



## QMS Document

<b>Title</b>	Management Review Meeting
<b>Document No.</b>	QMS 20-01
<b>Effective Date</b>	2021-11-05
<b>Version</b>	02

### QMS 20-01 | Management Review Meeting form

DATE Tuesday December 3, 2024

TIME 12:00 to 13:00

LOCATION Komoka Wellness Centre Library Room

CHAIR Eric Joudrey – Manager of Water and Wastewater Operations

PARTICIPANTS Michael Di Lullo – Chief Administrative Officer  
Robert Cascaden – Director of Public Works and Engineering

REGRETS Jocelyn Tyler – Compliance Coordinator / Operator

MEETING RESOURCES



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### Discussion

Evaluation of the continuing suitability, adequacy and effectiveness of the QMS is achieved by considering the contents of this table:

Topic Descriptions	Summary + Any Deficiencies Noted	Summary of Decisions + Action Items <sup>1</sup> (ID WHO is responsible + DUE dates)
<p><b>a) Incidents of regulatory non-compliance</b></p> <p>Summary of regulatory non-compliances that occurred, reported to agency; identified in agency inspection results.</p>	<p>Birr Drinking Water System had one incident of regulatory non-compliance where the requirement of Schedule 18 of O. Reg. 170/03, including steps directed by the Medical Officer of Health taken to address adverse conditions were not taken:</p> <p><b>May 17, 2023</b>, a water sample was collected from the distribution sample station.</p> <p><b>May 18, 2023</b>, the laboratory notified the system owner that the sample obtained NDOG test results for EC. The system owner ensured that operators flushed the distribution system, the distribution system contained adequate chlorine residuals, and a set of resamples were collected. However, the system owner did not "immediately take all reasonable steps to notify all users of water from the system to use an alternate source of drinking water or, if no alternate source is available, to bring water to a rapid rolling boil for at least one minute before use", as required by s.18-5.1. of O. Reg.170/03. The Medical Officer of Health (local health unit) did not direct the system owner to take steps in addition to the corrective actions identified in O.Reg. 170/03.</p> <p><b>May 19, 2023</b>, the system owner distributed water advisory notices to water users. The day after being notified of the NDOG sample result.</p>	<p>The system owner shall:</p> <ol style="list-style-type: none"> <li>1) Ensure that all applicable corrective actions are performed in accordance with schedule 18 of O. Reg. 170/03.</li> <li>2) Review corrective actions under Schedule 18 of O. Reg. 170/03 with all operators of the Birr Drinking Water System.</li> <li>3) <b>No later than July 1, 2024, provide the Water Compliance Officer with written confirmation via email, advising that item 2) above has been completed. <u>Completed Internal training session June 12, 2024.</u></b></li> </ol> <p>Completed by Eric Joudrey – Manager of Environmental Services</p>



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	<p>Records did not confirm that the water treatment equipment which provides chlorination or chloramination for secondary disinfection was operated so that at all times and all locations in the distribution system the chlorine residual was never less than 0.05 mg/l free or 0.25 mg/l combined.</p>	<p>On July 2, 2023, the chlorination equipment at the Birr water treatment facility malfunctioned. Approximately 0.37 m3 of water with a chlorine residual less than 0.05 mg/L was directed to the distribution system. Operators were notified of a low chlorine alarm, responded to the site, repaired the chlorination equipment, restored chlorine residual in the distribution system, flushed the water system, tested for chlorine residuals and collected microbiological samples from the extremities of the distribution system. Verbal and written reports of the event were submitted to the ministry's Spills Action Centre and Medical Officer of Health (local Health Unit).</p> <p>Eric Joudrey – Manager of Environmental Services took the recommendation from the MECP and is reviewing it with a Consultant Engineer -- The majority of municipal drinking water systems with primary disinfection are equipped with an automatic high lift pump shut-off mechanism, connected to the low chlorine setpoint in the continuous chlorine analyzer used to monitor primary disinfection CT. Although the Birr Drinking Water System meets the minimum requirements of schedule 6 of O.Reg. 170/03 with respect to having a low chlorine alarm or automatic shut-off mechanism. It is recommended that a high lift pump automatic shut-off mechanism connected to the continuous</p>



