

Appendix I

Audit Report

12 Month Surveillance audit for

Town of Niagara-on-the Lake

ACTY-2023-654023

Audited Address: 3 Lorraine St. PO Box 100 Virgil, ON LOS 1T0

Start Date: May 6, 2025 End Date: May 6, 2025

Type of audit -Surveillance System Audit

Issue Date: May 14, 2025 Revision Level: *Final*



BACKGROUND INFORMATION

Intertek - SAI Global conducted an audit of Town of Niagara on the Lake on May 6, 2025, to the Drinking Water Quality Management Standard (Version 2).

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.

Intertek - SAI Global audits are carried out within the requirements of Intertek - 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. Intertek - 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, Intertek - 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 Intertek - SAI Global Terms and Conditions.

This report has been prepared by Intertek - SAI Global Limited (Intertek - SAI Global) in respect of a Client's application for assessment by Intertek - 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 Intertek - SAI Global at the time of the audit, based on sampling of evidence provided and within the audit scope. Intertek - 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. Intertek - 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:	DWQMS (Version 2)
Applicable codes:	ACTY-2023-654023; CPRJ-2023-141045; CMPY-165092
Scope of Certification:	DWQMS (Version 2)
Drinking Water System Owner:	Town of Niagara-on-the-Lake
Operating Authority:	Town of Niagara-on-the-Lake
Population Services:	15000
Activities:	Distribution
Drinking Water Systems	Niagara-on-the Lake Distribution System
	Bevan Heights Drinking Water System
Total audit duration:	Person(s): 1.0 Day(s): 1.0
Audit Team Member(s):	Ryan Bourner

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 Intertek - 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 Intertek - 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 Intertek - SAI Global prior to commencement of follow-up activities as required. Follow-up action by Intertek - 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 Intertek - 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 Intertek - 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 Intertek - 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 Intertek - 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. Intertek - SAI Global is not required to follow-up on this category of audit finding.

Audit Type and Purpose

A systems desktop audit in accordance with the systems audit procedure as it applies to Full Scope accreditation. The audit also included consideration of the results of the most recent audit undertaken in accordance with this Accreditation Protocol and any of the following that have occurred subsequent to that audit including but limited to:

(a) the results of any audits undertaken in accordance with element 19 of the DWQMS V2;

(b) historical responses taken to address corrective action requests made by an Accreditation Body;

(c) the results of any management reviews undertaken in accordance with element 20 of the DWQMS V2; and,

(d) any changes to the documentation and implementation of the QMS.

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, Conservation and Parks (MECP) Drinking Water Quality Management Standard (DWQMS V2).

The audit was also intended to gather the information necessary for Intertek - 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

Confidentiality and Documentation Requirements

The Intertek - SAI Global stores their records and reports to ensure their preservation and confidentiality. Unless required by law, the Intertek - 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 Intertek - SAI Global will provide audit and corrective action reports to the Ontario Ministry of the Environment, Conservation and Parks.

As part of the Intertek - SAI Global Terms, it is necessary for you to notify Intertek - SAI Global of any changes to your Quality Management System that you believe are significant enough to risk non-conformity with DWQMS V2.

Review of any changes

Changes to the company since last audit include: none

EXECUTIVE OVERVIEW

Based on the results of this surveillance system audit the management system remains effectively implemented and meets the requirements of the standard relative to the scope of certification; therefore, a recommendation for continued certification will be submitted.

Recommendation

Based on the results of this audit it has been determined that the management system is effectively implemented and maintained and meets the requirements of the standard relative to the scope of certification identified in this report; therefore, a recommendation for (continued) certification will be submitted to Intertek - SAI Global review team.

Opportunities for Improvement:

The following opportunities for improvement have been identified.

• Review and assign action, where it is required, for Opportunities for Improvement from external audits and internal audits in a timelier fashion..

