

Audit Report

Surveillance 2 Audit for

OCWA Operating authority for City of Kawartha Lakes Owner

ACTY-2023-648480

Audited Address: 322 Kent Street, Lindsay, Ontario, CAN, K9V 5R8

Start Date: April 27, 2023. End Date: April 28, 2023.

Type of audit - Surveillance Audit

Issue Date: April 28, 2023 Revision Level: *Draft Rev 1*



BACKGROUND INFORMATION

Intertek - SAI Global conducted an audit of Ontario Clean Water Agency for the City of Kawartha Lakes beginning on April 27 and ending on April 27, 2023 to DRINKING WATER QUALITY MANAGEMENT STANDARD VERSION 2 - 2017.

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

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

NA

Scope of Certification:

Applicable codes:

Full Scope – Entire DWQMS

Drinking Water System Owner:

City of Kawartha Lakes

Operating Authority:

Ontario Clean Water Agency

Population Services:

11,665

Activities:

Treatment

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) Manorview Drinking Water System (license # 141-118)

Drinking Water Systems

Mariposa Estates Drinking Water System (license # 141-117)
Norland Drinking Water System (license # 141-103)
Omemee Drinking Water System (license # 141-108)
Pinewood Drinking Water System (license # 141-110)
Pleasant Point Drinking Water System (license # 141-113)
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)

Total audit duration:

Person(s): 1

Day(s): 1.88

Audit Team Member(s):

Team Leader James Pang

Other Participants:

Audit Report

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 essent emencement of follow-up activities as required. Follow-up action be never that the NCR or reduce it to a lesser category within 90 days for initial certification and within 10 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.

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.

None

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 Ma	Quality Management System NANC		
2. Quality Management System Policy		NANC	
3. Commitment and Endorsement		Conforms	
4. Quality Management System Representative		Conforms	
5. Documen	5. Document and Records Control		
6. Drinking-Water System NANC		NANC	
7. Risk Asse	essment	Conforms	
8. Risk Asse	ssment Outcomes	Conforms	
9. Organizat	ional Structure, Roles, Responsibilities and Authorities	NANC	
10. Compete	ncies	Conforms	
11. Personne	el Coverage	Conforms	
12. Commun	ications	NANC	
13. Essential Supplies and Services Conforms		Conforms	
14. Review a	14. Review and Provision of Infrastructure Conforms		
15. Infrastructure Maintenance, Rehabilitation & Renewal Conforms		Conforms	
16. Sampling	16. Sampling, Testing and Monitoring Conforms		
17. Measure	17. Measurement & Recording Equipment Calibration and Maintenance Conforms		
18. Emergen	18. Emergency Management Conforms		
19. Internal A	19. Internal Audits Conforms		
20. Manager	20. Management Review Conforms		
21. Continua	l 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 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:	OP-03A
Details: Conformance	
	n off by the Owner, represented by the Director of PW and Manager of 22, and by the top management represented by the Regional Hub Manager

DWQMS Reference: 4 Quality Management System Representative

Client Reference: OP-04

Details: Conformance

The QEMS Representative for the CKL DWS are the three (3) Kawartha Hub Process and Compliance Technicians (PCT).

DWQMS Reference	7 Risk Assessment
Client Reference:	OP-07

Details: Conformance

and GM on Oct 27 and 26, 2022.

Noted that the assumptions, likelihood, and consequence used in the assessments were reviewed during the management review meeting held on Dec 7, 2022. Reviewed the Risk Assessment Outcome tables for the 18 DWS to be in general conformance. Noted that they were all reviewed by the relevant personnel.

DWQMS Reference:	8 Risk Assessment Outcomes
Client Reference:	OP-08
Deteiler Confermence	ı

Details: Conformance

Reviewed several records of responses, reporting and recording deviations from the CCL at Omemee WTP in Dec 2022, Woodfield in Aug 2022, Bobcaygeon in June 2022. Other records reviewed that didn't have true CCP alarms included Kinmount in July 2022, Western Trent in Feb 2023 and Fenelon Falls in Oct 2022.

DWQMS Reference:	10 Competencies	
Client Reference:	OP-10	
Details: Conformance		

Based on the listings of active operators, all 12 at the North Cluster, 9 at the Central Cluster and 10 at the South Cluster, had valid operators' licenses.

DWQMS Reference:	11 Personnel Coverage
Client Reference:	OP-11
Details: Conformance	•
Reviewed the 2023 Kaw	rartha Hub Operations Hub On Call Roster to include an operator for each

of the three Cluster throughout the year.

13 Essential Supplies and Services	
OP-13	

Details: Conformance

Noted that there was a list of essential supplies and services Rev 23 dated June 13, 2022. This will be verified during the onsite re-certification audit next year.

DWQMS Reference:	14 Review and Provision of Infrastructure
Client Reference:	OP-14
Details: Conformance	
Reviewed records of m	eetings between the Owner and OCWA held in 2022 on May 31, Oct 25,

Nov 22, Dec 20, in 2023 on Jan 24, Feb 27, Mar 21 to be in general conformance.

DWQMS Reference:	15 Infrastructure Maintenance, Rehabilitation and Renewal
Client Reference:	OP-15
Details: Conformance	
Noted that there were in	dividual capital budget plans for all the DWS from 2023 to 2032.
The cover letter for these	e to the Owner dated June 17, 2022, was also reviewed to be acceptable.

Sampling, Testing and Monitoring
-16
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DWQMS Reference:	17 Measurement and Recording Equipment Calibration and Maintenance
Client Reference:	OP-17
Details: Conformance	
Reviewed records of measurement equipment of all 18 DWS, to be in general conformance.	

DWQMS Reference:	18 Emergency Management
Client Reference:	OP-18
Details: Conformance	

Reviewed records of three desktop tests involving CP06 – Security Breach which impacted Loss of Service, Spill and Unsafe Water carried out: two on Oct 13, 2022 and one on Nov 30, 2022, to be in general conformance.

DWQMS Reference:	19 Internal Audits
Client Reference:	OP-19

Audit Report

Details: Conformance

Reviewed records of an internal audit performed by Christine Craig and Wes Henneberry from Oct 26 to Nov 23, 2022, to be in general conformance. It was noted that the procedure allowed for coverage of all 18 DWS over a 5-year cycle.

The management concerned must ensure that all 21 elements continued to be audited once every 3-year certification cycle, and that similar types of treatment facilities are audited too.

DWQMS Reference:	ce: 20 Management Review				
Client Reference:	OP-20				
Details: Conformance	· · · · · · · · · · · · · · · · · · ·				
Reviewed the record of	management review held on Dec 7, 2022 to be in general conformance.				

DWQMS Reference:	21 Continual Improvement			
Client Reference:	OP-21			
Details: Conformance				
Reviewed the CKL Sumi conformance.	mary Table for Action Items dated Apr 17, 2023 to be in general			

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

This report was prepared by:

127Pang

James Pang

Intertek - Intertek - SAI Global Management Systems Auditor

The audit report is distributed as follows:

- Intertek Intertek SAI Global
- Operating Authority
- Owner
- MECP

Notes

Copies of this report distributed outside the organization must include all pages.