

Audit Report

Upgrade Audit for

The Corporation of the City of Kawartha Lakes

1631768-02

Audited Address: 12 Peel Street, P.O Box 9000, Lindsay, Ontario,
CAN, K9V 5R8

Start Date: Apr 14, 2019 End Date: Apr 15, 2019

Type of audit - Surveillance System Audit

Issue Date: Apr 15, 2019

Revision Level: *Final*

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Definitions and action required with respect to audit findings

Major Non-conformance:

Based on objective evidence, the absence of, or a significant failure to implement and/or maintain conformance to requirements of the applicable standard. Such issues may raise significant doubt as to the capability of the management system to achieve its intended outputs (i.e. the absence of or failure to implement a complete Management System clause of the standard); or

A situation which would on the basis of available objective evidence, raise significant doubt as to the capability of the Management System to achieve the stated policy and objectives of the customer.

NOTE: The "applicable Standard" is the Standard which SAI Global are issuing certification against, and may be a Product Standard, a management system Standard, a food safety Standard or another set of documented criteria.

Action required: This category of findings requires SAI Global to issue a formal NCR; to receive and approve client's proposed correction and corrective action plans; and formally verify the effective implementation of planned activities. Correction and corrective action plan should be submitted to SAI Global prior to commencement of follow-up activities as required. Follow-up action by SAI Global must 'close out' the NCR or reduce it to a lesser category within 90 days for initial certification and within 60 days for surveillance or re-certification audits, from the last day of the audit.

If significant risk issues (e.g. safety, environmental, food safety, product legality/quality, etc.) are detected during an audit these shall be reported immediately to the Client and more immediate or instant correction shall be requested. If this is not agreed and cannot be resolved to the satisfaction of SAI Global, immediate suspension shall be recommended.

In the case of initial certification, failure to close out NCR within the time limits means that the Certification Audit may be repeated.

If significant risk issues (e.g. safety, environmental, food safety, product legality/quality, etc.) are detected during an audit these shall be reported immediately to the Client and more immediate or instant correction shall be requested. If this is not agreed and cannot be resolved to the satisfaction of SAI Global, immediate suspension shall be recommended.

In the case of an already certified client, failure to close out NCR within the time limits means that suspension proceedings may be instituted by SAI Global.

Follow-up activities incur additional charges.

Minor Non-conformance:

Represents either a management system weakness or minor issue that could lead to a major nonconformance if not addressed. Each minor NC should be considered for potential improvement and to further investigate any system weaknesses for possible inclusion in the corrective action program

Action required: This category of findings requires SAI Global to issue a formal NCR; to receive and approve client's proposed correction and corrective action plans; and formally verify the effective implementation of planned activities at the next scheduled audit.

Opportunity for Improvement:

A documented statement, which may identify areas for improvement however shall not make specific recommendation(s).

Action required: Client may develop and implement solutions in order to add value to operations and management systems. SAI Global is not required to follow-up on this category of audit finding.

Audit Type and Purpose

Surveillance Audit:

A systems desktop audit in accordance with the systems audit procedure as it applies to Full Scope accreditation. The audit also included consideration of the results of the most recent audit undertaken in accordance with this Accreditation Protocol and any of the following that have occurred subsequent to that audit including but limited to;

- (a) the results of any audits undertaken in accordance with element 19 of the DWQMS V2;
- (b) historical responses taken to address corrective action requests made by an Accreditation Body;
- (c) the results of any management reviews undertaken in accordance with element 20 of the DWQMS V2; and,
- (d) any changes to the documentation and implementation of the QMS.

Audit Objectives

The objective of the audit was to determine whether the drinking water Quality Management System (QMS) of the subject system conforms to the requirements of the Ontario Ministry of the Environment & Climate Change (MOECC) Drinking Water Quality Management Standard (DWQMS V2).

The audit was also intended to gather the information necessary for SAI Global to assess whether accreditation can continue or be offered or to the operating authority.

Audit Scope

The facilities and processes associated with the operating authority's QMS were objectively evaluated to obtain audit evidence and to determine a) whether the quality management activities and related results conform with DWQMS V2 requirements, and b) if they have been effectively implemented and/or maintained.

