	<b>DWQMS Operational Plan</b>	<b>Form 20-02</b>
	<b>Revision Date: September 20, 2011</b>	<b>Revision: 1</b>
	<b>Approved By: Vice President Operations &amp; Engineering</b>	
<b>Title: Report on DWQMS to Owner</b>		<b>Page 1 of 4</b>

Date: March 18, 2014

In Attendance: Dan Tonon, Carla Buckner, Lynne Duguay, Lynn Watson, Lynn Orchard, Shelley Bailey, Don Cameron, Janice Catling, Lee Mason

RESULTS OF MANAGEMENT REVIEW	REPORT (where applicable include Personnel Responsible & Due Date)
Summary of Management Review	<p>The following discussions were held on March 3, 2014 with the QMS Representative, VP of Operations and Engineering, President and CEO (participated partially) and the Supervisor, Water Treatment Operations.</p> <ul style="list-style-type: none"> <li>A. Incidents of regulatory non-compliance</li> <li>B. Incidents of adverse drinking water tests</li> <li>C. Deviations from critical control points limits and response actions</li> <li>D. Efficacy of the risk assessment process</li> <li>E. Results of audits (internal and external)</li> <li>F. Results of relevant emergency response</li> <li>G. Operational performance</li> <li>H. Raw water supply and drinking water quality trends</li> <li>I. Follow-up action items from previous management reviews</li> <li>J. Status of management action items identified between reviews</li> <li>K. Changes that could affect the QMS</li> <li>L. Summary of consumer feedback</li> <li>M. Resources needed to maintain the QMS</li> <li>N. Results of the infrastructure review</li> <li>O. Operational Plan currency, content and updates</li> <li>P. Summary of staff suggestions</li> <li>Q. New Business - Other issues that impact on the quality management system. Specify for agenda.</li> <li>R. Date of Next Meeting</li> </ul>

- The Township of MacDonald Meredith & Aberdeen Additional DWQMS Operational Plan -

2014-03-18 EBY Form 20-02 Report on QMS to Owner

**DWQMS Operational Plan****Form 20-02****Revision Date: September 20, 2011****Revision: 1****Approved By: Vice President Operations & Engineering****Title: Report on DWQMS to Owner****Page 2 of 4****Action Items**

- A. One incident of regulatory non-compliance
  - Equipment not calibrated, maintained and operated in accordance with the manufacturer's instructions or the regulation
- B. No incidents of adverse drinking water
- C. Deviations from critical control points
  - Filter turbidity
- D. Efficacy of the risk assessment process
  - One additional hazard identified to risk assessment (high turbidity water in the low lift well)
- E. Results of audits (internal and external) – 9 issues were identified as a result of internal and external audits – all have been resolved
  - Accreditation Certificate has been issued
- F. Results of relevant emergency response
  - Reviewed EBY QMS 18 Appendix A Emergency Contact Listing
  - 2013-02-07 Form 05-16 Emergency Testing EB (Loss of Supply)
- G. Operational Performance
  - Plant ran well within compliance limits.
  - Increased frequency of raw water quality fluctuations due to seasonal changes and storm conditions
- H. Raw water supply and drinking water quality trends – adequate monitoring in place
- I. Follow-up action items from previous management reviews
  - Requirement to schedule risk assessment review
  - Requirement to complete report to owner
  - Requirement for emergency testing
  - Discuss system deficiencies with township
  - No chemical feed system alarm to identify pump failure and auto switch over
  - Identified aging equipment to assist in financial plan development
  - The SCADA and PLC controller was identified obsolete and requires upgrade

- The Township of MacDonald Meredith & Aberdeen Additional DWQMS Operational Plan -



2014-03-18 EBY Form 20-02 Report on QMS to Owner

**DWQMS Operational Plan****Form 20-02****Revision Date: September 20, 2011****Revision: 1****Approved By: Vice President Operations & Engineering****Title: Report on DWQMS to Owner****Page 3 of 4**

- J. Status of management action items identified between reviews
  - Identified obsolete or aging equipment and reported 10 year plan to Township
- K. Changes that could affect the QMS
  - Service contracts terms
  - Council changes and requests
  - Auditor or inspection requirements & scheduling
- L. Summary of consumer feedback – no complaints
  - One chlorine complaint received
  - One milky water complaint as a result of faucet aerator change
- M. Resources needed to maintain the QMS
  - Reviewed the needs of departmental reporting and document maintenance
  - Working on development and maintenance of PM's and SOP's
- N. Results of the infrastructure review
  - 2014-02-28 EBY Infrastructure Review
- O. Operational Plan currency, content and updates
  - Operational Plan kept current with help of Admin Assistant for DWQMS, the review team and RRAM
  - Continual Improvements are made on an ongoing basis
  - Documentation review is kept up to date through the Springboard system (RRAM)
- P. Summary of staff suggestions
  - Suggestions are made regularly by staff through RRAM where they have the option to add a comment
- Q. New Business - Other issues that impact on the quality management system
  - N/A
- R. Date of next meeting
  - Fall 2014



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2014-03-18 EBY Form 20-02 Report on QMS to Owner

 	<b>DWQMS Operational Plan</b>	<b>Form 20-02</b>
	<b>Revision Date: September 20, 2011</b>	<b>Revision: 1</b>
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Deficiencies Identified	<p>Item I: No chemical feed system alarm to identify pump failure and auto switch over</p> <p>Item M: Continued work on development on SOP's</p> <p>Item N: Identified obsolete or aging equipment</p>
Decisions Made	<p>Present deficient items for council approval at budget in October</p>
Other QMS Issues Identified (including summary of corrective actions)	

- The Township of MacDonald Meredith & Aberdeen Additional DWQMS Operational Plan -

 	<b>DWQMS Operational Plan</b>	<b>Form 20-01</b>
	<b>Date: June 14, 2012</b>	<b>Revision: 1</b>
	<b>Approved By: Vice President Operations &amp; Engineering</b>	
<b>Title: Top Management Review Agenda &amp; Meeting Minutes</b>		<b>Page 1 of 5</b>

