

Audit Report

Re Accreditation Audit for

Ontario Clean Water Agency for the Town of Shelburne

1634163-02

Audited Address: 203 Main St E, Shelburne, Ontario, CAN, L9V
3K7

Start Date: Mar 21, 2022 End Date: Mar 21, 2022

Type of audit – On-site Verification Audit

Issue Date: Mar 22, 2022

Revision Level: *Final*

BACKGROUND INFORMATION

SAI Global conducted an audit of Ontario Clean Water Agency for the Town of Shelburne beginning on Mar 21, 2022 and ending on Mar 21, 2022 to DRINKING WATER QUALITY MANAGEMENT STANDARD VERSION 2 - 2017.

The purpose of this audit report is to summarise the degree of compliance with relevant criteria, as defined on the cover page of this report, based on the evidence obtained during the audit of your organization. This audit report considers your organization's policies, objectives, and continual improvement processes. Comments may include how suitable the objectives selected by your organization appear to be in regard to maintaining customer satisfaction levels and providing other benefits with respect to policy and other external and internal needs. We may also comment regarding the measurable progress you have made in reaching these targets for improvement.

SAI Global audits are carried out within the requirements of SAI Global procedures that also reflect the requirements and guidance provided in the international standards relating to audit practice such as ISO/IEC 17021-1, ISO 19011 and other normative criteria. SAI Global Auditors are assigned to audits according to industry, standard or technical competencies appropriate to the organization being audited. Details of such experience and competency are maintained in our records.

In addition to the information contained in this audit report, SAI Global maintains files for each client. These files contain details of organization size and personnel as well as evidence collected during preliminary and subsequent audit activities (Documentation Review and Scope) relevant to the application for initial and continuing certification of your organization.

Please take care to advise us of any change that may affect the application/certification or may assist us to keep your contact information up to date, as required by SAI Global Terms and Conditions.

This report has been prepared by SAI Global Limited (SAI Global) in respect of a Client's application for assessment by SAI Global. The purpose of the report is to comment upon evidence of the Client's compliance with the standards or other criteria specified. The content of this report applies only to matters, which were evident to SAI Global at the time of the audit, based on sampling of evidence provided and within the audit scope. SAI Global does not warrant or otherwise comment upon the suitability of the contents of the report or the certificate for any particular purpose or use. SAI Global accepts no liability whatsoever for consequences to, or actions taken by, third parties as a result of or in reliance upon information contained in this report or certificate.

Please note that this report is subject to independent review and approval. Should changes to the outcomes of this report be necessary as a result of the review, a revised report will be issued and will supersede this report.

Standard:	DRINKING WATER QUALITY MANAGEMENT STANDARD VERSION 2 - 2017
Scope of Certification:	Full Scope – Entire DWQMS
Drinking Water System Owner:	Town of Shelburne
Operating Authority:	Ontario Clean Water Agency
Owner:	Town of Shelburne
Population Served:	9993
Activities:	Treatment and Distribution
Drinking Water Systems	Town of Shelburne Drinking Water System (license # 109-101)
Total audit duration:	Person(s): 1 Day(s): 0.75
Audit Team Member:	Team Leader Paul Cartlidge

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Definitions and action required with respect to audit findings

Major Non-conformance:

Based on objective evidence, the absence of, or a significant failure to implement and/or maintain conformance to requirements of the applicable standard. Such issues may raise significant doubt as to the capability of the management system to achieve its intended outputs (i.e. the absence of or failure to implement a complete Management System clause of the standard); or

A situation which would on the basis of available objective evidence, raise significant doubt as to the capability of the Management System to achieve the stated policy and objectives of the customer.

NOTE: The "applicable Standard" is the Standard which SAI Global are issuing certification against, and may be a Product Standard, a management system Standard, a food safety Standard or another set of documented criteria.

Action required: This category of findings requires SAI Global to issue a formal NCR; to receive and approve client's proposed correction and corrective action plans; and formally verify the effective implementation of planned activities. Correction and corrective action plan should be submitted to SAI Global prior to commencement of follow-up activities as required. Follow-up action by SAI Global must 'close out' the NCR or reduce it to a lesser category within 90 days for initial certification and within 60 days for surveillance or re-certification audits, from the last day of the audit.

If significant risk issues (e.g. safety, environmental, food safety, product legality/quality, etc.) are detected during an audit these shall be reported immediately to the Client and more immediate or instant correction shall be requested. If this is not agreed and cannot be resolved to the satisfaction of SAI Global, immediate suspension shall be recommended.