Audit Criteria:

- The Drinking Water Quality Management Standard Version 2
- Current QMS manuals, procedures and records implemented by the Operating Authority
- SAI Global Accreditation Program Handbook

Confidentiality and Documentation Requirements

The SAI Global stores their records and reports to ensure their preservation and confidentiality. Unless required by law, the SAI Global will not disclose audit records to a third party without prior written consent of the applicant. The only exception will be that the SAI Global will provide audit and corrective action reports to the Ontario Ministry of the Environment. For more information, please refer to the SAI Global Accreditation Program Handbook.

As part of the SAI Global Terms, it is necessary for you to notify SAI Global of any changes to your Quality Management System that you believe are significant enough to risk non-conformity with DWQMS V2: For more information, please refer to the SAI Global Accreditation Program Handbook.

Review of any changes

Changes to the Operating Authority since last audit include: none identified

EXECUTIVE OVERVIEW

Based on the results of this surveillance system audit the management system remains effectively implemented and meets the requirements of the standard relative to the scope of certification; therefore, a recommendation for certification will be submitted.

Recommendation

Based on the results of this audit it has been determined that the management system is effectively implemented and maintained and meets the requirements of the standard relative to the scope of certification identified in this report; therefore, a recommendation for certification will be submitted to SAI Global review team.

Opportunities for Improvement:

The following opportunities for improvement have been identified.

- Element # 19 - Consider specifically referencing V2.0 of the Drinking Water Quality Management Standard in the Internal Audit Report Template.

It is suggested that the opportunities for improvement be considered by management to further enhance the Operating Authority's Quality Management System and performance.

Management System Documentation

The management systems operational plan was reviewed and found to be in conformance with the requirements of the standard.

Management Review

Records of the most recent management review meetings were verified and found to meet the requirements of the standard. All inputs were reflected in the records, and appear suitably managed as reflected by resulting actions and decisions.

Internal Audits

Internal audits are being conducted at planned intervals to ensure conformance to planned arrangements, the requirements of the standard and the established management system.

Corrective, Preventive Action & Continual Improvement Processes

The Operating Authority is implementing an effective process for the continual improvement of the management system through the use of the quality policy, quality objectives, audit results, data analysis, the appropriate management of corrective and preventive actions and management review.

Summary of Findings

1. Quality Management System	Conforms
2. Quality Management System Policy	Conforms
3. Commitment and Endorsement	Conforms
4. Quality Management System Representative	Conforms
5. Document and Records Control	Conforms
6. Drinking-Water System	Conforms
7. Risk Assessment	Conforms
8. Risk Assessment Outcomes	Conforms
9. Organizational Structure, Roles, Responsibilities and Authorities	Conforms
10. Competencies	Conforms
11. Personnel Coverage	Conforms
12. Communications	Conforms
13. Essential Supplies and Services	Conforms
14. Review and Provision of Infrastructure	Conforms
15. Infrastructure Maintenance, Rehabilitation & Renewal	Conforms
16. Sampling, Testing and Monitoring	Conforms
17. Measurement & Recording Equipment Calibration and Maintenance	Conforms
18. Emergency Management	Conforms
19. Internal Audits	OFI
20. Management Review	Conforms
21. Continual Improvement	Conforms
Major NCR #	Major non-conformity. The auditor has determined one of the following: (a) a required element of the DWQMS has not been incorporated into a QMS; (b) a systemic problem with a QMS is evidenced by two or more minor non-conformities; or (c) a minor non-conformity identified with a corrective action request has not been remedied.
Minor NCR #	Minor non-conformity. In the opinion of the auditor, part of a required element of the DWQMS has not been incorporated satisfactorily into a QMS.
OFI	Opportunity for improvement. Conforms to requirement, but there is an opportunity for improvement.
Conforms	Conforms to requirement.
NANC	Not applicable/Not Covered during this audit.
****	Additional comment added by auditor in the body of the report.

PART D. Audit Observations, Findings and Comments

DWQMS Reference:	1 Quality Management System
Client Reference:	QMS E1 Overview of Operational Plan, revision 7, April 25, 2018
Details: Documented Quality Management System described in the City of Kawartha Lakes Operational Plan. Reviewed and accepted.	

