



## Notices of Adverse Test Results and Issue Resolution (Schedule 16)

Drinking Water Systems Regulation (O. Reg. 170/03)

### Instructions

These Notice forms apply to drinking water system owners and operators (Owners/Operators) and Ministry of the Environment, Conservation and Parks (MECP) licensed laboratories (Licensed Laboratories) regulated by Drinking Water Systems Regulation, Ontario Regulation 170/03 (O. Reg. 170/03).

#### Immediate Report of Adverse Results

Section 16-3(3) of Schedule 16 of O. Reg. 170/03 sets out the requirements for Owners/Operators and Licensed Laboratories to make an immediate report of adverse test results under O. Reg. 170/03 by speaking in person or by telephone to the MECP's Spills Action Centre (SAC), at 1-800-268-6060 or 416-325-3000, the local Medical Officer of Health/Health Unit (Health Unit) and the Owner/Operator (Immediate Report).

[Adverse test results for trihalomethanes (THMs) or haloacetic acids (HAAs) do not require an Immediate Report; see section below.]

#### Written Notice within 24 hours of the Immediate Report

Within 24 hours of an Immediate Report, Section 16-7(3) of Schedule 16 requires that Owners/Operators and Licensed Laboratories also provide written notice to the MECP and the Health Unit, by fax or e-mail. Licensed Laboratories must complete and submit Sections 1 and 3 of this Notice. Owners/Operators must complete and submit Section 2A of this Notice. **Note:** Section 3 is not required to be completed for operational parameter incidents which have no correlating adverse results.

#### Notice Within 7 Days of Issue Resolution

Within 7 days after the issue has been resolved, Section 16-9(1) of Schedule 16 requires that Owners/Operators must provide a written notice, Section 2B of this Notice, to SAC and the Health Unit, summarizing the actions taken and the results achieved. This written notice must also be sent to the interested authority for any designated facility (if applicable) within 30 days.

Owners and Operators must follow any additional corrective actions required by the Health Unit.

#### Total Trihalomethanes (THMs) and Haloacetic Acids (HAAs)

As of January 2016 for THMs and January 2020 for HAAs, Sections 16-6 and 16-7 of Schedule 16 require that Owners/Operators and Licensed Laboratories calculate the running annual average (RAA) for THMs and HAAs and report any adverse test result in writing to the MECP and the Health Unit within 7 calendar days of the end of the calendar quarter that produced the adverse test result. The written notice is to be submitted using Section 2C of this Notice. RAA calculation is outlined in Schedule 13-6 of O. Reg. 170/03.

Immediate oral notification is no longer required for these parameters.

Licensed Laboratories that upload all the THM and HAA test results into the ministry's data system and provide the results to Owners/Operators within 48 hours of the test result being authorized at the laboratory, may be exempt from the RAA reporting requirements noted above.

**Note:** Small municipal residential systems and non-municipal year-round residential systems that serve designated facilities also must notify the operator of each designated facility served by their system.

The 'Trihalomethane and Haloacetic Acid Sampling and Reporting Requirements Technical Bulletin' provides full details on the changes to the reporting requirements and provides examples for calculating quarterly and running annual averages. The Technical Bulletin is available on the ministry's web page via the following link:

<https://www.ontario.ca/page/total-trihalomethane-thm-reporting-requirements-technical-bulletin>

Fields marked with an asterisk (\*) are mandatory.

SAC fax: 1-800-268-6061 or 416-325-3011

SAC e-mail: [AWQI.Reporting@ontario.ca](mailto:AWQI.Reporting@ontario.ca)

Provincial standards for water quality are set out in:

[Safe Drinking Water Act, 2002](#)

[Ontario Regulation 169/03 \(Water Quality Standards\)](#)

[Ontario Regulation 170/03 \(Drinking Water Systems\)](#)

Failure to notify these parties in accordance with the Regulation constitutes an offence under the *Safe Drinking Water Act*. A copy of this form may be acquired through the MECP public website ([www.ontario.ca/drinkingwater](http://www.ontario.ca/drinkingwater)) or by contacting any MECP office.

