

# **Audit Report**

Re-accreditation for

OCWA Operating authority for City of Kawartha Lakes Owner

ACTY-2023-648482

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

Start Date: June 26, 2024. End Date: June 28, 2024.

Type of audit - Re-accreditation Audit

Issue Date: January 9, 2025

Revision Level: Final



#### **BACKGROUND INFORMATION**

Intertek - SAI Global conducted an audit of Ontario Clean Water Agency for the City of Kawartha Lakes beginning on June 26 and ending on June 28, 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.

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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.

DRINKING WATER QUALITY MANAGEMENT STANDARD

**VERSION 2 - 2017** Standard:

Applicable codes: DWQMS V2.0

Scope of Certification: Full Scope - Entire DWQMS

**Drinking Water System** City of Kawartha Lakes

Owner:

**Operating Authority:** OCWA Operating Authority for City of Kawartha Lakes Owner

**Population Services:** 11,665 **Activities:** Treatment

Birchpoint Estates Drinking Water System (license # 141-109)

Bobcaygeon Drinking Water System (license # 141-105)

**Drinking Water Systems** 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) 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): 3.0** 

Audit Team Member(s): Team Leader James Pang

Other Participants:

# 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 <u>initial certification</u>, 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

<u>Action required</u>: 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 Report
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audit finding.

# **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 be offered 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**

The objective of this System audit (Stage 1) was to review the management system and processes, confirm the scope for certification, and determine the organization's preparedness for the onsite verification audit (Stage 2). In addition, it allowed for the review of the adequacy of the Intertek - SAI Global audit program and resources for the audit including confirming and preparing the draft audit plan.

The results of this System (Stage 1) audit indicate that the organization is now ready for an onsite accreditation (Stage 2) audit.

#### **Opportunities for Improvement:**

The following opportunities for improvement have been identified.

- Element 5
- Element 7
- Element 11
- Element 13 (built upon OFI from the System Audit)

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 M	1. Quality Management System Conforms		
2. Quality Management System Policy		Conforms	
3. Commitment and Endorsement		Conforms	
4. Quality Management System Representative		Conforms	
5. Documen	t and Records Control	OFI	
6. Drinking-\	Vater System	Conforms	
7. Risk Assessment OFI		OFI	
8. Risk Asse	essment Outcomes	Conforms	
9. Organizat	ional Structure, Roles, Responsibilities and Authorities	Conforms	
10. Competencies Cor		Conforms	
11. Personnel Coverage		OFI	
12. Communications		Conforms	
13. Essential Supplies and Services		OFI	
14. Review and Provision of Infrastructure Co		Conforms	
15. Infrastructure Maintenance, Rehabilitation & Renewal Conforms		Conforms	
16. Sampling, Testing and Monitoring Conforms		Conforms	
17. Measurement & Recording Equipment Calibration and Maintenance Conforms		Conforms	
18. Emergency Management Conforms		Conforms	
19. Internal A	19. Internal Audits Conforms		
20. Management Review Conforms		Conforms	
21. Continual Improvement Conforms		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	
Details: Conformance	
All the 21 elements were addressed in the submitted Operational Plan.	

DWQMS Reference:	2 Quality Management System Policy
Client Reference:	OP-02

Details: Conformance

Satisfactorily interviewed operators for their understanding of the QMS policy. Those interviewed included Travis B., Mary, Abdul C., Jenna V., and Nathalie L.

Copies of the QMS policy were displayed at the treatment plants at Woodville, Mariposa, Canadiana Shores, Birch Point, Bobcaygeon and Fenelon Falls. As for the owner and members of the public, the policy was displayed in the Owner's website.

DWQMS Reference:	3 Commitment and Endorsement
Client Reference:	OP-03A

**Details: Conformance** 

Endorsement via sign off by the Owner, represented by the Director of PW and Manager of W&WW on May 23 and 21, 2024, and by the top management represented by the Regional Hub Manager and GM on May 23 and 12, 2024.

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:	5 Document and Record Control
Client Reference:	OP-05

Details: OFI

Documents inspected during the site visit to the treatment plants at Woodville, Mariposa, Canadiana Shores, Birch Point, Bobcaygeon and Fenelon Falls included QMS policy, SOP for Online Chlorine Analyser Calibration / Verification and Adjustments, SOP for CT Calculations, SOP Low Free Chlorine Residual Alarm which were in general conformance.

However, improvements were required because of the following observations:

- SOP for Online Chlorine Analyser Calibration / Verification and Adjustments were all up to date except for the one displayed at Bobcaygeon TP. However, the operator on duty produced the correct version from the S-drive instead of the one displayed next to the online chlorine analyser.
- records in the CCP form for Alarm Calls were inconsistently completed for days when there

was none encountered.

- Records of monthly generator runs were generally recorded. However, there was one case, at Canadiana Shores, whereby the start time for each monthly run was recorded but there was no end time, nor the duration ran.
- The calibration sticker for the online chlorine analyser at Birch Point (OCWA asset #2801316)
  was not updated although it was found to be calibrated. This was the only missed calibration
  sticker of all measuring devices inspected.

