

STAFF REPORT

DATE: June 22, 2013

FROM: Joan Merrick, Chief Administrative Officer

SUBJECT: Sandspit Water Update

Recommendation:

THAT the Board receives the staff report entitled "Sandspit Water Update";

AND THAT, in keeping with the following, the Moresby Island Management Committee be directed to provide all relevant documentation it has pertaining to the water quality issue to Regional District staff, including water testing reports and correspondence:

- Regional District maintaining "care and control", which is a Municipal Insurance Association coverage requirement, and
- Accountability Standards for Regional District Committees and Commissions Board policy

AND FURTHER THAT the Board provide staff with next steps, if required.

Background:

The Sandspit Community Water system does not currently meet the guidelines for Canadian drinking water quality. As stated in a joint release by the Moresby Island Management Committee (MIMC) and Northern Health (attachment 1), the "prevalence of disinfection by-products is due to a combination of factors including the size of the distribution system and the natural organic matter found in the source water". The release also states "the theoretical risk presented by disinfection by-products are much less than the risks from consuming water that has not been adequately disinfected".

The Regional District's *Strategic Priorities 2013-2014* report includes Water Quality in Sandspit as one of the five priorities. In addition, at the February 15^{th,} 2013 Board meeting, the Board passed a resolution stating "that staff provide a report to a future Board meeting on possible funding options for the treatment of Sandspit water" (No. 127-2013).

Discussion:

Staff has talked with Doug Quibell, Northwest Manager of Public Health Protection for Northern Health, to discuss the issues and clarify information published in an article by the Haida Gwaii Observer (attachment 2).

The issue stems from a higher level of Trihalomethanes (THMs) than is allowed under Federal guidelines. In the article, Mr. Quibell is quoted as stating "although Sandspit's THM levels are higher than the federal guidelines recommended, they are not a significant health issue. At this level, we don't feel there is a significant health risk".

In discussion with Mr. Quibell, he recommended using either tap-mounted or whole-house filtration systems as the short to medium term solution. The joint release states that activated carbon or reverse osmosis point-of-use treatment units may be used to effectively reduce chlorine and disinfection by-products. Mr. Quibell and an associate have committed to attending the August Board meeting as a delegation to talk about the Sandspit water issues.

With respect to the cost of constructing a water filtration system and potential funding, staff has researched information from various sources. The general thought in the water community is that treatment plants for small systems are generally not affordable from either the capital or operating perspective. Although cost data is extremely limited due to few filtration systems being installed on small water systems, staff has gathered several examples, listed below:

• **Dodge Cove Water** (Quotation only)

- Capital cost \$450,000+ (package plant)
- Capacity 32 homes
- Annual operating cost \$52,000 +

South Hazelton

- o Capital cost \$3,750,000, funded by:
 - \$ 717,000 Canada/BC Infrastructure Grant
 - \$1,000,000 Build Canada Grant
 - \$ 800.000 Gas Tax
 - \$ 400,000 reserves, and
 - \$ 700,000 long-term debt
- Capacity 220 connections
- Annual operating cost \$90,000

South Pender

- o Capital cost \$4,700,000, funded by:
 - \$1,000,000 Federation of Canadian Municipalities
 - \$2,000,000 long-term debt, and
 - \$1,000,000 unknown
- Capacity 1,000 population (estimated 400 connections)
- Annual operating cost \$150,000

Queen Charlotte Village (2009 figures)

- Capital cost \$4,500,000, funded by:
 - \$2,800,000 grants
 - \$900,000 long-term debt, and
 - **\$800,000** reserves
- Capacity 480 connections
- Annual operating cost \$351,000 (entire system) funded by \$130,000 in parcel taxes and \$221,000 in user fees.

Egmont

- Capital cost \$1,500,000
- Capacity 28 population
- Annual operating cost unknown (combined with other systems)

Garden Bay

- Capital cost \$450,000 (package plant)
- Capacity unknown
- Annual operating cost unknown (combined with other systems)

Although certainly not a complete list of projects, this information does illustrate that for smaller communities, both the capital cost and ongoing annual operating costs are prohibitive. Cost effectiveness is only achieved through the economies of scale of a larger system.

The Sandspit water service area includes 208 parcels with 192 users. The community closest in size to Sandspit would be South Hazelton. Assuming that the Regional District could potentially receive 1/2 to 2/3 grant funding for a \$3.7 million project, the burden per parcel to finance the remaining capital cost would be between \$432 to \$653 per year¹. The additional costs of operating a treatment plant would likely be \$375 to \$468 per year². These charges are in addition to the \$250 user fees and \$225 parcel tax already charged to fund the current operating costs of the water system. Lowest total estimated cost per household would be approximately \$1,282 ³ per year.

