

Audit Report

Re-accreditation for

The Corporation of the City of Kawartha Lakes
ACTY-2023-640949

Audited Address: 322 Kent St. W, PO Box 9000, Lindsay, Ontario,
K9V 5R8, Canada

Start Date: May 20, 2024. End Date: May 28, 2024

Type of audit - Re-accreditation

Issue Date: September 6, 2024.
Revision Level: *Final*



Audit Report

BACKGROUND INFORMATION

Intertek - SAI Global conducted an audit of **The Corporation of the City of Kawartha Lakes** beginning on 20 May-2024 and ending on 28 May-2024 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 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: DWQMS V2.0

Scope of Certification: Drinking Water System

Drinking Water System Owner: The Corporation of the City of Kawartha Lakes

Operating Authority: The Corporation of the City of Kawartha Lakes

Population Services: 30,208

Activities:

- Treatment and Distribution
 - Lindsay DWS
 - Sonya DWS
 - Manilla DWS (Woods of Manilla)
- Distribution
 - Birch Point DWS
 - Bobcaygeon DWS
 - Canadiana Shores DWS
 - Fenelon Falls DWS
 - Janetville DWS
 - King's Bay
 - Kinmount DWS
 - Manorview DWS
 - Mariposa Estates DWS
 - Norland DWS
 - Omeme DWS
 - Pinewood DWS
 - Pleasant Point DWS
 - Southview Estates DWS
 - Victoria Place DWS
 - Western Trent/Palmina DWS
 - Woodfield DWS
 - Woodville DWS

Drinking Water Systems

Total audit duration: **Person(s):** 1 **Day(s):** 4.0

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.

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Audit Type and Purpose

On-site Verification Audit:

An onsite audit to assess whether a QMS has been implemented for the subject system that meets the “DO” requirements of the DWQMS V2.

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 onsite verification audit (Stage 2) and the results of the System audit (Stage 1) it has been determined that the management system is effectively implemented 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 Intertek - SAI Global review team.

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 2
- Element 9
- Element 13
- Element 18

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.

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Summary of Findings

1. Quality Management System	Conforms
2. Quality Management System Policy	OFI
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	OFI
10. Competencies	Conforms
11. Personnel Coverage	Conforms
12. Communications	Conforms
13. Essential Supplies and Services	OFI
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	OFI
19. Internal Audits	Conforms
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 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:	1 Quality Management System
Client Reference:	Operational Plan and Procedures
Details: Conformance All 21 elements were addressed in the Operational Plan and Procedures.	

DWQMS Reference:	2 Quality Management System Policy
Client Reference:	QMS E2
Details: OFI Satisfactorily interviewed operators (Camden McGredor, Ryan Wayling and Katie Bakker) on their understanding of the QMS policy. The policy was found to be displayed at the Lindsay treatment plant. Although in general conformance, the management may consider improving the visibility of the QMS policy by displaying them at works places such as at the reservoir, tower, Sonya WTP and Manilla WTP, at the townhall for the public and councillors.	

DWQMS Reference:	3 Commitment and Endorsement
Client Reference:	QMS E3
Details: Conformance Owner endorsement through a council resolution meeting held on Dec 13, 2022. Signed off by the Top Management through the Director of PW, and Manager of W&WW in June 2023.	

DWQMS Reference:	4 Quality Management System Representative
Client Reference:	QMS E4
Details: Conformance The Quality Management and Policy Coordinator is the QMS Rep. She was appointed by the top management in June 2023.	

DWQMS Reference:	5 Document and Record Control
Client Reference:	QMS E5
Details: Conformance Documents and records were found to be in general conformance. generally, implementation records were made available as required for review. QMS documents at the Manilla WTP were found to be in order as well; the following documents were reviewed – SOP MAN 01, MAN 03, MAN 06, QMS E11 01.	

DWQMS Reference:	6 Drinking Water System
Client Reference:	QMS E6, E6 Ap A, E6 Ap B, E6 Ap C, E6 Ap D
Details: Conformance	

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Two of the water treatment plants (Lindsay and Manilla), the Verulam Tower and Thornhill Reservoir were visited and found as described in the Operational Plan. The distribution system could not be verified as they were buried.