In the case of initial certification, failure to close out NCR within the time limits means that the Certification Audit may be repeated.

If significant risk issues (e.g. safety, environmental, food safety, product legality/quality, etc.) are detected during an audit these shall be reported immediately to the Client and more immediate or instant correction shall be requested. If this is not agreed and cannot be resolved to the satisfaction of SAI Global, immediate suspension shall be recommended.

In the case of an already certified client, failure to close out NCR within the time limits means that suspension proceedings may be instituted by SAI Global.

Follow-up activities incur additional charges.

Minor Non-conformance:

Represents either a management system weakness or minor issue that could lead to a major nonconformance if not addressed. Each minor NC should be considered for potential improvement and to further investigate any system weaknesses for possible inclusion in the corrective action program

Action required: This category of findings requires SAI Global to issue a formal NCR; to receive and approve client's proposed correction and corrective action plans; and formally verify the effective implementation of planned activities at the next scheduled audit.

Opportunity for Improvement:

A documented statement, which may identify areas for improvement however shall not make specific recommendation(s).

Action required: Client may develop and implement solutions in order to add value to operations and management systems. SAI Global is not required to follow-up on this category of audit finding.

Audit Type and Purpose

On-site Verification Audit:

An onsite audit to assess whether a QMS has been implemented for the subject system that meets the “DO” requirements of the DWQMS V2.

Audit Objectives

The objective of the audit was to determine whether the drinking water Quality Management System (QMS) of the subject system conforms to the requirements of the Ontario Ministry of the Environment & Climate Change (MOECC) Drinking Water Quality Management Standard (DWQMS V2).

The audit was also intended to gather the information necessary for SAI Global to assess whether accreditation can continue or be offered or to the operating authority.

Audit Scope

The facilities and processes associated with the operating authority’s QMS were objectively evaluated to obtain audit evidence and to determine a) whether the quality management activities and related results conform with DWQMS V2 requirements, and b) if they have been effectively implemented and/or maintained.

Audit Criteria:

- The Drinking Water Quality Management Standard Version 2
- Current QMS manuals, procedures and records implemented by the Operating Authority
- SAI Global Accreditation Program Handbook

Confidentiality and Documentation Requirements

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

As part of the SAI Global Terms, it is necessary for you to notify SAI Global of any changes to your Quality Management System that you believe are significant enough to risk non-conformity with DWQMS V2: For more information, please refer to the SAI Global Accreditation Program Handbook.

Review of any changes

Changes to the Operating Authority since last audit include: Shelburne Well 1 and Well 3 were not operational as of the day of the audit. System upgrades/maintenance are being performed. Facilities visited during the audit were well 5/6, blending building, well 7/8 and the water tower.

EXECUTIVE OVERVIEW

The results of this onsite verification audit indicate that the management system does not fully meet the requirements of the standard based on the area of non-conformance identified during the audit and as documented in the attached Non-conformance Report # 2022-01. As discussed during the closing meeting a recommendation for certification to the standard and to the scope of certification identified in this report is on hold pending the receipt, review and acceptance of the corrective action taken. For re-certification, failure to address the nonconformances within the 60 day timeframe may lead to suspension.

Recommendation

The results of this audit indicate that the management system does not fully meet the requirements of the standard based on the area of non-conformance identified during the audit and as documented in the attached Non-conformance Report # 2022-01.

A recommendation for re-certification to the standard and to the scope of certification identified in this report is on hold pending the receipt, review and acceptance of the corrective action taken.

Opportunities for Improvement:

The following opportunities for improvement have been identified.

- Element # 9 - Consider defining responsibilities and authorities for municipal personnel performing functions with the Distribution System.
- Element # 10 - Consider adding Competencies for municipal personnel performing functions with the Distribution System.

It is suggested that the opportunities for improvement be considered by management to further enhance the Operating Authority's Quality Management System and performance.

Management System Documentation

The management systems operational plan was reviewed and found to be in conformance with the requirements of the standard.

Management Review

Records of the most recent management review meetings were verified and found to meet the requirements of the standard. All inputs were reflected in the records, and appear suitably managed as reflected by resulting actions and decisions.

Internal Audits

Internal audits are being conducted at planned intervals to ensure conformance to planned arrangements, the requirements of the standard and the established management system.