Given the high estimated cost to finance and operate a treatment system, the medium term solution of an inline treatment system, as recommended by Northern Health, would be far more cost effective for individual home owners to install and maintain. Some research would have to be done regarding the cost of this type of unit, but it is expected to be under \$1,000 per household (one time cost) plus annual costs for filter replacement and maintenance. These costs would be borne directly by the household and not funded as part of the water system.

- 1 \$3.7 mil x .5 = \$1.85 mil financed at 4% for 20 years = \$136k per year in debt payments; \$136k / 208 = \$653. \$3.7 mil x .33 = \$1.22 mil financed at 4% for 20 years = \$90k per year in debt payments; \$90k / 208 = \$432.
- \$90k / 220 users = \$468 per year for additional operating costs\$150k / 400 users = \$375 per year for additional operating costs
- 3 \$432 + \$375 + \$250 + \$225 = \$1,282 total of lowest estimated new parcel tax and user fees plus existing parcel tax and user fees

Other considerations:

Another complexity for a small community is the level of water operator's certification required for the operation of treatment plants. Staff has been advised that a treatment plant would normally require a Level 4 operator. The ability to recruit someone with those qualifications may prove challenging as qualified water operators are in high demand. Northern Health may allow a lesser qualified operator providing they are actively pursuing the required training and experience to gain the required certification.

<u>UBCM's – Small Water Systems Working Group:</u>

Staff has contacted UBCM to request an update on the Small Water Systems Working Group. At the time of writing this report, no updated information is available; however, staff has attached information obtained from the UBCM web site including:

- 1. Issues Facing Small Water Systems in British Columbia (attachment 3)
- 2. February 2013 Electoral Area Director's Forum Power Point Presentation (attachment 4)

Infrastructure Planning Grant:

Staff submitted a grant application to the Ministry in July of 2012 and subsequently followed up on the status of the application several times. The most recent information in regard to the status is that the application was shortlisted but is not being considered at this time. The Ministry assured staff that the application would be included for consideration in the next round of Infrastructure Planning Grants.

Strategic Priorities and Next Steps: (attachment 5)

Objective: Examine the current extent of the water quality situation in Sandspit and decide on a future direction.

Pending Actions:

Staff has requested from the Moresby Island Management Committee (MIMC) all
pertinent documentation it has related to the water quality issue and, to date, has
not received this information. Staff has, however, received a report from MIMC
which has been included as part of this agenda package.

Staff is seeking a motion from the Board that, in keeping with the following, MIMC be directed to provide all relevant documentation pertaining to the water quality issue to Regional District staff, including water testing reports and correspondence:

- Regional District maintaining "care and control", which is a Municipal Insurance Association coverage requirement, and
- Board policy "Accountability Standards for Regional District Committees and Commissions".
- 2. An update to the Small Water Systems Working Group has been requested from UBCM.
- 3. Northern Health has been invited to attend the August 2013 Regional District Board meeting
- 4. Future course of action staff is seeking direction from the Board.

Grant Programs

B.C. Community Water Improvement Program

- Provincial funding program to improve water and wastewater infrastructure.
- Program fully allocated.

Building Canada Fund - Communities Component

- Provincial and Federal funding for infrastructure works.
- Application intake closed all successful projects have been announced.
 Funding for this program is now fully committed.

Canada/BC Infrastructure Program

- Provincial and Federal funding for infrastructure works.
- Program fully allocated.

Canada/BC Municipal Rural Infrastructure Fund

- Provincial and Federal funding for infrastructure works.
- Program fully allocated.

Infrastructure Stimulus Fund

- Federal and Provincial funding for construction-ready infrastructure projects to provide short-term stimulus to the economy.
- Application intake closed all successful projects have been announced. Funding for this program is now fully committed.

Other Potential Grant Sources:

Gwaii Trust – provided a grant for the Queen Charlotte Village water system

Gas Tax – Community Works Funds – the Regional District currently has \$746,000 in unallocated funds which can be used for capital projects to support cleaner air, cleaner water or reduced greenhouse gas emissions.

Future Infrastructure Programs

In Budget 2013, Canada unveiled the *New Building Canada Plan*, which includes a renewed Gas Tax Fund and Building Canada Fund. This follows federal legislation in 2011 making provisions for the Gas Tax Fund in the post-2014 period and the 2012/13 *Long-Term Infrastructure Plan* process lead by the federal government, intended to inform federal infrastructure programming after the 2014 expiry of the Building Canada Fund.