DWQMS Reference:	6 Drinking Water System
Client Reference:	OP-06A to 06-R

Details: Conformance

Verified the description of the treatment facilities visited to be good. They included:

- · Woodville treatment facility,
- Mariposa Estate treatment facility,
- Canadiana Shores treatment facility
- Birch Point
- Bobcaygeon
- Fenelon Falls

Client Reference: OF	OP-07

Details: **OFI** 

Reviewed records of the once every calendar verification of currency of information and validity of assumptions used in the risk assessment for Woodville, Mariposa Estate, Canadiana Shores, Birch Point, Bobcaygeon and Fenelon Falls, all to be in general conformance.

Reviewed records of the once every 36-month risk assessment for the 18 DWS. It was found that the said risk assessments were still in progress. It was noted that the three QMS Rep (PCTs) had been attempting to organise the 2024 risk assessment in February and May of this year, but the quorum had been difficult to achieve. The risk assessment team of all three Clusters making up the 18 DWSs finally met in June 2024, resulting in the first draft of their risk assessment outcome table.

As an improvement, the management concerned should consider to either commence organising the next once every 36-month risk assessment much earlier or set the new target month for it to be in mid year or Q3, to avoid competing with the MECP and local council mandatory reports.

DWQMS Reference:	8 Risk Assessment Outcomes
Client Reference:	OP-08

Details: Conformance

Reviewed alarm call reports in CCP Forms, meant for capturing deviations from the CCL for treatment plants at Woodville, Mariposa Estate, Canadiana Shores, Birch Point, Bobcaygeon and Fenelon Falls. They are in general conformance except that there were different styles of reporting for "no alarm". *An OFI had been raised under element 5 for its improvement*.

DWQMS Reference:	9 Organizational Structure, Roles, Responsibility and Authorities
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#### **Audit Report**

Client Reference:	OP-09 and 09A
Details: Conformance	
No change to the organisational structure for the last 3 years.	

DWQMS Reference:	10 Competencies
Client Reference:	OP-10

**Details: Conformance** 

Verified names against licenses for validity. All were up to date. A total of 28 were reviewed; 9, 9 and 10 for the north cluster, south and central clusters.

Reviewed training hours and CEUs for those due for renewal in Q3 of 2024 (Jenna V and J Mather) to be adequate.

DWQMS Reference:	11 Personnel Coverage	
Client Reference:	OP-11	

Details: OFI

Satisfactorily triggered door alarm at Mariposa TP to call Mark, the on-call operator for the week in the south cluster.

Successfully triggered the low water level at the water tower at Fenelon Falls to call Rachel R who acknowledged the alarm.

As an improvement, the management may consider including a brief description in OP-11 that includes "The contracted call centre receives an alarm from the facility and then contacts the on-call person for that cluster. The call centre has a copy of the on-call schedule, so they know which operator to contact."

DWQMS Reference:	12 Communications
Client Reference:	OP-12

Details: Conformance

Reviewed sample communications between the top management and the Owner, suppliers, OCWA staff and the public as follows:

Staff – an email from a PCT to the Regional Hub Manager and a reply on the same day on June 6, 2024 regarding taking course on emergency management.

Owner – an email from the Regional Hub Manager (A) to the CKL (Owner) on Jan 9, 2024 regarding the results of a management review completed on Dec 6, 2023.

Public – an email dated April 26, 2024, from the Senior Operations Manager (Lynette) with the Owner's staff (Michelle) to post the Spring Flushing Schedule for the public.

Supplier – email exchanges between the Senior Operations Manager (Lynette) and G. Hart & Sons Well Drilling on June 28, 2023, regarding well report and video log for Mariposa Well #2.

DWQMS Reference: 13 Essential Supplies and Services	
Client Reference:	OP-13
Details: <b>OFI</b>	

Reviewed delivery documents for records of verification of the quality of essentials delivered.

- Packing Slip from Jutzi dated March 19, 2024, for liquid chlorine delivered to Canadiana Shores. It was signed off by the operator as per the relevant SOP. However, there was no indication of what parameters were verified.
- Bill of Lading from Kemira dated 12.04.2024 for SternPAC delivered to Fenelon Falls. It was signed off by the operator as per the relevant SOP. However, there was no indication of what parameters were verified.
- Bill of Lading from Univar dated June 18, 2024, for Hypochlorite solution delivered to Fenelon Falls. It was signed off by the operator as per the relevant SOP. However, there was no indication of what parameters were verified.
- The auditor was informed that this was the same practice at other DWSs.

The above records, although in conformance with the existing SOP, needed to be improved in terms of the following:

- provide evidence record that the Lot or Batch # on the Certificate of Analysis (CoA) matched that on the Bill of Lading or Packing Slip. The tall of the dates is not adequate.
- Upon satisfactory completion of the above, to check off the following parameters on the CoA:
  - o NSF conformance
  - o product test results are within the acceptable quality range
- only when all the above are satisfactorily carried out may the operator sign and date the Bill of Lading or Packing Slip as "received in order".

