

The Township of Mattice - Val Côté

OPERATIONAL PLAN

for the *Mattice Drinking Water 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.

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 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-01 Rev Date: 2024-08-14 Rev No: 1 Pages: 1 of 2
QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS)		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

1. Purpose

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

2. Definitions

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

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

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

- a) Establish policy and objectives, and to achieve those objectives; and
- b) Direct and control an organization with regard to quality.

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

3. Procedure

- 3.1 The Mattice Drinking Water System is owned by the Township of Mattice - Val Côté. OCWA is the contracted Operating Authority for the Mattice Drinking Water System, which includes the Mattice water treatment plant and the Mattice 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 Ontario's DWQMS. The 21 QEMS Procedures within this Operational Plan align with the 21 elements of the DWQMS.

4. Related Documents

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



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QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS)

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager

5. Revision History

Date	Revision #	Reason for Revision
2018-12-17	0	Procedure issued – Information within OP-01 was originally set out in the main body of the Mattice Drinking Water System Operational Plan (revision 3, dated May 18, 2017). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Addition of new wording (s. 3.3) to clarify that the Operational Plan now aligns with the 21 elements of the DWQMS.
2024-08-14	1	Procedure updated definition of DWQMS, added definition of Ministry as the Ontario government ministry responsible for drinking water and environmental legislation to alleviate need for future revisions if/when the Ministry experiences name changes, added “as amended from time to time directly following reference to Ontario’s DWQMS to point to the most current version of the document, removed watermark.

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-02 Rev Date: 2024-08-14 Rev No: 1 Pages: 1 of 2
QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) POLICY		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

1. Purpose

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

2. Definitions

Quality Management System Policy – means the policy described in Element 2 developed for the Subject System or Subject Systems

3. Procedure

3.1 The Ontario Clean Water Agency, its Board of Directors, Officers and entire staff are committed to the principles and objectives set out in our QEMS Policy.

OCWA's Policy is to:

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

Originally issued as Environmental Policy on June 8, 1995

Last revised, approved by OCWA's Board of Directors on April 4, 2024

(This policy is annually reviewed)

3.2 Our Board of Directors, Officers and entire staff will act to ensure the implementation of this Policy and will monitor progress of the Quality & Environmental Management System (QEMS).

3.3 OCWA's QEMS Policy is readily communicated and available to all OCWA personnel, through OCWA's intranet. The Owner and members of the public can access the policy through OCWA's public website (www.ocwa.com). A hardcopy of the QEMS Policy is posted as specified in the OP-05 Document and Records Control procedure.

3.4 Essential suppliers and service providers are advised of OCWA's QEMS Policy as per the OP-13 Essential Supplies and Services procedure.

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QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) POLICY		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

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

4. Related Documents

[Current QEMS Policy \(Posted on OCWA's intranet and internet\)](#)
[QEMS Policy Revision History \(Posted on OCWA's intranet\)](#)
[OP-05 Document and Records Control](#)
[OP-13 Essential Supplies and Services](#)

5. Revision History

Date	Revision #	Reason for Revision
2018-12-17	0	<p>Procedure issued – Section 3.4, 3.5 and 3.6 were added to the information originally set out in the main body of the Mattice Drinking Water System Operational Plan (revision 3, dated May 18, 2017). 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.</p>
2024-08-14	1	<p>The first bullet of the QEMS Policy (approved in 2016) was revised to align with OCWA's updated Mission statement. s. 3.3 and 3.6 were modified to add information/clarify how to access the QEMS Policy and the Policy revision history document.</p>

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-03 Rev Date: 2018 12 17 Rev No: 0 Pages: 1 of 2
COMMITMENT AND ENDORSEMENT		
Reviewed by: A. Swanson, PCT		Approved by: Y. Rondeau, SPC Manager

1. Purpose

To document the endorsement of the Operational Plan for the Mattice Drinking Water System by OCWA Top Management and the Township of Mattice - Val Côté (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 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 representatives of the facility's Top Management and/or both of the Owner's representatives that endorsed the Operational Plan;
3. A modification to the drinking water system processes/components that would require a major change to the description in OP-06 Drinking Water System;
4. The addition of a drinking water subsystem owned by the same Owner to this operational plan.

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
- OP-06 Drinking Water System

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-03 Rev Date: 2018 12 17 Rev No: 0 Pages: 2 of 2
COMMITMENT AND ENDORSEMENT		
Reviewed by: A. Swanson, PCT		Approved by: Y. Rondeau, SPC Manager

5. Revision History

Date	Revision #	Reason for Revision
2018 12 17	0	Procedure issued – Information within OP-03 was originally set out in Appendix A of the Mattice Drinking Water System Operational Plan (revision 0, dated March 12, 2013). 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). Appendix OP-03A includes the Owner and Top Management sign-off section.



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QEMS Doc: OP-03A
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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 Township of Mattice - Val Côté (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 Mattice Drinking Water 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

Claude Rancourt
Senior Operations Manager,
Hearst Cluster

Dec 13/24

Owner Endorsement

Guylaine Coulombe
CAO/Clerk

Sept. 23/24

Eric Nielson
Regional Hub Manager,
Northeastern Ontario Regional Hub

Dec 12/24

Marc Dupuis
Mayor

Sept 24/24

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

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-04 Rev Date: 2018 12 17 Rev No: 0 Pages: 1 of 1
QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) REPRESENTATIVE		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

1. Purpose

To identify and describe the specific roles and responsibilities of the QEMS Representative(s) for the Mattice Drinking Water System.

2. Definitions

None

3. Procedure

3.1 The role of QEMS Representative for the Mattice Drinking Water System is the Process and Compliance Technician (PCT). The Safety, Process and Compliance Manager (or alternate PCT) will act as an alternate QEMS Representative when required.

3.2 The QEMS Representative is responsible for:

- Administering the QEMS for the Mattice 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.

4. Related Documents

None

5. Revision History

Date	Revision #	Reason for Revision
2018 12 17	0	Procedure issued – Information within OP-04 was originally set out in Appendix B of the Mattice Drinking Water System Operational Plan (revision 3, dated March 12, 2013). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Change to responsibilities: Operations Manager no longer considered QEMS Representative and 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).



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QEMS Proc.: OP-05
Rev Date: 2024-08-27
Rev No: 6
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DOCUMENT AND RECORDS CONTROL

Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

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 Mattice Drinking Water 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 revision date. Handwritten records must be legible and permanently rendered in ink or non-erasable marker.
- 3.3 Controls for the Operational Plan include the use of an authorized approval and a header on every page that includes a title, alpha-numeric procedure code, revision date, revision number and page numbers. A revision history is also included at the end of each procedure.

The authorized personnel responsible for the review and approval of this Operational Plan are:

Review QEMS Representative, Operations Supervisor or ORO
Approval SPC Manager or Operations Management

DOCUMENT AND RECORDS CONTROL

Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

The QEMS Representative ensures that updated documents are provided to the above authorized personnel for review or approval prior to issuance.

Authorized personnel authenticate their review/approval of this Operational Plan via email.

3.4 The QEMS Representative 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.

3.5 Access to OCWA's computer network infrastructure is restricted through use of individually-assigned usernames and passwords and local area servers. Network security is maintained by OCWA's Information Technology department through a number of established mechanisms and practices such as daily back-up of files stored on servers, password expiry, limitations on login attempts, multi-factor authentication and policies outlining specific conditions of use.

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

Plant SCADA records are maintained as per Appendix OP-05A and are accessible to all staff when required. SCADA records are stored on a backed-up hard drive. Operators can retrieve data from the SCADA computer which is password protected. Data can also be retrieved from Wonderware. The SCADA system is located in secured, locked buildings with limited authorized access. The building is equipped with alarm system.

3.6 Any employee of the drinking water system may make a verbal or written request for a revision be made to improve an existing internal QEMS document or the preparation of a new document. These requests are to be made to the QEMS Representative and should indicate the reason for the change. The need for new or updated documents may also be identified through the Management Review or system audits.