Collection of information on this form is done in accordance with the [Safe Drinking Water Act, 2002](#) and its Regulations. Information gathered herein, including personal information, is governed by the *Freedom of Information and Protection of Privacy Act* (FIPPA) and may be disclosed to other government agencies (including municipal health unit employees) pursuant to 'Section 42' of the FIPPA for the consistent purpose of administering any Act or program that pertains to drinking water safety. For questions and concerns, please contact the MECP at 1-866-793-2588.

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Are you a \*

Licensed Laboratory  DWS

Which Section(s) of the Form do you need today?

Section 1 - Written Notice By Licensed Laboratory

Section 2A - Written Notice By Drinking Water System

Section 2B - Notice Of Issues Resolution

Section 2C - Written Notice By Drinking Water System Owner - Reporting RAA for THMs and HAAs

Section 3 - Adverse Analytical Results

## Notices of Adverse Test Results and Issue Resolution (Schedule 16)

Drinking Water Systems Regulation (O. Reg. 170/03)

Fields marked with an asterisk (\*) are mandatory.

### Section 2A – Written Notice By Drinking Water System (DWS) Owner (For THM and HAA reporting see Section 2C)

#### Indicators of Adverse Water Quality

AWQI Number \*

n/a

Is this a resample? \*

Yes  No  Unknown If Yes, then provide initial AWQI number

#### Indicator of Adverse Results

Microbiological \*  Chemical \*  Radiological \*  Operational \*  Licence/Order/Certificate Authority \*

Observations of Improperly disinfected water directed to water users

Low Distribution Chlorine \_\_\_\_\_ mg/L

High Turbidity \_\_\_\_\_ NTU

Other service break

#### Details of Adverse Result \*

Contractor working on sanitary sewer cut water service line to property located at 12746 County Rd.42, on the private side. Repair made by contractor with no Town certified water services operator on-site to ensure proper disinfection practices were used during the repair.

#### DWS Information

DWS Name \*

Tecumseh Distribution System

DWS Number \*

260004969

Last Name \*

Dupuis

First Name \*

Brad

Position \*

Manager, Water Services/ORO

Email Address

bdupuis@tecumseh.ca

Telephone Number (including area code)

519-735-2184 ext. 145

Additional Comments

Alternate contact: Nicole Bradley; DWQMS Representative  
email: nbradley@tecumseh.ca  
phone: 519-735-2184 ext. 141

#### Oral Notification to Health Unit - Person Contacted

Public Health Unit Name \*

Windsor Essex County Health Unit

Last Name \*

Bennett

First Name \*

Elaine

Position \*

Manager, Environmental Health

Telephone Number (including area code) \*

519-258-2146 ext. 4475

Fax Number (including area code)

Date (yyyy/mm/dd) \*

2023/06/21

Time (hh:mm) \*

2:36 PM



Fields marked with an asterisk (\*) are mandatory.

Section 2A continued

DWS Person Providing Oral Notification *	Email Address
Brad Dupuis	bdupuis@tecumseh.ca

**Corrective Actions to be Taken by Owner/Operator**

Corrective Actions	Required *	Completed	Comments
Resample and Test (including upstream, downstream and at AWQI location)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	No AWQI issued
Disinfection Restored / Increased	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	system disinfection not lost
Mains / Pipes Flushed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Signs Posted (Do Not Drink Water)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Users Advised to Boil Water / Seek Alternate Source	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

Other (Include any other Health Unit directions and any additional attachments)

Other:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
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**Oral Notification to Spills Action Centre (SAC) - Person Contacted**

Last Name *	First Name *
n/a	n/a

Position *
n/a

DWS Person Providing Oral Notifying *	Date (yyyy/mm/dd) *	Time (hh:mm) *
n/a		

Initial DWS Notification Prepared by *
n/a

Signature	Date (yyyy/mm/dd) *
n/a	

Additional Comments

Incident occurred on private property.

