

Systems Audit for

Township of South Stormont

1632707-02

Audited Address: 2 Mille Roches Rd, Long Sault, Ontario, CAN,

K0C1P0

Start Date: Oct 27, 2022 End Date: Oct 27, 2022

Type of audit -System (Stage 1)

Issue Date: October 27, 2022

Revision Level: Final

BACKGROUND INFORMATION

SAI Global conducted an audit of Township of South Stormont beginning on Oct 27, 2022 and ending on Oct 27, 2022 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.

SAI Global audits are carried out within the requirements of 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. 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, 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 SAI Global Terms and Conditions.

This report has been prepared by SAI Global Limited (SAI Global) in respect of a Client's application for assessment by 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 SAI Global at the time of the audit, based on sampling of evidence provided and within the audit scope. 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. 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

Scope of Certification: Drinking Water Treatment and Distribution Processes

Drinking Water System Owner:Township of South StormontOperating Authority:Township of South StormontOwner:Township of South Stormont

Population Services: 3555

Activities: Treatment & Distribution

Drinking Water Systems Long Sault – Ingleside Water Distribution System

St. Andrew's Rosedale Water Distribution System

Newington Water Distribution System

Total audit duration: Person(s): 1 Day(s): 0.63

Audit Team Member(s): Team Leader Ryan Bourner

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-

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

<u>Action required</u>: 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

Systems Audit:

A desktop audit of the operational plans for the subject system to assess whether the documented QMS meets the PLAN 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 Conservation and Parks (MECP) 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 MECP. 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

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 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.

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 SAI Global review team.

Opportunities for Improvement:

The following opportunities for improvement have been identified.

- Consider extending the retention time for the master copies of the Operational Plan to ten years.
- Consider assessing the risk associated with fire response and frozen water services.
- Consider describing any qualification required for personnel conducting the internal audit.

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(s) was reviewed and found to be in conformance with the requirements of the standard.

Summary of Findings

1. Quality M	anagement System	Conforms	
2. Quality Management System Policy Conforms		Conforms	
3. Commitment and Endorsement Conforms		Conforms	
4. Quality M	anagement System Representative	Conforms	
5. Documen	t and Records Control	OFI	
6. Drinking-\	Water System	Conforms	
7. Risk Asse	essment	OFI	
8. Risk Asse	essment Outcomes	Conforms	
9. Organizat	tional Structure, Roles, Responsibilities and Authorities	Conforms	
10. Competencies Conforms		Conforms	
11. Personne	11. Personnel Coverage Conforms		
12. Communications Conforms		Conforms	
13. Essential Supplies and Services Conforms		Conforms	
14. Review and Provision of Infrastructure Conforms		Conforms	
15. Infrastruc	15. Infrastructure Maintenance, Rehabilitation & Renewal Conforms		
16. Sampling, Testing and Monitoring Conforms		Conforms	
17. Measure	17. Measurement & Recording Equipment Calibration and Maintenance Conforms		
18. Emergency Management Conforms		Conforms	
19. Internal Audits OFI		OFI	
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 with a corrective action request has not been remedied.		
Minor NCR #	Minor non-conformity. In the oninion of the auditor, part of a required element of the DWOMS has not		
OFI	Opportunity for improvement. Conforms to requirement, but there is an op	portunity 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:	SYS-OP (Rev. 13, 23-Sep-2020)	
Details: (personnel interviewed, procedures, activities and records observed)		
Conforms.		
Operational Plan established which meets the requirements of the standard.		

DWQMS Reference:	2 Quality Management System Policy	
Client Reference:	SYS-OP (Rev. 13, 23-Sep-2020)	
Details: (personnel interviewed, procedures, activities and records observed)		
Conforms.		
Policy contains the three required commitments.		

DWQMS Reference:	3 Commitment and Endorsement
Client Reference:	SYS-OP (Rev. 13, 23-Sep-2020)
Details: (personnel interviewed, procedures, activities and records observed)	
Conforms.	

Commitment statement includes places for the Mayor Director of Public Works, CAO and Public Work Supervisor to sign

Client Deference: CVC OD (Dev. 12, 22 Con 2020)	lity Management System Representative
Client Reference: SYS-OP (Rev. 13, 23-Sep-2020)	OP (Rev. 13, 23-Sep-2020)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

QMS Representative role appointed to the Public Works Supervisor (Mark Zoppas) and Jay St. Thomas as the alternate.

DWQMS Reference:	5 Document and Record Control
Client Reference:	QMS SYS-P1 (V3, 28-Feb-2013)
	QMS-SYS-P2 (V3, 28-Feb-2013)

Details: (personnel interviewed, procedures, activities and records observed)

Opportunity For Improvement

Consider extending the retention time for the master copies of the Operational Plan to ten years.

DWQMS Reference:	6 Drinking Water System
Client Reference:	SYS-OP (Rev. 13, 23-Sep-2020)
Details: (personnel interviewed, procedures, activities and records observed)	

Conforms.

System description describes the following:

- Long Sault-Ingleside Distribution only receiving treated water from the Long Sault Water Treatment Plant and Booster Station operated by Caneau Water and Sewage.
- St. Andrews- Rosedale Water Distribution obtains treated water from the City of Cornwall, with an elevated tower and booster station operated by Caneau Water and Sewage.
- Newington Water Distribution received treated water from the Newington Water Treatment Plant operated by Caneau Water and Sewage

DWQMS Reference	7 Risk Assessment
Client Reference:	QMS SYS-P8 (V6, 23-Jul-2020)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

Risk Assessment is required to be conducted every 36 months with three persons selected by QMS Representative. It is reviewed each interim calendar year using Risk Assessment Annual Review Form (QMS SYS-F5).