The QEMS Representative 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

DOCUMENT AND RECORDS CONTROL

Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

QEMS Representatives by OCWA's Corporate Compliance Group through e-mails, memos and/or provincial, regional hub/cluster or facility-level training sessions.

3.7 When a QEMS document is superseded, the hardcopy and the electronic copy of the document (as applicable) are promptly removed from the applicable designated document control locations specified in OP-05A. The QEMS Representative ensures that the hardcopy and electronic copy are disposed of or retained (as appropriate).

3.8 The authorized method for disposal of hardcopy documents and records after the specified retention requirements have been met is shredding.

The authorized method for disposal of electronic documents and records after the specified retention requirements have been met is deleting.

3.9 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
Operational Plan (OP-01 to OP-21 and appendices, including Schedule "C" – Subject System Description Form) FEP Long term forecast of major infrastructure maintenance, rehabilitation and renewal activities Sampling plan/schedule/ calendar	10 years	Director's Direction under SDWA
Internal QEMS Audit Results	10 years	OCWA Requirement
External QEMS Audit Results	10 years	OCWA Requirement
Management Review Documentation	10 years	OCWA Requirement
Documents/records required to demonstrate conformance with the DWQMS (specifically documents/records listed in OP-05A)	3 years*if no specified legislative requirement identified in this table or in the facility's legal instruments *	OCWA Requirement
Log Books or other record-keeping mechanisms	5 years	O. Reg. 128/04
Training Records for water operators and water quality analysts	5 years	O. Reg. 128/04
Operational checks, sampling and testing (e.g., chlorine residuals, turbidity, fluoride, sampling records), microbiological sampling and testing and chain of custodies	2 years	O. Reg. 170/03

DOCUMENT AND RECORDS CONTROL

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Type of Document/Record	Minimum Retention Time	Requirement Reference
Schedule 23 & 24 sampling, chain of custodies and test results	6 years LMR 15 years SMR	O. Reg. 170.03
THM, HAA, nitrates, nitrites and lead program (including pH and alkalinity) sampling, chain of custodies, and test results, Section 11 Annual Reports and Schedule 22 Summary Reports	6 years	O. Reg. 170/03
Sodium sampling, chain of custody and test results and related corrective action records/reports, 60 month fluoride sampling, chain of custody and test results (if the system doesn't fluoridate), Engineering Reports, GUDI/Non-GUDI Reports	15 years	O. Reg. 170/03
Corrective action records/reports for E. Coli, Total Coliforms and bacterial species	2 years	O. Reg. 170/03
Corrective action records/reports for chemical and radiological parameters under SDWA O. Reg. 169/03, pesticides not listed under O. Reg. 169/03 and health-related parameters in an order or approval	6 years LMR 15 years SMR	O. Reg. 170/03
Flow Meter Calibration Records, Analyzer Calibration Reports Maintenance Records/Work Orders	2 years	O. Reg. 170/03
Records required by or created in accordance with the Municipal Drinking Water Licence (MDWL) or Drinking Water Works Permit (DWWP). Except records specifically referenced in O. Reg. 170/03 or otherwise specified in the MDWL or DWWP.	5 years	MDWL
Ministry forms referenced in the DWWP, including Form 1, Form 2, Form 3 and Director Notifications (applies to forms that have been completed by OCWA as the authorized by the owner)	10 years	DWWP

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



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DOCUMENT AND RECORDS CONTROL

Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

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
2010-05-30	0	Procedure issued
2011-09-09	1	Correction of Process Compliance Manager's title; clarification of responsibility and method of maintaining currency of documents (5.4); description of how network security is maintained (5.5); clarification of retention times (5.9); inclusion of the operation plan review (5.10)
2013-03-12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if redundant; updated Table 1 to reflect current locations
2017-05-18	3	Replaced references to PDC with PDM; added the client reports and capital expenditures list to the QEMS documents section of Table 1
2018-12-17	4	QP-01 procedure renamed OP-05. 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. 3.4). Clarified that requests for revisions/new QEMS documents are made to the QEMS Representative (s. 3.6). Moved the former Table 2 (Relevant regulatory and corporate minimum retention periods) to be part of s. 3.9 and expanded on the minimum retention times for documents and records required to demonstrate compliance with legislation. Other minor wording changes.
2022-09-20	5	Procedure updated. Added: clarity to version control requirements to align with the Director's Directions dated May 2021, detail to the approval process for Operational Plan, clarity on how electronic documents are handled. Updated: the table in section 3.9 (clarified minimum retention time requirements for documents/records required to demonstrate conformance with the DWQMS, added forms required by the MDWL and DWWP, including their minimum retention times and requirement reference).



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DOCUMENT AND RECORDS CONTROL

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager

Date	Revision #	Reason for Revision
2024-08-27	6	Procedure updated as follows: added multi factor authentication to 3.5, section 3.9 table revised to include Schedule 23 & 24 records retention times for Large Municipal Residential (LMR) and Small Municipal Resident (SMR) systems, added chain of custody as record for retention for various sampling requirements, lead program clarified to include pH and alkalinity; added GUDI/Non-GUDI Reports, minor wording and type-o's, removed watermark. Replaced Senior Operator with Operations Supervisor.



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QEMS Doc: OP-05A
Rev Date: 2024-08-27
Rev No: 7
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DOCUMENT AND RECORDS CONTROL LOCATIONS

Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

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

Type of Document/Record	Designated Document Control Location (HC = Hardcopy, EC = Electronic)
Internal QEMS Documents	
Confined Space Program	HC - Mattice Water Treatment Plant
Corporate Emergency Response Plan (CERP)	EC - OCWA's SharePoint site (ocwanet.ocwa.com)
Facility Emergency Plan (FEP) Binder (includes Emergency Contact List, Essential Supplies and Services List, Contingency Plans, Site Specific Emergency Procedures and OCWA's Emergency Management Program)	EC - \ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
OCWA's Health & Safety Management System	EC - OCWA's SharePoint site (ocwanet.ocwa.com)
On-call Schedule	EC - Microsoft Outlook Shared Calendar
Operational Plan (OP-01 to OP-21 and appendices, including Schedule "C" – Subject System Description Form)	EC - \ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System HC - Mattice Water Treatment Plant HC - Township of Mattice - Val Côté Municipal Office
ORO Letter	EC - \ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
QEMS Policy	EC - OCWA's SharePoint site (ocwanet.ocwa.com) EC - OCWA's public website (www.ocwa.com) HC - Mattice Water Treatment Plant
Sampling Schedule/Plan/Calendar	EC - \ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System HC - Mattice Water Treatment Plant
Vacation Calendar	EC - Microsoft Outlook Shared Calendar
Internal QEMS Forms (blank)	
Analysis and Action Plan (AAP) Form	EC - \ocwfilereg\NEO Collab\NEO DWQMS\DWQMS
Community Complaint Form	
Contingency Plan Review/Test Summary Form	
Distribution Maintenance and Repair Form	
Environmental Incident Report Form	
Facility Rounds Sheets	
Incidents of Non-Compliance Form	
Instrumentation Calibration/Maintenance Form	
Laboratory Chain of Custody Forms	
Loss of Pressure Incident Form	
Summary of Action Items	
Tailgate Meeting Form	
Watermain Commissioning Form	



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DOCUMENT AND RECORDS CONTROL LOCATIONS

Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

Type of Document/Record	Designated Document Control Location (HC = Hardcopy, EC = Electronic)
External QEMS Documents	
American Water Works Association (AWWA) Standards (as referenced in the DWWP) & Ontario's Watermain Disinfection Procedure	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\NEO - AWWA Standards & WM Disinfection Procedure
Applicable Federal and Provincial Legislation	Provincial online at www.e-laws.gov.on.ca Federal online at www.laws.justice.gc.ca
DWQMS Standard	EC - https://www.ontario.ca
Equipment Operation / Maintenance Manuals	HC - Mattice Water Treatment Plant EC - Internet
Ministry Inspection Reports	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Municipal By-laws	Municipal Office
Municipal Drinking Water Licence (MDWL) / Drinking Water Works Permit (DWWP) / Permit to Take Water (PTTW)	HC - Mattice Water Treatment Plant EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Operations Manual (including standards operating procedures)	HC - Mattice Water Treatment Plant
Operator Certificates (OCWA)	HC - Mattice Water Treatment Plant
External QEMS Forms (blank)	
Adverse Water Quality Incident (AWQI) Form	EC - \\ocwfilereg\NEO Collab\NEO DWQMS EC - https://forms.mgcs.gov.on.ca
Ministry Forms (Form 1,2,3 and Director Notification)	EC - \\ocwfilereg\NEO Collab\NEO DWQMS EC - https://forms.mgcs.gov.on.ca
QEMS Records	
Adverse Water Quality Incident (AWQI) Reports	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Analysis and Action Plan (AAP) Report	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Annual Compliance / Summary Reports for Municipalities	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Audit Reports - External	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Audit Reports - Internal	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Call In/Call Back/Call Out Reports	EC - Workplace Management System (Maximo)
Community Complaint Records	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Contingency Plan Review/Test Summary	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System



OPERATIONAL PLAN

Mattice Drinking Water System

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DOCUMENT AND RECORDS CONTROL LOCATIONS

Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

Type of Document/Record	Designated Document Control Location (HC = Hardcopy, EC = Electronic)
Distribution Maintenance and Repair Records	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Environmental Incident Reports	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Facility Operations Logbook	HC - Mattice Water Treatment Plant (Prior to 2021-05-17) EC - https://ocwa.eriscloud.com/
Facility Rounds Sheets	HC - Mattice Water Treatment Plant
Hydrant Flushing and Valve Exercising Records	HC - Mattice Water Treatment Plant
Incidents of Non-Compliance Records	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Infrastructure Review (Capital Letter & 5 Year Capital/Major Maintenance Recommendations)	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Laboratory Analytical Reports and completed Chain of Custody Forms	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Loss of Pressure Incident Records	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Maintenance & Calibration Records (completed WMS work orders)	EC - Workplace Management System (Maximo) EC - \\ocwfilereg\Public\Northeastern\NEOShared\Hearst Cluster\Calibrations
Management Review Documentation	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Ministry Records (Form 1,2,3 & Director Notification)	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Operational Reports (to the Owner)	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Operator Training Records (OCWA)	EC - OCWA's Training Summary Database
QEMS Communications - External	EC - Microsoft Outlook E-mail and/or \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
QEMS Communications - Internal	EC - Microsoft Outlook E-mail and/or \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
SCADA Records	EC - Outpost5/Wonderware
Summary of Action Items	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System
Tailgate Records	HC - Mattice Water Treatment Plant
Transportation of Dangerous Goods Record	HC - Hearst Water Treatment Plant
Visitor's Logbook	HC - Mattice Water Treatment Plant
Watermain Commissioning Record	EC - \\ocwfilereg\NEO Collab\NEO DWQMS\DWQMS - Mattice Water Treatment System



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DOCUMENT AND RECORDS CONTROL LOCATIONS

Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

Revision History

Date	Revision #	Reason for Revision
2018-12-17	4	Appendix issued; Table was originally included within the Document and Records Control Procedure (QP-01) (revision 3, dated May 18, 2017). Added section for blank external QEMS forms, changed location for Confined Space Program and Operational Plan and changed name of OCWA's Safety Manual to OCWA's Health and Safety Management System and its location.
2019-07-08	5	Updated location of TDG records
2019-08-23	6	Added location of the 'Loss of Pressure Incident' records
2024-08-27	7	Appendix updated with MECP revised to Ministry, updated Corporate Emergency Plan (CERP) name, minor wording, removed watermark, reference to QEMS Reference Manual and OCWA's intranet (replaced with OCWA's SharePoint site). The link to the NEO DWQMS has been updated with the server change, added reference to Visitor Logbook, Hydrant Flushing and Valve Exercising, Watermain Commissioning Form, and added row to header to show who reviewed and approved the document.

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-06 Rev Date: 2024-09-05 Rev No: 2 Pages: 1 of 6
DRINKING WATER SYSTEM		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

1. Purpose

To document the following for the Mattice 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

Owner / Operating Authority

The Mattice Drinking Water System is a communal surface water system that services the community of Mattice. It is owned by the Corporation of the Township of Mattice – Val Côté and consists of a Class 2 water treatment subsystem and a Class 1 water distribution subsystem. The Ontario Clean Water Agency (OCWA) is the accredited

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-06 Rev Date: 2024-09-05 Rev No: 2 Pages: 2 of 6
DRINKING WATER SYSTEM		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

operating authority and is designated as the Overall Responsible Operator for both the water treatment and water distribution facilities.

3.2 Source Water

Raw Water Supply

The raw water source for the Mattice Water Treatment Plant is the Missinaibi River. Within the river is a PE intake crib with two walls (outside and inside wall) having screen ports connecting to a 63.4 m, 250 mm diameter PE intake. The intake pipe draws water from the river in approximately 3 m of water to a 0.8 by 1.85 m intake basin with two stationary screens 0.8 m wide, 1.5 m high with stainless steel 13 mm by 13 mm mesh.

General Characteristics

The raw water source for the treatment plant is the surface water supplied by the Missinaibi River. The results of chemical analyses are consistently below the Ontario Drinking Water Quality Standards

Raw Water Characteristics at Intake (based on 2022 and 2023 data)

Characteristic	2022			2023		
	Minimum	Maximum	Average	Minimum	Maximum	Average
Alkalinity (mg/L)	42	91	69	45	98	73
Colour (TCU)	24	131	69	21	89	53
<i>E. coli</i> (CFU/100 mL)	< 1	55	9	< 2	55	8
Total Coliforms (CFU/100 mL)	< 2	485	135	10	> 1000	130
Temperature (°C)	0.5	23	8.5	0.4	23.5	9.0
Turbidity (NTU)	1.43	13.1	3.28	0.93	15.1	2.20
pH (units)	5.72	7.79	7.10	6.25	7.93	7.19

Common Fluctuations

Raw water turbidity increases during spring runoff and significant rainfall events. As well, water temperature changes significantly from winter to summer. Warm summer temperatures may result in an increase of taste and odour concerns. Coagulation and flocculation chemicals are adjusted accordingly to assist with sedimentation and filtration.

Threats

Potential sources of raw water contamination include the pipeline and fuel spills from boats or planes. Other threats would be the heavy recreational use or low water levels. The highway bridge and the railway bridge are downstream of the low lift building.

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Operational Challenges

Spring and fall turnover is the greatest operational challenge as the turnover creates higher demands on process operations. It can affect the source waters alkalinity, pH, temperature and turbidity. These changes can occur quickly and require adjustments to chemical dosages.

On the rare occasion that a power interruption occurs for a prolonged period of time there is an emergency generator to assist in keeping the plant running until power is restored.

3.3 Treatment System Description

Water Treatment

Filtration is achieved through a dual media (sand and anthracite) system located in each train. The filters are backwashed when a pressure transmitter indicates total headloss, high filtered turbidity values or by elapsed time. The filter backwash wastewater and reject wastewater from the water treatment process are fed into a sludge tank prior to discharge to sanitary sewer. The residue management system consists of a sludge tank and two sludge pumps.

The treated water enters a baffled chlorine contact tank that has a capacity of 808 m³. A flow paced chloramination system consisting of sodium hypochlorite and ammonium sulphate is used. Ammonium sulphate is added at the discharge of the chlorine contact tank in order to produce a combined chlorine residual before entering the distribution system.

Water Storage and Pumping Capabilities

There are two raw water pumps, one duty and one standby. The raw water pumps are both rated as 11.0 L/s and located in the low lift building adjacent to the river

The treatment process is a completely automatic, gravity flow operation consisting of two-process trains with a treatment capacity of 5.3 L/s or 905 m³/day. The treatment process consists of the principles of mixing, coagulation, flocculation, and upflow clarification using settling tubes and high rate filtration.