Fields marked with an asterisk (\*) are mandatory.

Section 2A continued

Do you have another adverse to report? \*  Yes  No

## Notices of Adverse Test Results and Issue Resolution (Schedule 16)

Drinking Water Systems Regulation (O. Reg. 170/03)

Fields marked with an asterisk (\*) are mandatory.

### Section 2B – Notice of Issue Resolution – Section 16-9 (O. Reg. 170/03)

#### DWS Information

DWS Name \*

Tecumseh Distribution System

DWS Number \*

260004969

DWS Contact Name

Last Name \*

Dupuis

First Name \*

Brad

Telephone Number (including area code) \*

519-735-2184

ext. 145

Fax Number (including area code)

Email Address

bdupuis@tecumseh.ca

Initial AWQI Number<sup>1</sup> \*

n/a

Date Resolved (yyyy/mm/dd) \*

2023/06/23

Date Resolution Notice Provided (yyyy/mm/dd) \*

2023/06/23

Are there previous resample AWQI numbers? \*

Yes  No

If known, please provide All Other Resample AWQI numbers<sup>2</sup>

Summary of action taken and results achieved (include test results showing water quality is no longer adverse) \*

11:26am -Water service operators arrive on-site (12746 County Rd.42) found repair to broken water service already made by contractor and service turned on. Water service operators note that the residence appears empty at this time.

11:30am -Water service operators contact lead water operator. Begin flushing lines to the residence (as a precaution).

11:40am -Lead water operator arrive on-site - discuss findings with water service operators on-site.

11:50am -Chlorine residual sample collected - free chlorine of 1.46ppm obtained.

11:53am -Lead water operator contact Manager, Water Services/ORO with details of situation.

1:51pm -Manager, Water Services/ORO contact lead water operator with issuance of precautionary boil water.

2:06pm -Bacti and chlorine samples collected - free chlorine of 1.62ppm obtained.

2:10pm -Curb box to affected residence shut off and water services calling card left at residence.

3:36pm -Email notification to system Owner's regarding precautionary boil water.

5:50pm -Lead water operator delivered precautionary boil water letter and information notice from WECHU to resident.

6:20pm -Water turned on at curb box and lines flushed.

June 22 2023

2:10pm -Second set of Bacti and chlorine samples collected - free chlorine of 1.58ppm obtained.

4:40pm -First set of Bacti results received - Passed.

June 23 2023

2:30pm -Second set of Bacti results received - Passed.

2:38pm -Email notification to system Owner regarding the rescinding of the precautionary boil water.

3:03pm -Lead water operator spoke to resident (over phone) to advise that precautionary boil water was lifted.

5:27pm -Lead water operator delivered rescind letter from WECHU to residence and collected a chlorine sample - free chlorine of 1.29ppm was obtained.

Was an advisory issued by the Health Unit? \*

Yes

No  Self Imposed Advisory

Advisory Type

Other

Precautionary Boil Water

Date Issued (yyyy/mm/dd)

2023/06/21

If rescinded, please select date the advisory was rescinded

Date Rescinded (yyyy/mm/dd)

2023/06/23

Fields marked with an asterisk (\*) are mandatory.

Section 2B continued

Other (Include Health Unit directions and any additional attachments)

Attached File Name	Created	Modified	Size (MB)	Remove Selected File
				<input type="checkbox"/>
Number of attachments			0	

Notification/Report Provided By

Last Name \*

Dupuis

First Name \*

Brad

Position \*

Manager, Water Services/ORO

Signature



Date (yyyy/mm/dd) \*

2023/06/26

Additional Comments

Do you have another adverse to report?  Yes  No

<sup>1</sup> The original adverse test result.