Corrective, Preventive Action & Continual Improvement Processes

The Operating Authority is implementing an effective process for the continual improvement of the management system through the use of the quality policy, quality objectives, audit results, data analysis, the appropriate management of corrective and preventive actions and management review.

Summary of Findings

1. Quality Management System	Conforms
2. Quality Management System Policy	Conforms
3. Commitment and Endorsement	Conforms
4. Quality Management System Representative	Conforms
5. Document and Records Control	Conforms
6. Drinking-Water System	Conforms
7. Risk Assessment	Conforms
8. Risk Assessment Outcomes	Conforms
9. Organizational Structure, Roles, Responsibilities and Authorities	OFI
10. Competencies	OFI
11. Personnel Coverage	Conforms
12. Communications	Conforms
13. Essential Supplies and Services	Conforms
14. Review and Provision of Infrastructure	Conforms
15. Infrastructure Maintenance, Rehabilitation & Renewal	Conforms
16. Sampling, Testing and Monitoring	Conforms
17. Measurement & Recording Equipment Calibration and Maintenance	Minor NCR #2022-01
18. Emergency Management	Conforms
19. Internal Audits	Conforms
20. Management Review	Conforms
21. Continual Improvement	Conforms
Major NCR #	Major non-conformity. The auditor has determined one of the following: (a) a required element of the DWQMS has not been incorporated into a QMS; (b) a systemic problem with a QMS is evidenced by two or more minor non-conformities; or (c) a minor non-conformity identified with a corrective action request has not been remedied.
Minor NCR #	Minor non-conformity. In the opinion of the auditor, part of a required element of the DWQMS has not been incorporated satisfactorily into a QMS.
OFI	Opportunity for improvement. Conforms to requirement, but there is an opportunity for improvement.
Conforms	Conforms to requirement.
NANC	Not applicable/Not Covered during this audit.
****	Additional comment added by auditor in the body of the report.

PART D. Audit Observations, Findings and Comments

DWQMS Reference:	1 Quality Management System
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-01 Quality and Environmental Management System (QEMS), rev. 1, 2018-06-25
Details: Quality Management System is adequately described in the Operational Plan. Reviewed and accepted.	

DWQMS Reference:	2 Quality Management System Policy
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-02 Quality and Environmental Management System (QEMS) Policy, rev. 1, 2018-06-25
Details: Policy statement adequately describes the goals of the Quality Management System. Policy statement was approved by OCWA board of directors in April 2016. Reviewed and accepted. Through interviews of staff and observations on-site pertaining to the other requirements of the DWQMS, the policy and QMS are effectively implemented.	

DWQMS Reference:	3 Commitment and Endorsement
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-03 Commitment & Endorsement Of OCWA's QEMS & Operational Plan, rev. 1, 2018-06-25
Details: An endorsement of Operational Plan is signed by Operations Managers of Ontario Clean Water Agency in September 2021 and the CAO and Director of Public Works of the Town of Shelburne in October 2021. Operational Plan OP-03 describes the commitments required. Reviewed and accepted. Through interviews of staff and observations on-site pertaining to the other requirements of the DWQMS, Top Management has demonstrated evidence of the commitment to the Quality Management System.	

DWQMS Reference:	4 Quality Management System Representative
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-04 Quality & Environmental Management System (QEMS) Representative, rev. 1, 2020-01-24
Details: The role of QEMS Representative for the Town of Shelburne Drinking Water System is the Process and Compliance Technician (PCT). The Safety, Process and Compliance Manager (or designate) will act as an alternate QEMS Representative when required. Reviewed and accepted. Through interviews of staff and observations on-site, the QMS rep maintains procedures needed for the QMS, management reports, training of personnel and promotion of the QMS.	

DWQMS Reference:	5 Document and Record Control
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-05 Document and Records Control, rev. 1, 2020-01-27 OP-05A Document and Records Control Locations, rev. 4, 2022-01-21
Details: Procedure OP-05 reviewed and accepted. Records are appropriately maintained at the WTP facilities and the OCWA Hub office in Shelburne. Electronic versions of documents are housed on a server located in the OCWA Toronto office (backups are done daily – viewed for 03/14/2022 to 03/20/2022). Revisions to procedures are managed by the PCT and updates to electronic and hard copies are appropriately managed (reviewed recent update made to OP-03A Commitment and Endorsement Page in November 2021). Revision history is attached at the end	

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of each procedure.