Emergency Power

One (1) standby diesel generator set rated 130 kW with automatic transfer switch. 1,816 L capacity double walled fuel tank located outside the treatment plant building

3.4 Treatment System Process Flow Chart

Refer to Figure 1 following section 5.

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DRINKING WATER SYSTEM		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

3.5 Description of the Distribution System Components

The Mattice Distribution System has an estimated 249 service connections and serves a population of approximately 600. The system has 25 fire hydrants and 13 dead end locations. The piping of the system consists of mainly PVC piping and some ductile iron.

3.6 Distribution System Components Flow Chart

Refer to Figure 2 following section 5.

4. Related Documents

None

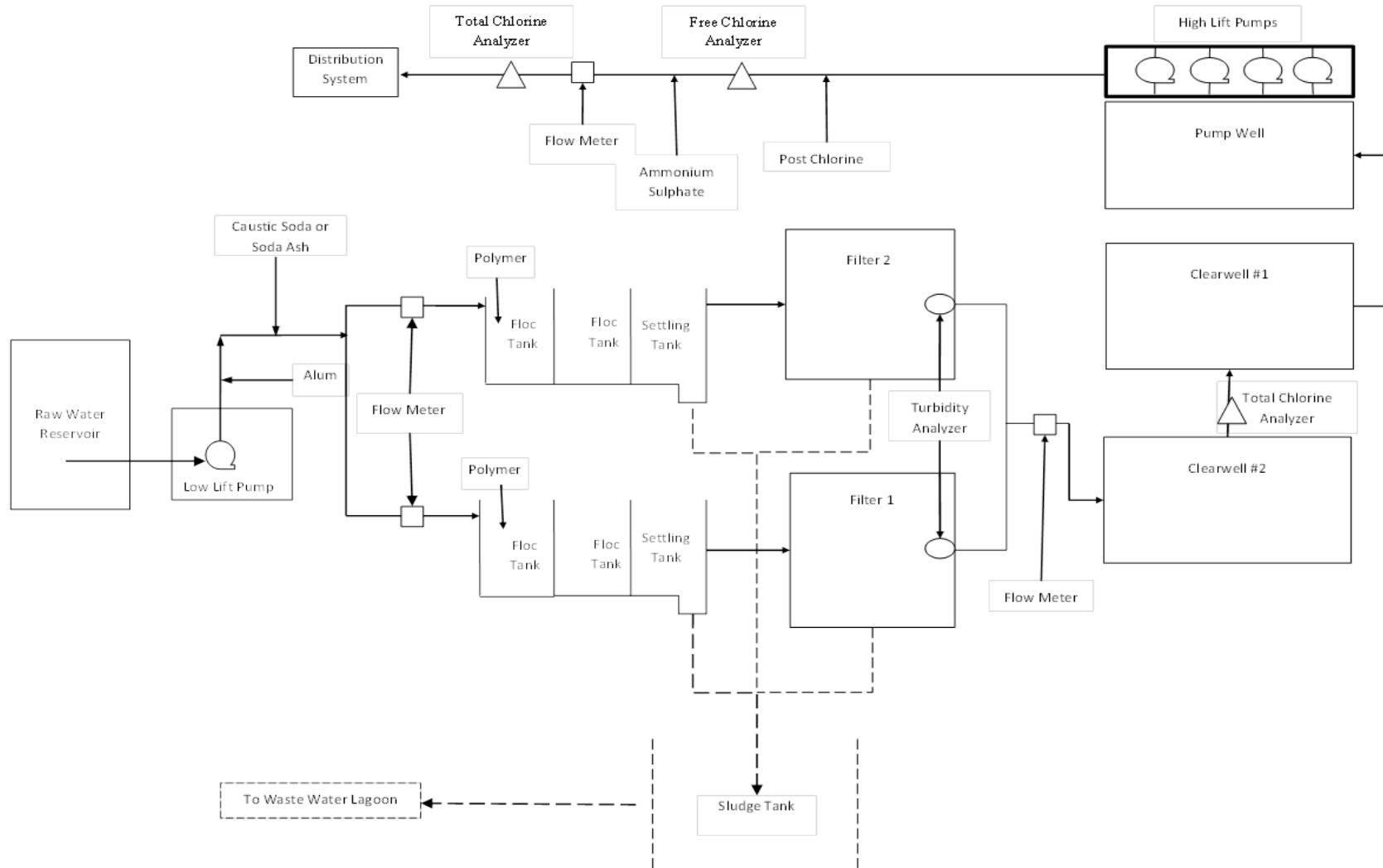
5. Revision History

Date	Revision #	Reason for Revision
2019-01-29	0	Procedure issued – Information within OP-06 (s. 3) was originally set out in Appendix E of the Mattice Drinking Water System Operational Plan (revision 2, dated March 12, 2013). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Updates based on revisions to DWQMS (e.g. 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). Moved order of system description to follow the process (e.g., source water first, then treatment, then distribution). Updated the Raw Water Characteristics table with more current data.
2019-08-23	1	Minor edits
2024-09-05	2	Updated the Raw Water Characteristics table with more current data. Updated template to the new corporate standard, which removed the watermark and included the uncontrolled printed document disclaimer in the footer.

DRINKING WATER SYSTEM

Reviewed by: Process and Compliance Technician

Approved by: Senior Operations Manager

**Figure 1 – Process Flow Diagram (PFD)**

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Mattice Drinking Water System