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

Management System Documentation

The management systems operational plan(s) 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 company 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 M	1. Quality Management System NA/NC		
2. Quality Management System Policy		NA/NC	
3. Commitment and Endorsement		Conforms	
4. Quality M	4. Quality Management System Representative		
5. Document and Records Control		NA/NC	
6. Drinking-\	Nater System	NA/NC	
7. Risk Asse	essment	Conforms	
8. Risk Asse	essment Outcomes	Conforms	
9. Organizat	ional Structure, Roles, Responsibilities and Authorities	NA/NC	
10. Compete	ncies	NA/NC	
11. Personne	el Coverage	NA/NC	
12. Communications		NA/NC	
13. Essential Supplies and Services		NA/NC	
14. Review and Provision of Infrastructure NA/NC		NA/NC	
15. Infrastructure Maintenance, Rehabilitation & Renewal NA/NC		NA/NC	
16. Sampling, Testing and Monitoring NA/NC		NA/NC	
17. Measure	ment & Recording Equipment Calibration and Maintenance	NA/NC	
18. Emergency Management N		NA/NC	
19. Internal Audits Conforms.		Conforms.	
20. Management Review Co		Conforms	
21. Continua	l Improvement	OFI	
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 in a corrective action request has not been remedied. 		
Minor NCR #	by 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 the requirement, but there is an opportunity for improvement.		
Conforms	Conforms to requirement.		
NANC	C 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

3 Commitment and Endorsement	
PW-DW-OP-001-001 (Rev. 9, Jan 2023)	
Details: (personnel interviewed, procedures, activities and records observed)	
Conforms.	

The Operational Plan is endorsed by the Mayor and Director of Operations.

DWQMS Reference:	4 Quality Management System Representative
Client Reference:	PW-DW-OP-001-001 Rev. 9, January 2023)
Details: (personnel interviewed, procedures, activities and records observed)	
Conforms.	

The Engineering Technologist, DWQMS has been appointed as the DWQMS Representative.

DWQMS Reference	7 Risk Assessment
Client Reference:	PW-DW-PRO-004-001 (Rev. 5, May 2018)
	Risk Assessment Outcomes for Bevan Heights Drinking Water System (21-Nov-2024)
	Risk Assessment Outcomes for Niagara-on-the-Lake Drinking Water System (21-Nov-2024)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms

The risk assessment outcomes note the most recent risk assessment was completed as a reassessment on November 21, 2024, for both the Bevan Heights and Niagara-on-the-Lake Drinking Water Systems.

DWQMS Reference:	8 Risk Assessment Outcomes
Client Reference:	Risk Assessment Outcomes for Bevan Heights Drinking Water System (21-Nov-2024)
	Risk Assessment Outcomes for Niagara-on-the-Lake Drinking Water System (21-Nov-2024)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

All required components are listed in the risk assessment outcomes (Bevan Heights and Niagaraon-the-Lake Drinking Water Systems) with low chlorine residual and contamination of water as critical control points.

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DWQMS Reference:	19 Internal Audits
Client Reference:	PW-DW-PRO-15-001 (Rev. 5, July 2018)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

The internal audit was completed by Darlene Suddard on December 9 and 10, 2024, to the DWQMS Standard, with the audit checklist, and auditor qualifications included with the internal audit report.

DWQMS Reference:	20 Management Review
Client Reference:	PW-DW-PRO-016-001(Rev. 6, November 2019)

Details: (personnel interviewed, procedures, activities and records observed)

Conforms.

The most recent management review was held on December 11, 2024, by the Director of Operations, Manager of Public Works, Supervisor Environmental Services, and the Supervisor Engineering.

DWQMS Reference:	21 Continual Improvement
Client Reference:	PW-DW-PRO-017-002 (Rev. 0, August 2018)

Details: (personnel interviewed, procedures, activities and records observed)

Opportunity for Improvement

Review and assign action, where it is required, for Opportunities for Improvement from external audits and internal audits in a timelier fashion.

The external reaccreditation audit report was issued in June 2024, and the internal audit report was issued in December 2024, but the operating authority has yet to consider their Opportunities for Improvement.

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

This report was prepared by:

Jankounos

Ryan Bourner Intertek - Intertek - SAI Global Management Systems Auditor

The audit report is distributed as follows:

- Intertek Intertek SAI Global
- Operating Authority
- Owner
- MECP

Notes

Copies of this report distributed outside the organization must include all pages.