DWQMS Reference:	6 Drinking Water System
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-06 Drinking Water System, rev. 2, 2022-01-28 and associated System Description for each pumphouse/well
Details: Operational Plan adequately describes the System. Reviewed and accepted. Systems visited during the audit matched the System Descriptions.	

DWQMS Reference	7 Risk Assessment
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-07 Risk Assessment, rev. 0, 2018-06-25
Details: Procedure OP-07 adequately describes the Risk Assessment Process. Reviewed and accepted.	

DWQMS Reference:	8 Risk Assessment Outcomes
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-08 Risk Assessment Outcomes, rev. 0, 2018-06-25 OP-08A Summary of Risk Assessment Outcomes, rev. 6, 2022-01-21
Details: Risk Assessment Outcomes adequately describes all risk, hazards, hazardous events and critical control limits for the Drinking Water System and covers all required risks as described in the MOECC document "Potential Hazardous Events for Municipal Residential Drinking Water Systems" dated February 2017. Risk assessment outcomes are current as August 2021 when the full 36-month review was performed. Reviewed and accepted.	

DWQMS Reference:	9 Organizational Structure, Roles, Responsibility and Authorities
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-09 Organizational Structure, Roles, Responsibility and Authorities, rev. 2, 2020-11-02
Details: Organizational Structure, Roles, Responsibilities and Authorities are adequately described in the Operational Plan. Reviewed and accepted. Organizational structure as observed during the audit is accurate. Opportunity for Improvement – Consider defining responsibilities and authorities for municipal personnel performing functions with the Distribution System.	

DWQMS Reference:	10 Competencies
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-10 Competencies, rev. 2, 2020-11-02
Details: Competencies are adequately described in the Operational Plan. Reviewed and accepted. Classifications for each facility are designated by the Ontario Water & Wastewater Certification Office/Ministry of Environment. Operators for each facility must meet the operator classification based on the facility classification (e.g. supply and distribution class 2). Certifications for operators reviewed for the operators observed at the following facilities during the audit: <ul style="list-style-type: none">• Shelburne main system operator # 82382 (Class 2 Distribution and Supply) exp. Dec 31, 2023, # OT56985 (Operator-in-Training Water Treatment), exp. Dec 31, 2022• Town of Shelburne distribution system operator # 106935 (water distribution and supply	

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class 2) exp. April 30, 2024
 All training activities are recorded in the OCWA training database. Training records for above staff reviewed for 2021 including on-site training, health and safety training, external training. Reviewed and accepted. QMS training is given at monthly meetings, covering various elements of the standard at different meetings (e.g. element 2 and 21 covered on March 8, 2021).
Opportunity for Improvement – Consider adding Competencies for municipal personnel performing functions with the Distribution System.

DWQMS Reference:	11 Personnel Coverage
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-11 Personnel Coverage, rev. 1, 2022-01-21
Details: Procedure OP-11 reviewed and accepted. 1 Operator covers the sites Monday-Friday during normal business hours. SCADA system monitors critical parameters for the facilities and is connected to an autodialer which calls out to the on-call phone which rotates through operators. 24 hours/7 days on-call coverage is provided as well as adequate vacation coverage by other qualified operators employed by OCWA. Operator schedule and on-call schedule (Outlook calendar) for 2022 reviewed and accepted.	

DWQMS Reference:	12 Communications
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-12 Communications, rev. 2, 2021-02-01
Details: Procedure OP-12 reviewed and accepted. Relevant aspects of the Quality Management System are communicated as follows: <ul style="list-style-type: none"> • The Owner – during regularly scheduled meetings and through electronic and verbal communications, as well as monthly and annual reports on System performance (reviewed monthly report for January 2022 and Annual Report for 2021 (also viewed Town of Shelburne council resolution for acceptance dated March 14, 2022) • Operating Authority Personnel – through OCWA training programs – verified for 1 operator responsible for Shelburne) • Suppliers – through letters sent to suppliers – viewed examples for D.H. Jutzi (chemical supplier) – sent June 27, 2019 and Caldecott (millwright) sent October 25, 2021 and IndusControls (calibration services) sent October 25, 2021 • The Public – through the OCWA website. Reviewed community complaints through the WMS system – no complaints received in the past year. Communication methods reviewed and accepted.	

