

The Corporation of the Township of Billings

Council Meeting Agenda October 01, 2024 07:00 PM Kagawong Park Centre

Council

Bryan Barker, Mayor David Hillyard, Deputy Mayor Ian Anderson, Councillor Vince Grogan, Councillor Michael Hunt, Councillor

Staff

Veronique Dion, CAO/Clerk Tiana Mills, Deputy Clerk Arthur Moran, By-Law, H&S, Emerg Mgmt Todd Gordon

- 1. Call to Order
- 2. Approval of Agenda
 - 2.1. Confirm approval of the agenda
- 3. Disclosure of Pecuniary Interest
- 4. Adoption of Minutes
- 5. Delegation
 - 5.1. Segal Construction: Proposal for Municipal Construction of Attainable Housing

6. Committee Reports and Minutes

Members of Council are provided with an opportunity to report on Committee and Board meetings.

6.1. District Services Administration Board Meeting - September 19, 2024

7. Staff Reports

- 7.1. EM-2024-10-04 Emergency Management Quarterly Report
- 7.2. BE-2024-10-04 By-Law Enforcement Bi-Monthly Report
- 7.3. MPM-2024-09-15 Old Mill Rd. Bridge Project (6)
- 7.4. BP-2024-10-06 D12/D15 Oakes Cottages Zoning/Subdivision Applications 732 Monument Road Pre-Consultation (2)
- 7.5. CAO-2024-10-13 Bridal Veil Falls Concerns
- 8. Correspondence Requiring Direction
 - 8.1. Ontario Clean Water Agency Operational Plan Endorsement

As part of the facility's Drinking Water Quality Maintenance Standard (DWQMS) the operating authority and the owner must endorse the operational plan and the procedures within it. The last endorsement was made in 2023 and since then OCWA has updated their QEMS policy which triggers another endorsement. As such, staff is seeking an authorization for the Mayor and CAO to sign the attached endorsement.

- 9. Information
 - 9.1. Provincial Updates to the Municipal Elections Act
- 10. Accounts for Payment
 - 10.1. Accounts for Payment September 24, 2024

11. By-Laws and Agreements								
12. Notice of Motions								
12.1. Tires at the Landfill								
13. Closed Session								
13.1. Call to Order								
13.2. Approval of Closed Meeting Agenda								
13.3. Disclosure of Pecuniary Interest								
13.4. Approval of Minutes								
13.4.1. September 3rd, 2024 - Township of Billings Closed Meeting Minutes								
13.5. Staff Reports								
13.5.1. Confidential Report								
13.5.2. Confidential Report								
13.5.3. Confidential Report								
13.6. Adjournment								
14. Report out of Closed Session								
15. Confirmatory By-Law								
16. Adjournment								
16.1. Motion to Adjourn								



The Corporation of the Township of Billings Council Meeting Minutes September 17, 2024 07:00 PM Kagawong Park Centre

Council

David Hillyard, Deputy Mayor Ian Anderson, Councillor Vince Grogan, Councillor Michael Hunt, Councillor

Staff

Veronique Dion, CAO/Clerk
Tiana Mills, Deputy Clerk
Todd Gordon, Municipal Project Manager
Arthur Moran, By-Law, H&S, Emerg Mgmt
Harmony Hancock, Treasurer

Call to Order

Deputy Mayor David Hillyard called the meeting to order at 7:00pm.

In recognition of Truth and Reconciliation Day on September 30th, 2024 as we begin our gathering, we are reminded that the Township of Billings is situated on treaty land that is steeped in the rich Indigenous history of the Ojibwe, Odawa, and Potawatomi peoples. Mnidoo Mnising/Manitoulin Island is sacred to the Anishinaabe people and stewardship of the land and water that surrounds us is the thing that binds us.

Today and always the Township of Billings acknowledges the United Chiefs and Councils of Mnidoo Mnising (UCCMM) on whose traditional territory outlined by the 1862 Manitoulin Island Treaties and the unceded territory of Wiikwemkoong make up the land that is called Manitoulin Island and where we all call home.

It is the responsibility of the Township of Billings to recognize the 1836 Manitouwaning Treaty, the 1850 Robinson Huron Treaty, and the 1862 Manitoulin Treaty, and to recognize the need to build

reciprocal relationship with the Indigenous peoples that have lived and continue to live here in order to build upon our shared history.

2. Approval of Agenda

2.1. Confirm approval of the agenda

Motion Number 2024-349 Moved By Anderson Seconded By Hunt

THAT the Township of Billings Council hereby approves the agenda as presented.

Carried

3. Disclosure of Pecuniary Interest

3.1. Michael Hunt - HS-2024-09-07 No Parking Signage

Councillor Michael Hunt declared a potential indirect pecuniary interest on Agenda Item No. 7.1 Item Title: HS-2024-09-07 No Parking Signage for the following reason: I am the Postmaster where the signs are to be installed.

4. Adoption of Minutes

4.1. Regular Council Meeting Minutes - September 3, 2024

Motion Number 2024-350

Moved By Anderson

Seconded By Grogan

THAT the September 3rd, 2024 Regular Meeting of Council be adopted as presented.

Carried

5. Delegation

Motion Number 2024-351

Moved By Anderson

Seconded By Hunt

THAT the Township of Billings Council hereby receives the 2023 Township of Billings Audited Financial Statements AND directs staff to post the consolidated statements on the municipal website.

Carried

6. Committee Reports and Minutes

No reports were provided.

7. Staff Reports

7.1. HS-2024-09-07 No Parking Signage

Michael Hunt, Councillor declared a conflict on this item. (Councillor Michael Hunt declared a potential indirect pecuniary interest on Agenda Item No. 7.1 Item Title: HS-2024-09-07 No Parking Signage for the following reason: I am the Postmaster where the signs are to be installed.)

Motion Number 2024-352

Moved By Grogan

Seconded By Anderson

THAT the Township of Billings Council hereby received for information report HS-2024-09-07 AND directs staff to install appropriate signage on the paved shoulder portion of the road on Main Street in front of the Kagawong Post Office.

Carried

7.2. EM-2024-09-03 Emergency Response Plan

Motion Number 2024-253

Moved By Grogan

Seconded By Anderson

THAT the Township of Billings Council hereby approves Report EM-2024-09-03 AND approves the proposed edits to the existing Emergency Response Plan AND FURTHER authorizes the appropriate By-Law coming forward.

Carried

7.3. CAO-2024-09-12 Internet Service for the Township Office

Motion Number 2024-254

Moved By Anderson

Seconded By Hunt

THAT the Township of Billings Council hereby receives for information report CAO-2024-09-12 AND directs staff to obtain Starlink internet services for the Township Office.

8. Correspondence Requiring Direction

8.1. Military Service Recognition Book Donation Request

Motion Number 2024-255

Moved By Hunt

Seconded By Grogan

THAT the Township of Billings Council hereby receives the Military Service Recognition Book donation request and directs staff to purchase a 1/10 Page Ad in the amount of \$349.56 + HST AND FURTHER directs staff to support this cause going forward.

Carried

9. Information

9.1. Sustainable Funding for OPP Small Rural MunicipalitiesMotion Number 2024-256 Moved By Anderson

Seconded By Hunt

THAT the Township of Billings Council hereby receives for information all items listed in Section 9 and directs staff to write a letter of support for the Sustainable Funding for OPP Small Rural Municipalities.

Carried

10. Accounts for Payment

10.1. Accounts for Payment - September 10, 2024

Motion Number 2024-257

Moved By Hunt

Seconded By Grogan

THAT the Township of Billings Council hereby ratifies and confirms the accounts for payment dated September 10, 2024.

Carried

11. By-Laws and Agreements

11.1. 2024-51 Authorize Debenture for the Old Mill Road Bridge

Motion Number 2024-258

Moved By Anderson

Seconded By Hunt

THAT By-Law 2024-51 Being the by-law to authorize the borrowing for the Old Mill Road Bridge be read a first, second, third time and finally passed this 17th day of September, 2024.

Carried

11.2. 2024-52 Emergency Response Program and Plan

Motion Number 2024-259

Moved By Grogan

Seconded By Hunt

THAT By-Law 2024-52 Being the by-law to adopt an Emergency Response Program and Plan be read a first, second, third time and finally passed this 17th day of September, 2024.

Carried

12. Notice of Motions

12.1. V. Grogan - Island Wide Waste Management

During the September 3rd, 2024 Regular Council Meeting, Councillor Grogan proposed a notice of motion to discuss the opportunity of the Island Wide Waste Management Committee holding a meeting to be hosted and funded by the Township of Billings at the Park Centre.

Council will be given the opportunity to discuss and propose a motion directing staff to action accordingly.

Motion Number 2024-260

Moved By Grogan

Seconded By Anderson

THAT the Council for the Township of Billings hereby directs staff to host a luncheon for all Manitoulin Island Municipalities Administration, Public Works Representatives and Mayors.

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Councillor Grogan would like to discuss no tires being allowed at the Billings Landfill.

13. Closed Session

14. Confirmatory By-Law

Motion Number 2024-261

Moved By Hunt

Seconded By Grogan

THAT By-Law No. 2024-53 being the September 17th, 2024 Confirmatory By-Law be read a first, second, third time and finally passed this 17th day of September, 2024.

Carried

15. Adjournment

15.1. Motion to Adjourn

Motion Number 2024-262

Moved By Hunt

Seconded By Anderson

THAT the Township of Billings Council hereby adjourns at 8:11 p.m.

Carried

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Mayor – Bryan Barker	
CAO/Clerk – Veronique Dion	_



Delegation Request Form

The Clerk of the Township of Billings reserves the right to refuse or defer any delegation at any time. Delegations appear strictly for information purposes only. Any discussion or decision will be at the discretion of Council. Material provided will be uploaded to the public agenda subject to rules of procedure.

Request for Delegation (please print)	
\square on my own behalf; or	
on behalf of a group / organization / association, if / association below.	so, please state name of group/ organization
Name(s) of Group/ Organization / Association: Segal C	onstruction
Name(s) of Speaker(s) (Maximum 2): Daniel Segal, By	ron Maclean
Subject / Title of Presentation: Proposal for municipal of	construction of attainable housing
Please describe below, the subject matter of the delegate the deployment of 5-10 prefabricated (2 bedroom 1 bathroom	
Equipment Required (projector, screen, laptop): Zoom	
Contact Information (will not be posted publicly):	
Address:	
Telephone: _ Ema	l:
Signature: Daniel Segal	

As stated in the Live Stream Council Meeting Policy (By-Law 2024-32), any attendee who is invited to speak will be recorded and their voice and image will form part of the live stream.

Should an attendee invited to speak not wish to be recorded, they are required to make this request known to the CAO/Clerk prior to the meeting commencing. This request can be made either by emailing the Clerk a minimum of 4 hours prior to the meeting. Under special circumstances the Chair in consultation with the CAO/Clerk may waive the requirement and consider the request prior to the commencement of the meeting.

Completed and signed requests and all presentation documentation must be delivered to the Clerk by 4:00 p.m. on the Wednesday preceding the meeting of Council for which your delegation is scheduled. Delegations will be confirmed by the Clerk by email.

In accordance with the Municipal Freedom of Information and Privacy Act, personal information is collected under the authority of the Municipal Act, 2001 and will only be used for the purpose of reviewing delegation requests. Questions about the collection of the personal information may be addressed to the Deputy Clerk at the Township of Billings, 15 Old Mill Road, Kagawong ON (705) 282-2611 tmills@billingstwp.ca

Resolution on Supporting the Municipal Development of Attainable Housing in [Municipality Name]

Whereas, [Municipality Name] faces a significant need for attainable housing to address the housing crisis and ensure that new residents have access to quality housing options;

Whereas, higher interest rates since 2022 have severely curtailed private development of new residential housing, making it imperative for the municipality to leverage available funding, including but not limited to federal and provincial funding, and to consider the issuance of municipal bonds in the capital markets to finance housing projects with a positive net present value;

Whereas, municipalities have a very low cost of capital relative to private builders, allowing them to undertake such projects more efficiently and at a lower financial burden;

Whereas, in order to make housing development financially viable, it is necessary to obtain Minister's Zoning Orders (MZOs) under Section 47 of the Planning Act, ensuring that housing projects are not delayed by excessive bureaucratic processes and can proceed efficiently;

Whereas, Therefore, be it resolved, that [Municipality Name] may entertain development proposals submitted by private developers to submit applications to both federal and provincial funding bodies such as, but not limited to, CMHC's Housing Accelerator Fund and Green Municipal Fund the governments. Interested proposals must ensure that housing developments are aligned with local needs, support economic growth, and contribute to the long-term sustainability of the community.

Be it further resolved, that [Municipality Name] advocates for the use of Minister's Zoning Orders (MZOs) under Section 47 of the Planning Act, where necessary, to expedite the development of attainable housing and ensure that these projects can proceed without undue delays.

Be it further resolved, that following the completion of housing developments, [Municipality Name] will have the following options for managing the properties:

- 1. The municipality may transfer the development to a local non-profit organization or other entities focused on providing affordable housing.
- 2. The municipality may issue a tender to a property management company to manage and operate the housing units.
- 3. The municipal government may sell the housing units publicly on the Multiple Listing Service (MLS) to recoup costs and reinvest in future housing projects.

Be it further resolved, that this resolution be forwarded to the following entities for consideration and action:

The provincial Ministry of Municipal Affairs and Housing

- The provincial Ministry of Economic Development, Job Creation, and Trade
- The provincial Ministry of Infrastructure
- The provincial Ministry of Finance
- The provincial Ministry of Labour, Immigration, Training, and Skills Development
- The federal Minister of Housing, Infrastructure, and Communities
- Local MP(s)
- Local MPP(s)

This version integrates the clause about the low cost of capital for municipalities, strengthening the argument for their active role in developing attainable housing.



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Fax/Télécopieur: (705) 862-7850 http://www.msdsb.net

2024 Second Quarter Activity Report September 19, 2024

The following is the most recent consolidated Quarterly Report that the DSB will be sending to member municipalities and posting on the public website. Expect Quarterly Reports in February, May, September, and November of each year.

The program statistics are provided separately and updated monthly. They are available on the website by clicking the following link: <u>Monthly Program Statistics</u>

CAO Overview

The DSB 2024 Second Quarter (Unaudited) Financial Report was presented to the Board and projects a year-end municipal **surplus of \$405,254**. Ontario Works and Children's Services are forecasted to be on budget. Community Housing is forecasted to be under budget by \$397,326. Paramedic Services is forecasted to be over budget by \$598,326. Interest revenue on non-reserve accounts is forecasted to be \$606,254 more than budgeted.

The DSB quarterly financial reports are available on the DSB website by clicking the following link: Quarterly Financial Reports

Paramedic Services

Recruitment and Retention

An initial level assessment of staff attrition and recruitment in Paramedic Services over the past 4 years was conducted and the results were taken to the Board. Staff have initiated the development of a recruitment and retention strategy.

Meetings with College Boreal, CTS, and Cambrian College were held to discuss potential strategies for recruitment of paramedics. The outcomes from these meetings will help inform the development of a plan to recruit staff.

The posting for external Paramedics remains in place and in the second quarter one Paramedic was onboarded and is operational.

The national recruitment process for a Chief of Paramedic Services was started in the second quarter and staff have been working through this process.

Patient Records Solution

Staff continue to work with PreHos, the vendor selected to provide a patient records system for Paramedic Services. The product went live in late February and staff regularly meet with the vendor to identify and resolve a significant number of system challenges. The vendor continues to commit to resolving all outstanding issues, however, the process for solution prioritization will mean that all the outstanding issues will not be resolved in the short term.

The PreHos booking platform for the Patient transfer Service went live in late February and was found to be lacking on several fronts. Staff met several times with the vendor to discuss issues identified by both internal personnel and stakeholders. In late June, the decision was made to migrate from the PreHos PTS booking product back to the Platinum system that had been in place since 2017. The transition is set to take place on August 1, 2024.

Staffing Challenges

Paramedic Services continues to be challenged with capacity to address absences, both incidental and occupational/nonoccupational. The use of overtime to ensure the deployment of resources when the availability of part-time staff does not meet the operational requirement is necessary. These numbers continue to remain high; however, strategies to predict protracted absences are being assessed as part of the organizational review.

Fleet

Staff met with the ambulance fleet vendor in the second quarter to review the delivery cycle, backlogged delivery that remains in place following supply chain challenges from COVID-19, and potential solutions to expedite Manitoulin-Sudbury DSB product delivery. The vendor has committed to having backlogged vehicles delivered by late third quarter/fourth quarter and to spread the 2025 deliveries across the year to allow for some new products to arrive in the spring.

Staff completed an analysis of patient transportation dynamics to explore the option of migration to single-stretcher ambulances. Manitoulin-Sudbury DSB is one of only a few paramedic services utilizing dual cot configuration in the fleet. The analysis supports the continued use of dual cot configuration, something that speaks to the response and transportation distances and of the capacity for immediate secondary response across the districts.

Equipment

In the second quarter, the service received 3 CPR Assistive devices through the 2023/24 budget in Wikwemikong. The devices are being rolled out as a pilot study to determine if there is a demonstrative benefit that would support the rollout of these devices across Paramedic Services. Staff will bring forward the results and a potential plan during the fourth quarter/budget deliberations.

Community Paramedicine

Staff continue to work with internal/external stakeholders and the Community Paramedicine team to evolve the CP program in a manner that supports the communities and the patient population.

A review of the CP deployment model was completed in the second quarter and staff are rolling out a plan to position CP staff with considering geographic opportunities. The delayed deployment of an additional CP fleet due to backlogged technology has proved challenging; however, the operationalization of the 3 new vehicles in the third quarter is expected.

The CP program has received funding for a pilot patient navigator position in collaboration with Espanola General Hospital went live in the second quarter and staff continue to assess this program to determine success. The position through MHC continues to remain elusive as the hospital holds the position posting open.

Finally, the CP program has completed education in wound care and phlebotomy and is rolling out the capacity in the third quarter.

Non-Urgent Patient Transportation Service

The PTS system for transportation of nonurgent clients continues to operate in collaboration with the Emergency Health Services Branch of the MOH and both Espanola General Hospital and Manitoulin Health Centre. This model for patient transportation continues to address the impact of increasing 9-1-1 call volumes on the Paramedic Services system.

System Design

An organizational review has been initiated in the second quarter of 2024. This review will explore the entirety of the system design and delivery and will develop opportunities for success in service provision that can be implemented over time. The review is set to be completed early in the fourth quarter of 2024.

Children's Services

The Manitoulin-Sudbury District currently has 22 licensed childcare locations: 14 center-based sites in schools, 1 center-based community location, and 7 licensed home childcare sites. In the second quarter, 575 children were enrolled in childcare services, with 515 paying full fees and 80 receiving subsidies. This is a 6% decrease from the previous quarter and a 3% decrease from the same period last year. Special Needs Resourcing supported an average of 54 children, from infants to school-age, during the second quarter, showing a 20% increase compared to the same quarter last year.

In the second quarter, EarlyON programs welcomed 2704 visits from parents/caregivers and children. These services are provided through various means including mobile, virtual, and outdoor programs. This represents a 4% increase from the same quarter last year.

Child Care Data

The Board approved an <u>issue report</u> in April which provided an overview of Ontario's Early Years and Child Care Annual Report 2023 and 2023 Licensed Child Care Data Profiles. Historically the DSB has provided verbal updates to the Board, this year the staff prepared an issue report which provided a more comprehensive overview of the provincial and local data

Canda-wide Early Learning and Child Care Funding Approach

A <u>memo</u> from the Ministry on May 7th provided an update on the new funding approach timelines. To give municipal partners and licensees sufficient preparation time and align with municipal fiscal planning, the Ministry has decided to extend the current approach until December 31, 2024. A new cost-based CWELCC funding approach will be introduced in January 2025, with detailed information to follow to ensure smooth implementation.

Ontario Works

In the second quarter of 2024, the Ontario Works/Temporary Care Caseload average was 492. Compared to last year at this time, the caseload has decreased by 3%.

Centralized Intake

140 applications were received by the Manitoulin-Sudbury District Services Board (DSB) in the second quarter of 2024. Of the 140 applications received, 42 were auto granted by the Intake and Benefits Administration Unit (IBAU), 46 were referred by the IBAU to the Manitoulin-Sudbury DSB for processing, and 19 were transfers from another Ontario Works (OW) office. The remaining 33 applications were processed at the local office rather than being referred to Centralized Intake as certain applications are not yet being processed by the IBAU, or there were extenuating circumstances that warranted an expedited approach to granting assistance.

The initial goal of Centralized Intake was to have 70% of applications completed by the IBAU. During the second quarter of 2024, 30% of applications were completed by the IBAU.

Employment Ontario

The Employment Services (ES), Youth Job Connect (YJC), and Youth Job Connect Summer (YJCS) programs continue to be advertised and delivered from the Chapleau office.

From April to June 2024:

- There were six new registrations for Employment Services.
- There were two new registrations for the YJC program.
- Training was completed for YJCS in June. There are eight students registered for the Youth Job Connection Summer program.
- 606 people attended the resource centre including four employers.

Quality Assurance

Throughout the second quarter of 2024, the Quality Assurance Coordinator for the Child Care and Ontario Works programs engaged with community partners to develop a comprehensive land acknowledgment statement that aligned with Manitoulin-Sudbury DSB values.

The QA Coordinator facilitated breakout sessions for the Manitoulin-Sudbury Network for Children and Families (MSNCF) strategic plan and completed a review of the MSNCF Terms of Reference. Additionally, the QA Coordinator hosted meetings and presentations, promoting cohesive decision-making among pedagogical leads, directors, and supervisors within respective childcare agencies.

Efforts to strengthen community ties included coordinating presentations by the Vulnerable Persons Registry and John Howard Society of Sudbury during regular internal team meetings and initiating a co-chair group for the Local Service Provider Network to enhance collaboration between the 4 regions within the district.

Emphasizing community engagement, the QA Coordinator planned and hosted an extensive all-staff development session in Espanola on May 28th-30th, featuring training by SickKids Learning Centre, which attracted participation from 49 community partners as well as Manitoulin-Sudbury DSB team members from the Integrated Human Services, Infrastructure, and Paramedic Services departments.

The QA Coordinator participated in Employment Services Transformation working group sessions to enhance community service during the upcoming transition phase. The QA Coordinator also engaged in continued partnership with the Infant and Early Years Mental Health team to advance planning for the Deep Dive Day scheduled for June 2025.

Lastly, active involvement in planning and hosting the Northern Ontario Service Deliverers Association AGM in Sudbury in June highlighted ongoing efforts to foster regional cooperation and leadership in the community services sector.

The Quality Assurance Coordinator for housing and homelessness continued to support foodbanks throughout the district through, facilitation of a partnership between Public Health and the Foodbanks. The QA has amended the reporting structure for the foodbanks to ensure the necessary data is being captured to better understand community need and support budget planning.

In addition to supporting partners in their efforts to address food security, the QA Coordinator continues to develop partnerships to support individuals without permanent housing through participation on the Housing Strategies Working Group. This group meets to discuss opportunities and develop strategies that will help to create housing opportunities for individuals who are homeless, marginally housed, struggling to pay rent, or wanting to move out on their own.

Staff are in the initial stages of private landlord engagement along with community partners who have experience working with private landlords to ensure all housing opportunities are taken into consideration; the goal is to provide more robust housing options for individuals.

Presentations regarding the By Name List are ongoing, as well as requests for participation from our community partners and First Nation partners to help identify individuals without permanent housing in our communities. There are ongoing efforts to recruit front-line community partners to participate in biweekly Case Conferencing calls with the goal of identifying those without permanent housing and moving individuals through the housing process while supporting their immediate needs.

The QA has been focusing on ensuring participation from all the communities within our catchment area. As of June 30, 2024, there were a total of 50 households/61 individuals on the By Name List, 19 of whom identified as Indigenous, 22 individuals are in the LaCloche area, 29 on Manitoulin Island, 5 in Sudbury North, and 5 were from Sudbury East.

Furthermore, the QA Coordinator has been focused on staying connected with all Northern Communities participating in the BNL as our district will no longer be receiving support from the Improvement Advisors from Built for Zero as we are not a Reaching Home community.

The QA coordinators have also been reviewing internal procedures to streamline practices and create consistent processes for staff.

Community Housing

There were 634 applications at the end of the ^{2nd} quarter. The applicant breakdown is as follows:

1 Bedroom	471	2 Bedroom	72
3 Bedroom	51	4 bedroom	40

Staff continue to identify and complete the application process with eligible applicants for the DSS program. All applicants receiving the benefit are deemed housed. As of the end of this quarter, there were 226 active DSS recipients. At the end of Q1 of this year there were 236 recipients and at this time last year, there were 199.

Per DSB Policy, every effort is being made where the waitlist allows us to mix the Community Housing Buildings with RGI, Affordable, and Market Rent Tenants. As of June 30, 2024, we have successfully housed 23 market rent tenants and 136 affordable rent tenants. This represents 8% and 45% of our portfolio respectively and shows a decrease of 5 Market rents and 9 affordable rents from last quarter. Comparably, at this time last year, we reported 11 market rent tenants (4%) and 106 affordable (39%)

As of the end of the 2nd quarter of 2024, 224/295 of the portfolio's units are designated as Smoke-free. This represents 76% of the full portfolio currently. Units are designated as turnover occurs or should the current resident choose.

Canadian Mental Health Association Annual Report

The Canadian Mental Health Association <u>annual report</u> indicated that 2023-2024 was a steady year, there were no new pandemic-related restrictions, and most activities resumed fully.

With the rising cost of living, food insecurity continued to be a major challenge for many tenants. The Housing Case Managers took advantage of Second Harvest Food Rescue to support in alleviating some of the food insecurities among tenants in the Manitoulin and LaCloche buildings.

The Neighbourhood Model at 66 Robinson St. in Little Current continues to thrive as a collaborative, team approach to providing services to seniors. With the Manitoulin-Sudbury DSB, VON, March of Dimes, and the Canadian Mental Health Association – Sudbury/Manitoulin (CMHA-S/M) as partners, wrap-around supports are coordinated to help senior residents maintain their health and access to the community.

Other community partnerships the HCM'S engaged in throughout this year are with Community Living, adult protective services, OPP, the Rapid Access to Addiction clinic, Public Health and Mobile Crisis Response Team. Efforts from all community partners are designed to assist our residents in achieving the best possible outcomes for each individual circumstance that may arise.

Key Highlights of Services

- 18 individuals were supported with case management services.
- 100% of the "at risk" tenancies, who accepted services, were preserved, or are working towards a resolution.
- 588 brief services were offered.

Future direction for the program involves continuing recruitment for Sudbury East. CMHA-S/M has experienced several challenges with regards to recruitment and the position has been vacant since November 2022. In May 2024, it was agreed that a position would be hired at the home location of Sudbury with travel to Sudbury East three (3) days per week to provide support within each building in Warren, Noëlville, and St. Charles. Virtual support will also be available.

In the fall of 2023, a pilot was launched to directly deliver Housing Case Management support in Sudbury North due to ongoing recruitment and retention challenges experienced by CMHA. A verbal update was provided to the board in May with more information to follow in the fall of 2024.

Homelessness Prevention Program Investment Plan

Staff received confirmation from the Ministry of Municipal Affairs and Housing in May that our Homelessness Prevention Program (HPP) allocation will be provided as expected for the 2024-25 year. The Manitoulin-Sudbury District Services Board's HPP allocation is \$2, 537, 600 annually. In June the board approved the Homelessness Prevention Program Investment Plan Issue Report.

The HPP aims to address chronic homelessness across the province and flexibility to support a wide range of homelessness prevention and supportive housing initiatives. Our HPP will continue to provide services and activities to prioritize keeping seniors in their own homes. We will continue to provide a direct shelter subsidy to assist those on our Community Housing waitlist to maintain their current accommodation without accessing their basic needs.

