



REGULAR COUNCIL AGENDA

For the Corporation of the Town of
Espanola

Council Meeting _____

To Be Held On

Thursday, January 31st, 2019
Council Chambers

100 Tudhope Street
7:00 pm



Espanola Council AGENDA

*For the Regular Meeting of the Town of Espanola
To Be Held On **Thursday, January 31, 2019** at 7:00 p.m.
In The Council Chambers, Municipal Building*

- | | |
|-----------|--|
| 6:00 P.M. | SPECIAL IN CAMERA MEETING OF COUNCIL
Main Level Boardroom, 100 Tudhope Street |
| 7:00 P.M. | REGULAR MEETING OF COUNCIL
Council Chambers, 100 Tudhope Street |

Please note this meeting will be streamed.

Disclosure of Pecuniary Interest and General Nature Thereof

PUBLIC HEARINGS

None

DELEGATIONS

None

QUESTION PERIOD

PART 1 - CONSENT AGENDA

Resolution Prepared Adopting Resolutions for
Items **A1** to **F5** inclusive contained in the Consent Agenda

- CA-02-19 Be It Resolved That: Items A1 to F5 inclusive contained in Part 1, Consent Agenda be adopted.

Adoption of Minutes

A1 Regular Meeting of Council of January 15, 2019

A2 Special Meeting of Council of January 22, 2019

- 19-017 Be It Resolved That: The following Minutes are hereby accepted; Regular Meeting of Council of January 15, 2019; Special Meeting of Council of January 22, 2019.

Board and Committee Reports

B1 Community Services Committee Meeting of January 22, 2019

- 19-018 Be It Resolved That: The following board and committee reports are hereby received; Community Services Committee Meeting of January 22, 2019.

Matters arising from the "In Camera Session"

None

Business Arising from Board and Committees

None

Bylaws and Resolutions

The following bylaws will be read and passed.

E1 Bylaw No. 2893/19

- 19-019 Being a Bylaw of the Town of Espanola to confirm the proceedings of Council at its Meeting of January 15, 2019.

Reports

F1 Public Works Department Departmental Report for December 2018

F2 Leisure Services Department Departmental Report for December 2018

F3 Fire Department Departmental Report for December 2018 & 2018 Year End Report

F4 Building Department Departmental Report for November & December 2018

F5 Economic Development Departmental Report for December 2018

- 19-020 Be It Resolved That: The following reports are hereby received; Public Works Department Departmental Report for December 2018; Leisure Services Department Departmental Report for December 2018; Fire Department Departmental Report for December 2018 & 2018 Year End Report; Building Department Departmental Report for November & December 2018; Economic Development Departmental Report for December 2018.

PART II - REGULAR AGENDA

Bylaws and Resolutions

G1 Bylaw No 2894/19; being a Bylaw to Execute an Agreement Between the Town of Espanola and the Minister of Transportation for the Province of Ontario

- 19-021 Be It Resolved That: Bylaw No 2894/19 be adopted; being a Bylaw to Execute an Agreement Between the Town of Espanola and the Minister of Transportation for the Province of Ontario.

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G2 Recommendation regarding OCWA Operational Plan

- 19-022 Be It Resolved That: The updates to the Drinking Water Quality Management Standard Operational Plan as prepared be adopted.

G3 Recommendation regarding Integrity Commissioner's Report

- 19-023 Be It Resolved That: For Discussion

Correspondence For Information Only

None

Information

This information was previously circulated to Council. If required a copy of the information is available at the Municipal Office.

MPP correspondence re: congratulations to newly elected council

MPP correspondence re: Launch of Ontario Health Regulators website

Conference and Conventions

OGRA - Feb 24-27, 2019; Toronto ON

Mayor and Councillor Reports and Announcements

Future Council/Committee Meetings

Corporate Services Committee Meeting of February 5th @ 4:00 pm

Special Budget Meeting of Council of February 5th @ 7:00 pm

Regular Meeting of Council of February 12th @ 7:00 pm

Adjournment

Closed Meeting (if required)



**THE PUBLIC MEETING OF COUNCIL
OF THE TOWN OF ESPANOLA**

**Council Chambers
Municipal Office**

**January 15, 2019
7:30 pm**

Her Worship Mayor Beer presided over the meeting.

Present:

Councillors K. Duplessis, S. Hayden, B. Foster, H. Malott, M. Van Alstine

Staff: C. Townsend, CAO/Treasurer; P. Roque, Clerk; T. Denault-Roque, Recording Secretary

Absent:

Councillor R. Dufour

The Mayor called the meeting to order.

Disclosure of pecuniary interest and the general nature thereof.

Public Hearing

None

Delegations/Petitions

Melissa Harrison, representative of the School Council of Sacred Heart School, addressed Council with their concerns on smoking in public spaces.

Ms. Harrison requested the current bylaw be amended with the following:

- 1) restricted areas for smoking in public be expanded to include within 25 m (82 ft) of the perimeters of our local schools and daycares;
- 2) That the same distance of 25 m (82 ft) be implemented for a consistent radius within any public place as defined by the Town of Espanola (such as the recreation complex and parks), to create smoke-free zone within our community;
- 3) That smoke free areas be expanded to all municipal walkways, which supports a smoke-free walk to school for our children and youth.

Children from Sacred Heart School offered some facts about smoking and how being around people who smoke affect them.

Mayor Beer thanked the delegation and requested this Item be brought forward to the Community Services Committee for discussion.

Mayor Beer inquired if she could have a consensus of Council to change the order the Agenda and move the Special Meeting of Council to this section of the Agenda in order to accommodate a scheduling conflict with the solicitor that will be taking part in the meeting. She advised that as per the Procedural Bylaw no resolution is required, only the consensus of Council. Council agreed to move the meeting.

In Camera

S. Hayden – B. Foster

Be It Resolved That: Under authority of Section 26.1.3 of Bylaw No. 2062/08, Council goes into an "in camera" session for the purpose stated in Section 239.2 of the Municipal Act.

- a matter in respect of which a council, board, committee or other body may hold a closed meeting under another Act;
- personal matters about an identifiable individual, including municipal or local board employees;
- a proposed or pending acquisition or disposition of land by the municipality or local board

Time: 7:40 pm

Carried

Resume Special Meeting

M. Van Alstine – B. Foster

Be It Resolved That: The Special Meeting of Council hereby resumes.

Time: 8:55 pm

Board and Committee Appointments

S. Hayden – K. Duplessis

Be It Resolved That:

The following board and committee appointments are hereby accepted;

Committee of Adjustment

Debbie Graham

Brian Riche

Hydro Board

Doug Bois

Ron Duplessis

Library Board

Sylvia Belanger

Evelyn Diebel

Allen McCulloch

Brian Riche

Debbie Graham

Non Profit Housing Board

Gary McPherson

Allen McCulloch

Police Services Board

Yves Carriere

Carried

Question Period

None

Mayor Beer asked if there were any items to be severed from the consent agenda. There were none.

CONSENT AGENDA

CA-019-01 M. Van Alstine – S. Hayden

Be It Resolved That: Items A1 to F2 inclusive contained in Part 1, Consent Agenda be adopted.

Carried

Items A1-A2
Council Minutes

19-001 H. Malott – M. Van Alstine

Be It Resolved That: The following Minutes are hereby accepted; Regular Meeting of Council of December 11, 2018; Special Meeting of Council of December 20, 2018;

Carried

Board and Committee Reports

Items B1-B4

09-002 H. Malott – M. Van Alstine

Be It Resolved That: The following board and committee reports are hereby received; Espanola Public Library Meeting Minutes of October 15, 2018; November 12, 2018 and November 20, 2018; Community Services Committee Meeting of December 18, 2018; Corporate Services Committee Meeting of January 8, 2019.

Carried

Matters arising from the "In Camera Session"

None

Business Arising from Board and Committees

Joint Health and Safety Committee Meeting of December 6, 2019

Item D1
Health and Safety Policy

19-003 M. Van Alstine – H. Malott

Be It Resolved That: As Recommended by the Joint Health and Safety Committee That: Council adopt the revised Health and Safety Policy.

Carried

Corporate Services Committee Meeting of January 8, 2019

Item D2
Budget Schedule

19-004 M. Van Alstine – H. Malott

Be It Resolved That: As Recommended by the Corporate Services Committee That: The Budget Deliberation Schedule be adopted as presented.

Carried

Item D3
Council
Remuneration

19-005 M. Van Alstine – H. Malott

Be It Resolved That: As Recommended by the Corporate Services Committee That: The revised council remuneration amounts be reflected in Bylaw No 2834/18.

Carried

Item D4
Rate of Pay Policy

19-006 H. Malott – M. Van Alstine

Be It Resolved That: As Recommended by the Corporate Services Committee That: The Rate of Pay Provision Policy be amended to update the casual and part-time rate of pay as proposed.

Carried

Item D5
Non-Union Salaries

19-007 K. Duplessis – S. Hayden

Be It Resolved That: As Recommended by the Corporate Services Committee That: The non-union salaries are adjusted by 1.5% for 2019.

Carried

Bylaws and Resolutions

Item E1
Confirmatory Bylaw

19-008 S. Hayden – K. Duplessis

Be It Resolved That: Bylaw No 2891/19 be adopted; being a Bylaw of the Town of Espanola to confirm the proceedings of Council at its Meeting of December 11, 2018.

Carried

Item E2
Bylaw for Municipal Insurance Services Ltd

19-009 S. Hayden – K. Duplessis

Be It Resolved That: Bylaw No 2889/19 be adopted; being a Bylaw of the Town of Espanola to execute and agreement with Municipal Insurance Services Ltd.

Carried

Item E3
Bylaw to Establish and Name a Public Highway

19-010 B. Foster – K. Duplessis

Be It Resolved That: Bylaw No 2890/19 be adopted; being a Bylaw of the Town of Espanola to Establish and Name a Public Highway.

Carried

Item E4
Bylaw to Execute and Agreement for Court Services

19-011 B. Foster – S. Hayden

Be It Resolved That: Bylaw No 2892/19 be adopted; being a Bylaw to Execute An Agreement Between The Corporation of the Town of Blind River, The Corporation of the City of Elliot Lake, The Corporation of the Town of Spanish; The Corporation of the Township of the North Shore and The Corporation of the Town of Espanola for Court Services.

Carried

Reports

Item F1-F2

19-012 B. Foster – Sandra Hayden

Be It Resolved That: The following reports are hereby received; Ministry of Municipal Affairs and Housing 2017 Financial Indicators for the Town of Espanola; Post 2018 Municipal Election Accessibility and Review Report.

Carried

PART II

REGULAR AGENDA

Bylaws and Resolutions

Item G1

**Bylaw for the Interim
Tax Levy**

19-013 B. Foster – S. Hayden

Be It Resolved That: Bylaw No 2888/19 be adopted, being a Bylaw to Provide for an Interim Tax Levy and the Payment of Interim Taxes for the Year 2019.

Carried

Item G2

**Rescheduling of
Council Meeting**

19-014 K. Duplessis – H. Malott

Be It Resolved That: The Regular Meeting of Council scheduled for Tuesday, January 29, 2019 at 7:00 pm be rescheduled to Thursday, January 31, 2019 at 7:00 pm.

Carried

Item G3

**Ontario's Natural
Resource Revenue**

19-015 M. Van Alstine – H. Malott

Be It Resolved That: Council for the Town of Espanola supports the Town of Kirkland Lake's resolution regarding Northern Ontario's Natural Resource Revenue Sharing Program adopted December 18, 2018.

Carried

Item G4

**Council
Remuneration OMERS**

A discussion ensued. It was explained that in order for Council to opt-out of OMERS it would need to be a unanimous decision; which it was not.

Item G5

**Cannabis Retail
Stores**

19-016 B. Foster – H. Malott

WHEREAS, Recreational cannabis became legal in Canada on October 17th, 2018;

AND WHEREAS, the Ontario government has introduced legislation that dictates that retail cannabis outlets will be privately operated, but licensed and regulated by the Alcohol and Gaming Commission of Ontario (AGCO);

AND WHEREAS, Municipalities in Ontario will have the option to opt-out of hosting retail outlets within their respective geographic boundaries and would require that municipal councils pass a resolution and advise the AGCO by January 22, 2019;

AND WHEREAS, if a municipality decides to allow cannabis retail stores within its jurisdiction any time before January 22,

2019, the AGCO should be notified as soon as possible;

THEREFORE BE IT RESOLVED that the Corporation of the Town of Espanola advises the AGCO of its intention to opt in to allowing retail cannabis stores in the town of Espanola.

Carried

Item G6

Budget Presentations

Mayor Beer referred to the article that was shared with Council from the Municipal World magazine that focuses on mistakes that Council can make as soon as they take office; asking that the budget be presented line by line was the 2nd item on the list. She explained that as a governing body it was Council's job to understand the services that are provided by the municipality. They have the right to make the decisions on what services will be provided. It is the job of the Department Managers to make decisions based the Budget that Council sets. She further advised that Department Managers will be presenting their Budgets and are available to answer any questions Council may have.

Council Van Alstine stated she would still like to see the Budget line by line and advised that receiving the Budget 2 business days with her work schedule is not feasible and would like it emailed out ahead of time. Mayor Beer advised that there is a budget schedule as well the Procedural Bylaw states when they have access to the information; however if Councillor Van Alstine would like additional information she encouraged her to visit the CAO.

Further discussions ensued. Mayor Beer stated that the General Ledger will be kept in the Main Level Boardroom and Council can make themselves available to review it.

Correspondence For Information Only

None

Information

This information was previously circulated to Council. If required a copy of the information is available at the Municipal Office.

Cheque register for December 2018

Public Health Sudbury & Districts correspondence re: Smoke Free Ontario

Public Health Sudbury & Districts correspondence re: Oral Health Programs

Public Health Sudbury & Districts correspondence re: congratulations on elections

LAS correspondence re: rebate

MMAH correspondence re: Housing Supply Action Plan

OGRA re: nominations

Stewardship Ontario correspondence re: Industry Funding for Blue Box Program

Municipal World Article re: New Council Members

OGRA correspondence re: Opt In/Opt Out

Conference and Conventions

ROMA - Jan 27-29, 2019; Toronto ON

Mayor and Councillors Reports and Announcements

Safe Parking Spot Program

Council Van Alstine inquired about the Safe Spot Program. Mayor Beer advised that Item will be discussed at the Police Service Board Meeting

Council Reports

Mayor Beer advised that she would like to have reports from the various Boards and Committee that Council members sit on be presented during this portion of the meeting.