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		chlorine analyzer be installed in the Birr water treatment facility. This mechanism would help ensure that only adequate Chlorinated water is directed to the distribution system.
	Middlesex Centre Drinking Water System	No issues identified
	Melrose Drinking Water System -	No issues identified
<b>b) Incidents of adverse drinking water tests</b> Summary of AWQI's, agency reporting, related corrective actions, and whether they were confirmed effective.	<b>There was one (1) incidents of adverse drinking water tests:</b>	<b>AWQI # 165431</b> –Melrose Water. Low pressure event below 40 psi in the distribution system. (July 3, 2024). All required AWQI Form 2A & 2B were completed and closed with MECP (SAC office and Local Medical Officer of Health).
<b>c) Deviations from critical control point limits and response actions</b>	A Critical Control Point (CCP) is an essential step or point in the subject system at which control can be applied by the operating authority to prevent or	There were five (5) deviations from the CCL that occurred between the management reviews. These were as a result of spikes in chlorine injection at the



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Summary of deviations from CCL's: the points at which a critical control point response procedure is initiated.	eliminate a drinking water health hazard or to reduce it to an acceptable level and a Critical Control Limit (CCL) is the point at which a CCP response procedure is initiated. Critical control limits exist for primary disinfection, chlorine residuals, backflow prevention	Ilderton Booster Pump Station, The issue occurred upon booster pump start up and chlorine pockets. The issue has been engineered out with the assistance of chemical pump start and stop sequencings.
<p><b>d) The effectiveness of the risk assessment process</b></p> <p>Summary of risk assessment updates (1:calendar year, re-assessed every 36 months). Discuss any updates here.</p>	The annual risk assessment and annual review was conducted June 19,2024 The risk assessment process looks at typical hazardous events, possible outcomes, and existing control measures to determine whether a critical control limit is needed. Each risk is assigned a Likelihood rating (with a value between 1 and 5) a severity rating (with a value between 1 and 5) and a detectability & response rating (with a value between 1 and 5) and the Risk Value is calculated by adding these numbers. High risks are considered at a score of 9 or above.	Calendar year review of the risk assessment outcomes conducted. Detailed changes are available in the "tracked changes" version of this file. No edits were performed during the risk assessment review.
<p><b>e) Internal and third-party audit results</b></p> <p>Summary of internal &amp; third-party QMS audits; agency inspection results; deficiencies identified, ways to improve.</p>	An internal audit was conducted on August 28 and September 4, 2024 by Acclams Environmental There were zero NO non-conformance noted during the audit. Three (3) opportunities for improvements (OFI). <b>1) Document &amp; Record Control (EI.1 + 5)</b> - An opportunity exists to include the retention dates for all documents / records where applicable in QMS-05-03 (and also including a reference to the audited OP retained in 10 years as noted in s. 1 of the DWQMS checklist	<p>All OFI's were addressed and updated and are reflected in the Operational Plan and Record Retention SOP.</p> <p>All OFI were completed by Jocelyn Tyler and verified by Eric Joudrey prior to our external audit.</p>



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	<p><b>2) Management Review (EI.20)</b> - An opportunity is identified to add more details / context to Management Review minutes, such as for the following agenda items: <u>g) Operational performance</u>: e.g. summary of flushing activities, operational or equipment changes, etc. <u>h) Raw water supply and DW quality trends</u>: e.g. trends in raw water or treated water, charts / tables on flows and/or ranges of sample test results...</p> <p><b>3) Management Review Action Items (EI. 20 /21)</b> - Consider logging issues identified in Management Review meetings in the continual improvement tracking spreadsheet.</p> <p>Third Party Audit will be conducted on October 11, 2024</p>	
<p><b>f) Results of emergency response testing</b></p> <p>Summary of training, testing, any actual emergencies, results of debrief; whether emergency plan was effective.</p>	<p>An emergency desktop exercise was completed on August 14, 2024 by Acclaims Environmental. The emergency exercise reviewed the purpose and intent of management systems and a situation related to high volumes of calls related to water outages, loss of pressure and discolored water.</p>	<p>The course and exercise were presented by Acclaims – there were no action items from the exercise and session. The session testing the participants knowledge, awareness and understanding of the information by having a quiz. Completed and considered effective August 14, 2024 by Acclaims Environmental and Eric Joudrey.</p>