HPP will continue to be used to support alternative emergency shelter solutions including short-term stays and transportation to meet immediate needs. HPP is used to alleviate pressures experienced by not having a formal emergency shelter in the district.

HPP funding will be used to continue to offer support in response to ever-changing community needs including rent supplements, food security, and short-term housing assistance.

A portion of HPP funding will be used to continue construction of our supportive housing building in Espanola. Capital funding in the amount of \$1,692,600 will be used for 3 of the 10 accessible units within the new building

National Housing Strategy

Further to <u>communication</u> received in March of this year, on May 28th, 2024, the Federal & Provincial Governments released a <u>Joint Statement</u> indicating that they have reached an agreement on a revised action plan for Ontario that will now unlock the \$357 Million of federal funding previously on hold under the National Housing Strategy. The Government will be proceeding with COCHI, OPHI, and COHB benefits for this fiscal year.

On June 17th, 2024, we received <u>correspondence</u> from Minister Calandra confirming funding allocations for the COCHI & OPHI programs. The funding allocations are unchanged, and we will be moving forward with scheduled projects. Details on the COHB allocations have yet to be confirmed. The province has confirmed its commitment to expand rental-assisted units by 19,660 by March 21, 2028. As of March 31, 2025, a total of 8,644 units, or 44% of this target has been met.

2024 Housing and Homelessness Plan

Services managers are required to complete a review of local housing and homelessness plans at least once every five years. This review is in addition to the report we provide annually on progress in our current Housing and Homelessness plan. Our last review was completed in 2019, which means a review is needed in 2024.

In March of this year, we received notification from the Ministry of Municipal Affairs and Housing that the ministry is in the process of reviewing current policy and direction that is intended to guide local plan to ensure alignment with government priorities. The ministry has requested that services managers do not complete the review of local plans until further communication from the ministry is received. To date, we have not received any further direction in this regard. Staff will be preparing our annual housing and homelessness update this summer and will present this to the Board in September.

Projects Underway Capital Projects with Housing Services Corporation

The replacement of Makeup Air units on Manitoulin Island (Little Current, Manitowaning, and Gore Bay) has been completed.

Design work for Accessibility repairs at 60 Barber Street in Espanola has been completed by the Consultant and is under review. The project costs are estimated far above the budgeted amounts resulting in staff reviewing the most necessary components before going to tender.

The Gogama Paramedic Services base, as shared with the board in April, saw a large-scale project commence for the abatement of asbestos throughout the property. After much discussion around the logistics, it was decided to have all phases done simultaneously and remove the crew offsite until completion. The estimated time for this project is 8 weeks.

Design work for the 70 Barber Street Makeup Air unit is completed and the tender has been posted.

Little Current and Mindemoya Community Housing Properties have been scoped for replacement windows (LC & Mindemoya). Project cost estimates are over budget and are under review.

Work Orders

During the 2nd quarter, a total of 418 work orders were generated: 303 for Community Housing, 18 for Administration Offices, and 97 for Paramedic Services. There was a total of 81 Work Orders closed or resolved during that time. There were 9 work orders for unit turnovers: 1 for a family unit and 8 for apartments. Work orders are closed if the work is done in-house, or when the invoice is paid from an outside source. Staff notes a 40% increase in the number of work orders logged from the same quarter in 2023.

Lori Clark

Chief Administrative Officer (A)
Manitoulin-Sudbury District Services Board

Phone: 705-222-4440

E mail: lori.clark@msdsb.net Website: www.msdsb.net

						Manitoulin-S	Sudb	ury DSB						
					2n	d Quarter Re	oort	(Unaudited)						
						AS AT 6	6/30/2024							
		T									<u> </u>			
		<u>Total Gro</u>	SS E	<u> Budget</u>						<u>Municipal</u>	<u>Sha</u>	re Budget		
	YTD	YTD	ΟV	ER(UNDER)		ANNUAL	YTD		MUNICIPAL		N	MUNICIPAL		Over(Under)
	ACTUAL	BUDGET		BUDGET		BUDGET	N	IUNICIPAL		SHARE		SHARE		Budget
									F	ORECAST		BUDGET		Forecast
Ontario Works	\$ 1,143,137	\$ 1,144,036	\$	(899)	\$	2,327,365	\$	522,831	\$	1,043,031	\$	1,043,031	\$	_
100% Funded	\$ 3,846,205	\$ 3,986,832	\$	(140,627)	\$	7,973,088	Ť	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		75 5755		
Child Care	\$ 6,014,358	\$ 6,271,926	\$	(257,568)	\$	12,563,632	\$	334,019	\$	668,038	\$	668,038	\$	-
Community Housing	\$ 1,080,137	\$ 1,352,810	\$	(272,673)	\$	2,665,115	\$	1,080,137	\$	2,267,789	\$	2,665,115	\$	(397,326)
100% Funded	\$ 278,183	\$ 241,123	\$	37,060	\$	482,246								
Paramedic Services	\$ 8,818,168	\$ 8,757,350	\$	60,818	\$	17,243,571	\$	3,822,409	\$	7,972,973	\$	7,374,647	\$	598,326
Wiikwemikong, PTS, CP	\$ 362,850	\$ 1,202,938	\$	(840,088)	\$	5,276,116	\$	31,680	\$	127,345	\$	127,345	\$	-
TOTAL EXPENSES	\$ 21,543,038	\$ 22,957,015	\$	(1,413,976)	\$	48,531,133	\$	5,791,077	\$	12,079,175	\$	11,878,176	\$	201,000
Interest Revenue	\$ (452,709)	\$ (49,582)	\$	(403,127)	\$	(99,163)	\$	(452,709)	\$	(705,417)	\$	(99,163)	\$	(606,254)
TOTAL EXPENSES	\$ 21,090,330	\$ 22,907,433	\$	(1,817,103)	\$	48,431,970	\$	5,338,368	\$	11,373,758	\$	11,779,013	\$	(405,254)

budget - Rental Revenues are forecasted to be (\$85,249) more than budgeted Community - Community - Community - Community - Housing - Community - Co		NET Municipal Variance	Explanation of Unaudited Municipal Share- AS OF June 30, 2024
Community Housing (397,326) (39		\$ -	Municipal share of administration expenses is forecasted to be on budget.
Federal Funding is forecasted to be on budget. Direct operated rev & exp and program support allocation is forecasted to be (\$261,543) unbudget - Rental Revenues are forecasted to be (\$85,249) more than budgeted - Rental Revenues are forecasted to be (\$26,528) more than budget due to: utilities (\$69,674) under budget, salaries & benefits \$16,685 over budget due to: utilities (\$69,674) under budget \$28,609, other admin expenses over budget \$28,609, other admin expenses over budget \$22,858 bad debt expense over budget \$28,609, other admin expenses over budget \$22,858 bad debt expense over budget \$20,0710 - Program Support Allocation is forecasted to be (\$149,766) under budget. Rent Supplement program is forecasted to be (\$69,045) under budget. Non-Profit, Rent Supp, and Urban Native expenses are forecasted to be (\$66,738) under budget. Paramedic Services municipal share is forecasted to be \$598,326 over budget. The MOHLTC funding is forecasted to be on budget with TWOMO portion of MOH funding allocation for 2024 not received to date but estimated as budgeted. Medic Staffing and Benefits is forecasted to be over budget by \$299,617. Admin Staffing and Benefits is forecasted to be over budget by \$88,561 Non Wages are forecasted to be over budget by \$210,117 Other Transportation & Communication is forecasted to be (\$78,41) under budget operational Staffing Travel and meals are forecasted to be over budget by \$3,640 Legal and Arbitration Costs are forecasted to be over budget by \$70,837 Program Support is forecasted to be \$42,759) under budget Vehicle repairs and maintenance are forecasted to be over budget by \$70,895. Building repairs and maintenance are forecasted to be over budget by \$70,895. Building repairs and maintenance are forecasted to be \$7,815 over budget Mal Practice Liability Insurance is forecasted to be \$8,7815 over budget Supplies are forecasted to be \$35,296 over budget. Patient Transfer Service Municipal share is forecasted to be on budget which results in a municipal surplus.		\$ -	Municipal share of Child Care expenses are forecasted to be on budget.
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municipal surplus.	Interest	\$ (606.254)	
\$ (405.25A)	Revenue	ψ (606,∠54)	municipal surplus.
B (4117 / 741		\$ (405,254)	



COUNCIL REPORT

Department: Protective Services

Date: October 1, 2024

Report Number: EM-2024-10-04

File: Emergency Management Quarterly Report

Recommendation: THAT the Township of Billings Council hereby receives for information Report

EM-2024-10-04.

Background:

Listed are the EM activities that have taken place since EM report EM-2024-07-01.

Discussion:

- 1. Listed below is a recap of the required training and table top exercise that was held on September 19, 2024.
 - All but 1 member of the group was present, there were 3 visiting CEMC's, and 1Field
 Officer from EMO present.
 - All members successfully completed the required EM review.
 - All members received training in the IMS roles and responsibilities, IMS documents and the IMS planning cycle.
 - All members took part in table top exercise that had a simulated emergency event occurring in the Township (tornado) which had members focused on completing an Incident Action Plan for an operational cycle.
- 2. Upcoming events for the next quarter:
 - review of the Township's emergency communications equipment.
 - completion of Township evacuation plan.
 - submission for emergency preparedness grant.
 - EMPC/MECG quarterly meeting.

Financial Impacts:

There are no financial impacts or budget implications associated with this report.

Alignment to Strategic Plan:

Community Wellbeing: Ensure safety and security.

Alignment to the CEEP:

No direct alignment.



Respectfully Submitted By:

Arthur Moran, Community Emergency Management Coordinator (CEMC)

Reviewed By:

Tiana Mills, Deputy Clerk



COUNCIL REPORT

Department: Protective Services

Date: October 1, 2024

Report Number: BE-2024-10-04

File: By-Law Enforcement Bi-Monthly Report

Recommendation: THAT the Township of Billings Council hereby receives for information, Report

Number BE-2024-10-01.

Background: Click or tap here to enter description text.

To update Council on occurrences involving Bylaw Enforcement for the period of June, July, August, September.

Discussion:

Listed below is an update of the bylaw activities since Bylaw Report 2024-06-01

Туре	Number of Calls	Calls to Date	Complaints
By-Law Enforcement (Follow-up action	12	18	15
required i.e. site visit, letter, phone call)			
Short-term Rental Inquiries / Inspection	2	5	0
Recreational Trailer/Vehicles	2	2	0
Property Standards	3	11	2
Dog Control	5	7	7
Zoning By-Law	8	12	2
Noise	0	0	0
Parking/Traffic	1	2	1
Other (Open Air Burning)	1	1	0
Other (Road Access)	2	2	0
Other (Hunting in subdivision)	2	2	0
Other (Shoreline/MNRF)	2	2	2

Туре	Number of Permits	Permits to Date
Short Term Accommodation Rental	4	4
Backyard Chicken License	0	0
Trailer Permit	4	7

Financial Impacts:

The are no financial impacts from this report.

Alignment to Strategic Plan:

Ensure that Township provides a safe community.



Alignment to the CEEP:

There is no alignment to the CEEP.

Respectfully Submitted By:

Arthur Moran, Bylaw Enforcement Officer

Reviewed By:

Tiana Mills, Deputy Clerk



COUNCIL REPORT

Department: Administration

Date: October 1, 2024

Report Number: MPM-2024-10-15 **File:** Old Mill Rd. Bridge Project (6)

Recommendation: THAT the Township of Billings Council hereby receives for information

Report No. MPM-2024-10-15.

Background: Click or tap here to enter description text.

Major Service/Product Providers:

Engineering: EXP Services

General Contractor: MCA Construction Ltd. Helical Pile Sub-Contractor: Terra Torque Ltd. Bridge Manufacturer: Allsteel Fabrication Ltd.

<u>Timeline/Milestones:</u>

Design: August-November 2023

Construction Tender Process: December, 2023 – January 2024

Construction Contract Award: February 2024
Project Kick-Off: May 1st, 2024

Contract Substantial Completion: September 30th, 2024

Discussion:

Township staff participated in a "substantial completion" walk-through of the project with representatives from the general contractor and the project engineering firm on Friday, September 20th. At that time, one very minor deficiency was noted, and this will be rectified by the appropriate subcontractor. All parties were and are (at the time of this report) aware that a couple of minor details remain, notably line-painting, and the need to install some additional signage. All parties also agreed that the bicycle/pedestrian path delineators would be left uninstalled this year – given that winter maintenance season is not that far away – and that the delineators will be installed by Public Works in the spring of 2025.

Financial Impacts:

The project remains on budget:

• There have been 3 Construction Change Orders (CCOs) in the project to-date, totalling \$39,595.76. These have been covered within the contract contingency (\$113,905.66), leaving a remaining contingency, at the time of writing, of \$74,309.90.



- The standard 2% 1-year construction warranty applies to this project. Therefore, assuming no warranty work is required, this amount (approx. \$25,000) will be paid out in the autumn of 2025, and this will be appropriately dealt with in 2025 budget deliberations.
- The Infrastructure Ontario loan portion of the project was approved by by-law at the September 17th regular Meeting of Council (By-law # 2024-51)

Basic Project Cost/Funding Info

Project Funding and Overall Cost*									
NORDS** Funding \$ 384,000.00									
Infrastructure Ontario Loan	\$	425,000.00							
Reserves	\$	444,000.00							
Total Project \$ 1,253,000.00									
* Rounded to nearest \$1000									
** Northern Ontario Resource Development Subsidy Program									

Alignment to Strategic Plan:

Infrastructure – Objective: Ensure that current and future township assets are managed to be sustainable to meet our long-term needs.

Alignment to the CEEP:

No direct alignment to the CEEP.

Respectfully Submitted By:

Todd Gordon, MPM

Reviewed By:

Veronique Dion, CAO/Clerk



COUNCIL REPORT

Department: Administration

Date: October 1, 2024

Report Number: BP-2024-10-06

File: D12/D15 Oakes Cottages Zoning/Subdivision Applications – 732 Monument Road – Pre-

Consultation (2)

Recommendation: THAT Council receives report # BP-2024-10-06 for information.

Background: Click or tap here to enter description text.

In mid-2023, JBR Ventures made application to the Manitoulin Planning Board (MPB), through their agent TULLOCH, for a Draft Plan of Subdivision and associated Zoning By-Law amendment to facilitate the creation of a 15 lot Subdivision at 732 Monument Road (Oakes Cottages).

Various documents related to the applications were received by the MPB and the township, as appropriate, during the pre-public consultation application development stage. The township hired COBIDE Engineering (and planners) to review and provide advice on this documentation which included a hydrological report, servicing options statement (water and sewer), draft plan, and planning justification report.

COBIDE provided staff with a formal review statement of the documentation received to-date, and this was presented to Council on April 4th (Report # BP-2024-04-04) with the recommendation that COBIDE's review comment and requests for further information be forwarded to TULLOCH. This was acted on by staff.

Discussion:

On September 4th, 2024, Staff met virtually with representatives from TULLOCH, COBIDE and the planning board. Many of the recommendations from the COBIDE review were discussed, along with points about the interaction between any zoning amendment process (township lead) and subdivision approval process (MPM lead). Meeting participants also attempted to articulate and agree on next steps. Keeping in mind that the file is still at the pre-consultation or procedural stage points that staff want Council to be aware of include the following:

1. COBIDE indicated that they had some procedural concerns with some of the background and supporting studies conducted on behalf of the proponent and mentioned above in the background. This situation is made more challenging by the reality that much of this background research and reporting was performed by a third-party consulting engineering firm (not Tulloch), and that firm has subsequently experienced much restructuring. This means that there will likely be considerable delay in revisiting the



- studies. It is important to note that there is/was no glaring concern with any one study or aspect of the background work, but queries across several aspects.
- 2. As drafted, the subdivision will divide land that has on one portion of the overall parcel, various existing structures, septic beds, etc. Some of these infringe on the shoreline road allowance. While these issues are not insurmountable, they will present multiple non-conformance situations that will have to be addressed in the zoning amendment.
- 3. Initially, the plan proposed seasonal lots on private roads, but the proponent has shown willingness to develop year-round lots on year-round roads in-line with the Manitoulin Official Plan and Township of Billings policy. However, there needs to be more discussion regarding altering the plan from 2 access roads, with cul-de-sacs, to one through road, given that a through road is inherently easier to maintain, especially for winter maintenance.

As for next steps, Tulloch indicated that they would be speaking with their client regarding one or more outstanding issues, as well as reaching out to their third-party engineering consultant regarding the studies mentioned above. We do not expect the file to proceed to consultation stage until there is feedback from Tulloch.

Financial Impacts:

There are no financial impacts resulting from this report

Alignment to Strategic Plan:

Strategic Priority - Infrastructure: Ensure that current and future township assets are managed to be sustainable to meet our long-term needs

Alignment to the CEEP:

There is no direct alignment to the CEEP

Respectfully Submitted By:

Todd Gordon, MPM

Reviewed By:

Veronique Dion, CAO/Clerk



COUNCIL REPORT

Department: Administration

Date: October 1, 2024

Report Number: CAO-2024-10-13 File: Bridal Veil Falls Concerns

Attachment:

Recommendation: That Council hereby receives for information Report CAO-2024-10-13 AND FURTHER THAT Council provide direction to administration.

Background: Click or tap here to enter description text.

Bridal Veil Falls has become an area of negative attention following the discovery of a deceased turtle on its banks. The activities at the falls have become concerning with individuals bathing in the small pool at the base of the falls, disrupting habitat by creating dams and using soap and shampoo, using the river to relieve themselves, throwing litter in the river and along the banks and fishing in the river during restricted times.

This has sparked concerns from the community with letters and emails being received from as far as British Columbia, as well as online concerns where posts regarding the turtles have received hundreds of interactions including many concerns and some opinions on how to mitigate the risks posed to the ecosystem. Some of the options include the hiring of lifeguards and/or security guards to patrol the area, working with government agencies to introduce a park ranger coop program, to make Bridal Veil Falls and the Kagawong River a protected area, to install surveillance cameras, to remove the stairs leading down to the base of the falls, to fence off the area and close it to public completely, and, the most prevalent comment, to ban swimming in the Kagawong River.

Discussion:

The incident has shed some light on overtourism in sensitive areas such as the Kagawong River and the need to ensure certain areas are protected from the negative effects of human traffic. And the community is now faced with trying to find an acceptable solution which will protect the ecosystem but also take into consideration the positive and negative impacts of Tourism.

Simple options for Council to consider:

- Remove stairs to reduce the amount of visitors
- Rezone the area as a conservation area
- Pass a by-law for No Swimming in the Kagawong river and install signage



- Work with agencies to introduce a learning experience for visitors (habitat identification, importance of protecting species, species identification, etc)
- Introduce visual barriers in more sensitive areas to deter going into the river, i.e.



hhttps://www.cbc.ca/player/play/audio/9.6480081

ttps://www.cbc.ca/amp/1.7292590

https://northernontario.ctvnews.ca/will-officials-move-to-ban-swimming-at-manitoulin-island-s-iconic-bridal-veil-falls-1.7038990

Financial Impacts:

This is highly dependent on Council's direction; fencing and signage will likely be the biggest expense.

Alignment to Strategic Plan:

Protect and enhance our natural assets

Alignment to the CEEP:

N/A

Respectfully Submitted By:

Veronique Dion, CAO/Clerk

Reviewed By:

Veronique Dion, CAO/Clerk



OPERATIONAL PLAN

For the Kagawong Water Treatment Facility and Distribution System



This Operational Plan is designed for the exclusive use of the system(s) specified in this Operational Plan.

This Operational Plan has been developed with OCWA's operating practices in mind and utilizing OCWA personnel to implement it.

Any use which a third party makes of this Operational Plan, or any part thereof, or any reliance on or decisions made based on information within it, is the responsibility of such third parties. OCWA accepts no responsibility for damages, if any, suffered by any third party as a result of decisions made or actions taken based on this Operational Plan or any part thereof.

Any documents developed and owned by OCWA which are referred to in this Operational Plan (including, but not limited to, OCWA's QEMS documents, Standard Operating Procedures, policies and Facility Emergency Plans) remain the property of OCWA. Accordingly, these documents shall not be considered to form part of the Operational Plan belonging to the owner of a drinking-water system under Section 17 of the Safe Drinking Water Act, 2002.





Kagawong Drinking Water System

QEMS Doc: Issue Date: Pages: OP-ToC 18-Jul-18 1 of 1

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Kagawong Drinking Water System

QEMS Proc.: OP-01 Rev Date: 08-Aug-24 Rev No: 1 Pages: 1 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS)

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To document OCWA's Quality & Environmental Management System (QEMS). This Operational Plan defines and documents the QEMS for the *Kagawong Water Treatment Facility & Distribution System* operated by the Ontario Clean Water Agency (OCWA). It sets out OCWA's policies and procedures with respect to quality and environmental management in accordance with the requirements of the Province of Ontario's Drinking Water Quality Management Standard (DWQMS).

2. Definitions

Drinking Water Quality Management Standard (DWQMS) – has the same meaning as Quality Management Standard for Drinking Water Systems approved under section 21 of the Safe Drinking Water Act (SDWA).

Operational Plan – means the operational plan required by the Director's Direction.

Quality & Environmental Management System (QEMS) – is a system to:

- a) establish policy and objectives and to achieve those objectives; and
- b) direct and control an organization with regard to quality.

Ministry - means the Ontario government ministry responsible for the administration of the SDWA.

3. Procedure

- 3.1 The Kagawong Drinking Water System is owned by The Corporation of the Township of Billings. OCWA is the contracted operating authority for the Kagawong Water Treatment Facility & Distribution System.
- 3.2 OCWA's Quality & Environmental Management System (QEMS) is structured and documented with the purpose of:
 - 1. establishing policy and objectives with respect to the effective management and operation of water/wastewater facilities;
 - 2. understanding and controlling the risks associated with the facility's activities and processes;
 - 3. achieving continual improvement of the QEMS and the facility's performance.
- 3.3 The Operational Plan for the facility listed above fulfils the requirements of the MOECC's DWQMS. The 21 QEMS procedures within this Operational Plan align with the 21 elements of the DWQMS.

4. Related Documents

Ontario's Drinking Water Quality Management Standard, as amended from time to time All QEMS Procedures and Documents referenced in this Operational Plan



Kagawong Drinking Water System

QEMS Proc.: OP-01 Rev Date: 08-Aug-24 Rev No: 1

Pages:

2 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS)

Reviewed by: PCT Approved by: Operations Management

Date	Revision #	Reason for Revision
18-Jul-18	0	Procedure issued – Information within OP-01 was originally set out in the Main body of OCWA's Operational Plan (last revision # 11 dated 22-Jan-18). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Addition of new wording (s. 3.3) to clarify that the OCWA's Operational Plan now aligns with the 21 elements of the DWQMS.
08-Aug-24	1	Updated the definition of DWQMS, added definition of Ministry as the Ontario government ministry responsible for drinking water and environmental legislation to alleviate need for future revisions if/when the Ministry experiences name changes, added "as amended from time to time directly following reference to Ontario's DWQMS to point to the most current version of the document, removed watermark, removed reference to MOECC.



Kagawong Drinking Water System

QEMS Proc.: OP-02 Rev Date: 08-Aug-24

Rev No: 1 Pages: 1 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) POLICY

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To document a QEMS policy that provides the foundation for OCWA's Quality & Environmental Management System.

2. Definitions

Quality Management System Policy – means the policy described in element 2 developed for the subject system or subject systems

3. Procedure

3.1 The Ontario Clean Water Agency, its board of directors, officers and entire staff are committed to the principles and objectives set out in our QEMS policy.

OCWA's Policy is to:

- Deliver safe water and wastewater services that protect public health, the environment, and the sustainability of communities.
- Comply with applicable legislation and regulations.
- Promote client, consumer and stakeholder confidence through service excellence, effective communications and reporting.
- Train staff on their QEMS responsibilities.
- Maintain and continually improve the QEMS.

Originally issued as Environmental Policy on June 8, 1995 **Last revised, approved by OCWA's Board of Directors on April 4, 2024** (This policy is annually reviewed)

- 3.2 Our board of directors, officers and entire staff will act to ensure the implementation of this policy and will monitor progress of the Quality & Environmental Management System (QEMS).
- 3.3 OCWA's QEMS Policy is readily communicated and available to all OCWA personnel, through OCWA's intranet. The Owner and members of the public can access the policy through OCWA's public website (www.ocwa.com). A hardcopy of the QEMS Policy is posted as specified in the OP-05 Document and Records Control procedure.
- 3.4 Essential suppliers and service providers are advised of OCWA's QEMS policy as per the OP-13 Essential Supplies and Services procedure.



Kagawong Drinking Water System

QEMS Proc.: OP-02 Rev Date: 08-Aug-24

Rev No: 1 Pages: 2 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) POLICY

Reviewed by: PCT Approved by: Operations Management

3.5 Corporate compliance coordinates the annual review and approval of the QEMS policy by the board of directors and communicates the approval to all OCWA employees via an electronic communication.

3.6 The current version of the policy indicates the date of the last revision and that the policy is annually reviewed. Electronic and hard-copy documents that include the QEMS policy will only be required to be updated in years when the policy has been revised. A complete review/revision history of the QEMS policy (documenting the annual policy review and/or revision approval date) is accessible to all staff on OCWA's intranet and is available upon request for external stakeholders.

4. Related Documents

Current QEMS Policy QEMS Policy Revision History OP-05 Document and Records Control OP-13 Essential Supplies and Services

Date	Revision #	Reason for Revision
18-Jul-18	0	Procedure issued – Section 3.4, 3.5 and 3.6 were added to the information originally set out in the main body of OCWA's Operational Plan (last revision # 11 dated 22-Jan-18). New sections: Purpose, Definitions, Procedure, Related Documents and a separate Revision History. Minor revisions to wording in s. 3.3 to reference location of posted copy of the policy. Added sections on how annual policy review is conducted (s. 3.5 and s. 3.6) and reference to OP-13 ESS (s. 3.4). The full revision history for the QEMS policy is available on OCWA's intranet.
08-Aug-24	1	Updated the first bullet of the QEMS Policy (approved in 2016) to align with OCWA's updated Mission statement. s. 3.3 and 3.6 were updated to add information/clarify how to access the QEMS Policy and the Policy revision history document.



Kagawong Drinking Water System

QEMS Proc.: OP-03
Rev Date: 18-Jul-18
Rev No: 0
Pages: 1 of 2

COMMITMENT AND ENDORSEMENT

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To document the endorsement of the Operational Plan for the Kagawong Water Treatment Facility & Distribution System by OCWA's top management and The Corporation of the Township of Billings (owner) and to set out when re-endorsement would be required.

2. Definitions

Top Management – a person, persons or a group of people at the highest management level within an operating authority that makes decisions respecting the QMS and recommendations to the owner respecting the subject system or subject systems

3. Procedure

- 3.1 The Operational Plan is provided to OCWA top management and to the owner for endorsement. The signed written endorsement is presented in Appendix OP-03A. At a minimum, two members of top management must endorse the Operational Plan; however, the Operational Plan is made available to all members of top management in the specified document control location (refer to OP-05 Document and Records Control). Endorsement by OCWA's top management is represented by the senior operations manager and the regional hub manager.
- 3.2 Any major revision of the operational plan will be re-endorsed by OCWA top management and the owner. Major revisions include:
 - 1. a revision to OCWA's QEMS policy;
 - 2. a change to both owner representatives who endorsed the Operational Plan;
 - 3. following a municipal election cycle

Any other changes would be considered a minor change and would not require the Operational Plan to be re-endorsed.

