operational Area (or the Operational Area EOC if activated) and other agencies in accordance with local policies and procedures.
  
- Provide updated Medical and Health Situation Reports as follows:
  - Once during each operational period at agreed upon times
  - When there are changes in status, prognosis or actions taken
  - In response to a request as communicated by the RDMHC Program.
  
- Coordinate with the affected field-level entities, including LHD/EHD, LPA, LEMSA, and SWRCB District Office/District Engineer, CDPH Duty Officer Program (or MHCC if activated) to share situational information.
  
- Coordinate with the RDMHC Program to obtain information including information on policy-level decisions for response activities and guidance developed by state-level programs coordinated through the MHCC.
  
- Ensure that situational information is provided to the RDMHC Program, emergency management agency for the Operational Area (or Operational Area EOC if activated), Emergency Services Coordinator for the Region, SWRCB Division of Drinking Water District Office/District Engineer, CDPH and EMSA Duty Officer Programs (or MHCC if activated) to support the requested resources. A Medical and Health Situation Report should be submitted with the resource request or as soon as possible.
  
- Support the Medical and Health Branch of the Operational Area EOC if activated.

**RDMHC Program**

The RDMHC Program typically receives notification of occurrences that trigger Tier I or Tier 2 public notification, or other condition that poses a threat to public health, from the MHOAC Program.

Upon notification, the RDMHC Program should:

- Notify and coordinate with the MHOAC Program and CDPH and EMSA Duty Officer Programs (or MHCC if activated).
- Notify and coordinate with emergency management agencies in accordance with policies and procedures, including the Cal OES Regional Duty Officer (or REOC if activated).
- Confirm that the MHOAC Program submitted the Medical and Health Situation Report to the CDPH Duty Officer Program (or MHCC if activated); if not, submit immediately.
- Confirm that the MHOAC Program submitted the Medical and Health Situation Report to the emergency management agency for the Operational Area (or Operational Area EOC if activated); if not, submit immediately.
- Confirm that the Cal OES Regional Duty Officer (or REOC if activated) received the information contained in the Medical and Health Situation Report; if not, submit immediately.
- If resources are requested, immediately begin the process of filling the resource request by coordinating with unaffected Operational Areas within the Mutual Aid Region.
- Coordinate with the Cal OES Regional Duty Officer (or REOC if activated) to ensure proper tracking and fulfillment of the resource request.
- Notify the CDPH Duty Officer Program (or MHCC if activated) that a resource request is being processed.
- Notify the requesting MHOAC Program, CDPH and EMSA Duty Officer Programs (or MHCC if activated), and Cal OES Regional Duty Officer (or REOC if activated) of the outcome of the request and delivery details if the request is filled within the Mutual Aid Region.
- Coordinate with the MHCC to ensure that information, policy-level decisions for response activities, and guidance developed by state-level programs are distributed to the MHOAC Program(s).
- Coordinate with CDPH and EMSA to support the Medical and Health Branch of the REOC if activated.

### **CDPH Duty Officer**

Upon notification of an occurrence that triggers Tier 1 or Tier 2 public notification, or other condition that poses a threat to public health, the CDPH Duty Officer should:

- Notify the CDPH Licensing and Certification Program and Food and Drug Branch, in addition to other CDPH programs (e.g., Division of Communicable Disease Control, Division of Environmental and Occupational Diseases Control, etc.) as needed.

- Notify the EMSA Duty Officer Program in the case of more serious and/or widespread unsafe water situations likely to affect healthcare facilities.
- Notify and share information with local health officials, e.g., LHD/EHD (which represents the MHOAC Program). If the MHCC is activated, activities related to the incident will be coordinated through the MHCC rather than the Duty Officer Programs.
- As a precaution, the State Health Officer may issue an area-wide Unsafe Water Notice in coordination with the applicable regulatory agency. The State Health Officer may also provide assistance to the regulatory agency in accordance his/her authority to protect and preserve public health.

### **EMSA Duty Officer**

Upon notification of a serious and/or widespread unsafe water situation likely to affect healthcare facilities, the EMSA Duty Officer should, as appropriate:

- Notify the RDMHC Program in the affected region.
- Notify and share information with relevant stakeholders, including local EMS agencies (LEMSAs).

### **CDPH Medical and Health Coordination Center (MHCC)**

The Medical and Health Coordination Center (MHCC) activates during emergencies to coordinate the state-level response of CDPH, EMSA and the Department of Health Care Services (DHCS). The MHCC functions as a central point of coordination between the involved state programs and RDMHC Programs, MHOAC Programs, and jurisdictional agencies.