DWQMS Reference	7 Risk Assessment
Client Reference:	QMS E7
Details: Conformance	
<p>Reviewed a record of a review of the risk assessment outcome carried out in Oct 2022 participated by the manager of WWW, ORO for treatment, ORO for distribution and the Quality Management and Policy Coordinator as evidence of the once per calendar year verification of the currency of the information and the validity of the assumptions used in the risk assessment.</p> <p>Reviewed the record of the October 2, 2023, session “36-month risk assessment” attended by the manager of WWW, ORO for treatment, ORO for distribution, the Quality Management and Policy Coordinator and two distribution operators. It was clarified that the numbers resulting from the re-assessment was completely independent of those from previous risk assessment outcome table.</p>	

DWQMS Reference:	8 Risk Assessment Outcomes
Client Reference:	QMS E8, E8 T1, E8 T2, E8 T3, E8 T4, E8 T5, E8 T6, E8 T7, E8 T8
Details: Conformance	
<p>Reviewed a record of an unnumbered AWQI for THM reported in January 2024 for Lindsay DWS which was still in progress. The reporting was reviewed to be in order. This was the only case directly responsible by the Operating Authority.</p>	

DWQMS Reference:	9 Organizational Structure, Roles, Responsibility and Authorities
Client Reference:	QMS E9
Details: OFI	
<p>Although in general conformance, the management is to consider streamlining the positions of QMS rep and QMS Designate, to be better aligned to the requirements of this element.</p>	

DWQMS Reference:	10 Competencies
Client Reference:	QMS E10 and E10 T1
Details: Conformance	
<p>Reviewed the validity of all personnel licensed to operate the DWSs, to be in order. Reviewed records of those due for renewal in August, September and October 2024, and noted that they were being monitored by the Quality Management and Policy Coordinator.</p>	

DWQMS Reference:	11 Personnel Coverage
Client Reference:	QMS E11
Details: Conformance	
<p>Reviewed the list of after-hours operators to be up to date. Triggered the turbidity alarm at the Lindsay WTP to call Ryan Wayling, who was the after-hours operator for the week.</p>	

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DWQMS Reference:	12 Communications
Client Reference:	QMS E12
Details: Conformance	
<p>Reviewed sample records of the top management's communication with the OA staff, the owner, the public and suppliers to be in general conformance:</p> <p>With staff of OA – email from the QMS rep dated August 23, 2023, regarding the staff competencies as suggested by the employees, which was responded on October 20, 2023.</p> <p>With the owner – presentation of the DWQMS report by the manager of WWW to council on January 30, 2024.</p> <p>With the public – email February 13, 2024, from the manager of WWW to the Communications Officer, regarding cloudy water, to be posted on social media.</p> <p>With essential suppliers – record of a meeting on April 30, 2024, between OCWA and the manager of WWW regarding water sampling for the other 18 distribution systems</p>	

DWQMS Reference:	13 Essential Supplies and Services
Client Reference:	QMS E13
Details: OFI	
<p>Although in general conformance, the management was to consider improving the recording of verifying the quality of chemicals received. Five such records were reviewed to require an such improvement:</p> <ul style="list-style-type: none">• LAVO Bill of Lading dated Feb 1, 2024 for sodium hypo with CoA dated Jan 29, 2024.• LAVO Bill of Lading dated Mar 26 2024 for sodium hypo with CoA dated Mar 25, 2024.• Kemira Bill of Lading dated Apr 26, 2024 for SternPAC with CoA dated Apr 22, 2024.• Kemira Bill of Lading dated Apr 12, 2024 for SternPAC with CoA dated Apr 5, 2024.• Kemira Bill of Lading dated Mar 28, 2024 for SternPAC with CoA dated Mar 21, 2024. <p>Records of essential service providers were also reviewed, and they included:</p> <ul style="list-style-type: none">• SGS Lakefield lab CALA accreditation• OCWA DWQMS certification	