DWQMS Reference:	8 Risk Assessment Outcomes	
Client Reference:	SYS-OP (Rev. 13, 23-Sep-2020)	
Details: (personnel interviewed, procedures, activities and records observed)		
Opportunity for Improvement		
Consider assessing the risk associated with fire response and frozen water services.		

DWQMS Reference:	9 Organizational Structure, Roles, Responsibility and Authorities
Client Reference:	SYS-OP (Rev. 13, 23-Sep-2020)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

Roles and responsibilities defined for:

- Director of Public Works and CAO Top Management and Capital Planning
- Public Works Supervisor Staffing, training and awareness
- Operators
- QMS Administration

DWQMS Reference:	10 Competencies
Client Reference:	SYS-OP (Rev. 13, 23-Sep-2020)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

Competencies listed for staff members identified under Element 9, which are ensured through the hiring process and maintained by training programs managed by the Public Works Supervisor.

DWQMS Reference:	11 Personnel Coverage
Client Reference:	SYS-OP (Rev. 13, 23-Sep-2020)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

Operational Plan requires the following to ensure personnel coverage:

- After hours covered through on-call operators scheduled by the QMS Representative.
- Public Works Supervisor covers any absences or labour shortage

DWQMS Reference:	12 Communications
Client Reference:	SYS-P9 (v3, 28-Feb-2013)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

Communication procedure requires the following:

- Owner by access to OP and communication of selected QMS Meetings
- Staff through QMS orientation of new staff, communication of changes,
- Suppliers by notification with QMS policy and relevant procedures and awareness acknowledgement.
- The public by access to QMS and posting for QMS policy at Township Office.

DWQMS Reference:	13 Essential Supplies and Services
Client Reference:	QMS SYS-P7 (v4, 28-Feb-2013)
	QMS SYS-T3 (v7, 8-July-2020)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms

Essential Supplies listed include chemicals; parts; contractors; lab services; granular supply and WTP operator. Distribution parts maintained by Team Lead (one repair clamp available for each pipe diameter) with lead hands assess quality of received supplies: such as:

- Parts must meet AWWA standards
- Accredited labs

DWQMS Reference:	14 Review and Provision of Infrastructure
Client Reference:	QMS SYS-p3 (V4, 31-May-2019)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

Completed each calendar year by Public Works Manager on Infrastructure Review Report Form QMS SYS-F3).

DWQMS Reference:	15 Infrastructure Maintenance, Rehabilitation and Renewal
Client Reference:	SYS-OP (Rev. 13, 23-Sep-2020
	QMS SYS-P4 (V4, 31-May-2019)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

The summary of maintenance activities includes hydrant flushing (biannual), preventive maintenance (Annual) and valve exercising. Longer term renewal and rehabilitation activities are described in in the Asset Management Plan

DWQMS Reference:	16 Sampling, Testing and Monitoring
Client Reference:	SYS-P5 (V4, 31-May-2019)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

Caneau Water and Sewage responsible for all sampling, testing and monitoring in the distribution system and the upstream WTP. The only sampling performed by distribution operators is those which are required by maintenance procedures.

DWQMS Reference:	17 Measurement and Recording Equipment Calibration and Maintenance
Client Reference:	QMS SYS-P6 (V3, 28-Feb-2013)
Details: (personnel interviewed, procedures, activities and records observed)	
Conforms.	

Online and handheld analyzers calibrated annually (allowing for 2 months deviation)

DWQMS Reference:	18 Emergency Management
Client Reference:	QMS SYS-P10 (v7, 31-May-2019)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

Emergency Management procedures lists emergency situations and the contact list with the following processes for emergency response:

- QMS Water Transmission Mains Emergency Repair Procedure (QMS OP-P1),
- QMS Emergency Water Main Repair Procedure (QMS OP-P2),
- QMS Adverse Water Reporting Procedure (QMS OP-P3),
- QMS Disinfection Procedure for Water Main Repair (QMS OP-P4), and
- QMS Distribution System Low Chlorine Residual Procedure (QMS OP-P5).

Training and testing of these requirements performed by new hire training and an annual review of preparedness.

DWQMS Reference:	19 Internal Audits
Client Reference:	QMS (V4, 31-May-2019)
Details: (personnel interviewed, procedures, activities and records observed)	
Opportunity for Improvement	

Consider describing any qualification required for personnel conducting the internal audit.

DWQMS Reference:	20 Management Review
Client Reference:	QMS SYS-P12 (Rev. 31-May-2019)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

Management review to be completed every calendar year by Top Management and QMS Representative. The discussion recorded on QMS SYS-F12 including action items, responsibility and timelines. Subsequently, Top Management distributes completed Management Review Action items form to Council.

DWQMS Reference:	21 Continual Improvement
Client Reference:	QMS SYS-P13(V1, 31-May-2019)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

The procedure for continual improvement requires:

- Best Management Practices are considered during the Management Review
- Corrective actions Issued through Corrective Action Requests (QMS SYS-F10), whose effectiveness is discussed during the Management Review.
- Potential non-conformities reviewed during Management Review and action assigned to QMS Representative. Effectiveness reviewed at this time.

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

This report was prepared by:

yentours

Rvan Bourner

SAI Global Management Systems Auditor

The audit report is distributed as follows:

- SAI Global
- Operating Authority
- Owner

MOECC

Notes

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