4. Related Documents

OP-03A Signed Commitment and Endorsement OP-05 Document and Records Control



Kagawong Drinking Water System

QEMS Proc.: OP-03 Rev Date: 18-Jul-18 Rev No: 0 Pages: 2 of 2

COMMITMENT AND ENDORSEMENT

Reviewed by: PCT Approved by: Operations Management

Date	Revision #	Reason for Revision
18-Jul-18	0	Procedure issued – Information within OP-03 was originally set out in the main body of OCWA's Operational Plan (last revision 11 dated 22-Jan-18). Procedure provides information on who from Top Management endorses the Operational Plan (s. 3.1); when owner reendorsement is sought and 'criteria' as to what is considered a major revision to the Plan (s. 3.2). Element 3 of main body of OCWA's corporate template Operational Plan (last revised on 2011-12-13) was incorporated into Appendix OP-03A which also includes the Owner and Top Management sign-off section.



Kagawong Drinking Water System

QEMS Proc.: OP-04
Rev Date: 19-Jul-18
Rev No: 0
Pages: 1 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) REPRESENTATIVE

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To identify and describe the specific roles and responsibilities of the QEMS representative(s) for the *Kagawong Water Treatment Facility & Distribution System*.

2. Definitions

None

3. Procedure

- 3.1 The role of QEMS rep. for the *Kagawong Drinking Water System* is shared between the process and compliance technician (PCT) and the facility's operations management. The safety, process and compliance (SPC) manager will act as an alternate QEMS rep. when required.
- 3.2 Operations management is ultimately responsible for activities related to the operation of the drinking water system and for establishing and maintaining processes and procedures required for the overall administration of the facility's QEMS.
- 3.3 The QEMS Rep. is responsible for:
 - administering the QEMS for the Kagawong Drinking Water System by ensuring that processes and procedures needed for the facility's QEMS are established and maintained;
 - reporting to top management on the facility's QEMS performance and identifying opportunities for improvement;
 - ensuring that current versions of documents related to the QEMS are in use;
 - promoting awareness of the QEMS to all operations personnel; and
 - in conjunction with top management, ensuring that operations personnel are aware
 of all applicable legislative and regulatory requirements that pertain to their duties
 for the operation of the system.
- 3.4 A signed letter of appointment can be found in Appendices OP-04A and OP-04B

4. Related Documents

OP-04A Signed Letter of Appointment – Operations Management OP-04B Signed Letter of Appointment – PCT



Kagawong Drinking Water System

QEMS Proc.: OP-04
Rev Date: 19-Jul-18
Rev No: 0
Pages: 2 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) REPRESENTATIVE

Reviewed by: PCT Approved by: Operations Management

Date	Revision #	Reason for Revision
19-Jul-18	0	Procedure issued – Information within OP-04 was originally set out in the main body of OCWA's Operational Plan (last revision 11 dated 22-Jan-18). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Change to responsibilities: SPC Manager to act as alternate as required (s. 3.1); added wording to clarify shared responsibilities for Top Management and QEMS Representative to ensure operations personnel are aware of applicable legislative and regulatory requirements (s. 3.2).
	ı	



Management

QEMS Proc.: Rev Date:

OP-04A 25-Mar-22

Rev No: Pages:

1 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) REPRESENTATIVE

Reviewed by: PCT

Approved by: Sr. Operations Management

Quality Management System Representative

Letter of Appointment

The role of QEMS Representative is shared between the Senior Operations Manager and the Process & Compliance Technician (PCT).

The Manager's duties are specified as the following:

- Administer the QEMS by ensuring that processes and procedures needed for the facility's QEMS are established and maintained:
- Report to top management on the facility's QEMS performance and identify opportunities for improvement;
- Ensure that current versions of documents related to the QEMS are in use:
- Promote awareness of the QEMS to all operations personnel
- Ensure that operations personnel are aware of all applicable legislative and regulatory requirements that pertain to their duties for the operation of the system.
- Determine necessary action and assign resources in response to operational issues
- Ensure corporate and site-specific QEMS programs and procedures are implemented at his/her assigned facilities
- Ensure operational training is provided for their staff (in consultation with the SPC manager as required)
- Fulfill role of top management
- Manage the day-to-day operations and maintenance of his/her assigned facilities and supervise facility operational staff
- Report to the regional hub manager on facility operational performance

The Manager has been made aware of their role as a QEMS Representative within the DWQMS.

Senior Operations Manager

red Beauvais - Senior Operations Manager

Supt 23/2022

July, 15\2022

Date

QEMS.

© OCWA For internal use only Appointment of QEMS Rep

This document is considered uncontrolled when found outside designated document control locations



Management

QEMS Proc.: OP-04A
Rev Date: 25-Mar-22
Rev No: 2
Pages: 2 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) REPRESENTATIVE

Reviewed by: PCT	Approved by: Sr. Operations Management
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Date	Revision #	Reason for Revision
06-Jan-17	0	Document issued
05-Mar-21	1	Updated bullet points to match new roles listed elsewhere in the operational plan; added header; a few minor editing changes to fit wording on a single page.
25-Mar-22	2	Removed revision from bottom of page; added management, Fred Beauvais; added management title to header;



PCT

QEMS Proc.: OP-04B Rev Date: 11-May-23 Rev No: 2 Pages: 1 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) REPRESENTATIVE

Reviewed by: PCT Approved by: Sr. Operations Management

Quality Management System Representative

Letter of Appointment

The role of QEMS Representative is shared between the Senior Operations Manager and the Process & Compliance Technician (PCT).

The PCT's duties are specified as the following:

- Administer the QEMS by ensuring that processes and procedures needed for the facility's QEMS are established and maintained;
- Report to top management on the facility's QEMS performance and identify opportunities for improvement;
- Ensure that current versions of documents related to the QEMS are in use;
- Promote awareness of the QEMS to all operations personnel
- Ensure that operations personnel are aware of all applicable legislative and regulatory requirements that pertain to their duties for the operation of the system.
- Communicates to owners on facility compliance and DWQMS accreditation as directed
- Deliver/participate in/coordinate training including applicable legislative and regulatory requirements and the QEMS
- Implement facility-specific QEMS programs and procedures consistently at his/her assigned facilities
- Implement, monitor and support corporate programs relating to environmental compliance and support management by evaluating and implementing process control systems at his/her assigned facilities
- Monitor, evaluate and report on compliance/quality status of his/her assigned facilities
- Participate in audits and inspections and assist in developing, implementing and monitoring action items to respond to findings
- Report to the SPC manager on QEMS implementation and identify the need for additional/improved processes and procedures at the regional/cluster/facility level



PCT

QEMS Proc.: OP-04B Rev Date: 11-May-23 Rev No: 2

Pages: 2 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) REPRESENTATIVE

Reviewed by: PCT	Approved by: Sr. Operations Management

The PCT has been made aware of their role as a QEMS Representative within the DWQMS.

8/h-	May 11, 2023
Natalie Wagar – Process & Compliance Technician	Date
Sarah Beaulieu – Process & Compliance Technician	May 12. 2023 Date
Leslie Campbell – Process & Compliance Technician	<u>May 15, 2023</u> Date

Date	Revision #	Reason for Revision
06-Jan-17	0	Document issued
05-Mar-21	1	Updated bullet points to match new roles listed elsewhere in the operational plan; added header; a few minor editing changes to match layout to rest of OP
11-May-23	2	Removed revision from bottom of page; added additional PCT, Leslie Campbell



Kagawong Drinking Water System

QEMS Proc.: OP-05 Rev Date: 09-Aug-24 Rev No: 9 Pages: 1 of 5

DOCUMENT AND RECORDS CONTROL

Reviewed by: PCT

Approved by: Operations Management

1. Purpose

To describe how OCWA's QEMS documents are kept current and how QEMS documents and records are kept legible, readily identifiable, retrievable, stored, protected, retained and disposed of. Applies to QEMS documents and QEMS records pertaining to the *Kagawong Water Treatment Facility & Distribution System*, as identified in this procedure.

2. Definitions

Document – includes a sound recording, video tape, film, photograph, chart, graph, map, plan, survey, book of account, and information recorded or stored by means of any device

Record – a document stating results achieved or providing proof of activities performed

QEMS Document – any document required by OCWA's QEMS as identified in this procedure

QEMS Record – any record required by OCWA's QEMS as identified in this procedure

Controlled – managed as per the conditions of this procedure

Retention Period – length of time that a document or record must be kept; starts from the date of issue for QEMS records or from the point of time when a QEMS document is replaced by a new or amended document

3. Procedure

- 3.1 Documents and records required by OCWA's QEMS and their locations are listed in Appendix OP-05A Document and Records Control Locations.
- 3.2 Internally developed QEMS documents and QEMS records (whenever possible) are generated electronically to ensure legibility and are identified through a header/title and issue date. Handwritten records must be legible and permanently rendered in ink or non-erasable marker.
- 3.3 Controls for the Operational Plan include the use of an authorized approval and a header on every page that includes a title, alpha-numeric procedure code, revision date, revision number and page numbers. A revision history is also included at the end of each procedure.

Authorized personnel for review and approval of this Operational Plan are:

Review QEMS Rep.

Approval Operations Management, SPC Manager



Kagawong Drinking Water System

QEMS Proc.: OP-05 Rev Date: 09-Aug-24 Rev No: 9 Pages: 2 of 5

DOCUMENT AND RECORDS CONTROL

Reviewed by: PCT Approved by: Operations Management

- 3.4 Changes to formatting, grammar, or spelling may be made without updating the revision date or revision number.
- 3.5 The QEMS rep. is responsible for ensuring that current versions of QEMS documents are being used at all times. Current QEMS documents and records are readily accessible to operations personnel and to internal and external auditors/ inspectors at established document control locations. The currency of internal documents is ensured by comparing the date on the document to that of the master hardcopy and/or electronic copy residing in the designated document control location(s) specified in Appendix OP-05A.

Document control locations are established in areas that provide adequate protection to prevent unauthorized use/access, damage, deterioration or loss of QEMS documents and records. Copies of QEMS documents and records located outside of designated control locations are considered uncontrolled.

- 3.6 Electronic documents maintained on the Hub Shared Server are made available to operations personnel in PDF formats within the folder entitled @ Operator's Folder. Original documents in word format are kept in a separate folder and are edited by QEMS reps.
- 3.7 Access to OCWA's computer network infrastructure is restricted through use of individually-assigned usernames and passwords and local area servers. Network security is maintained by OCWA's Information Technology department through a number of established mechanisms and practices such as daily back-up of files stored on servers, password expiry, limitations on login attempts, multi-factor authentication and policies outlining specific conditions of use.

Access to facility QEMS records contained within internal electronic databases and applications (e.g., Wonderware, OPEX, PDM, WMS) is administered by designated application managers/trustees, requires the permission of operations management and is restricted through use of usernames and passwords. Records are protected by means of regular network back-ups of electronic files stored on servers and/or within databases.

- SCADA (not connected to OCWA's network) records are maintained as per Appendix OP-05A and are accessible to all staff when required.
- 3.8 Any employee of the drinking water system may request, in writing, to the QEMS rep., a revision be made to improve an existing internal QEMS document or the preparation of a new document. Written requests should indicate the reason for the requested change. The need for new or updated documents may also be identified through the management review or system audits.

The QEMS rep. communicates any changes made to QEMS documents to relevant operations personnel and coordinates related training (as required). Changes to corporately controlled QEMS documents are communicated and distributed to facility QEMS rep. by OCWA's Corporate Compliance group through e-mails, memos and/or provincial, regional hub/cluster or facility-level training sessions.



Kagawong Drinking Water System

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DOCUMENT AND RECORDS CONTROL

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- 3.9 When a QEMS document is superseded, the hardcopy of the document is promptly removed from its location and disposed of by operations personnel. Electronic documents are superseded by moving PDF versions to the #Obsolete folders and deleting the Word version.
- 3.10 The authorized method for disposal of hardcopy documents and records after the specified retention requirements have been met is shredding.
- 3.11 QEMS documents and records are retained in accordance with applicable regulations and legal instruments. Relevant regulatory and corporate minimum retention periods are as follows:

Type of Document/Record	Minimum Retention Time	Requirement Reference
DWQMS operational plan	10 years	Director's Direction under SDWA
Internal QEMS audit results	10 years	OCWA Requirement
External QEMS audit results	10 years	OCWA Requirement
Management review documentation	10 years	OCWA Requirement
Documents/records required to demonstrate conformance with the DWQMS (specifically documents/records listed in OP-05A)	3 years*if no specified legislative requirement identified in this table or in the facility's legal instruments *	OCWA Requirement
Log Books or other record-keeping mechanisms	5 years	O. Reg. 128/04
Training Records for water operators and water quality analysts	5 years	O. Reg. 128/04
Operational checks, sampling and testing (e.g., chlorine residuals, turbidity, fluoride, sampling records), microbiological sampling and testing and chain of custodies	2 years	O. Reg. 170/03
Schedule 23 & 24 sampling, chain of custodies and test results	6 years LMR 15 years SMR	O. Reg. 170.03
THM, HAA, nitrates, nitrites and lead program (including pH and alkalinity) sampling, chain of custodies, and test results, Section 11 Annual Reports and Schedule 22 Summary Reports	6 years	O. Reg. 170/03
Sodium sampling, chain of custody and test results and related corrective action records/reports, 60 month fluoride sampling, chain of custody and test results (if the system doesn't fluoridate), Engineering Reports, GUDI/Non-GUDI Reports	15 years	O. Reg. 170/03



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DOCUMENT AND RECORDS CONTROL

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Type of Document/Record	Minimum Retention Time	Requirement Reference
Corrective action records/reports for E. Coli, Total Coliforms and bacterial species	2 years	O. Reg. 170/03
Corrective action records/reports for chemical and radiological parameters under SDWA O. Reg. 169/03, pesticides not listed under O. Reg. 169/03 and health-related parameters in an order or approval	6 years LMR 15 years SMR	O. Reg. 170/03
Flow Meter Calibration Records, Analyzer Calibration Reports Maintenance Records/Work Orders	2 years	O. Reg. 170/03
Records required by or created in accordance with the Municipal Drinking Water Licence (MDWL) or Drinking Water Works Permit (DWWP). Except records specifically referenced in O. Reg. 170/03 or otherwise specified in the MDWL or DWWP.	5 years	MDWL
Ministry forms referenced in the DWWP, including Form 1, Form 2, Form 3 and Director Notifications (applies to forms that have been completed by OCWA as the authorized by the owner)	10 years	DWWP

3.12 The Operational Plan is reviewed for currency by the QEMS rep. during internal/external audit and management review processes. Other QEMS-related documents are reviewed as per the frequencies set out in this Operational Plan or as significant changes (e.g., changes in regulatory requirements, corporate policies or operational processes and/or equipment, etc.) occur. QEMS documents and records are reviewed for evidence of control during each internal system audit as per OP-19 Internal QEMS Audits.

4. Related Documents

OP-05A Document and Records Control Locations

OP-19 Internal QEMS Audits

OP-20 Management Review Minutes



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DOCUMENT AND RECORDS CONTROL

Reviewed by: PCT Approved by: Operations Management

Date	Revision #	Reason for Revision
19-Jul-18	8	QP-01 procedure renamed OP-05. (last revision # 7 dated 18-Jul-17) Removed Scope and Responsibilities sections. Moved the former Table 1 (Designated location for documents and records required by OCWA's QEMS) to its own appendix (OP-05A). Assigned responsibility for ensuring current versions of QEMS documents are being used to the QEMS Representative (s. 3.5). Clarified that requests for revisions/new QEMS documents are made to the QEMS Representative (s. 3.8). Moved the former Table 2 (Relevant regulatory and corporate minimum retention periods) to be part of s. 3.11 and expanded on the minimum retention times for documents and records required to demonstrate compliance with legislation. Other minor wording changes.
09-Aug-24	9	Added multi factor authentication to 3.5, section 3.9 table revised to include Schedule 23 & 24 records retention times for Large Municipal Residential (LMR) and Small Municipal Resident (SMR) systems, added chain of custody as record for retention for various sampling requirements, lead program clarified to include pH and alkalinity; added GUDI/Non-GUDI Reports, minor wording and type-o's, removed watermark.



Kagawong Drinking Water System

QEMS Doc: OP-05A Rev Date: 13-Sep-24 Rev No: 3

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DOCUMENT AND RECORDS CONTROL LOCATIONS

Designated locations for documents and records required by OCWA's QEMS

Type of Document/Record	Designated Document Control Location (HC = Hardcopy, E = Electronic)			
Internal QEMS Documents				
 Facility Emergency Plans Emergency Contact List Essential Supplies & Services List Municipal Emergency Response Plan (Relevant Portion) Standard Operating Procedures Contingency Plans 	EC\\@Operators Folder			
OCWA's Corporate Procurement and Administration Policies	EC – OCWA's SharePoint			
Corporate Emergency Response Plan (CERP)	EC – OCWA's SharePoint			
OCWA's Mandatory Compliance Training List	EC – OCWA's SharePoint			
On-call Schedule	EC – Maintained in Outlook			
Operational Plan (Includes QEMS Procedures)	E-version maintained at Municipal office EC – Hub Shared Server			
QEMS Policy	HC – Posted at Facility EC – OCWA's SharePoint and public website			
QEMS Policy Revision History	EC – OCWA's SharePoint			
Sampling Schedule - Calendar	EC – Maintained in Outlook			
Sampling Schedule – Cover Page & Calendar	EC\\@Operators Folder			
Internal QEMS Documents (Blank)				
Calibration / Verification Form	EC –\\. PCT folder\Calibration Records			
Chain of Custody Forms	EC –\\.@Operators Folder			
Community Complaint Records	EC –\\.@Operators Folder			
Contingency Plan Review / Test Summary Form	EC –\\#FEP Binders\Contingencies			
Distribution & Valve Service Forms	EC - S:\Distribution Information			
Internal Audit Hub Protocol	EC –\\DWQMS Supporting Docs\DWQMS documents			
Internal Audit Report	EC –\\DWQMS Supporting Docs\DWQMS documents			
Management Review Minutes	EC –\\DWQMS Supporting Docs\DWQMS documents			
Operator Training Form	EC – OCWA's SharePoint			
Round Sheet / In-House Labs	EC –\\.@Operators Folder			
QEMS Records				
Action Items Spreadsheet	EC – S:\DWQMS-Espanola Hub			
Annotation Reports	EC - WMS			
Annual Performance Planning and Review (PPR)	EC – Maintained in OPEX			
Annual Reports & Summary Reports	EC –_PCT folder\Reporting\Annual and Summary Reports			
AWQI Reports	EC –\\. PCT folder\Non-Compliances & AWQIs			
Calibration / Verification for Flow Meters	EC –_PCT folder\Calibration Records			
Call In Reports	EC – Maintained Through WMS			
Capital Report	EC – S:\DWQMS-Espanola Hub\Kagawong\Annual Capital Forecast EC – Maintained Through WMS			
Community Complaint Records	EC – Maintained in OPEX			



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DOCUMENT AND RECORDS CONTROL LOCATIONS

Type of Document/Record	Designated Document Control Location (HC = Hardcopy, E = Electronic)
Contingency Plan Review / Test Summary Form (FEP-01)	EC\\.@Operators Folder
Distribution & Valve Service Forms	EC - S:\Distribution Information
DWWP's Form 1, 2, 3 & Director's Notification	EC –\\#All facilities
External QEMS Audit Documents	EC – S:\DWQMS-Espanola Hub\Kagawong\External Audit Reports
Facility Logbook(s)	EC - https://ocwa.eriscloud.com/
In-House Lab Results	HC – Maintained at Facility EC – Maintained Through PDM
Internal QEMS Audit Documents Internal Audit Protocol Audit Reports	EC – S:\DWQMS-Espanola Hub\Kagawong\Internal Audit Reports
Laboratory Analysis Reports	EC –\\. PCT folder\Lab Results
	EC – Maintained Through PDM
Laboratory Chain of Custodies	HC – Maintained at Facility
Laboratory Service Notification (LSN)	EC\\\ PCT folder\Lab Results\LSN documents
Management Review Documentation • Management Review Minutes	EC –S:\DWQMS-Espanola Hub\Kagawong\Management Review
Operator Training Records	EC – Maintained Through Database
Rounds Sheets	HC – Maintained at Facility
SCADA Records (Plant SCADA, Client Owned)	EC – Maintained at Facility
SCADA Records (Wonderware, OCWA)	EC – Maintained at Facility
Work Order Records	EC – Maintained Through WMS
External QEMS Documents	
ANSI/NSF Product Registration Documentation for Chemicals / Materials Used	HC – Maintained at Facility EC – Online (http://info.nsf.org/Certified/PwsChemicals/)
Applicable Federal and Provincial Legislation and Municipal by-laws	Provincial Online at www.e-laws.gov.on.ca Federal online at www.laws.justice.gc.ca
AWWA Standards	EC –\\@Operators Folder
Calibration Certificates / Records (Third Party for Handheld Devices)	EC - S:\# PCT folder\Calibration Records\Handheld Units
Drinking Water Works Permit	HC – Maintained at Facility HC – Maintained at Town Office EC – S:\#All facilities
DWQMS Standard	E – https://www.ontario.ca
DWWP's Form 1, 2, 3 & Director's Notification (Blank)	EC –\\.@Operators Folder
Engineering Schematics / Plans / Drawings	HC – Maintained at Facility
Laboratory Accreditation Certification	EC – CALA Website (www.cala.ca)
Laboratory Service Notification (LSN) (Blank)	EC – Online EC – Accredited Laboratory
Maintenance / Equipment Manuals	HC – Maintained at Facility EC – Online
Ministry Inspection Reports	EC –\\. PCT folder\Inspections



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DOCUMENT AND RECORDS CONTROL LOCATIONS

Type of Document/Record	Designated Document Control Location (HC = Hardcopy, E = Electronic)
Ministry's "Potential Hazardous Events for Municipal Residential Drinking Water Systems"	EC – https://www.ontario.ca
Ministry's "Procedure for Disinfection of Drinking Water in Ontario"	EC - S:\@ Operator's Folder\Supporting Policies and Procedures
Municipal Drinking Water Licence	HC – Maintained at Facility HC – Maintained at Town Office EC – S:\#All facilities
Operator Certificates	HC – Posted at Facility
Permit to Take Water	HC – Maintained at Facility HC – Maintained at Town Office EC – S:\#All facilities
SDS	HC – Maintained at Facility

Date	Revision #	Reason for Revision
02-Oct-18	0	Procedure issued – Document and Records Control Locations were originally included in former QP-01 as Table 1 (last revised on 2011-12-13). Added additional types of documents and records that require document control.
15-May-19	1	Changed location from HC to E-version for municipal FEP location; Included in-house labs next to round sheets under 'internal QEMS Documents (BLANK); added online address for location of NSF documents; added specification that third party calibration certificates are for handheld devices and changed the location to EC; changed the location where the 'procedure for disinfection' is maintained; moved calibration/verification for flow meters under the 'QEMS Records'; changed the name of the action and analysis spreadsheet to action items spreadsheet in 2 locations; included SOPs and contingencies with the FEP binder – maintained as HC and EC; added distribution and valve service forms to internal QEMS (Blank) and QEMS records; changed the formatting of the table size
3-Nov-22	2	Updated links throughout document (links were broken due to update to OCWA's shared drive); ; replaced OCWA's intranet to OCWA's SharePoint; removed blank 'action item spreadsheet' from list; changed the location from Maximo to WMS for multiple items; updated logbook location to electronic; removed MSDS and resorted alphabetically under "External QEMS Documents"; replaced MOE/MOECC with MECP:
13-Sep-24	3	Updated Corporate Emergency Plan (CERP) name, minor wording, removed watermark; added federal legislative location, replaced MOECC with Ministry



Kagawong Drinking Water System

QEMS Proc.: OP-06 Rev Date: 20-Sep-24 Rev No: 4 Pages: 1 of 9

DRINKING WATER SYSTEM

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To document the following for the *Kagawong Drinking Water System*:

- The name of the owner and operating authority; and
- Provide a description of the system, including all applicable water sources, treatment system processes and distribution system components.

2. Definitions

Distribution System - means the part of a drinking water system that is used in the distribution, storage or supply of water and that is not part of a treatment system.

Primary Disinfection - means a process or series of processes intended to remove or inactivate human pathogens such as viruses, bacteria and protozoa in water.

Secondary Disinfection - means a process or series of processes intended to provide and maintain a disinfectant residual in a drinking water system's distribution system, and in plumbing connected to the distribution system, for the purposes of:

- (a) protecting water from microbiological re-contamination;
- (b) reducing bacterial regrowth;
- (c) controlling biofilm formation;
- (d) serving as an indicator of distribution system integrity; and

includes the use of disinfectant residuals from primary disinfection to provide and maintain a disinfectant residual in a drinking water system's distribution system for the purposes described in clauses (a) to (d).

Treatment System - means any part of a drinking water system that is used in relation to the treatment of water and includes,

- (a) any thing that conveys or stores water and is part of a treatment process, including any treatment equipment installed in plumbing,
- (b) any thing related to the management of residue from the treatment process or the management of the discharge of a substance into the natural environment from the system, and
- (c) a well or intake that serves as the source or entry point of raw water supply for the system;

3. Procedure

- 3.1 Drinking Water System Overview Treatment and Distribution
 - Owner: The Corporation of the Township of Billings
 - Operating Authority: Ontario Clean Water Agency

The water treatment facility is located at 75 Beach Street. The low lift pumping station is located at 319 Main Street.



Kagawong Drinking Water System

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DRINKING WATER SYSTEM

Reviewed by: PCT Approved by: Operations Management

3.2 Source Water

The raw water source for the treatment plant is Mudge Bay in the North Channel of Lake Huron. The channel is used by boaters throughout the summer.

General Characteristics

The raw water source for the treatment plant is Lake Huron. The water from Lake Huron is typically low in turbidity and slightly basic. Temperature fluctuates minimally through the seasons ranging from approximately 2 °C in the winter to as high as 18 °C during the summer. Bacteriological analysis of the raw water indicates a source of relatively good quality. The results of chemical analyses are consistently below the Ontario Drinking Water Quality Standards.

Raw Water Characteristics at Intake

Years					
	2015	2018	2021	2024	2027
Parameters					
рН	7.94	7.9	8.1	7.72	
Alkalinity (mg/L as CaCO3)	61	63	63	71	
Conductivity (uS/cm)	160	173	156	168	
Total Dissolved Solids (mg/L)	97	114	111	77	
Hardness (mg/L as CaCO3)	67.1	74.9	35	73.7	
Langelier's Index (@20°c)	-0.61	-0.52	-0.46	-0.49	
Aluminum (mg/L)		22.8	7	6	
Arsenic (ug/L)		0.5	0.2	0.4	
Barium (ug/L)		12.0	4.95	11.0	
Beryllium (ug/L)		0.007	0.007	0.007	
Boron (ug/L)		13	12	9	
Bismuth (ug/L)		0.007	0.1	0.01	
Calcium (mg/L)	17.9	21.0	9.35	20.2	
Cadmium (ug/L)		0.004	0.003	0.003	
Cobalt (ug/L)		0.011	0.042	0.008	
Chromium (ug/L)		0.14	0.08	0.17	
Copper (ug/L)		0.74	0.7	0.7	



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Iron (ug/L)		28	11	14	
Sodium (mg/L)	3.64	3.92	1.88	3.85	
Magnesium (mg/L)		5.49	2.82	5.65	
Manganese (ug/L)		3.45	1.60	2.47	
Molybdenum (ug/L)		0.34	0.21	0.57	
Nickel (ug/L)		0.9	0.6	1.0	
Lithium (ug/L)		0.947	0.1	1.0	
Potassium (mg/L)		0.878	0.343	0.771	
Lead (ug/L)		0.05	0.3	0.06	
Silicon (ug/L)		1220	447	831	
Antimony (ug/L)		0.57	0.9	0.6	
Selenium (ug/L)		0.11	0.04	0.08	
Strontium (ug/L)		69.4	28.7	67.6	
Titanium (ug/L)		0.71	0.22	0.10	
Thallium (ug/L)		0.005	0.005	0.005	
Uranium (ug/L)		0.139	0.07	-	
Tin (ug/L)		0.02	0.1	0.06	
Vanadium (ug/L)		0.19	0.08	0.16	
Tungsten (ug/L)		0.02	0.11	0.02	
Yttrium (ug/L)		0.015	0.02	0.02	
Zinc (ug/L)		2	2	2	

	E.coli		Total Coliform		Turbidity			Temperature			pН				
	Min	Avg	Max	Min	Avg	Max	Min	Avg	Max	Min	Avg	Max	Min	Avg	Max
2008	0	0.34	4	0	3.6	71	0.18	0.48	0.95	N/A	N/A	N/A	N/A	N/A	N/A
2009	0	0.44	7	0	8.1	74	0.21	0.47	1.01	N/A	N/A	N/A	N/A	N/A	N/A
2013	0	46.9	2380	0	219	11200	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
2015	0	1.73	46	0	9.6	150	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
2016	0	0.13	4	0	2.3	21	N/A	N/A	N/A	8.3	10.2	12	7.87	8.07	8.16
2017	0	0.28	5	0	2.9	18	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
2018	0	0.25	3	0	5.67	89	N/A	N/A	N/A	3	7.56	19	7.97	8.03	8.15
2019	0	0.08	1	0	4.61	43	N/A	N/A	N/A	2	6.05	19	8.26	8.32	9.32
2020	0	0.49	20	0	7.28	83	N/A	N/A	N/A	2	5.48	14	3	8.06	9.31
2023	0	0.14	3	0	4.8	37	N/A	N/A	N/A	2	13.3	25	7.28	9.44	21

Above table updated every 3 years following raw water characteristic sampling



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DRINKING WATER SYSTEM

Reviewed by: PCT Approved by: Operations Management

Common Fluctuations

Raw water turbidity is relatively stable during spring runoff and significant rainfall events. No actions to date have been taken due to any changes in turbidity.