**Date of Last Meeting:** October 12, 2012

**Auditor Signature:** \_\_\_\_\_

**Today's Date:** March 3, 2014

**Date:** \_\_\_\_\_

**Today's Time:** 3:00 pm

(An auditor must sign to authorize completion)

**Attendance:** Dan Tonon, Carla Buckner, Claudio Stefano, Dominic Parrella (participated partially)

Agenda Item		Discussions	Decision/Action	Responsible	Date Due	Status
A	Incidents of regulatory non-compliance	Inspection#: 1-9ZXIA Date: 2013-01-22 DW Inspector : Lori Greco 1. All continuous analyzers were not calibrated, maintained and operated in accordance with the manufacturer's instructions or the regulation  Inspection#: 1-AOYY9 Date: 2013-11-20 DW Inspector : Lori Greco NON-COMPLIANCE WITH REGULATORY REQUIREMENTS AND ACTIONS REQUIRED – N/A	Follow up calibration report was completed on Feb 1 <sup>st</sup> , 2013. Cleaned and recalibrated treated water flow meter within acceptable tolerance limits.	QMS Representative	-	Completed
B	Incidents of adverse drinking water tests	There were no AWQI incidents identified				
C	Deviations from critical control point limits and response actions	Filter operation above normal high turbidity set points but below regulatory limits. Operated beyond limits for water production during seasonal fluctuations and equipment malfunction				
D	Efficacy of the risk	2014-02-27 PUC Form 05-102 EBY Risk Assessment	Conducted risk			Completed

- The Township of MacDonald Meredith & Aberdeen Additional DWQMS Operational Plan -

2014-03-03 EBY Form 20-01 Management Review Agenda Minutes

**DWQMS Operational Plan****Form 20-01****Date: June 14, 2012****Revision: 1****Approved By:** Vice President Operations & Engineering**Title: Top Management Review Agenda & Meeting Minutes****Page 2 of 5**

Agenda Item		Discussions	Decision/Action	Responsible	Date Due	Status
	assessment process	Drawn in high turbidity water in the low lift well could not be used (1500 m line that is difficult to treat)	assessment and added hazard to Low Lift Pump Station:			
E	Results of audits (internal and external)	2013-05-02 EBY Internal Audit <ul style="list-style-type: none"><li>2013-05-02 NCR EBY12 – Completed</li><li>2013-05-02 NCR EBY13 – Completed</li></ul> SAI-Global – Accreditation Program for Operating Authorities On-Site Verification Audit Report – 2013 FILE# 1631978-01 <ul style="list-style-type: none"><li>1631978-01-RR-NCR-2013-01 – Completed</li><li>1631978-01-RR-NCR-2013-02 – Completed</li><li>1631978-01-RR-NCR-2013-03 – Completed</li><li>1631978-01-RR-NCR-2013-04 – Completed</li><li>1631978-01-RR-NCR-2013-05 – Completed</li><li>1631978-01-RR-NCR-2013-06 – Completed</li><li>1631978-01-RR-NCR-2013-07 – Completed</li></ul>	Top Management has reviewed the audit findings and accepts that the NCRs are being actively addressed.	QMS Representative	Feb. 7, 2014	Completed
F	Results of relevant emergency response testing	EBY QMS 18 Appendix A Emergency Contact Listing <ul style="list-style-type: none"><li>Reviewed February 3, 2014</li></ul> 2013-02-07 Form 05-16 Emergency Testing EB <ul style="list-style-type: none"><li>Loss of Supply</li></ul>	Management Review that emergency response testing conducted meets the requirements of the Operational Plan	QMS Representative		Completed
G	Operational performance	<ul style="list-style-type: none"><li>Plant ran well within compliance limits.</li><li>Increased frequency of raw water quality fluctuations due to seasonal changes and storm conditions</li></ul>				
H	Raw water supply and drinking water quality trends	<ul style="list-style-type: none"><li>Sampling protocol as per regulatory requirements O. Reg 169 all within compliance limits</li><li>Increased frequency of raw water quality fluctuations due to seasonal changes and storm conditions</li></ul>	Management review concludes adequate action being taken at this time	QMS Representative		Completed

- The Township of MacDonald Meredith & Aberdeen Additional DWQMS Operational Plan -

2014-03-03 EBY Form 20-01 Management Review Agenda Minutes

**DWQMS Operational Plan****Form 20-01****Date: June 14, 2012****Revision: 1****Approved By:** Vice President Operations & Engineering**Title: Top Management Review Agenda & Meeting Minutes****Page 3 of 5**

Agenda Item		Discussions	Decision/Action	Responsible	Date Due	Status
I	Follow-up action items from previous management reviews	<ol style="list-style-type: none"> <li>Requirement to schedule risk assessment review</li> <li>Requirement to complete report to owner</li> <li>Requirement for emergency testing</li> <li>Discuss system deficiencies with township</li> <li>No chemical feed system alarm to identify pump failure and auto switch over</li> <li>Identified aging equipment to assist in financial plan development</li> <li>The SCADA and PLC controller was identified obsolete and requires upgrade</li> </ol>	<ol style="list-style-type: none"> <li>Review held on Oct. 22, 2012</li> <li>Report conducted on Dec. 18, 2012</li> <li>Training held on Feb. 7, 2013</li> <li>Discussed Dec. 18, 2012</li> <li>In progress – discussion with council</li> <li>Plan finalized by owner in 2013</li> <li>System replaced in 2013</li> </ol>	Management review concludes adequate action being taken at this time	Fall 2014	<ol style="list-style-type: none"> <li>Completed</li> <li>Completed</li> <li>Completed</li> <li>Completed</li> <li>In progress</li> <li>Completed</li> <li>Completed</li> </ol>
J	Status of management action items identified between reviews	2014-01-16 UPDATED_2012-10-12 Echo Bay Management Review Agenda Minutes		QMS Representative	-	Completed
K	Changes that could affect the QMS	<ul style="list-style-type: none"> <li>Service contracts terms</li> <li>Council changes and requests</li> <li>Auditor or inspection requirements &amp; scheduling</li> </ul>	Address on an as needed basis	-	-	-
L	Summary of consumer feedback	<ol style="list-style-type: none"> <li>One chlorine complaint received</li> <li>One milky water complaint as a result of faucet aerator change</li> </ol>	<ol style="list-style-type: none"> <li>Operating Authority offered follow up – complainant declined</li> <li>Resolved through discussion with</li> </ol>	QMS Representative	-	Completed