DWQMS Reference:	2 Quality Management System Policy
Client Reference:	QMS E2 Quality Management System Policy (2019 Endorsement), revision 0, November 18, 2016
Details: Policy Statement describes the goals of the Quality Management System – reviewed and accepted. Policy Statement is endorsed by The Mayor and CAO of the City of Kawartha Lakes in January 2018.	

DWQMS Reference:	3 Commitment and Endorsement
Client Reference:	QMS E3 Commitment and Endorsement, revision 1, November 11, 2017
Details: QMS E3 is signed by the Director, Public Works, Manager, Environmental Services and Supervisor, Water and Wastewater Operations in January 2019. The Owner (represented by Mayor and Council) endorses the Operational Plan through a Council Resolution represented by the Director, Public Works, which occurred on December 11, 2018	

DWQMS Reference:	4 Quality Management System Representative
Client Reference:	QMS E4 QMS Representative, revision 5, April 25, 2018
Details: The role of QMS Representative is appointed through procedure QMS E4 and the letter of appointment for the Quality Management and Policy Coordinator signed April 2015. Reviewed and accepted.	

DWQMS Reference:	5 Document and Record Control
Client Reference:	QMS E5 Document and Records Control, revision 14, April 26, 2018
Details: Procedure E5 contains instructions for documents and records control. Reviewed and accepted.	

DWQMS Reference:	6 Drinking Water System
Client Reference:	QMS E6 Drinking Water System, revision 16, March 18, 2019
<p>Details: Contents of Drinking Water System Descriptions reviewed and accepted for all systems including:</p> <ul style="list-style-type: none"> • Lindsay Drinking Water System (Treatment and Distribution) • Bobcaygeon Drinking Water System (Distribution only) • Canadiana Shores Drinking Water System (Distribution only) • Fenelon Falls Drinking Water System (Distribution only) • Janetville Drinking Water System (Distribution only) • Kings Bay Drinking Water System (Distribution only) • Kinmount Drinking Water System (Distribution only) • Manilla Drinking Water System (Distribution only) • Manorview Drinking Water System (Distribution only) • Mariposa Estates Drinking Water System (Distribution only) 	

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- Norland Drinking Water System (Distribution only)
- Omemee Drinking Water System (Distribution only)
- Pinewood Drinking Water System (Distribution only)
- Pleasant Point Drinking Water System (Distribution only)
- Southview Drinking Water System (Distribution only)
- Victoria Place Drinking Water System (Distribution only)
- Woodfield Drinking Water System (Distribution only)
- Woodville Drinking Water System (Distribution only)
- Sonya Village Subdivision Drinking Water System (Distribution only)
- Western Trent/Palmina Drinking Water System (Distribution only)
- Birchpoint Estates Drinking Water System (Distribution only)

DWQMS Reference	7 Risk Assessment
Client Reference:	QMS E7 Risk Assessment, revision 9, May 1, 2017
Details: Procedure E7 reviewed and accepted.	

DWQMS Reference:	8 Risk Assessment Outcomes
Client Reference:	QMS E8 Risk Assessment Outcomes, revision 0, March 6, 2018 QMS E8 Appendix 1 Risk Assessment Rating and Best Management Practices, revision 4, June 25, 2018 QMS-08-T-01 Risk Assessment Tables, revision 0, November 15, 2018 QMS E8 T2 Summary of Critical Control Points, revision 0, November 15, 2018
Details: Risk Assessment Outcomes adequately describes all risk, hazards, hazardous events and critical control limits for the Drinking Water System and covers all required risks as described in the MOECC document "Potential Hazardous Events for Municipal Residential Drinking Water Systems". Risk assessment outcomes are summarized in the Risk Assessment Tables and are current for Lindsay DWS and all Distribution Systems as of November 2018 when a new 36-month assessment was performed. Reviewed and accepted.	

DWQMS Reference:	9 Organizational Structure, Roles, Responsibility and Authorities
Client Reference:	QMS E9 Organizational Structure, Roles, Responsibility and Authorities, revision 6, May 1, 2017 QMS E9 Appendix A Water and Wastewater Division Organizational Chart, revision 10, November 21, 2016
Details: Procedure E9 reviewed and accepted.	

DWQMS Reference:	10 Competencies
Client Reference:	QMS E10 Competencies, revision 12, March 26, 2018 QMS E10 T1 Competencies Table, revision 10, May 17, 2018
Details: Procedure E10 reviewed and accepted.	