In Camera Item

Mayor Beer advised that there will be a resolution to come in the future regarding the in camera meeting item.

Future Council Meetings

Community Services Committee Meeting of January 22, 2019 @ 4:00 pm
Budget Meeting of January 22, 2019 @ 7:00 pm
Regular Meeting of Council of January 31, 2019 @ 7:00 pm

Adjournment

K Duplessis – H Melott

Be It Resolved That: The Regular Meeting of Council is hereby adjourned. Time: 9:43pm

Carried

Jill Beer
Mayor

Paula Roque
Clerk

**SPECIAL MEETING OF COUNCIL
OF THE TOWN OF ESPANOLA**

**Council Chambers
Municipal Office**

**January 22, 2019
7:00 pm**

Mayor Beer presided over the meeting.

Disclosure of pecuniary interest and general nature thereof

Present: Mayor Beer; Councillors R. Dufour; K. Duplessis; B. Foster; S. Hayden; H. Malott; M. Van Alstine

Staff: C. Townsend, CAO/Treasurer; P. Roque, Clerk; C. Kennelly, Programs Manager/Economic Development Officer; D. Rivet, CBO; C. Desjardins, Manager of POA; M. Pichor, Fire Chief; T. Denault-Roque, Recording Secretary

**2019 1st Draft
Budget
Deliberations**

The CAO presented Council with a summary of the budget process; budget challenges, assessment appeals, tax burden distribution as well as an overall review to the 2019 Municipal Budget.

Ms. Townsend presented the proposed 2019 Municipal Administration Budget which included a very brief description of some of the duties of the administration staff. Ms. Townsend spoke of the purpose of the Strategic Plan and advised that Council may decide to add to the item or leave it alone.

Mayor Beer advised Council that during the Police Services Committee Meeting members were advised that under the Police Services Act Council will need to implement a Community Safety and Well-Being Plan; she further advised that this Plan could be built into a new Strategic Plan.

M. Pichor, Fire Chief provided an overview of fire services. He explained that the increase to operations reflects costs associated with the transfer from the old building to the new firehall. He further advised that the biggest increase in the budget was for a new agreement for dispatch services. Mr. Pichor explained that there will be an increase to the Emergency Management budget as an agreement for emergency calls will need to be put in place.

D. Rivet, CBO presented a brief summary of the Building Department duties, its employees and budget. He also spoke to the shared services agreement that was in place with neighbouring municipalities.

C. Desjardins, Manager of POA provided Council with history of the transfer of POA from the Province to the municipality. She also advised Council there was a large decrease in tickets over

the past 3 months for the Town of Espanola. In addition, Ms. Desjardins explained that the financial implication related to the announcement of the downloading of Prosecution of Part III to the municipalities from the province is still unknown.

Ms. Townsend presented the Health and Social Services Budget. A discussion ensued regarding the Doctor Recruitment donation; it was the consensus of Council to have the hospital CAO attend a meeting to provide further details.

Ms. Townsend advised that the Economic Development Budget will be presented at the next budget meeting.

Ms. Roque, Clerk/Manager of Planning Services presented the Planning Budget explaining that the increase to the budget is the cost associated to review the Zoning Bylaw.

Mayor Beer advised that additional detailed budget information will be coming from the CAO

Adjournment

H. Malott – M. Van Alstine

Be It Resolved That: The Special Meeting of Council is hereby adjourned. Time: 8:50 pm

Carried

J. Beer
Mayor

C. Townsend
CAO/Treasurer



**Community Services Committee Meeting
Tuesday, January 22, 2019
4:00 pm
Council Chambers
Municipal Building**

Chair Heather Malott presided over the meeting

Present:

Municipal Officials: Mayor Beer; Councillors R. Dufour; S. Hayden.

P. Roque, Clerk; C. Townsend, CAO/Treasurer; J. Yusko, Manager of Public Works/Leisure Services; C. Kennelly, Economic Development Officer; M. Pichon, Fire Chief; T. Denault-Roque, Recording Secretary

Departmental Reports

The Committee received the following reports; Public Works Department Departmental Report for December 2018; Leisure Services Department Departmental Report for December 2018; Fire Department Departmental Report for December 2018 & 2018 Year End Report; Building Services Departmental Report for November & December 2018; Economic Development Departmental Report for December 2018.

Staff was directed to prepare a staff report for the next Community Services Committee Meeting on hanging baskets with details on purchase and maintenance costs.

Clarification was given to Councillor Dufour regarding bylaw enforcement and the proper process to file a complaint.

Smoke-free Ontario

The Clerk explained that the current Smoking Bylaw would need to be updated to reflect the new cannabis legislation; also council directed staff to review the request of the Sacred Heart Parent Council with respect to the Smoke Free Act.

A discussion ensued regarding the requests of the Sacred Heart Parent Council to go above and beyond the Act by increasing the perimeter of non-smoking areas of our schools; daycares and any public spaces defined by the Town by 5 metres. In addition, they are requesting smoke-free areas be expanded to all municipal walkways.

Councillor Dufour advised that 20 metres was already pretty far and didn't think going beyond that was necessary. Mayor Beer explained that although she does not like smoking, she is concerned with the safety aspect of not

allowing people to smoke on municipal walkways. She questioned if this will result in people walking on the roads. She further advised that if the perimeter was increased, that may not alleviate this issue but rather relocate it elsewhere.

Staff was directed to map out a radius of 25 metres to show the new potential boundaries; discuss with the school boards alternative options and to bring this information back to the following meeting.

Safe Trade Parking Spot

Mayor Beer explained that she spoke to this item at the Police Services Board Meeting; where she stated that the Facilities Agreement with the OPP will dictate the amount of parking spaces required by that organization; however they have not submitted the final agreement to the municipality.

The committee was advised by the Fire Chief that the OPP will be revising their request and resubmitting to council.

Adjournment

S. Hayden – R. Dufour

Be It Resolved That: The Community Services Committee meeting is hereby adjourned.

Time: 4:41 pm.

H. Malott
Chair

Paula Roque
Clerk



THE CORPORATION OF THE TOWN OF ESPANOLA

BYLAW NO. 2893/19

**Being a bylaw of the Town of Espanola to Adopt
the Minutes of Council for the Term Commencing
December 1st, 2014, and Authorizing
Taking of any Action Authorized Therein and Thereby**

WHEREAS Section 101 of the Municipal Act, R.S.O. 1990, C. M45, as amended, requires a municipal council to exercise its powers by bylaw, except where otherwise provided;

AND WHEREAS in many cases, action which is taken or authorized to be taken by a Council or a Committee of Council does not lend itself to an individual bylaw;

NOW THEREFORE THE COUNCIL OF THE CORPORATION OF THE TOWN OF ESPANOLA ENACTS AS FOLLOWS:

1. That the Minutes of the meetings of the Council of the Town of Espanola for the term commencing December 1st, 2018, held on: January 15, 2019 and the same are hereby adopted.
2. That the taking of any action authorized in or by the Minutes mentioned in Section 1 hereof and the exercise of any powers by the Council or Committees by the said minutes be and the same are hereby ratified, authorized and confirmed.
3. That where no individual bylaw has been or is passed with respect to the taking of any action authorized in or by the Minutes mentioned in Section 1 hereof or with respect to the exercise of any powers by the Council or Committees in the above mentioned Minutes, then this bylaw shall be deemed for all purposes to be the bylaw required for approving and authorizing the taking of any action authorized therein or thereby or required for the exercise of any power therein by the Council or Committees.
4. That the Mayor and proper officers of the Corporation of the Town of Espanola are hereby authorized and directed to do all things necessary to give effect to the recommendations, motions, resolutions, reports, action and other decisions of the Council or Committees as evidenced by the above mentioned Minutes in Section 1 and the Mayor and Clerk are hereby authorized and directed to execute all necessary documents in the name of the Corporation of the Town of Espanola and to affix the seal of the Corporation thereto.

Read a First, Second and Third Time and Passed this 31st day of January 2019.

J. Beer
Mayor

Paula Roque
Clerk

Department: General Administration	Form Number: A99-01371
Subject: Departmental Report	Effective Date: 06/05/17
Policy No:	Revision Date: 08/04/27
Bylaw No:	Version #: 2

DEPARTMENTAL REPORT

DEPARTMENT: Public Works

MONTH: December 2018

PROJECT STATUS:

- **Bio-Solids:** Complete, to be presented to Council @ February 12th Council meeting
- **Water Meters:** Reviewing of water rates
- **Asset Management:** Ongoing
- **Hwy 6/Centre St.:** Permanent traffic control lights completed and put into service at Second Ave. They are operating on a timed program until the vehicle sensing loops can be installed with the surface asphalt in May/June 2019.
- **IRP Phase 2A:** Surface asphalt and property restorations in 2019. Project is substantially complete for 2018.

TRANSPORTATION:

- Public Works continued with regular maintenance of town streets and back roads including winter road maintenance, patching, sign installations and repairs, brushing & tree removal, shouldering, and garbage/debris pick-up.
- Scraped ice and snow build-up of town streets during mild days
- There were 239 loads of snow removed for the month of December.

EQUIPMENT:

- #35 Snow blower was down on December 4th and was back up on December 6th.
- #13 Dump Truck was down on December 11th and was repaired by December 18th.
- #5 Plow Truck was down on December 12th and was repaired by December 17th.

ENVIRONMENTAL:

- Nothing to report.

BEAUTIFICATION:

- Installed Christmas lights.
- Sent out 2019 flower tender.

CEMETERY:

- Nothing for this month.

BALL FIELDS/PARKS/CLEAR LAKE BEACH:

- Nothing for this report.

WATER & SEWER:

- Hooked up hydrant for Garson Pipe to provide water for the new watermain commissioning for Brentwood subdivision. PWD observed the watermain connection by Garson Pipe once commissioning was complete.
- Hooked up hydrant at ski hill for snow making.
- There was one complaint for sewer back up. Homeowner's responsibility.

INTER DEPARTMENTAL:

- Maintained vehicles and equipment for other departments.
- Assisted with clean up at police station.
- Assisted outdoor rink with ice making.
- Assisted with the sale of surplus police vehicles.

COMPLAINTS/COMPLIMENTS:

- There was one compliment in regards to the senior snow removal program.

EMPLOYEE STATUS:

- A Public Works employee is off on long term disability since March.
- A Public Works employee was transferred to the Complex to fill a temporary vacancy involving ice-making/refrigeration.
- The administrative assistant is away on LOA from January 22 and will be returning March 14, 2019.
- In-house training on winter equipment, routes and shift.
- Five employees participated in sanitary sewer collection training on December 4 & 5 in Espanola.
- PWD assisted Admin with the advertisement of the casual crossing guard pool.
- One permanent crossing guard is off due to sickness for up to 8 weeks. With only 1 casual crossing guard available, any crossing guard absences in this timeframe will result in unattended crossings.

VISITORS:

- Three blue boxes were issued during the month of December.
- Performed senior snow removal six times for the month of December.

Department: General Administration	Form Number: A99-01371
Subject: Departmental Report	Effective Date: 06/05/17
Policy No:	Revision Date: 08/04/27
Bylaw No:	Version #: 2

DEPARTMENTAL REPORT

DEPARTMENT: Leisure Services	MONTH: December 2018
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Project Status:

Building

- Wade pool closed for two days due to chemical imbalance
- Lost one arena compressor Dec 27th to be replaced Jan 8th
- a drive motor on the main Zamboni door failed and will be replaced week of Jan 7th
- Replaced a broken and outdated chin-up assist machine for the fitness centre

Outdoor Rink

- Preparations for ice making began at outdoor rink

Pool

- Strong participant turnout in the pool for the holiday swims; On Average 92 people participated in pool programming over the holidays
- Christmas Eve had 45 swimmers out with 24 of those being parents and tots
- New Years' Eve had 67 swimmers over a 2 hour span with 52 of those being Parents & Tots
- Based on this success staff will schedule the same holiday coverage for 2019
- Regularly scheduled 2nd Sunday of the month Shelley Newton Memorial Swim had 35 participants

Arena

- Offered a "Figure Eighters" time slot to the ice schedule to create an equal opportunity for those who figure skate to access a low cost practice time just as hockey players have access to shinny
- 2nd Annual Slapfest tournament attracted 14 teams & booked 25 hours of ice - plus a dance. Organizers were happy with the event & have booked for 2019
- 1st time booking for the Aboriginal Team Try Outs (4 hrs of ice time) organizers pleased with experience

Events

- Staff working on Winter Carnival/Family Day & March Break Programming
- all community & private partners contacted for information on March Break & Summer Camp Program information

Project updates

- Indoor pickle ball participants continue to average 17. The program is held at

the High school under our reciprocal agreement

- Rolled out Holiday Promotion to Include: Purchase a 10 pass card get 2 visits free (expires Jan 31st 2019), Christmas Gift Certificates, Stocking Stuffer Special for skate, swim, squash or gym buy 3 get 1 free (expired Dec 24th) sold 14 for pool & 2 for skating, New Years Special purchase 3 month membership & get one month free (expires Jan 31st 2019)
- Recreation & Culture Advisory Meeting cancelled due to lack of attendance

Complaints / Compliments:

- Several visiting parents of the Laker hockey team said they love the facility & were Impressed at how much shinies were on the Rec Complex schedule over the holidays and said it was better than anything in Sudbury
- Ice user was upset his group was asked to leave 10 minutes before the start of a hockey game for ice cleaning.

