



Meeting Date: November 24, 2021

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Report No: PWE 40 – 2021

Subject: 2021 Drinking Water Quality Management System Annual Audit Summary

Recommendation:

THAT Report PWE 40-2021, re: 2021 Drinking Water Quality Management System – 2021 Internal & External Audit Results report be received for information.

Purpose:

To advise Council of the 2021 Internal and External Audit results for our Drinking Water Quality Management System.

Background:

Under the Safe Drinking Water Act, 2002, the Owner of a drinking water system is required to have an accredited operating authority in place for the operation of their water systems at all times.

The Municipality Middlesex Centre is the Owner and Operator of the water system. In order to meet the requirements of an accredited Operating Authority, it is required that Middlesex Centre maintain an Operational Plan (OP). The Operational Plan is comprised of twenty one key elements, which document an understanding of the drinking water system, the responsibilities of Middlesex Centre, and a commitment to the provision of safe drinking water.

Annually as per Element 19 an Internal Audit is performed to evaluate conformity of the quality management system with the requirements of the standard. The Internal audit was performed by Acclains Environmental Inc.. The scope is to review the Operational Plan for 3 drinking water systems of the Municipality of Middlesex Centre (Birr Well Supply System, Melrose Well Supply System and Middlesex Centre Distribution System). The objective is to identify shortcomings of the Operational Plan and the QMS against the DWQMS that need to be addressed prior to the surveillance audit to be conducted by the external auditor (NSF). To receive and maintain Full Scope

Accreditation, annually an External Audit must be completed by an accredited third party auditor designated by the Ministry of Environment, Conservation and Parks (MECP). NSF is the designated external auditor.

Analysis:

The internal audit was conducted on September 6th and 7th, 2021 by Acclaims Environmental Inc. and the external audit was conducted on September 28th, 2021 by NSF.

Acclaims Environmental our internal auditor identified 2 non-conformities during the audit:

1. Element 5 – Document Control

The OP shall document a procedure for Document and Records control that describes how Documents required by QMS are kept current, legible and readily identifiable

- There are many instances where the Operational Plan contradicts the information in the QMS documents. (ie. ADMIN-700 and ADMIN-1200). There was a recent update to the Operational Plan that will lead to removing some of these documents and adding new documents.

2. Element 8 – Risk Assessment Outcomes

The risk assessment outcomes should list the critical control points and their respective critical control limits.

- The CCP chart in the Risk Assessment Outcomes report dated July 20, 2021 is not consistent with what is listed in the Operational Plan. Some items in the list are above the High limit of 9 with no reason given for not being a CCP.

A list of Opportunities for Improvement (OFI's) were identified during the audit. The OFI's are related to a major overhaul of the DWQMS Operational Plan earlier in 2021 and a change in the Consultant completing the internal audit for Middlesex Centre. While non-conformities and/or opportunities for improvement are cited in this audit report, they do not undermine the positive programs and attitudes already in place among Municipality of Middlesex Centre staff. It should be noted that OFI's do not require a formal response and are suggestions provided by the auditors for changes that may improve the Operational Plan. All the OFI's listed in the audit report have been reviewed on an individual basis and will be incorporated into future Operational Plans.

The External Audit identified only 2 non-conformances and no opportunity for improvements. The non- conformances relate to Element 20 - Management Review and Element 21 - Continual Improvement.

1. Element 20 - Management Review

The OP requires a procedure for management review that evaluates the continuing suitability, adequacy and effectiveness of the Quality Management System. The Management Review procedure shall: ... c) provide a record of any decisions and action items related to the management review including the personnel responsible for delivering the action items and the proposed timelines for their implementation...

- The management review process is not fully effective and there is no evidence to demonstrate that responsibilities and timelines are consistently recorded for actions resulting from management review, e.g. September 2021 - follow-up with MECP (Birr hatch).

2. Element 21 - Continual Improvement

The operating authority shall develop a procedure for tracking and measuring continual improvement of its Quality Management System by: ...b) documenting a process for identification and management of Quality Management System Corrective Actions that includes: i. investigating the cause(s) of an identified non-conformity, ii. Documenting the action(s) that will be taken to correct the non-conformity and prevent the non-conformity from re-occurring, and iii. Reviewing the action(s) taken to correct the non-conformity, verifying that they are implemented and are effective in correcting and preventing the re-occurrence of the non-conformity

- The corrective action process is not fully effective and there is no evidence available to demonstrate that the causes of identified non-conformities are investigated. E.g. #2021-12; 2021-13 - (root cause restates the problem).

The 2 non-conformities were addressed and submitted to NSF. The Management review finding was addressed by adjusting the Management Review Template titled QMS -20-01 Management Review Meeting Review Form to include the necessary summary deficiencies noted and a summary of decision and action item. The Continual Improvement tracking spread sheet was updated to include the Root Cause requirements.

It should be noted that non-conformance require a formal response and this has been completed. The auditors have concluded that sufficient evidence has been provided to demonstrate that a QMS that meets the intent of the DWQMS v.2.0 has been established and actively implemented at this facility.

Financial Implications:

All costs related to the internal/external audits, the operational plans and maintenance of the DWQMS are part of the budgeted operational cost for the Middlesex Centre Water Systems.

Strategic Plan:

This matter aligns with following strategic priorities:

- Sustainable Infrastructure and Services
- Responsive Municipal Government

Attachments:

Municipality of Middlesex Centre – DWQMS 2.0 – 2021 Internal Audit Report completed by Acclaims Environmental

NSF CAI 3 Nov 2021