The following table sets out a summary of the various New Building Canada Plan programs as identified in Budget 2013:

Fund	Components	Funding Commitment	Details
	GST Rebate	\$10.4 billion over 10 years	This represents a continuation of the current GST rebate available to local governments across the country.
Community Improvement Fund	Gas Tax	\$21.8 billion over 10 years	 Represents current annual investment plus 2% per annum indexing. Eligible projects expanded to include: highways, local and regional airports, shortline rail, short-sea shipping, disaster mitigation, broadband and connectivity, brownfield redevelopment, culture, tourism, sport, and recreation infrastructure. Agreements by March 2014.
Building Canada Fund	National Infrastructure Component	\$4 billion over 10 years	 Supports projects of national significance particularly those that support job creation, economic growth and productivity (highways, public transit, and gateway and trade corridor- related infrastructure). Investments in disaster mitigation infrastructure projects will also be eligible.
	Provincial- Territorial Infrastructure Component	\$10 billion over 10 years	 Supports projects of national, regional and local significance in a broader range of categories including highways, public transit, drinking water, wastewater, connectivity and broadband, and innovation (including infrastructure at post-secondary institutions that supports advanced research and teaching). Includes base funding for each province and territory. Details on allocations to be announced later; FCM specifically cited as being involved in discussions around program parameters. P3 screen required for any project with capital costs over \$100 million.
P3 Canada Fund	P3 Canada Fund	\$1,25 billion over 5 years	Includes \$10 million to support P3 assessments by provinces/territories or local governments, where these are required (see above); will fund 50% of costs to a maximum of \$200,000 per project.



May 14, 2012

JOINT RELEASE

Users of the Sandspit Community Water System To:

Re: Disinfection by-products in the Sandspit Community Water System

The Moresby Island Management Committee (MIMC) is working with Northern Health to address levels of disinfection by-products in the Sandspit Community Water System that are slightly higher than the recommended Health Canada guidelines. Water testing has been conducted by the Sandspit Community Water System over the past year in accordance with Health Canada's guidelines.

Together with Northern Health, the MIMC will develop a long-term plan to ensure the drinking water provided to users meets the Guidelines for Canadian Drinking Water Quality. Despite the slightly elevated levels of disinfection by-products and based on the current research, there is no significant impact on health. Please see the attached Questions & Answers document for further detail.

The theoretical risk presented by disinfection by-products are much less than the risks from consuming water that has not been adequately disinfected.

The prevalence of disinfection by-products is due to a combination of factors including the size of the distribution system and the natural organic matter found in the source water. Northern Health will be supporting the MIMC in applying for grant money to conduct planning and feasibility studies to determine possible treatment methods.

Individuals with further concerns relating to their exposure to disinfection by-products should consult with their physician.

Evan Putterill Electoral Area 'E' Director Skeena-Queen Charlotte Regional District

Dr. David Bowering, NW Medical Health Officer Northwest Health Services Delivery Area

Northern Health

Attachment: Northern Health Questions & Answers: Chlorine and Chlorinated Disinfection By-Products in Drinking Water

Chlorine and Chlorinated Disinfection By-Products in Drinking Water Questions and Answers



May 2012

Northern Health is working with the Moresby Island Management Committee to address concerns with disinfection by-products (DBPs) in the Sandspit Community Water System. This Q&A document addresses the sources and levels of DBPs seen in this water supply and their potential health concerns.

What are chlorinated DBPs?

Chlorinated DBPs are compounds that can form when the chlorine used to disinfect drinking water reacts with naturally occurring organic matter (e.g., decaying leaves and vegetation). Disinfection is an essential component of public drinking water treatment. The health risks associated with disinfection by-products are much less than the risks from consuming water that has not been adequately disinfected. There are many types of chlorinated DBPs. The most common of these are trihalomethanes (THMs) and haloacetic acids (HAAs). All chemical disinfectants used in drinking water can be expected to form DBPs, which may affect human health.

Why does chlorine need to be added to my drinking water?

A significant health risk from drinking water supplies is the presence of disease-causing microorganisms. To reduce this risk to an acceptable level a disinfectant, such as chlorine, is added to inactivate microorganisms found in water. Northern Health recommends that drinking water supplies be disinfected, unless specifically exempted. A small amount of chlorine (chlorine residual) is maintained in the distribution system to preserve the microbiological safety of the water throughout the distribution system.

How am I exposed to chlorinated DBPs?

Drinking, bathing and showering can expose you to chlorinated DBPs when you either consume or inhale compounds. The additional contributions from showering/bathing were taken into account to ensure the guideline is protective of health from all exposures from drinking water.

What are the Canadian drinking water guidelines for DBPs?

Health Canada has established a guideline for DBPs which are protective of health effects from lifetime exposure. Separate guidelines exist for total THMs and total HAAs which are expressed as a Maximum Acceptable Concentration (MAC). Information on this is found in the table below. The average of four samples taken over a period of one year is used to determine if a water system meets or exceeds the MAC.

