Drinking Water Quality Management System Annual Management Review Meeting –Minutes December 16, 2021, online using "GoToMeeting" app at 2:00 pm

Attendees: Mayor John Woodbury, CAO Dave Milliner, Public Works Manager Jim Ellis, DWQMS Representative Cory Henry and Public Works Admin Lisa Wilson.

Meeting start: December 16, 2021, 2:01 pm

a) Incidents of Regulatory Non-Compliance & Compliance Inspections

A Ministry of Environment Conservation and Parks (MECP) inspection was conducted on October 12, 2021. The Township received the 2021 Inspection Report for the Dundalk Drinking Water System on December 8, 2021. We have not yet received our final inspection rating or risk rating.

Decision- The MECP has not yet sent our final inspection or risk rating. When they are received it will be reported to Council.

Action Required (who/when): Jim will take to Council once results are received. Completed- Jim will take to Council once results are received.

b) Incidents of Adverse Drinking Water

There were 0 incidents of Adverse Drinking Water:

There were 4 exceedances for sodium including:

	01-Mar-21 12-Jul-21	
D3	31.6 mg/l	30 mg/l
D4	30.2 mg/l	28.5 mg/l

Decision- Previously reported as adverse sodium in 2018, reportable in 2023 **Action Required (who/when):** no action required **Completed-** nothing to complete

c) Deviations from Critical Control Limits & Response Actions

There are several deviations from the critical control limits. Every time there is a deviation of a critical control limit there is an investigation to determine the cause and if there is a response required. This does not mean that the water is adverse. Most deviations are from operators performing maintenance duties and pumps turning on and off.

Decision-no decision required **Action Required (who/when):**no action required **Completed-**nothing to complete

d) Efficacy of Risk Assessment Process

On December 13, 2021, the DWQMS team performed a risk assessment for DWQMS Appendix A: Risk Assessment Outcomes. The Risk Assessment was performed from scratch as that is the requirement every three years and was due in 2021.

Decision-no decision required **Action Required (who/when):**no action required **Completed-**nothing to complete

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e) Results of Internal & Third-Party Audits Internal Audits Results:

SOP – 16 Super-chlorinate and Flush was audited in 2021. 3 OFI (Opportunities For Improvement) were found during the audit.

- Remove AWWA for small systems, Section 2 Disinfecting water main
- Add the Water Main Disinfection Procedure, ANSI/AWWA C651-14 Disinfecting Water Mains and ANSI/AWWA C652-11 Disinfection of Water Storage Facilities
- Add related procedures, SOP 6 Isolate and Flush, SOP 12 Reservoir Cleaning, SRP 06 Water Main Breaks

SOP 20 – Valve Exercising was audited in 2021, Updated with Vac Trailer information. 0 OFI's were found

Decision-Complete OFI's Action Required (who/when): Cory Henry Completed- 31/Aug/2022

Third Party Audits Results: NSF-ISR completed an off-site audit August 26, 2021.

There was no non-conformities and no corrective action requests.

There were 6 OFI's (Opportunity for Improvement) offered by auditor James Pang. The OFI's were:

- Commitment and Endorsement Although the current description in section 3.2 of the OP is generally conforming, it may be improved with regards to the representatives of the Owner of the DWS. The Owner as the Township of Southgate is vague.
- Element 6, Drinking Water System The current description of the DWS in section 6 of the OP is generally conforming. However, there exists an opportunity for improvement by simplifying Figures 6-1, 6-2 and 6-3 to show the treatment process flow.
- 3. Document and Record Control Although generally conforming, the management may consider extending the same document control applied to SOP to all other controlled documents such as the Operational Plan. In this case, the practice of updating the revision date.
- 4. Management Review There were two comments made under this sub-section. 1- It was noted that actions for the OFIs from the external audit from Oct 2020 were scheduled to be carried out by Dec 31, 2021. The management concerned should avoid such long delays of more than a year to take action. Therefore, this OFI is for the management to improve their response time to the audit OFIs.

2- It was noted that the record of management review consistently recorded No Decision for No Decision Required. For future management reviews, the choice of words would need to be more accurate.

5. Element 18 – An opportunity exists to clearly define the list of contacts in the event of a spill which can include the following:

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- 1. "Appropriate people" to be contacted
- 2. The "Ministry"
- 3. The Spill Action Centre
- 6. Element 21, Continual Improvement A review of the CAPA tracking log showed that the QMS improvement is well tracked. It was noted that all 13 CAPA were submitted by Cory Henry and all 13 were assigned to him too. The management should consider assigning some of the required action items to other members of the team so that everyone may share responsibility for the QMS improvement.