- The Township of MacDonald Meredith &amp; Aberdeen Additional DWQMS Operational Plan -

2014-03-03 EBY Form 20-01 Management Review Agenda Minutes



**DWQMS Operational Plan****Form 20-01****Date: June 14, 2012****Revision: 1****Approved By: Vice President Operations & Engineering****Title: Top Management Review Agenda & Meeting Minutes****Page 4 of 5**

Agenda Item		Discussions	Decision/Action	Responsible	Date Due	Status
			operator, the complaint was satisfied with explanation			
M	Resources needed to maintain the QMS	<ul style="list-style-type: none"><li>Reviewed the needs of departmental reporting and document maintenance</li><li>Working on development and maintenance of PM's and SOP's</li></ul>	Adequate resources are in place	QMS Representative	-	In progress
N	Results of the infrastructure review	2014-02-28 EBY Infrastructure Review		QMS Representative	-	In progress
O	Operational Plan currency, content and updates	<ul style="list-style-type: none"><li>Operational Plan kept current with help of Admin Assistant for DWQMS, the review team and RRAM</li><li>Continual Improvements are made on an ongoing basis</li><li>Documentation review is kept up to date through the Springboard system (RRAM)</li></ul>	Comment review meetings are held weekly to provide continual improvement and will continue to take place	QMS Representative	-	Completed
P	Summary of staff suggestions	<ul style="list-style-type: none"><li>Suggestions are made regularly by staff through RRAM where they have the option to add a comment</li></ul>	Comment review meetings are held weekly to provide continual improvement	-	-	-
Q	New Business - Other issues that impact on the quality management system. Specify for agenda.	N/A				
R	Date of Next	Fall 2014				

- The Township of MacDonald Meredith & Aberdeen Additional DWQMS Operational Plan -

2014-03-03 EBY Form 20-01 Management Review Agenda Minutes



 	<b>DWQMS Operational Plan</b>	<b>Form 20-01</b>
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Agenda Item	Discussions	Decision/Action	Responsible	Date Due	Status
Meeting					

Minutes distributed to attendees and the following people:

[Dominic Parrella](#)

## **ACCREDITATION PROGRAM FOR OPERATING AUTHORITIES ON-SITE VERIFICATION AUDIT REPORT – 2013**

**FILE #: 1631978-01**

**PUC Services Inc.**

**Operating Authority for:**

**The Echo Bay Drinking Water System**

**Re-Assessment Audit**

**Prepared by:** Rod Seabrook

**Date:** October 10, 2013

## **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's (MOE) Drinking Water Quality Management Standard (DWQMS) at all of the locations noted in the Applicant Profile Form (AP 602). It was also intended to gather the information necessary for 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 requirements, and b) if they have been effectively implemented.

## **Audit Criteria:**

- The Drinking Water Quality Management Standard
- Current QMS manuals, procedures and records implemented by the Operating Authority
- SAI Global Accreditation Program Handbook

## **Auditor:**

Rod Seabrook

## **Audit Report Distribution List:**

The Audit Report is distributed as follows:

- Operating Authority
- Owner
- Ministry of the Environment Director

## **Confidentiality and Documentation Requirements**

SAI Global stores their records and reports to ensure their preservation and confidentiality. Unless required by law, SAI Global will not disclose audit records to a third party without prior written consent of the applicant. The only exception will be that SAI Global will provide audit and corrective action reports to the Ontario Ministry of the Environment. For more information, please refer to the SAI Global Accreditation Program Handbook.

## PART A. MANAGEMENT SUMMARY

This was an on-site verification audit of the PUC Services Inc. conformance with the requirements of DWQMS: Oct. 2006.

**The overall effectiveness of the PUC Services Inc. Quality Management System is considered:**

- ☐ Effective  
☒ Not effective

**Seven non-conformities were identified during this assessment, as noted in Part D of this report. Please review *Instruction for The Completion of Non-Conformance Reports (NCR)* found at the end of this report.**

**The audit objectives were accomplished within the audit scope in accordance with the audit plan and the time allocation.**

### Notes

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

As part of 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: Oct. 2006. For more information, please refer to the SAI Global Accreditation Program Handbook.

## PART B. GENERAL INFORMATION

**Operating Authority:**

Legal name and address

PUC Services Inc.

Address

500 Second Line East Sault Ste. Marie, ON

Applicant representative

Mr. Dan Tonon

Title

Manager, Water Treatment Operations , QMS Rep.

Telephone

705-759-6518

Fax

705-759-1758

E-mail

dan.tonon@ssmpuc.com

**Owner:**

Legal name and address

☒ same as above, or:

Township of the McDonald, Meredith &amp; Aberdeen

Applicant representative

Title

Telephone

E-mail

Accreditation Option: Full Scope Entire

Population Serviced: 600

This audit report covers the subject systems listed:

- Echo Bay Drinking Water System (treatment and distribution), The Township of MacDonald, Meredith & Aberdeen Additional