The Sandspit Community Water System has been monitoring the levels of THMs and HAAs in the drinking water supply for the past year and the results indicate that levels exceed the MAC for total THMs but are below the MAC for total HAAs. The results are summarized as follows. Values are given in parts per billion (ppb) or µg/L.

	Total THMs (ppb)	Total HAAs (ppb)
12 May 20 1 5 1 1 1	109	- 55
Zhylin de la company	130	59
21 Nov. 201	110	64
13 Feb 2012 19	141	- 63
Average	122	60
MACHINE	100	80

What are the possible health effects from THMs in drinking water?

Some studies suggest a link between reproductive effects and exposure to high levels of THMs. However, an increase in the concentration of THMs could not be linked to an increase in risk, suggesting the need for more research. THMs have been associated with slightly elevated levels of bladder and colon cancer, but no direct link has been determined. Health Canada guidelines are very conservative given the current data.

For more detailed information on the possible health effects of THMs please refer to the Health Canada's Guideline Technical Document: http://www.hc-sc.gc.ca/ewh-semt/pubs/water-eau/trihalomethanes/index-eng.php.

Chlorine and Chlorinated Disinfection By-Products in Drinking Water Questions and Answers



May 2012

What factors determine the levels of chlorinated DBPs in the water supply?

Levels will vary within a single water supply depending on the season, water temperature, amount of natural organic matter in the water, pH, amount of chlorine added, time in distribution system, and other factors.

How can chlorinated DBPs be reduced in drinking water supplies?

The best approach is to reduce or prevent their formation. This can be done at the treatment plant through removing the organic matter from the water before chlorine is added, optimizing the disinfection process, using alternative disinfection methods, or by using a different water source. It is critical that any method used to control levels of chlorinated DBPs *must not* reduce the effectiveness of disinfection.

Are there any alternatives to chlorination?

Water can be treated with alternative disinfectants however any chemical disinfectant used to treat drinking water may produce by-products. Many alternative disinfectants break down quickly and must be supplemented with a chlorine-based disinfectant in the distribution system. Alternatives include ozone, chlorine dioxide, chloramines and UltraViolet light.

What can I do to reduce DBP exposure at home?

There are treatment technologies available that can be used in households in order to reduce exposure to DBPs. Activated Carbon or Reverse Osmosis point-of-use treatment units may be used at the household tap to effectively reduce chlorine and disinfection by-products. Alternatively, a treatment unit for the whole home can be installed instead of point-of-use devices. Be sure to read and follow manufacturers' instructions on operation and maintenance, and look for products certified to standards developed by the National Sanitation Foundation (NSF) or Canadian Standards Authority (CSA) for drinking water treatment.

What are the next steps?

Northern Health is supporting the Moresby Island Management Committee and the Sandspit Community Water System in applying for grant money to conduct planning and feasibility studies to determine possible treatment methods.

For further information regarding the operation of the Sandspit Community Water System please contact: Bob Prudhomme at 250-637-1295

For further information regarding health implications please contact Northern Health at:

Dr. Ronald Chapman, Chief Medical Health Officer. 250-649-7653. ronald.chapman@northernhealth.ca
Dr. David Bowering, NW Medical Health Officer: 250-631-4261. david.bowering@northernhealth.ca
Esther Tong, Environmental Health Officer. 250- 622-6380. esther.tong@northernhealth.ca

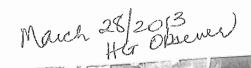
For more technical information on chlorine, disinfection by-products, and alternative disinfectants, you may consult the Guideline Technical Documents prepared by the Federal-Provincial-Territorial Committee on Drinking Water, available at: http://www.hc-sc.gc.ca/ewh-semt/pubs/water-eau/index-eng.php

References:

Guidelines for Canadian Drinking Water Quality: Guideline Technical Document: Trihalomethanes. http://www.hc-sc.gc.ca/ewh-semt/pubs/water-eau/trihalomethanes/index-eng.php

Guidelines for Canadian Drinking Water Quality: Guideline Technical Document: Haloacetic Acids. http://www.hc-sc.gc.ca/ewh-semt/pubs/water-eau/haloaceti/index-eng.php

Page 2 of 2



hie Stocker Sr. of Old Massett was honoured and astonished, in that order, on nday evening. More, see page 9.

Water filters vised in Sandspi

Sandspit residents are being advised to use water filters to avoid being exposed k and ining higher-than-recommended levels of

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trihalomethanes in the community's water system.

About 20 residents who attended a water meeting March 21 were told that carbon filters - either tap mounted or whole house systems - will reduce the trihalomethanes, or THMs, in their water, said regional district director Evan Putterill.

The level of THMs in Sandspit's water was first identified as an issue last year, following a year of test results. Since then, the Moresby Island Management Committee has been trying to get funding from the province to start work on a treatment system to remove them, but no grant has been approved so far.