Decision-Complete OFI's – reference attached Management Review Checklist for detail

Action Required (who/when): Cory Henry/Lisa Wilson/Clerks Department **Completed-** to be completed as referenced in attached checklist.

f) Results of Emergency Response testing

The EOP exercise that was completed in 2021 was for Confined Space Rescue. This was hands on training where we set up the tripod over a manhole and actually lower and raised a staff member to get a real idea of the effort it would take. I also contacted the Owen Sound Fire department to ensure that they still provide trench rescue. I was informed that they do not, nor had any recommendations.

Discussion (all members) on trench rescue – it was recommended by management that due to no viable trench rescue operations locally to speak with Dundalk Fire Chief Derek Malynyk or see if there are good contacts at the Fire Marshalls Office to see what options or training could be taken with Dundalk firefighter staff members to help respond in an effective manner in the event of trench rescue emergency.

Cory offered the option to consider a Vac Truck as an option as this is added safety and you don't damage utilities but is cost prohibitive – perhaps something to keep in mind in the future.

Decision- contact Dundalk Fire Chief to discuss trench rescue training/options. **Action Required (who/when):** Lisa Wilson **Completed-** 31/Jan/2022

g) Operational performance

Regular well maintenance has been performed every month at all three wells, Well D5 was commissioned and online in October 2019.

A valve exercising trailer was purchased and used for the valve exercising program in 2018. We exercised the whole town the last four years, compared to doing the north side one year and the south the following year. After a brief training we were sending one operator with the trailer as opposed to two the previous years. If there was a valve box full of mud or sand the operator was able to vac it our in minutes and continue with the exercising. All the valves are now GPS'd, next year when we get set up the hand-held device will recognize the valve and we will not have to enter the valve information.

For some comparison,

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	2015	2018	2019	2020	2021
Number of valves in Dundalk	100	142	165	177	180
Number of valves exercised	48	122	145	151	151
Hours of labour	45	80	68.5	49.5	91.5
Time per valve	56 mins	39 mins	28 mins	20 mins	36 mins

Note: The time for valve for 2018, 2019, 2020, 2021 would include time for cleaning out the valves, were in 2015 we would have had to hire a vac truck to come and do that work. In 2021 two operators were sent to provide training for new staff member. This training not only includes the operation of the machine, much knowledge of valve locations and sizes. With the Glenelg Subdivision we will be up to 203 valves for next year. With the town continuing to grow rapidly, this vac trailer has been great.

Decision- no decision required **Action Required (who/when):** no action required **Completed-** nothing to complete

h) Raw water supply & drinking water quality trends

Sodium has been above Maximum Allowable Concentration (MAC) as historically trending at both wells 3 and 4. Fluoride is above the MAC at Well 5 and is naturally occurring – this is tested every 5 years and the next date of required testing is in 2024.

Decision- no decision required **Action Required (who/when):** no action required **Completed-** nothing to complete

Follow-up on action items from previous management reviews Attached is the Management Review Checklist – some items are outstanding and will need to be completed.

Decision- complete checklist items **Action Required (who/when):** Cory Henry/Lisa Wilson/Clerks Department **Completed**-to be completed by August 31, 2022

j) Status of management action items identified between review

On January 28, 2021, a new Municipal Drinking Water Licence (MDWL) 110-101 Issue 5 was issued, as well as a new Drinking Water Works Permit (DWWP) 110-201 Issue 5 was issued by the Ministry.

A Drinking Water Works Permit application has been submitted for Ministry approval for the water tower, tendering to follow.

Decision-no decision required **Action Required (who/when):** no action required **Completed-**nothing to complete

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k) Changes that could affect the QMS

There are no changes identified that could affect the QMS.

Decision-no decision required **Action Required (who/when):**no action required **Completed**-nothing to complete

I) Consumer Feedback / Complaints

Since the last DWQMS Management in 2020 there has been 8 resident complaints reported. 3 odour complaints, 2 low pressure complaints, 1 complaint of calcium build up, 1 cloudy water complaint and 1 general safety concern.

December 10, 2020 – 287 Main St W - Low pressure in shower. The only place with low pressure was the shower, making that an internal issue. Homeowner replaced shower cartridge and resolved issue.

December 17, 2020 – 151 Victoria St W – Low pressure. Broken pipe found in old dug well on homeowners side of curb stop. Gave homeowner direction, contacts but no action was taken. Repairs were made by township staff to stop the leak and billed to homeowner.

December 26, 2020 - 418 Braemore St W – odour complaint. This is a dead end. Advised that we were not entering homes due to covid. Followed up on January 6 and odour was gone.