<sup>2</sup> When resolving an AWQI state all resample AWQI numbers associated with the initial AWQI. For example, an adverse test result of total coliform requires the corrective action of resampling. If any of the resamples come back adverse, then you must continue resampling until the test results for two consecutive sets of samples taken 24 to 48 hours apart are clear or as directed by the Health Unit. Submit the AWQI form and include all related AWQI numbers (Initial AWQI number and any Resample AWQI number) on the same Section 2B. This eliminates the requirement to submit a Section 2B form for every adverse test result associated with one incident. If the first resample test result is clear then this section does not apply. For THMs and HAAs drinking water system owners/operators are not required to take resamples as part of the prescribed corrective actions; unless directed by the Health Unit.



C.O.C.: -

REPORT No: 23-014836 - Rev. 0

**Report To:**

Town of Tecumseh  
 1189 LaCasse Blvd  
 Tecumseh, ON N8N 2C7

**CADUCEON Environmental Laboratories**

5-3201 Marentette Ave  
 Windsor, ON N8X 4G3

**Attention: Brad Dupuis**

DATE RECEIVED: 2023-Jun-21	CUSTOMER PROJECT: Town of Tecumseh
DATE REPORTED: 2023-Jun-22	P.O. NUMBER:
SAMPLE MATRIX: Drinking Water	WATERWORKS NO: 260004969

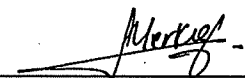
Analyses	Qty	Site Analyzed	Authorized	Date Analyzed	Lab Method	Reference Method
Coliforms - DC Media (Liquid)	1	WINDSOR	SGUMMAH	2023-Jun-21	ECTC-001	MECP E3407

R.L. = Reporting Limit

NC = Not Calculated

Test methods may be modified from specified reference method unless indicated by an \*

Client I.D.	Sample I.D.	Date Collected	Parameter	Total Coliform (DC Media)	E coli (DC Media)
			Units	CFU/100mL	CFU/100mL
			R.L.	1	1
12746 CTY RD 42	23-014836-1	2023-Jun-21		0	0



Lorina Merko  
 Laboratory Manager

23-014836

REPORT NUMBER (Lab Use)

**DRINKING WATER FACILITY CLASSIFICATION**

Municipal     Non-Municipal     Reg. 170/03  
 Large     Small     Reg. 319/06 & 319/06  
 Residential     Non-Residential     Reg. 243/07  
 Seasonal     Year-Round     Private Well Water  
 Other:

Indicate Laboratory or Depot Samples are Submitted to

Kingston     Ottawa     Richmond Hill     Windsor     Barrie     London

Organization: Town of Tecumseh

Contact: Brad Dupuis    Tel: 519-791-6609    Fax: 519-735-1695

Waterworks Address: Town of Tecumseh, 1189 Lacasse Blvd, Tecumseh ONT, N8N 2C7

Waterworks No.: 250004959

Public Health Unit: 519-259-2149

Email: bdupuis@tecumseh.ca    nbradley@tecumseh.ca

Invoicing Address (if different):

Project Name/No.: Town of Tecumseh

P.O. No.:

Lab No.	Sample Source and/or Sample Identification	S.P.L.	Sample Matrix*	Date Collected (yy-mm-dd)		Adverse Resample	ANALYSES REQUESTED										Free Chlorine (mg/L)	# Bottles/ Sample
				Time Collected	Time Resample		Microbiological					Chemical						
1	12746 City RD 47		D.W	23-06-21	12:06PM	NO	<input checked="" type="checkbox"/> Total Coliform / E.coli	<input type="checkbox"/> Heterotrophic Plate Count	<input type="checkbox"/> Lead	<input type="checkbox"/> Fluoride	<input type="checkbox"/> HAAs	<input type="checkbox"/> Nitrite, Nitrate as N	Sch. 23 Inorganics	Sch. 24 Organics		1.62	1	
2																		
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		

