

MISSISSIPPI STATE DEPARTMENT OF HEALTH
BUREAU OF PUBLIC WATER SUPPLY
CCR CERTIFICATION
CALENDAR YEAR 2013

Ms. State Hospital
Public Water Supply Name

0610032
List PWS ID #s for all Community Water Systems included in this CCR

The Federal Safe Drinking Water Act (SDWA) requires each Community public water system to develop and distribute a Consumer Confidence Report (CCR) to its customers each year. Depending on the population served by the public water system, this CCR must be mailed or delivered to the customers, published in a newspaper of local circulation, or provided to the customers upon request. Make sure you follow the proper procedures when distributing the CCR. You must mail, fax or email a copy of the CCR and Certification to MSDH. Please check all boxes that apply.

Customers were informed of availability of CCR by: *(Attach copy of publication, water bill or other)*

- Advertisement in local paper (attach copy of advertisement)
- On water bills (attach copy of bill)
- Email message (MUST Email the message to the address below)
- Other Campus Take Note

Date(s) customers were informed: 6/16/2014 / /

CCR was distributed by U.S. Postal Service or other direct delivery. Must specify other direct delivery methods used _____

Date Mailed/Distributed: / /

CCR was distributed by Email (MUST Email MSDH a copy) Date Emailed: / /
As a URL (Provide URL _____)
As an attachment
As text within the body of the email message

CCR was published in local newspaper. *(Attach copy of published CCR or proof of publication)*

Name of Newspaper: Campus Take Note

Date Published: 6/16/14

CCR was posted in public places. *(Attach list of locations)* Date Posted: / /

CCR was posted on a publicly accessible internet site at the following address (DIRECT URL REQUIRED):

www.msh-dmh.org

CERTIFICATION

I hereby certify that the 2013 Consumer Confidence Report (CCR) has been distributed to the customers of this public water system in the form and manner identified above and that I used distribution methods allowed by the SDWA. I further certify that the information included in this CCR is true and correct and is consistent with the water quality monitoring data provided to the public water system officials by the Mississippi State Department of Health, Bureau of Public Water Supply.

[Signature]
Name/Title (President, Mayor, Owner, etc.)

6/20/14
Date

Deliver or send via U.S. Postal Service:
Bureau of Public Water Supply
P.O. Box 1700
Jackson, MS 39215

May be faxed to:
(601)576-7800

May be emailed to:
Melanie.Yanklowski@msdh.state.ms.us

M

2013 Annual Drinking Water Quality Report
Mississippi State Hospital - Whitfield
PWS ID #: 0610032
June 2014

We're pleased to present to you this year's Annual Quality Water Report. This report is designed to inform you about the quality water and services we deliver to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water. Our water source is from wells drawing from the Cockfield Formation and Sparta Sand Aquifers.

The source water assessment has been completed for our public water system to determine the overall susceptibility of its drinking water supply to identify potential sources of contamination. A report containing detailed information on how the susceptibility determinations were made has been furnished to our public water system and is available for viewing upon request. The wells for the Mississippi State Hospital have received a lower susceptibility ranking to contamination.

If you have any questions about this report or concerning your water utility, please contact Steven Strong at 601.351.8569. We want our valued customers to be informed about their water utility. A copy of this report will be posted on all bulletin boards and will be available in the main office.

We routinely monitor for constituents in your drinking water according to Federal and State laws. This table below lists all of the drinking water contaminants that were detected during the period of January 1st to December 31st, 2013. In cases where monitoring wasn't required in 2013, the table reflects the most recent results. As water travels over the surface of land or underground, it dissolves naturally occurring minerals and, in some cases, radioactive materials and can pick up substances or contaminants from the presence of animals or from human activity; microbial contaminants, such as viruses and bacteria, that may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife; inorganic contaminants, such as salts and metals, which can be naturally occurring or result from urban storm-water runoff, industrial, or domestic wastewater discharges, oil and gas production, mining, or farming; pesticides and herbicides, which may come from a variety of sources such as agriculture, urban storm-water runoff, and residential uses; organic chemical contaminants, including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production, and can also come from gas stations and septic systems; radioactive contaminants, which can be naturally occurring or be the result of oil and gas production and mining activities. In order to ensure that tap water is safe to drink, EPA prescribes regulations that limit the amount of certain contaminants in water provided by public water systems. All drinking water, including bottled drinking water, may be reasonably expected to contain at least small amounts of some constituents. It's important to remember that the presence of these constituents does not necessarily indicate that the water poses a health risk.