Threats

Potential sources of raw water contamination include spills from sporting vessels traveling on the lake, and potential cottager wastes being released into the lake.

Upstream and downstream sampling is not deemed necessary at this time.

Operational Challenges

Under normal operating conditions, the rated capacity is not a factor. During peak summer hours, high water usage pushes the production capabilities. Water restrictions are put in place to assist with controlling the demands.

3.3 Treatment System Description

Low Lift Station

Water is drawn into the raw well located at the low lift station through a 355mm diameter pipe extending 116m into Mudge Bay. The raw water well is a 2.48m x 2.44m x 5.00m deep concrete structure. A raw water sampling pump is available sampling only and is used during zebra mussel control.

A pre-chlorination system is located at the lift station which includes one chemical storage tank and one chemical metering pump that injects sodium hypochlorite at the raw water intake well.

Filtration

Water flows into the treatment plant through two raw water strainers (one duty, one standby) then flows to two parallel ultra-filtration membrane trains consisting of hollow fiber membranes having 0.02 micron pore size. Each train is rated at 900m³/day, the total supply to the trains is limited by the low lift pump capacity of 11.6L/s. This only allows a maximum flow rate of 1002.24m³/day

A continuous turbidity analyzer is located on each filter discharge line.



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DRINKING WATER SYSTEM

Reviewed by: PCT Approved by: Operations Management

Primary Chlorination

Two dosing pumps (one duty, one standby) inject sodium hypochlorite to the filtered water at the inlet of the clearwell. Complete with one chemical separate storage tank with spill containment.

Water then flows to a below grade, reinforced concrete chlorine contact reservoir with an overflow weir to the high lift well. The reservoir is located directly below the treatment room floor and has a capacity of 126 m³.

The high lift well has a capacity of 16m³ and houses the high lift vertical turbine pumps.

High Lift Pumps

The high lift pumps are each rated at 10.4L/s. The two high lift pumps installed are electrically driven vertical turbine pumps: one duty and one standby.

Final Monitoring

Instrumentation consists of one wall mounted chlorine residual analyzer, turbidity analyzer, a pressure transmitter and magnetic flow meter, complete with flow rate recorder and totalizer all located on the plant discharge line.

Secondary Disinfection

Two dosing pumps (one duty, one standby) inject sodium hypochlorite to the high lift discharge line complete with one chemical storage tank.

Membrane Backwash System

Filters are maintained through a membrane backwash system which includes two backwash pumps each rated at 1.3 L/s, an 83m3 backwash storage tank. Backwash water is discharged periodically to a ditch and a composite sample for Total Suspended Solids is taken monthly

Clean In Place (CIP) System

Deep cleaning of the membranes is achieved through the use of citric acid and sodium hypochlorite. Dechlorination is achieved by the use of calcium thiosulphate and sodium hydroxide is used for neutralization

Standby Power Supply

Standby power is provided by a standby diesel generator to the continuous duty pump, the chemical feed system, the flow meter and designated light fixtures and heaters.



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DRINKING WATER SYSTEM

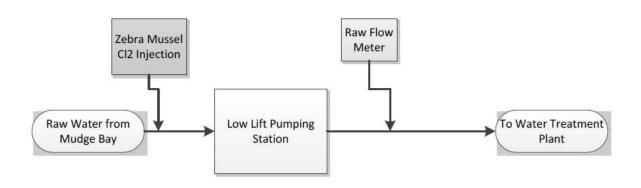
Reviewed by: PCT

Approved by: Operations Management

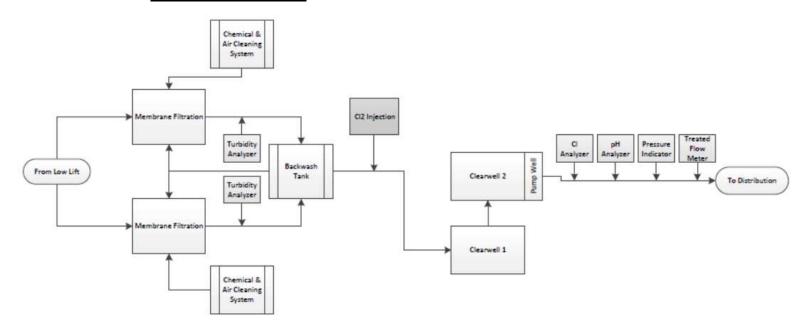
The 80 kW unit is complete with controller, battery charger, propane storage and an automatic transfer switch.

3.4 Treatment System Process Flow Chart

Low Lift Pumping Station



Water Treatment Plant





Kagawong Drinking Water System

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DRINKING WATER SYSTEM

Reviewed by: PCT Approved by: Operations Management

3.5 Description of the Distribution System Components

The utility serves the Town of Kagawong and has over 9,594 meters of pipeline of various sizes constructed solely from PVC, approximately 11 hydrants and 32 valves. The Kagawong Water Treatment Facility's distribution system includes various chlorine residual check points, which are sampled for chlorine residual weekly.

An elevated water storage tank with a capacity of 600 m3 is located on the southwest corner of Beach Road and Rainbow Road. Located inside the base of the storage tank is a valve and control room, inlet pipe from the water treatment plant, discharge pipe, overflow pipe, ladder, electric power supply, access road, controls, provisions for residual chlorine measurements and all other items necessary to have a complete and operable system.



Kagawong Drinking Water System

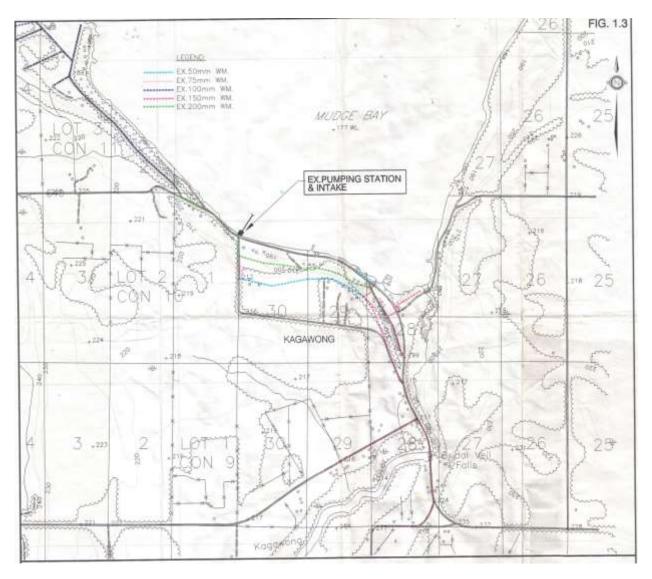
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DRINKING WATER SYSTEM

Reviewed by: PCT

Approved by: Operations Management

3.6 Distribution System Components Flow Chart





Kagawong Drinking Water System

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DRINKING WATER SYSTEM

Reviewed by: PCT Approved by: Operations Management

4. Related Documents

Drinking Water Works Permit (DWWP) DWWP's Form 1, 2, 3 and Director's Notification

Date	Revision #	Reason for Revision
26-Sep-18	0	Procedure issued – Information within OP-06 was originally set out in the Main body of OCWA's Operational Plan. New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Source description updated. Raw water source parameter data tables updated to new layout. Added 2018 raw water data.
24-Apr-19	1	Updated the process diagram to include filter turbidity monitoring.
21-Apr-20	2	Added comment relating to raw water sampling data tables being updated every 3 years;
05-Nov-21	3	Added raw water assessment data and updated raw water tables; Updated the process flow diagram to accurately reflect flows through the clearwells
20-Sep-24	4	Updated raw water sampling tables with 2024 results.



Kagawong Drinking Water System

QEMS Proc.: OP-07 Rev Date: 20-Feb-24 Rev No: 1 Pages: 1 of 4

RISK ASSESSMENT

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To document the process for conducting a risk assessment to identify and assess potential hazardous events and associated hazards that could affect drinking water safety.

2. Definitions

Consequence – the potential impact to public health and/or operation of the drinking water system if a hazard/hazardous event is not controlled

Control Measure – includes any processes, physical steps or other practices that have been put in place at a drinking water system to prevent or reduce a hazard before it occurs

Critical Control Point (CCP) – an essential step or point in the subject system at which control can be applied by the Operating Authority to prevent or eliminate a drinking water health hazard or reduce it to an acceptable level

Drinking Water Health Hazard – means, in respect of a drinking water system,

- a) a condition of the system or a condition associated with the system's waters, including any thing found in the waters,
 - i. that adversely affects, or is likely to adversely affect, the health of the users of the system,
 - ii. that deters or hinders, or is likely to deter or hinder, the prevention or suppression of disease, or
 - iii. that endangers or is likely to endanger public health,
- b) a prescribed condition of the drinking water system, or
- c) a prescribed condition associated with the system's waters or the presence of a prescribed thing in the waters

Hazardous Event – an incident or situation that can lead to the presence of a hazard

Hazard – a biological, chemical, physical or radiological agent that has the potential to cause harm

Likelihood – the probability of a hazard or hazardous event occurring

3. Procedure

- 3.1 Operations management conducts a risk assessment at least once every thirty-six months with support from operational personnel. Work orders are assigned directly to operations management through OCWA's Work Management System (WMS).
- 3.2 The QEMS rep. is responsible for ensuring that documents and records related to the risk assessment activities are maintained.
- 3.3 The risk assessment team performs the risk assessment as follows:



Kagawong Drinking Water System

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RISK ASSESSMENT

Reviewed by: PCT Approved by: Operations Management

- 3.3.1 OP-07 Risk Assessment and OP-08 Risk Assessment Outcomes are reviewed.
- 3.3.2 For each of the system's activities/process steps, potential hazardous events and associated hazards (possible outcomes) that could impact the system's ability to deliver safe drinking water are identified. At a minimum, potential hazardous events and associated hazard as identified in the most current version of the Ministry of the Environment and Climate Change (MOECC) document titled "Potential Hazardous Events for Municipal Residential Drinking Water Systems" (as applicable to the system type) must be considered.
- 3.3.3 For each of the hazardous events, control measures currently in place at the system to eliminate the hazard or prevent it from becoming a threat to public health are specified. Control measures may include alarms, monitoring procedures, SOPs/contingency plans, preventive maintenance activities, backup equipment, engineering controls, etc.
- 3.3.4 To ensure that potential drinking water health hazards are addressed and minimum treatment requirements as regulated by SDWA O. Reg. 170/03 and the MOECC's "Procedure for Disinfection of Drinking Water in Ontario" are met, OCWA has established mandatory Critical Control Points (CCPs).

As a minimum, the following must be included as CCPs (as applicable):

- equipment or processes required to achieve primary disinfection (e.g., chemical and/or UV disinfection system, coagulant dosing system, filters, etc.)
- equipment or processes necessary for maintaining secondary disinfection in the distribution system
- fluoridation system
- 3.3.5 Additional CCPs for the system are determined by evaluating and ranking the hazardous events for the remaining activities/process steps (i.e., those <u>not</u> included as OCWA's minimum CCPs).
- 3.3.6 Taking into consideration existing control measures (including the reliability and redundancy of equipment), each hazardous event is assigned a value for the likelihood and a value for the consequence of that event occurring based on the following criteria:

Value	Likelihood of Hazardous Event Occurring
1	Rare – Estimated to occur every 50 years or more (usually no documented occurrence at site)
2	Unlikely – Estimated to occur in the range of 10 – 49 years
3	Possible – Estimated to occur in the range of 1 – 9 years



Kagawong Drinking Water System

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RISK ASSESSMENT

Reviewed by: PCT Approved by: Operations Management

4	Likely – Occurs monthly to annually			
5	Certain – Occurs monthly or more frequently			

Value	Consequence of Hazardous Event Occurring
1	Insignificant – Little or no disruption to normal operations, no impact on public health
2	Minor – Significant modification to normal operations but manageable, no impact on public health
3	Moderate – Potentially reportable, corrective action required, potential public health impact, disruption to operations is manageable
4	Major – Reportable, system significantly compromised and abnormal operations if at all, high level of monitoring and corrective action required, threat to public health
5	Catastrophic – Complete failure of system, water unsuitable for consumption

The likelihood and consequence values are multiplied to determine the risk value (ranking) of each hazardous event. Hazardous events with a ranking of 12 or greater are considered high risk.

- 3.3.7 Hazardous events and rankings are reviewed and any activity/process step is identified as an additional CCP if all of the following criteria are met:
 - √ the associated hazardous event has a ranking of 12 or greater;
 - the associated hazardous event can be controlled through control measure(s):
 - ✓ operation of the control measures can be monitored and corrective actions can be applied in a timely fashion;
 - ✓ specific control limits can be established for the control measure(s); and
 - ✓ failure of the control measures would lead to immediate notification of Medical Officer of Health (MOH) or MOECC or both.
- 3.4 The outcomes of the risk assessment are documented as per OP-08 Risk Assessment Outcomes.
- 3.5 At least once every calendar year, the QEMS rep. facilitates the verification of the currency of the information and the validity of the assumptions used in the risk assessment in preparation for the management review (OP-20). When performing this review, the following may be considered:
 - process/equipment changes
 - reliability and redundancy of equipment
 - emergency situations/service interruptions



Kagawong Drinking Water System

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RISK ASSESSMENT

Reviewed by: PCT Approved by: Operations Management

- CCP deviations
- audit/inspection results
- 3.6 An annual review of the Risk Assessment and Risk Assessment Outcomes will be performed by the facilities Sr. Ops Manager as part of the yearly Management Review meeting.

4. Related Documents

MOECC's "Potential Hazardous Events for Municipal Residential Drinking Water Systems" MOECC's "Procedure for Disinfection of Drinking Water in Ontario"

OP-08 Risk Assessment Outcomes

OP-20 Management Review

Date	Revision #	Reason for Revision
17-Aug-18	0	Procedure issued – Information within OP-07 was originally set out in the QEMS Procedure QP-02 Risk Assessment and Risk Assessment Outcomes (last revision # 11 22-Jan-18). Revised Purpose to reflect element 7 requirements only. Clarified role of QEMS Representative in coordinating the risk assessment and maintaining documents and records. Re-worded procedure for performing the risk assessment (process itself remains essentially unchanged). Removed requirements for documenting the outcomes of the risk assessment (now covered in OP-08).
20-Feb-24	1	Added section 3.6 to better identify when risk assessment reviews will be conducted.



Kagawong Drinking Water System

QEMS Proc.: OP-08 Rev Date: 19-Jul-18 Rev No: 0 Pages: 1 of 2

RISK ASSESSMENT OUTCOMES

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To document the outcomes of the risk assessment conducted as per OP-07 Risk Assessment.

2. Definitions

Critical Control Point (CCP) – an essential step or point in the subject system at which control can be applied by the operating authority to prevent or eliminate a drinking water health hazard or reduce it to an acceptable level

Critical Control Limit (CCL) – the point at which a critical control point response procedure is initiated

3. Procedure

- 3.1 The QEMS rep. is responsible for updating the information in OP-08A Summary of Risk Assessment Outcomes as required.
- 3.2 The results of the risk assessment conducted as per OP-07 are documented in Table 1 of OP-08A. This includes:
 - identified potential hazardous events and associated hazards (possible outcomes) for each of the system's activities/process steps;
 - identified control measures to address the potential hazards and hazardous events; and
 - assigned rankings for the hazardous events (likelihood x consequence = risk value) and whether the hazardous event is a CCP (mandatory or additional).
 Note: If the hazardous event is ranked as 12 or higher and it is not being identified as a CCP, provide rationale as to why it does not meet the criteria set out in section 3.3.7 of OP-07.
- 3.3 Operations management is responsible for ensuring that for each CCP:
 - CCLs are set;
 - procedures and processes to monitor the CCLs are established; and
 - procedures to respond to, report and record deviations from the CCLs are implemented.

The identified CCPs, their respective CCLs and associated procedures are documented in Table 2 of OP-08A.

3.4 A summary of the results of the annual review/36-month risk assessment is recorded in Table 3 of OP-08A.



Kagawong Drinking Water System

QEMS Proc.: OP-08 Rev Date: 19-Jul-18 Rev No: 0 Pages: 2 of 2

RISK ASSESSMENT OUTCOMES

Reviewed by: PCT Approved by: Operations Management

3.5 Operations management considers the risk assessment outcomes during the review of the adequacy of the infrastructure (Refer to OP-14 Review and Provision of Infrastructure).

4. Related Documents

MOECC's "Potential Hazardous Events for Municipal Residential Drinking Water Systems" OP-07 Risk Assessment

OP-08A Summary of Risk Assessment Outcomes

OP-14 Review and Provision of Infrastructure

Date	Revision #	Reason for Revision
19-Jul-18	0	Procedure issued – Information within OP-08 was originally set out in the QEMS Procedure QP-02 Risk Assessment and Risk Assessment Outcomes (last revision # 3 dated 18-Jul-17). Clarified role of QEMS Representative in updating the information in OP-08A Summary of Risk Assessment Outcomes. Included requirements for how to document the risk assessment outcomes using the tables in OP-08A. Clarified responsibility of Operations Management to ensure Critical Control Limits are set and related procedures are developed. Included reference to OP-14 Review and Provision of Infrastructure to emphasize the need for Operations Management to review the risk assessment outcomes during the infrastructure review.

QEMS Doc: OP-08A

Table 1: Risk Assessment Table - Kagawong WTP

Activity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	Risk Value	CCP?
Source/Intake	Spill - chemical or biological	Contamination of source water	>In house raw water monitoring >Production of water would cease immediately until safe production can be resumed. SOP: Provision of Alternate Water Source; Notification of Adverse Water Contingency Plans: Loss of Service; Unsafe Water; Spill Response	2	4		☐ Yes – Mandatory CCP☐ Yes☐ No
	Sudden changes to raw water	Process upset Increased chlorine demand Increased turbidity Ineffective removal of pathogens - CT not met	>In house raw water monitoring >Continuous online monitoring with alarms >Remote monitoring via Wonderware >Routine sampling >Online CT monitoring and manual CT calculations >Regular onsite visits SOP: Continuous Monitoring Data Review; CT Requirement for Facility; Notification of Adverse Water Contingency Plans: Unsafe Water	1	2		□ Yes – Mandatory CCP □ Yes ☑ No
	Algal bloom	Contamination of source water Loss of water supply		1	3		□ Yes – Mandatory CCP □ Yes ☑ No
	Water supply shortfall	Loss of water supply Decreased fire protection	>Water use restrictions >Increase in monitoring SOP: Provision of Alternate Water Source; Contingency Plans: Loss of Service;	1	4		☐ Yes – Mandatory CCP☐ Yes☐ Yes☐ No
	Breakage/blockage of single intake pipe /structure Frazzle Ice	Loss of water supply	>Remote monitoring via Wonderware >Periodic inspections by certified divers. >Continuous online monitoring of raw flows with alarms >Regular onsite visits >Complaint process from residents SOP: Provision of Alternate Water Source; Community Complaint; Notification of Adverse Water; Continuous Monitoring Data Review; Frazzle Ice Contingency Plans: Loss of Service;	3	3		□ Yes – Mandatory CCP □ Yes ☑ No

Summary of Risk Assessment Outcomes Kagawong Water Supply

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			8 8 411 3				Pages: 2
Activity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	Risk Value	CCP?
	Zebra mussel pump failure	Loss of zebra mussel control	>Remote monitoring via Wonderware >Continuous online monitoring >Redundancy - 2 pumps SOP: Continuous Monitoring Data Review; CT Requirement for Facility Contingency Plans: Loss of Service;	1	1	1	□ Yes – Mandatory CCP □ Yes ☑ No
Low Lift Station	Low lift pump failure	Loss of water supply	>Redundancy; back up pump >Automatic switch over >Scheduled maintenance activities >Backup generator for loss of power situations >Continuous online monitoring of raw flows with alarms >Remote monitoring of process via Wonderware SOP: Provision of Alternate Water Source; Notification of Adverse Water; Community Complaint Contingency Plans: Loss of Service	3	1	3	□ Yes – Mandatory CCP □ Yes ☑ No
Primary Disinfection -	Feed pump failure	Low chlorine residual Inadequate inactivation of pathogens	>Redundancy (back-up pump) >Continuous online monitoring of chlorine with alarms >Dosage calculations >Scheduled maintenance activities, >Online CT monitoring and manual CT calculations >Remote monitoring of process via Wonderware SOP: Notification of Adverse Water; Continuous Monitoring Data Review; CT Requirement for Facility Contingency Plans: Unsafe Water				
	Analyzer failure	Unknown chlorine residual levels Potential for inadequate inactivation of pathogens - CT not met	>Continuous online monitoring of chlorine with alarms >Handheld readings every 5 minutes upon failure >Scheduled maintenance activities, >Remote monitoring of process via Wonderware >Regular onsite visits > Spare analyzer maintained at hub office SOP: Notification of Adverse Water; Continuous Monitoring Data Review; Contingency Plans: Unsafe Water				

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			ragawong water supply				Pages: 3
Activity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	Risk Value	CCP?
	Low supply of sodium hypochlorite	Low chlorine residual Inadequate inactivation of pathogens - CT not met	>Operator inspections. >Chemical available from other hub facilities >Continuous online monitoring of chlorine with alarms >Essential supplies from other distributors >Online CT monitoring and manual CT calculations >Remote monitoring of process via Wonderware >Regular onsite visits SOP: Notification of Adverse Water; Continuous Monitoring Data Review; CT Requirement for Facility Contingency Plans: Unsafe Water				Yes – Mandatory CCP
Filtration Process (Includes coagulation, flocculation & rapid sand filters)	Turbidimeter failure	Unknown turbidity levels Unable to meet log removal requirements	>Alarm on high turbidity >Redundancy; 2 filters >Scheduled maintenance activities >Handheld readings every 15 minutes upon failure >Operator inspections. >Remote monitoring of process via Wonderware SOP: Filter Efficiency Reports; Notification of Adverse Water; Continuous Monitoring Data Review Contingency Plans: Unsafe Water				Yes – Mandatory CCP
	Membrane failure	Ineffective removal of pathogens Filter efficiency failure	>Continuous online monitoring of tank levels & membrane integrity tests >Scheduled maintenance activities >Remote monitoring via Wonderware >Regular onsite visits >2 filter lines (redundancy) >Membrane failure alarms SOP: Filter Efficiency Reports; Notification of Adverse Water; Continuous Monitoring Data Review Contingency Plans: Loss of Service;				Yes – Mandatory CCP
	Backwash valve failure	Increased turbidity Ineffective removal of pathogens Filter efficiency failure	>Filter must reduce usage >Water restriction imposed >Remote monitoring via Wonderware >Regular onsite visits >Continuous online monitoring of turbidity with alarms SOP: Filter Efficiency Reports; Notification of Adverse Water; Continuous Monitoring Data Review Contingency Plans: Unsafe Water				Yes – Mandatory CCP

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Activity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	Risk Value	ССР?
	Filter breakthrough	Increased turbidity Ineffective removal of pathogens Filter efficiency failure	>Continuous online monitoring of turbidity with alarms >Alarm on high turbidity >Regular onsite visits >Regular backwashes >Redundancy; 2 filters >MIT done SOP: Filter Efficiency Reports; Notification of Adverse Water; Continuous Monitoring Data Review Contingency Plans: Unsafe Water				☑ Yes – Mandatory CCP
	Chemical soak clean failure	Increased turbidity Ineffective removal of pathogens Filter efficiency failure Production of water will decrease High TMP	>Continuous online monitoring of turbidity with alarms >Alarm on high turbidity >Redundancy; 2 filters >Two chemical feed pumps >Remote monitoring via Wonderware >Regular onsite visits SOP: Filter Efficiency Reports; Notification of Adverse Water; Continuous Monitoring Data Review	2	3		□ Yes – Mandatory CCP □ Yes ☑ No
Clearwell	Clearwell low level	Potential for not meeting CT Potential for not meeting fire flows	Contingency Plans: Loss of Service; Unsafe Water >Alarm setpoints above critical CT range >Online CT monitoring and manual CT calculations >Remote monitoring of process via Wonderware >Regular onsite visits >Continuous online monitoring of chlorine with alarms >Water making process set points well above alarm set points. SOP: Notification of Adverse Water; Continuous Monitoring Data Review; CT Requirement for Facility Contingency Plans: Unsafe Water	3	1		□ Yes – Mandatory CCP □ Yes ☑ No
Additional Chemical Injection	Citric acid system failure	Filter becomes clogged Low pressure within system	>Regular onsite visits SOP: Contingency Plans:	1	3		□ Yes – Mandatory CCP □ Yes ☑ No
High Lift Station	High lift pump failure for extended period of time	No pressure in distribution system Possible biological contamination due to infiltration	>Redundancy (2 pumps) >On-line pressure monitoring and alarms (entry to system and at tower) >Backup generator for loss of power >Complaint process from residents SOP: Provision of Alternate Water Source; Notification of Adverse Water; Community Complaints Contingency Plans: Loss of Service; Unsafe Water;	3	2		□ Yes – Mandatory CCP □ Yes ☑ No

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vity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	Risk Value	CCP?
ution	Loss of residual		>Increase disinfection >System wide residual testing >Annual scheduled flushing >Emergency flushing when required SOP: Notification of Adverse Water; Contingency Plans: Unsafe Water;				☑ Yes – Mandatory CCP
	Sustained pressure loss	Loss of secondary disinfection residual Possible biological contamination due to infiltration Inability to meet fire protection needs	>On-line pressure monitoring and alarms >Public health advisories: BWA/DWA >Alternate water supplies >Remote monitoring via Wonderware >Complaint process from residents SOP: Provision of Alternate Water Source; Notification of Adverse Water; Community Complaints Contingency Plans: Loss of Service;	1	3	3	□ Yes — Mandatory CCP □ Yes ☑ No
	Backflow	Possible biological/chemical contamination Damage to infrastructure Decrease of water supply	>System wide residual testing >Annual scheduled flushing >Emergency flushing when required SOP: Provision of Alternate Water Source; Notification of Adverse Water; Community Complaints Contingency Plans: Unsafe Water; Loss of Service	1	3	3	□ Yes – Mandatory CCP □ Yes ☑ No
	Main/pipe break	Reduced flow/inability to meet demand No or low pressure Possible biological contamination	>Municipal capital program for watermain replacement >Complaint process from residents SOP: Notification of Adverse Water; Community Complaints; Provision of Alternate Water Source; Watermain Disinfection Procedure Contingency Plans: Unsafe Water;	3	3	9	□ Yes — Mandatory CCP □ Yes ☑ No
	Major municipal fire	Low clear well Low / no pressure in sections of the distribution Inability to meet demand, Potential for not meeting CT Coloured water in distribution	>Online CT monitoring and manual CT calculations >Online monitoring of all regulatory parameters >Remote monitoring of process via Wonderware >Complaint process from residents >Adjust flow through filters to exceed demand SOP: Notification of Adverse Water; Community Complaints; Provision of Alternate Water Source Contingency Plans: Unsafe Water; Loss of Service	2	3	6	□ Yes – Mandatory CCP □ Yes ☑ No
	Cross connection	Biological / Chemical contamination	>Secondary residual monitoring >Plumbing code	2	4	8	□ Yes – Mandatory CCP □ Yes ☑ No