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DRINKING WATER SYSTEM

Reviewed by: Process and Compliance Technician

Approved by: Senior Operations Manager

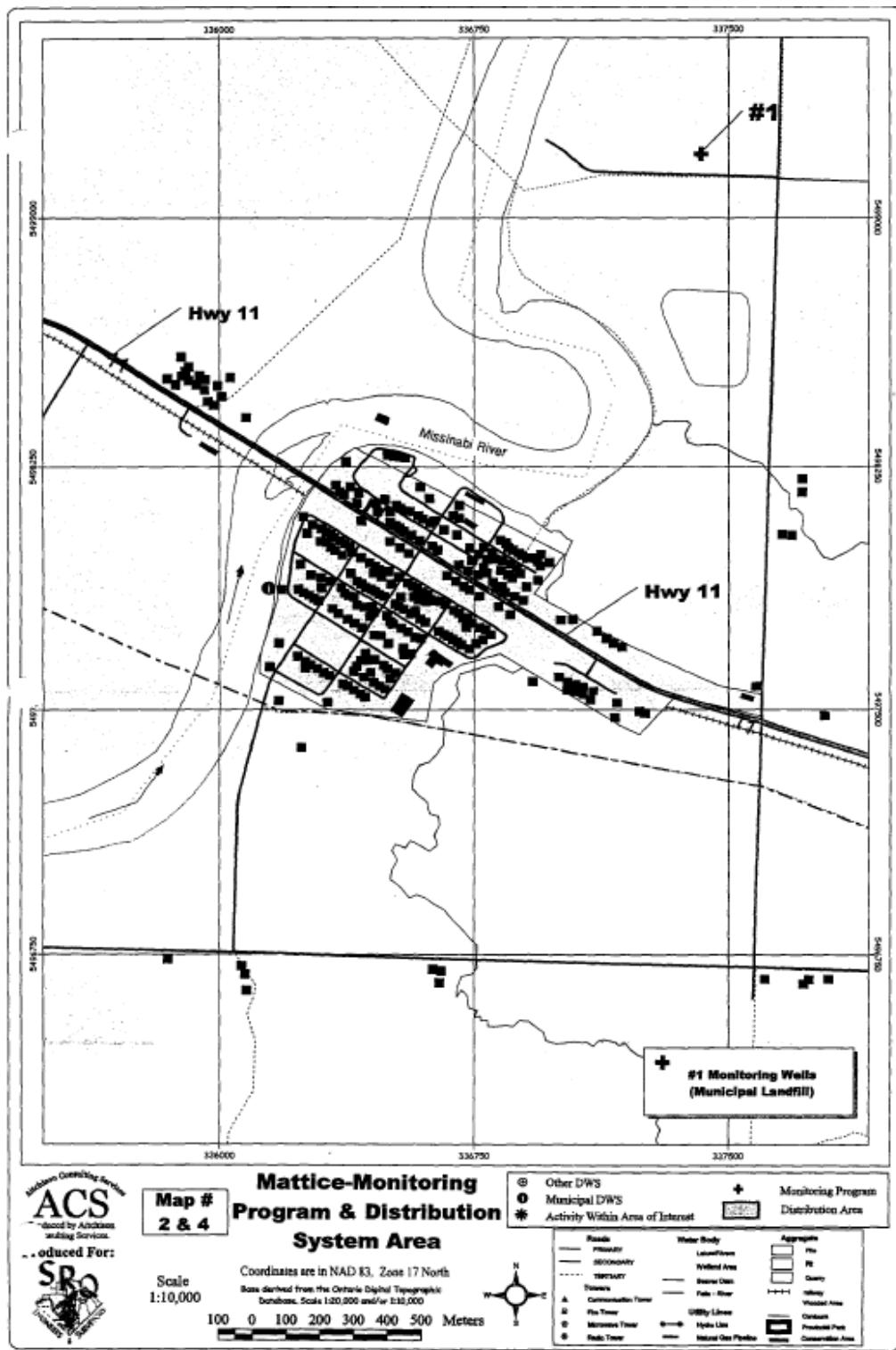


Figure 2 – Distribution Map of Mattice

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-07 Rev Date: 2024-12-31 Rev No: 1 Pages: 1 of 4
RISK ASSESSMENT		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

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 ensures that operations personnel are assigned to conduct a risk assessment at least once every thirty-six months. At a minimum, the Risk Assessment Team must include the QEMS Representative, at least one Operator for the system and at least one member of Operations Management.
- 3.2 The QEMS Representative is responsible for coordinating the risk assessment and ensuring that documents and records related to the risk assessment activities are maintained.

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RISK ASSESSMENT		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

3.3 The Risk Assessment Team performs the risk assessment as follows:

- 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 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 Ministry's "Procedure for Disinfection of Drinking Water in Ontario" (as amended) 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:

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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
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 Ministry or both.

3.4 The outcomes of the risk assessment are documented as per OP-08 Risk Assessment Outcomes.

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RISK ASSESSMENT		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

3.5 At least once every calendar year, the QEMS Representative 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
- Changes to the Ministry document “Potential Hazardous Events for Municipal Residential Drinking Water Systems” (as amended)

4. Related Documents

OP-08 Risk Assessment Outcomes

OP-20 Management Review

Ministry’s “Potential Hazardous Events for Municipal Residential Drinking Water Systems” (as amended)

Ministry’s “Procedure for Disinfection of Drinking Water in Ontario” (as amended)

5. Revision History

Date	Revision #	Reason for Revision
2018-12-17	0	<p>Procedure issued – Information within OP-07 was originally set out in Appendix F QEMS Procedure QP-02 Risk Assessment and Risk Assessment Outcomes (revision 2, dated March 12 2013, 2017). Revised Purpose to reflect element 7 requirements only. Included minimum requirements for the Risk Assessment Team (QEMS Representative, at least one operator for the system and at least one member of Operation Management. 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). Included reference to MECP’s “Potential Hazardous Events for Municipal Residential Drinking Water Systems”. Removed requirements for documenting the outcomes of the risk assessment (now covered in OP-08). Changed annual review to at least once every calendar year and included potential considerations when performing the review.</p>
2024-12-31	1	<p>Procedure updated - Replaced MECP with Ministry (Ministry refers to the Ontario government ministry responsible for drinking water and environmental legislation); Added “(as amended)” directly following any references to Ministry documents to point to the most current version of the document and added the Ministry document “Potential Hazardous Events for Municipal Residential Drinking Water Systems” (as amended) to the list of items that may be considered when performing the annual verification of the currency of the information in the risk assessment.</p>

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-08 Rev Date: 2024-12-31 Rev No: 2 Pages: 1 of 2
RISK ASSESSMENT OUTCOMES		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

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 Representative 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 2 of OP-08A. This includes:
 - Identified potential hazardous events and associated hazards (possible outcomes) for each of the system's activities/process steps;
Note: Hazards listed in the Ministry's "Potential Hazardous Events for Municipal Residential Drinking Water Systems" (as amended) are indicated in the appropriate column using the reference numbers in Table 1 of OP-08A.
 - 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 Critical Control Point (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:
 - Critical Control Limits (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 3 of OP-08A.

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-08 Rev Date: 2024-12-31 Rev No: 2 Pages: 2 of 2
RISK ASSESSMENT OUTCOMES		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

- 3.4 A summary of the results of the annual review/36-month risk assessment is recorded in Table 4 of OP-08A.
- 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

OP-07 Risk Assessment
 OP-08A Summary of Risk Assessment Outcomes
 OP-14 Review and Provision of Infrastructure
 Ministry's "Potential Hazardous Events for Municipal Residential Drinking Water Systems" (as amended)

5. Revision History

Date	Revision #	Reason for Revision
2018-07-17	0	<p>Procedure issued – Information within OP-08 was originally set out in Appendix G the QEMS Procedure QP-02 Risk Assessment and Risk Assessment Outcomes (revision 7, dated April 28, 2017).</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>
2019-08-26	1	Corrected Table numbers
2024-12-31	2	<p>Procedure updated - Replaced MECP with Ministry (Ministry refers to the Ontario government ministry responsible for drinking water and environmental legislation); Added "(as amended)" directly following references to the Ministry's "Potential Hazardous Events for Municipal Residential Drinking Water Systems" to point to the most current version of the document.</p>

SUMMARY OF RISK ASSESSMENT OUTCOMES

Reviewed by: Process and Compliance Technician

Approved by: Senior Operations Manager

Table 1: Potential Hazardous Event/Hazard Reference Numbers (based on the Ministry's "Potential Hazardous Events for Municipal Residential Drinking Water Systems" dated April 2022)

If the hazardous event/hazard is not applicable to this drinking water system (DWS), it will be noted in the first column of this table.

System Type (indicate all that apply to this DWS)		Reference Number	Description of Hazardous Event/Hazard
X	All Systems	1	Long Term Impacts of Climate Change
X	All Systems	2	Water supply shortfall
X	All Systems	3	Extreme weather events (e.g., tornado, ice storm)
X	All Systems	4	Sustained extreme temperatures (e.g., heat wave, deep freeze)
X	All Systems	5	Chemical spill impacting source water
X	All Systems	6	Terrorist and vandalism actions
X	Distribution Systems	7	Sustained pressure loss
X	Distribution Systems	8	Backflow
X	Treatment Systems	9	Sudden changes to raw water characteristics (e.g., turbidity, pH)
X	Treatment Systems	10	Failure of equipment or process associated with primary disinfection (e.g., coagulant dosing system, filters, UV system, chlorination system)
X	Treatment Systems and Distribution Systems providing secondary disinfection	11	Failure of equipment or process associated with secondary disinfection (e.g., chlorination equipment, chloramination equipment)
X	Treatment Systems using Surface Water	12	Algal blooms
X	All Systems	13	Cybersecurity threats

SUMMARY OF RISK ASSESSMENT OUTCOMES

Reviewed by: Process and Compliance Technician

Approved by: Senior Operations Manager

Table 2: Risk Assessment Table

Note: Processes referred to in OP-07 Risk Assessment must be identified as mandatory Critical Control Points (CCPs) as applicable. Mandatory CCPs are not required to be ranked.

Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
Source/Intake	Spill of chemical material into Missinaibi River (Pesticides, water crafts)	Contamination of source water	Monitor and sample Site specific procedures for Off-site Chemical/Fuel Spill, Contaminated Raw Water	2, 5, 6, 9	2	3	6	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Source/Intake	Breakage/blockage of intake pipe	Loss of water supply	None – staff would take appropriate response measures (set pump into river and pump into raw water well)	2, 7	2	2	4	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Source/Intake	Spring/fall turnover	Increased demand on process operations such as chemical optimization for changes in pH, alkalinity, temperature and turbidity.	Staff would keep higher alkalinity and make appropriate operational changes Turbidity alarms on filter turbidity In-house testing for colour, turbidity and alum dosage	1, 9, 8	3	2	8	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Source/Intake	Harmful Algal Bloom (Blue-green algae)	Contamination of source water	Visual inspections water near intake Monitor and sample Site specific procedure for Algal Bloom Monitoring	1, 9, 12	1	4	4	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No



OPERATIONAL PLAN

Mattice Drinking Water System

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SUMMARY OF RISK ASSESSMENT OUTCOMES

Reviewed by: Process and Compliance Technician

Approved by: Senior Operations Manager

Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
Source/Intake	Low river levels / drought	Loss of water supply	There is a dam in place to create a reservoir in the river and there is an emergency well SOP in place regarding low river level	1, 2, 3, 4, 9	1	3	3	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Low Lift Pumps	Low lift pump failures	Loss of water supply	Redundancy (2 pumps), Scheduled maintenance activities Back-up generator for loss of power situations, Alarms for pump fault, power loss and low clearwell level Procedure for Low Lift Pump Failure	2, 7	3	1	3	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Filtration Process (includes flocculation, coagulation, dual media gravity filters)	Aluminum Sulphate feed pump failure	Ineffective removal of pathogens (minimum treatment requirements not met)	Redundancy (1 back-up pump) Operator inspections (tank levels, calculate dosage), Scheduled maintenance activities, Alarms - pH and turbidity (plant shutdown) Procedure for Aluminum Sulphate Pump Failure	10				<input checked="" type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input type="checkbox"/> No
Filtration Process (continued)	Soda ash feed pump failure (pre-treatment)	Lowered pH, ineffective coagulation process, potential for increased turbidity and/or AWQI	Redundancy 1 duty (back up available within area), Operator inspections (tank levels, calculate dosage), Scheduled maintenance activities, pH alarm (plant shut down) On-line monitoring of floc pH	10				<input checked="" type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input type="checkbox"/> No

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Approved by: Senior Operations Manager

Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
Filtration Process (continued)	Polymer feed pump failure	Increased turbidity, ineffective removal of pathogens	Redundancy 1 duty / 1 standby pump Operator inspections (tank levels, calculate dosage) Scheduled maintenance activities	10	2	2	4	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Filtration Process (continued)	Filter breakthrough	Increased turbidity, ineffective removal of pathogens, potential for AWQI	On-line monitoring of filter effluent turbidity, redundancy (2 filters), regular backwashes, scheduled maintenance activities, Alarm on high turbidity, plant shutdown on high turbidity, Procedure for Reporting an Adverse Water Quality	9				<input checked="" type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input type="checkbox"/> No
Filtration Process (continued)	Backwash system failure	Increased turbidity, ineffective removal of pathogens, potential for loss of treated water supply	Scheduled maintenance activities, replacement pumps available for backwashing Procedure for Backwash Failure (Filters) Alarms - turbidity	2, 7	3	3	9	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Filtration Process (continued)	Turbidity meter failure	Unknown turbidity levels, potential for AWQI	Filter redundancy (take filter out of service until analyzer replaced/repaired), scheduled maintenance activities, calibrations, in-house readings, 15 minute operator readings, operator inspections, spare analyzer available in Hub	2, 7				<input checked="" type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input type="checkbox"/> No

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Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
Clearwells	Low level	Inadequate contact time for primary disinfection Inadequate treated water supply	Schedule maintenance and inspection activities, low level clearwell alarm, town ordered water conservation or ban Procedure for Water Supply Shortage, Low Clearwell Level Alarm and Reservoir	2, 7, 11	3	3	9	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Clearwells	Clearwell out of service for repair, maintenance	Affects contact time for primary disinfection	Clearwell and reservoir with isolation valves, increase chlorine dosage into clearwell, schedule controlled maintenance plan, ask town to order water conservation or ban Procedure for Water Supply Shortage, Clearwell Out of Service	2, 7, 11	2	3	6	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Sodium Hypochlorite System (for primary disinfection)	Chemical feed pump failure	Loss of disinfection, Low chlorine residual, Inadequate inactivation of pathogens, Potential for AWQI	On-line monitoring with alarms, In-house residual testing and dosage calculations, Redundancy - Back-up pump, Scheduled maintenance activities, Procedures for Chlorine Pump Failure, Chlorine Contact Time, Low or High Chlorine Residual in Treated Water, Reporting an Adverse Water Quality, Contingency Plan for Unsafe Water	2, 7, 10, 11				<input checked="" type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input type="checkbox"/> No

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Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
Sodium Hypochlorite System (for primary disinfection)	Analyzer failure	Unknown chlorine residual levels, Potential for AWQI	Alarm - low level, analyzer failure In-house residual testing; and on-line monitoring Operator 5 minute testing Scheduled maintenance activities; Back-up analyzers within Hub; Procedures for Chlorine Contact Time; Low or High Chlorine Residual in Treated Water; Reporting an Adverse Water Quality; Contingency Plan for Unsafe Water;	10				<input checked="" type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input type="checkbox"/> No
Sodium Hypochlorite System (for primary disinfection)	Low supply of sodium hypochlorite (day tank)	Inadequate disinfection, Potential for AWQI	Low chlorine residual alarms, Operator checks, on-line monitoring Procedures for Chlorine Contact Time, Low or High Chlorine Residual in Treated Water, Reporting an Adverse Water Quality Contingency Plan for Unsafe Water	10				<input checked="" type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input type="checkbox"/> No
Sodium Hypochlorite System (for primary disinfection)	Low supply of sodium hypochlorite (Storage)	Inadequate disinfection, Potential for AWQI	Chemical available within hub Alternate suppliers available, refer to ESS list	10				<input checked="" type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input type="checkbox"/> No

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Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
High Lift	High lift pump failures	Low pressure in distribution system, Possible contamination due to backflow	Redundancy (1 primary pump, 2 secondary pumps and a fire pump, automatic switchover); On-line monitoring of discharge pressure, Low pressure alarm set point is 30 psi, Pump Failure alarm; fire pump; Automatic pressure assist, Sampling and monitoring; Flushing; Scheduled maintenance activities, operational control; Procedures for High Lift Pump Failure; Low Pressure Events in the Distribution System	2, 7, 11	4	2	8	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Ammonium Sulphate	Chemical Pump failure	Would no longer have a combined residual in the distribution system	Routinely monitored by OCWA staff; Spare pump available; Redundancy (2 pumps, manual switchover) Would still have a free residual in the distribution Total chlorine analyzer would likely detect the instability of the residual	11	3	3	9	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No



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Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
Secondary Disinfection	Loss of residual in distribution	Failure to control biofilm and pathogens (long-term), AWQI	Continuous on-line monitoring of chlorine residual going into the distribution system, System-wide residual testing in distribution system, Regularly scheduled maintenance in distribution system, Alarms for low/high chlorine residuals in water entering distribution system, Procedure for Reporting Adverse Water Quality	11				<input checked="" type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input type="checkbox"/> No
Water Treatment System	Power failure	Loss of treated water supply	Back-up diesel generator, Scheduled maintenance activities for back-up generator, Procedure for Power Failure of Long Duration, Standby Power Failure Portable genset available within hub	2, 3, 6, 7	4	1	4	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Water Treatment System	Vandalism/terrorism	Contamination of the water supply, Damage to critical equipment	Locked (water plant, low lift station), Signage, Visited routinely by OCWA staff, Site specific procedure for Vandalism or Suspected Unauthorized Entry. Intrusion alarm	2, 5, 6, 7, 9, 10, 11, 13	2	4	8	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No