In this table you will find many terms and abbreviations you might not be familiar with. To help you better understand these terms we've provided the following definitions:

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 treatment technique is a required process intended to reduce the level of a contaminant in drinking water.

Maximum Contaminant Level (MCL) - The "Maximum Allowed" (MCL) is 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.

Maximum Contaminant Level Goal (MCLG) - The "Goal"(MCLG) is 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 Residual Disinfectant Level (MRDL) - The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary to control microbial contaminants.

Maximum Residual Disinfectant Level Goal (MRDLG) - The level of a drinking water disinfectant below which there is no known or expected risk of health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.

Parts per million (ppm) or Milligrams per liter (mg/l) - one part per million corresponds to one minute in two years or a single penny in \$10,000.

Parts per billion (ppb) or Micrograms per liter - one part per billion corresponds to one minute in 2,000 years, or a single penny in \$10,000,000.

TEST RESULTS								
Contaminant	Violation Y/N	Date Collected	Level Detected	Range of Detects or # of Samples Exceeding MCL/ACL	Unit Measurement	MCLG	MCL	Likely Source of Contamination
Inorganic Contaminants								
10. Barium	N	2013	.0459	.0023 - .0459	Ppm	2	2	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits
13. Chromium	N	2013	2.2	1.9- 2.2	ppb	100	100	Discharge from steel and pulp mills; erosion of natural deposits
14. Copper	N	2011/13	.2	0	ppm	1.3	AL=1.3	Corrosion of household plumbing

								systems; erosion of natural deposits; leaching from wood preservatives
16. Fluoride**	N	2013	.825	.794 - .825	ppm	4	4	Erosion of natural deposits; water additive which promotes strong teeth; discharge from fertilizer and aluminum factories
17. Lead	N	2011/13	1	0	ppb	0	AL=15	Corrosion of household plumbing systems, erosion of natural deposits

Disinfection By-Products

81. HAA5	N	2011*	20	No Range	ppb	0	60	By-Product of drinking water disinfection.
82. TTHM [Total trihalomethanes]	N	2011*	24.9	No Range	ppb	0	80	By-product of drinking water chlorination.
Chlorine	N	2013	.80	.50 – 1.20	mg/l	0	MDRL = 4	Water additive used to control microbes

* Most recent sample. No sample required for 2013.

As you can see by the table, our system had no violations. We're proud that your drinking water meets or exceeds all Federal and State requirements. We have learned through our monitoring and testing that some constituents have been detected, however, the EPA has determined that your water IS SAFE at these levels.

We are required to monitor your drinking water for specific constituents on a monthly basis. Results of regular monitoring are an indicator of whether or not our drinking water meets health standards. In an effort to ensure systems complete all monitoring requirements, MSDH now notifies systems of any missing samples prior to the end of the compliance period.

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. Our water system 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 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 Safe Drinking Water Hotline or at <http://www.epa.gov/safewater/lead>. The Mississippi State Department of Health Public Health Laboratory offers lead testing. Please contact 601.576.7582 if you wish to have your water tested.

To comply with the "Regulation Governing Fluoridation of Community Water Supplies", the MS STATE HOSPITAL-WHITFIELD is required to report certain results pertaining to fluoridation of our water system. The number of months in the previous calendar year that average fluoride sample results were within the optimal range of 0.7-1.3 ppm was 12. The percentage of fluoride samples collected in the previous calendar year that was within the optimal range of 0.7-1.3 ppm was 100%.

All sources of drinking water are subject to potential contamination by substances that are naturally occurring or man made. These substances can be microbes, inorganic or organic chemicals and radioactive substances. All drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline at 1-800-426-4791.

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 microbiological contaminants are available from the Safe Drinking Water Hotline 1-800-426-4791.