## PART C. SUMMARY OF FINDINGS

SUMMARY OF FINDINGS							
<b>OPERATING AUTHORITY</b> PUC Services Inc. Township of the McDonald, Meredith & Aberdeen						<b>1631978-01</b>	
<b>ACCREDITATION CYCLE:</b> Re-Assessment Audit							
<b>AUDIT TYPE</b> <input type="checkbox"/> Systems <input checked="" type="checkbox"/> On-Site Verification				<b>AUDITOR</b> Rod Seabrook		October 10, 2013 to October 10, 2013	
<b>SUBJECT SYSTEM(S) AUDITED</b> ① Treatment and Distribution							
REQUIREMENT ↓	SYSTEM →	①	②	③	④	⑤	⑥
1. Quality Management System	C						
2. Quality Management System Policy	C						
3. Commitment and Endorsement	OFI						
4. Quality Management System Representative	C						
5. Document and Records Control	Mn						
	OFI						
6. Drinking-Water System	OFI						
7. Risk Assessment	C						
8. Risk Assessment Outcomes	Mn						
	OFI						
9. Organizational Structure, Roles, Responsibilities and Authorities	Mn						
10. Competencies	OFI						
11. Personnel Coverage	C						
12. Communications	Mn						
13. Essential Supplies and Services	Mn						
14. Review and Provision of Infrastructure	C						
15. Infrastructure Maintenance, Rehabilitation & Renewal	C						
16. Sampling, Testing and Monitoring	C						
17. Measurement & Recording Equipment Calibration and Maintenance	C						
18. Emergency Management	Mn						
19. Internal Audits	OFI						
20. Management Review	Mn						
21. Continual Improvement	C						
<b>Mj</b>	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.						
<b>Mn</b>	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.						
<b>OFI</b>	Opportunity for improvement. Conforms to the requirement, but there is an opportunity for improvement.						
<b>C</b>	Conforms to requirement.						

## PART D. FINDINGS/COMMENTS

DWQMS Reference:	1	Quality Management System
Client Reference:		QMS-01 Rev 1
Results:		<b>Conforms</b>
Details:		<i>The QMS generally meets the requirements of the Standard and implementation is generally consistent with procedures described in the Operational Plan</i>
DWQMS Reference:	2	Quality Management System Policy
Client Reference:		QMS-02 Rev 2
Results:		<b>Conforms</b>
Details:		<i>The Policy is documented and available to staff and other interested parties</i>
DWQMS Reference:	3	Commitment and Endorsement
Client Reference:		QMS-03 Rev 1
Results:		<b>Opportunity for Improvement</b>
Details:		<i>Consider illustrating the relationship between the Owner and PUC</i>
DWQMS Reference:	4	Quality Management System Representative
Client Reference:		QMS-04 Rev 1
Results:		<b>Conforms</b>
Details:		<i>The Manager, Water Treatment Operations is the QMS Rep</i>
DWQMS Reference:	5	Document and Record Control
Client Reference:		QMS-05 Rev 8
Results:		<b>Minor non-conformity</b>
Details:		<i>See NCR-2013-01</i>
Results:		<b>Opportunity for Improvement</b>
Details:		<i>Consider tracking document form revisions in a manner that avoids confusion with content updates Consider whether log books should be added to the records list</i>
DWQMS Reference:	6	Drinking Water System
Client Reference:		QMS-06 Rev 1
Results:		<b>Opportunity for Improvement</b>
Details:		<i>Consider including the location of analyzers in the process flow diagram</i>
DWQMS Reference:	7	Risk Assessment
Client Reference:		QMS-07 Rev 4
Results:		<b>Conforms</b>
Details:		<i>Annual and thirty six month reviews were conducted according to the procedure</i>

DWQMS Reference:	8	Risk Assessment Outcomes
Client Reference:	<i>Table 08-T1 Rev 2; Summary of Critical Control Points Rev 2</i>	
Results:	<b>Minor non-conformity</b>	
Details:	<i>See NCR-2013-02</i>	
Results:	<b>Opportunity for Improvement</b>	
Details:	<i>The high chlorine alarm is not listed in the CCP table</i>	
DWQMS Reference:	9	Organizational Structure, Roles, Responsibility and Authorities
Client Reference:	<i>QMS-09 Rev 0</i>	
Results:	<b>Minor non-conformity</b>	
Details:	<i>See NCR-2013-03</i>	
DWQMS Reference:	10	Competencies
Client Reference:	<i>QMS-10 Rev 1</i>	
Results:	<b>Opportunity for Improvement</b>	
Details:	<i>Consider whether training requirements should be identified by importance (e.g. core vs. non-core) One obsolete operator certificate was posted at the WTP</i>	
DWQMS Reference:	11	Personnel Coverage
Client Reference:	<i>QMS-11 Rev 1</i>	
Results:	<b>Conforms</b>	
Details:	<i>Personnel coverage is maintained as per the procedure</i>	
DWQMS Reference:	12	Communications
Client Reference:	<i>QMS-12 Rev 2</i>	
Results:	<b>Minor non-conformity</b>	
Details:	<i>See NCR-2013-04; NCR-2013-05</i>	
DWQMS Reference:	13	Essential Supplies and Services
Client Reference:	<i>QMS-13 Rev 0</i>	
Results:	<b>Minor non-conformity</b>	
Details:	<i>The Essential Supplies and Services List is lacking chemical suppliers</i>	
DWQMS Reference:	14	Review and Provision of Infrastructure
Client Reference:	<i>QMS-14 Rev 0</i>	
Results:	<b>Conforms</b>	
Details:	<i>Review and provision of infrastructure is being conducted according to procedures</i>	
DWQMS Reference:	15	Infrastructure Maintenance, Rehabilitation and Renewal
Client Reference:	<i>QMS-15 Rev 1</i>	
Results:	<b>Conforms</b>	
Details:	<i>Infrastructure maintenance, renewal and rehabilitation is being conducted according to procedures</i>	