This OFI was built upon the OFI from the System Audit.

DWQMS Reference:	14 Review and Provision of Infrastructure
Client Reference:	OP-14

Details: Conformance

Reviewed records of the Senior Operations Manager, Jeremy M email exchanges with his operators, Sean B and Stewart H, all on October 20, 2023, regarding the adequacy of infrastructure for the DWS in their Cluster.

DWQMS Reference:	15 Infrastructure Maintenance, Rehabilitation and Renewal
Client Reference:	OP-15
Details: Conformance	

Reviewed the three 2025 CKL capital forecast for the North, Central and South Zones. They included all 18 DWS. Each of them spanned from 2025 to 2034.

DWQMS Reference:	16 Sampling, Testing and Monitoring	
Client Reference:	OP-16	

Details: Conformance

Reviewed the locations of sampling stations at Birch Point and Fenelon Falls, to be adequate.

Reviewed monitoring records at the treatment plants at Woodville, Mariposa Estate, Canadiana Shores, Birch Point, Bobcaygeon and Fenelon Falls. They included readings on the online chlorine analysers which were in general conformance.

Witnessed a water sampling at the Fenelon Falls distribution system. The operator, Nathelie L, besides running the water to waste for more than three minutes, felt for the change in water temperature. Although not a requirement, it was a good practice to ensure that water was running from the distribution watermain.

DWQMS Reference:	17 Measurement Maintenance	and	Recording	Equipment	Calibration	and
Client Reference:	OP-17					

Details: Conformance

Reviewed records of all regulatory online chlorine analysers at the treatment plants of Woodville, Mariposa Estate, Canadiana Shores, Birch Point, Bobcaygeon, Fenelon Falls, and Birch Point distribution; bearing the following respective OCWA asset IDs 295878, 192866, 105642, 280269, 204830, 306127, 280316.

Reviewed calibration records of all colorimeters used for the above purpose, except that at Canadiana Shores because the operator for the plant was attending to a situation. The following colorimeter bearing OCWA ID # 296979, 305967, 291413, 305876, 291299, 291418, 305754, were reviewed to be in order with respect to their calibration.

Reviewed the validity of all DPD reagents, for both free and total, to be valid.

Reviewed validity of the Standards used to calibrate all the above listed colorimeters; A3055, A3040 and A3057 with validity until March 2025, February 2025 and March 2025, respectively.

Reviewed verification records of the two UV equipment at Fenelon Falls to be in order. Verification dates viz:

- March 29, 2023 for UV1 and 2
- June 14, 2023 for both UV
- August 31, 2023 for UV1
- Sept 7, 2023 for both. Additional verification by Trojan technician on September 26, 2023 for both UV.
- December 13 and 14, 2023 for UV1 and 2, respectively.
- Feb 26 and 27, 2024 for UV1 and 2, respectively.

The above verifications were preformed using reference sensor with S/N TL120520514001, last calibrated on Jan 9, 2024. Noted that there were two spare UV lamps and four replacements I June 2024.

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

Details: Conformance

Reviewed the following emergency exercises to be in general conformance.

CP-01 on Oct 17, 2023, attended by 9 personnel of the Central Cluster.

CP-02 on Dec 14, 2023, attended by 13 personnel of the Central Cluster.

CP-01 on Sep 28, 2023, attended by 11 personnel of the North Cluster.

CP-02 on Oct 26, 2023, attended by 7 personnel of the South Cluster.

CP-01 on Dec 12, 2023, attended by 7 personnel of the South Cluster.

#### **Audit Report**

Reviewed records of monthly generator runs, generally from January 2023 to June 2024, to be in general conformance. Every test lasted at least one hour.

Satisfactorily tested the generator ability to transfer power to the Woodville treatment plant.

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

Details: Conformance

Reviewed records of internal audit conducted by Julie Mulligan and Megan Lockwood from Oct 2 to 13, 2023, and on Nov 6 and Nov 9, 2023, and documented as a report dated Nov 27, 2023. All 2 elements were addressed. Objective evidence was documented for all requirements. the findings in the audit checklist were consistent with that in the audit report. The period of activities reviewed was clearly identified. This is one of the better internal audit reports.

These were in general conformance.

DWQMS Reference:	20 Management Review	
Client Reference:	OP-20	

Details: Conformance

Reviewed records of a management review held on December 6, 2023. All members of the top management were in attendance. All prescribed agenda items were addressed. Action items complete with the person responsible, and timeline were documented. A separate list of action items was documented to track their implementation.

DWQMS Refere	ence:	21 Continual Improvement
Client Reference	e:	OP-21
Details: Conformance		
Reviewed the CKL Summary Table for Action Items, last entry dated May 24, 2024, 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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