Employee Status:

- a casual facility attendant was terminated
- Hired a casual rink attendant for Rec Complex & Outdoor Rink
- One full-time facility attendant is off on short-term leave since Dec 9th

Visitors:

DECEMBER 2018

DROP INS	
AquaFit	10
Figure Eighters	7
Fitness Centre	127
Public Skate	35
Shinny	127
Squash	9
Swim	806
TOTAL	1114

DECEMBER 2017

DROP INS	
AquaFit	1
Figure Eighters	n/a
Fitness Centre	100
Public Skate	66
Shinny	64
Squash	9
Swim	571
TOTAL	811

Memberships - RESIDENT	
AquaFit	61
Bronze Pool	86
Fitness	941
Squash	5
Silver	49
Gold	186
Pool Pass	56

Memberships - RESIDENT	
AquaFit	63
Bronze Pool	72
Fitness	980
Squash	17
Silver	57
Gold	85
Pool Pass	33

Private Swim Lessons	1
TOTAL	1385

Memberships - NON RESIDENT	
AquaFit	48
Bronze Pool	53
Fitness	179
Squash	0
Silver	31
Gold	0
Pool Pass	42
Private Swim Lessons	0
TOTAL	353

Lion's Club Free Swim	
Dec. 1	59
Dec. 8	66
Dec. 15	31
Dec. 22	24
Dec. 29	70
TOTAL	250

S. Newton Swim Dec. 9 35

Private Swim Lessons	1
TOTAL	1308

Memberships - NON RESIDENT	
AquaFit	57
Bronze Pool	30
Fitness	208
Squash	0
Silver	61
Gold	0
Pool Pass	27
Private Swim Lessons	1
TOTAL	384

Lion's Club Free Swim	
Dec. 2	48
Dec. 9	46
Dec. 16	20
Dec. 23	30
Dec. 30	36
TOTAL	180

S. Newton Swlm Dec. 3 60

Department Manager: Joel Yusko

Submitted on: Jan 8, 2019

Department: General Administration	Form Number: A99-01371
Subject: Departmental Report	Effective Date: 06/05/17
Policy No:	Revision Date: 08/04/27
Bylaw No:	Version #: 2

DEPARTMENTAL REPORT

DEPARTMENT: FIRE DEPARTMENT	MONTH: December 2018
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Inspection Orders Completed:

- 3 - New Inspections
- 1 - Follow-up Inspection
- 1 - Final Inspection

Other:

- Arson fire scene investigation

Inter-Departmental:

- Review of the new fire hall construction information with the building committee

Fire Prevention:

- Review of fire procedures for St. Joseph School Day Care

Other:

The Fire Chief:

- addressed the dispatching service concerns with Northern911;
- worked on the Mutual Aid Plan;
- attended the Mutual Aid Meeting in Azilda;
- attended the Espanola & Area Safety Coalition Meeting;
- continues to work on the Compliance Report.

One Fire Dept officer attended the Ontario Fire College in Gravenhurst .

Fire Permits Issued: 1

DEPT. CALLS:

Number of Calls: December, 2018 -- 6

Fires - 1
Chimney Fire - 1
Natural Gas Odour Call - 1
CO Call/ No CO - 1
Medical Assist - 1
Human Perceived Emergency - 1

TOTAL CALLS TO DATE: 95

Number of Calls: December, 2017 -- 9

Motor Vehicle Collision - 2
CO call - CO present - 1
CO call - no CO - 4
Medical assist - 1
Propane odour call - 1

TOTAL CALLS TO DATE: 109

<u>FIREFIGHTER TRAINING – December</u>	
F/F Weekly Training – Hours for the Month: - Practices for December -	95.5 Hours (per firefighter/per practice x2 practices for the month)
F/F Extra Training for the Month: Not during regular weekly practice	40 Hours – OFC Fire Instructor II Course
Total Hours of Training for the Month:	<u>135.5 Hours</u>
Training Topics:	SCBA practice, casualty search and extricating casualty; practice changing SCBA cylinder, all aspects of PPE.
Number of Firefighters in attendance at weekly training: Dec 5 – <u>18</u> Dec 12 – <u>20</u>	
Employee Status:	
Visitors: 20	

Department Manager: M. Pichor

Submitted on: January 9th, 2019

Department: General Administration	Form Number: A99-01371
Subject: Departmental Report	Effective Date: 06/05/17
Policy No:	Revision Date: 08/04/27
Bylaw No:	Version #: 2

DEPARTMENTAL REPORT

DEPARTMENT: FIRE DEPARTMENT	MONTH: "2018" YEAR-END REPORT
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CALLS RESPONDED TO:

TOTAL NUMBER OF CALLS FOR 2018 -- 95

TOTAL NUMBER OF CALLS FOR 2017 -- 109

Fires: **15**
 Grass Fires: **1**
 Chimney Fires: **1**
 Open Air Burning/Unauthorized Burning: **12**
 Authorized Burning Complaint: **2**
 Outdoor Burning Complaint: **1**
 CO Calls - No CO Present: **13**
 CO Calls - CO Present: **1**
 Medical Assist: **7**
 Mutual Aid/Assist other F/D: **1**
 Vehicle Collisions/Extrications: **5**
 Water Rescue: **1**
 False Alarms/Alarm Malfunction: **19**
 Natural Gas Leak/Odour Calls: **8**
 Call Cancelled en-route: **1**
 Fire Code Violation: **1**
 Other Responses
 (Smoke in house due to cooking, overheating of equipment): **6**

TOTAL FOR THE YEAR

Burning Permits Issued: 37

Inspections:

•Fire Inspections Completed (New, Follow-up & Final Inspections): **73**

•Annual Home/Dwelling Fire Safety Inspection Program -- south of Second Avenue, west of Avery Drive, Lee Valley Road and Bass Lake Road:

Number of homes in survey area - 685

Number of home inspections completed (admittance allowed for inspection) - 350

Firefighter Training Hours: Including Weekly and Extra Training (not during regular practices) **2212.5**

Department Manager: Mike Pichor

Submitted on: January 9th, 2019

Department:	General Administration	Form Number:	A99-01371
Subject:	Departmental Report	Effective Date:	06/05/17
Policy No:		Revision Date:	08/04/27
Bylaw No:		Version #:	2

DEPARTMENTAL REPORT

Department: Building Services	Month: December 2018
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Project Status: Building Permits

Total Permit Applications:	22228
Total Residential Starts to Date:	9
Zoning Request to Date:	\$4,030

DECEMBER 2018 BP REPORT

Total BP for DECEMBER 2018	3	\$7,500.00	\$277.00
Total BP for DECEMBER 2017	4	\$66,000.00	\$1,443.00

New Construction:	2	Outstanding orders: 20 In total
Renovations/Alterations:	3	
Permits Closed:	27	
Orders to Comply:	41	
Stop Work Issued:	1	
Unsafe order to comply:	1	

Property Standard Hours:	4
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Complaints/Compliments:	See Attached
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Employee Status:	
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Visitors:	9
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Department Manager: Dan Rivet

Department: General Administration	Form Number: A99-01371
Subject: Departmental Report	Effective Date: 06/05/17
Policy No:	Revision Date: 08/04/27
Bylaw No:	Version #: 2

DEPARTMENTAL REPORT

Department: Building Services	Month: November 2018
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Project Status: Building Permits

Total Permit Applications:	226
Total Residential Starts to Date:	9
Zoning Request to Date:	\$3,918.00

NOVEMBER 2018 BP REPORT

Month / Year	# of Permits Issued	BP Value	BP FEE
NOVEMBER 2018 BP	15	\$79,700.00	\$1,497.00
NOVEMBER 2017 BP	16	\$345,715.00	\$6,650.00

New Construction:	2	Outstanding orders: 20 in total
Renovations/Alterations:	15	
Permits Closed:	18	
Orders to Comply:	40	
Stop Work Issued:	1	
Unsafe order to comply:	1	
Sign Permit	2	

Property Standard Hours:	7
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Complaints/Compliments:	See Attached
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Employee Status:

Visitors:	19
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Department Manager: Dan Rivet

Department:	Finance and Accounting	Form Number:	M04-01297
Subject:	Complaint Record Book	Effective Date:	02/28/06
Policy No:	M04-01278	Revision Date:	
Bylaw No:		Version #:	

COMPLAINT, COMPLIMENTS, COMMENTS RECORD BOOK

DATE	NAME AND TELEPHONE #	NATURE OF ISSUE / COMPLAINT	ACTION TAKEN	INITIALS
Nov 12/18		Resides at Queensway Ave. Construction crew for new development behind Queensway Ave.(Brentwood Village) is parking in the laneway beside her driveway and preventing access to back yards.	Advised POS	AK
Nov. 13/18		Owner at Hayward Ave concerned about the "No Access" sign on the OPP building – his tenants need to access their apartments and it is only a 1 way.	Advised Clerk	AK
Nov. 14/18		Concerned about the vehicles parked overnight on the side of the road (Mead Blvd.) – wonders how the Bylaw Enforcement officer is going to handle these situations when he isn't in Town. He stated that the Town Police patrolled at night and issued tickets, so how is this problem going to be resolved now.	Advised Clerk	AK
Nov. 21/18		Resident at Second Street is plowing the snow from his yard into the laneway behind neighbour's garage at Albert Street and he can't access his garage. Complainant I ; attended PWD and was advised to come to the Town office in case we have a bylaw prohibiting residents from plowing in laneways.	Advised Clerk, PSO	AK
Nov. 26/18		Resident on Appleford street is plowing his driveway and pushing all the snow across the street, against the resident's fence. She already had to replace the previous fence which was damaged because of this and now he continued to push snow against new fence and fears it will be damaged). She put a sign up on her fence but he is disregarding the sign and still pushing the snow there.	Advised PSO, PWD <i>Bylaw Enforc. Office taking care of it.</i>	AK
Nov 29/18		Handicap spot is only partially plowed and she could not access it – she has MS, and would need to park there but couldn't open her car door	Spoke with Dave Parker @ PWD	AK

Five Year History

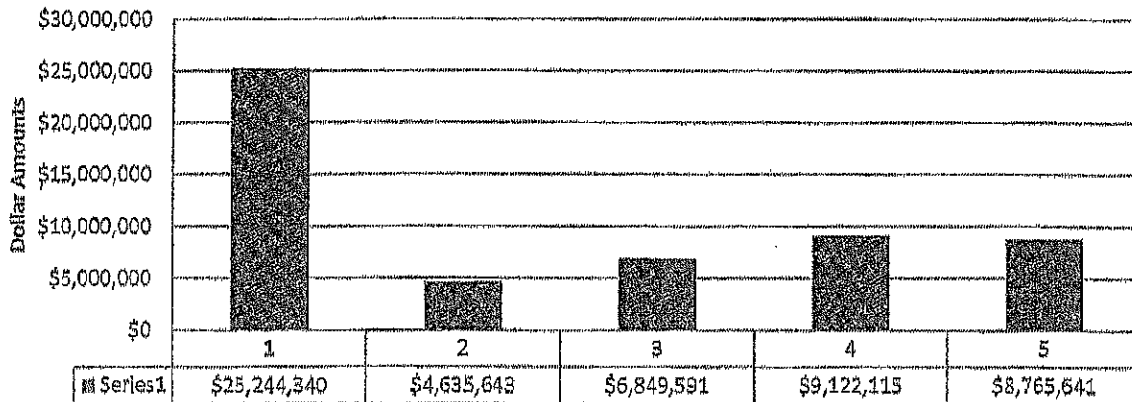
Year	2018	2017	2016	2015	2014
Total Permit Issued	228	269	340	294	256
Value of Construction	\$25,244,340	\$4,635,643	\$6,849,591	\$9,122,115	\$8,765,641
Total fees collected	\$441,423	\$65,074	\$131,392	\$145,954	\$163,795

Total Fees Collected / Permits Issued

Dollar Amount in
Thousands of Dollars

	2018	2017	2016	2015	2014
Series1	228	269	340	294	256
Series2	\$25,244,340	\$4,635,643	\$6,849,591	\$9,122,115	\$8,765,641
Series3	\$441,423	\$65,074	\$131,392	\$145,954	\$163,795

Value of Construction



Department: Economic Development	Form Number: A99-01371
Subject: Departmental Report	Effective Date: 112/12/18
Policy No:	Revision Date:
Bylaw No:	Version #: 1

DEPARTMENTAL REPORT

DEPARTMENT: Economic Development	MONTH: December 2018
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Funding Opportunities

- Ongoing support for local not-for profit working on funding applications for program expansion
- Responded to inquiry for private funding – directed to proper resource

Community Improvement Plan

- Followed up with 2 CIP applications not yet closed for 2018
- Letter of explanation sent to CIP client re tax increment payment
- 2 applications for CIP's were approved and letters of approval sent

Economic Development Corporation

- Interviews ongoing with municipal comparators on the operating structures, budgets and processes involved in establishing an EDC

Training & Development

- Registered for Ec Dev training and support opportunities with GoForth Institute – a leading training centre for entrepreneurs. Their training programs could assist with Council training and also support local businesses

Business Development

- Aided in a search for a unique commercial space from an out of town inquirer
- Responded to inquiry from prospective retail client for profile info

Other

- Completed valuation survey on commercial space for Provincial data base
- Completed staff report for the remediation of the Imperial Oil Brownfield Site
- Attended Open House for new development

Department Manager: Cynthia Townsend Submitted on: Dec 12/12



The Corporation of the Town of Espanola

Bylaw No. 2894/19

**Being a Bylaw to Execute An Agreement Between
The Town of Espanola and
Her Majesty the Queen in Right of the Province of Ontario, as represented by the
Minister of Transportation for the Province of Ontario**

THAT the Council of the Corporation of the Town of Espanola enacts as follows;

1. That the Mayor and CAO/Treasurer are hereby authorized to execute an agreement between The Town of Espanola and the Minister of Transportation for the Province of Ontario under the Dedicated Gas Tax funds for Public Transportation Program.
2. That the Letter of Agreement shall be attached to and become part of the Bylaw.

Read a first, second and third time in open Council on this 31st day of January 2019.

Jill Beer
Mayor

Paula Roque
Clerk

Ministry of
Transportation

Office of the Minister

Ferguson Block, 3rd Floor
77 Wellesley St. West
Toronto ON M7A 1Z8
416 327-9200
www.ontario.ca/transportation

Ministère des
Transports

Bureau du ministre

Édifice Ferguson, 3^e étage
77, rue Wellesley Ouest
Toronto ON M7A 1Z8
416 327-9200
www.ontario.ca/transports



JAN 22 2019

Mayor Jill Beer
Town of Espanola
100 Tudhope Street, Suite 2
Espanola ON P5E 1S6

Dear Mayor Beer:

I am pleased to announce the launch of the 2018/19 Gas Tax Program and to advise you of your funding allocation.