January 29, 2021 – 307 Moody St – Calcium build up on taps and on-demand hot water system. Contacted Flato, only a few on-demand systems installed, no other complaints. Informed that we do not control calcium, suggestions of water softener, hot water tank, and or filters.

March 3, 2021 – 66 Todd Crescent – Odour Complaint. I called and left a message but never received a return call. Jim spoke with homeowner on the same day.

March 18, 2021 – 30 Victoria St W – Odour and calcium complaint. No odour detected, chlorine levels and turbidity were good. Sent samples to the lab on March 29, results were good and delivered to homeowner.

October 5, 2021 - 151 Main St W – General safety concern. The water main was shut off to make a service line repair. When the water was turn back on and they flushed their toilet and made a booming noise as there must have been air in the lines. Black mold and dirty water in the toilet. We investigate and found their water from kitchen sink to be clear, no odour, chlorine residual of 0.95 mg/L

November 17, 2021 – 319 Moody St – Cloudy water. This is currently a dead end. We flushed the hydrant at the end of the street and that seemed to resolve the issue.

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Decision-no decision required **Action Required (who/when):**no action required **Completed-**nothing to complete

m)Resources needed to maintain the QMS

The proposed budget for 2022 is \$5,453.00.

Decision-no decision required **Action Required (who/when):**no action required **Completed-**nothing to complete

n) Results of Infrastructure Review

Buildings:

• Buildings and fences are in good shape.

Storage:

• Well D4 Reservoir was drained, cleaned, disinfected, sampled and put back into service in August 2021

Distribution:

- There have been 8 water main break since the last management review. 4, 4" main breaks and 4, 6" main breaks.
 - December 21, 2020 @ 60 Proton St S (4")
 - January 21, 2021 @ 160 Gold St W (4")
 - January 26, 2021 @ 91 Young St, break on Victoria St W (6")
 - January 27, 2021 @ 108 Main St E, break on Artemesia St N (4")
 - February 14, 2021 @ 251 Victoria St W (6")
 - February 16, 2021 @ 191 Victoria St E (6")
 - April 23, 2021 @ 171 Glenelg St (4")
 - November 8, 2021 @ 243 Victoria St W (6")
- We connected Glenelg Subdivision to our system. 2080m of new water main, with 17 new hydrants and 23 new valves. 80m of water main was replaced on Glenelg St as well. This brings our total to approximately 21,926m of water main in Dundalk.
- All fire hydrants were operated and maintained for 2021, there are approximately 133 hydrants in 2021 compared to 95 in 2018.
- 2, 6" water main valves were replaced. Owen Sound St / Artemesia St N and Grey St and the Railway. One was missing the operating nut and the other leaked when it was closed.

Machinery, Equipment and Software:

• Well 4 Reservoir level milltronics was replaced in December 2020

Decision-no decision required **Action Required (who/when):**no action required **Completed-**nothing to complete **o)** Review of Operational Plan currency, content and updates There was 0 CAR and 13 DCR's for 2021.

Decision-no decision required **Action Required (who/when):**no action required **Completed-**nothing to complete

p) Staff Suggestions

Install standby chlorine pump at D3 – this suggestion has been on the list for a while. Cory said he could connect with Summa and Dewars again to see what this would entail.

Decision-Contact Summa and Dewars **Action Required (who/when):**Cory Henry **Completed**-June 30, 2022

q) Recommendations for improvement of the QMS

We have implemented a CAPA (Corrective Action Preventative Action) system to track and measure our corrective actions, preventative actions and continual improvement. Try delegating some action items to other members of staff to increase involvement in the CAPA system.

Decision-Delegate CAPA action items to other staff members. **Action Required (who/when):** Cory Henry **Completed**-Aug 31, 2021

r) Deficiencies

There are no deficiencies to report at this time.

Decision-no decision required **Action Required (who/when):**no action required **Completed-**nothing to complete

s) Continual Improvement

Staff noticed that some residents are hesitant to allow Southgate staff to enter their homes and properties due to scams. It was suggested that we have the Township of Southgate logo put on work clothing to identify our staff and give residents peace of mind.

Decision-put Southgate logo on work clothing to identify staff **Action Required (who/when):** Lisa Wilson **Completed-** August 31, 2021

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- DO Top Management shall implement and conform to the procedure and shall:
 - a) Ensure that a management review is conducted at least once every calendar year. The last DWQMS Management Review was held on December 08, 2020, minutes attached.
 - b) Consider the results of the management review and identify deficiencies and actions items to address the deficiencies
 - c) Provide a record of any decisions and action items related to the management review including the personnel responsible for delivering the action items and the proposed timelines for their implementation and
 - d) Report the results of the management review, the identified deficiencies, decisions and action items to the Owner

Meeting close: December 16, 2021, at 3:01 pm