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<p><b>g) Operational performance</b></p> <p>Summary of DWS performance: is DWS achieving what's intended? Deficiencies identified / discuss any changes.</p>	<p>A tool used to determine operational performance at Middlesex Centre Distribution system, Birr Water System and Melrose Water System.</p>	<p>The Middlesex Centre Distribution System was inspected on June 21, 2024 and received a grade of 100%.</p> <p>Birr Water System was inspected on May 9, 2024 and had an inspection score of 90.59%</p> <p>Melrose Water System was inspected on May 9, 2024 and had an inspection score of 100%.</p> <p>Any deficiencies have been addressed and changed by Eric Joudrey and Jocelyn Tyler - Complete</p>
<p><b>h) Raw water supply and drinking water quality trends</b></p> <p>Summary of raw water characteristics and any drinking water quality trends. Discuss challenges, improvements.</p>	<p>Raw water characteristics are reviewed on a quarterly basis at Birr and Melrose Water Systems. Annual well inspections are conducted at these treatment plants to evaluate the well pump performance. Water quality trends are monitored once the analytical data is received and tracked in our data base along with the newly developed sample results sheets that counts regulatory sample requirements, minimum &amp; maximum bacteriologic results.</p>	<p>There were no action items to follow up on and there are no management action items identified between reviews.</p>
<p><b>i) Follow-up on action items from previous management reviews</b></p> <p>Review of previous minutes, review of action items.</p>		<p>The previous management review was held on September 25, 2023 There were no follow up action items.</p>



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<p><b>j) Status of management action items identified between reviews</b></p> <p>Update status of and actions taken to resolve continual improvement items assigned to top management.</p>		No management action items identified between reviews.
<p><b>k) Changes that could affect the QMS</b></p> <p>Summary of changes coming (e.g. approval terms &amp; conditions, changing legislative requirements, etc.).</p>	No items are identified in the short term that will affect the DWQMS or the water system.	No action items
<p><b>l) Consumer feedback</b></p> <p>Summary of feedback from consumers on water quality or pressure. Note improvement opportunities to implement.</p>	<p>There was a total of 12 customer complaints since the last management meeting</p> <p>5 Pressure complaints</p> <p>4 Colour complaints</p> <p>2 Taste complaints</p> <p>1 General water inquire – question regarding a curb stop valve.</p>	<p>Municipal staff are deployed to all low-pressure calls to ensure there are no active leaks. A test upstream and downstream fire hydrant pressures are completed along with a follow up with resident. Taste and odour are followed up with resident and municipal staff flush line in proximity to home as part of our investigation. A complaint form is completed by the operator who is dispatched to the area and filed on the network drive.</p> <p>All action items closed off on the day of call and completed. – No follow up required.</p>





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<p><b>m) The resources needed to maintain the QMS / DWS</b></p> <p>Summary of resources needed: people, procedures, equipment, infrastructure, materials, measurement, etc.</p>		At this time there is no need for added resources to maintain the QEMS.
<p><b>n) The results of the infrastructure review</b></p> <p>Summary of items necessary to upgrade or renew in DWS (for improved O&amp;M), review projects statuses, etc.</p>	As part of the infrastructure review, documents such as the 5 Year and 10 year Capital Budget and the annual Operational Budget are review with the Director of Public Works and Engineering.	Monthly review of budget actuals and progress is completed by the Operations Manager (Eric Joudrey). Quarterly the Senior Management team meets to discuss the status of all Capital Projects.
<p><b>o) Operational Plan currency, content and updates</b></p> <p>Summary of OP updates or changes required: based on regular review (audit processes), QMS / DWS failures, etc</p>	The Operations Plan was endorsed NSF on September 26, 2022. It is current and up to date.	There are no action items related to the Operational Plan. The next audit cycle in 2025 is a full accreditation audit.
<p><b>p) Staff suggestions</b></p> <p>Summary of staff suggestions collected through audits, debrief sessions (following emergencies and failures), etc.</p>	There were no staff suggestions	There are no action items related to staff suggestions, or debrief sessions
<p><b>q) Consideration of best management practices</b></p>		



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Summary of relevant best management practices that could be implemented in our system.		
<b>OUTPUT OF MANAGEMENT REVIEW</b> Conclusions on the continuing suitability, adequacy and effectiveness of our QMS.	QMS 20-01 Management Review Meeting form	Report results of Management Review to Owner. All endorsements, reports and inspection findings has been reported to Council and upper Management.  All reports were completed by Eric Joudrey

## Revision history

#	yyyy-mm-dd	Description	By
01	2021-06-08	Initial release of this document.	Eric Joudrey
02	2021-11-05	Separated columns for "Summary + Any Deficiencies Noted" and the "Summary of Decisions + Actions Items" so that action items are more easily identified and tracked. Added q) Consideration of best management practices and "Output of Management Review"	Eric Joudrey
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**middlesex**  
centre

*in the centre of it all*

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<sup>i</sup> Any action items created are tracked in the Continual Improvement Report (CIR) tracking spreadsheet.