Our government is committed to working with municipalities to improve Ontario's transportation network and support economic growth. Investing in transit will reduce traffic congestion, create jobs and help businesses to develop and prosper.

The Town of Espanola will be eligible to receive an allocation of \$40,648 for this program year.

Attached is a Letter of Agreement, the 2018/19 Program Guidelines and Requirements and electronic forms. Please return a scanned copy of the signed Letter of Agreement, in pdf format, and the required supporting by-law by January 31, 2019, and the 2018 Reporting Forms by February 28, 2019 to MTO-PGT@ontario.ca.

If you have any questions regarding the program, please contact Anita Hooper, Director, Strategic Investments & Programs Branch, at (416) 585-7637.

Sincerely,

A handwritten signature in black ink, appearing to read "Jeff Yurek".

Honourable Jeff Yurek
Minister of Transportation

c. Michael Mantha, MPP, Algoma—Manitoulin

Encl.

STAFF REPORT

DEPARTMENT: Administration

DATE: January 24, 2019

ITEM: DWQMS Operational Plan

RECOMMENDATION: Be It resolved that: the updates to the Drinking Water Quality Management Standard Operational Plan as prepared be adopted.

BACKGROUND:

The last changes were the result of changes in 2017. This plan is an operational requirement.

ANALYSIS:

To meet the new requirements of the DWQMS, OCWA has updated the operational plan. Overall the procedures are the same but the layout of the plan has changed.

Due to the changes to the plan and the fact that a new mayor has been elected, the operational plan will need re-endorsements.

Please see attachment for a summary of the changes since the last plan.

EXISTING POLICY: *Safe Drinking Water Act, 2002*

FINANCIAL COMMITMENT: N/A

STRATEGIC GOAL: Safe & Healthy Community

CAO/

Treasurer

Cynthia Townsend

Appendix A: Summary of changes to the DWQMS and sections/elements in OCWA's QEMS Operational Plan Templates

Reminder: It is important to review all sections of the Operational Plan templates and revise as necessary to ensure that the information is appropriate to the facility. For a comprehensive revision history of the templates, refer to the Summary of Revisions to OCWA's OP Templates located in the PCT Folder (Summary of Revisions).

Standard Changes (DWQMS Version 2.0)		OCWA Continual Improvement Changes (December 2017)	
Section/Element	Standard Changes (DWQMS Version 2.0)	OCWA Continual Improvement Changes (December 2017)	
Terms and Definitions	<ul style="list-style-type: none"> Definitions that are already defined in the legislation now include the legislative references instead Removed definition for <i>Applicable Legislative and Regulatory Requirements</i> Added definitions for <i>Calendar Year</i>, <i>Preventive Action</i>, and <i>Quality Management System Policy</i> 	<ul style="list-style-type: none"> Added definitions for Operations Management and Operations Personnel Updates throughout Operational Plan templates based on OCWA's current organizational structure 	
1 – QMS	None	<ul style="list-style-type: none"> Created a separate procedure, minor wording updates 	
2 – QMS Policy	<ul style="list-style-type: none"> Removed "is appropriate for the size and type of the subject system"; this change does not impact our current QEMS Policy 	<ul style="list-style-type: none"> Created a separate procedure Added sections on how annual policy review is conducted and reference to OP-13 Essential Supplies and Services 	
3 – Commitment and Endorsement	None	<ul style="list-style-type: none"> Created a separate procedure Removed sign-off section from procedure (OP-03). Addition of a separate record for sign-off; Appendix (OP-03A) Included additional information on who from Top Management endorses the plan, when owner re-endorsement is sought and 'criteria' as to what is considered a major revision to the plan 	
4 – QMS Representative	None	<ul style="list-style-type: none"> Created a separate procedure, minor wording updates Operations Manager no longer considered QEMS Representative. SPC Manager to act as alternate as required 	
5 – Document and Records Control	None	<ul style="list-style-type: none"> Minor changes to wording to provide clarification throughout the procedure Separated out Tables 1 and 2 into its own Appendix (OP-05A) Additions to documents and records and their designated locations contained in Table 1; clarified the minimum retention times for documents and records in Table 2 	
6 – Drinking Water System	<ul style="list-style-type: none"> Re-structured element to clarify requirements for different types of drinking water systems (e.g., treatment vs. distribution only); removed the requirement to include a description of any critical upstream or downstream processes 	<ul style="list-style-type: none"> Created a separate procedure Revisions based on new requirements of the Standard (removal of critical upstream or downstream processes; separation of systems that provide primary and/or secondary disinfection and systems that do not, for systems that are connected to another system with different owners, must now include which system is relied upon to ensure the provision of safe drinking water) 	
7 – Risk Assessment	<ul style="list-style-type: none"> Updated to include reference to the Ministry's "Potential Hazardous Events for Municipal Drinking Water Systems"; these mandatory hazards will need 	<ul style="list-style-type: none"> Minor changes to wording to provide clarification throughout the procedure Revisions based on new requirements of the Standard (Mandatory hazardous events and associated hazard must be considered, the annual review changed to 	

Section/Element	Standard Changes (DWQIMS Version 2.0)	OCWA Continual Improvement Changes (December 2017)
	<p>to be considered during the next scheduled 36-month risk assessment</p> <ul style="list-style-type: none"> Many of the listed hazards are likely already addressed in your current risk assessment (e.g., chemical spill impacting source water, failure of primary or secondary disinfection equipment, algal blooms, etc.); however, you will need to ensure that the remaining hazards are assessed and documented 	<ul style="list-style-type: none"> once every calendar year). Separated out Element 7 and Element 8 into their own procedures
8 – Risk Assessment Outcomes	<ul style="list-style-type: none"> None – However, due to the requirement for assessing outcomes for the mandatory hazards, new/revised procedures/processes to address any new critical control points required 	<ul style="list-style-type: none"> Created a separate procedure Revisions based on new requirements of the Standard: No changes were required to the ranking of the hazardous events to identify the CCPs; however, Table 4 was added as a “legend” for the MOECC’s mandatory potential hazardous events, which will be identified in a new column in Table 1, annual review changed to once every calendar year. OP-08A forms the appendix to the new OP-08 procedure (Risk Assessment Outcomes)
9 – Organizational Structure, Roles, Responsibilities and Authorities	None	<ul style="list-style-type: none"> Created a separate procedure Incorporated OCWA’s new org structure, including SPC Manager; 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; Senior Operations Manager and Operations Manager merged into Operations Management; re-worded QEMS Roles, Responsibilities and Authorities for each position Updated Appendix OP-09A Organizational Structure chart to include OCWA’s new org structure
10 – Competencies	None	<ul style="list-style-type: none"> Created a separate procedure Incorporated OCWA’s new org structure including SPC Manager Removed/revised ‘non-measurable’ competencies throughout to make auditable/easier to demonstrate (Table in section 3.1) Updated training sections to reference new Environmental 101 course, and Mandatory Compliance Training list and removed specific references to Orientation Training Program
11 – Personnel Coverage	None	<ul style="list-style-type: none"> Minor changes to wording to provide clarification throughout the procedure
12 – Communications	<ul style="list-style-type: none"> Clarified that “suppliers” are those that are identified as essential under element 13 	<ul style="list-style-type: none"> Reordered to clarify communications to all 4 parties (to address external audit OFIs) Updated training sections to reference new Environmental Compliance 101 course and to outline how training is coordinated between SPC Manager/Operations Management and QEMS Representative Included sections on R&Ts for performance reporting within OCWA and to Client

Section/Element		Standard Changes (DWQMS Version 2.0)	OCWA Continual Improvement Changes (December 2017)
13 – Essential Supplies and Services	None		<ul style="list-style-type: none"> Changes to wording to provide clarification on ensuring quality of essential supplies and services based on OFIs (3.5, 3.6, 3.7 and 3.9)
14 – Review and Provision of Infrastructure	<ul style="list-style-type: none"> Changed annual frequency to “at least once every calendar year” Added new requirement to consider the outcomes of the risk assessment in the review 	<ul style="list-style-type: none"> Minor changes to wording to provide clarification throughout the procedure Revisions based on new requirements of the Standard (e.g. annual review changed to once every calendar year and to consider the outcomes of the risk assessment under Element 8 during the review) 	<ul style="list-style-type: none"> Created a separate procedure Minor changes to wording to provide clarification throughout the procedure Revisions based on new requirements of the Standard (e.g. addition of long term forecast and a review at least once every calendar year)
15 – Infrastructure Maintenance, Rehabilitation and Renewal	<ul style="list-style-type: none"> Added requirement to document a long term forecast of major infrastructure maintenance, rehabilitation and renewal activities and that the forecast must be reviewed at least once every calendar year 		
16 – Sampling, Testing and Monitoring	Minor		<ul style="list-style-type: none"> Minor changes to wording to provide clarification throughout the procedure Removed sampling table and referred to sampling calendar/plan and location Minor changes to wording to provide clarification throughout the procedure
17 – Measurement and Recording Equipment Calibration and Maintenance	None		
18 – Emergency Management	None		<ul style="list-style-type: none"> Minor changes to wording to provide clarification throughout the procedure Removed references to Approach to FEP document throughout procedure and referenced FEP instead Matched wording for level 1, 2 & 3 events with wording in Approach to FEP document and Emergency Response Plan Updated training section to include SPC Manager and expanded testing/review section specifically to clarify how an actual test is documented Revisions based on new requirements of the Standard (frequency changed to once every calendar year) Moved Corrective Actions and OFI process to OP-21 Continual Improvement and referenced in this procedure Added sections to describe how often we audit all facilities under multi-facility OPs
19 – Internal Audits	<ul style="list-style-type: none"> Changed frequency to “at least once every calendar year” 		
20 – Management Review	<ul style="list-style-type: none"> Changed frequency to “at least once every calendar year” 		<ul style="list-style-type: none"> Revisions based on new requirements of the Standard (frequency changed to once every calendar year, efficacy changed to effectiveness) Minor changes to wording to provide clarification throughout the procedure Linked procedure to OP-21 Continual Improvement, added Best Management Practices (BMPs) as a standing agenda item and added 3.5 to ensure documentation of consideration of BMPs
21 – Continual Improvement	<ul style="list-style-type: none"> Added new PLAN requirement to develop a procedure for continual improvement which includes: <ul style="list-style-type: none"> Considering applicable best management 		<ul style="list-style-type: none"> Created a separate procedure Significant changes due to requirements of DWQMS 2.0 Removed Corrective Action and OFI Sections from OP-19 Internal Audit and included these sections (with modifications) in OP-21

Section/Element	Standard Changes (DWQMS Version 2.0)	OCWA Continual Improvement Changes (December 2017)
	<ul style="list-style-type: none"> practices at least once every thirty-six months, and Documenting processes for corrective and preventive actions 	<ul style="list-style-type: none"> Added section on BMPs



Ontario Clean Water Agency

OPERATIONAL PLAN

Espanola Drinking Water System

QEMS Doc: OP-03A
Rev Date: 03-Jan-19
Rev No: 1
Pages: 1 of 1

SIGNED COMMITMENT AND ENDORSEMENT

This Operational Plan sets out the framework for OCWA's 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 Town of Espanola* (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 *Espanola 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
Senior Operations Manager

Date

Jill Beer
Mayor

Date

Jeff St.Pierre
Northwestern Regional Hub Manager

Date

Cynthia Townsend
CAO/Treasurer

Date

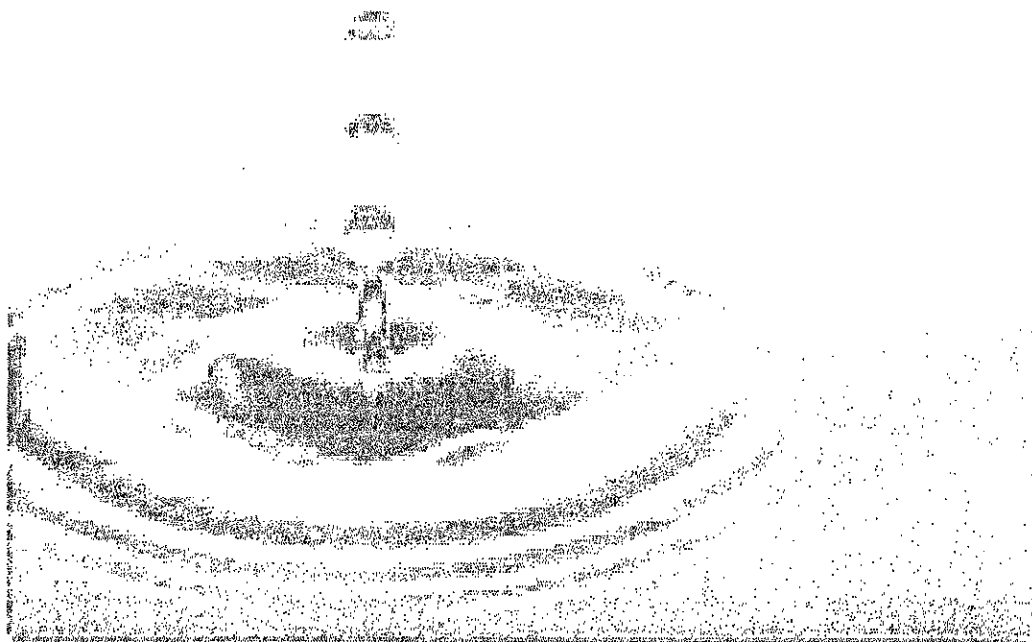
The endorsement above is based on the Operational Plan that was current as of the revision date of this document (OP-03A).

Revision History

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: Ron Piche – Mayor & Cynthia Townsend – CAO/Treasurer.
03-Jan-19	1	Major revisions to operational plan and new mayor. OCWA: Jeff St.Pierre – NWO Regional Manager & Keith Stringer – Sr. Ops. Manager. OWNER: Jill Beer – Mayor & Cynthia Townsend – CAO/Treasurer.

