



DRINKING WATER INSPECTORATE

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**To: Rebecca Pow
Parliamentary Under Secretary of State for the Environment**

The Drinking Water Inspectorate for England will publish its annual drinking water report on 9 July, which summarises the overall drinking water quality of private supplies within England and public supplies managed by water companies operating in England.

The provision of safe and clean water direct to the taps of 99% of all homes in England remains vital to health and wellbeing. This was never more important than in 2020 when people were asked to stay at home due to CoViD-19. The lockdown resulted in a steep rise in demand for water, around 30% above normal by late May, which was equivalent to the peak levels seen during the hot summer of 2018. Whilst this was an obvious outcome, less obvious was the effect on the operations of companies, especially those with a direct customer interface. Entry into homes for sampling, complications due to restrictions and the added combination of hot weather with usage were challenging for companies.

Maintaining confidence in our water supply is achieved through robust regulation and the demonstration of delivery. During 2020, water was abstracted, treated, sampled, analysed and supplied to a high standard by staff working through the pandemic without interruption and unseen. All those involved should rightly be commended on this.

Companies went to significant lengths and used innovative solutions to meet their regulatory requirements, providing a robust analytical dataset which demonstrated the high quality of drinking water in England. The Compliance Risk Index for England was 2.54. This represents a continuing improvement in difficult times. There were only four companies which performed worse than the national CRI, the two worst performing companies were Northumbrian, Essex & Suffolk Water, and Southern Water. Half of all companies exceeded their performance commitment in this first year where a CRI of 2 became a common performance commitment, demonstrating the overall high standard of drinking water in England.

There was a reduction in the number of unplanned events impacting water supply, mainly due to the impact of the CoViD-19 pandemic, with less intervention in the networks reducing disruption as the country quietened in April. Nevertheless, the most serious events were associated with improper use of materials; hurried work by contractors; inability to access businesses closed due to the pandemic; and the combination of hot weather and a significant increased demand for water as people stayed at home, all of which put pressure on supplies.

The Events Risk Index is a measure of the impact of events on consumers. During 2020, the Events Risk Index appreciably improved to a national value of 216. Over half of companies achieved a risk index below 6, and there is a continuing push by the industry to reduce event impacts. Unfortunately, Southern Water stands out as a poor performer as the only company which exceeded the national ERI. Nevertheless, consumers in England can truly be confident in the public water supply.

Consequent to general poor performance, Southern Water remains in a transformation programme which is a structured framework to improve performance. New transformation programmes have also been set up for Northumbrian, Essex & Suffolk Water, and South West and Bournemouth Water, to address deteriorating performance. Severn Trent Water has left the transformation process having successfully demonstrated considerable and continuing improvement.

Lead in supply pipes remains a potential health risk. This is mitigated to a high degree by English companies through dosing with orthophosphate at treatment works. This practice is unsustainable due to the supply chain risk for orthophosphoric acid availability. Without focus on removing lead from supply pipes this risk will materialise in the future. The adverse consequences are clear for the health and wellbeing of our future generations.

Climate change and pressure on resources require cross regulatory action to improve infrastructure, from source to tap. The resilience of the industry is measured not just by sufficiency but also by the quality of drinking water. Regulation must therefore hold all those who provide a service for a safe and secure water supply to account, without exception. Where this does not happen or is not possible, further risk is introduced. Our objective is to maintain the high quality of drinking water in England.

In England, 1% of consumers receive their water from a private supply. Private supplies range from large commercial and public activities to single dwellings. What is common between them is that they are a provision of drinking water to a user.

Private supplies remain a serious concern with evidence of faecal contamination in 3.9% of private supplies. These are regulated by local authorities through the combined use of risk assessments and sampling. During 2020, there was a reduction in risk assessments and sampling due to the pandemic. The number of tests on private supplies reduced by 39%; the

number that had been risk assessed within the previous 5 years fell to 5,817, covering 41.7% of the private water supply users and representing a decline of 16%; and finally there was a 76% reduction in risk assessment summaries received by the Inspectorate compared with 2019.

As a consequence of this, a conclusion on whether the quality of private supplies have improved or not, remains uncertain. However, what is certain is that *E. coli* was found in 273 sites sampled in 2020. 107 were without a current risk assessment and of these, most critically, 44 had never had a risk assessment. On this evidence, there are users who may be unaware that their supply is faecally contaminated and oblivious to what action to take to avoid it. This is an unsatisfactory residual risk.

The effect of climate change will result in longer periods of drought, and private supplies are the first to be affected. In four example private supply case studies, three were affected in some way by problems associated with sufficiency. Most notable is a private supply which serves a village of 200 users which increases by another 500 as part of commercial activity. The supply had become increasingly unreliable because of leaking supply pipes, aged infrastructure, disrepair, periodic low rainfall and an increasing demand arising from growing numbers using the supply and microbial contamination. The provision of alternative mains supplies had been explored by the consumers with the local water company but was ruled out on cost grounds. This represents a missed opportunity to secure a safe and secure water supply to a substantial population, which would benefit public health, at a relatively low cost.

The challenge of future water shortages to private supply users should be considered in the wider policy of a safe and secure water supply for all. No strategic or financial provision has been available since 1989 to permit connection to a water company public supply, where it is at a reasonable cost, and with a net benefit to those without a secure supply. The risks without action are clear to the health and wellbeing of those affected.



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