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Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
Water Treatment System	Cybersecurity threats (Wonderware and SCADA)	Loss of system process visibility for operators (e.g., unable to monitor treatment processes) Interruption of data recording leading to a loss of critical/compliance data inability to remotely control processes and/or loss of automatic control installation of malicious programs like ransomware, which can disable business enterprise until money is paid Loss of data (stolen or maliciously deleted)	Implementing Identity and Access Management throughout the account management lifecycle. Privileges are granted to users with two principles – need to know and least privileges. Users are assigned only the privileges they need to perform their job. Employing default to fail secure. The application or system failure will cause little or no harm to other systems. Data will not fall into the wrong hands. Applying multiple layers of defense including: o Intrusion detection systems constantly monitoring traffic flow (borders) o Firewalls that provide real-time filtering and blocking (walls) o Cryptography and layered authentication (zones) o Certified professionals ensuring system integrity (gatekeepers) Constant monitoring and tracking for quick and effective response to attacks Perform routine vulnerability scans and threat assessments Carry out periodic cyber security audits and risk compliance checks	13	2	4	8	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No



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Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
Water Treatment System	PLC Failure	Plant shutdown, No water, Loss of Pressure	Customer complaints, On-line monitoring, Procedure for Reporting Adverse Water Quality	2, 7, 10, 11	3	3	9	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Distribution System	Adverse Water Quality Result as described in O. Reg. 170/03	Potential for unsafe drinking water	Procedures for Reporting an Adverse Water Quality; Sampling Schedule	2, 10, 11	3	4	12	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No – does not meet all criteria outlined in section 3.37 of OP-07 Risk Assessment
Distribution System	Main Break	Contamination, Loss of supply	Upstream/downstream sampling, training, AWWA standards and Ontario's Watermain Disinfection Procedure, Alarms for low pressure or high flow,	2, 4, 7, 10, 11	3	3	9	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Distribution System	Cross connection/ Backflow, siphonage	Contamination	Design standards; respond to complaint, bacti sampling	8	2	3	6	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Distribution System	Inadequate supply from plant	Loss of pressure, supply	Back up pumps, community complaints, alarms (fire pump, loss of pressure)	2, 7, 10, 11	3	3	9	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No



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Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
Distribution System	Repair procedures	Contamination	AWWA standards and Ontario's Watermain Disinfection Procedure, Staff training	8	3	3	9	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Distribution System	Residential service leak	Higher demand	Consumer complaints On-line monitoring Response and isolation	4, 8	3	1	3	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Distribution System	Frozen Water Services	Loss of pressure, Loss of supply	Consumer notification/complaints	2, 3, 4, 7	3	2	6	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No
Distribution System	Chlorine residual high	Public health	Alarms, monitoring, on call system, Enhanced monitoring program	10				<input checked="" type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input type="checkbox"/> No
Entire System	Critical shortage of staff	Reduced operation	Emergency response plans, Contractors, Outside staff		4	2	8	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No



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Activity/ Process Step	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Ministry's Potential Hazardous Event/Hazard Reference # (see Table 1)	Likelihood	Consequence	Risk Value	CCP?
Entire System	Pandemic	Shortage of staff Supply shortages Loss of sample locations	CP for Critical Shortage of Staff Staff training and PPE OCWA's Emergency Operations Center (EOC) Staff isolation/ remote work done where possible Alternate suppliers available, refer to ESS list		2	3	6	<input type="checkbox"/> Yes – Mandatory <input type="checkbox"/> Yes – Additional <input checked="" type="checkbox"/> No

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Table 3: Identified Critical Control Points (CCPs)

CCP	Critical Control Limits	Monitoring Procedures	Response, Reporting and Recording Procedures
Filtration Process	<p>Loss of alum addition Process pH alarm Low Alarm: no lower than 5.1 High Alarm: no higher than 7</p> <p>Filter Effluent Turbidity Alarm High set point no higher than 1.0 NTU (Automatic plant shutdown when turbidity reaches 1.0 NTU)</p>	<ul style="list-style-type: none"> SCADA (continuous online analyzers) Routine operator checks including dosage calculations Redundancy (2 filters) Review trends (charts) and sign-off as per O. Reg. 170/03 	Refer to site specific procedures for: <ul style="list-style-type: none"> Reporting an Adverse Water Quality
Sodium Hypochlorite System (Chemical Feed)	<p>Chlorine Residual Alarms – Plant</p> <p><u>Free Chlorine Set Points:</u> Low Alarm: no lower than 0.30 mg/L High Alarm: no higher than 4.0 mg/L</p> <p><u>Total Chlorine Set Point:</u> Low Alarm: no lower than 0.30 mg/L High Alarm: no higher than 3.0 mg/L</p>	<ul style="list-style-type: none"> SCADA (continuous online analyzers), Regular daily operator checks via remote monitoring system, On-site checks routinely by OCWA staff Trend review and sign-off as per O. Reg. 170/03. 	Refer to site specific procedures for: <ul style="list-style-type: none"> Reporting an Adverse Water Quality Chlorine Contact Time Sodium Hypochlorite Pump Failure
Loss of Distribution Residual	<p>Combined Chlorine Residual - Distribution</p> <p>Operational Low = 1.0 mg/L Regulatory Low = 0.25 mg/L (and free residual <0.05 mg/L)</p>	<ul style="list-style-type: none"> Distribution chlorine residuals monitored as per O. Reg. 170/03 Monitor total chlorine residual leaving the plant 	Refer to site specific procedures for: <ul style="list-style-type: none"> Reporting an Adverse Water Quality
High Distribution Residual	<p>Combined Chlorine Residual - Distribution</p> <p>Operational High = 2.5 mg/L Regulatory High = 3.0 mg/L</p>	<ul style="list-style-type: none"> Distribution chlorine residuals monitored as per O. Reg. 170/03 Monitor total chlorine residual leaving the plant 	Refer to site specific procedures for: <ul style="list-style-type: none"> Reporting an Adverse Water Quality

Note: Standard Operating Procedures (SOPs) referenced in Tables 1 and 2 are controlled as per OP-05 Document and Records Control.

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Table 4: Record of Annual Review/36-Month Risk Assessment

The Drinking Water Quality Management Standard (DWQMS) requires that the currency of the information and the validity of the assumptions used in the risk assessment be verified at least once every calendar year. In addition, the risk assessment must be conducted at least once every thirty-six months.

Date of Activity	Type of Activity	Participants	Summary of Results
2010-05-30	Initial Risk Assessment	André Doucet, Cluster Manager Denis Dolbec, Senior Operator/Mechanic April Swanson, PCT	Results were tabulated in Table 2 of the original operational plan
2011-06-20	Review	Tony Janssen, Operations Manager Eric Nielson, Process Compliance Manager André Doucet, Cluster Manager April Swanson, PCT	Accepted the original risk assessment as current and accurate.
2012-12-02	Review	André Doucet, Cluster Manager April Swanson, PCT	Accepted the original risk assessment as current and accurate.
2013-06-17	Risk Assessment	Denis Dolbec, Operations Manager April Swanson, PCT	Results were tabulated above in Table 2. Main changes are: The clarification of the wording for the alarm set points and secondary disinfection levels should have been free and combined
2014-09-24	Review	Denis Dolbec, Operations Manager April Swanson, PCT	Accepted the risk assessment as current and accurate.
2015-09-23	Review	Denis Dolbec, Operations Manager April Swanson, PCT	Accepted the risk assessment as current and accurate.
2016-04-29	Risk Assessment	Serge Audet, Operator/ORO April Swanson, PCT	Results were tabulated above in Table 2. Main changes are: The addition of PLC failure as a potential hazard
2017-04-28	Review	Michel Plourde, Operator April Swanson, PCT	Corrected the number of sodium hydroxide pumps, polymer pumps and high lift pumps;
2018-04-27	Review	Denis Dolbec, Operations Manager April Swanson, PCT	Accepted the risk assessment as current and accurate.
2019-04-16	Risk Assessment	Michel Plourde, Operator Phil Dillon, Operator April Swanson, PCT Claude Rancourt, Senior Operations Manager	Included the Ministry's Potential Hazardous Events for Municipal Residential Drinking Water Systems