OPERATIONAL PLAN

For the *Espanola 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*.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Doc: OP-ToC Issue Date: 29-Jun-18 Pages: 1 of 1
TABLE OF CONTENTS		
Reviewed by: PCT		Approved by: Operations Management

OP-01	OCWA's Quality & Environmental Management System (QEMS)
OP-02	Quality & Environmental Management System Policy
OP-03	Commitment & Endorsement of OCWA's QEMS & Operational Plan
OP-03A	Signed Commitment and Endorsement
OP-04	Quality Management System Representative
OP-04A	Signed Letter of Appointment – Operations Management
OP-04B	Signed Letter of Appointment – PCT
OP-05	Document and Records Control
OP-05A	Document and Records Control Locations
OP-06	Drinking Water System
OP-07	Risk Assessment
OP-08	Risk Assessment Outcomes
OP-08A	Summary of Risk Assessment Outcomes
OP-09	Organizational Structure, Roles, Responsibilities & Authorities
OP-09A	Organizational Structure
OP-10	Competencies
OP-11	Personnel Coverage
OP-12	Communications
OP-13	Essential Supplies and Services
OP-14	Review and Provision of Infrastructure
OP-15	Infrastructure Maintenance, Rehabilitation and Renewal
OP-16	Sampling, Testing and Monitoring
OP-17	Measurement and Recording Equipment Calibration and Maintenance
OP-18	Emergency Management
OP-19	Internal QEMS Audits
OP-20	Management Review
OP-21	Continual Improvement
Schedule "C"	MOECC's Director's Directions <i>Minimum Requirements for Operational Plans</i>

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-01 Rev Date: 09-Jul-18 Rev No: 0 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 *Espanola 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) – means the quality management standard approved by the Minister in accordance with section 21 of the 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.

3. Procedure


3.1 The *Espanola Drinking Water System* is owned by *The Corporation of the Town of Espanola*. OCWA is the contracted operating authority for the *Espanola 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

All QEMS Procedures and Documents Referenced in this Operational Plan
 MOECC's Drinking Water Quality Management Standard

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-01 Rev Date: 09-Jul-18 Rev No: 0 Pages: 2 of 2
QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS)		
Reviewed by: PGT	Approved by: Operations Management	

5. Revision History

Date	Revision #	Reason for Revision
09-Jul-18	0	Procedure Issued – Information within OP-01 was originally set out in the Main body of OCWA's Operational Plan (last revision # 12 dated 17-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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-02 Rev Date: 09-Jul-18 Rev No: 0 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, reliable and cost-effective clean water services that protect public health and the environment.
- 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 6, 2016
 (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, the owner and the public through OCWA's intranet and public websites. 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.

PRINTED COPIES OF THIS DOCUMENT ARE CONSIDERED TO BE UNCONTROLLED

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-02 Rev Date: 09-Jul-18 Rev No: 0 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 maintained on OCWA's intranet.

4. Related Documents

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

5. Revision History

Date	Revision #	Reason for Revision
09-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 #12 dated 17-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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-03 Rev Date: 09-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 *Espanola Water Treatment Facility & Distribution System* by OCWA's top management and *The Corporation of the Town of Espanola* (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

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-03 Rev Date: 09-Jul-18 Rev No: 0 Pages: 2 of 2
COMMITMENT AND ENDORSEMENT		
Reviewed by: PCT		Approved by: Operations Management

5. Revision History

Date	Revision #	Reason for Revision
09-Jul-18	0	<p>Procedure issued – Information within OP-03 was originally set out in the main body of OCWA's Operational Plan (last revision 12 dated 17-Jan-18). Procedure provides information on who from Top Management endorses the Operational Plan (s. 3.1); when owner re-endorsement 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.</p>

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-04 Rev Date: 09-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 *Espanola Water Treatment Facility & Distribution System*.

2. Definitions

None

3. Procedure

3.1 The role of QEMS rep. for the *Espanola 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 *Espanola 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

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-04 Rev Date: 09-Jul-18 Rev No: 0 Pages: 2 of 2
QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) REPRESENTATIVE		
Reviewed by: PCT		Approved by: Operations Management

5. Revision History

Date	Revision #	Reason for Revision
09-Jul-18	0	Procedure issued – Information within OP-04 was originally set out in the main body of OCWA's Operational Plan (last revision #12 dated 17-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).

Quality Management System Representative

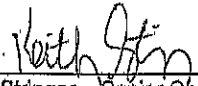
Letter of Appointment

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:

- Responsible for activities related to the operation of the drinking water system
- Responsible for establishing and maintaining processes and procedures required for the overall administration of the facility's QEMS
- Arrange for/review annual internal audits
- Develop action plans to respond to the findings of the internal audits and MOE inspections and verify action plan completion
- Establish, test and update a site-specific emergency plan for each facility
- Participate in regular facility Management Reviews
- Report to the Regional Manager on the performance and effectiveness of the QEMS implemented at the facility
- Liaise with the owner on relevant components of the QEMS including OCWA's roles, responsibilities and authorities for the facility
- Establish a training plan for staff to address regulatory requirements and the QEMS as part of the PPR process
- Promote awareness of the QEMS to all facility personnel,

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


Keith Stringer - Senior Operations Manager

Jan 14/17
Date


Patti O'Handley (Booth) - Senior Operations Manager

Jan 11/17
Date

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:

- Report on QEMS performance and identify opportunities for improvement,
- Ensure that current versions of documents related to the QEMS are in use,
- Ensure personnel are aware of all applicable legislative and regulatory requirements that pertain to their operational duties,
- Assist with third party audits,
- Assist with Management Reviews,
- Participate in MOE inspections and assist in the response to required actions or recommendations,
- Implement, monitor and support corporate QEMS programs,
- Fulfill duties assigned by the Management Team,
- Promote awareness of the QEMS to all facility personnel,
- Participate in the completion of annual internal audits, and
- Actively participate in the development and maintenance of facility emergency plans.

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


Natalie Wagar – Process & Compliance Technician

Jan 10, 2017
Date


Sarah Beaulieu – Process & Compliance Technician


Jan 11, 2017
Date



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Appointment of QEMS Rep
Revision 0, 06-Jan-17

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

	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-05 Rev Date: 09-Jul-18 Rev No: 8 Pages: 1 of 4
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 *Espanola 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 authorized approval, alpha-numeric procedure code, issue date, page numbers on every page, revision number and revision history.

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

Review	QEMS Rep.
Approval	Operations Management, SPC Manager

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-05 Rev Date: 09-Jul-18 Rev No: 8 Pages: 2 of 4
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 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.



Ontario Clean Water Agency

OPERATIONAL PLAN

Espanola Drinking Water System

QEMS Proc.: OP-05
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DOCUMENT AND RECORDS CONTROL

Reviewed by: PCT

Approved by: Operations Management

- 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 all the documents/records listed in Table 1)	3 years*if no specified legislative requirement below*	OCWA Requirement
Logbooks 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 (LMR) and THM, HAA, nitrates, nitrites and lead program sampling and testing, Section 11 Annual Reports and Schedule 22 Summary Reports	6 years	O. Reg. 170/03
Sodium test results and related corrective action records/reports, 60 month fluoride test results (if the system doesn't fluoridate), engineering Reports	15 years	O. Reg. 170/03
Lead samples, correction 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

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-05 Rev Date: 09-Jul-18 Rev No: 8 Pages: 4 of 4
DOCUMENT AND RECORDS CONTROL		
Reviewed by: PCT	Approved by: Operations Management	

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 policy 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

5. Revision History

Date	Revision #	Reason for Revision
09-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.



OPERATIONAL PLAN Espanola Drinking Water System

QEMS Doc: OP-05A
Rev Date: 02-Oct-18
Rev No: 0
Pages: 1 of 3

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	
Calibration / Verification for Flow Meters	EC – S:\# PCT folder\Calibration Records
Contingency Plans	EC – S:\@ Operator's Folder
Facility Emergency Plans <ul style="list-style-type: none"> Emergency Contact List Essential Supplies & Services List Municipal Emergency Response Plan (Relevant Portion) 	HC – Maintained in Facility EC – S:\@ Operator's Folder
OCWA's Corporate Procurement and Administration Policies	EC – OCWA's Intranet
OCWA's Emergency Response Plan (Corporate)	EC – OCWA's intranet
OCWA's Mandatory Compliance Training List	EC – OCWA's Intranet
On-call Schedule	EC – Maintained in Outlook
Operational Plan (Includes QEMS Procedures)	HC – Maintained at Municipal Office EC – Hub Shared Server
QEMS Policy	HC – Posted at Facility EC – OCWA's Intranet and public website
QEMS Policy Revision History	EC – OCWA's Intranet
Sampling Schedule - Calendar	EC – Maintained in Outlook
Sampling Schedule – Cover Page & Calendar	EC – S:\@ Operator's Folder
Standard Operating Procedures	EC – S:\@ Operator's Folder
Internal QEMS Documents (Blank)	
Action & Analysis Report	EC – S:\DWQMS Supporting Docs\DWQMS documents
Calibration / Verification Form	EC – S:\# PCT folder\Calibration Records
Chain of Custody Forms	EC – S:\@ Operator's Folder
Community Complaint Records	EC – S:\@ Operator's Folder
Contingency Plan Review / Test Summary Form	EC – S:\# FEP Binders\Contingencies
Internal Audit Hub Protocol	EC – S:\DWQMS Supporting Docs\DWQMS documents
Internal Audit Report	EC – S:\DWQMS Supporting Docs\DWQMS documents
Management Review Minutes	EC – S:\DWQMS Supporting Docs\DWQMS documents
Operator Training Form	EC – OCWA's Intranet
Round Sheet	EC – S:\@ Operator's Folder
QEMS Records	
Action & Analysis Spreadsheet	EC – S:\DWQMS-Espanola Hub
Annotation Reports	EC - Wonderware
Annual Performance Planning and Review (PPR)	EC – Maintained in OPEX
Annual Reports & Summary Reports	EC – S:\# PCT folder\Reporting\Annual and Summary Reports



OPERATIONAL PLAN Espanola Drinking Water System

QEMS Doc: OP-06A
Rev Date: 02-Oct-18
Rev No: 0
Pages: 2 of 3

DOCUMENT AND RECORDS CONTROL LOCATIONS

Type of Document/Record	Designated Document Control Location (HC = Hardcopy, E = Electronic)
AWQI Reports	EC – S:\# PCT folder\Non-Compliances & AWQIs
Call In Reports	EC – Maintained Through WMS
Capital Report	EC – S:\DWQMS-Espanola Hub\Espanola\Annual Capital Forecast EC – Maintained Through WMS
Community Complaint Records	EC – Maintained in OPEX
Contingency Plan Review / Test Summary Form (FEP-01)	EC – S:\@ Operator's Folder
DWWP's Form 1, 2, 3 & Director's Notification	EC – S:\#All facilities
External QEMS Audit Documents <ul style="list-style-type: none"> Audit Reports NC Reports 	EC – S:\DWQMS-Espanola Hub\Espanola\External Audit Reports
Facility Logbook(s)	HC – Maintained at Facility
In-House Lab Results	HC – Maintained at Facility EC – Maintained Through PDM
Internal QEMS Audit Documents <ul style="list-style-type: none"> Internal Audit Protocol Audit Reports 	EC – S:\DWQMS-Espanola Hub\Espanola\Internal Audit Reports
Laboratory Analysis Reports	EC – S:\# PCT folder\Lab Results EC – Maintained Through PDM
Laboratory Chain of Custodies	HC – Maintained at Facility
Laboratory Service Notification (LSN)	EC – S:\# PCT folder\Lab Results\LSN documents
Management Review Documentation <ul style="list-style-type: none"> Management Review Minutes 	EC – S:\DWQMS-Espanola Hub\Espanola\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
Applicable Federal and Provincial Legislation and Municipal by-laws	EC – Online (www.e-laws.gov.on.ca)
AWWA Standards	EC – S:\@ Operator's Folder\AWWA
Calibration Certificates / Records (Third Party)	HC – Maintained at Facility
Drinking Water Works Permit	HC – Maintained at Facility HC – Maintained at Town Office EC – S:\#All facilities



OPERATIONAL PLAN

Espanola Drinking Water System


QEMS Doc: OP-05A
Rev Date: 02-Oct-18
Rev No: 0
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DOCUMENT AND RECORDS CONTROL LOCATIONS

Type of Document/Record	Designated Document Control Location (HC = Hardcopy, E = Electronic)
DWQMS Standard	E – https://www.ontario.ca
DWWP's Form 1, 2, 3 & Director's Notification (Blank)	EC – S:\@ Operator's 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
MOECC Inspection Reports	EC – S:\# PCT folder\Inspections
MOECC's "Potential Hazardous Events for Municipal Residential Drinking Water Systems"	EC – Online
MOECC's "Procedure for Disinfection of Drinking Water in Ontario"	HC – Maintained at Facility
MSDS / SDS	HC – Maintained at Facility
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

Revision History

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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-06 Rev Date: 12-Sep-18 Rev No: 0 Pages: 1 of 10
DRINKING WATER SYSTEM		
Reviewed by: PCT	Approved by: Operations Management	

1. Purpose

To document the following for the *Espanola 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 Town of Espanola*
- Operating Authority: Ontario Clean Water Agency

The water treatment facility is located at 1151 Bass Lake Rd

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-06 Rev Date: 12-Sep-18 Rev No: 0 Pages: 2 of 10
DRINKING WATER SYSTEM		
Reviewed by: PCT	Approved by: Operations Management	

3.2 Source Water

The raw water source for the treatment plant is Lake Apsey. The lake is used by boaters throughout the summer and a number of cottages are located along its shores.