The MHCC, if activated, may:

- Request a representative from the SWRCB be assigned to the MHCC to coordinate the reporting of water system status information (although the SWRCB normally sends a representative to the SOC rather than the MHCC).
- Send an alert through the California Health Alert Network (CAHAN) that the MHCC has activated, including MHCC contact information and hours of operation. (Note that the CDPH and EMSA Duty Officer Programs are the official points-of-contact outside MHCC operational hours.)
- Distribute state-level policy decisions, key information and guidance to the RDMHC Programs, MHOAC Programs, LHD/EHDs and LEMSAs, and support requests for state-level program information.

- Prepare a statewide Public Health and Medical (CA-ESF 8) Situation Report and distribute it to state and local partners in accordance with policies and procedures.
- Monitor medical and health resource requests and determine if state resources are needed, and fill resource requests as necessary.
- As a precaution, the State Health Officer may issue an area-wide Unsafe Water Notice in coordination with the applicable regulatory agency. The State Health Officer may also provide assistance to the regulatory agency in accordance his/her authority to protect and preserve public health.

## RESOURCE MANAGEMENT

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If drinking water-related resources are needed beyond existing emergency assistance agreements, the water system operator should submit a resource request to the appropriate local agency in accordance with SEMS and local policies and procedures. Large water system operators may also have methods of requesting assistance from other utilities, including emergency assistance agreements and networks (CalWARN).

### **Emergency Drinking Water**

See the Cal OES Emergency Drinking Water Procurement and Distribution Planning Guide, May 2014 for more information at <http://www.caloes.ca.gov/PlanningPreparednessSite/Documents/EmergencyDrinkingWaterProcurementDistributionPlanningGuidance2014.pdf>

The CDPH Food and Drug Branch can assist with the identification of licensed drinking water bottlers and haulers. The California Department of General Services has both bottled water and bulk water hauler delivery contracts that will allow local governments to procure emergency alternate drinking water.

CDPH Food and Drug Branch's Licensed Water Hauler List:  
<http://www.cdph.ca.gov/pubsforms/Documents/fdbBVWCountyList.pdf>

Department of General Services Statewide Bulk Water and Bottled Water Contracts:  
<http://www.documents.dgs.ca.gov/pd/contracts/contractindexlisting.htm>

### **California Water/Wastewater Agency Response Network (CalWARN)**

CalWARN provides emergency resources including personnel, supplies, equipment and support, including analytical support, to assist water and wastewater utilities during emergencies. CalWARN can provide personnel trained to function within EOCs at all levels within SEMS to

coordinate drinking water system support. Approximately 200 PWSs maintain mutual aid agreements and contracts as part of CalWARN.

**California Mutual Aid Laboratory Network (CAMALNet)**

CAMALNet provides laboratory surge capacity, including performing drinking water analyses during emergencies in coordination with the CDPH Drinking Water and Radiation Laboratory Branch.

**ADDITIONAL INFORMATION**

**California State Warning Center (CSWC):**

Note: Hazardous materials spills or releases must be reported immediately to the California State Warning Center (CSWC). Other notifications may be required to comply with state and federal statutes and regulations.

Telephone: (916) 845-8911

Email: [Warning.Center@oes.ca.gov](mailto:Warning.Center@oes.ca.gov)

**CDPH Duty Officer:**

Telephone: (916) 328-3605

Email: [CDPHDutyOfficer@cdph.ca.gov](mailto:CDPHDutyOfficer@cdph.ca.gov)

**EMSA Duty Officer:**

Email: [EMSADutyOfficer@emsa.ca.gov](mailto:EMSADutyOfficer@emsa.ca.gov)

**California Poison Control System:**

Telephone: (800) 222-1222

**SWRCB Division of Drinking Water District Offices:**

OFFICE	ADDRESS	TELEPHONE NUMBER
State Water Resources Control Board (SWRCB) Division of Drinking Water	Headquarters 1001 I Street, 24 <sup>th</sup> Floor Sacramento, CA 95814	(916) 449-5577
District 01 – Klamath	364 Knollcrest Drive Ste. 101 Redding, CA 96002	(530) 224-4800
District 02 – Lassen	364 Knollcrest Drive Ste. 101 Redding, CA 96002	(530) 224-4800
District 03 - Mendocino	50 D Street, Ste. 200 Santa Rosa, CA 95404	(707) 576-2145

