Drinking Water Safety Planning Template For Very Small Communities: Supplying up to 25 People



Name of owner:	
Name of operator (if different to owner):	
Supply name:	
Supply location:	
Unique supply identifier:	
Emergency contact name:	
Emergency contact phone number:	
Supply type:	Population:
Drinking Water Quality Assurance Rules category:	Very small communitities

Please refer to the **Drinking Water Safety Planning Guidance for Very Small Communities – Supplying up to 25 people** as you complete this template.

▲ Question 1: How are you giving effect to Te Mana o te Wai?

How are you managing your water supply to protect the health and wellbeing of your water, the wider environment, and the community?

▲ Question 2: What makes up your drinking water supply?

What are the components of your drinking water supply?

Include all infrastructure and processes used to abstract, store, treat, or transmit drinking water.

A. V	later sources - tick relevant boxes
	Bore (including well)
	Description:
	Spring
	Description:
	Lake (include dam)
	Description:
	River / stream / creek
	Description:
	Roof (rainwater)
	Description:
	Carted water (e.g. from a water carrier)
	Description:
	From other drinking water supply
	Description:
	Description.

	Pre-treatment (e.g., first flush diverter)	UV disinfection
	Cartridge filtration	None
	Chlorination (e,g., sodium hypochlorite)	Other - specify:
C F	Distribution	
C. L	Storage/header tank	Pumps
	Pipes	Other - specify:
D. F	Population and supply volume	
Wha	it is the anticipated daily minimum volume of w	vater provided to the population supplied?
VVIIC	Don't know Yes - number:	arer provided to the population supplied.
	Don't know res riginger.	
Doe	s this population increase significantly at differ	ent times of the year?
	No Don't know Yes	
lf Y €	s to the question above, what is the maximum	number of consumers you supply water to?
If Y e	es to the question above, is your supply capable	e of supplying sufficient water to the maximum number of consumers?'
If N o	to the question above, how will you suppleme	ent your drinking water supply to ensure sufficient drinking water is supplied
at a	I times?	
Not	e: the population supplied may increase to up t	o 50 people for up to 60 days in any 12 month period.

B. Treatment

▲ Question 3: What does your supply look like?

Provide a flow diagram or schematic and photos of your supply

Please take a photo of the drawn picture of your supply and provide it with other photos of your supply.

Confirmation of attachments – tick relevant boxes

Optional space for your drawn picture

Your drawn picture (flow diagram or schematic) is included below or attached (a scan or photograph is fine).

Photos of my supply are attached to this Drinking Water Safety Plan.

Example only Chlorine dosing Drinking water storage Raw water storage Bore abstraction Cartridge filtration Backflow prevention

Question 4: What can go wrong?

What are the risks to your water supply and how will you control them?

Below are some common risk	cs which can cause rapid	outbreaks of illness fo	r consumers.
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✓ Protozoal contamination

Loss or reduction of source of water supply

Potential hazards

A.	Bore	water	- contamination	through	bore	head
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Likelihood of occurrence: High Medium Low

How will you control the risk?

Bore head fenced at least 5m away

Bore head on hard standing apron with concrete surround

Bore head maintained in good condition

Other:

B. Rainwater – contamination through roof, guttering, pipes and other elements used in rainwater collection

Likelihood of occurrence: High Medium Low

How will you control the risk?

First flush diverter installed

Other:

C. Hazards potentially present in untreated water

Likelihood of occurrence: High Medium Low

How will you control the risk?

Filtration (rated at a minimum of 5 micron or less nominal pore size)

UV disinfection (at least 40mJ/cm²)

Chlorination

Other:

D. Remaining contamination due to inadequate treatment Likelihood of occurrence: High Medium Low How will you control the risk? Automatic shut-off if UV dose not met Alarm Other: E. Contamination of treated water due to, for example, cracks or holes in water tanks/reservoirs, pipes breaking Likelihood of occurrence: High Medium Low How will you control the risk? Chlorination Backflow protection at: Regular maintenance: Pressure monitoring: F. Chemicals which may be a hazard to your supply These chemicals may arise from either the environment (such as nutrient run-off, industrial wastewater, or naturally occurring minerals such as manganese and arsenic) or due to treatment error (such as incorrect dosage levels). High Medium Likelihood of occurrence: Low How will you control the risk? No treatment/control yet Aeration and settlement Scouring Ability to switch to alternate source Use bottled or stored water when this is an issue Appropriate storage of chemicals Incorrect dosage levels How will you control the dose?

G. Contamination of or changes to your catchment affecting your source water

Likelihood of occurrence: High Medium Low

How will you control the risk?

This could include developing good relationships with upstream users to understand how they affect the source water, so you are aware of possible risks.

H. Other potential hazards (please specify):

Likelihood of occurrence: High Medium Low

What are the risks arising from these hazards?

How will you control the risks?

How will you know your controls are working?

Ways of checking your water supply is healthy



Sampling and having my water supply tested every six months (mandatory)

Making regular visual inspections of my water supply

Recording regular maintenance and cleaning of machinery, etc

Monitoring my water supply's treatment process

Other (please specify):

▲ Question 5: How will you respond when an incident occurs?

What would be an urgent situation for your drinking water supply?

Incident type - tick all relevant boxes

Power cuts/loss of electricity supply

Damage to or problems with your supply

Failed sample

Rāhui

Inability of you or a back-up person to address any problems (through prolonged absence)

Natural disaster

Outbreak of illness in the community (which could be an indicator of potential waterborne contamination)

Other (please specify):

How will you respond to an incident?

For example, where you think your drinking water is or may be unsafe or does not comply with Drinking Water Standards.

Responses proposed in your plan – tick relevant boxes (more than one may apply)

Take test samples and send them to an accredited laboratory for analysis

- Investigate the source or cause of the incident and address it as soon as possible
- ✓ Notify Taumata Arowai of the incident
- ✓ Notify consumers of the incident
- ✓ Provide advice to your consumers on what to do until the safety of their drinking water is confirmed
- Take measures to ensure the problem does not re-occur

 Other (please specify):

▲ Question 6: How will you improve your supply?

Can you make any improvements and what is the timeframe for those?

▲ Question 7: When will you review your plan?

Triggers for review

Routine review of safet	plan effectiveness and u	pdate as required

Reviewer:

Timeframe:

Water has been unsafe or there was an incident or event, including a test analysis indicating a <u>Maximum Acceptable Value (MAV) non-compliance</u>?

Reviewer:

Timeframe:

There has been a change to your water source

There has been a change in who looks after your water source and/or supply

Other (please specify):

Approval by drinking water supply own	er or representative
Approver's name:	Date:
Signature:	

▲ Next steps

Please return your completed Drinking Water Safety Plan to Taumata Arowai, by either:

- Website: submit via Hinekōrako on the Taumata Arowai website
- Email: info@taumataarowai.govt.nz
- Post: Level 2, 10 Brandon Street, PO Box 628, Wellington 6140, New Zealand

Store a copy of this plan in a place that is easily accessible to you (and any others involved in managing or operating the drinking water supply).

Questions?

Refer to the Drinking Water Safety Plan Guidance or the Taumata Arowai website: <u>Drinking water safety planning I</u>

<u>Taumata Arowai</u> or contact your Taumata Arowai Regional Team <u>Regulatory Team I Taumata Arowai</u> for more information.