\* Sample Matrix Legend: TW = Treated Water, DW = Distribution Water, GW = Raw Groundwater, SW = Raw Surface Water, UGW = Untreated Groundwater (Drinking Water Distribution)

GUDI = Groundwater under the influence of surface water, PR = Plumbing Residential, PNR = Plumbing Non-Residential \*\* Fastest possible TAT achievable (same day if applicable) \*\*\* See Caducean General Turnaround Time Terms

Sample Source and/or Sample Identification: **AF (auto)** **ES (sample status)** **ES (below-off)**

Has Lab Service Notification (LSN) Form been completed & submitted to the MOE/PHU?  Yes  No  Not Applicable

Laboratory Analysis will not commence until all Notification information is received and the Submission form is appropriately completed

SAMPLE SUBMISSION INFORMATION		SHIPPING INFORMATION		REPORTING / INVOICING		SAMPLE RECEIVING INFORMATION (LABORATORY USE ONLY)	
Sampled by: <b>JAMIE BALKWILL</b>	Submitted by: <b>JAMIE BALKWILL</b>	Courier (Client account):	Invoice	Report by Fax:	Received By (print): <b>SARAH</b>	Signature: <i>[Signature]</i>	
Date (yy-mm-dd) time: <b>23-06-21 2:00PM</b>	Date (yy-mm-dd) time: <b>23-06-21 2:38PM</b>	Courier (Caducean account):	# of Pieces: <b>1</b>	Results by Email:	Date Received (yy-mm-dd): <b>23-06-21</b>	Time Received: <b>2:31</b>	
		Drop Off:		Invoice by Email:	Laboratory Prepared Bottles: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
		Caducean (Pick-up):		Invoice by Mail:	Sample Temperature °C: <b>16</b>	Labeled by: <i>[Signature]</i>	

C.O.C.: -

REPORT No: 23-014959 - Rev. 0

**Report To:**

Town of Tecumseh  
 1189 LaCasse Blvd  
 Tecumseh, ON N8N 2C7

**CADUCEON Environmental Laboratories**

5-3201 Marentette Ave  
 Windsor, ON N8X 4G3

**Attention: Brad Dupuis**

DATE RECEIVED: 2023-Jun-22	CUSTOMER PROJECT: Town of Tecumseh
DATE REPORTED: 2023-Jun-23	P.O. NUMBER:
SAMPLE MATRIX: Drinking Water	WATERWORKS NO: 260004969

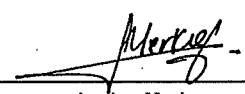
Analyses	Qty	Site Analyzed	Authorized	Date Analyzed	Lab Method	Reference Method
Coliforms - DC Media (Liquid)	1	WINDSOR	SGUMMAH	2023-Jun-22	ECTC-001	MECP E3407

R.L. = Reporting Limit

NC = Not Calculated

Test methods may be modified from specified reference method unless indicated by an \*

Client I.D.	Sample I.D.	Date Collected	Parameter	Total Coliform (DC Media)	E coli (DC Media)
			Units	CFU/100mL	CFU/100mL
			R.L.	1	1
12746 CTY RD 42	23-014959-1	2023-Jun-22		0	0



Lorina Merko  
 Laboratory Manager



# DRINKING WATER SUBMISSION FORM

## CADUCEAN

ENVIRONMENTAL LABORATORIES  
Client committed. Quality assured.

