

Audit Report

Surveillance Audit 2 for

The Corporation of the City of Kawartha Lakes

ACTY-2023-640940

Audited Address: 322 Kent St. W, Lindsay, Ontario, CAN, K9V 5R8

Start Date: April 24, 2023. End Date: April 25, 2023.

Type of audit - Surveillance System Audit

Issue Date: October 31, 2023

Revision Level: *Final*



Audit Report

BACKGROUND INFORMATION

Intertek - SAI Global conducted an audit of «P81» beginning on «A2» and ending on «A3» to «P121».

The purpose of this audit report is to summarise the degree of compliance with relevant criteria, as defined on the cover page of this report, based on the evidence obtained during the audit of your organization. This audit report considers your organization's policies, objectives, and continual improvement processes. Comments may include how suitable the objectives selected by your organization appear to be in regard to maintaining customer satisfaction levels and providing other benefits with respect to policy and other external and internal needs. We may also comment regarding the measurable progress you have made in reaching these targets for improvement.

Intertek - SAI Global audits are carried out within the requirements of Intertek - SAI Global procedures that also reflect the requirements and guidance provided in the international standards relating to audit practice such as ISO/IEC 17021-1, ISO 19011 and other normative criteria. Intertek - SAI Global Auditors are assigned to audits according to industry, standard or technical competencies appropriate to the organization being audited. Details of such experience and competency are maintained in our records.

In addition to the information contained in this audit report, Intertek - SAI Global maintains files for each client. These files contain details of organization size and personnel as well as evidence collected during preliminary and subsequent audit activities (Documentation Review and Scope) relevant to the application for initial and continuing certification of your organization.

Please take care to advise us of any change that may affect the application/certification or may assist us to keep your contact information up to date, as required by Intertek - SAI Global Terms and Conditions.

This report has been prepared by Intertek - SAI Global Limited (Intertek - SAI Global) in respect of a Client's application for assessment by Intertek - SAI Global. The purpose of the report is to comment upon evidence of the Client's compliance with the standards or other criteria specified. The content of this report applies only to matters, which were evident to Intertek - SAI Global at the time of the audit, based on sampling of evidence provided and within the audit scope. Intertek - SAI Global does not warrant or otherwise comment upon the suitability of the contents of the report or the certificate for any particular purpose or use. Intertek - SAI Global accepts no liability whatsoever for consequences to, or actions taken by, third parties as a result of or in reliance upon information contained in this report or certificate.

Please note that this report is subject to independent review and approval. Should changes to the outcomes of this report be necessary as a result of the review, a revised report will be issued and will supersede this report.

Standard:	DRINKING WATER QUALITY MANAGEMENT STANDARD VERSION 2 - 2017
Applicable codes:	Full Scope – Entire DWQMS
Scope of Certification:	The Corporation of the City of Kawartha Lakes
Drinking Water System Owner:	The Corporation of the City of Kawartha Lakes
Operating Authority:	The Corporation of the City of Kawartha Lakes
Population Services:	30208
Activities:	Treatment and Distribution Treatment (Lindsay DWS, Sonya Village DWS and Manilla DWS) and Distribution (all systems) Lindsay Drinking Water System (license # 141-120) Birchpoint Estates Drinking Water System (license # 141-109) Bobcaygeon Drinking Water System (license # 141-105) Canadiana Shores Drinking Water System (license # 141-112) Fenelon Falls Drinking Water System (license # 141-104) Janetville Drinking Water System (license # 141-111) Kings Bay Drinking Water System (license # 141-119) Kinmount Drinking Water System (license # 141-121) Manilla Drinking Water System (license # 141-106) Manorview Drinking Water System (license # 141-118) Mariposa Estates Drinking Water System (license # 141-117) Norland Drinking Water System (license # 141-103) Omeme Drinking Water System (license # 141-108) Pinewood Drinking Water System (license # 141-110) Pleasant Point Drinking Water System (license # 141-113) Sonya Village Subdivision Drinking Water System (license # 141-107) Southview Drinking Water System (license # 141-101) Victoria Place Drinking Water System (license # 141-114) Western Trent/Palmina Drinking Water System (license # 141-102) Woodfield Drinking Water System (license # 141-116) Woodville Drinking Water System (license # 141-115)
Drinking Water Systems	

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Total audit duration:

Person(s): 1 Day(s): 1.5

Audit Team Member(s):

Team Leader: James Pang

Other Participants:

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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 Intertek - 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 Intertek - 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 Intertek - SAI Global prior to commencement of follow-up activities as required. Follow-up action by Intertek - 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 Intertek - 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 Intertek - 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 Intertek - 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 Intertek - 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. Intertek - 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 Intertek - SAI Global to assess whether accreditation can continue or be offered or to the operating authority.

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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
- Intertek - SAI Global Accreditation Program Handbook

Confidentiality and Documentation Requirements

The Intertek - SAI Global stores their records and reports to ensure their preservation and confidentiality. Unless required by law, the Intertek - 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 Intertek - SAI Global will provide audit and corrective action reports to the Ontario Ministry of the Environment. For more information, please refer to the Intertek - SAI Global Accreditation Program Handbook.