General Characteristics

The water from Lake Apsey is typically low in turbidity and slightly basic. Temperature fluctuates minimally through the seasons ranging from approximately 7 °C in the winter to as high as 12 °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

Parameters	Years				
	2015	2018	2021	2024	2027
pH	7.18	7.2			
Alkalinity (mg/L as CaCO ₃)	23	23			
Conductivity (uS/cm)	100	108			
Total Dissolved Solids (mg/L)	86	60			
Hardness (mg/L as CaCO ₃)	26.1	24.1			
Langelier's Index (@20°C)	-2.13	-1.91			
Aluminum (mg/L)		7.7			
Arsenic (ug/L)		0.3			
Barium (ug/L)		6.16			
Beryllium (ug/L)		0.007			
Boron (ug/L)		9			
Bismuth (ug/L)		0.007			
Calcium (mg/L)	8.02	7.31			
Cadmium (ug/L)		0.012			
Cobalt (ug/L)		0.058			
Chromium (ug/L)		0.08			
Copper (ug/L)		13.6			
Iron (ug/L)		192			
Sodium (mg/L)	7.99	8.52			
Magnesium (mg/L)		1.41			



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Manganese (ug/L)	174			
Molybdenum (ug/L)	0.04			
Nickel (ug/L)	4.7			
Lithium (ug/L)	0.262			
Potassium (mg/L)	0.571			
Lead (ug/L)	0.07			
Silicon (ug/L)	1250			
Antimony (ug/L)	0.05			
Selenium (ug/L)	0.08			
Strontium (ug/L)	20.7			
Titanium (ug/L)	0.19			
Thallium (ug/L)	0.005			
Uranium (ug/L)	0.016			
Tin (ug/L)	0.08			
Vanadium (ug/L)	0.07			
Tungsten (ug/L)	0.02			
Yttrium (ug/L)	0.002			
Zinc (ug/L)	2			

	E.coli			Total Coliform			Turbidity			Temperature			pH		
	Min	Avg	Max	Min	Avg	Max	Min	Avg	Max	Min	Avg	Max	Min	Avg	Max
2010	0	0.80	14	0	7.0	24									
2011	0	0.23	4	0	23.7	199									
2014	0	0.90	14	0	33.1	1360	0.34	0.67	0.86	3	3.3	4	6.67	6.89	7.45
2015	0	1.11	44	0	7.61	108	0.15	0.82	2.41	3	6.6	16	5.96	6.68	8.65
2016	0	0.31	4	0	7.49	40	0.15	1.40	6.09	6.08	6.88	7.37	6.08	6.68	7.37
2017	0	0.34	6	0	11.1	51	0	0.77	10	3	6.04	10.5	6.35	6.70	7.64
2018															
2019															

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. During spring and fall turnover, the pH in the source fluctuates considerably. Process adjustments need to be made in order to maintain an acceptable pH for coagulation and in the treated water.

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During the summer months the raw water source has been experiencing issues with blue-green algae. Weekly microcystin sampling for the months of May-October has been introduced to monitor for blue-green algae at the raw water intake.

Threats

Potential sources of raw water contamination include spills from sporting vessels travelling 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, 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 600 mm pipe, located approximately 135m into Lake Apsey at a maximum depth of 12 m. The pipe is protected by an intake structure. Two 40mm intake pipes have also been installed in the intake structure and capped for future use. A 450 mm corrugated metal pipe and sluice gate has been retained for emergency usage. The raw water flows through a screened channel to an intake chamber to two low lift wells below grade. There is a low lift pump house and control room above the intake chamber and low lift well which houses two (2) static water screens with 9.5 mm pores, two (2) variable speed vertical turbine pumps, each performing at a total dynamic head for 27.4 m for a firm capacity of 10,500 m³/d discharging raw water into a 300 mm discharge header directed at the water treatment plant.


A sampling sink is also located in the low lift station to collect raw water samples.

Iron and Manganese Control

Water flows into the treatment plant and is first dosed with potassium permanganate to aid in removing iron and manganese. The system consists of three (3) mixing tanks with mechanical mixers and two (2) metering pumps, discharging chemical solution into the raw water inlet main.

Coagulation/Flocculation

Water flows through a 250mm magnetic flow meter and is then dosed with soda ash followed by PAC. Water then flows through a static mixer and into the two (2) 597m³

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Solids Contact Clarifiers. Each is equipped with an automatic sludge withdrawal system and a mechanical mixer. A coagulant aid (polymer) is added into each clarifier.

The PAC (polyaluminum chloride) system consists of three (3) bulk storage tanks and one (1) chemical feed panel complete with two (2) chemical feed pumps.

The coagulant aid system consists of two (2) storage tanks with tank mixers and four (4) positive displacement metering pumps.

Pre Chlorination

Two dosing pumps (one duty, one standby) inject sodium hypochlorite in the clarifier discharge line prior to the filters. The pre chlorination pumps share a common bulk storage tank with the primary and secondary chlorination pumps.

Filtration

Flows are then split into the three (3) 14.5m² dual media (anthracite/sand) convention/rapid sand filters. Each one having a total filter area of 45.56m², equipped with an under drain for air scour/water backwashing.

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

Alkalinity and pH Control Systems

The soda ash system consists of storage tanks and three (3) positive displacement pumps, to inject pH / alkalinity control into the low lift discharge header and filter discharge lines, both upstream of the in-line static mixer.

The sodium hydroxide system consists of two (2) metering pumps with two (2) bulk storage tanks discharging solution into the reservoir discharge line.


Fluoride Feed System

Consisting of a drum scale, two (2) chemical dosing pumps discharged into the filter discharge lines, both upstream of the in-line static mixer.

Primary Chlorination

Two dosing pumps (one duty, one standby) inject sodium hypochlorite to the filtered water at the inlet of the clearwell. The primary chlorination pumps share a common bulk storage tank with the pre and secondary chlorination pumps.

High Lift Pumps

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The high lift pumps have a rated capacity of 60 L/s. The three high lift pumps installed are electrically driven vertical turbine pumps: alternating duty pumps.

Final Monitoring

Instrumentation consists of one wall mounted chlorine residual analyzer, a pH indicator, fluoride residual analyzer, a pressure transmitter and one 250 mm diameter 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.

Corrosion Inhibitor

Two dosing pumps (one duty, one standby) inject phosphate to the high lift discharge line. The system is complete with one (1) storage tank with spill containment.

Filter Backwash System

Filters are maintained through a backwash system which includes two (2) vertical turbine pumps for filter backwash and one (1) positive displacement air blower installed adjacent to the pump room for filter air scour. Filters are backwashed based on run time, operators can adjust the time as needed.

Process Waste System

Two (2) backwash wastewater settling tanks each with a hopper bottom, constructed for storage of filter backwash water, filter to waste water, and clarifier sludge and equipped with one (1) submersible centrifugal pump discharging to the sanitary sewer via a 100 mm forcemain.

Sanitary Waste Treatment

One (1) sanitary waste sump for all floor drains, bathroom sinks, laboratory drains etc... with a volume of 11.5 m³ equipped with two (2) submersible centrifugal pump discharging to the sanitary sewer via a 100 mm forcemain.

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. The 275 kW unit is complete with controller, battery charger, two diesel fuel storage tanks and an automatic transfer switch.

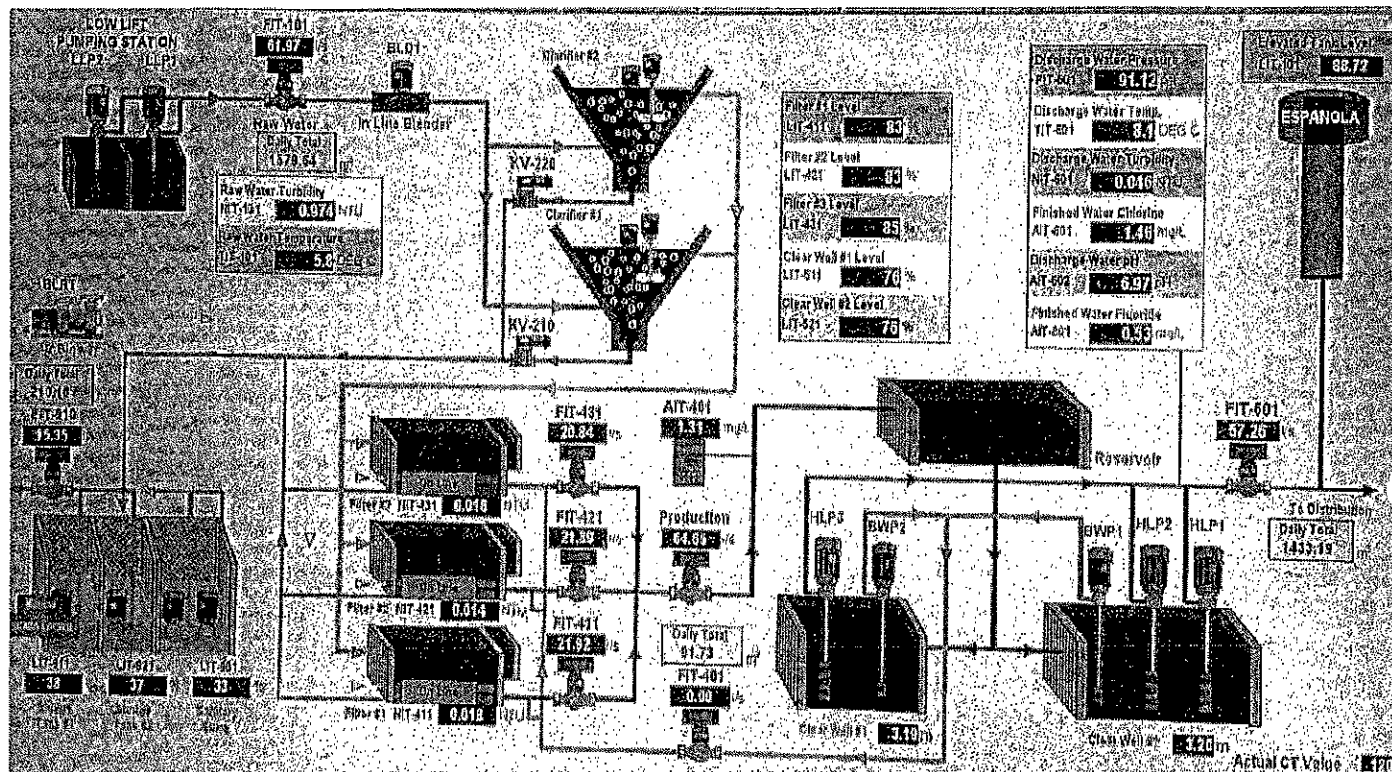
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3.4 Treatment System Process Flow Chart

Water Treatment Plant





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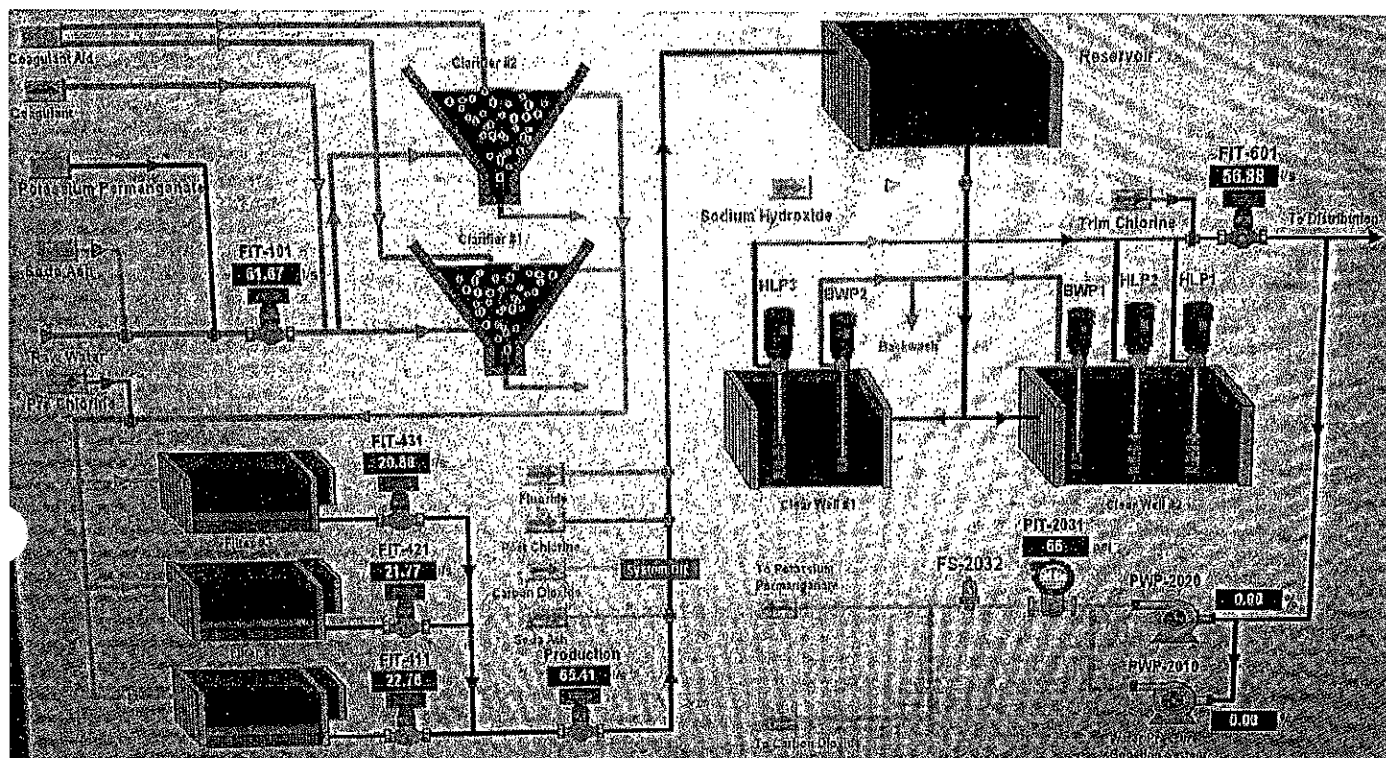
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3.5 Description of the Distribution System Components

The utility serves the Town of Espanola and has over 38,620 meters of pipeline of various sizes and materials, approximately 262 hydrants and 262 valves. Within the distribution system there is an elevated storage tank, 6 bleeders with backflow prevention and a continuous chlorine analyzer located at the STP. The water tower pressure/tank levels are monitored at the treatment plant. There are approximately 2200 connections throughout the town of which 1911 are residential and 165 are commercial.

This is a Class 1 distribution system.