We at Mississippi State Hospital work around the clock to provide top quality water to every tap. After MSDH Regional Engineer conducted the annual inspection, the Mississippi State Hospital PWS received an overall capacity rating of 5.0 out of a possible 5.0.



TAKE NOTE

A Publication for Employees of MSH

Volume 26, Number 24

June 16, 2014

DEPARTMENT DIRECTORS

Highlights from the June 10, 2014 Department Directors Meeting are below. The next meeting will be Wednesday, July 9, 2014 at 10 a.m. in the B-56 Conference Room.

Clinical Services Update – Dr. Robert Maddux

- Dr. Akif Khawaja will be starting as a staff psychiatrist on Female Receiving this month.
- Dr. Paul McGinnis will start as Service Chief on Male Receiving effective July 1.

Division Level Quarterly Updates JNH – Marc Lewis

- The average census at Jaquith Nursing Home for the past four months: 94 percent.
- Residents participated in a number of activities during the last four months, including holiday celebrations, parties, Mardi Gras celebrations, National Nursing Home Week, the Dixie National, the MSH Fishing Rodeo, trips to the movies, Mississippi Braves baseball games and local restaurants, and a new activity called Zen Group, where residents listened to relaxing music in a therapy inspired environment of battery operated candles.
- Singer George Weeks performed for residents.
- Residents are receiving free copies of the Rankin County newspaper.
- Residents were visited by Bear, a unit therapy dog, accompanied by social worker June McCafferty.
- Bookshelves and books for residents have been donated by resident families and are now housed in the visitors' room of Building 78, for use by residents as a reading library.
- An ongoing quilting project on Monroe Inn allows residents to assist with putting pieces of quilt together.
- All residents and staff moved from Building 40 to Building 41 on May 30 due to an air conditioning situation on Building 40.
- Recreation staff are working on getting residents more involved in their recreation assessments and care plan goals.
- Person-centered activity planning has included converting jigsaw puzzles into pictures for hanging on the wall, decorating a tree during each holiday to make the home more festive, taking community outings to shopping and eating venues, and implementing one new activity per month on each of the homes.
- The JNH Social Services Department assisted residents in requesting absentee ballots for the Primary Election on June 3, 2014. Twenty-six residents voted by absentee ballot.
- During this quarter, four residents have been discharged from JNH to a lesser level of care.
- In February, the behavioral health staff continued to update behavioral care plans to include resident goals and objectives in efforts to get residents more involved in their treatment plan. In March, Behavioral Care Plan (BCP) notebooks were updated and placed at the nurse's station in each unit. Psychology began implementing the revised Form 59 (Psychology General Assessment), updated JNH Psychology Guidelines and Procedures, and created a JNH Geropsychology Rotation Syllabus for Psychology Residents. Additionally, psychology traveled to the Mississippi Adolescent Center (MAC) for talking tiles training to assess its potential benefit for JNH residents. More recently in April, in collaboration with Information Management, a pilot study was discussed regarding implementation of talking tiles within a coed nursing home.
- ACLS (advanced cardiac life support) training continues with JNH nursing staff.
- Agency staff costs are as follows: February costs were \$6,895.99 less than January. March costs were \$609.69 less than February. April costs were \$5,421.10 less than March.

- JNH saved \$6,516.00 monthly beginning in February due to taking residents off rental mattresses and using JNH owned.
- Five JNH nurses participated in TB recertification on March 5.
- JNH nurses attended a 2-day MDS training workshop on March 18 & 19 sponsored by the Mississippi Department of Health.
- On April 16, JNH staff participated in a Nursing Conference Call on Case Mix Trends.
- On May 7, thanks to Friends of MSH, a Nurse Appreciation Day celebration was held for all three shifts, with several JNH nurses winning door prizes.
- May 28, JNH staff/MD's/SOD/Pharmacy participated in a Partnership to Improve Dementia Care meeting with Ms Depart of Health/IQH/MHCA and sister facilities EMSH JTChampion and RP White Nursing facilities.
- Jaquith administrative staff moved back to Building 78 on April 8.
- The JNH Quarterly Family Council Meeting was held March 8. Approximately 39 family/friends attended.
- The sprinkler project is now complete, and Building 29 resident have moved back to their building.
- Several JNH residents attended the Horses for Handicapped event on April 17.
- Lee Varner has taken on additional duties. In addition to serving as the administrator for Monroe Inn, he is also serving as the administrator of WMSH, effective June 1.
- Keith Grubbs is serving as the administrator for Jaquith Inn (Buildings 78 and 69) in addition to his full-time role as administrator for Madison Inn, (Buildings. 28 and 34).
- Thanks goes to Cyndi Nail for her service at MSH-most recently as the Electronic Health Records Project Manager for MSH and prior to that as the Administrator of WMSH. Nail will retire effective June 30.