As part of the Intertek - SAI Global Terms, it is necessary for you to notify Intertek - 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 Intertek - SAI Global Accreditation Program Handbook.

Review of any changes

Changes to the company since last audit include:

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 continued 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 (continued) certification will be submitted to Intertek - SAI Global review team.

Opportunities for Improvement:

The following opportunities for improvement have been identified.

- Element 3
- Element 4
- Element 5
- Element 7
- Element 9
- Element 20
- Element 21

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

Management System Documentation

The management systems operational plan(s) 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 company 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	NANC
2. Quality Management System Policy	NANC
3. Commitment and Endorsement	OFI
4. Quality Management System Representative	OFI
5. Document and Records Control	OFI
6. Drinking-Water System	NANC
7. Risk Assessment	OFI
8. Risk Assessment Outcomes	Conforms
9. Organizational Structure, Roles, Responsibilities and Authorities	OFI
10. Competencies	NANC
11. Personnel Coverage	NANC
12. Communications	NANC
13. Essential Supplies and Services	NANC
14. Review and Provision of Infrastructure	NANC
15. Infrastructure Maintenance, Rehabilitation & Renewal	NANC
16. Sampling, Testing and Monitoring	NANC
17. Measurement & Recording Equipment Calibration and Maintenance	NANC
18. Emergency Management	NANC
19. Internal Audits	Conforms
20. Management Review	OFI
21. Continual Improvement	OFI
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 in 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 the 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:	3 Commitment and Endorsement
Client Reference:	QMS E3
Details: OFI Reviewed QMS E3 with the following improvement suggestions: <ul style="list-style-type: none">• The Operational Plan does not need to be re-endorsed annually unless there are changes to the signatories.• Simplify wordings regarding endorsement through the Council Resolution.	

DWQMS Reference:	4 Quality Management System Representative
Client Reference:	QMS E4 Ap A
Details: OFI The Quality Management and Policy Coordinator was appointed by the Manager of Water and Wastewater on Feb 18, 2021. Since the Top Management (TM) was defined as comprising of the Director, Manager and two Supervisors, the appointment should rightfully be signed by all members of TM.	

DWQMS Reference:	5 Document and Record Control
Client Reference:	QMS E5
Details: OFI The management concern should consider to periodically review the currency of the Operational Plan and associated procedures. For example, Form QMS E20 F1 no more in use to be removed from the system in a timely manner.	

DWQMS Reference	7 Risk Assessment
Client Reference:	QMS E7
Details: OFI Reviewed record of risk assessment (RA) for Lindsay, Sonya and Manilla DWS to be in general conformance. However, not all the 21 distributions systems were identified to form part of any of the RA outcome table. Therefore, the management concerned should consider linking them to the said RA records. In addition, the management may consider indicating in the record of review that a designated member absence is due to something beyond their control, such as maternity leave, where applicable in the future.	

DWQMS Reference:	8 Risk Assessment Outcomes
Client Reference:	QMS E8
Details: Conformance Reviewed records of deviations from the critical control limits at the Lindsay, Sonya and Manilla DWS for 2021 and 2022, to be in general conformance.	

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DWQMS Reference:	9 Organizational Structure, Roles, Responsibility and Authorities
Client Reference:	QMS E9
Details: OFI Reviewed QMS E9 with the following improvement suggestions: <ul style="list-style-type: none">To list all the 21 drinking water systems under this Operational Plan.Since the Director of Public Works is part of the Top Management of the Operating Authority, to avoid including him with the Owner as in the opening sentence of QMS E3.Consider maintaining only the Director of PW and the Manager of W&WW as members of Top Management. Refer to the definition of Top Management in the DWQMS Standard.	

DWQMS Reference:	19 Internal Audits
Client Reference:	QMS E19
Details: Conformance The record of internal audits performed by Julie Henry, Liam Newitt and Robert MacPherson on Nov 8 and 10, 2022 were reviewed to be in general conformance. It was noted that the name of auditees spoken to during the audit were recorded in the audit notes.	

DWQMS Reference:	20 Management Review
Client Reference:	QMS E20
Details: OFI It was noted that a management review report was issued to all members of the top management for comments/suggestions in June 2022. However, only two of the four members (Director (Bryan Robinson) and Manager (Amber Hayter)) responded the following month. Other than the above, the management review was in general conformance. The management concerned may consider ensuring that all members of top management indicated their participation by at least responding that they have no comments/suggestions.	

DWQMS Reference:	21 Continual Improvement
Client Reference:	QMS E21
Details: OFI Reviewed records of improvements resulting from corrective actions and opportunities for improvements. Since it was not clear as to how any future best management practice adopted will be recorded and tracked, the management may consider adjusting procedure QMS E21 to accommodate any such future activities.	

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

This report was prepared by:

JRPAug

Audit Report

James Pang

Intertek - Intertek - SAI Global Management Systems Auditor

The audit report is distributed as follows:

- Intertek - Intertek - SAI Global
- Operating Authority
- Owner
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Notes

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