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Activity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	Risk Value	CCP?
Wild lines - distributio on private property	Private ownership - no access	Contamination to distribution Responsibility for repair	>Continuous process monitoring >Remote monitoring via Wonderware of flows >Support from Municipal staff	5	2	10	Yes – Mandatory CCPYes✓ No
Water Tower	Maintenance of water tower	Loss of pressure	SOP: Contingency Plans: Unsafe Water; >Remote monitoring via Wonderware	3	2	6	☐ Yes — Mandatory CCP
Trace Tones	Tower not available	Inability to meet demand	>On-line pressure monitoring and alarms >Public health advisories: BWA/DWA >Alternate water supplies				□ Yes ☑ No
			SOP: Notification of Adverse Water; Community Complaints Contingency Plans: Unsafe Water; Loss of Service				
Generator	Fail to start	No water production or supply	>Alarm set for tower level >Monthly generator inspection and run test under load >Remote monitoring of process via Wonderware >Complaint process from residents	2	4	8	□ Yes – Mandatory CCP□ Yes☑ No
			SOP: Notification of Adverse Water; Community Complaints; Provision of Alternate Water Source Contingency Plans: Loss of Service				
	Transfer fail	No power to plant Low / no pressure in sections of the distribution	>Monthly generator inspection and run test under load >Alarm set for tower level >Complaint process from residents	2	4	8	□ Yes – Mandatory CCP □ Yes ☑ No
			SOP: Notification of Adverse Water; Community Complaints; Provision of Alternate Water Source Contingency Plans: Loss of Service				
	Fuel spill	N/A	>Unit is propane >Unit is located outside of low lift building	0	0	0	□ Yes – Mandatory CCP□ Yes☑ No
	Low fuel (propane)	Low / no pressure in sections of the distribution No power to plant	>Alarm set for tower level >Low level propane alarms >Remote monitoring of process via Wonderware >Complaint process from residents >Emergency propane delivery	2	3	6	 Yes – Mandatory CCP Yes ✓ No
			SOP: Notification of Adverse Water; Community Complaints; Provision of Alternate Water Source Contingency Plans: Loss of Service				

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Activity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	Risk Value	CCP?
Control System (SCADA,PLC,Etc)	Power failure	Loss of SCADA	>Back up batteries >Generator for power outage SOP: Notification of Adverse Water; CT Requirement for Facility Contingency Plans: Loss of Service	2	2		□ Yes – Mandatory CCP□ Yes☑ No
	Equipment failure	Loss of SCADA Loss of automatic control of system Loss of regulatory data	>Onsite data loggers >Wonderware for offsite monitoring >Essential supplies list for contractor >Manual control of facility >Manual CT calculations SOP: Notification of Adverse Water; Provision of Alternate Water Source; CT Requirement for Facility Contingency Plans: Unsafe Water; Loss of Service	1	3		Yes − Mandatory CCPYesNo
Water Treatment System	Extreme weather event - Lightning storm	Loss of power to plant Damage to equipment Unknown treatment levels Unable to meet CT Damage to building		1	3		□ Yes – Mandatory CCP □ Yes ☑ No
	Extreme weather event - Ice storm	Loss of power to plant Damage to equipment Unknown treatment levels Unable to meet CT Damage to building		2	3		□ Yes – Mandatory CCP□ Yes☑ No

Activity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	Risk Value	CCP?
	Extreme weather event - Wind storm	Damage to building	>Working alone policy >Chemicals available in other hub locations >Remote monitoring via Wonderware >Municipal and Corporate emergency plans >Online CT monitoring and manual CT calculations >Alarm for power outage >Spare parts onsite >Manual control of operations SOP: Notification of Adverse Water; Provision of Alternate Water Source; Working Alone; CT Requirement for Facility Contingency Plans: Loss of Service; Unsafe Water		3		□ Yes – Mandatory CCP □ Yes ☑ No
	Extreme weather event - Winter storm				2		□ Yes – Mandatory CCP □ Yes ☑ No
	Sustained extreme temperatures - Heat wave			2	3 (□ Yes – Mandatory CCP□ Yes☑ No

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Activity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	Risk Value	CCP?
	Sustained extreme temperatures - Deep freeze	Frozen water tower Frozen watermains Increased main breaks Low/no pressure in distribution	>Public education - run taps to reduce frozen lines >Continuous online monitoring with alarms >Remote monitoring via Wonderware >Annual scheduled flushing >Emergency flushing when required SOP: Provision of Alternate Water Source;	2	3	6	□ Yes – Mandatory CCP □ Yes ☑ No
	Vandalism	Damage to building Damage to equipment Unknown treatment Contamination of source water Contamination of treated water	Contingency Plans: Loss of Service; Unsafe Water >Police Response >Equipment failure alarms >Continuous online monitoring with alarms >Remote monitoring via Wonderware >Security - fencing >Additional sampling SOP: Provision of Alternate Water Source; CT Requirement for Facility; Notification of Adverse Water;	1	1	1	□ Yes – Mandatory CCP □ Yes ☑ No
	Terrorist threat (physical)	Damage to building Damage to equipment Unknown treatment Contamination of source water Contamination of treated water Loss of SCADA	Contingency Plans: Security Breach; Loss of Service; Unsafe Water >Police Response >Equipment failure alarms >Continuous online monitoring with alarms >Remote monitoring via Wonderware >Additional sampling >Electronic security measures SOP: Provision of Alternate Water Source; CT Requirement for Facility; Notification of Adverse Water;	1	3	3	 Yes – Mandatory CCP Yes No
	Terrorist threat (cyber)	Contamination of treated water Loss of SCADA Unknown treatment Loss of propriotary information	Contingency Plans: Security Breach; Loss of Service; Unsafe Water >Intrusion detection systems constantly monitoring traffic flow (borders) >Firewalls that provide real-time filtering and blocking (walls) >Multi-factor authentication and encrypted virtual private networks (VPN) >Triple backup of systems and data >Carry out periodic cyber security audits and risk compliance checks >SCADA: No remote desktop software, no USBs, consoles, or physical access to ports >SCADA: Four levels of secure, complex password-protected logons >SCADA: All traffic on the network is encrypted to protect data in transit >SCADA: Segregation of duties to ensure no one person has full access to network, servers, and SCADA domains SOP: Provision of Alternate Water Source; CT Requirement for Facility; Notification of Adverse Water;	1	2	2	 Yes – Mandatory CCP Yes No

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Activity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	Risk Value	CCP?
	Long term impacts of climate change - Increase/decrease of water levels	Change in raw water characteristics Loss of water supply	>Continuous online monitoring with alarms >Remote monitoring via Wonderware >Regular onsite visits >Water use restrictions SOP: Provision of Alternate Water Source;	1	3	3	□ Yes – Mandatory CCP □ Yes ☑ No
	Long term impacts of climate change - Flooding in or around treatment facility	No power to plant Unsafe working conditions Damage to building Damage to equipment Contamination of treated water	Contingency Plans: Loss of Service; Unsafe Water > Alarm for power outage > Remote monitoring via Wonderware > Generator manual transfer > Municipal and Corporate emergency plans SOP: Notification of Adverse Water; Provision of Alternate Water Source; Working Alone Contingency Plans: Loss of Service	1	3	3	□ Yes – Mandatory CCP □ Yes ☑ No
	Long term impacts of climate change - Flooding throughout city	Unsafe working conditions No services (lab, chemical) or deliveries No power to plant Contamination of source water	>Alarm for power outage >Remote monitoring via Wonderware >Generator manual transfer >Municipal and Corporate emergency plans SOP: Notification of Adverse Water; Provision of Alternate Water Source; Working Alone Contingency Plans: Loss of Service	1	3	3	□ Yes — Mandatory CCP □ Yes ☑ No
	Long term impacts of climate change - Forest fires	No power to plant Unsafe working conditions No services (lab, chemical) or deliveries Lightning Storm	>Alarm for power outage >Remote monitoring via Wonderware >Generator manual transfer >Municipal and Corporate emergency plans >Chemicals available in other hub locations SOP: Notification of Adverse Water; Provision of Alternate Water Source; Working Alone; Forest Fire Evacuation; Contingency Plans: Loss of Service	1	3	3	□ Yes – Mandatory CCP □ Yes ☑ No
	Long term impacts of climate change - Increase/decrease in population	Decrease in water demand - process changes required Increase in water demand - (see water supply shortfall)	>Municipal capital program >Long term forecasting of capital projects >Continuous process monitoring SOP: Provision of Alternate Water Source; Contingency Plans: Loss of Service;	2	2	4	□ Yes – Mandatory CCP □ Yes ☑ No

Summary of Risk Assessment Outcomes Kagawong Water Supply

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Activity / Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence	KISK Value CCP?
	Long term impacts of climate change -			4 2	8	☐ Yes — Mandatory CCP
	disease / pandemic	_ =	>Staff trained to work in multiple types of systems			
			>Municipal and Corporate emergency plans			□ Yes
			>Long term forecasting of capital projects			☑ No
		Low availability of chemicals	>Chemicals available in other hub locations			
			SOP: ALL are helpful to supporting staff			
			Contingency Plans: Loss of Service; Critical Shortage of Staff;			

Summary of Risk Assessment Outcomes Kagawong Water Supply

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Table 2: Critical Control Limits

ССР	Critical Control Limits	Monitoring Procedures	Response, Reporting and Recording Procedures
Filtration	Turbidity Alarm (each filter):	>Continuous online monitoring of turbidity with alarms	Adverse Water Quality Reporting SOP
Process			Corrective Actions SOP
		>Operational system checks	Plant shutdown on high turbidity
	Dongs O FO to O SO NTU	>Filter Efficiency is monitored to ensure 0.10	Call outs recorded in WMS.
	Range 0.50 to 0.80 NTU	NTU 99% of the time on a monthly basis.	Filter turbidity reported in PDM
	Plant shutdown at 1.0 NTU		Exceedances during scheduled hours recorded in facility logbooks
			Contingency for <i>unsafe water</i>
Sodium	Free chlorine residual:	>Operational system checks	Adverse Water Quality Reporting SOP
Hypochlorite			Corrective Actions SOP
System	Low alarm setpoint range: 0.6 - 1.0 mg/L	>Continuous online monitoring of chlorine with alarms	Increase disinfection
	High alarm setpoint range: 3.2 - 3.7 mg/L		Chlorine residual reported in PDM
			Call outs recorded in WMS.
			Exceedances during scheduled hours recorded in facility logbooks
			Contingency for <i>unsafe water</i>
Secondary	Free Chlorine residual 0.20 mg/l	>Continuous online monitoring with alarms	Chlorine residual reported in PDM
Disinfection		>Remote monitoring via Wonderware	Call outs recorded in WMS.
			Increase disinfection
			Distribution flushing
			Adverse Water Quality Reporting SOP
			Corrective Actions SOP
			Contingency for <i>unsafe water</i>

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Table 3: Record of Annual Review

Participants	Date of Review	Reason for Review (e.g. management review, annual review, etc.)
Dan Clark – PCT Gerry Armstrong – Operator / Mechanic	09-Jun-11	Annual review during internal audit
Dan Clark – PCT Gerry Armstrong – Operator / Mechanic	31-May-12	Annual review during internal audit
Keith Stringer – Ops Manager Dan Clark - PCT	Mar 26-13	36 Month re-write
Natalie Wagar – PCT Kevin Woestenenk - Operator	12-Jun-14	Annual review during internal audit
Natalie Wagar – PCT Kevin Woestenenk - Operator	09-Jun-15	Annual review during internal audit
Natalie Wagar – PCT Keith Stringer – Ops Manager	04-Nov-15	36 Month re-write
Sarah Beaulieu - PCT Natalie Wagar – PCT	10-Jun-16	Review and additional re-write
Sarah Beaulieu - PCT Natalie Wagar – PCT	20-Jun-17	Annual review during internal audit
Sarah Beaulieu - PCT Natalie Wagar – PCT	08-Aug-18	Annual review
Natalie Wagar, PCT Patti O'Handley, Operations Management Keith Stringer, Operations Management	10-Jan-19	36 month re-write
Natalie Wagar, PCT Sarah Beaulieu - PCT	21-Aug-19	Annual review

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Participants	Date of Review	Reason for Review (e.g. management review, annual review, etc.)
Natalie Wagar, PCT	28-Apr-20	Annual Review - no changes
Sarah Beaulieu - PCT Natalie Wagar – PCT	14-Oct-21	Annual review and 36 month re-write
Natalie Wagar – PCT Kevin Woestenenk - Operator	10-May-22	Annual review during internal audit
Sarah Beaulieu - PCT Leslie Campbell - PCT Keith Stringer - General Manager	22-Nov-23	Annual review during management review

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Revision History

Date	Revision #	Reason for Revision
01-Apr-10	0	Initial risk assessment conducted
29-Jun-11		Change CCP alarm points for filter turbs.
16-Mar-12	1	Change Table 2 Monitoring Procedures for filtration process & hypochlorite system. Add table 3.
18-Jul-12	2	Add CCP tracking method to Table 2.
26-Mar-13	3	Add generator, remove statement on, Backflow bylaw and Municipal fire statement on filter flows exceeding demand.
14-Jul-16	4	Risk assessment re write; Added new events, moved format to excel, added specific SOP and Contingencies, changed limits to range values, removed reference to Hansen,
08-Nov-16	5	Corrected formatting issues and spelling mistakes. Adjusted header and footer to repeat on each page
20-Jun-17	6	"Added water supply shortfall to source water; reworded the spill event in source water; changed the order of events in source water; moved primary disinfection activity up in the list; added membrane failure to filtration activity; added backwash valve failure to filtration activity; moved clearwell activity up the list; added 'sustained pressure loss' and 'backflow' events to distribution activity;
23-Jan-19	7	Removed reference to old procedures QP-02; added QEMS document number; made minor formatting changes to page layout, margins and headers. Changes made through the rewrite include: Removed reference to the low pressure SOP; added control measures to 'filter breakthrough'; removed chemical 'sulphuric acid' from hazards; added 'zebra mussel pump failure' hazard; added 'chemical soak clean failure' as a hazard; added 'control system' as an activity; added SOP to 'frazzle ice' hazard; added SOP watermain disinfection to 'main pipe break' hazard;

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Date	Revision #	Reason for Revision
25-Oct-19	8	Updated the names of the blue green algae and CT SOP; added corrective action SOP to table 2: response, reporting, & recording procedures; removed control measure 'handheld readings' from primary disinfection - pump failure; added control measure to algal bloom
14-Oct-21	9	Changed likelihood for increase/decrease population; Added "Long term impacts of climate change - disease / pandemic" to description of hazardous event; Renamed SOP "Responding to Blue Green Algae" to "Monitoring for Harmful Algae Blooms"; added SOP Operations During a Harmful Algae Bloom to source raw; removed chemical injections - Clean in place cycle failure & Calcium thiosulphate system failure & Sodium hydroxide system failure as they have no bearing on drinking water; added 'wildlines' as an activity next to distribution;
13-Oct-22	10	Separated terrorist -physical and cyber- security; added cyber security measures taken by OCWA
26-Apr-23	12	Changed the critical control limit for distribution chlorine to 0.20 and added distribution flushing to the response section -all changes made to table 2
12-Mar-24	13	Added spare analyzers at hub office as a control measure; added Forest Fire Evacuation SOP an a control measure; updated the likelyhood of frazzle ice to 3; update major municipal fire likelihood in RA to two (2); update water tower loss of pressure likelihood in RA to three (3); Line 85 (filtration) was revised to read "unable to meet log removal requirements"; Update RA to remove references to CT for Zebra Mussel pump failure

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ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To document the following for the *Kagawong Drinking Water System*:

- owner:
- organizational structure of the operating authority;
- QEMS roles, responsibilities and authorities of staff, top management and individuals/groups that provide corporate oversight; and
- responsibilities for conducting the management review

2. Definitions

Operations Management – refers to the general manager, senior operations manager and/or operations manager that directly oversees a facility's operations

Senior Leadership Team (SLT) – members include president and CEO, executive vice president and general counsel, vice presidents of OCWA's business units and regional hub managers

Top Management – a person, persons or a group of people at the highest management level within an operating authority that makes decisions respecting the QMS and recommendations to the owner respecting the subject system or subject systems

Operations Personnel – employees of the drinking water system who perform various activities related to the compliance, operations and maintenance of the drinking water system that may directly affect drinking water quality

3. Procedure

3.1 Organizational Structure

The *Kagawong Drinking Water System* is owned by The Corporation of the Township of Billings and is represented by the Mayor and Clerk/Treasurer.

The organizational structure of OCWA, the operating authority, is outlined in appendix OP-09A: Organizational Structure.

3.2 Top Management

Top management for the Kagawong Drinking Water System consists of:

- Sr. Operations Management Manitoulin Island Area
- Regional Hub Manager Northwestern Ontario, Espanola
- Safety, Process & Compliance Manager Northwestern Ontario, Espanola

Irrespective of other duties (see Table 9-2 below), top management's responsibilities and authorities include:



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ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: PCT Approved by: Operations Management

- endorsing the Operational Plan as per the Commitment and Endorsement procedure (OP-03);
- ensuring that the QEMS meets the requirements of the DWQMS:
- ensuring staff are aware of the applicable legislative and regulatory requirements;
- communicating the QEMS according to the Communications procedure (OP-12);
- providing resources needed to maintain and continually improve the QEMS;
- appointing and authorizing a QEMS Rep. (OP-04); and
- undertaking management reviews as per the Management Review procedure (OP-20).

Note: Specific responsibilities of the individual members of top management are identified in the referenced procedures.

3.3 Corporate Oversight

Roles, responsibilities and authorities for individuals/groups providing corporate oversight of OCWA's QEMS are summarized in Table 9-1 below.

Table 9-1: Corporate QEMS Roles, Responsibilities and Authorities

Role	Responsibilities and Authorities
Board of Directors	Review and approve the QEMS Policy
	Set the Agency's strategic direction, monitor overall performance and ensure appropriate systems and controls are in place in accordance with the Agency's governing documents
Senior Leadership Team (SLT)	 Approve corporate QEMS programs and procedures Establish the Agency's organizational structure and governing documents and ensure resources are in place to support strategic initiatives Monitor and report on OCWA's operational and business performance to the Board of Directors Review the QEMS Policy and recommend its approval to the Board
Corporate Compliance	 Consult with the Ministry and other regulators and provide compliance support/guidance on applicable legislative, regulatory and policy requirements Manage contract with OCWA's DWQMS accreditation body Manage the QEMS Policy and corporate QEMS programs and procedures Monitor and report on QEMS performance and any need for improvement to SLT Provide support for the local implementation of the QEMS



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3.4 Regional Hub Roles, Responsibilities and Authorities

QEMS roles, responsibilities and authorities of regional hub personnel are summarized in Table 9-2 below. This information is kept current as per the Document and Records Control procedure (OP-05) and is communicated to staff as per the Communications procedure (OP-12).

Additional duties of employees are detailed in their job specifications and in the various QEMS programs and procedures that form, or are referenced in, this Operational Plan.

Table 9-2: QEMS Roles, Responsibilities and Authorities for the Northwestern Ontario – Espanola Hub

Role/Position	Responsibilities and Authorities
All Operations Personnel	 Attend/participate in training relevant to their duties under the QEMS Be aware of environmental and public health risks at the facility Be familiar with the QEMS policy and work in accordance with QEMS programs and procedures Document all operational activities Identify potential hazards at their facility that could affect the environmental and/or public health and report to operations management Maintain operator certification (as required) Perform duties in compliance with applicable legislative and regulatory requirements Recommend changes to improve the QEMS Report and act on all operational incidents
Regional Hub Manager (Top Management)	 Ensure corporate QEMS programs and procedures are implemented consistently throughout the regional hub Fulfill role of top management Oversee the administration and delivery of contractual water/wastewater services on a regional hub level Report to VP of operations/SLT on the regional performance of the QEMS and any need for Agency-wide improvement
Operations Management (Top Management & QEMS Rep.)	 Act as Overall Responsible Operator (ORO) when required. Determine necessary action and assign resources in response to operational issues Ensure corporate and site-specific QEMS programs and procedures are implemented at their assigned facilities Ensure operational training is provided for their staff (in consultation with the SPC manager as required) Fulfill role of top management



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Role/Position	Responsibilities and Authorities
	 Manage the day-to-day operations and maintenance of their assigned facilities and supervise facility operational staff Report to the regional hub manager on facility operational performance
Safety, Process & Compliance (SPC) Manager (Top Management)	 Act as alternate QEMS Rep. (when required) Assist in the development of site-specific operational procedures as required Ensure corporate/regional QEMS programs and procedures are implemented consistently throughout the regional hub Ensure training on applicable legislative and regulatory requirements and the QEMS is provided for the regional hub (in consultation with operations management as required) Fulfill role of top management Monitor and report to the regional hub manager and operations management on the compliance status and QEMS performance within their regional hub and any need for improvement Supervise facility compliance staff and provide technical and program support to the regional hub related to process control and compliant operations
Process & Compliance Technician (PCT) (QEMS Rep.)	 Communicates to owners on facility compliance and DWQMS accreditation as directed Deliver/participate in/coordinate training including applicable legislative and regulatory requirements and the QEMS Fulfill role of QEMS Rep. (OP-04) Implement facility-specific QEMS programs and procedures consistently at their assigned facilities Implement, monitor and support corporate programs relating to environmental compliance and support management by evaluating and implementing process control systems at their assigned facilities May act as Operator-in-Charge (OIC) and/or Overall Responsible Operator (ORO) when required. Monitor, evaluate and report on compliance/quality status of their assigned facilities Participate in audits and inspections and assist in developing, implementing and monitoring action items to respond to findings Report to the SPC manager on QEMS implementation and identify the need for additional/improved processes and procedures at the Regional Hub/cluster/facility level (in consultation with the operations management as required)
Maintenance Electrician	Assist management in providing recommendations for annual capital forecasts and gathering information for operational reports as required



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ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: PCT Approved by: Operations Management

Role/Position	Responsibilities and Authorities
	 Examine, trouble shoot and carry out systematic diagnostic testing of faults/failures, identification, assessment, repairs/service to equipment, fixtures and other electrical component Install and commission new electrical/electronic equipment and automation systems Perform duties as assigned by operations management Perform repairs, inspections, preventive maintenance and/or scheduled maintenance on electrical systems, equipment, components and devices in accordance with established procedures and record the maintenance data
Distribution Team Lead	 Assist management in providing recommendations for annual capital forecasts and gathering information for operational reports as required May fulfill role of Certified Operator when required (based on certification). Oversee maintenance activities on equipment and process in order to maintain compliance with applicable legislation, regulations, approvals and established operating procedures Participate as a technical advisor to staff and management and provide specialized training on technical or other issues Perform duties as assigned by operations management Perform duties of a Water & Wastewater Operator as required Prepare and/or coordinate staff work assignments and follow up to ensure completion. Regularly inspect operating equipment, perform routine preventive maintenance and repairs
Certified Operator Including the following positions: • Operations Supervisor Water & Wastewater • Senior Water & Wastewater Operator • Water & Wastewater Wastewater	 Actively participate in the development and maintenance of facility emergency plans and assist with emergencies as required. Assist management in providing recommendations for annual capital forecasts and gathering information for operational reports as required Collect samples and perform laboratory tests and equipment calibrations as required Ensure records of adjustments made to the process under their responsibility, equipment operating status during their shifts and any departures from normal operations observed and actions taken are maintained within facility logs/record keeping mechanisms (as per O. Reg. 128) May act as Operator-in-Charge (OIC) and/or Overall Responsible Operator (ORO) when required.



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ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

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Role/Position	Responsibilities and Authorities
Operator-In- Training (OIT)	 Monitor, maintain and operate facilities in accordance with applicable regulations, approvals and established operating procedures Participate in facility inspections and audits Participate as a technical advisor to staff and management and provide specialized training on technical or other issues. Perform duties as assigned by operations management Perform duties outlined under Operations Personnel Regularly inspect operating equipment, perform routine preventive maintenance and repairs and prepare and complete work orders as assigned NOTE: OITs cannot act as OIC and/or ORO. OITs perform the above duties under the direction of the OIC/ORO and as assigned by Operations Management or designate.
Administrative Assistant/Project Clerk	Support the administrative functions of the Regional Hub/cluster/facility including coordinating delivery of training as directed
Municipal Distribution Employees	 Investigate water quality disturbances/complaints and troubleshoot root causes of issues and perform remedial action. Conduct distribution system sampling for Cl2 residual, temperature and PH. Perform bacteriological sampling and delivery to accredited laboratory for analysis. Perform uni-directional flushing of the distribution system. Assist with swabbing of the distribution system. Repair pipes and appurtenances in the distribution system. Attend training to maintain license. Assist Management with policy and procedure development as well as contribute in meetings relating to system condition and areas of focus for repairs/upgrades. Locate buried water utilities for excavators.

4. Related Documents

OP-03 Commitment and Endorsement

OP-04 QEMS Representative

OP-05 Document and Records Control

OP-09A Organizational Structure

OP-12 Communications

OP-20 Management Review



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ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: PCT Approved by: Operations Management

5. Revision History

Date	Revision #	Reason for Revision
03-Oct-18	0	Procedure issued – Information within OP-09 was originally set out in the main body of OCWA's Operational Plan (last revision # 22 dated 17-Jan-18). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Added definitions for Operations Management and Operations Personnel and throughout procedure replaced 'Senior Operations Manager' references with 'Operations Management'. Added QEMS Roles, Responsibilities and Authorities for Administrative Assistant/Project Clerk, Team Leads, Electricians and Mechanics. Added role of Maximo Primary.
06-Feb-20	1	Added OIT as a role
19-Sep-24	2	Procedure updated [update revision history based on your current OP-09 revision history] with revisions to Table 9-2 as follows: Role/Position updated to clarify roles are performed by multiple positions, position titles updated, note added regarding OITs operating limitations, removed responsibilities that no longer apply, removed unused roles. Additional revisions include replaced MOECC with Ministry, minor rewording, minor editing and type-o's, removed watermark.