THMs are chemical compounds that can be formed when water is disinfected with chlorine, as it is in most municipal water systems. These compounds may be associated with cancer, although no direct link has been established.

Sandspit's test results over four quarters in 2011 and 2012 showed an

· Filiers - cont. page 2



Winter's over, or at least we hope it is. Last week, possibly our last snowfall of the season? Thanks to Amber Fleming for the picture.

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nd this section useful. Parents can use this writing tips and upcoming literacy events.



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average level of 122 parts per billion, well over the Health Canada's recommended level of 100.

Regional district director Evan Putterill said residents have serious concerns about the situation, and want to know what they can do about it.

"Some people are quite concerned, and rightfully so," Mr. Putterill said. "THMs are probable carcinogens and we have well over the levels prescribed in the Canadian Drinking Water Guidelines. This is a very serious issue across Canada and it's criminal that our governments are downplaying it instead of taking it seriously."

According to information from Northern Health, THMs do pose a theoretical risk, but it's much less than the risk of consuming water that has

not been disinfected.

Doug Quibell, Northern Health's northwest manager of public health protection, said although Sandspit's THM levels are higher than federal guidelines recommend, they are not a significant health issue.

"At this level, we don't feel there is a significant health risk," he said. "We would definitely like to see it cleaned up... but in the short term this isn't a

significant issue."

Many coastal communities are dealing with THMs in the water, he said. They are caused when chlorine combines with organic compounds, which are more common in coastal areas.

"Prince Rupert has the same thing, Port Edward has the same thing," he said. "The treatment is very expensive. Very few communities have the kind

of tax base to do it."

Mr. Quibell said Northern Health has been working with MIMC to get a grant to study treatment options. He believes more grant money will become available between now and 2020, as Ottawa has just made this kind of treatment more of a priority.

Mr. Quibell also said certain types of filters do work. To be effective, he said, the filters must conform to NSF/ ANSI standards and be maintained to the manufacturer's specifications.

Sandspit's new way of charging households for water based on how much they use was also discussed at last week's public meeting. The new system takes effect April 1. Every household will be allowed a substantial amount of water for the regular annual fee, but if use exceeds that amount, they will have to pay extra.

Mr. Putterill said most of the residents at the meeting were happy with the metered billing structure, although one person did complain that water costs more in Sandspit compared to

Prince Rupert.

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ISSUES FACING SMALL WATER SYSTEMS IN BRITISH COLUMBIA

The following is a summary of the key issues facing small water systems in British Columbia as identified by the members of the UBCM Small Water Systems working group. The identification of key issues is designed to inform the development of recommendations for resolving local government small water systems issues, which may include recommendations for local government policy and regulatory options as well as provincial policy and regulatory changes for existing and future small water systems. Any recommendations will be designed to ensure that small water systems can be sustained. For the purposes of the working group, a small water system is sustainable if it can provide safe drinking water that is affordable to the people it serves in terms of cost for operator training, operations, capital replacement and if applicable, treatment.

Interpretation and Application Issues

- The current definition of a small water system, which is one that serves up to 500 individuals in any 24 hour period, is too broad and ambiguous within the Drinking Water Protection Regulation.
- The definition captures too many systems that do not need to be covered by the legislative and regulatory framework, as it focuses on the number of users instead of the number of connections.
- There is a corresponding need to determine minimum and maximum connections for the definition of small water systems.
- The Safe Drinking Water Act and Safe Drinking Water Regulation are designed for larger systems and more densely populated areas as opposed to more remote and sparsely populated areas.
- The legislative and regulatory framework is viewed as unfairly differentiating between large and small water systems, whereby a more stringent interpretation of the legislation through the 4-3-2-1-0 treatment standard is applied to small water systems.
- The monitoring requirements, and interpretation of the Drinking Water Protection Regulation, for Point of Entry (POU) and Point of Entry (POU) systems make this technology cost prohibitive.

Financial Issues

- The costs of managing and operating small water systems have not been financially sustainable. The majority of systems lack economies of scale and need major capital upgrades to meet the Drinking Water Act regulatory requirements, which can make the systems cost prohibitive.
- There is an absence of sufficient funding, both from users and external funding sources, to provide the desired level of water service for current and future users.

Operational Issues

• There are limited technical resources for operation in remote water systems.

- Small water systems experience deficient system reliability due to the lack of adequate operator training.
- There is an inadequate number of certified small water system operators, which
 makes even contract operation of small water systems in remote areas quite
 challenging.

Governance Issues

- Many small water systems suffer from inadequate governance, where they lack knowledgeable decision making bodies that are capable of making consistent and transparent decisions.
- There is a need to ensure stronger public oversight of private water systems through a public governing or regulatory body.