Human Resources – Katie Storr

- The Mississippi legislature has authorized and mandated a \$1,000 salary increase for employees who earn less than \$30,000 per year if they meet certain criteria. The legislature also gave state agencies the option to provide up to a 5 percent salary increase for employees who earn more than \$30,000 if those employees meet certain criteria. The raises will be effective in July and those employees who will receive salary increases will receive notification from Personnel in July. (For more details, see article on page 2)
- The hospital is moving to MAGIC, the new payroll and human resources system. The payroll and business related items will begin July 1. The human resources system will be implemented later, however, due to the transition, human resources will be unable to input any transactions into their system until July. Recruitment will continue, however, staff will not be hired until July.

SOD – Karana Carroll

- Staff members recently attended a safety conference in Hattiesburg.
- SOD is currently awaiting the annual survey to be conducted for Jaquith Inn.
- Joint Commission renewal applications for the Hospital and for WMSH were submitted last week.
- Staff will be putting together info for the HIPAA Privacy Rule and providing via Take Note.
- The PI Department has finished rebuilding the Psychiatric Core Measures database. The first dataset has been submitted and accepted.
- The PI Department is developing course catalogs for each building as part of a larger goal of developing clinical outcome measures which is one of the department's Key Performance Indicators. The course catalog and this phase of the clinical outcome measures initiative will involve only the psychiatric part of the hospital. The deadline for completing the course catalogs is June 16.

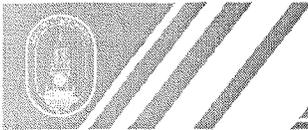
RESPECT

RELATIONSHIPS

ACCOUNTABILITY

TEAMWORK

DIVERSITY



- Under Quality Management, annual requirements of CMS Inpatient and Outpatient Quality Reporting for WMSH were completed by deadlines.
- The Child Nutrition Program April Administrative Review report was received. There were five deficiencies. Response to these findings are due to the Child Nutrition Office by June 20, 1014.
- A Rankin County Health Department Environmentalist inspected pantries in B-201 W1, B-203 W3 & 4, and B-45. All received an "A" grade.
- Regarding HEN training, the next fellowship is Wednesday, June 25 from 1-3 p.m. The focus of the meeting is on the Eliminating Harm Across the Board. Topics of discussion include the use of data to drive system-level improvement, building useful measurement strategies and understanding spread scale up for improvement projects. HAB is being done only for WMSH.
- IHI Open School online courses have been started. The B-65 computer lab is open every Thursday from 2-5 except this week June 12.
- In Employee Health and Infection Prevention, staff attended the Public Health Preparedness Closed POD (Point of Dispensing) and Volunteer Training. The strategic national stockpile that supplies medications and medical supplies for emergencies was discussed.
- Lean has several projects ongoing, including, Lean Daily Management System training beginning with Building 84, Treatment plan document (MSH-187) review with Building 63 team, and identifying improvement opportunities within the internal admission process for Building 43.
- Staff should be encouraged to use the Kaizen action sheets.

LEGISLATION AUTHORIZES SALARY INCREASES FOR SOME STATE EMPLOYEES

The 2014 legislative session opened the door for some state employees to receive salary increases in the coming fiscal year. Eligibility for the increase is limited to employees who meet certain criteria.

Legislation approved in the 2014 session granted a salary increase of \$1,000 to individuals who have been employed by the state since July 1, 2010, with the requirements that they had not received any salary increase since that date and are grossing less than \$30,000 a year as of June 30, 2014.