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OFFICE	ADDRESS	TELEPHONE NUMBER
District 04 – San Francisco	850 Marina Bay Parkway, Bldg. P Richmond, CA 94804	(510) 620-3474
District 05 – Monterey	1 Lower Ragsdale Dr., Ste. 120 Monterey, CA 93940	(831) 655-6939
District 06 – Santa Barbara	1180 Eugenia Place Ste. 200 Carpentaria, CA 93013	(805) 566-1326
District 07 – Hollywood	500 N. Central Avenue, Ste. 500 Glendale, CA 91203	(818) 551-2004
District 08 – Santa Ana	605 W. Santa Ana Blvd. #28 Ste. 325, Santa Ana, CA 92701	(714) 558-4410
District 09 – Sacramento	1616 Capital Ave. Sacramento, CA 95899-7413	(916) 449-5681
District 10 - Stockton	31 E. Channel Street, Ste. 270 Stockton, CA 95202	(209) 948-7696
District 11 - Merced	265 W. Bullard Ave. Ste. 101 Fresno, CA 93704	(559) 447-3300
District 12 - Visalia	265 W. Bullard Ave. Ste. 101 Fresno, CA 93704	(559) 447-3300
District 13 – San Bernardino	464 W. 4th Street Ste. 437 San Bernardino, CA 92401	(909) 383-4328
District 14 – San Diego	1350 Front Street Ste. 2050 San Diego, CA 92101	(619) 525-4159
District 15 – Metropolitan	500 N. Central Avenue, Ste. 500 Glendale, CA 91203	(818) 551-2004
District 16 – Central	500 N. Central Avenue, Ste. 500 Glendale, CA 91203	(818) 551-2004
District 17 – Santa Clara	850 Marina Bay Parkway, Bldg. P Richmond, CA 94804	(510) 620-3474
District 18 - Sonoma	50 D Street, Ste. 200 Santa Rosa, CA 95404	(707) 576-2145
District 19 – Tehachapi	4925 Commerce Dr. Ste. 120 Bakersfield, CA 93309	(661) 335-7315
District 20 - Riverside	1350 Front Street Ste. 2050 San Diego, CA 92101	(619) 525-4159
District 21 – Valley	364 Knollcrest Drive Ste. 101 Redding, CA 96002	(530) 224-4800
District 22 – Angeles	500 N. Central Avenue, Ste. 500 Glendale, CA 91203	(818) 551-2004
District 23 - Fresno	265 W. Bullard Ave. Ste. 101 Fresno, CA 93704	(559) 447-3300

**DRINKING WATER EMERGENCIES**

<b>OFFICE</b>	<b>ADDRESS</b>	<b>TELEPHONE NUMBER</b>
District 24 - Tulare	265 W. Bullard Ave. Ste. 101 Fresno, CA 93704	(559) 447-3300

**Local Primacy Agencies:**

<b>AGENCY</b>	<b>ADDRESS</b>	<b>TELEPHONE NUMBER</b>
Alpine County Health and Human Services Department-Environmental Health Services	75 Diamond Valley Road Markleeville, CA 96120	(530) 694-2235
Amador County Environmental Health Department	810 Court Street Jackson, CA 95642	(209) 223-6439
Butte County Public Health Department Environmental Health Division	202 Mira Loma Drive Oroville, CA 95965	(530) 891-2727
Calaveras County Environmental Health Department	891 Mountain Ranch Road San Andreas, CA 95249	(209) 754-6399
Contra Costa Health Services-Environmental Health Division	2120 Diamond Boulevard, Suite 200, Concord, CA 94520	(925) 692-2500
El Dorado Environmental Management Department- Environmental Health Division	2850 Fairlane Court, Building C Placerville, CA 95667	(530) 621-5300
Imperial County Public Health Department Environmental Health & Consumer Protection Services	797 W. Main Street, Suite B El Centro, CA 92243	(760) 336-8530
Inyo County Environmental Health Services Department	207 W South Street Bishop, CA 93514	(760) 873-7865
Kings County Department of Public Health-Environmental Health Services	330 Campus Drive Hanford, CA 93230	(559) 584-1411 or (800) 325-6165
LA County Public Health Department-Environmental Health Division	5050 Commerce Drive Baldwin Park, CA 91706	(626) 430-5420
Madera County Environmental Health Department	2037 W. Cleveland Avenue, MS-E Madera, CA 93637	(559)675-7823
Mono County Environmental Health Department	437 Old Mammoth Road #Q Mammoth Lakes, CA 93546	(760) 924-1830
Monterey County Health Department-Environmental Health Bureau	1270 Natividad Road Salinas, CA 93906	(831) 755-4500
Napa County Department of Planning, Building & Environmental Services-Environmental Health Division	1195 Third Street, Room 101 Napa, CA 94559	(707) 253-4471
Nevada County Department of Environmental Health	950 Maidu Avenue, Suite 170 Nevada City, CA 95959-8600	(530) 265-1222