3.6 Distribution System Map



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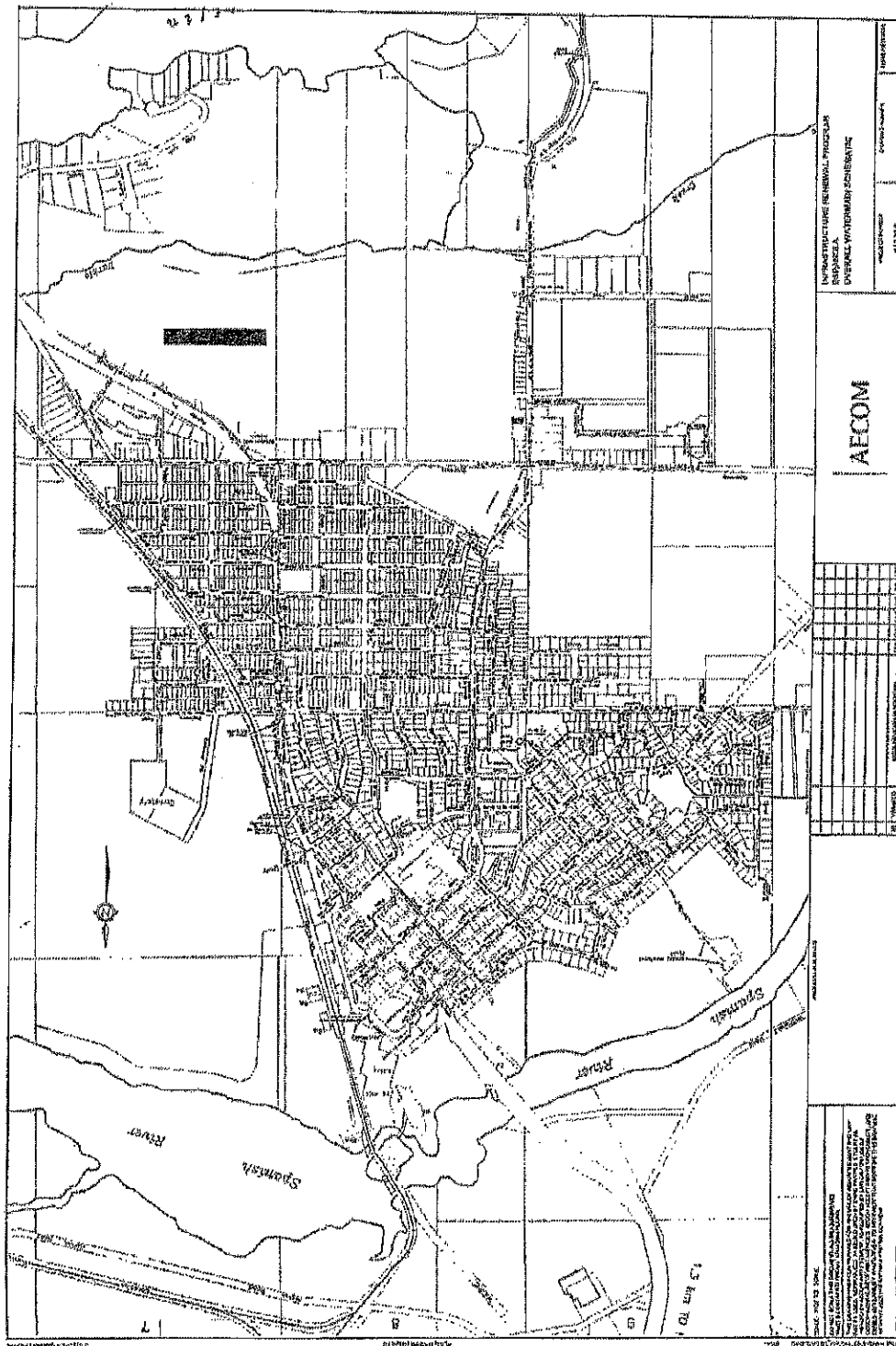
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4. Related Documents

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

5. Revision History

Date	Revision #	Reason for Revision
12-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 raw water sample results.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-07 Rev Date: 17-Aug-18 Rev No: 0 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:



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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 not 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

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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
 - CCP deviations
 - audit/inspection results


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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

5. Revision History

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 # 12 dated 17-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).

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-08 Rev Date: 09-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.

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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

5. Revision History

Date	Revision #	Reason for Revision
09-Jul-18	0	<p>Procedure Issued – Information within OP-08 was originally set out in the QEMS Procedure QP-02 Risk Assessment and Risk Assessment Outcomes (last revision # 4 dated 02-Jul-18).</p> <p>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.</p>

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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 *Espanola 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 *Espanola Drinking Water System* is owned by The Corporation of the Town of Espanola and is represented by the Mayor and CAO/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 *Espanola Drinking Water System* consists of:

- Sr. Operations Management – Espanola 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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- 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	<ul style="list-style-type: none"> • 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)	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • Consult with the MOECC 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	Responsibilities and Authorities
All Operations Personnel	<ul style="list-style-type: none"> 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)	<ul style="list-style-type: none"> 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.)	<ul style="list-style-type: none"> Act as Overall Responsible Operator (ORO) when required. Refer to Overall Responsible Operator (ORO) SOP. 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)



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Role	Responsibilities and Authorities
	<ul style="list-style-type: none">• 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
Safety, Process & Compliance (SPC) Manager (Top Management)	<ul style="list-style-type: none">• 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 his/her 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.)	<ul style="list-style-type: none">• 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 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• May act as Operator-in-Charge (OIC) and/or Overall Responsible Operator (ORO) when required. Refer to Overall Responsible Operator (ORO) SOP.• 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 (In consultation with the operations management as required)
Maintenance Team	<ul style="list-style-type: none">• Act as lead with other staff on extensive maintenance/repair

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Approved by: Operations Management

Role	Responsibilities and Authorities
Lead	<ul style="list-style-type: none">projectsAssist in the preparation of facility manuals and documenting operating processes and procedures for staffAssist management in developing annual O&M budgets and provide recommendations relating to potential O&M expendituresAssist management in providing recommendations for annual capital forecasts and gathering information for operational reports as required.Develop and provide O&M reports to management and recommend changes in operating procedures/processes to improve facility operationsOversee maintenance activities on equipment and process in order to maintain compliance with applicable legislation, regulations, approvals and established operating proceduresParticipate as a technical advisor to staff and management and provide specialized training on technical or other issues.Perform duties as assigned by operations management
Maintenance Electrician	<ul style="list-style-type: none">Actively participate in the development and maintenance of facility emergency plans and assist with emergencies as required.Assist in the preparation of facility manuals and documenting operating processes and procedures for staffAssist management in developing annual O&M budgets and provide recommendations relating to potential O&M expendituresAssist management in providing recommendations for annual capital forecasts and gathering information for operational reports as requiredInstall and commission new electrical/electronic equipment and automation systemsPerform duties as assigned by operations managementPerform 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	<ul style="list-style-type: none">Actively participate in the development and maintenance of facility emergency plans and assist with emergencies as required.Assist in the preparation of facility manuals and documenting operating processes and procedures for staffAssist management in developing annual O&M budgets and provide recommendations relating to potential O&M expendituresAssist management in providing recommendations for annual capital forecasts and gathering information for operational reports as requiredOversee maintenance activities on equipment and process in order to maintain compliance with applicable legislation,



Ontario Clean Water Agency

OPERATIONAL PLAN

Espanola Drinking Water System

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ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: PCT

Approved by: Operations Management

Role	Responsibilities and Authorities
	<ul style="list-style-type: none">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 operator/mechanic as required• 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• Prepare and/or coordinate staff work assignments and follow up to ensure completion.
Operations Team Lead	<ul style="list-style-type: none">• Act as lead with other staff on extensive maintenance/repair projects• Act for management during vacations or periodic absences.• Actively participate in the development and maintenance of facility emergency plans and assist with emergencies as required.• Assist in the preparation of facility manuals and documenting operating processes and procedures for staff• Assist management in providing recommendation for annual capital forecasts and gathering information for operational reports as required• Develop and provide O&M reports to management and recommend changes in operating procedures/processes to improve facility operations• Maintain the facility log book according to regulatory requirements• May act as Operator-in-Charge (OIC) and/or Overall Responsible Operator (ORO) when required. Refer to Overall Responsible Operator (ORO) SOP.• 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 operator/mechanic as required• Prepare and/or coordinate operational staff work assignments and follow up to ensure completion• Regularly inspect operating equipment, perform routine preventive maintenance and repairs and prepare and complete work orders as assigned
Senior Operator/Mechanic	<ul style="list-style-type: none">• Act for management during vacations or periodic absences.• Actively participate in the development and maintenance of facility emergency plans and assist with emergencies as required.• Assist in the preparation of facility manuals and documenting operating processes and procedures for staff• Assist management in providing recommendations for annual capital forecasts and gathering information for operational reports

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ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: PCT

Approved by: Operations Management

Role	Responsibilities and Authorities
	<ul style="list-style-type: none">as required• May act as Operator-in-Charge (OIC) and/or Overall Responsible Operator (ORO) when required. Refer to Overall Responsible Operator (ORO) SOP.• 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 operator/mechanic as required• Prepare and/or coordinate operational staff work assignments and follow up to ensure completion
Operator/Mechanic	<ul style="list-style-type: none">• Collect samples and perform laboratory tests and equipment calibrations as required• May act as Operator-in-Charge (OIC) and/or Overall Responsible Operator (ORO) when required. Refer to Overall Responsible Operator (ORO) SOP.• Monitor, maintain and operate facilities in accordance with applicable regulations, approvals and established operating procedures• Participate in facility inspections and audits• Perform duties as assigned by operations management or designate• Regularly inspect operating equipment, perform routine preventive maintenance and repairs and prepare and complete work orders as assigned
Mechanic/Operator	<ul style="list-style-type: none">• Act as lead with other staff on extensive maintenance/repair projects• May act as Operator-in-Charge (OIC) and/or Overall Responsible Operator (ORO) when required. Refer to Overall Responsible Operator (ORO) SOP.• Perform duties as assigned by operations management or designate• Perform duties of operator/mechanic as required• Regularly inspect operating equipment, perform routine preventive maintenance and repairs• Schedule and perform maintenance on equipment and processes in accordance with established procedures and record the maintenance data
Administrative Assistant/Project Clerk	<ul style="list-style-type: none">• Support the administrative functions of the regional hub/cluster/facility



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Reviewed by: PCT

Approved by: Operations Management

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

5. Revision History

Date	Revision #	Reason for Revision
02-Oct-18	0	Procedure Issued – Information within OP-09 was originally set out in the main body of OCWA's Operational Plan (last revision # 12 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.



Ontario Clean Water Agency

OPERATIONAL PLAN

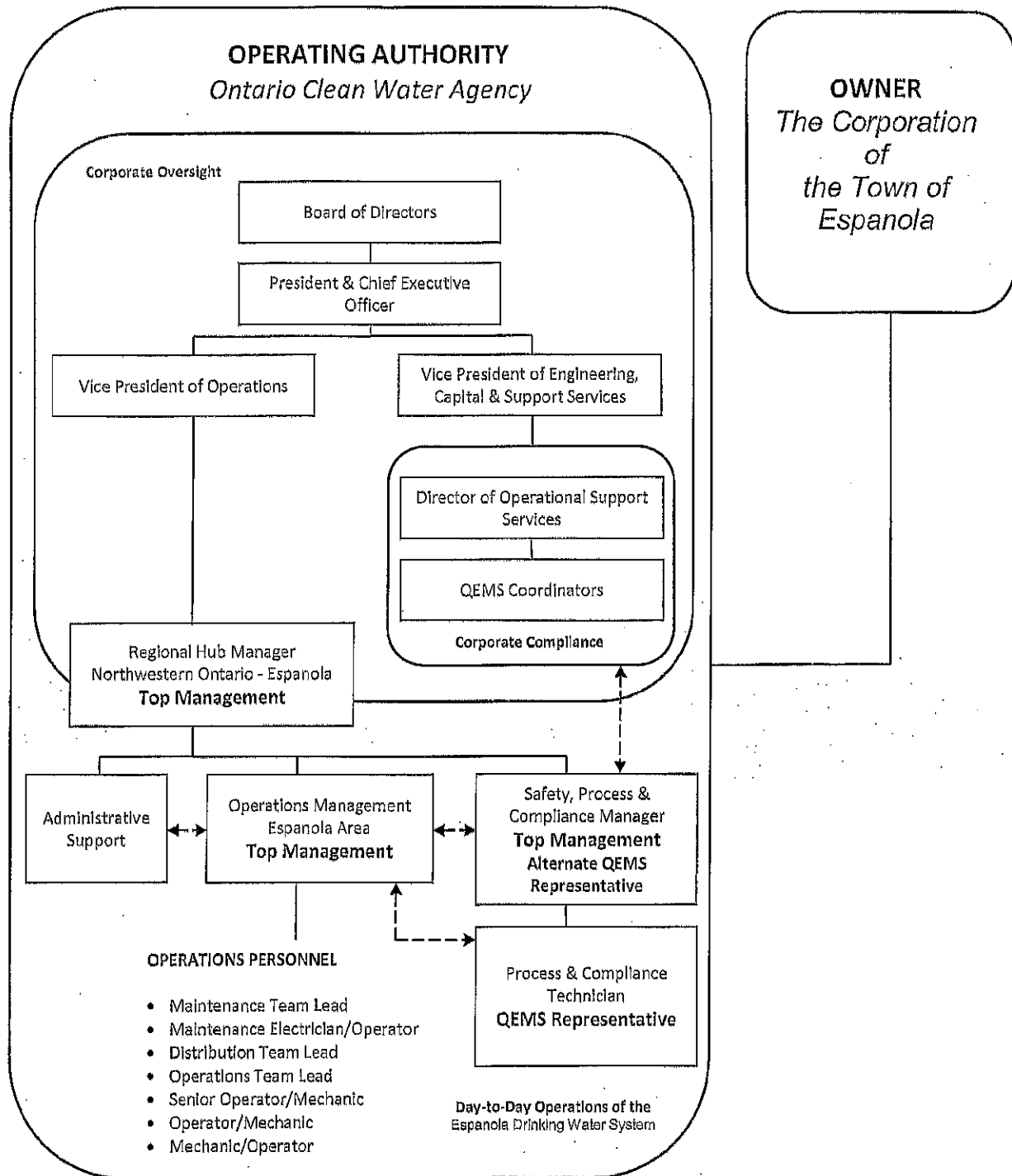
Espanola Drinking Water System

QEMS Doc.: OP-09A
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ORGANIZATIONAL STRUCTURE

Reviewed by: PCT

Approved by: Operations Management




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	ORGANIZATIONAL STRUCTURE	
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Revision History