Liability Issues

 Local governments are frequently requested to assume responsibility for small water systems, which increases their liability exposure. Local government acquisition strategies can require costly upgrades and assessments to eliminate any potential liability.



Small Water Systems Working Group

Electoral Area Directors' Forum February 19, 2013



UBCM SWS Committee

UBCM Small Water Systems Committee: Members		
UBCM	Al Richmond, Chair , Cariboo RD Andy Shadrack, Central Kootenay RD Lloyd Foreman, Fraser Valley RD Wayne McIntyre, Capital RD Mark Pendergraft, RD Okanagan-Similkameen	
Ministry of Health	Tim Lambert	
Ministry of Community, Sport & Cultural Development	Glen Brown	
Ministry of Forests, Lands, and Natural Resource Operations	Pieter Bekker	
Health Authorities	Lucy Beck	



Purpose of the SWS Cte.

- Review local government implementation experiences with the Drinking Water Protection Act and related Drinking Water Protection Regulation.
- Review the principles of the drinking water legislative and regulatory framework.
- Identify policy, regulatory and/or legislative amendments where appropriate.
- Develop an action plan for developing and/or implementing any identified policy, regulatory, and/or legislative changes



Function of the SWS Cte.

- Act as a forum for discussing local government issues with the implementation of the *Drinking Water Protection Act and the associated Drinking Water Protection* Regulation
- Identify and develop relevant small water system issues into acceptable and valid actionable items for the action plan
- Provide relevant and practical solutions for small water system administration and guideline, policy, and legislation development
- Strengthen the province-wide capacity to meet current and emerging small water systems challenges
- Develop recommendations for resolving local government issues, which may include recommendations for provincial policy, regulatory and/or legislative changes.



Financial Best Practice Guide

- · UBCM Steering Committee
 - Contract issued September 2012
- · Identification/prioritization of BPs
- · Development of:
 - Overview document
 - 6 Best Practice documents
- · Piloted with 7 small water systems
- Final 'Working Draft' due February 28, 2013



SWS WG Updates

Financial Best Practice Guide Cont'd

- Implementation/Next Steps
 - Web presence & hard copy
 - Health Authority endorsement and promotion
 - Other stakeholder endorsement and promotion
 - Continued education and communication
 - Living document
 - Receiving input/feedback
 - · Updating documents



Subdivision SWS Best Management Practices

- · UBCM Steering Committee
 - Contract issued January 2013
 - Current status;
 - · Regulatory/policy review
 - · Draft Table of Contents
 - · Draft Best Practice framework
 - · Implementing stakeholder survey
 - Issue and gap identification and prioritization
 - Identification of current practices
- Final deliverable due mid April 2013



SWS WG Updates

Local Government Policy and Bylaws

Local governments were encouraged to provide the Committee with policy and bylaws needed to support sustainable small water systems.

- Financial and Subdivision projects will help in identification of local government authority and best practices
- Additional local government involvement
 - · examples: Acquisition strategies, innovative policies and bylaws



Systems Concept Paper

- Will look at a new system, with an integrated approach for sustainable SWS
- With increasing engagement of SWS users, SWS operators, local government through: local government bylaws, bestpractices (subdivision, finance, and system co-operation, acquisition), with provincial regulatory structure, i.e., drinking water and subdivision regulations



SWS WG Updates

Systems Concept Paper Cont'd

- Will include:
 - Financial and Subdivision work
 - Proposed definitions of micro system (MS) and new definition of small water system (SWS)
 - Proposed requirements of MS and SWS
- Will be written by the Ministry of Health, the Ministry of Community, Sport and Cultural Development, and the Ministry of Forests, Lands and Natural Resources



Systems Concept Paper Cont'd

Draft concept paper for consultation: Fall 2013

Status: Need to finalize subdivision and financial management sub-committee work and proposed regulatory structure- Summer 2013



Next Steps

 Progress report to UBCM Executive in April to decide if the Working Group's mandate should be extended

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5. Water Quality in Sandspit

Goals (18 months)

- a. Examine the current extent of the water quality situation in Sandspit and decide on a future direction
- Receive and review all the information collected by the Moresby Island Management Committee on the extent of the problem

Actions

- Research what alternative approaches are being used in other areas as well as gathering information from UBCM's Small Water Systems Working Group
- Invite Northern Health to meet with the Regional District to discuss the extent of the problem and what possible strategies are available to resolve the issue
- Decide on a future course of action



Skeena-Queen Charlotte Regional District

BOARD POLICY

Title: Directors Allowance for Elect	ronic Devices
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1. PURPOSE

This policy is to provide Directors with the convenience of viewing their agendas electronically, reduce the paper consumption of the Regional District and to support teleconferenced meetings.