No. 1

Indicate Laboratory or Depot Samples are Submitted to:  
 Kingston  Ottawa  Richmond Hill  Windsor  Barrie  London

Organization:  
Town of Tecumseh

Contact:  
Brad Dupuis  
Tel: 519-791-6509

Waterworks Address:  
Town of Tecumseh  
1189 Lacasse Blvd.  
Tecumseh ONT.  
N8N 2C7

Waterworks No.:  
260004969

Quote No.:

Project Name/No.:  
Town of Tecumseh

P.O. No.:

After Hours Tel:  
519-890-6055

Public Health Unit:  
519-258-2146

Email:  
bdupuis@tecumseh.ca  
nbradley@tecumseh.ca

\* Sample Matrix Legend: TW = Treated Water, DW = Distribution Water, GW = Raw Groundwater, SW = Raw Surface Water, UGW = Untreated Groundwater (Drinking Water/Distribution)

GUJ = Groundwater under the influence of surface water, PR = Plumbing Residential, PNR = Plumbing Non-Residential \*\* Fastest possible TAT achievable (same day if applicable) \*\*\* See Caduceon General Turnaround Time Terms

Sample Source and/or Sample Identification  
 AF (auto) EG (below-off) SS (sample station)

Lab No.	Sample Matrix	S.P.L.	Date Collected (yy-mm-dd)	Time Collected	Adverse Resample	Total Coliform / E.coli	Background	Heterotrophic Plate Count	Sodium	Lead	Fluoride	Trihalomethanes	HAA's	Nitrite, Nitrate as N	Sch. 23 Inorganics	Sch. 24 Organics	Other	TURNAROUND TIME REQUESTED
1	D.W		23-06-22	2:10pm	NO	✓												Free Chlorine (mg/L)
2																		1.58
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		

Has Lab Service Notification (LSN) Form been completed & submitted to the MOE/PHU?  Yes  No  Not Applicable

Laboratory Analysis will not commence until all Notification information is received and the Submission form is appropriately completed

SAMPLE SUBMISSION INFORMATION		SHIPPING INFORMATION		REPORTING / INVOICING	
Sampled by:	Submitted by:	Courier (Client account)	Invoice	Report by Fax	
JAMIE BARKWU	JAMIE BARKWU	Courier (Caduceon account)	<input type="checkbox"/>	Results by Email	<input checked="" type="checkbox"/>
Date (yy-mm-dd) Time:	Date (yy-mm-dd) Time:	Drop Off	# of Pieces	Invoice by Email	<input type="checkbox"/>
23-06-22 2:10PM	23-06-22 2:34pm	Caduceon (Pick-up)	1	Invoice by Mail	<input type="checkbox"/>

Received By (print): *Sarah* Signature: *[Signature]*

Date Received (yy-mm-dd): 23-06-22 Time Received: 2:52

Laboratory Prepared Bottles:  Yes  No

Sample Temperature °C: 15 Labeled by: *[Signature]*



June 21, 2023

12746 County RD 42

Tecumseh, Ontario

N9K 0B3

Dear Resident/Owner/Operator:

This is to inform you that a boil water advisory has been issued for your residence or place of business.


As a precaution, I am advising you to use bottled water or water that has been brought to a rolling boil for at least one minute for drinking or food preparation.

Attached to this letter is an information sheet which provides more detailed instructions on precautionary measures.

Your water service will be repaired, flushed, and tested to ensure your safety.  
Town of Tecumseh staff will notify you when this has been completed.

If you have any questions, please contact the Environmental Health Department at 519-258-2146, ext. 4475.

Sincerely,



Shanker Nesathurai, MD, MPH, FRCPC  
Acting Medical Officer of Health

SN/

June 23, 2023

12746 County Rd  
Tecumseh, Ontario  
N9K 0B3

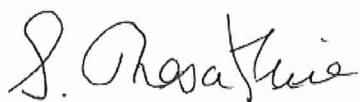
Dear Resident/Owner/Operator:

Staff from Town of Tecumseh has informed the Windsor-Essex County Health Unit (WECHU) that the maintenance on the water line serving your residence or place of business has been flushed and tested to the satisfaction of the WECHU.

You may discontinue the Boil Water Advisory precautions.

If you have any questions, please contact the Environmental Health Department at (519) 258-2146 ext. 4475.