DWQMS Reference:	11 Personnel Coverage
Client Reference:	QMS E11 Personnel Coverage, revision 11, November 7, 2016
Details: Procedure E11 reviewed and accepted.	

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DWQMS Reference:	12 Communications
Client Reference:	QMS E12 Communications, revision 7, April 25, 2018
Details: Procedure E12 reviewed and accepted. Examples of Communications with suppliers include a letter outlining requirements of the QMS which was sent to all critical suppliers in July 2018. Reviewed and accepted.	

DWQMS Reference:	13 Essential Supplies and Services
Client Reference:	QMS E13 Essential Supplies and Services, revision 10, November 21, 2016
Details: Procedure E13 reviewed and accepted.	

DWQMS Reference:	14 Review and Provision of Infrastructure
Client Reference:	QMS E14 Review and Provision of Infrastructure, revision 10, June 13, 2018
Details: Procedure E14 reviewed and accepted. Risk assessment outcomes are taken into account as per procedure. A 10 year long term plan (2016-2025) of infrastructure requirements is maintained and discussed with the Owner. Items can be related to risk assessment (e.g. Lindsay WTP Actiflo Relining #2 in 2019 – affects CCP as per Risk Assessment Outcomes)	

DWQMS Reference:	15 Infrastructure Maintenance, Rehabilitation and Renewal
Client Reference:	QMS E15 Infrastructure Maintenance, Rehabilitation and Renewal, revision 13, September 27, 2018
Details: Procedure E15 reviewed and accepted. Operational Plan includes a process for maintenance of Infrastructure and includes a requirement to review with the System Owner. Reviewed and accepted. 10 year long term plan (2016-2025) reviewed.	

DWQMS Reference:	16 Sampling, Testing and Monitoring
Client Reference:	QMS E16 Sampling, Testing and Monitoring, revision 9, September 7, 2018
Details: Procedure E16 reviewed and accepted.	

DWQMS Reference:	17 Measurement and Recording Equipment Calibration and Maintenance
Client Reference:	QMS E17 Measurement and Recording Equipment Calibration and Maintenance, revision 10, November 21, 2016
Details: Procedure E17 reviewed and accepted.	

DWQMS Reference:	18 Emergency Management
Client Reference:	QMS E18 Emergency Management, revision 11, July 11, 2017
Details: Procedure E18 reviewed and accepted. Contingency Plan for Lindsay DWS and an Emergency Contact list are established.	

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DWQMS Reference:	19 Internal Audits
Client Reference:	QMS E19 Internal Audits, revision 8, September 27, 2018
Details: Procedure E19 reviewed and accepted. Internal Audits are performed at least once every calendar year. Most recent internal audit for City of Kawartha Lakes Systems performed November 5-12, 2018 to V2.0 of the DWQMS. No Non-conformances and 7 Opportunities for Improvement were identified.	
Opportunity for Improvement – Consider specifically referencing V2.0 of the Drinking Water Quality Management Standard in the Internal Audit Report Template.	

DWQMS Reference:	20 Management Review
Client Reference:	QMS E20 Management Review, revision 8, April 26, 2018
Details: Procedure E20 captures all PLAN requirements from section 20 of the DWQMS. Management Reviews are conducted a minimum of once every calendar year. Reviewed and accepted. Most recent Management Review Meeting performed July 16, 2018. Action items are noted in the meeting minutes and on the Action Items Tracking Log. Updates made as action items are completed. Reviewed and accepted.	

DWQMS Reference:	21 Continual Improvement
Client Reference:	QMS E21 Continual Improvement, revision 8, June 15, 2018
Details: Procedure E21 reviewed and accepted. Corrective Actions, Preventive Actions and Best Management Practices reviewed included:	
<ul style="list-style-type: none">• 7 Opportunities for Improvement from 2018 Internal Audit• CAR # 2019-01 for THM RAA adverse test result• Best Management Practices are reviewed during the Risk Assessment as described in QMS E08 Appendix 1 Risk Assessment Rating and Best Management Practices, revision 4, June 25, 2018	

Details regarding the personnel interviewed and objective evidence reviewed are maintained on file at SAI Global.

This report was prepared by:

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The audit report is distributed as follows:

- SAI Global
- Operating Authority
- Owner
- MOECC

Notes

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