**DRINKING WATER EMERGENCIES**

AGENCY	ADDRESS	TELEPHONE NUMBER
Placer County Health and Human Services- Environmental Health Division	3091 County Center Drive, Suite 180 Auburn, CA 95603	(530) 745-2300
Plumas County Environmental Health Department	270 County Hospital Road, Suite 127. Quincy, CA 95971	(530) 283-6355
Riverside County Department of Environmental Health-Environmental Protection and Oversight Division	47-950 Arabia Street, Suite A Indio, CA 92201	(760) 863-7570 or (888) 722-4234
Sacramento County Environmental Management Department- Environmental Compliance Division	10590 Armstrong Avenue, Suite A Mather, CA 95655-4153	(916) 875-8400
San Bernardino Department of Public Health-Division of Environmental Health Services	385 North Arrowhead Avenue San Bernardino, CA 92415	(800) 442-2283
San Diego County Department of Environmental Health	5500 Overland Suite 210 San Diego, CA 92112-9261	(858) 505-6700 or (800) 253-9933
San Joaquin County Environmental Health Department	1868 E. Hazelton Avenue Stockton, CA 95205	(209) 468-3420
San Luis Obispo County Public Health Department Environmental Health Services	2156 Sierra Way San Luis Obispo, CA 93401	(805) 781-5554
Santa Barbara County Public Health Department Environmental Health Services	225 Camino del Remedio Santa Barbara, CA 93110	805-681-4900
Santa Cruz County Health Services Agency-Environmental Health Services	701 Ocean Street, Room 312 Santa Cruz, CA 95060	(831) 454-2022
Shasta County Resource Management- Environmental Health Division	1855 Placer Street, Suite 201 Redding, CA 96001	(530) 225-5787
Stanislaus County Environmental Resources Department	3800 Cornucopia Way, Suite C Modesto, CA 95358	(209) 525-6700
Tehama County Environmental Health Department-Water Division	633 Washington Street, Room 36 Red Bluff, CA 96080	(530) 527-8020
Yolo County Health Department- Environmental Health Services	137 N Cottonwood Street, Suite 2400, Woodland, CA 95695	(530) 666-8646
Yuba County Environmental Health Department	915 8th Street, Suite 123 Marysville, CA 95901	(916) 749-5450

**Acronyms**

CA-ESF 8	California Emergency Support Function 8 (Public Health and Medical)
Cal OES	California Governor’s Office of Emergency Services
CAHAN	California Health Alert Network
CAMALNet	California Mutual Aid Laboratory Network
CalWARN	California Water/Wastewater Agency Response Network
CDPH	California Department of Public Health
CSWC	California State Warning Center
DOC	Department Operations Center
EHD	Environmental Health Department
EMSA	California Emergency Medical Services Authority
EOC	Emergency Operations Center
GWR	Ground Water Rule
LEMSA	Local Emergency Medical Services Agency
LHD	Local Health Department
LHO	Local Health Officer
LPA	Local Primacy Agency
MCL	Maximum Contaminant Level
MHCC	Medical and Health Coordination Center
MHOAC	Medical and Health Operational Area Coordination (Program)
MRDL	Maximum Residual Disinfectant Level
NCWS	Non-community Water Systems
PWS	Public Water System
RDMHC	Regional Disaster Medical and Health Coordination (Program)
REOC	Regional Emergency Operations Center
SEMS	Standardized Emergency Management System
SMCL	Secondary Maximum Contaminant Level
SOC	State Operations Center
SWRCB	State Water Resources Control Board

**“Unusual Event” as defined by the California Public Health and Medical Emergency Operations Manual (EOM):**

An **Unusual Event** is defined as an incident that significantly impacts or threatens public health, environmental health, emergency medical services, or mental/behavioral health. An Unusual Event may be self-limiting or a precursor to Emergency System Activation. The specific criteria for an Unusual Event include *any* of the following:

- The incident significantly or is anticipated to impact public health or safety;
- The incident disrupts or is anticipated to disrupt the Public Health and Medical System;
- Resources are needed or anticipated to be needed beyond the capabilities of the Operational Area, including those resources available through existing agreements (day-to-day agreements, memoranda of understanding, or other emergency assistance agreements);
- The incident produces media attention or is politically sensitive;
- The incident leads to a Regional or State request for information; and/or
- Whenever increased information flow from the Operational Area to the state will assist in the management or mitigation of the incident’s impact