Any benchmarks provided for educational achievement or through professional development courses like the Basic Supervisory Course or the College of Direct Support are considered a salary increase. Employees who received any kind of salary increase during this time frame are ineligible for this \$1,000 increase due to the stipulations put in place by the legislature. Those Mississippi State Hospital employees who are eligible for this \$1,000 raise will be notified by the Personnel Department. The salary adjustment will take place in July.

State agencies are also authorized to grant a 5 percent salary increase to employees making more than \$30,000 a year who meet certain criteria. Mississippi State Hospital will grant a five percent increase to all employees who are eligible, but the authorization for this salary increase comes with the same restrictions mentioned above that were put in place by the Legislature. Only individuals who have been employed by the state since July 1, 2010, have not received any salary increase since that date, and are grossing more than \$30,000 a year as of June 30, 2014 will be eligible for this five percent increase.

The MSH Personnel Department will also be notifying those employees who are eligible for this salary increase. Salary adjustments will be made this July. Employees who have questions or concerns about their eligibility can call the Personnel Department at 601-351-8020.

SECURITY TIP OF THE WEEK

The new HIPAA Omnibus rules require PHI to be stored on encrypted media. This means that personally owned flash drives and other personally-owned USB media are not authorized for use on MSH computer systems. For individuals who have been granted USB access to MSH computers, please immediately discontinue use of personally owned USB flash drives, external hard drives, SD cards, etc. The only authorized encrypted, removable media are MSH-issued IronKey flash drives, which are now available from the IM

department at B-64. Please contact Michelle Cushman at x.8265 or via e-mail at michelle@msh.state.ms.us to make arrangements to sign for an IronKey flash drive. Requests for MSH-issued flash drives will only be approved on the basis of a demonstrated and documented requirement substantiated by a legitimate business or clinical need.

ANNOUNCEMENTS

ANNUAL TRAINING FOR JUNE 18-19 HELD ON B-47
Staff Education announces that Annual Training for June 18 and 19 will be held on Building 47. CPR begins at 8 a.m. and Protective Interventions at 10 a.m. For more information, call ext. 8021.

CASHIER'S OFFICE CLOSED JUNE 25-30
The Cashier's Office will be closed June 25 - June 30 for fiscal year-end closeout. There will be no transactions done from clients/residents patient fund account. Please submit all requests for funds, including Independence Day, to the Cashier's Office by June 23. During closing, there will not be any transactions done from patient's trust fund account. For more information contact Tera Ford - Cashier's Office Supervisor @ 8017.

WAREHOUSE CLOSED FOR INVENTORY JUNE 24 - 30
The MSH Warehouse will be closed for inventory Tuesday, June 24 through Monday, June 30. Everyone is asked to make plans now to ensure you have enough stock on hand during the period that the warehouse will be closed. Please begin adding the extra bulk items (hand soap, hair & body shampoo, personal care items, floor cleaner, toilet tissue, paper towels, diapers, wipes, underpads, gloves etc....) on your weekly order (for the next two weeks). Please remember that during inventory, walk-ins are for patient related emergencies only. If you have any questions, please call ext. 8058 or ext. 8057.

CLOTHING/DONATION CENTER CLOSED FOR INVENTORY JUNE 18 - 20
The Clothing/Donation Center will be closed June 18 - 20 for inventory. All clothing requisitions must be picked up by 4:30, Tuesday June 17. Only emergency orders will be filled during inventory.

CALENDAR	
June 18-20	Clothing Donation Center closed for inventory
June 24-30	Warehouse closed for inventory
June 25-30	Cashier's Office closed
June 30	MSH Independence Day Celebration

JOB POSTINGS

There are three job postings for this week.

- Internal Only**
- DCAS or DCS (ASSISTANT SHIFT LEADER, B84, B-SHIFT)
- ACCOUNTING/AUDITING TECH (CASHIER'S OFFICE, B21, A-SHIFT)
- REGISTERED NURSE IV (NURSE EDUCATION & AFFILIATION DIRECTOR)