DWQMS Reference:	13 Essential Supplies and Services
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-13 Essential Supplies and Services, rev. 0, 2018-06-25 Highlands Hub Emergency Contacts and Essential Supplies and Services List, rev. 2, 2021-10-29
Details: Procedure OP-13 reviewed and accepted. A list of all essential supplies and services is maintained. Reviewed and accepted. Reviewed qualifications for the following essential suppliers which were current and appropriate: <ul style="list-style-type: none"> • Chemicals: Sodium Hypochlorite (D.H. Jutzi) and Waterworx sequesterant (Worx, LLC) – NSF grade shown on chemical jugs viewed on site and company lists all certified chemicals on the NSF website listing • Laboratory testing: SGS Laboratories Lakefield – viewed copy of CALA Accreditation Certificate, exp September 2, 2023 	

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- Calibration Services – Indus Controls – summary of qualifications of service supervisor maintained.

DWQMS Reference:	14 Review and Provision of Infrastructure
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-14 Review and Provision of Infrastructure, rev. 0, 2018-06-25
<p>Details: Procedure OP-14 reviewed and accepted.</p> <p>Infrastructure Review is achieved through a summary of capital items generated by OCWA and forwarded to the Town of Shelburne for review for the budget process, and approval sent after acceptance by Town of Shelburne council. Infrastructure list for 2021-2026 reviewed and accepted. The items which were completed or carried forward based on the municipality's decision are recorded on the infrastructure list. Connection to the risk assessment outcomes and associated risk rating is included on the list (e.g. 2021 – new security system for all pumphouses). Reviewed and accepted.</p>	

DWQMS Reference:	15 Infrastructure Maintenance, Rehabilitation and Renewal
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-15 Infrastructure Maintenance, Rehabilitation and Renewal, rev. 1, 2020-11-02
<p>Details: Procedure OP-15 reviewed and accepted.</p> <p>Equipment Maintenance is managed through a work order system (Maximo) to ensure all equipment is maintained. Sampled maintenance records for the following equipment:</p> <ul style="list-style-type: none"> • Well 5/6 and well 7/8 generators – monthly tests 2022 and annual service Feb 8, 2022 • SCADA alarm testing - monthly tests 2022 • Well 1, 5, 6 submersible pumps – annual service Feb 2022 • Water Tower Full Inspection 5 years (last done in Nov 2017 – due in 2022 according to capital plan) • Water Tower inside/instrumentation inspection annual – June 2021 • Distribution System Hydrant flushing (twice per year) – Spring 2021 • Valve Exercising (annually in different zones of the Town) – last done in Zone 2 in 2021 <p>The Owner is provided with a summary of maintenance activities in each monthly report sent to the Town of Shelburne (reviewed for January 2021).</p>	

DWQMS Reference:	16 Sampling, Testing and Monitoring
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-16 Sampling, Testing and Monitoring, rev. 0, 2018-06-25 and 2022 sampling schedule
<p>Details: Procedure OP-16 and sampling schedule reviewed and accepted.</p> <p>QEMS Procedure OP-16 Sampling, Testing and Monitoring includes the requirement that all sampling, monitoring and testing is conducted at a minimum in accordance with SDWA O. Reg. 170/03, in addition to the requirements by the Owner. Sampling schedules have been generated for all sites covered by the Ontario Clean Water Agency for the Town of Shelburne. The owner is provided with an annual summary of sampling, testing and monitoring results through the water system annual reports.</p> <p>New Electronic System (Eris) has taken the place of manual log books for daily operator visits and activities performed. Facility parameters are still recorded manually on form at the WTP facilities (reviewed at well 5/6 and well 7/8 pumphouses for March 2022).</p> <p>Testing records reviewed:</p> <ul style="list-style-type: none"> • Weekly bacterial testing Jan 18, 2022 	

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- Weekly bacterial testing Feb 8, 2022
- Monthly Arsenic testing Jan 4, 2022
- Quarterly Arsenic testing (TW only – well 5,6,7,8) Jan 6, 2022
- Quarterly Nitrates (TW) Jan 4, 2022
- Quarterly THMs, HAAs (DW) Jan 4, 2022
- Annual Lead Semi-Annual Alkalinity, pH Jan 4, 2022
- Schedule 23/24 (3-year) Jan 5, 2021