DWQMS Reference:	16	Sampling, Testing and Monitoring
Client Reference:	QMS-16 Rev 1	
Results:	<b>Conforms</b>	
Details:	<i>Sampling, testing and monitoring is being conducted according to procedures</i>	
DWQMS Reference:	17	Measurement and Recording Equipment Calibration and Maintenance
Client Reference:	QMS-17 Rev 1	
Results:	<b>Conforms</b>	
Details:	<i>Calibration and maintenance of measurement and recording equipment is being conducted according to procedures</i>	
DWQMS Reference:	18	Emergency Management
Client Reference:	QMS-18 Rev 1	
Results:	<b>Minor non-conformity</b>	
Details:	<i>See NCR-2013-06</i>	
DWQMS Reference:	19	Internal Audits
Client Reference:	QMS-19 Rev 1	
Results:	<b>Opportunity for Improvement</b>	
Details:	<i>Consider adding "Responsible person" and "timeline for completion" to forms 19-04 and 19-05</i>	
DWQMS Reference:	20	Management Review
Client Reference:	QMS-20 Rev 3	
Results:	<b>Minor non-conformity</b>	
Details:	<i>NCR-2013-07</i>	
DWQMS Reference:	21	Continual Improvement
Client Reference:	QMS-21 Rev 1	
Results:	<b>Conforms</b>	
Details:	<i>Continual improvement was demonstrated through actions to address non-conformances</i>	

## PART E. RECOMMENDATION - Onsite

**The result of the audit indicates that the PUC Services Inc. QMS was not effectively implemented.**

**The following recommendation is made:**

- ☐ Offer of accreditation
- ☐ Offer of accreditation after response to corrective action requests has been deemed acceptable to SAI Global
- X Maintenance of existing accreditation after response to corrective action requests has been deemed acceptable to SAI Global
- ☐ Complete re-assessment

Rod Seabrook  
Lead Auditor / Auditor

## INSTRUCTIONS FOR THE COMPLETION OF NON-CONFORMANCE REPORTS (NCR)

**Failure to provide action plans as arranged with SAI Global and/or to implement correction and corrective action within the nominated time frames may lead to a recommendation that your certification be denied or suspended. Certain sectors require both Major and minor NCR's to be cleared within a specified time. Refer to sector specific requirements for details.**

### Section 1

To be completed by the SAI Global Team Leader at the time of the audit. A copy of the NCR shall be left with the Client at the completion of the audit.

### Section 2 - Organization Response

Complete Section 2 as described below and return it to -SAI Global. In lieu of completing SAI Global NCR form, the Client may submit an <b>equivalent</b> corrective action document.	
<b>Root Cause:</b>	Consider using appropriate root-cause analysis tools such as, 5 Why's, FMEAs, Fault tree analysis and fish bone diagrams, etc., to ensure identification of root cause.
<b>Correction:</b>	Describe the action taken to correct the incident and contain the problem. Objective evidence in the form of revised procedures, records, etc. shall be submitted unless otherwise identified by the Audit Team Leader
<b>Corrective Action:</b>	Client shall describe the systemic (long term) corrective action(s) planned or taken to eliminate the root cause to prevent recurrence. Objective evidence in the form of revised procedures, records, etc. shall be submitted unless otherwise identified by the Audit Team Leader.  <i>NOTE: For audits to the ISO 13485 – CMDCAS standard the client shall submit a corrective action plan that identifies the steps to correct the root cause and verify the effectiveness of actions taken within 30 days of the NCR issuance date. Objective evidence for closure can be submitted at a later date.</i>
<b>Organization Acknowledgement:</b>	Name of the organizations representative who was presented the non-conformance. Signature is not required.
<b>SAI Global Verification Method</b>	Record if site visit is required or what information is to be provided to effect NCR closure.

### Section 3

The SAI Global Team Leader /Client/Project Manager will review the completed NCR or Client's equivalent corrective action document for adequate root cause analysis, systemic corrective action taken on root cause and objective evidence submitted. Upon completion of the review the SAI Global Team Leader will either accept the corrective action taken and clear the NCR or request that the Client provide an additional or revised response or objective evidence in order to clear the NCR. Comments shall be added to the hardcopy of the NCR or electronically as appropriate to identify any request for additional information, including the date for submittal.

### Section 4 – Verification of Effectiveness

Identify the method (plan) to be utilized to verify that the corrective action taken is effective. This could be a follow-up audit or submission of objective evidence of implementation. Where appropriate, records of the client's method of verifying effectiveness can be utilized. Record in the results the actual method and documents reviewed to verify effectiveness.

### Section 5 - NCR Closure

Name and date of individual performing the verification and NCR closure.

<b>Activity #:</b>	1631978-01	<b>Client:</b>	PUC Services Inc. Township of the McDonald, Meredith & Aberdeen	<b>App/Cert:</b>	
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<b>Function/Area/Process:</b>	Document and Records Control			<b>Site:</b>	3121 Old Highway 17, Echo Bay
<b>Std. and Clause No(s):</b>	DRINKING WATER QUALITY MANAGEMENT STANDARD (DWQMS):2006 5	<b>NCR#:</b>	2013-01	<b>Category:</b>	Minor
<b>Section 1- Details of non-conforming situation:</b>					
<p><b>Non-conforming situation:</b> Records of the original signed endorsements were not located</p> <p><b>Requirement:</b> 5. Document and Records Control</p> <p>The Operational Plan shall document a procedure for document and records control that describes how:</p> <p>b) records required by the Quality Management System are:</p> <p>ii. retrievable</p> <p>The Operating Authority shall implement and conform to the procedure for document and records control</p> <p><b>Objective evidence:</b> PUC records; staff interviews</p> <p><b>Due Date:</b> December 09, 2013</p>					
<b>Audit Team Leader</b>	<b>Name</b>	Rod Seabrook	<b>Organization's acknowledgement of receipt of NCR</b>	<b>Name</b>	
	<b>Date:</b>	October 10, 2013		<b>Date:</b>	
<b>SAI Global Verification Method:</b> (record if site visit is required or what information is to be provided):					
<b>Section 2- Organization's Response: (Attach separate sheet if required)</b>					
<p><b>Root Cause Analysis</b> (record or attach 5 why, 8D, fishbone diagram, etc to support this analysis):</p> <p><b>Correction with completion dates</b> (what was the immediate fix? Submit objective evidence of correction):</p> <p><b>Corrective Action Taken/Planned</b> (with completion date(s) (record what action is planned or will be taken to prevent recurrence. Submit objective evidence of completed corrective actions):</p>					