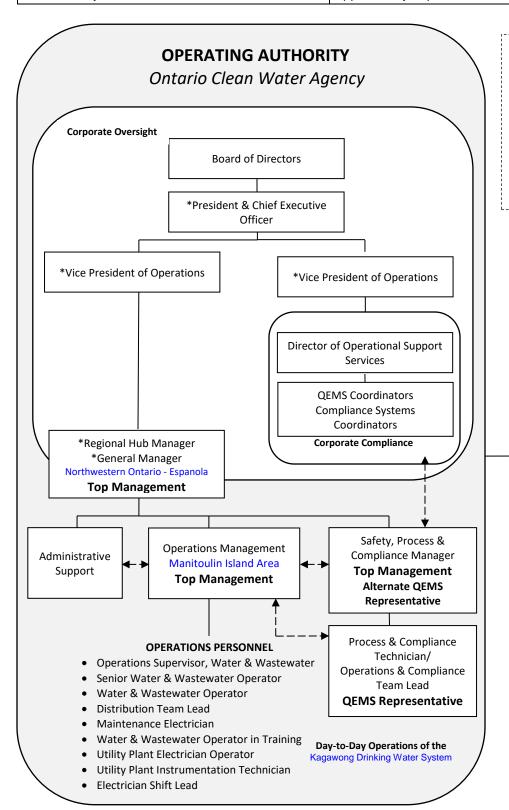
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ORGANIZATIONAL STRUCTURE

Reviewed by: PCT Approved by: Operations Management



*NOTE: Members of OCWA's Senior Leadership Team (SLT) include:

- President and CEO &
 Executive Vice President and
 General Counsel
- Vice Presidents of OCWA's business units (includes VPs of Operations)
- Regional Hub Managers
- General Manager

OWNER

The Corporation of the Township of Billings



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ORGANIZATIONAL STRUCTURE

Reviewed by: PCT Approved by: Operations Management

Revision History

Date	Revision #	Reason for Revision
16-Mar-12	1	Procedure issued
25-Jul-15	2	Revision table added and Northern VP removed
4-Nov-16	3	Updated table with new positions
04-Apr-17		Minor formatting
18-Jul-17	4	Added positions to Facility Staff section
19-Jul-18	5	Appendix issued - Organizational Chart previously contained as Appendix C of the Operational Plan. Moved to a new Appendix Removed two levels of Top Management (e.g. Facility Level and Corporate level), instead Top Management is only at the facility level and corporate has been moved to Corporate oversight. Added Administrative Support.
21-Apr-20	6	Added OIT to the list of operations personnel
19-Sep-24	7	Revised to include Senior Leadership Team (SLT) in reporting structure and identify members, added Compliance System Coordinators, updated Operations Personnel position titles. Removed watermark.



Kagawong Drinking Water System

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COMPETENCIES

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To document a procedure that describes:

- the competencies required for personnel performing duties directly affecting drinking water quality;
- the activities to develop and/or maintain those competencies; and
- the activities to ensure personnel are aware of the relevance of their duties and how they affect safe drinking water.

2. Definitions

Competence – the combination of observable and measurable knowledge, skills, and abilities which are required for a person to carry out assigned responsibilities

Operations Management – refers to the general manager, senior operations manager and/or operations manager that directly oversees a facility's operations

Operations Personnel – employees of the drinking water system who perform various activities related to the compliance, operations and maintenance of the drinking water system that may directly affect drinking water quality

Top Management – a person, persons or a group of people at the highest management level within an operating authority that makes decisions respecting the QMS and recommendations to the owner respecting the subject systems

3. Procedure

3.1 The following table presents the minimum competencies required by operations personnel.

Position/Role	Required Minimum Competencies
Operations Management (Top Management)	 Valid operator certification; minimum OIT or must have a certificate of the same type and class as or higher than the class of subsystem if required to act as OIC and/or- ORO. An operator with a certificate one class lower than the class of the subsystem may assume ORO responsibility for up to 150 days a year as a back-up when the ORO with the appropriate qualifications is absent or unable to act. If required to act as OIC must have same type of certificate as subsystem, but it can be a lower class of certificate than the class of subsystem. e.g. treatment type, class I as per O. Reg. 128/04. Experience and/or training in managing/supervising drinking water system operations, maintenance, financial planning and administration Experience using computers and operational computerized systems



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COMPETENCIES

Reviewed by: PCT Approved by: Operations Management

Position/Role	Required Minimum Competencies
	 Training and/or experience related to drinking water system processes, principles and technologies Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures
Safety, Process & Compliance (SPC) Manager (Top Management) (May also fulfill the role of Alternate QEMS Representative)	 Experience and/or training in conducting compliance audits, and management system audits Experience and/or training in preparing and presenting informational and training material Experience in providing technical support and leading/managing programs related to process control and compliant operations Experience using computers and operational computerized systems Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures
Process & Compliance Technician	 Valid operator certification; minimum OIT or must have a certificate of the same type and class as or higher than the class of subsystem if required to act as OIC and/or- ORO. An operator with a certificate one class lower than the class of the subsystem may assume ORO responsibility for up to 150 days a year as a back-up when the ORO with the appropriate qualifications is absent or unable to act. If required to act as OIC must have same type of certificate as subsystem, but it can be a lower class of certificate than the class of subsystem. e.g. treatment type, class I as per O. Reg. 128/04. Experience and/or training in monitoring, assessing and reporting on facility performance against legal requirements and corporate goals Experience and/or training in preparing and presenting informational and training material Experience and/or training in resolving/addressing compliance issues for drinking water systems Experience in conducting management system audits or internal auditor education/training Experience using computers and operational computerized systems Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures
Maintenance Electrician	Ability to work from plans and schematic diagrams



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COMPETENCIES

Reviewed by: PCT Approved by: Operations Management

Position/Role	Required Minimum Competencies
	 Completion of any electrical or electronic training program certified by the Ministry of Advanced Education and Skills Development (formerly the Ministry of Training, Colleges and Universities) Experience and/or training in monitoring, programming, installing and troubleshooting network, hardware, software and instrumentation Experience in performing maintenance and repair of electrical and electronic equipment Experience using computers and operational computerized systems Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures
Distribution Team Lead	 Valid operator certification; - If required to act as ORO certification must be of the same type and class as, or higher than, the class of subsystem. An operator with certificate one class lower than the class of the subsystem may assume ORO responsibility for up to 150 days a year as a back-up when the ORO with the appropriate qualifications is absent or unable to act as per O. Reg. 128/04If required to act as Operator-in-Charge (OIC), certification must be level 1 or higher Ability to work from plans and schematic diagrams Experience and/or training in monitoring, assessing and reporting on facility performance against legal requirements and corporate goals Experience and/or training in preparing and presenting informational and training material Experience using computers and operational computerized systems Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures
Certified Operator Including the following positions: Operations Supervisor Water & Wastewater Senior Water & Wastewater Operator	 Valid operator certification; If required to act as ORO certification must be of the same type and class as, or higher than, the class of subsystem. An operator with certificate one class lower than the class of the subsystem may assume ORO responsibility for up to 150 days a year as a back-up when the ORO with the appropriate qualifications is absent or unable to act as per O. Reg. 128/04. If required to act as Operator-in-Charge (OIC), certification must be level 1 or higher Experience using computers and operational computerized systems Knowledge to use and understand operating and maintenance manuals, blueprints and other technical specifications



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COMPETENCIES

Reviewed by: PCT Approved by: Operations Management

Position/Role	Required Minimum Competencies		
 Water & Wastewater Operator Water & Wastewater Operator-In- Training (OIT) 	 Training and experience in inspecting and monitoring drinking water system processes and performing/planning maintenance activities Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures 		
Municipal Distribution Operator	Valid operator certification; minimum DW OIT or minimum DW1 if required to act as ORO Knowledge and/or training of the following: traffic control (Book 7) trenching techniques customer service reporting procedures (AWQI & OCWA correspondence) regulations (Reg 170 & Reg 128) pipe/service repair techniques hydraulics & pumps uni-directional flushing procedures/techniques swabbing procedures/techniques map reading locates (procuring & understanding minimum clearance & locating own buried utilities) valve operation & maintenance hydrant operation & maintenance water quality troubleshooting live taps		

3.2 The following table presents the minimum competencies required by staff that provides administrative support to operations personnel.

Position/Role	Required Minimum Competencies	
Administrative Assistant/Project Clerk	 Experience and/or training related to procurement and business administration practices Experience using computers and operational computerized systems Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures 	

3.3 Municipal Staff may assist in the maintenance activities in the distribution system. The municipal staff may not perform duties that require a certified operator as per the MOE guidance unless being directly supervised by a certified operator. The municipal staff



Kagawong Drinking Water System

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COMPETENCIES

Reviewed by: PCT Approved by: Operations Management

will have training in the operation of valves and hydrants and training records provided to the operating authority.

- 3.4 OCWA's recruiting and hiring practices follow those of the Ontario Public Service (OPS). As part of the OPS, minimum competencies, which include education, skills, knowledge and experience requirements, are established when designing the job description for a particular position. As part of the recruitment process, competencies are then evaluated against the job description. Based on this evaluation, the hiring manager selects and assigns personnel for specific duties.
- 3.5 OCWA's Operational Training Program aims to:
 - develop the skills and increase the knowledge of staff and management;
 - provide staff with information and access to resources that can assist them in performing their duties; and
 - assist OCWA certified operators in meeting the legislative and regulatory requirements with respect to training.
- 3.6 The program consists of director approved, continuing education and on-the-job training and is delivered using a combination of methods (e.g., traditional classroom courses, e-learning/webinars and custom/program-based courses/sessions). A formal evaluation process is in place for all sessions under the operational training program and is a critical part of the program's continual improvement.
- 3.7 Awareness of OCWA's QEMS is promoted during the orientation of new staff, at facility/cluster/regional hub level training sessions and meetings and through OCWA's Environmental Compliance 101 (EC 101) course. It is recommended that the EC 101 course is taken within their first year of joining OCWA. The purpose of the EC 101 course is to ensure staff is aware of applicable legislative and regulatory requirements, to promote awareness of OCWA's QEMS and to reinforce their roles and responsibilities under OCWA's QEMS.
- 3.8 Staff is required to complete the training listed in OCWA's Mandatory Training Requirements procedure, based on their position and/or the duties they perform. This list includes mandatory environmental and health and safety compliance training, as well as the training deemed mandatory by OCWA corporate and Ontario Public Service (OPS) policies and is available on OCWA's intranet (sharepoint site).
- 3.9 Operations personnel receive site-specific training/instruction on relevant operational and emergency response procedures to ensure effective operational control of processes and equipment which may impact the safety and quality of drinking water.
- 3.10 As part of OCWA's annual Performance Planning and Review (PPR) process, employee performance is evaluated against employee job expectations. Professional development opportunities and training needs, which could include formalized courses as well as site-specific on-the-job training or job shadowing/mentoring, are identified as part of this process and on an ongoing basis. In addition to this process, OCWA



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COMPETENCIES

Reviewed by: PCT Approved by: Operations Management

employees may at any time request training from either internal or external providers by obtaining approval from their manager.

- 3.11 Certified drinking water operators are responsible for completing the required number of training hours in order to renew their certificates based on the highest class of drinking water subsystem they operate. They are also responsible for completing mandatory courses required by Safe Drinking Water Act (SDWA) O. Reg. 128/04 Certification of Drinking Water System Operators and Water Quality Analysts. The operations management takes reasonable steps to ensure that every operator has the opportunity to attend training to meet the requirements.
- 3.12 It is the responsibility of operations personnel to ensure Operations Management are aware of any change to the status/classification of their drinking water operator certificate(s), the validity of their driver's licence (required to hold at a minimum a Class G license which is initially verified upon hire) and/or the validity of any other required certificates/qualifications.
- 3.13 Individual OCWA employee training records are tracked using a computerized system.
- 3.14 Training records are maintained and controlled as per OP-05 Document and Records Control.

4. Related Documents

OCWA's Mandatory Training Requirements (OCWA intranet/sharepoint)
Operations Personnel Licence Certificates
Performance Planning and Review Database
Training Records
OP-5 Document and Records Control
OCWA Training Summary Database



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COMPETENCIES

Reviewed by: PCT Approved by: Operations Management

5. Revision History

Date	Revision #	Reason for Revision
04-Oct-18	0	Procedure issued – Information within OP-10 was originally set out in the main body of OCWA's Operational Plan (last revision # 11 dated 22-Jan-18). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Added definitions for Operations Management and Operations Personnel and throughout procedure replaced 'Senior Operations Manager' references with 'Operations Management'. Modified table in procedure (s. 3.1 and s. 3.2): removed/revised non-measurable competencies, added the word 'minimum' to competencies; removed 'Valid Class G Driver's License' listed under individual positions and referenced in s. 3.11; added competencies for SPC Managers and Admin Assistants and merged competencies for Senior Operations Manager and Operations Manager under Operations Management. Updated training sections (s. 3.4 to s. 3.7) to reference new Environmental 101 course, Mandatory Compliance Training list and removed specific references to Orientation Training Program. Added s. 3.11 related to ensuring operators make Operations Management aware of changes to operator certification and other certificates/licenses. Other minor changes to wording.
20-Jan-20	1	Added section 3.3 to address municipal staff working in the distribution
20-Feb-24	3	Updated this element to remove requirement for minimum class 2 license if required to be ORO and/or OIC and worded to match and refer to O. Reg. 128/04. Removed use of the word "also" where unnecessary.
19-Sep-24	4	Procedure updated with revisions to table in 3.1 Role/Position updated to clarify roles are performed by multiple positions, position titles updated, removed watermark, updated Procedure to reflect changes to title and content of OCWA's Mandatory Training Requirements Document, added sharepoint, removed positions that no longer exist



Kagawong Drinking Water System

QEMS Proc.: OP-11 Rev Date: 19-Jul-18 Rev No: 4 Pages: 1 of 2

PERSONNEL COVERAGE

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe the procedure for ensuring that sufficient and competent personnel are available for duties that directly affect drinking water quality at the *Kagawong Drinking Water System*.

2. Definitions

Competency – an integrated set of requisite skills and knowledge that enables an individual to effectively perform the activities of a given occupation *

Essential Services – services that are necessary to enable the employer to prevent,

- (a) danger to life, health or safety,
- (b) the destruction or serious deterioration of machinery, equipment or premises,
- (c) serious environmental damage, or
- (d) disruption of the administration of the courts or of legislative drafting.

(Crown Employees Collective Bargaining Act, 1993)

3. Procedure

3.1 Operations management ensures that personnel meeting the competencies identified in OP-10 Competencies are available for duties that directly affect drinking water quality.

The *Kagawong Drinking Water System* is staffed by OCWA personnel as per the operational schedule.

3.2 Operations personnel are assigned to act as and fulfill the duties of Overall Responsible Operator (ORO) and Operator-in-Charge (OIC) in accordance with SDWA O. Reg. 128/04.

Operations management will designate the ORO and the information is recorded in the facility's logbook.

The designated OIC for each shift is recorded in the facility logbook.

- 3.3 Operations management assigns an on-call operator for the time that the facility is unstaffed (i.e., evenings, weekends and statutory holidays).
- 3.4 The schedule consists of a weekly rotation with a shift change occurring each Friday. The on-call schedule is posted on outlook at least 3 months in advance.

^{*} Based on the 2005 National Occupational Guidelines for Canadian Water and Wastewater Operators and International Board of Standards for Training, Performance and Instruction



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QEMS Proc.: OP-11 Rev Date: 19-Jul-18 Rev No: 4 Pages: 2 of 2

PERSONNEL COVERAGE

Reviewed by: PCT Approved by: Operations Management

- 3.5 The on call operator responds to facility alarms after hours, on weekends and statutory holidays. Details of alarm responses are documented in the call in report.
- 3.6 The Auto Dialer is programmed to contact the on call operator's cell phone whenever there is an alarm condition. If the nature of the alarm requires additional staff, the oncall operator can request assistance from any of the other certified operators.
- 3.7 Each manager (e.g. operations management/SPC manager) is responsible for approving vacation time for their staff in a manner which ensures sufficient personnel are available for the performance of normal operating duties.
- 3.8 OCWA's operations personnel are represented by the Ontario Public Service Employees Union (OPSEU). In the event of a labour disruption, operations management, together with the union, identifies operations personnel to provide "essential services" required to operate the facility so that the quality of drinking water is not compromised in any way.
- 3.9 A contingency plan for Critical Shortage of Staff provides direction in the event that there is a severe shortage of operations personnel due to sickness (e.g., pandemic flu) or other unusual situations.

4. Related Documents

Call-In Reports
Critical Shortage of Staff Contingency Plan
On-Call Schedule
OP-10 Competencies

5. Revision History

Date	Revision #	Reason for Revision
01-Apr-10	0	Procedure issued
16-Mar-12	1	Change Management Position titles
28-Nov-16	3	Changed wording to section 5.4 and split information into 2 separate points creating section 5.5; removed 'where to find it' out of section 6. Added the appendix cover sheet
20-Jun-17		Minor formatting
19-Jul-18	4	QP-03 procedure renamed OP-11. Removed Scope and Responsibilities sections. Removed specific hours of personnel coverage and reworded ORO designation. Other minor edits in wording.



Kagawong Drinking Water System

QEMS Proc.: OP-12 Rev Date: 17-Aug-18 Rev No: 3

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Pages:

COMMUNICATIONS

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe the procedure for facility level internal and external QEMS-related communications between top management and:

- OCWA staff;
- the owner;
- essential suppliers and service providers (as identified in OP-13); and
- the public.

2. Definitions

Operations Management – refers to the general manager, senior operations manager and/or operations manager that directly oversees a facility's operations

Operations Personnel – employees of the drinking water system who perform various activities related to the compliance, operations and maintenance of the drinking water system that may directly affect drinking water quality.

3. Procedure

- 3.1 Operations management and the QEMS rep. are responsible for identifying and coordinating any site-specific communications in relation to the status/ development of the facility's QEMS.
- 3.2 Internal and external communication responsibilities and reporting requirements for emergency situations are set out under OCWA's Emergency Management Program. Refer to OP-18 Emergency Management for more information.
- 3.3 Communication with OCWA staff:
 - 3.3.1 Within the first year of hire, staff is scheduled to attend the Environmental Compliance 101 (EC101) course. The objective of the EC 101 course is to ensure that staff is aware of applicable legislative and regulatory requirements and of OCWA's QEMS and to reinforce their roles and responsibilities under OCWA's QEMS.
 - 3.3.2 Operations management are responsible for ensuring operations personnel receive site-specific training on the Operational Plan, the organizational structure for the facility including the roles and responsibilities and authorities (outlined in OP-09 Organizational Structure, Roles, Responsibilities and Authorities), QEMS procedures and other related operating instructions and procedures as part of the orientation process and on an on-going basis as required.



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QEMS Proc.: OP-12 Rev Date: 17-Aug-18 Rev No: 3 Pages: 2 of 4

COMMUNICATIONS

Reviewed by: PCT Approved by: Operations Management

- 3.3.3 The SPC manager is responsible for ensuring training is provided for the regional hub (in consultation with operations management as required) on applicable legislative and regulatory requirements and the QEMS.
- 3.3.4 The QEMS rep. assists operations management and/or the SPC manager in the coordination/delivery of training as required.
- 3.3.5 Revisions to the QEMS and associated documentation are communicated as per OP-05 Document and Records Control.
- 3.3.6 The QEMS policy is available to all OCWA personnel through OCWA's intranet and as outlined in 3.6.2 of this procedure.
- 3.3.7 Operations personnel are responsible for identifying potential hazards at the facility that could affect the environmental and/or public health, and communicating these to operations management. They may also recommend changes be made to improve the facility's QEMS by making a request to the QEMS rep. (as per OP-05).
- 3.3.8 The QEMS rep. is responsible for ensuring that the operations management and the SPC manager are informed regarding the compliance/quality status of the facility and QEMS implementation and any need for improved processes/procedures at the facility level.
- 3.3.9 The SPC manager reports to the regional hub manager on the conformance status, the QEMS performance and effectiveness, any need for improvement and on issues that may have Agency-wide significance. Operations management reports to the regional hub manager on facility operational performance.

3.4 Communication with the Owner:

- 3.4.1 The regional hub manager, operations management and the SPC manager ensures that the owner is provided with QEMS updates and that they are kept informed of the status of the facility's operational and conformance performance during regularly scheduled meetings and/or through electronic and/or verbal communications. The QEMS rep. assists in the coordination of these meetings and with communicating the updates as directed.
- 3.4.2 The continuing suitability, adequacy and effectiveness of OCWA's QEMS are communicated to the owner as part of the management review process (refer to OP-20 Management Review).



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QEMS Proc.: OP-12 Rev Date: 17-Aug-18 Rev No: 3 Pages: 3 of 4

COMMUNICATIONS

Reviewed by: PCT Approved by: Operations Management

- 3.5 Communications with Essential Suppliers and Service Providers:
 - 3.5.1 Communication requirements to ensure essential suppliers and service providers understand the relevant OCWA QEMS policies, procedures and expectations are described in OP-13 Essential Supplies and Services.
- 3.6 Communication with the Public:
 - 3.6.1 Media enquiries must be directed to the facility's designated media spokesperson, operations management. The media spokesperson coordinates with local and corporate personnel (as appropriate) and the owner in responding to media enquiries.
 - 3.6.2 OCWA's QEMS and QEMS policy are communicated to the public through OCWA's public website. The QEMS policy is also posted at the *Kagawong WTP*.
 - 3.6.3 All complaints, whether received from the consumer, the community or other interested parties, are documented in the OPEX database. As appropriate, the operations management ensures that the owner is informed of the complaint and/or an action is developed to address the issue in a timely manner. The QEMS rep. ensures that consumer feedback is included for discussion at the management review.

4. Related Documents

Community Complaint Records

Emergency Response Plan

OP-05 Document and Records Control

OP-09 Organizational Structure, Roles, Responsibilities and Authorities

OP-13 Essential Supplies and Services

OP-18 Emergency Management

OP-20 Management Review

Date	Revision #	Reason for Revision	
01-Apr-10	0	Procedure issued	
16-Mar-12	1	Change management position titles	
04-Nov-16	2	Changed wording in 5.2 to state within the first year of hire. Added appendix cover page. Removed the 'where to find' list in section 6.	
01-May-17		Minor formatting	



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QEMS Proc.: OP-12 Rev Date: 17-Aug-18 Rev No: 3

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Pages:

COMMUNICATIONS

Reviewed by: PCT Ap	Approved by: Operations Management
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17-Aug-18	3	QP-04 procedure renamed OP-12. Removed Scope and Responsibilities sections. Added definitions for Operations Management and Operations Personnel. Reordered and created separate sections to clarify communications to each of the 4 parties. Clarified suppliers were those listed as essential as per Element 13 (as per DWQMS v. 2.0) and replaced references to Senior Operations Manager with 'Operations Management'. Included sections on R&Rs for performance reporting within OCWA (s. 3.3.7 to s. 3.3.9) and to Client (3.4.1). Replaced identification of media spokesperson (s. 3.6.1) with 'as identified in Facility Emergency Plan'. Added reference to site-specific records/documents used for recording tours (s. 3.6.3). Other minor edits. Removed reference to facility tours.



Kagawong Drinking Water Systems

QEMS Proc.: OP-13 Rev Date: 23-Aug-23 Rev No: 5 Pages: 1 of 3

ESSENTIAL SUPPLIES AND SERVICES

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe OCWA's procedures for procurement and for ensuring the quality of essential supplies and services.

2. Definitions

Essential Supplies and Services – supplies and services deemed to be critical to the delivery of safe drinking water

3. Procedure

- 3.1 Essential supplies and services for the *Kagawong Drinking Water System* are detailed within the facility's emergency contact list. The list is reviewed and updated at least once every calendar year by the facility staff.
- 3.2 Purchasing is conducted in accordance with OCWA's corporate procurement and administration policies, procedures and guidelines, which are adopted from those of the Ontario Public Service.
 - Purchases of capital equipment are subject to formal approval by the facility's owner.
- 3.3 As part of the corporate procurement process, potential suppliers/service providers are informed of relevant aspects of OCWA's QEMS through the tendering process and through specific terms and conditions set out in our agreements and purchase orders.
- 3.4 As part of the procurement process, local potential suppliers/service providers who are not procured by corporate procurement are informed of relevant aspects of OCWA's QEMS through the new vendor set up process.
- 3.5 Contractors are selected based on their qualifications and ability to meet the facility's needs without compromising operational performance and compliance with applicable legislation and regulations.
 - Contracted personnel including suppliers may be requested or required to participate in additional relevant training/orientation activities to ensure conformance with facility procedures and to become familiar with OCWA workplaces.
 - If necessary, appropriate control measures are implemented while contracted work is being carried out and communicated to all relevant parties to minimize the risk to the integrity of the drinking water system and the environment.
- 3.6 All third-party drinking water testing services are provided by accredited and licensed laboratories. The Ministry of the Environment and Climate Change (MOECC) has an agreement with The Canadian Association for Laboratory Accreditation (CALA) for accreditation of laboratories testing drinking water. The QEMS rep. is responsible for



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QEMS Proc.: OP-13 Rev Date: 23-Aug-23 Rev No: 5 2 of 3 Pages:

ESSENTIAL SUPPLIES AND SERVICES

Reviewed by: PCT

Approved by: Operations Management

notifying the MOECC of any change to the drinking water testing services being utilized.

- 3.7 Internal verification and calibration activities (e.g. chlorine analyzer, turbidimeter, flow meters, etc.) are conducted by operations personnel in accordance with equipment manuals and/or procedures (Refer to OP-17 Measurement Recording Equipment Calibration and Maintenance).
- 3.8 External calibration activities are conducted by qualified third-party providers. Qualifications of the service provider are verified during the procurement process. The service provider is responsible for providing a record/certificate of all calibrations conducted.
- 3.9 Chemicals purchased for use within the drinking water system and distribution must meet AWWA Standards and be ANSI/NSF certified as per the Municipal Drinking Water Licence (MDWL).
- 3.10 The facility orders and receives ongoing deliveries of chemicals to satisfy current shortterm needs based on processing volumes and storage capacities. Incoming chemical orders are verified by reviewing the manifest or invoice in order to confirm that the product received is the product ordered.
- 3.11 Process components/equipment, used within the drinking water system and distribution, must meet applicable regulatory requirements and industry standards for use in drinking water systems prior to their installation.

4. Related Documents

ANSI/NSF Documentation AWWA Standards Calibration Certificates/Records Emergency Contact/Essential Supplies and Services List OCWA's Corporate Procurement and Administration Policies MDWL OP-17 Measurement Recording Equipment Calibration and Maintenance



Kagawong Drinking Water Systems

QEMS Proc.: OP-13
Rev Date: 23-Aug-23
Rev No: 5
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ESSENTIAL SUPPLIES AND SERVICES

Reviewed by: PCT Approved by: Operations Management

Date	Revision #	Reason for Revision	
01-Apr-10	0	Procedure issued	
25-Feb-11		Procedure revised to include how essential suppliers and service providers are informed of relevant aspects of OCWA's QEMS	
16-Mar-12	1	Edit manager position titles	
24-Nov-16	2	Removed 'where to find it' out of section 6. Changed the location of the ESS from FEP to site specific contact list in section 5.1 and changed the reviewer.	
01-May-17		Minor formatting	
10-Oct-18	3	QP-05 procedure renamed OP-13. Removed Scope and Responsibilities sections. Changes to wording to provide clarification on ensuring quality of essential supplies and services (s. 3.5, 3.6, 3.7 and 3.9).	
30-Jan-19	4	Updated chemical and process equipment to include distribution requirements (s. 3.8. and 3.10)	
23-Aug-23	5	Added new clause 3.4 in relation to the supply of Essential Supplier Letters to local suppliers not procured through corporate procurement.	



Kagawong Drinking Water System

QEMS Proc.: OP-14 Rev Date: 24-Mar-21 Rev No: 6 Pages: 1 of 2

REVIEW AND PROVISION OF INFRASTRUCTURE

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe OCWA's procedure for reviewing the adequacy of infrastructure necessary to operate and maintain the *Kagawong Water Treatment and Distribution System*.

2. Definitions

Infrastructure – the set of interconnected structural elements that provide the framework for supporting the operation of the drinking water system, including buildings, workspace, process equipment, hardware, software and supporting services, such as transport or communication

3. Procedure

- 3.1 At least once every calendar year, operations management in conjunction with operations personnel conducts a review of the drinking water system's infrastructure to assess its adequacy for the operation and maintenance of the system. Operations personnel assist with identifying the need for infrastructure repairs, replacements or alterations and with prioritizing each identified item. Documents and records that are reviewed may include:
 - maintenance records
 - call-in reports
 - Adverse Water Quality Incidents (AWQIs) or other incidents
 - health & Safety Inspections
 - MOECC Inspection Reports
- 3.2 The outcomes of the risk assessment documented as per OP-08 are considered as part of this review.
- 3.3 The output of the review is a (minimum) 5 year rolling Capital Report to assist the owner and OCWA with planning infrastructure needs for the short and long-term. This report is submitted to the owner for review and approval at least once every calendar year by operations management. With the owner, operations management determines and documents timelines and responsibilities for implementation of priority items.
- 3.4 The Capital Report forms the long term forecast for any major infrastructure maintenance, rehabilitation and renewal activities as per OP-15. Major distribution infrastructure renewal projects are scheduled as per the municipal asset management plan (subject to funding availability) and managed by the municipality due to the dependence on the renewal of the associated municipal infrastructure (sewer, storm water and road revitalization). The municipality will communicate the status of these projects with operations management.
- 3.5 Operations management ensures that results of this review are considered during the management review process (OP-20).



