

# CERTIFICATION

## Consumer Confidence Report (CCR)

MISSISSIPPI 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: 4/25/2017 / /

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: 4/25/2017

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 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

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

Date 4/19/2017

Submission options (Select one method ONLY)

Mail: (U.S. Postal Service)  
MSDHI, Bureau of Public Water Supply  
P.O. Box 1700  
Jackson, MS 39215

Fax: (601) 576 - 7800

Email: [water.reports@msdh.ms.gov](mailto:water.reports@msdh.ms.gov)

**CCR Deadline to MSDH & Customers by July 1, 2017!**

2016 Annual Drinking Water Quality Report  
 Mississippi State Hospital - Whitfield  
 PWS ID #: 0610032  
 April 2017

2017 APR 25 PM 2: 14

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 1<sup>st</sup> to December 31<sup>st</sup>, 2016. In cases where monitoring wasn't required in 2016, 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
<b>Inorganic Contaminants</b>								
10. Barium	N	2016	.0054	.0018 - .0054	Ppm	2	2	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits
13. Chromium	N	2016	1.3	.9- 1.3	ppb	100	100	Discharge from steel and pulp mills; erosion of natural deposits

14. Copper	N	2014/16	.2	0	ppm	1.3	AL=1.3	Corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservatives
16. Fluoride**	N	2016	.456	.9 - .456	ppm	4	4	Erosion of natural deposits; water additive which promotes strong teeth; discharge from fertilizer and aluminum factories
17. Lead	N	2014/16	3	0	ppb	0	AL=15	Corrosion of household plumbing systems, erosion of natural deposits
19. Nitrate (as Nitrogen)	N	2016	.16	No Range	ppm	10	10	Runoff from fertilizer use; leaching from septic tanks, sewage; erosion of natural deposits

### Volatile Organic Contaminants

76. Xylenes	N	2016	.00158	.00148 - .00158	ppm	10	10	Discharge from petroleum factories; discharge from chemical factories
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### Disinfection By-Products

81. HAA5	N	2014*	23	No Range	ppb	0	60	By-Product of drinking water disinfection.
82. TTHM [Total trihalomethanes]	N	2014*	32.4	No Range	ppb	0	80	By-product of drinking water chlorination.
Chlorine	N	2016	.9	.50 – 1.1	mg/l	0	MDRL = 4	Water additive used to control microbes

\* Most recent sample. No sample required for 2016.

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 11. The percentage of fluoride samples collected in the previous calendar year that was within the optimal range of 0.7-1.3 ppm was 84%.

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

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## BLOOD DRIVE SLATED THURSDAY, APRIL 27



Mississippi State Hospital in conjunction with Mississippi Blood Services will hold a Blood Drive on Thursday, April 27, from 9 a.m.-4 p.m. in the Building 71 Conference Center. One lucky donor will win a \$50 Walmart gift card. All donors will receive a T-shirt. Please bring a photo ID.

## ANNOUNCEMENTS

### CELEBRATING MEDICAL LABORATORY PROFESSIONALS WEEK

Join us this week, April 23-29, in a salute to the laboratory professionals who are dedicated to providing our patients with accurate, trustworthy results - without exception!

### TAKE NOTE IS CHANGING

Take Note has a new look. To save on printing costs, the only attachments will be job postings. Take Note will continue to be a 2-page informational publication. Submissions should be in a condensed version with contact instructions for additional information. Public Relations reserves the right to edit all submissions. The deadline remains Friday at noon for publication the following Monday. If you have questions, please contact Kathy Denton at ext. 8170.

### BASIC SUPERVISORY COURSE OFFERED MAY 8-12

The Mississippi State Personnel Board-Office of Workforce Development is offering the Basic Supervisory Course on May 8-12 at the MSPB. There are 15 slots available for registration. Registration must take place in the new LSO System. If you have questions pertaining to LSO or how to register, contact Shirrell Massey in Staff Education at [masseesh@msd.state.ms.us](mailto:masseesh@msd.state.ms.us) or ext. 8233.

## CALENDAR

- APR 27 Blood Drive, 9 a.m.-4 p.m., B-71
- MAY 9 Department Directors Meeting, 10 a.m., B-56
- MAY 29 Memorial Day





# TAKE NOTE

A Publication for Employees of MSH

Volume 29, Number 17

April 25, 2017

## WELCOME NEW EMPLOYEES



*Back row (Left to Right): Mo Merritt, DCT; Charlie Martez Wright, CNA; Nicole Jayroe, CNA; Taylor Harper, CNA; Rikki White, CNA; Ashley Williams, CNA; Precious Boyd, CNA; Zeikear Reedy, DCT. Front row (L to R): Trevian Simon, CNA; LaChrista Cook, DCT; Laranda Williams, CNA; T'Sarha Trotter, CNA; Melanie Armon, CNA; Julesiah Wallace, CNA; Okechi Okoro, CNA. Not Pictured: Kiara Stimego, DCT, and Candis Cooper, CNA.*

## RELIAS COURSES NOW BEING OFFERED

Multiple Relias courses are now being offered through Staff Education. As MSH transitions to Patient Centered Recovery System of Care, these courses will assist in making that transition and are in accordance with MSH's Strategic Plan.

"Incorporating Recovery Principles and Practices into Mental Health Treatment," "Trauma Recovery and Positive Identity Development," and "Barriers to Recovery" are a series of courses that can be accessed on Relias at anytime and anywhere there

is Internet access. The Computer Lab on B-65 is available for anyone needing to use a computer to complete these courses.

Additional courses in April include "Working with Difficult People" and "Overview of Personality Disorders."

Contact Sophia Jefferson at ext. 8425 or via email at [sophia.jefferson@msh-state.ms.us](mailto:sophia.jefferson@msh-state.ms.us) for more information.