2. POLICY

The Regional District will provide a taxable benefit allowance of \$300 per year to a Director who chooses to use a personal electronic device to view meeting agendas.

3. TERMS/DEFINITIONS

"electronic device" means a computer, laptop, notebook or any other device that supports viewing agendas electronically.

4. SCOPE

This policy applies to all Directors.

5. **RESPONSIBILITY**

Directors who receive this allowance will be responsible for viewing their agendas electronically for the majority of all Skeena-Queen Charlotte Regional District meetings. Paper copies will not be provided to Directors opting to receive this allowance.

As the Regional District does not have internal Information Technology support staff, Directors will be responsible for purchasing and maintaining their own electronic device and the appropriate software to support the viewing of large PDF files.

6. PROCEDURES

- The agendas will be emailed to Directors the Friday before the regular Board meeting in PDF format and will also be posted to the RD website.
- Late Item Agendas will be emailed to Directors the Friday of the actual meeting in PDF format and will be posted to the RD website.

- Directors are responsible for savings the Agenda and Late Item Agenda on their electronic device prior to the actual meeting. The Regional District will not support wireless connectivity for accessing the agendas.
- Due to their sensitive content, In Camera Agendas saved to the electronic device must be deleted following each meeting.



Approval Date:	Resolution No.	
1. Amended:	Resolution No.	



Skeena-Queen Charlotte Regional District

BOARD POLICY

Title:	Directors' Report	
Title.	Directors Report	

1. PURPOSE

The purpose of this policy is to provide a framework in which Directors may provide a verbal report to keep the Board apprised of the status of any current or proposed initiatives in their area.

2. POLICY

The Directors may verbally report to the Board on the status of current initiatives as well as proposed initiatives being worked on in their respective municipality or electoral area. Reports must focus on local government initiatives related to the following key areas of interest:

- 2.1 Economic Development
- 2.2 Land-Use
- 2.3 Services
- 2.4 Infrastructure

Directors' reports are for information only. They are not to include actionable items, which should be addressed as separate agenda topics and in keeping with the Late Item Agenda Policy.

3. PROCEDURES

Directors' reports will be verbal and will form part of the regular agenda appearing under New Business.

The Chair will call for each Director, in turn, to present their report. Total time allotted for each Director should be limited to two minutes. The Chair may at his/her discretion extend this time.

Reporting is not mandatory. A Director may pass if they do not feel they have anything of merit to contribute.

4. RESPONSIBILITY

Each Director is responsible in determining whether there is anything of merit they wish to report within the criteria under section 2.

Approval Date:	Resolution No.	
1. Amended	Resolution No.	

5. REFERENCES

- This policy is the result of the *Strategic Priorities 2013-2014* report adopted by the Board May 25, 2013.
- Late Item Agenda Board Policy.



BOARD REPORT

To: SQCRD Board of Directors

From: Justina Musgrave, Administrative Assistant

Subject: Support for Participation of the "ShakeOut BC" Drill

Date: June 22, 2013

File #: 7130

RECOMMENDATION:

THAT the Board receives the staff report entitled "Support for Participation of the ShakeOut BC Drill";

AND THAT the Board hereby approves participating in the "Great BC ShakeOut" on October 17, 2013 at 10:17 a.m.

BACKGROUND:

The BC Earthquake Alliance Society is organizing a province-wide earthquake drill to be held on October 17, 2013 at 10:17am, to enhance public awareness of the earthquake hazard and encourage personal preparedness. During the drill, participants will be asked to "Drop, Cover and Hold On" for up to two minutes, in response to a simulated earthquake event.

DISCUSSION:

The "Great BC ShakeOut" is being led by the BC Earthquake Alliance Society and the ShakeOut BC Organizing Committee, a coalition of local, provincial, federal and non-governmental organizations working together to promote earthquake preparedness to British Columbians. The drill, which is intended to be an annual event, is modeled after the highly successful "Great California ShakeOut". The drill was originally scheduled for January 26th each year to mark the 311th anniversary of the last magnitude 9 earthquake in BC (January 26, 1700). As this date conflicted with Secondary Schools provincial exams, the date has now been changed to the third Thursday of each October.

The largest Canadian earthquake occurred on Haida Gwaii, registering at a magnitude 8.1. Just days after the earthquake drill last year, Canada's second largest earthquake occurred on Haida Gwaii, registering at a magnitude 7.8.

The ShakeOut BC Organization Committee is encouraging individuals and organizations to register at www.shakeoutbc.ca to be counted in the drill, promote the drill within their community and have staff participate on drill day.

COST & BUDGET IMPLICATIONS:

Minimal - Staff participation in the drill. Advertising of the drill and the attached factsheet will be advertised on the Regional District website.