Date	Revision #	Reason for Revision
11-May-12	2	Procedure re-issued
20-Apr-15	3	Revision table added and Northern VP removed
4-Nov-16	4	Updated table with new positions
27-Apr-17		Minor formatting
18-Jul-17	5	Added positions to Facility Staff section
11-May-18	6	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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-10 Rev Date: 04-Oct-18 Rev No: 0 Pages: 1 of 6
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 system or subject systems

3. Procedure

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

Position	Required Minimum Competencies
Operations Management	<ul style="list-style-type: none"> • Valid operator certification; minimum 2 if required to act as ORO • Experience and/or training in managing/supervising drinking water system operations, maintenance, financial planning and administration • Experience using computers and operational computerized systems • 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



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COMPETENCIES

Reviewed by: PCT


Approved by: Operations Management

Position	Required Minimum Competencies
Safety, Process & Compliance (SPC) Manager	<ul style="list-style-type: none">• 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	<ul style="list-style-type: none">• Valid operator certification; minimum OIT or minimum 2 if required to act as ORO• 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 Team Lead	<ul style="list-style-type: none">• Valid operator certification; minimum OIT or minimum 2 if required to act as ORO• Ability to work from plans and schematic diagrams• Experience and/or training in managing and planning multiple projects, assessing priorities and effectively coordinating operation and maintenance programs• Experience in maintaining and repairing equipment and structures and in planning and scheduling maintenance and repair tasks• Experience using computers and operational computerized systems• One of: Electrical/Electronic/Instrumentation Technician or Technologist Diploma; Mechanical Millwright; Certified Engineering Technician/Technologist designation, or; a valid Engineering or Environmental Technician diploma• Training and/or experience related to operations and maintenance of 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
Maintenance Electrician	<ul style="list-style-type: none">• Ability to work from plans and schematic diagrams• Completion of any electrical or electronic training program certified by the Ministry of Advanced Education and Skills Development

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Position	Required Minimum Competencies
	(formerly the Ministry of Training, Colleges and Universities) <ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • Valid operator certification; minimum OIT or minimum 2 if required to act as ORO • 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
Operations Team Lead	<ul style="list-style-type: none"> • Valid operator certification; minimum OIT or minimum 2 if required to act as ORO • Experience and/or training in managing and planning multiple projects, assessing priorities and effectively coordinating operation and maintenance programs • Experience and/or training in leading/directing operations personnel, and providing technical guidance to resolve operational issues • Experience using computers and operational computerized systems • Training and/or experience related to operations and maintenance of 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
Senior Operator/Mechanic & Operator/Mechanic	<ul style="list-style-type: none"> • Valid operator certification; minimum OIT or minimum 2 if required to act as ORO • Basic mathematical and chemistry knowledge • Experience using computers and operational computerized systems • Knowledge to use and understand operating and maintenance manuals, blueprints and other technical specifications • 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

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Position	Required Minimum Competencies
Mechanic/Operator	<ul style="list-style-type: none"> Valid operator certification; minimum OIT or minimum 2 if required to act as OIC and/or ORO Experience in maintaining and repairing equipment and structures and in planning and scheduling maintenance and repair tasks Experience using computers and operational computerized systems Millwright and/or other trades certificates Training and/or experience related to drinking water system processes Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures

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


Position	Required Minimum Competencies
Administrative Assistant/Project Clerk	<ul style="list-style-type: none"> 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 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.

3.4 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.

3.5 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.

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- 3.6 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.
- 3.7 Staff is also required to complete the mandatory environmental and health and safety compliance training listed in OCWA's Mandatory Compliance Training Requirements document, based on their position and/or the duties they perform.
- 3.8 Operations personnel also 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.
- 3.9 As part of OCWA's annual Performance Planning and Review (PPR) process, employee performance is evaluated against their 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 employees may at any time request training from either internal or external providers by obtaining approval from their manager.
- 3.10 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.
- 3.11 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.
- 3.12 Individual OCWA employee training records are tracked using a computerized system.
- 3.13 Training records are maintained and controlled as per OP-05 Document and Records Control.



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COMPETENCIES

Reviewed by: PCT


Approved by: Operations Management

4. Related Documents

OCWA's Mandatory Compliance Training List
Operations Personnel Licence Certificates
Performance Planning and Review Database
Training Records
OP-5 Document and Records Control
OCWA Training Summary Database

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 # 12 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'. 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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-11 Rev Date: 09-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 *Espanola 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 *Espanola 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 un-staffed (i.e., evenings, weekends and statutory holidays).
- 3.4 The schedule consists of a weekly rotation with a shift change occurring each Monday. 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

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 on-call 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-Jan-10	0	Procedure issued
25-May-11	1	Change ORO designation & where call-in reports are stored
20-Sept-12	2	Change Management titles, edit section 5.6 for readability. Add statement in section 5.5 to include alarm response during regular hours.
22-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
09-Jul-18	4	QP-03 procedure renamed OP-11. Removed Scope and Responsibilities sections. Removed specific hours of personnel coverage and rewrote ORO designation. Other minor edits in wording.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-12 Rev Date: 17-Aug-18 Rev No: 4 Pages: 1 of 4
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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COMMUNICATIONS		
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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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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 *Espanola 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

5. Revision History

Date	Revision #	Reason for Revision
01-May-10	0	Procedure issued
26-May-11	1	Procedure updated to show how relevant QEMS information is communicated to OCWA personnel. Add QP01 to Related Documents. Edit responsibility list
30-Sept-12	2	Change management titles, 6.0 – Change "maintained" to located for FEP.
04-Nov-16	3	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.
25-May-17		Minor editing changes – removed Bruce Mines



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OPERATIONAL PLAN

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COMMUNICATIONS

Reviewed by: PCT

Approved by: Operations Management

17-Aug-18	4	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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water Systems	QEMS Proc.: OP-13 Rev Date: 10-Oct-18 Rev No: 4 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 *Espanola 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 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.

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



Ontario Clean Water Agency

OPERATIONAL PLAN

Espanola Drinking Water Systems

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ESSENTIAL SUPPLIES AND SERVICES

Reviewed by: PGT

Approved by: Operations Management

- 3.6 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).
- 3.7 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.
- 3.8 Chemicals purchased for use in the drinking water treatment process must meet AWWA Standards and be ANSI/NSF certified as per the Municipal Drinking Water Licence (MDWL).
- 3.9 The facility orders and receives ongoing deliveries of chemicals to satisfy current short-term 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.
- 3.10 Process components/equipment provided by the supplier 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

5. Revision History

Date	Revision #	Reason for Revision
01-May-10	0	Procedure issued
27-May-11	1	Procedure revised to include how essential suppliers and service providers are informed of relevant aspects of OCWA's QEMS
30-Sept-12	2	Change Management Position titles
21-Nov-16	3	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.

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ESSENTIAL SUPPLIES AND SERVICES		
Reviewed by: PCT		Approved by: Operations Management
10-Oct-18	4	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).

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-14 Rev Date: 09-Jul-18 Rev No: 4 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 *Espanola 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 All recommendations are entered into the work management system (WMS) as work orders awaiting client approval. The purchase of equipment and / or the completion of the task are tracked using these work orders.

3.5 The Capital Report forms the long term forecast for any major infrastructure maintenance, rehabilitation and renewal activities as per OP-15.

3.6 Operations management ensures that results of this review are considered during the management review process (OP-20).


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REVIEW AND PROVISION OF INFRASTRUCTURE		
Reviewed by: PCT		Approved by: Operations Management

4. Related Documents

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

5. Revision History

Date	Revision #	Reason for Revision
01-Jan-10	0	Procedure issued
30-Sept-12	1	Change Management Position titles.
04-Nov-16	2	Removed 'where to find it' from section 6. Removed wording from section 5.1 and 5.2. Added section 5.3.
02-Jun-17	3	Added section 5.2; changed wording from annual to each calendar year in section 5.1
09-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).

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-16 Rev Date: 09-Jul-18 Rev No: 0 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 *Espanola 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;*
- *instrumentation cleaning, verification of calibration;*
- *check low lift pumping station to ensure that everything is in order;*
- *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*

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

- enter detailed asset information;
- generate and process work orders;

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<p>INFRASTRUCTURE MAINTENANCE, REHABILITATION AND RENEWAL</p>		
<p>Reviewed by: PCT</p>	<p>Approved by: Operations Management</p>	

- 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 to him 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 the owner.

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INFRASTRUCTURE MAINTENANCE, REHABILITATION AND RENEWAL		
Reviewed by: PCT	Approved by: Operations Management	

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

5. Revision History

Date	Revision #	Reason for Revision
09-Jul-18	0	Procedure issued – Information within OP-15 was originally set out in the Main body of OCWA's Operational Plan (last revision 12 dated 17-Jan-18. 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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-16 Rev Date: 17-Jul-18 Rev No: 6 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
- distribution 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
- Fluoride residual

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 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-16 Rev Date: 17-Jul-18 Rev No: 6 Pages: 2 of 3
SAMPLING, TESTING AND MONITORING		
Reviewed by: PCT	Approved by: Operations Management	

- Treated water pH
- Clearwell levels
- Raw turbidity
- Filter run times
- System pressures

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 (Sudbury) 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 *Espanola* WTP round sheets.

In-house samples are analyzed following approved laboratory procedures. The sampling results are recorded on the *Espanola* WTP round sheets and are entered into PDM.

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
- in-house labs are conducted to monitor for raw pH, alkalinity, iron and manganese. This is especially important during spring/fall turnover.

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 *Espanola 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.


 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-16 Rev Date: 17-Jul-18 Rev No: 6 Pages: 3 of 3
		SAMPLING, TESTING AND MONITORING
Reviewed by: PCT	Approved by: Operations Management	

4. Related Documents

Annotation Reports
 Annual Report (O. Reg. 170 Section 11)
 Emergency Contact List and Essential Supplies & Services List
 Facility Logbook
 Espanola WTP Round Sheets
 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 - (Sudbury) Notification of Adverse Water
 OP-05 Document and Records Control
 OP-06 Drinking Water System
 OP-20 Management Review

5. Revision History

Date	Revision #	Reason for Revision
01-Jan-10	0	Procedure issued
27-May-11	1	Add statement in section 5.5 and format of lab results
30-Sep-12	2	Change Management Position titles
18-Sep-13	3	Template updated: added table 5.2 and 5.4
25-Nov-15	4	Removed PDC, Removed where to find list,
04-Nov-16	5	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; Removed "and head loss" form 5.3
17-Jul-18	6	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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-17 Rev Date: 09-Jul-18 Rev No: 5 Pages: 1 of 2
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 *Espanola 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

5. Revision History

Date	Revision #	Reason for Revision
01-Jan-10	0	Procedure Issued
27-May-11	1	Revise responsibility list
30-Sept-12	2	Change management titles.
08-Nov-16	3	Removed the 'where to find' list out of section 6.
02-Jun-17	4	Added section 5.6 referring to long term forecasting
09-Jul-18	5	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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-18 Rev Date: 09-Jul-18 Rev No: 5 Pages: 1 of 4
EMERGENCY MANAGEMENT		
Reviewed by: PGT	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 recurrence, 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 *Espanola 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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EMERGENCY MANAGEMENT		
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

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-18 Rev Date: 09-Jul-18 Rev No: 5 Pages: 4 of 4
	EMERGENCY MANAGEMENT	
Reviewed by: PCT	Approved by: Operations Management	

5. Revision History

Date	Revision #	Reason for Revision
01-Jan-10	0	Procedure issued
30-Sept-12	1	Change Management Position titles.
05-Jan-15	2	Changed names of contingencies to match new versions
21-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
19-Jul-17	4	Removed the requirement to log reviews on the FEP-01 form.
09-Ju3-18	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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Espanola Drinking Water System	QEMS Proc.: OP-19 Rev Date: 09-Jul-18 Rev No: 6 Pages: 1 of 5
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 *Espanola 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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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.

3.4 Audit Preparation

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

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3.4.2 Each internal auditor is responsible for:


- reviewing documentation to prepare for their audit assignments including:
 - the Operational Plan and related procedures;
 - results of previous internal and external QEMS audits;
 - the status and effectiveness of corrective and preventive actions implemented;
 - the results of the management review;
 - 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.
- 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 were conducted;

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- 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

Espanola Action & Analysis Spreadsheet

OP-05 Document and Records Control

OP-20 Management Review

OP-21 Continual Improvement

5. Revision History

Date	Revision #	Reason for Revision
01-Jan-10	0	Procedure Issued
30-May-11	1	Revise frequency of QEMS audit
30-Sept-12	2	Change Management Position titles
15-Oct-13	3	Changed section 5.3 to reflect that the PCT reviews the protocol not corporate



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8-Nov-15	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 reference to the spreadsheet for location where action plans are kept;
25-May-17		Minor formatting
02-Jun-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;
09-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.

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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 *Espanola Drinking Water System* as:


- operations management – Espanola 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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- 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;
 - l) 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 Town of Espanola*.
- 3.9 The QEMS rep. monitors the progress and documents the completion of actions resulting from the management review.
- 4. Related Documents**
- Espanola Action & Analysis Spreadsheet*
Management Review Reference Materials
Minutes and Actions Resulting from the Management Review
OP-21 Continual Improvement

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5. Revision History

Date	Revision #	Reason for Revision
01-May-10	0	Procedure issued
30-May-11	1	Revise responsibility to Include Senior Operator Location of documents.
30-Sept-12	2	Change Management Position titles.
21-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
21-Nov-16	4	Changed wording to state each calendar year in definitions section of section 5.1
09-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.

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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 *Espanola 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.

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3.2.4 The QEMS rep. ensures corrective actions are documented in the *Espanola* Action & Analysis 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 *Espanola* Action & Analysis 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.

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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
 Espanola Action & Analysis Spreadsheet
 MOECC Inspection Report
 OP-05 Document and Records Control
 OP-20 Management Review

5. Revision History

Date	Revision #	Reason for Revision
09-Jul-18	0	<p>Procedure issued – Some of the information within OP-21 was originally set out in the main body of OCWA's Operational Plan (last revision #12, dated 12-Jan-18) and in QP-10 Internal Audit procedure (last revision #5, dated 02-Jun-17).</p> <p>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.</p>