DWQMS Reference:	14 Review and Provision of Infrastructure
Client Reference:	QMS E14
Details: Conformance	
<p>Reviewed records of email exchanges between the Supervisor (Environmental Capital Project Management), Manager of W&WW and Manager of Corporate Assets, with OCWA Sr Operations Manager on April 30, May 15, May 17, May 23, 2024 as evidence of the infrastructure review which resulted in the 2025 capital budget.</p>	

DWQMS Reference:	15 Infrastructure Maintenance, Rehabilitation and Renewal
Client Reference:	QMS E15
Details: Conformance	
<p>Reviewed the W&WW Rate Study Financial Report dated Feb 27, 2021 for the capital</p>	

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expenditures 2021-2030 for water supply related infrastructure. This was accepted as the required long-term infrastructure plan. Reviewed the draft W&WW capital expenditure budget 2022-2024 and forecast 2025-2031 as evidence of the review of the long-term plan.

DWQMS Reference:	16 Sampling, Testing and Monitoring
Client Reference:	QMS E16
Details: Conformance	
Reviewed the locations of sampling stations at the Lindsay, Sonya and Manilla DWS to be adequately. The sampling, testing and monitoring of the water treatment processes at the Lindsay and Manilla treatment plants were reviewed to be in general conformance.	

DWQMS Reference:	17 Measurement and Recording Equipment Calibration and Maintenance
Client Reference:	QMS E17
Details: Conformance	
Measuring devices at the three WTP; online chlorine analysers and pocket colorimeters used to verify the online analysers were reviewed to be adequately calibrated. Verification records of the online chlorine analysers using pocket colorimeters at the Manilla and Lindsay WTPs, Verulam Tower and Thornhill reservoir were reviewed to be in order. The reagents found at all four locations were valid.	

DWQMS Reference:	18 Emergency Management
Client Reference:	QMS E18 Ap B
Details: OFI	
Reviewed a record of an emergency test conducted on September 15, 2023, participated by the manager of WWW, two supervisors, 9 operators, contract coordinator, and the QM & Policy Coordinator.	
Reviewed records of generator tests carried out monthly at the Lindsay WTP, Verulam Tower, and Thornhill Reservoir. Although they were recorded as done every month except when it was triggered to run, not all records included readings of the voltage, ampere, fuel level and others. It was noted to be lacking at Lindsay WTP for Jan and Mar 2024, at Verulam Tower for Feb and Apr 2024, and at Thornhill Reservoir for Dec 2023. This information would be useful for trouble shooting by a technician. Therefore, the management should consider reminding all personnel to record readings per the prescribed form. In addition, there were a few times when the generator ran for less than an hour, example at Verulam Tower on Dec 23, 2023, which would not serve well as a test result.	

DWQMS Reference:	19 Internal Audits
Client Reference:	QMS E19
Details: Conformance	
Reviewed records of internal audit performed by Julie Henry and Michelle Flaherty on November 22, 23 and 28, 2023. Both auditors underwent audit trainings. All 21 elements were addressed. It was noted that eight distribution operators, three treatment operators and top management were audited.	

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DWQMS Reference:	20 Management Review
Client Reference:	QMS E20
Details: Conformance	
Reviewed a record of Top Management Review Action Items Tracking recorded in Form QMS E20 T1 dated August 8, 2023, Rev 0. Reviewed an email dated June 1, 2023, from the QMS rep to the top management enclosing reports for the management review, and comments made by members of the top management on June 16, 2023, and June 29, 2023, of the management review reports. The above info indicated that both members of the top management participated in this review. All prescribed agenda items were addressed. Action items were identified with the party responsible as well as timeframes.	

DWQMS Reference:	21 Continual Improvement
Client Reference:	QMS E21
Details: Conformance	
Reviewed records as in forms QMS E21 T1 2023 NCR Log, T2 2023 CAR Log and T4 2023 OFI Log, to be in general conformance.	

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

This report was prepared by:

JKHPang

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

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