Kagawong Drinking Water System

QEMS Proc.: OP-14 Rev Date: 24-Mar-21 Rev No: 6 Pages: 2 of 2

REVIEW AND PROVISION OF INFRASTRUCTURE

Reviewed by: PCT Approved by: Operations Management

4. Related Documents

Capital Report
Management Review Minutes
OP-08 Risk Assessment Outcomes
OP-15 Infrastructure Maintenance, Rehabilitation and Renewal
OP-20 Management Review

Date	Revision #	Reason for Revision
01-Apr-10	0	Procedure issued
16-Mar-12	1	Change Management Position titles.
24-Nov-16	2	Removed 'where to find it' from section 6. Removed wording from section 5.1 and 5.2. Added section 5.3.
01-May-17		Minor formatting
18-Jul-17	3	Added section 5.2; changed wording from annual to each calendar year in section 5.1
19-Jul-18	4	QP-06 procedure renamed OP-14. Removed Scope and Responsibilities sections. Added s. 3.2 to consider the outcomes of the risk assessment under Element 8 during the review to reflect wording in DWQMS v. 2.0. Changes to wording to provide clarification on who is required to attend the review and what documents and records may be considered during the review (s. 3.1). Linked the procedure with OP-15 in terms of documenting a long-term forecast (s. 3.3 and s. 3.4).
20-Jan-20	5	Updated section 3.5 to include direction on distribution work planning
24-Mar-21	6	Removed section 3.4 which related to maintaining work orders in Client status (in WMS); removed WMS work orders from Section 4



Kagawong Drinking Water System

QEMS Proc.: OP-15 Rev Date: 10-May-19

Rev No: 1 Pages: 1 of 3

INFRASTRUCTURE MAINTENANCE, REHABILITATION AND RENEWAL

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe OCWA's infrastructure maintenance, rehabilitation and renewal program for the *Kagawong Drinking Water System*.

2. Definitions

Infrastructure – the set of interconnected structural elements that provide the framework for supporting the operation of the drinking water system, including buildings, workspace, process equipment, hardware, software and supporting services, such as transport or communication

Rehabilitation – the process of repairing or refurbishing an infrastructure element.

Renewal – the process of replacing the infrastructure elements with new elements.

3. Procedure

3.1 OCWA, under contract with the owner, maintains a computerized Work Management System (WMS) to manage maintenance, rehabilitation and renewal of infrastructure for which it is operationally responsible. The major components of the WMS consist of planned maintenance, unplanned maintenance, rehabilitation, renewal and program monitoring and reporting.

3.1.1 Planned Maintenance

Routine planned maintenance activities include:

- inspect process control equipment to ensure proper operation of disinfection system, filtration systems, pumps, chemicals systems, online monitors and standby power;
- check filters and backwashing on a routine basis;
- check low lift pumping station to ensure that everything is in order;
- flush the distribution system;
- open, exercise and flush hydrants as well as winterize;
- exercise the main distribution shut-off valves;
- carry out a routine maintenance program including greasing and oiling as specified in the lubrication schedule:
- maintain an inventory of all equipment and tools; and
- maintain accurate records of work conducted, activities and achievements



Kagawong Drinking Water System

QEMS Proc.: OP-15 Rev Date: 10-May-19

Rev No: 1 Pages: 2 of 3

INFRASTRUCTURE MAINTENANCE, REHABILITATION AND RENEWAL

Reviewed by: PCT Approved by: Operations Management

Planned maintenance activities are scheduled in the WMS that allows the user to:

- enter detailed asset information;
- generate and process work orders;
- · access maintenance and inspection procedures;
- plan preventive maintenance and inspection work;
- plan, schedule and document all asset related tasks and activities; and
- access maintenance records and asset histories.

Planned maintenance activities are communicated to the person responsible for completing the task through the issuance of WMS work orders. Work orders are automatically generated on a daily, weekly, monthly, quarterly and annual schedule as determined based on manufacturer's recommendations and site specific operational and maintenance needs and are assigned directly to the appropriate operations personnel. This maintenance schedule is overseen by operations management. Work orders are completed and electronically entered into WMS by the person responsible for completing the task. Records of these activities are maintained as per OP-05 Document and Records Control.

The facility operator is responsible for ensuring the inventory of equipment is current and that appropriate maintenance plans are in place. The primary user is responsible for entering information into WMS as provided by the facility operator.

Maintenance plans are developed according to the manufacturer's instructions, regulatory requirements, industry standards, and/or client service requirements. Equipment Operation and Maintenance (O&M) manuals are accessible to operations personnel at the locations specified in OP-05 Document and Records Control.

3.1.2 Unplanned Maintenance

Unplanned maintenance is conducted as required. All unplanned maintenance activities are authorized by the operations management. Unplanned maintenance activities are recorded on corrective work orders and are entered into WMS by the person responsible for completing the unplanned maintenance activity.

3.1.3 Rehabilitation and Renewal

Rehabilitation and renewal activities including capital upgrades (major infrastructure maintenance) are determined at least once every calendar year in consultation with operations management and the owner A list of required replacement or desired new equipment is compiled and prioritized by operations management in conjunction with operations personnel and is presented to the owner for review and comment. All major expenditures require the approval of



Kagawong Drinking Water System

QEMS Proc.: OP-15 Rev Date: 10-May-19

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INFRASTRUCTURE MAINTENANCE, REHABILITATION AND RENEWAL

Reviewed by: PCT Approved by: Operations Management

the owner.

3.1.4 Program Monitoring and Reporting

Maintenance needs for the facility are determined through review of manufacturer's instructions, regulatory requirements, industry standards, and/or client service requirements and are communicated by means of work orders. Additionally, operations management and operations personnel conduct a review of the drinking water system's infrastructure to assess its adequacy for the operation and maintenance of the system. (Refer to OP-14 Review and Provision of Infrastructure).

To assist in monitoring the effectiveness of the program, operations management and regional hub managers are able to generate monthly summary reports for each facility. In addition, OCWA's executive management team is provided with hub and regional reports on an ongoing basis.

3.2 OCWA's infrastructure maintenance, rehabilitation and renewal program is initially communicated to the owner through the operating agreement. OCWA's program is communicated to the owner through monthly reporting. At a minimum, the owner is informed of the program through the submission of the Capital Report and through the results of the management review at least once every calendar year.

4. Related Documents

Minutes of Management Review
Capital Report
WMS Work Orders
WMS Reports
OP-05 Document and Records Control
OP-14 Review and Provision of Infrastructure

Date	Revision #	Reason for Revision
15-May-18	0	Procedure issued – Information within OP-15 was originally set out in the Main body of OCWA's Operational Plan (last revision 11 dated 22-Jan-17. New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Added the requirement to ensure the long term forecast is reviewed once every calendar year and to document a long term forecast to reflect in DWQMS v. 2.0. Minor wording updates to reflect OCWA's current WMS.
10-May-19	1	Removed gender reference in section 3.1.1 when referencing the Maximo Primary.



Kagawong Drinking Water System

QEMS Proc.: OP-16
Rev Date: 24-Apr-19
Rev No: 8
Pages: 1 of 3

SAMPLING, TESTING AND MONITORING

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe the procedure for sampling, testing and monitoring for process control and finished drinking water quality.

2. Definitions

Challenging Conditions – any existing characteristic of the water source or event-driven fluctuations that impact the operational process as identified and listed under OP-06 Drinking Water System

3. Procedure

- 3.1 All sampling, monitoring and testing is conducted at a minimum in accordance with SDWA O. Reg. 170/03 and the facility's Municipal Drinking Water License (MDWL).
- 3.2 Sampling requirements for the facility are defined in the facility's sampling plan which is available to operations personnel, at the location(s) noted in OP-05 Document and Records Control. The sampling plan is maintained by the PCT and is updated as required.
- 3.3 Samples that are required to be tested by an accredited and licensed laboratory are collected, handled and submitted according to the directions provided by the licensed laboratories that conduct the analysis. The laboratories used for this facility are listed in the essential supplies and services list at the location noted in OP-05 Document and Records Control.

Electronic reports received from the laboratory are maintained as per OP-05 Document and Records Control. Analytical results from laboratory reports are uploaded into OCWA's Process Data Management system (PDM).

- 3.4 Test results from continuous monitoring equipment are captured by the SCADA system and are reviewed by a certified operator in accordance with the requirements of SDWA O. Reg. 170/03. Continuous monitoring equipment is used to sample and test for:
 - filter effluent turbidity
 - treated free chlorine residual

The SCADA system also collects and records information on the following parameters related to process control and finished drinking water quality:

- raw and treated water flows
- filter flows
- pre-chlorine (free) residual
- raw water pH



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SAMPLING, TESTING AND MONITORING

Reviewed by: PCT Approved by: Operations Management

- clearwell levels
- raw turbidity
- filter run times
- raw Water Level
- 3.5 The facility is equipped with offsite monitoring capabilities. Operations personnel are capable of viewing current data as well as past trending through OCWA's Wonderware program. Offsite reviews are logged through annotations within the program or in facility logbooks. Annotation reports are available via email upon request.
- 3.6 Adverse water quality incidents are responded to and reported as per (Manitoulin) Notification of Adverse Water SOP.
- 3.7 In-house process control activities are conducted on a regular basis by the certified operator(s) on duty as per the *Kagawong* WTP round sheets.
 - Any required operational process adjustments are recorded in the facility log book.
- 3.8 Additional monitoring activities related to the facility's most challenging conditions are summarized as follows:
 - additional flow monitoring is to ensure the facility's rated capacity is not exceeded during summer months
- 3.9 No upstream or downstream sampling is deemed necessary at this time.
- 3.10 Sampling, testing and monitoring results are readily accessible to the owner at the Kagawong Water Treatment Facility and are available via email upon request. External sampling results are directly emailed to the owner and operating authority by the laboratory.

At a minimum, owners are provided with an annual summary of sampling, testing and monitoring results through the SDWA O. Reg. 170/03 Section 11 Annual Report, the Schedule 22 Municipal Summary Report and through the management review process outlined in OP-20 Management Review.

In addition, updates regarding sampling, testing and monitoring activities are provided as per the operating agreement and during regular client meetings.

4. Related Documents

Annotation Reports
Annual Report (O. Reg. 170 Section 11)
Emergency Contact List and Essential Supplies & Services List
Facility Logbook
Kagawong WTP Round Sheets



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Reviewed by: PCT Approved by: Operations Management

Laboratory Analysis Reports
Laboratory Chain of Custody Forms
Municipal Summary Report (O. Reg. 170 Schedule 22)
Process Data Management System (PDM)
Sampling Plan
SCADA Records
SOP - (Manitoulin) Notification of Adverse Water
OP-05 Document and Records Control
OP-06 Drinking Water System
OP-20 Management Review

Date	Revision #	Reason for Revision	
01-Jan-10	0	Procedure issued	
27-May-11		Add statement in section 5.5.	
16-Mar-12	1	Change Management Position titles	
23-Sep-13	2	Update template to new one	
30-Dec-14	3	Update to table 5.4	
28-May-15	4	Removed list of document locations; PDC changed to PDM	
30-Aug-16	5	Change names of SOP to match SOP headings in shared	
28-Nov-16	6	Added appendix cover page. Removed FEP as the location of the sampling plan. Updated SOP name. The table was removed from section 5.2 and reference made to the sampling plan instead. Formatting issues were corrected with section 5.3 and 5.4; Correction of PDC to PDM.	
01-May-17		Minor formatting	
19-Jul-18	7	QP-07 procedure renamed OP-16. Removed Scope and Responsibilities sections. Updated s. 3.1 to reference Municipal Drinking Water License and s. 3.2 to reference sampling calendar/plan. Expanded information related to accredited and licensed laboratories (s. 3.3). Reordered some sections and other minor edits. Removed in house processing table and referenced round sheets instead. Added information relating to offsite monitoring.	
24-Apr-19	8	Updated SCADA data collection information: changed treated water pH to raw water pH.	



Kagawong Drinking Water System

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MEASUREMENT AND RECORDING EQUIPMENT CALIBRATION AND MAINTENANCE

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe the procedure for the calibration and/or verification and maintenance of measurement and recording equipment at the *Kagawong Drinking Water System*.

2. Definitions

None

3. Procedure

- 3.1 All measurement and recording equipment calibration and maintenance activities must be performed by appropriately trained and qualified personnel or by a qualified third-party calibration service provider (refer to OP-13 Essential Supplies and Services).
- 3.2 The facility's operations personnel is responsible for establishing and maintaining a list of measurement and recording devices and associated calibration and/or verification schedules using the automated Work Management System (WMS). When a new device is installed, it is the responsibility of the facility's operations personnel to provide the information to the WMS primary that enters the information into WMS. The new device is tagged with a unique identification number and the maintenance schedule is set up. Work orders are then automatically generated as per the schedule (refer to OP-15 Infrastructure Maintenance, Rehabilitation and Renewal).
- 3.3 Details regarding the results of the calibration and/or verification are recorded within each individual work order generated by the WMS.
- 3.4 Calibration and maintenance activities are carried out in accordance with procedures specified in the manufacturer's manual, instructions specified in WMS.
- 3.5 Standards, reagents and/or chemicals that may be utilized during calibration and/or verification and/or maintenance activities are verified before use to ensure they are not expired. Any expired standards, reagents and/or chemicals are appropriately disposed of and are replaced with new standards, reagents and/or chemicals as applicable.
- 3.6 Any measurement device which does not meet its specified performance requirements during calibration and/or verification must be removed from service (if practical) until repaired, replaced or successfully calibrated. The failure must be reported to the operations management and PCT, as soon as possible, so that immediate measures can be taken to ensure that drinking water quality has not been compromised by the malfunctioning device. Any actions taken as a result of the failure are recorded in the facility logbook and through appropriate WMS work orders. The PCT ensures that any notifications required by applicable legislation are completed and documented within the specified time period.



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MEASUREMENT AND RECORDING EQUIPMENT CALIBRATION AND MAINTENANCE

Reviewed by: PCT Approved by: Operations Management

3.7 Calibration and maintenance records and maintenance/equipment manuals are maintained as per OP-05 Document and Records Control.

4. Related Documents

Calibration/Maintenance Records
Facility Logbook
Maintenance/Equipment Manuals
WMS Records
OP-05 Document and Records Control
OP-13 Essential Supplies and Services
OP-15 Infrastructure Maintenance, Rehabilitation and Renewal

Revision #	Reason for Revision
0	Procedure issued
	Update responsibility list
1	Change Management Position titles.
2	Removed the 'where to find' list out of section 6.
	Minor formatting
3	Added section 5.6 referring to long term forecasting
4	QP-08 procedure renamed OP-17. Removed Scope and Responsibilities sections. Added s. 3.3 to clarify how calibration and/or verification activities are documented. Added s. 3.5 to include how standards, reagents and/or chemicals are verified before use to ensure they are not expired. Other minor edits.
	1 2



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QEMS Proc.: OP-18
Rev Date: 19-Jul-18
Rev No: 5
Pages: 1 of 4

EMERGENCY MANAGEMENT

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe the procedure for maintaining a state of emergency preparedness at the facility level under OCWA's Emergency Management Program.

2. Definitions

Emergency Response Plan (ERP) – a corporate-level emergency preparedness plan for responding to and supporting serious (Level 3) operations emergencies

Facility Emergency Plan (FEP) – a facility-level emergency preparedness plan for responding to and recovering from operations emergencies

Operations Management – refers to the general manager, senior operations manager and/or operations Manager that directly oversees a facility's operations

3. Procedure

- 3.1 The Facility Emergency Plan (FEP) is the corporate standard for emergency management at OCWA-operated facilities. The FEP supports the facility-level response to and recovery from Level 1, 2 and 3 events related to water and wastewater operations and directly links to the corporate-level Emergency Response Plan (ERP) for management of Level 3 events that require corporate support. Operations management is responsible for establishing a site-specific FEP that meets the corporate standard for this drinking water system.
- 3.2 OCWA recognizes three levels of events:

Level 1 is an event that can be handled entirely by operations personnel and regular contractors. The event and the actions taken to resolve it (and to prevent a reoccurrence, if possible) are then included in regular reporting (both internally and externally). Examples may include response to an operational alarm, first aid incident, small on-site spill or a process upset that can be easily brought under control.

Level 2 is an event that is more serious and requires immediate notification of others (regulator, owner). Examples may include minor basement flooding, injury to staff that requires medical attention, or a spill that causes or is likely to cause localized, off-site adverse effects.

Level 3 is an actual or potential situation that will likely require significant additional resources and/or threatens continued operations. It may require corporate-level support including activation of the OCWA Action Group and opening of an Emergency Operations Centre (EOC) as described in the corporate ERP. Level 3 events usually involve intervention from outside organizations (owner, emergency responders, Ministry of the Environment and Climate Change, media, etc.). Examples may include:



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EMERGENCY MANAGEMENT

Reviewed by: PCT Approved by: Operations Management

- disruption of service/inability to meet demand;
- critical injury including loss of life;
- breach of security that is a threat to public health;
- intense media attention:
- community emergency affecting water supply/treatment;
- declared pandemic; or
- catastrophic failure that could impact public health or the environment or cause significant property damage.
- 3.3 Potential emergency situations or service interruptions identified for the *Kagawong Drinking Water System* include:
 - Unsafe Water
 - Spill Response
 - Critical Injury
 - Critical Shortage of Staff
 - Loss of Service
 - Security Breach
- 3.4 The processes for responding to and recovering from each potential emergency situation/service disruption are documented within a site-specific contingency plan (CP). The CPs and related standard operating procedures (SOPs) are contained within the FEP.

3.5 OCWA's training requirements related to the FEP are as follows:

Training Topic	Training Provider	Type of Training	Frequency	Required For
Establishing and maintaining an FEP that meets the corporate standard	Safety, Process and Compliance Manager and/or Corporate Compliance (as required)	On-the-Job Practical	Upon hire and when changes are made to the corporate standard*	PCTs (or others identified by the Operations Management)
Contents of the site- specific FEP	Facility Level (coordinated by QEMS Representative)	On-the-Job Practical	Upon hire and when changes to the FEP are made*	All operations personnel with responsibilities for responding to an emergency

^{*}Note: Changes to the corporate standard or site-specific FEP may only require the change to be communicated to operations for implementation. Therefore, not all changes will require training.

3.6 At least one CP must be tested each calendar year and recorded on the FEP-01 Contingency Plan Review/Test Summary Form and in WMS as appropriate. This record includes the outcomes of the test and identifies any opportunities for improvement and actions taken. A CP-related response to an actual event may also be considered a test. A review of the incident including lessons learned should be recorded on FEP-01 following the resolution of the actual event, along with any opportunities for improvement/actions identified.



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Reviewed by: PCT Approved by: Operations Management

- 3.7 Contingencies are tested at hub level and may not include the facility's operations personnel or be conducted at this specific facility.
- 3.8 Each CP must be reviewed at least once in a five-calendar year period. Operations personnel review site specific contingencies and record the review through WMS. Required updates are provided to the QEMS rep. for implementation.
- 3.9 Revisions to the CPs, SOPs and other FEP documents are made (as necessary) following a review, test, actual event or other significant change (e.g., changes in regulatory requirements, corporate policy or operational processes and/or equipment, etc.). Results of the emergency response testing and any opportunities for improvement/actions identified are considered during the management review (OP-20).
- 3.10 Specific roles and responsibilities related to a particular emergency situation or service interruption (including those of the owner where applicable) are set out in the relevant site-specific CP. A general description of the respective responsibilities of the owner and the operating authority in the event an emergency occurs is included in the service agreement with the owner (as required by the Safe Drinking Water Act).
- 3.11 Where they exist, any relevant sections of the Municipal Emergency Response Plan (MERP) are included or referenced in the FEP. Measures specified in the MERP are incorporated into CPs where appropriate.
- 3.12 An emergency contact list in conjunction with the essential supplies and services list is contained within the FEP and is reviewed/updated at least once per calendar year. An emergency communications protocol is contained within the FEP. Specific notification requirements during emergency situations or service interruptions are set out in the individual CPs and in the ERP.

4. Related Documents

Corporate Emergency Response Plan
Contingency Plans
Emergency Contact List/Essential Supplies & Services List
Facility Emergency Plan
FEP-01 Contingency Plan Test Summary Form
Municipal Emergency Response Plan (as applicable)
WMS Work Orders
OP-20 Management Review



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EMERGENCY MANAGEMENT

Reviewed by: PCT Approved by: Operations Management

Date	Revision #	Reason for Revision	
01-Apr-10	0	Procedure issued	
16-Mar-12	1	Edit Management position titles	
28-May-15	2	Updated to new Corporate template	
24-Nov-16	3	In section 5.4, removed reference that contingencies are located in the FEP; in section 5.5, replaced RCA with SPC; section 5.6, added reference to WMS as the tracking location of reviews	
02-May-17		Minor formatting	
19-Jul-17	4	Removed the requirement to log reviews on the FEP-01 Contingency Plan Review/Test Summary Form	
19-Jul-18	5	QP-09 procedure renamed OP-18. Removed Scope and Responsibilities sections and reordered some sections. Added definition 'Operations Management'. Throughout procedure replaced 'Senior Operations Manager' references with 'Operations Management'. Removed references to 'OCWA's Approach to Facility Emergency Planning' document throughout procedure and referenced FEP instead. Aligned wording for level 1, 2 & 3 events (s. 3.2) with wording in 'OCWA's Emergency Response Plan'. Updated training section to include role of SPC Manager (s. 3.5) and expanded testing/review section specifically to clarify how an actual test and review is performed and documented. Other minor edits.	



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INTERNAL QEMS AUDITS

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe the procedure for conducting internal audits at the facility level to evaluate the conformance of OCWA's Quality & Environmental Management System (QEMS) to the requirements of the Drinking Water Quality Management Standard (DWQMS).

This procedure applies to internal QEMS audits conducted at the *Kagawong Drinking Water System* for the purpose of meeting the DWQMS requirements for internal audits.

Note: This procedure does not apply to internal compliance audits conducted in accordance with OCWA's Internal Audit Program.

2. Definitions

Audit Team – one or more internal auditors conducting an audit

Internal Auditor - an individual selected to conduct an internal QEMS audit

Internal QEMS Audit – a systematic and documented internal verification process that involves objectively obtaining and evaluating documents and processes to determine whether a quality management system conforms to the requirements of the DWQMS

Lead Auditor – internal auditor responsible for leading an audit team

Non-conformance – non-fulfillment of a DWQMS requirement

Objective Evidence – verifiable information, records or statements of facts. Audit evidence is typically based on interviews, examination of documents, observations of activities and conditions, reviewing results of measurements and tests or other means. Information gathered through interviews should be verified by acquiring supporting information from independent sources

Opportunity for Improvement (OFI) – an observation about the QEMS that may, in the opinion of the internal auditor, offer an opportunity to improve the effectiveness of the system or prevent future problems; implementation of an OFI is optional

3. Procedure

- 3.1 Audit Objectives, Scope and Criteria
 - 3.1.1 In general, the objectives of an internal QEMS audit are:
 - to evaluate conformance of the implemented QEMS to the requirements of the DWQMS;
 - to identify non-conformances with the documented QEMS; and
 - to assess the effectiveness of the QEMS and assist in its continual improvement.



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INTERNAL QEMS AUDITS

Reviewed by: PCT Approved by: Operations Management

- 3.1.2 The scope of an internal QEMS audit includes activities and processes related to the QEMS as documented in the Operational Plan.
- 3.1.3 The criteria covered by an internal QEMS audit include:
 - Drinking Water Quality Management Standard (DWQMS)
 - current Operational Plan
 - QEMS-related documents and records
- 3.1.4 The audit scope and criteria may be customized as necessary to focus on a particular process/critical control point and/or any elements of the DWQMS which may warrant specific attention. The results of previous internal and external audits should also be considered.

3.2 Audit Frequency

3.2.1 Internal QEMS audits may be scheduled and conducted once every calendar year or may be separated into smaller audit sessions scheduled at various intervals throughout the calendar year. However, all elements of the DWQMS must be audited at least once every calendar year.

3.3 Internal Auditor Qualifications

- 3.3.1 Internal QEMS audits shall only be conducted by persons approved by the QEMS rep. and having the following minimum qualifications:
 - internal auditor training or experience in conducting management system audits: and
 - familiarity with the DWQMS requirements.
- 3.3.2 Internal auditors that do not meet the qualifications in s.3.3.1 may form part of the audit team for training purposes, but cannot act as lead auditor.
- 3.3.3 Internal auditors must remain objective and, where practical, be independent of the areas/activities being audited. It may not be possible for internal auditors to be fully independent of the activity being audited, but every effort should be made to remove bias and encourage objectivity. Auditors should maintain objectivity throughout the audit process to ensure that the audit findings and conclusions are based only on the audit evidence. Objectivity can be demonstrated by obtaining sufficient appropriate evidence to provide a reasonable basis for the audit findings.

3.4 Audit Preparation

- 3.4.1 Together, the QEMS rep. and the lead auditor:
 - establish the audit objectives, scope and criteria; and



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INTERNAL QEMS AUDITS

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 confirm the audit logistics (locations, dates, expected time and duration of audit activities, any health and safety considerations, availability of key personnel, audit team assignments, etc.).

3.4.2 Each internal auditor is responsible for:

- reviewing documentation to prepare for their audit assignments including:
 - o the Operational Plan and related procedures;
 - o results of previous internal and external QEMS audits;
 - the status and effectiveness of corrective and preventive actions implemented;
 - o the results of the management review;
 - o the status/consideration of OFIs identified in previous audits; and
 - other relevant documentation.
- preparing work documents (e.g., checklists, forms, etc.) for reference purposes and for recording objective evidence collected during the audit

3.5 Conducting the Audit

- 3.5.1 Opening and closing meetings are not required, but may be conducted at the discretion of the QEMS rep. and the lead auditor taking into account expectations of top management.
- 3.5.2 The audit team gathers and records objective evidence by engaging in activities that may include conducting interviews with operations management and staff (in person, over the phone and/or through e-mail), observing operational activities and reviewing documents and records.
- 3.5.3 The audit team generates the audit findings by evaluating the objective evidence against the audit criteria. In addition to indicating conformance or non-conformance, the audit findings may also lead to the identification of opportunities for improvement (OFIs). The lead auditor is responsible for resolving any differences of opinion among audit team members with respect to the audit findings and conclusions.

3.6 Reporting the Results

3.6.1 The lead auditor reviews the audit findings and conclusions with the QEMS rep. Other audit participants may also take part in this review as appropriate. This review may take place in person (e.g., during a closing meeting) or through other means (phone call, email, etc.). Any diverging opinions regarding the audit findings and conclusions should be discussed and, if possible, resolved. If not resolved, this should be noted by the lead auditor.