**Organization Representative :      Name:****Date:****Section 3- SAI Global Response Review:**

Response is not acceptable for these reasons:

Please submit a revised response by:

Reviewer:

Date:

Response is acceptable please see section 4 for details. Reviewer:

Date:

**Section 4- SAI Global Verification of Corrective Action for effectiveness**

Records of the original signed endorsements were not located

**Section 5- SAI Global NCR Closure:**

Name:

Date:

<b>Activity #:</b>	1631978-01	<b>Client:</b>	PUC Services Inc. Township of the McDonald, Meredith & Aberdeen			<b>App/Cert:</b>	
<b>Function/Area/Process:</b>	Risk Assessment and Risk Assessment Outcomes				<b>Site:</b>	3121 Old Highway 17, Echo Bay	
<b>Std. and Clause No(s):</b>	DRINKING WATER QUALITY MANAGEMENT STANDARD (DWQMS):2006 8	<b>NCR#:</b>	2013-02	<b>Category:</b>	Minor		
<b>Section 1- Details of non-conforming situation:</b>							
<p><b>Non-conforming situation:</b> An SOP for filtration inspection has not been developed</p> <p><b>Requirement:</b> 8. Risk Assessment Outcomes</p> <p><b>The Operational Plan shall document:</b></p> <p>g) procedures to respond to deviations from the critical control limits, and</p> <p>h) procedures for reporting and recording deviations from the critical control limits.</p> <p><b>Objective evidence:</b> Summary of Critical Control Points Rev 2, Echo Bay SOPs, staff interviews</p> <p><b>Due Date:</b> December 09, 2013</p>							
<b>Audit Team Leader</b>	<b>Name</b>	Rod Seabrook		<b>Organization's acknowledgement of receipt of NCR</b>	<b>Name</b>		
	<b>Date:</b>	October 10, 2013			<b>Date:</b>		
<p><b>SAI Global Verification Method:</b> (record if site visit is required or what information is to be provided):</p> <p><b>Section 2- Organization's Response:</b> (Attach separate sheet if required)</p> <p><b>Root Cause Analysis</b> (record or attach 5 why, 8D, fishbone diagram, etc to support this analysis):</p> <p><b>Correction with completion dates</b> (what was the immediate fix? Submit objective evidence of correction):</p> <p><b>Corrective Action Taken/Planned</b> (with completion date(s) (record what action is planned or will be taken to prevent recurrence. Submit objective evidence of completed corrective actions):</p>							

Organization Representative :

Name:

Date:

**Section 3- SAI Global Response Review:**

Response is not acceptable for these reasons:

Please submit a revised response by:

Reviewer:

Date:

Response is acceptable please see section 4 for details. Reviewer:

Date:

**Section 4- SAI Global Verification of Corrective Action for effectiveness**

An SOP for filtration inspection has not been developed

**Section 5- SAI Global NCR Closure:**

Name:

Date:

<b>Activity #:</b>	1631978-01	<b>Client:</b>	PUC Services Inc. Township of the McDonald, Meredith & Aberdeen			<b>App/Cert:</b>	
<b>Function/Area/Process:</b>	Organizational Structure, Roles, Responsibilities and Authorities				<b>Site:</b>	3121 Old Highway 17, Echo Bay	
<b>Std. and Clause No(s):</b>	DRINKING WATER QUALITY MANAGEMENT STANDARD (DWQMS):2006 9	<b>NCR#:</b>	2013-03	<b>Category:</b>	Minor		
<b>Section 1- Details of non-conforming situation:</b>							
<p><b>Non-conforming situation: Responsibilities for Operators in Training are not described</b></p> <p><b>Requirement: 9. Organizational Structure, Roles, Responsibilities and Authorities</b></p> <p><b>The Operational Plan shall:</b>            a) describe the organizational structure of the Operating Authority including respective roles, responsibilities and authorities</p> <p><b>Objective evidence: QMS-09 Rev 0</b></p> <p><b>Due Date:</b> December 09, 2013</p>							
<b>Audit Team Leader</b>	<b>Name</b>	Rod Seabrook		<b>Organization's acknowledgement of receipt of NCR</b>	<b>Name</b>		
	<b>Date:</b>	October 10, 2013			<b>Date:</b>		
<p><b>SAI Global Verification Method:</b> (record if site visit is required or what information is to be provided):</p> <p><b>Section 2- Organization's Response: (Attach separate sheet if required)</b></p> <p><b>Root Cause Analysis (record or attach 5 why, 8D, fishbone diagram, etc to support this analysis):</b></p> <p><b>Correction with completion dates (what was the immediate fix? Submit objective evidence of correction):</b></p> <p><b>Corrective Action Taken/Planned (with completion date(s) (record what action is planned or will be taken to prevent recurrence. Submit objective evidence of completed corrective actions):</b></p>							



**Organization Representative :      Name:****Date:****Section 3- SAI Global Response Review:**

Response is not acceptable for these reasons:

Please submit a revised response by:

Reviewer:

Date:

Response is acceptable please see section 4 for details. Reviewer:

Date:

**Section 4- SAI Global Verification of Corrective Action for effectiveness**

Responsibilities for Operators in Training are not described

**Section 5- SAI Global NCR Closure:**

Name:

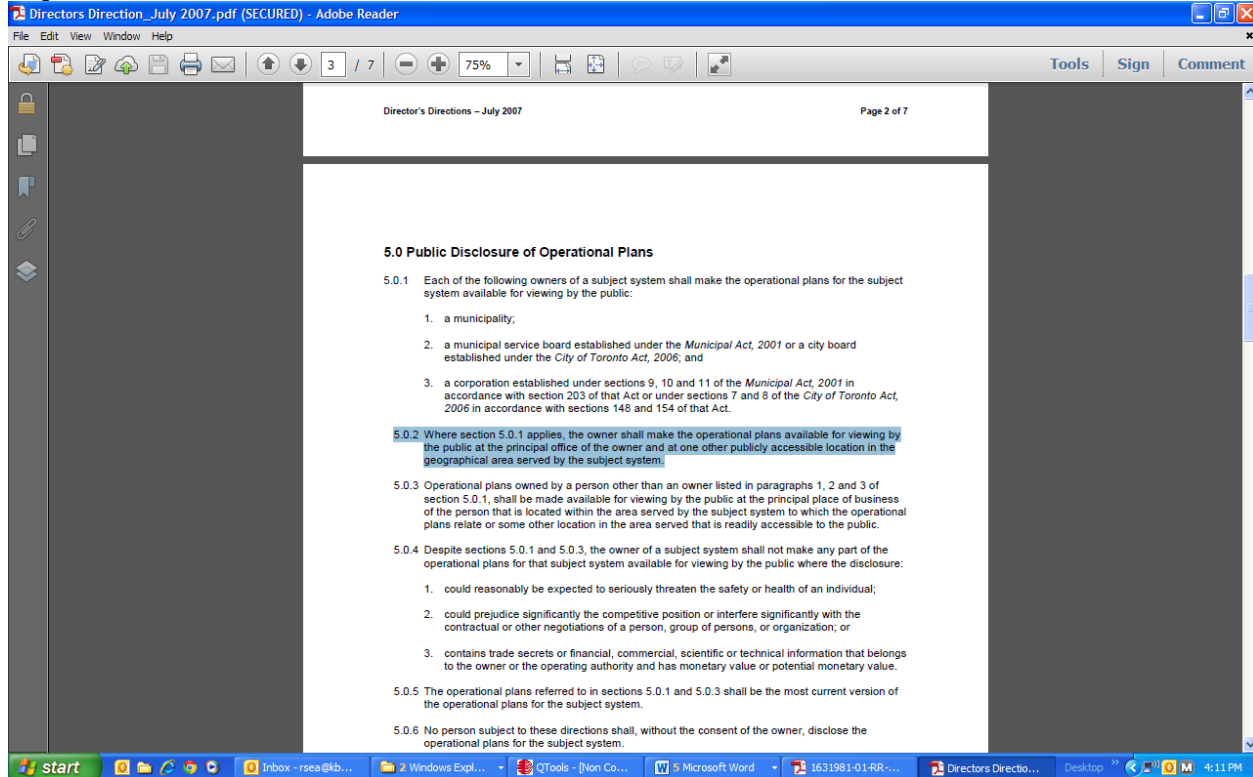
Date:

Activity #:	1631978-01	Client:	PUC Services Inc. Township of the McDonald, Meredith & Aberdeen				App/Cert:	
Function/Area/Process:		Communications				Site:	3121 Old Highway 17, Echo Bay	
Std. and Clause No(s):		DRINKING WATER QUALITY MANAGEMENT STANDARD (DWQMS):2006 12	NCR#:	2013-04	Category:	Minor		

#### Section 1- Details of non-conforming situation:

**Non-conforming situation: The Operational Plan is not currently available to the public at two locations, as required by the Director's Directions**

#### Requirement:



Director's Directions - July 2007

Page 2 of 7

**5.0 Public Disclosure of Operational Plans**

5.0.1 Each of the following owners of a subject system shall make the operational plans for the subject system available for viewing by the public:

1. a municipality;
2. a municipal service board established under the *Municipal Act, 2001* or a city board established under the *City of Toronto Act, 2006*; and
3. a corporation established under sections 9, 10 and 11 of the *Municipal Act, 2001* in accordance with section 203 of that Act or under sections 7 and 8 of the *City of Toronto Act, 2006* in accordance with sections 148 and 154 of that Act.

5.0.2 Where section 5.0.1 applies, the owner shall make the operational plans available for viewing by the public at the principal office of the owner and at one other publicly accessible location in the geographical area served by the subject system.

5.0.3 Operational plans owned by a person other than an owner listed in paragraphs 1, 2 and 3 of section 5.0.1, shall be made available for viewing by the public at the principal place of business of the person that is located within the area served by the subject system to which the operational plans relate or some other location in the area served that is readily accessible to the public.

5.0.4 Despite sections 5.0.1 and 5.0.3, the owner of a subject system shall not make any part of the operational plans for that subject system available for viewing by the public where the disclosure:

1. could reasonably be expected to seriously threaten the safety or health of an individual;
2. could prejudice significantly the competitive position or interfere significantly with the contractual or other negotiations of a person, group of persons, or organization; or
3. contains trade secrets or financial, commercial, scientific or technical information that belongs to the owner or the operating authority and has monetary value or potential monetary value.

5.0.5 The operational plans referred to in sections 5.0.1 and 5.0.3 shall be the most current version of the operational plans for the subject system.

5.0.6 No person subject to these directions shall, without the consent of the owner, disclose the operational plans for the subject system.

**Objective evidence: Staff interview**

**Due Date:** December 09, 2013

Audit Team	Name	Rod Seabrook	Organization's	Name	
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**Confidential**  
**20 Carlson Court, Suite 200**  
**Toronto, ON CAN M9W 7K6**  
**Telephone: 416-401-8700 Facsimile: 416-401-8650**