DWQMS Reference:	17 Measurement and Recording Equipment Calibration and Maintenance
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-17 Measurement and Recording Equipment Calibration and Maintenance, rev. 0, 2018-06-25
<p>Details: Procedure OP-17 reviewed and accepted.</p> <p>Reviewed equipment calibration records for the following equipment used for the Drinking Water Systems:</p> <ul style="list-style-type: none"> • Well 5 raw water flow meter cal. September 15, 2021 (annual) • Well 6 raw water flow meter cal. September 15, 2021 (annual) • Well 7 raw water flow meter cal. September 15, 2021 (annual) • Blending Building water flow meter cal. September 15, 2021 (annual) • Online Chlorine Analysers calibrated monthly and recorded on log sheet at each facility (well 5/6, well 7/8 and water tower) • Handheld chlorine analyser DR 300 (SN 20090B001072) cal. Sept 27, 2021 (annual) plus monthly verification with standards – reviewed Pocket Cl2 Calibration Record for 2021 – all passed and standard lot # A0230 expires August 2022. • Handheld turbidity analyser 2100P (SN 040300035206) cal. Sept 27, 2021 (annual) plus monthly verification with standards – reviewed Portable Turbidimeter Calibration Record for 2021 – noted that standards lot # A0213A were noted to expire in October 2021 but had been used for calibration in November/December 2021 – see minor NCR # 2022-01 	

DWQMS Reference:	18 Emergency Management
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-18 Emergency Management, rev. 0, 2018-06-25 Highlands Hub Emergency Contacts and Essential Supplies and Services List, rev. 2, 2021-10-29
<p>Details: Procedure OP-18 reviewed and accepted. A list of emergency contacts is maintained. The following specific contingency plans have been established:</p> <ul style="list-style-type: none"> • CP-01 Spill Response, rev. 4, 2019-12-17 • CP-02 Critical Injury, rev. 3, 2019-12-12 • CP-03 Critical Shortage of Staff, rev. 3, 2019-12-12 • CP-04 Loss of Service, rev. 1, 2019-12-12 • CP-05 Unsafe Water, rev. 3, 2019-12-12 • CP-06 Security Breach, rev. 1, 2019-12-12 <p>An emergency communication protocol and an up-to-date list of emergency contacts is established specific to the Town of Shelburne. Emergency procedures are reviewed and/or tested on an annual basis (reviewed training session for CP-04 Loss of Service on October 29, 2021). Reviewed and accepted.</p>	

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DWQMS Reference:	19 Internal Audits
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-19 Internal QEMS Audits, rev. 0, 2018-06-25
Details: Procedure OP-19 reviewed and accepted. Most recent internal audit was performed October 2021. Internal Audit Report issued on November 1, 2021. 1 non-conformance and 2 Opportunities for Improvement were identified. Follow-up on NCs and OFIs performed as per element 21.	

DWQMS Reference:	20 Management Review
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-20 Management Review, rev. 0, 2018-06-25
Details: Procedure OP-20 captures all PLAN requirements from section 20 of the DWQMS. Management Reviews are conducted a minimum of once every calendar year. Procedure reviewed and accepted. Most recent Management Review meeting was performed November 15, 2021. Action items were noted in the minutes along with responsibility and completion dates (e.g. monitor population growth for possible impact on sampling requirements). Management Review minutes were sent to the Director of Public Works for the Town of Shelburne on Nov 16, 2021.	

DWQMS Reference:	21 Continual Improvement
Client Reference:	Operational Plan for the Town of Shelburne Drinking Water System, OP-21 Continual Improvement, rev. 0, 2018-06-25
Details: Procedure OP-21 reviewed and accepted. Corrective Actions, Preventive Actions and Best Management Practices are captured on the Implementation Action Plan Spreadsheet, examples reviewed included: <ul style="list-style-type: none">• Corrective Action – 1 non-conformance from 2021 Internal Audit (Personnel Coverage procedure mentioned use of the Call-In report – not being used – root cause determined to be missed removing requirement when procedure was updated – completed 01/21/2022 and verified in OP-11).• Preventive Action – 2 opportunities for improvement from 2021 Internal Audit (e.g. update element 8, table OP-08A to include CCL for UV Intensity).• Best Management Practices identified in the past year during Management Review (e.g. WMS training for new Operational staff).	

Details regarding the personnel interviewed and objective evidence reviewed are maintained on file at SAI Global.

This report was prepared by:

Paul Cartlidge
SAI Global Management Systems Auditor

The audit report is distributed as follows:

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- Operating Authority
- Owner
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Notes

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