Sincerely,



Shanker Nesathurai, MD, MPH, FRCPC  
Acting Medical Officer of Health

SN/



# SAFE WATER DRINKING



## BOIL WATER ADVISORY (BWA)

PRECAUTIONARY MEASURES FOR RESIDENTIAL SETTINGS

### Why has this BWA been issued?

A BWA has been issued because recent conditions or concerns may have adversely affected the quality or safety of your potable water supply.

A BWA is put in place to protect you from harmful organisms that may be in your water and can make you and your family sick.

### What do you do during a BWA?

Windsor-Essex County Health Unit advises that all water used for consumption must be either boiled or be commercially bottled water. Home filtration devices (filters) do not kill bacteria. In your home, these devices could be portable, plumbed-in, or faucet mounted.

- To boil, water must be heated to a **rolling boil for at least one (1) minute** to kill all disease-causing microorganisms prior to use. The water should then be cooled and stored in a clean, covered container and refrigerated until you are ready to use it.

*In addition to using boiled water for people and pets to drink, you must also use it for making ice cubes, preparing foods and beverages, washing fruits and vegetables, and brushing teeth.*

### You can continue to use your tap water for...

- *Handwashing*
- *Laundry*
- *Showering/Bathing*

Adults may continue to use the supply, as long as the water is not swallowed.

*Young children, immunocompromised, as well as individuals with skin lesions or open wounds should take sponge baths with boiled water.*

## Besides drinking, what should boiled water be used for?



### Food Preparation

This includes but is not limited to ready to eat foods such as fruits and vegetables, concentrated fruit drinks, and breast milk substitutes (formula). However, when preparing food which requires boiling, you may do so as long as water is brought to a hard boil for at least one (1) minute. Discard all food and beverages previously made with water, such as ice cubes, breast milk substitutes (formula), and juices. Disinfect all containers with a household bleach solution described below and remake with boiled water.



### Infant Feeding

Only boiled water should be used if you are feeding infants with a breast milk substitute (formula) or washing infant feeding supplies. Bottled water should be boiled as well to ensure that any potential bacteria are removed. Keep in mind that mixing juices and other foods should all be done with boiled water when feeding your infant or child during a BWA.



### Dishwashing

Hand dishwashing can be done in the usual manner with hot tap water, however final rinse should be done with boiled or bottled water, or disinfected in a **bleach solution of 20mL (4 teaspoons) of unscented household bleach to 10 L of lukewarm water**. Dishes should be left to air dry.

Mechanical dishwashers may be used as long as a chlorinated detergent is used (read product label) in the cycle, or there is a sanitizing cycle (check owner's manual).



### Brushing Teeth

Use boiled or bottled water.

### Waterborne Outbreak

In the event of a waterborne outbreak, extra precautions may be required including: using the bleach solution or an alcohol based disinfectant on the hands after handwashing, allowing dishes to soak in the bleach solution for 1 minute before air drying, and sponge bathing only. Follow the advice of the Health Unit regarding additional precautions in the event of an outbreak.



## YOUR HEALTH IS OUR CONCERN.

Continue with these procedures until you have been notified by the Windsor-Essex County Health Unit that the boil water advisory has been lifted. Be sure to follow any instructions provided regarding flushing pipes before use.

## FOR MORE INFORMATION ON SAFE WATER OR WATER ADVISORIES

Contact the **WINDSOR-ESSEX COUNTY HEALTH UNIT**

[www.wechu.org](http://www.wechu.org) | 519-258-2146 ext. 4475



#### References:

Health Canada. (2015). *Guidance for issuing and rescinding boil water advisories in Canadian drinking water supplies*. Retrieved from <http://www.healthycanadians.gc.ca/publications/healthy-living-vie-saine/water-advisories-avis-eau/index-eng.php>

Health Canada. (2008). *Boil water advisories and boil water orders*. Retrieved from <http://www.hc-sc.gc.ca/ewh-semt/pubs/water-eau/boil-ebullition-eng.php>