<b>Activity #:</b>	1631978-01	<b>Client:</b>	PUC Services Inc. Township of the McDonald, Meredith & Aberdeen			<b>App/Cert:</b>	
<b>Function/Area/Process:</b>	Communications				<b>Site:</b>	3121 Old Highway 17, Echo Bay	
<b>Std. and Clause No(s):</b>	DRINKING WATER QUALITY MANAGEMENT STANDARD (DWQMS):2006 12	<b>NCR#:</b>	2013-05	<b>Category:</b>	Minor		
<b>Section 1- Details of non-conforming situation:</b>							
<b>Non-conforming situation:</b> Chemical suppliers have not received a letter as per QMS 13 Appendix B							
<b>Requirement:</b> QMS 13 Appendix B Rev 2							
<b>Objective evidence:</b> Staff interviews, PUC records							
<b>Due Date:</b> December 09, 2013							
<b>Audit Team Leader</b>	<b>Name</b>	Rod Seabrook		<b>Organization's acknowledgement of receipt of NCR</b>	<b>Name</b>		
	<b>Date:</b>	October 10, 2013			<b>Date:</b>		
<b>SAI Global Verification Method:</b> (record if site visit is required or what information is to be provided):							
<b>Section 2- Organization's Response: (Attach separate sheet if required)</b>							
<b>Root Cause Analysis</b> (record or attach 5 why, 8D, fishbone diagram, etc to support this analysis):							
<b>Correction with completion dates</b> (what was the immediate fix? Submit objective evidence of correction):							
<b>Corrective Action Taken/Planned</b> (with completion date(s) (record what action is planned or will be taken to prevent recurrence. Submit objective evidence of completed corrective actions):							
<b>Organization Representative :</b>		<b>Name:</b>			<b>Date:</b>		
<b>Section 3- SAI Global Response Review:</b>							

Response is not acceptable for these reasons:

Please submit a revised response by:

Reviewer:

Date:

Response is acceptable please see section 4 for details. Reviewer: Date:

**Section 4- SAI Global Verification of Corrective Action for effectiveness**

Chemical suppliers have not received a letter as per QMS 13 Appendix B

**Section 5- SAI Global NCR Closure:**

Name:

Date:

**Confidential**  
**20 Carlson Court, Suite 200**  
**Toronto, ON CAN M9W 7K6**  
**Telephone: 416-401-8700 Facsimile: 416-401-8650**

**Section 3- SAI Global Response Review:**

Response is not acceptable for these reasons:

Please submit a revised response by:

Reviewer:

Date:

Response is acceptable please see section 4 for details. Reviewer:

Date:

**Section 4- SAI Global Verification of Corrective Action for effectiveness**

Processes for response to all potential emergency situations have not been developed

**Section 5- SAI Global NCR Closure:**

Name:

Date:

<b>Activity #:</b>	1631978-01	<b>Client:</b>	PUC Services Inc. Township of the McDonald, Meredith & Aberdeen			<b>App/Cert:</b>	
<b>Function/Area/Process:</b>	Management Review				<b>Site:</b>	3121 Old Highway 17, Echo Bay	
<b>Std. and Clause No(s):</b>	DRINKING WATER QUALITY MANAGEMENT STANDARD (DWQMS):2006 20	<b>NCR#:</b>	2013-07	<b>Category:</b>	Minor		
<b>Section 1- Details of non-conforming situation:</b>							
<p><b>Non-conforming situation:</b> Form 20-01 (status of action items) was not updated for the Oct 12, 2012 management review action items for agenda item I</p> <p><b>Requirement:</b> QMS-20 Rev 3 Section 2.2</p> <p><b>Objective evidence:</b> October 12, 2012 management review records</p> <p><b>Due Date:</b> December 09, 2013</p>							
<b>Audit Team Leader</b>	<b>Name</b>	Rod Seabrook		<b>Organization's acknowledgement of receipt of NCR</b>	<b>Name</b>		
	<b>Date:</b>	October 10, 2013			<b>Date:</b>		
<p><b>SAI Global Verification Method:</b> (record if site visit is required or what information is to be provided):</p>							
<b>Section 2- Organization's Response: (Attach separate sheet if required)</b>							
<p><b>Root Cause Analysis</b> (record or attach 5 why, 8D, fishbone diagram, etc to support this analysis):</p> <p><b>Correction with completion dates</b> (what was the immediate fix? Submit objective evidence of correction):</p> <p><b>Corrective Action Taken/Planned</b> (with completion date(s) (record what action is planned or will be taken to prevent recurrence. Submit objective evidence of completed corrective actions):</p> <p><b>Organization Representative :</b>                      <b>Name:</b>    <b>Date:</b></p>							



**Section 3- SAI Global Response Review:**

Response is not acceptable for these reasons:

Please submit a revised response by:

Reviewer:

Date:

Response is acceptable please see section 4 for details. Reviewer:

Date:

**Section 4- SAI Global Verification of Corrective Action for effectiveness**

Form 20101 (status of action items) was not updated for the Oct 12, 2012  
management review action items for agenda item I

**Section 5- SAI Global NCR Closure:**

Name:

Date:



# CERTIFICATE OF ACCREDITATION

This is to certify that the following operating authority:

## **PUC Services Inc.**

**Township of the McDonald, Meredith & Aberdeen**  
3121 Old Highway 17, Echo Bay, Ontario P0S 1C0 Canada

### **Additional Drinking Water System**

The Echo Bay Drinking Water System

operates a

## **Quality Management System**

which conforms with the requirements of

## **Drinking Water Quality Management Standard (DWQMS):2006**

for the following scope of registration

### **Full Scope - Entire DWQMS**

Certificate No.: CERT-0077668  
File No.: 1631978  
Issue Date: February 19, 2014

Original Certification Date: February 27, 2013  
Current Certification Date: February 19, 2014  
Certificate Expiry Date: February 18, 2017

Chris Jouppi  
President,  
QMI-SAI Canada Limited

Samer Chaouk  
Head of Policy, Risk and Certification



**DWQMS**



**Accredited by:**

**SAI Global Certification Services Pty Ltd**, 286 Sussex Street, Sydney NSW 2000 Australia with **QMI-SAI Canada Limited**, 20 Carlson Court, Suite 200, Toronto, Ontario M9W 7K6 Canada (**SAI GLOBAL**). This registration is subject to the **SAI Global** Terms and Conditions for Certification. While all due care and skill was exercised in carrying out this assessment, **SAI Global** accepts responsibility only for proven negligence. This certificate remains the property of **SAI Global** and must be returned to them upon request.

To verify that this certificate is current, please refer to the **SAI Global** On-Line Certification Register: [www.qmi-saiglobal.com/qmi\\_companies/](http://www.qmi-saiglobal.com/qmi_companies/)



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