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- 3.6.2 The lead auditor submits a written report and/or completed work documents to the QEMS rep. The submitted documentation must identify (at a minimum):
 - audit objectives, scope and criteria;
 - audit Team member(s) and audit participants;
 - date(s) and location(s) where audit activities where conducted;
 - audit findings including:
 - any non-conformance identified referencing the requirement that was not met; and
 - OFIs or other observations.
 - audit conclusions.
- 3.6.3 The QEMS rep. distributes the audit results to top management and others as appropriate.
- 3.6.4 The QEMS rep. ensures that results of internal QEMS audits are included as inputs to the management review as per OP-20 Management Review.
- 3.7 Corrective Actions and Opportunities for Improvement (OFIs)
 - 3.7.1 Corrective actions are initiated when non-conformances are identified through internal QEMS audits and are documented and monitored as per OP-21 Continual Improvement.
 - 3.7.2 OFIs are considered, and preventive actions initiated, documented and monitored as per OP-21 Continual Improvement.
- 3.8 Record-Keeping
 - 3.8.1 Internal QEMS audit records are filed by the QEMS rep. and retained as per OP-05 Document and Records Control.

4. Related Documents

Internal Audit Records (checklists, forms, reports, etc.)
Internal Audit Report
Kagawong Action Items Spreadsheet
OP-05 Document and Records Control
OP-20 Management Review
OP-21 Continual Improvement



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INTERNAL QEMS AUDITS

Reviewed by: PCT Approved by: Operations Management

Date	Revision #	Reason for Revision	
01-Jan-10	0	Procedure issued	
30-May-11		Revise frequency of QEMS audit	
16-Mar-12	1	Change Management Position titles	
21-Jan-14	2	Section 5.2 updated to reflect that PCT updates the protpcol	
28-May-15	3	Updated to new corporate template	
08-Nov-16	4	Updated section to new template created by Corporate; removed 'where to find' list out of section 6; section 5.7.5 & 5.8.2, added referece to the spreadsheet for location where action plans are keptt	
02-May-17		Minor formatting	
19-Jul-17	5	Changed wording from every 12 months to once every calendar year under sections 5.1.4 & 5.2.3; removed the comment that internal and external audit results should be reviewed in section 5.1.4 and added section 5.1.5 stating that previous audits results will get reviewed; section 5.6.3 relating to non conformities within the report was added; added section 5.8.1 relating to documenting potential non conformities; added section 5.8.2 relating to the review of OFIs at management reviews;	
19-Jul-18	6	QP-10 procedure renamed OP-19. Removed Scope and Responsibilities sections and moved scope wording to purpose section. Added definition 'Objective Evidence' and modified 'non-conformance' definition. Replaced 'audit evidence' with 'objective evidence', and 'conformity' with 'conformance' throughout procedure. Changed s. 3.4.2 to include preventive actions, the results of the management review and the status/consideration of OFIs. Included wording 'for each element', and 'identified referencing the requirement that was not met' to s. 3.6.2. Moved description of process for corrective actions from QP-10 s. 5.7 and OFIs from QP-10 s. 5.8 to OP-21. Added s. 3.7 to refer to OP-21.	
15-May-19	7	Changed the name of the action analysis spreadsheet to the action items spreadsheet under 4. Related documents	
19-Sep-24	8	Procedure updated to describe and document how objectivity is maintained when an internal auditor is not fully independent of the activity being audited with additions to 3.3.3, removed watermark.	



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QEMS Proc.: OP-20 Rev Date: 15-May-19 Rev No: 6

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MANAGEMENT REVIEW

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe the procedure for conducting a management review of the Quality & Environmental Management System (QEMS) at the facility level.

2. Definitions

Management Review – A formal review of the facility's operations conducted at least once every calendar year by top management to evaluate the continuing suitability, adequacy and effectiveness of OCWA's Quality & Environmental Management System (QEMS).

Operations Management – refers to the general manager, senior operations manager and/or operations manager that directly oversees a facility's operations.

Top Management – a person, persons or group of people at the highest management level within an operating authority that makes decisions respecting the QMS and recommendations to the owner respecting the subject system or subject systems. OCWA has defined top management for the Kagawong Drinking Water System as:

- operations management Manitoulin Island Area
- regional hub manager Northwestern Ontario, Espanola
- safety, process & compliance (SPC) manager Northwestern Ontario, Espanola

3. Procedure

3.1 Top management ensures that a management review is conducted at least once every calendar year.

Management reviews for more than one drinking water system may be conducted at the same time provided the systems belong to the same owner and the considerations listed in section 3.4 below are taken into account for each individual system and documented in the management review meeting minutes.

- 3.2 At a minimum, the QEMS rep., at least one member of top management and at least one facility operator must take part in the management review. Other members of top management may take part in the review.
- 3.3 Other staff may be invited to take part in the management review or to assist with presenting information or in reviewing the information presented, where they offer additional expertise regarding the subject matter.
- 3.4 The standing agenda for management review meetings is as follows:
 - a) incidents of regulatory non-compliance;
 - b) incidents of adverse drinking water tests;
 - c) deviations from critical control limits and response actions;
 - d) the effectiveness of the risk assessment process;



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Reviewed by: PCT Approved by: Operations Management

- e) internal and third-party audit results (including any preventive actions implemented to address Opportunities for Improvement (OFI) or rationale as to why OFIs were not implemented);
- f) results of emergency response testing (including any OFIs identified);
- g) operational performance;
- h) raw water supply and drinking water quality trends;
- i) follow-up on action items from previous management reviews;
- j) the status of management action items identified between reviews;
- k) changes that could affect the QEMS;
- I) consumer feedback:
- m) the resources needed to maintain the QEMS:
- n) the results of the infrastructure review;
- o) operational plan currency, content and updates;
- p) staff suggestions; and
- q) consideration of applicable Best Management Practices (BMPs).
- 3.5 If any BMPs to address drinking water system risks are discussed during other agenda items, they must be identified and documented in the management review minutes. Review and possible adoption of applicable BMPs are revisited during subsequent management reviews and are incorporated into preventive and/or corrective actions as per OP-21 as appropriate.
- 3.6 The QEMS rep. collects all relevant information and provides the package to operations management and operations personnel.
- 3.7 The management review participants review the data presented and make recommendations and/or initiate action to address identified deficiencies as appropriate as per OP-21.
- 3.8 The QEMS rep. ensures that minutes of and actions resulting from the management review are prepared and distributed to the appropriate OCWA top management, personnel and the *Corporation of the Township of Billings*.
- 3.9 The QEMS rep. monitors the progress and documents the completion of actions resulting from the management review.

4. Related Documents

Kagawong Action Items Spreadsheet
Management Review Reference Materials
Minutes and Actions Resulting from the Management Review
OP-21 Continual Improvement



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MANAGEMENT REVIEW

Reviewed by: PCT Approved by: Operations Management

Date Revision # Reason for Revision		Reason for Revision
01-May-10	0	Procedure issued
30-May-11		Revise responsibility to include Senior Operator Location of documents.
16-Mar-12	1	Edit Management position titles
28-May-15	2	Changed senior manager to EQMS representative in Section 5.1; removed list of document locations
24-Nov-16	3	Removed 'where to find' from section 6; procedure was re-written to conform to current practices within the hub. The requirement to hold a physical meeting was removed
02-May-17		Minor formatting
19-Jul-17	4	Changed wording from every 12 months to once every calendar year under definitions and section 5.1
19-Jul-18	5	Removed Scope and Responsibilities sections. Added definitions for Top Management and Operations Management. Efficacy changed to effectiveness. Added s. 3.2 and s. 3.3 to describe who is participating in the Management Review process. Added clarification on including any preventive actions implemented to address Opportunities for Improvement (OFI) or rationale as to why OFIs were not implemented when reviewing audit results (s. 3.4.e). Added Best Management Practices (BMPs) as a standing agenda item (s. 3.4.q). Added s. 3.5 to include consideration of BMPs and link OP-20 to OP-21 Continual Improvement.
15-May-19	6	Changed the name of the action analysis spreadsheet to the action items spreadsheet under section 4. Related documents



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QEMS Proc.: OP-21 Rev Date: 15-May-19 Rev No: 1 Pages: 1 of 4

CONTINUAL IMPROVEMENT

Reviewed by: PCT Approved by: Operations Management

1. Purpose

To describe the procedure for tracking and measuring continual improvement of the Quality & Environmental Management System (QEMS) for the *Kagawong Water Treatment Facility & Distribution System*.

2. Definitions

Continual Improvement - recurring activity to enhance performance (ISO 14001:2014)

Corrective Action – action to eliminate the cause of detected nonconformity of the QMS with the requirements of the DWQMS or other undesirable situation

Non-conformance - the non-fulfilment of a DWQMS requirement

Preventive Action – action to prevent the occurrence of nonconformity of the QMS with the requirements of the DWQMS or other undesirable situation

3. Procedure

3.1 OCWA strives to continually improve the effectiveness of its QEMS for this drinking water system(s) through the identification and implementation of corrective/preventive actions and, as appropriate, through review and consideration of applicable Best Management Practices (BMPs).

3.2 Corrective Actions

- 3.2.1 Non-conformances may be identified through an internal or external QEMS audit(s) conducted for this drinking water system. They may also be identified as a result of other events such as:
 - an incident/emergency;
 - community/owner complaint;
 - other reviews: and
 - operational checks, inspections or audits.
- 3.2.2 The QEMS rep. (in consultation with operations management and/or the SPC manager) investigates the need for a corrective action to eliminate the root cause(s) so as to prevent the non-conformance from recurring. The investigation may also include input from the operators and other stakeholders and the consideration of BMPs as appropriate.
- 3.2.3 The QEMS rep. determines the corrective action needed based on this consultation. The operations management (or designate) assigns responsibility and a target date for resolution.



Kagawong Drinking Water System

QEMS Proc.: OP-21 Rev Date: 15-May-19 Rev No: 1 Pages: 2 of 4

CONTINUAL IMPROVEMENT

Reviewed by: PCT

Approved by: Operations Management

- 3.2.4 The QEMS rep. ensures corrective actions are documented in the *Kagawong* Action Items Spreadsheet. The QEMS rep. monitors the progress of corrective action(s) and provides status updates to top management.
- 3.2.5 The implementation and effectiveness of corrective actions are verified during subsequent internal QEMS audits and are considered during the management review. If there is evidence that the action taken was not effective, the operations management initiates further corrective action and assigns resources as appropriate until the non-conformance is fully resolved.

3.3 Preventive Actions

- 3.3.1 Potential preventive actions may be identified through an internal or external QEMS audit as Opportunities For Improvement (OFIs), during the management review or through other means such as:
 - staff/owner suggestions;
 - regulator observations;
 - evaluation of incidents/emergency response/tests;
 - the analysis of facility/regional hub or OCWA-wide data/trends;
 - · non-conformances identified at other drinking water systems; or
 - a result of considering a BMP.
- 3.3.2 The QEMS rep. (in consultation with operations management and/or the SPC manager) considers whether a preventive action is necessary. The review may also include input from the operators and other stakeholders and the consideration of BMPs as appropriate.
- 3.3.3 If it is decided that a preventive action is necessary, the QEMS rep. determines the action to be taken based on this consultation and the operations management assigns responsibility and a target date for implementation.
- 3.3.4 The implementation of preventive actions is tracked by the QEMS rep. using the *Kagawong* Action Items Spreadsheet.
- 3.3.5 The implementation and effectiveness of preventive actions are verified during subsequent internal QEMS audits and are considered during the management review. If there is evidence that the action taken was not effective, the operations management may consider further preventive actions and assigns resources as appropriate.
- 3.4 The QEMS rep. and operations management monitor corrective/preventive actions on an ongoing basis and review the status and effectiveness of the actions during subsequent management review meetings.



Kagawong Drinking Water System

QEMS Proc.: OP-21 Rev Date: 15-May-19 Rev No: Pages: 3 of 4

CONTINUAL IMPROVEMENT

Reviewed by: PCT Approved by: Operations Management

- 3.5 Best Management Practices (BMPs)
 - 3.5.1 The QEMS rep. and/or operations management in consultation with the SPC manager will review and consider applicable BMPs identified by internal and/or external sources as part of the management review and in the corrective and preventive action processes described above.
 - 3.5.2 BMPs may include, but are not limited to:
 - facility/regional hub practices developed and adopted as a result of changes to legislative or regulatory requirements, trends from audit findings or drinking water system performance trends;
 - OCWA-wide BMPs/guidance or recommended actions;
 - drinking water industry based standards/BMPs or recommendations; or
 - those published by the Ministry of the Environment and Climate Change.
 - 3.5.3 At a minimum, applicable BMPs must be reviewed and considered once every 36 months.

4. Related Documents

Internal Audit Records Kagawong Action Items Spreadsheet MOECC Inspection Report OP-05 Document and Records Control **OP-20 Management Review**

5. Revision History

Date	Revision #	Reason for Revision
18-Jul-18	0	Procedure issued – Some of the information within OP-21 was originally set out in the main body of OCWA's Operational Plan (last revision #11, dated 22-Jan-18) and in QP-10 Internal Audit procedure (last revision #5, dated 19-Jul-17). Procedure issued – The original information within the main body of OCWA's Operational Plan was not used in OP-21 as it did not meet the requirements of the new DWQMS v. 2.0. Information from QP-10 Internal Audit was incorporated into s. 3.2 and s. 3.3 of OP-21 but was modified to address non-conformances identified from additional inputs other than internal audits and preventive actions resulting from means other than OFIs from internal audits. In addition R&Rs were revised to include the SPC Manager, and to clarify the role of the QEMS Representative in investigating and determining corrective and preventive actions needed. A section on Best Management Practices (s. 3.5) was added to meet the new requirements of DWQMS v. 2.0.



Kagawong Drinking Water System

QEMS Proc.: OP-21 Rev Date: 15-May-19

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Reviewed by: PCT Approved by: Operations Management

15-May-19 1 Changed the name of the action analysis spreadsheet to the action items spreadsheet in 3 locations



Kagawong Drinking Water System

QEMS Doc: OP-03A Rev Date: 19-Sep-24 Rev No: 3 Pages: 1 of 1

SIGNED COMMITMENT AND ENDORSEMENT

This Operational Plan sets out the framework for OCWA' Quality & Environmental Management System (QEMS) that is specific and relevant to your drinking water system(s) and supports the overall goal of OCWA and *The Corporation of the Township of Billings* (owner) to provide safe, cost-effective drinking water through sustained cooperation. OCWA will be responsible for developing, implementing, maintaining and continually improving its QEMS with respect to the operation and maintenance of the *Kagawong Water Treatment Facility & Distribution System* and will do so in a manner that ensures compliance with applicable legislative and regulatory requirements.

Through the endorsement of this Operational Plan, the owner commits to work with OCWA to facilitate this goal.

OCWA Top Management Endorsement		Owner Endorsement	
Keith Stringer General Manager	Date	Bryan Barker Mayor	Date
Pat Albert Northwestern Regional Hub Manager(A)	Date	Veronique Dion CAO/ Clerk	Date

The endorsement above is based on the Operational Plan that was current as of the revision date of this document (OP-03A).

Date	Revision #	Reason for Revision
24-Feb-17	0	New endorsement sought. OCWA: Jeff St.Pierre – NWO Regional Manager & Keith Stringer – Sr. Ops. Manager. OWNER: Austin Hunt – Mayor & Kathy McDonald – Clerk/Treasurer.
03-Jan-19	1	Major revisions to the operational plan and new mayor. OCWA: Jeff St.Pierre – NWO Regional Manager & Keith Stringer – Sr. Ops. Manager. OWNER: Ian Anderson – Mayor & Kathy McDonald – Clerk/Treasurer.
15-Feb-23	2	New owner endorsements were needed due to trigger – municipal elections.
19-Sep-24	3	New owner endorsements were needed due to trigger – Updated QEMS policy.



374028 6TH LINE • AMARANTH ON • L9W 0M6

September 18, 2024

AMCTO Advocacy Team 2680 Skymark Ave, Suite 610 Mississauga, ON L4W 5L6

Senty by Email to: advocacy@amcto.com

Re: Provincial Updates to the Municipal Elections Act

At its regular meeting of Council held on September 18, 2024, the Township of Amaranth Council passed the following resolution.

Resolution #: 3

Moved by: G. Little

Seconded by: B. Metzger

WHEREAS elections rules need to be clear, supporting candidates and voters in their electoral participation and election administrators in running elections.

WHEREAS legislation needs to strike the right balance between providing clear rules and frameworks to ensure the integrity of the electoral process,

WHEREAS the legislation must also reduce administrative and operational burden for municipal staff ensuring that local election administrators can run elections in a way that responds to the unique circumstances of their local communities.

WHEREAS the *Municipal Elections Act*, 1996 (MEA) will be 30 years old by the next municipal and school board elections in 2026.

WHEREAS the MEA sets out the rules for local elections, the *Assessment Act,* 1990 and the *Education Act,* 1990 also contain provisions impacting local elections adding more places for voters, candidates, and administrators to look for the rules that bind the local democratic process in Ontario.

WHEREAS with rules across three pieces of legislation, and the *MEA* containing a patchwork of clauses, there are interpretation challenges, inconsistencies, and gaps to fill.

WHEREAS the Act can pose difficulties for voters, candidates, contributors and third-party advertisers to read, to interpret, to comply with and for election administrators to enforce.

WHEREAS while local elections are run as efficiently and effectively as can be within the current legislative framework, modernization and continuous improvement is needed to ensure the Act is responsive to today's needs and tomorrow's challenges.

WHEREAS to keep public trust and improve safeguards the Act should be reviewed considering the ever-changing landscape which impacts elections administration including privacy, the threats of foreign interference, increased spread of mis/disinformation and the increased use of technologies like artificial intelligence and use of digital identities.

WHEREAS the Association of Municipal Managers, Clerks, and Treasurers of Ontario (AMCTO) reviewed the Act and has provided several recommendations including modernizing the legislation, harmonizing rules, and streamlining and simplifying administration.

AND WHERAS AMCTO put forward recommendations for amendments ahead of the 2026 elections and longer-term recommendations for amendments ahead of the 2030 elections.

BE IT RESOLVED THAT The Township of Amaranth calls for the Province to update the MEA with priority amendments as outlined by AMCTO before Summer 2025 and commence work to review and re-write the MEA with longer-term recommendations ahead of the 2030 elections.

And Be It Further Resolved that this resolution will be forwarded to all municipalities in Ontario for support and that each endorsement be then forwarded to the Minister of Municipal Affairs and Housing (minister.mah@ontario.ca), the Minister of Education (minister.edu@ontario.ca), the Minister of Public and Business Service Delivery (todd.mccarthy@ontario.ca), Minister of Finance (Minister.fin@ontario.ca) the Premier of Ontario (premier@ontario.ca), Sylvia Jones MPP (sylvia.jones@ontario.ca) and AMCTO (advocacy@amcto.com)

CARRIED

Please do not hesitate to contact the office if you require any further information.

Yours truly,

Nicole Martin, Dipl. M.A.

CAO/Clerk

cc. All Ontario Municipalities

Minister of Municipal Affairs and Housing (minister.mah@ontario.ca)

Minister of Education (minister.edu@ontario.ca)

Minister of Public and Business Service Delivery (todd.mccarthy@ontario.ca)

Minister of Finance (Minister.fin@ontario.ca)

Premier of Ontario (premier@ontario.ca)

Sylvia Jones MPP (sylvia.jones@ontario.ca)

Accounts for Payment Sep 11 - Sep 23, 2024

Cheque No.	Payee	Description	Cheque Date	Amoun
8458	Mindemoya Home Hardware	Maintenance - PW	Sep 17, 2024	24.85
8459	Wally's Septic Service & Portable Toilets	Pump outs - Marina	Sep 17, 2024	395.50
8460	Auto Parts North	Equipment Maint - PW	Sep 17, 2024	578.77
8461	ANP Office Supply	Office Supplies - General	Sep 17, 2024	40.68
8462	Bridal Veil Variety	Fuel - Fire	Sep 18, 2024	110.74
8463	Identifiable Individual	Coyote Compensation - Enforcement	Sep 18, 2024	50.00
8464	Royal Canadian Legion	Contribution Expense - General	Sep 19, 2024	395.00
8465	Carrier Emergency Vehicles	Equipment Maint - Fire	Sep 19, 2024	757.55
				2,353.09
Direct Deposit No.	Payee	Description	Direct Deposit Date	Amoun
Direct Deposit	Identifiable Individuals	Payroll - Various Depts	Sep 11, 23 2024	32,829.32
VP323	Rainbow District School Board	English School Board Levy - Quarterly Pmt	Sep 12, 2024	76,905.87
VP324	CSD Grand Nord	French School Board Levy - Quarterly Pmt	Sep 12, 2024 Sep 12, 2024	542.01
VP325	G. Stephen Watt LLB		•	423.75
	,	Legal - General	Sep 17, 2024	268.95
VP326	Encompass IT	Contract - General	Sep 17, 2024	
VP327	Ontario Clean Water Agency	Maintenance - Water	Sep 17, 2024	1,735.26
VP328	EXP Services Inc.	Roads & Bridges Capital - Old Mill Rd. Bridge	Sep 17, 2024	13,332.42
VP329	Lakeshore Maintenance	Contract - Cleaning - Various Locations	Sep 17, 2024	2,350.00
VP330	Identifiable Individuals	Seniors Tea Supplies - General	Sep 18, 2024	33.11
VP332	Federation Of Canadian Municipalities	Subscriptions/Memberships - General	Sep 19, 2024	176.40
VP333	Wally's Septic Service & Portable Toilets	Pump outs - Marina	Sep 19, 2024	395.50
VP334	A10 Fabrication	Building Capital - Fire	Sep 19, 2024	2,751.55
VP335	Public Health Sudbury & Districts	Health Unit - DSB	Sep 19, 2024	2,863.16
VP336	Encompass IT	Contract - General	Sep 19, 2024	134.47
VP337	S.T.O.P. Restaurant Supply	Office Supplies - General	Sep 23, 2024	110.31
VP338	Manitoulin-Sudbury District Services Board	Ambulance, Housing, OW, Child Care - DSB	Sep 23, 2024	32,776.83
VP340	Make-Way Environmental Technologies	Contract - Water	Sep 23, 2024	646.81
VP340 VP341	Make-Way Environmental Technologies Manitoulin Training Solutions	Contract - Water Professional Development - Fire	Sep 23, 2024 Sep 23, 2024	646.81 1,600.00
	-		•	
VP341	Manitoulin Training Solutions		Sep 23, 2024	1,600.00
	Manitoulin Training Solutions Payee	Professional Development - Fire Description	•	1,600.00 169,875.72
VP341 Direct Deposit No. EFT	Manitoulin Training Solutions Payee Hydro One	Professional Development - Fire Description Electricity	Sep 23, 2024 Direct Deposit Date Sep 24, 2024	1,600.00 169,875.72 Amount 4,240.93
Direct Deposit No. EFT EFT	Manitoulin Training Solutions Payee Hydro One Eastlink	Professional Development - Fire Description Electricity Internet	Direct Deposit Date Sep 24, 2024 Sep 24, 2024	1,600.00 169,875.72 Amount 4,240.93 149.35
VP341 Direct Deposit No. EFT EFT EFT	Manitoulin Training Solutions Payee Hydro One Eastlink Iron Mountain	Professional Development - Fire Description Electricity Internet Document Shredding Service	Direct Deposit Date Sep 24, 2024 Sep 24, 2024 Sep 20, 2024	1,600.00 169,875.72 Amount 4,240.93 149.35 107.35
Direct Deposit No. EFT EFT EFT EFT	Manitoulin Training Solutions Payee Hydro One Eastlink Iron Mountain GFL	Professional Development - Fire Description Electricity Internet Document Shredding Service Contracts - Landfill	Direct Deposit Date Sep 24, 2024 Sep 24, 2024 Sep 20, 2024 Sep 17, 2024	1,600.00 169,875.72 Amount 4,240.93 149.35 107.35 11,518.66
Direct Deposit No. EFT EFT EFT EFT EFT EFT	Manitoulin Training Solutions Payee Hydro One Eastlink Iron Mountain GFL The Manitoulin Expositor	Professional Development - Fire Description Electricity Internet Document Shredding Service Contracts - Landfill Staffing Ad - General	Direct Deposit Date Sep 24, 2024 Sep 24, 2024 Sep 20, 2024 Sep 17, 2024 Sep 17, 2024	1,600.00 169,875.72 Amount 4,240.93 149.35 107.35 11,518.66 559.98
Direct Deposit No. EFT EFT EFT EFT EFT EFT EFT	Payee Hydro One Eastlink Iron Mountain GFL The Manitoulin Expositor Superior Propane	Professional Development - Fire Description Electricity Internet Document Shredding Service Contracts - Landfill Staffing Ad - General Propane - Park Centre	Direct Deposit Date Sep 24, 2024 Sep 24, 2024 Sep 20, 2024 Sep 17, 2024 Sep 17, 2024 Sep 16, 2024	1,600.00 169,875.72 Amount 4,240.93 149.35 107.35 11,518.66 559.98 31.97
Direct Deposit No. EFT EFT EFT EFT EFT EFT EFT EF	Payee Hydro One Eastlink Iron Mountain GFL The Manitoulin Expositor Superior Propane OCWA	Professional Development - Fire Description Electricity Internet Document Shredding Service Contracts - Landfill Staffing Ad - General Propane - Park Centre Contract - Water	Direct Deposit Date Sep 24, 2024 Sep 24, 2024 Sep 20, 2024 Sep 17, 2024 Sep 17, 2024 Sep 16, 2024 Sep 10, 2024	1,600.00 169,875.72 Amount 4,240.93 149.35 107.35 11,518.66 559.98 31.97
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Direct Deposit No. EFT EFT EFT EFT EFT EFT EFT EF	Payee Hydro One Eastlink Iron Mountain GFL The Manitoulin Expositor Superior Propane OCWA	Professional Development - Fire Description Electricity Internet Document Shredding Service Contracts - Landfill Staffing Ad - General Propane - Park Centre Contract - Water Employee Benefits - General	Direct Deposit Date Sep 24, 2024 Sep 24, 2024 Sep 20, 2024 Sep 17, 2024 Sep 17, 2024 Sep 16, 2024 Sep 10, 2024 Sep 10, 2024	1,600.00 169,875.72 Amount 4,240.93 149.35 107.35 11,518.66 559.98 31.97 10,948.00 5,463.46 33,019.70
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Grand Total \$ 219,129.43



BY-LAW NO 2024-54

BEING A BY-LAW TO CONFIRM THE PROCEEDINGS OF THE COUNCIL OF THE TOWNSHIP OF BILLINGS

WHEREAS the Municipal Act S.O. 2001, c 25, Section 5(1), as amended, provides that the powers of a municipal corporation are to be exercised by its Council;

AND WHEREAS the Municipal Act S.O. 2001, c 25, Section 5(3), as amended, provides that a municipal power, including a municipality's capacity rights, powers and privileges under Section 9; shall be exercised by By-Law;

AND WHEREAS The Council for The Corporation of the Township of Billings deems it expedient that the proceedings of meetings of the Council be confirmed and adopted by By-Law;

NOW THEREFORE the Council of The Corporation of the Township of Billings enacts as follows:

- 1. THAT the actions of the Council of The Corporation of The Township of Billings at its Council Meeting held on October 1, 2024 in respect to each report, motion, resolution, or other actions recorded and taken by Council at its meetings, except where the prior approval of the Ontario Lands Tribunal is required is hereby adopted, ratified, and confirmed as if all such proceedings were expressly embodied in this By-Law.
- 2. THAT the Mayor and CAO/Clerk, or such other official as deem appropriate are hereby authorized and directed to do all things necessary to give effect to the said action, of Council of the Township of Billings referred to in the proceeding section.
- 3. THAT the Mayor and CAO/Clerk are hereby authorized and directed to execute all documents necessary on behalf of the Council and to affix the corporate seal of The Corporation of The Township of Billings to all such documents.
- 4. THIS By-Law shall come into full force and effect upon final passage.
- 5. THIS By-Law may be cited as the "October 1, 2024 Confirmatory By-Law"

READ a FIRST and SECOND TIME IN	s 1st day of October, 2024
READ a THIRD TIME and FINALLY PA	ASSED this 1 st day of October, 2024
Brvan Barker. Mavor	Véronique Dion, CAO/Clerk