Regional Pathogen Reduction Study

Scientific Studies Program Fiscal Year 2023-2024 Central Santa Monica Bay, Lower San Gabriel River, Rio Hondo, Upper Los Angeles River

> Gateway Water Management Authority Presented by: Richard Watson

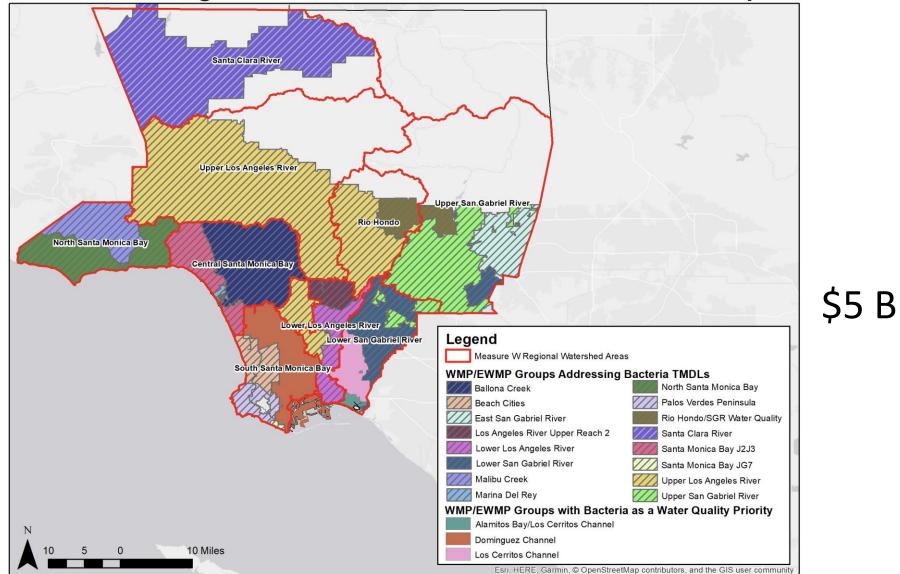
Study Overview

The Study will collect samples from waterbodies within urbanized areas of participating WAs and analyze them for bacterial indicators, viruses, and human markers.

- Describe nexus to Stormwater and Urban Runoff capture and pollution reduction.
 - Study will facilitate improved targeting of pathogen sources and water to capture and/or treat
 - Study may reduce level of stormwater capture for bacteria compliance purposes through the identification of non-MS4 sources of risk thereby improving the protection of human health
 - Study will likely lead to partnering with various parties, such as wastewater agencies and homeless services agencies, to address human sources of pathogens.



Measure W Regional Watershed Areas and WMP/EWMP Groups





- Gateway Water Management Authority will manage the project and select the Study Team, which is expected to consist of a team of local and national experts and academia.
- The study team will be selected based on qualifications to address the Work Plan developed by stakeholders, including study sponsors, interested stakeholders, an independent Technical Advisory Committee, and regulators.
- Members of the Study Team are expected to include engineers, scientists, and statisticians with experience in similar studies, such as the San Diego Surfer Health Study.



Problem Statement:

- Waterborne pathogens represent the most significant potential threat to the health of people recreating in and around the ocean and inland waters of Los Angeles County.
- Current standards are based on FIB (fecal indicator bacteria), which are used as proxies for pathogens.
 - FIB are ubiquitous; a vast network of structural control measures would need to be implemented to provide adequate control projected cost over \$5 billion.
 - USEPA and academics agree that human sources of pathogens pose the greatest risk.
 - Unless high-risk sources are targeted, water capture projects may receive large FIB loads, but miss the highest risk human sources.

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Methodology:

- Study work plan will be developed through a stakeholder-led process with the input of technical experts, including academics.
 - Stakeholder engagement is at the forefront of the study to ensure that diverse viewpoints are incorporated.
- Study will collect samples from beaches and waterbodies. Samples will be analyzed for traditional bacterial indicators, viruses, and human markers during wet and dry weather.
 - Identify areas with highest risk to support a focus on those areas
 - Identify the sources causing the highest risk to focus on those sources
- Study will assess control measure effectiveness and efficiency
 - Identify the best BMPs to address the sources
 - Support planning, applying municipal funds, requests for SCWP funding, and actions by other parties

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Regional collaboration efforts:

- Initiated small group discussions and built a scope for a Safe, Clean Water Regional Program project
- Presented Approach to E/WMP Groups
- Discussed with proponents of watershed-specific studies
- Discussed with Regional Board staff

Revised study three times to address concerns

- Clearly focused on human pathogens
- Clarified that study is a component of overall strategy to protect human health
- Clarified that implementation continues during the study
- Reduced first year cost of study



Phase	Description	Cost	Completion Date
Task 1	Stakeholder Process	\$490,000	7/22 – 6/27
Task 2	Health Risk Assessment	\$5,880,000	7/22 – 9/26
Task 3	Risk Management	\$1,734,600	4/23- 3/27
Task 4	Application of Study Findings	\$490,000	1/26 – 6/27
TOTAL		\$8,594,600	

Funding Request

WASC	Year 1	Year 2	Year 3	Year 4	Year 4
CSMB	\$47,109.15	\$329,764.06	\$282,654.91	\$307,364.38	\$107,432.50
LLAR	\$33,843.21	\$236,902.50	\$203,059.29	\$220,810.57	\$77,179.51
LSGR	\$44,169.54	\$309,186.78	\$265,017.24	\$288,184.85	\$100,728.71
NSMB	\$4,748.60	\$33,240.22	\$28,491.61	\$30,982.33	\$10,829.20
RH	\$30,413.67	\$212,895.68	\$182,482.01	\$198,434.45	\$69,358.42
SCR	\$15,866.36	\$111,064.53	\$95,198.17	\$103,520.32	\$36,183.27
SSMB	\$48,654.33	\$340,580.32	\$291,925.99	\$317,445.93	\$110,956.29
ULAR	\$102,094.95	\$714,664.67	\$612,569.72	\$666,120.09	\$232,827.71
USGR	\$49,973.39	\$349,813.71	\$299,840.33	\$326,052.14	\$113,964.40
TOTAL	\$376,873.21	\$2,638,112.47	\$2,261,239.26	\$2,458,915.06	\$859,460.00



- By developing a better understanding of pathogens present in the region's watersheds, the relative risk to human health they pose, and the effectiveness of various control measures, new or adapted BMPs can be established that improve water quality and reduce human health risks at our beaches and inland waterbodies.
- Short-term: results could be used to protect people from health risks that aren't currently known.
- Long-term: results will enable the targeted placement of BMPs in locations where they can maximize the prevention or treatment of key sources of human pathogens.

Questions?

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