From: Evan Putterill [mailto:eputterill@gmail.com]

Sent: Wednesday, May 29, 2013 11:12 AM

To: SQCRD Info

Cc: Anna Ashley, Director; Barry Pages, Chair; Carol Kulesha; Carol Kulesha, Director; Dan Franzen, Director; Des Nobels, Director; Ian Gould, Director; Karl Bergman, Director; Michael Racz, Director; Nelson Kinney, Director; rbedard@portedward.ca; cao@portclements.ca; cao@queencharlotte.ca; vom@mhtv.ca; Observer; newsroom@thenorthernview.com; Deena Wilson

Subject: May 24th SQCRD Board Highlights

Hi Barry,

Can you please bring back the committee policy to our next board meeting. With the speed that we were going and the confusion surrounding those agenda items I was not aware that we were adopting the policy at this time.

I have some concerns with the policy that need to be addressed, and considering we did not spend any time discussing it at the last meeting I think that it would be prudent to do so.

Regards,

Evan Putterill Electoral Area E Director (Moresby Island) Skeena-Queen Charlotte Regional District



Skeena-Queen Charlotte Regional District

BOARD POLICY

Title:	ntability Standards for Regional District Committees and issions	
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1. PURPOSE

The purpose of this policy is to provide clear direction on the need for any Regional Districtestablished committee or commission to maintain a high level of accountability to the Regional District.

2. POLICY

The Regional District is accountable to the public and tax payers and must maintain a high level of accountability and transparency. Its operations must be conducted in an ethical manner that is consistent with legislative requirements.

In order to fulfill these requirements, all committees and commissions established by the Regional District (RD) must be fully accountable to the RD.

3. TERMS / DEFINITIONS

For the purposes of this policy, the following terms and definitions apply:

"Accountability" refers to the principle that the Regional District is obligated to demonstrate and take responsibility for its actions, decisions and policies and that it is answerable to the public at large.

"Committee" means a type of small deliberative assembly that is usually intended to remain subordinate to another larger deliberative assembly. This term refers to all committees, commissions and other committee-like structures established by the Regional District, whether by bylaw, terms of reference or resolution.

"Regional District" refers to the Skeena-Queen Charlotte Regional District.

"Regional District Delegate" means the Chief Administrative Officer, Corporate Office or Treasurer of the Skeena-Queen Charlotte Regional District and the deputies to these positions.

"Timely Manner" means reasonably quick and shall be within the time period set by the Regional District Delegate.

"Transparency" refers to the principle that the Regional District will conduct its business in an accessible, clear and visible manner and that its activities are open to examination by its stakeholders.

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4. SCOPE

Applies to all committees.

5. RESPONSIBILITY

To aid in ensuring full accountability, the following will apply:

- The Committee shall provide to the Regional District (RD) all agendas and related reports, correspondence or other attachments forming part of the agenda, prior to each meeting held by the Committee.
- When reports, included as part of the agenda, are given verbally, the Committee's Recording Secretary shall summarize the relevant points included in the verbal report and include that summary as a note in the minutes.
- The Committee shall create and provide to the RD complete minutes of all its meetings in a timely manner, following each meeting.
- The RD shall be copied on all out-going correspondence issued by the Committee or its Chair.
- The Committee shall provide the RD with all correspondence, reports, data, or other
 relevant information gathered or received in relation to the services undertaken on
 behalf of the RD or, at the sole discretion of the RD, maintained at the offices of the
 Committee and made available to the RD upon request.
- The Committee shall provide unfettered access to all financial records. In addition, at the request of the RD Delegate, the Committee shall provide the following, in a timely manner:
 - a. Copies of bank statements;
 - b. Financial Statements, including but not limited to a Statement of Operations (Revenue and Expenses) and a Statement of Financial Position (Balance Sheet). Where the size of the Committee does not warrant them to maintain a full set of financial statements, the RD Delegate may accept other types of statements that are deemed to provide the relevant information;
 - c. Copies of all budgets or financial plans and any supporting documents;
 - d. Copies of invoices, statements, cancelled cheques, or other records of financial transactions;
 - e. Lists of vendors or customers and aged receivable or payable listings;
 - f. Account reconciliations;

- g. Payroll records, including timesheets, T-4's, Records of Employment and payroll registers;
- h. Copies of any remittance forms, such as GST, PST and Payroll;
- i. Copies of the General Ledger or bookkeeping system; and
- j. The Committee shall provide to the RD any record or information deemed appropriate by the RD Delegate to determine that the Committee is handling its financial affairs in a responsible manner consistent with the purpose of the Committee and the level of accountability, transparency and ethics maintained by the RD.

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None.

7. REFERENCES

None.

Approval Date:	May 24, 2013	Resolution No.	247-2013
Amended:		Resolution No.	