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Date of Activity	Type of Activity	Participants	Summary of Results
2020-11-26	Review	Claude Rancourt, Senior Operations Manager April Swanson, PCT Operators: Michel Plourde, Phil Dillon, Serge Audet, Elise Burns, Michael Case	Add the Ministry's Potential Hazardous Event of Blue Green Algae Bloom
2021-10-28	Review	Claude Rancourt, Senior Operations Manager April Swanson, PCT Operators: Serge Audet, Michael Case	Minor changes to rankings, no changes to critical control points
2022-09-08	Risk Assessment	April Swanson (PCT), Claude Rancourt (Senior Operations Manager), Michel Plourde (Team Lead), Phil Dillon (Operator), Michael Case (Operator)	Added cyber security threat to the Ministry's list of potential threats and a description of a hazardous event. Also added pandemic as a description of a hazardous event
2023-12-07	Review	Michael Case (PCT), Claude Rancourt (Senior Operations Manager), Michel Plourde (Operations Supervisor), Philipe Dillon (Team Lead), Serge Audet (Team Lead), Kiel Ladouceur (Operator), Natalie Bureau (Operator)	Reviewed with all staff. Minor edits to some existing control measures and risk values. Removed references to QEMS QP documents and updated to DWQMS OP
2024-12-20	Risk Assessment	Michael Case (PCT), Claude Rancourt (Senior Operations Manager), Michel Plourde (Operations Supervisor)	Updated to the corporate template. Added frozen water services and low river elevation/drought to Table 2. Updated Table 3, and added an operation value to the critical control points for distribution residuals. Minor edits to some existing control measures and risk values.



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Revision History

Date	Revision #	Reason for Revision
2010-05-30	0	Initial risk assessment conducted
2011-09-09	1	Template revised to include 'Record of Annual Review 36-Month Risk Assessment' (Table 3)
2013-03-12	2	Updated Table 3
2013-07-10	3	Redo risk assessment (June 17, 2013)
2014-09-24	4	Updated Table 3 to include most recent review
2015-09-23	5	Updated Table 3 to include the most recent review
2016-04-29	6	Redo risk assessment
2017-04-28	7	Updated Table 3
2018-04-27	8	Summary of Risk Assessment Outcomes assigned document number (OP-08A); Table 1 updated to include results of the 36-month risk assessment that took place on June 8, 2018.
2019-04-16	9	Added table to reference MOECC's "Potential Hazardous Events for Municipal Residential Drinking Water Systems"; "Hazardous Events for Municipal Residential Drinking Water Systems"
2020-11-26	10	Updated Record of Annual Review/36-Month Risk Assessment table
2021-10-28	11	Updated Record of Annual Review/36-Month Risk Assessment table
2022-09-08	12	Added cyber security threat to the Ministry's list of potential threats and a description of a hazardous event. Also added pandemic as a description of a hazardous event. CPP table updated to include process pH alarm as an indicator of loss of alum addition.
2023-12-07	13	Updated Record of Annual Review/36-Month Risk Assessment table and minor edits as summarized in Table 4
2024-12-31	14	Updated Record of Annual Review/36-Month Risk Assessment table and minor edits as summarized in Table 4

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1. Purpose

To document the following for the Mattice 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 Mattice Drinking Water System is owned by the Corporation of the Township of Mattice - Val Côté and is represented by the Mayor, CAO/Clerk and Council.

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

3.2 Top Management

Top Management for the Mattice Drinking Water System consists of:

- Operations Management – Hearst Cluster
- Regional Hub Manager – Northeastern Ontario Regional Hub
- Safety, Process & Compliance Manager – Northeastern Ontario Regional Hub

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 Representative (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"> • 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 • Review and approve the QEMS Policy
Senior Leadership Team (SLT)	<ul style="list-style-type: none"> • 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 • Approve corporate QEMS programs and procedures
Corporate Compliance	<ul style="list-style-type: none"> • Manage the QEMS Policy and corporate QEMS programs and procedures • Provide support for the local implementation of the QEMS • Monitor and report on QEMS performance and any need for improvement to SLT • Consult with the Ministry and other regulators and provide compliance support/guidance on applicable legislative, regulatory and policy requirements • Manage contract with OCWA's DWQMS accreditation body

3.4 Regional Hub Roles, Responsibilities and Authorities

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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 Regional Hub

Role/Position	Responsibilities and Authorities
All Operations Personnel	<ul style="list-style-type: none"> Perform duties in compliance with applicable legislative and regulatory requirements Be familiar with the QEMS Policy and work in accordance with QEMS programs and procedures Maintain operator certification (as required) Attend/participate in training relevant to their duties under the QEMS Document all operational activities Identify potential hazards at their facility that could affect the environmental and/or public health and report to Operations Management Report and act on all operational incidents Recommend changes to improve the QEMS
Regional Hub Manager (Top Management)	<ul style="list-style-type: none"> Oversee the administration and delivery of contractual water/wastewater services on a Regional Hub level Fulfill role of Top Management Ensure corporate QEMS programs and procedures are implemented consistently throughout the Regional Hub Manage the planning of training programs for Regional Hub Report to VP of Operations/SLT on the regional performance of the QEMS and any need for Agency-wide improvement
Operations Management (Top Management)	<ul style="list-style-type: none"> Manage the day-to-day operations and maintenance of their assigned facilities and supervise facility staff Fulfill role of Top Management Ensure corporate and site-specific QEMS programs and procedures are implemented at their assigned facilities Determine necessary action and assign resources in response to operational issues Report to the Regional Hub Manager on facility operational performance Ensure operational training is provided for the cluster (in consultation with the SPC Manager as required)

ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager

Role/Position	Responsibilities and Authorities
	<ul style="list-style-type: none"> Act as Overall Responsible Operator (ORO) when required (based on certification). Refer to the ORO Letter.
Safety, Process & Compliance (SPC) Manager (Top Management)	<ul style="list-style-type: none"> Supervise facility compliance staff and provide technical and program support to the Regional Hub related to process control and compliant operations Fulfill role of Top Management Ensure corporate/regional QEMS programs and procedures are implemented consistently throughout the Regional Hub Assist in the development of site-specific operational procedures as required Ensure training on applicable legislative and regulatory requirements and the QEMS is provided for the Regional Hub (in consultation with Operations Management as required) Monitor and report to the Regional Hub Manager and Operations Management on the compliance status and QEMS performance within their Regional Hub and any need for improvement Act as alternate QEMS Representative (when required) May act as Operator-in-Charge (OIC) and/or ORO when required (based on certification). Refer to the ORO Letter.
Process & Compliance Technician (PCT) (QEMS Representative)	<ul style="list-style-type: none"> Implement, monitor and support corporate programs relating to environmental compliance and support management by evaluating and implementing process control systems at their assigned facilities Fulfill role of QEMS Representative (OP-04) Monitor, evaluate and report on compliance/quality status of their assigned facilities Implement facility-specific QEMS programs and procedures consistently at their assigned facilities Participate in audits and inspections and assist in developing, implementing and monitoring action items to respond to findings Report to the SPC Manager on QEMS implementation and identify the need for additional/improved processes and procedures at the Regional Hub/cluster/facility level (in consultation with the Operations Management as required) Communicate to Owners on facility compliance and DWQMS accreditation as directed Deliver/participate in/coordinate training including applicable legislative and regulatory requirements and the QEMS

ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager

Role/Position	Responsibilities and Authorities
<p>Certified Operator</p> <p>May include the following positions:</p> <ul style="list-style-type: none"> • Operations Supervisor Water & Wastewater • Water & Wastewater Lead • Senior Water & Wastewater Operator • Water & Wastewater Operator • Water & Wastewater Operator-In-Training (OIT)] 	<ul style="list-style-type: none"> • Perform duties outlined under Operations Personnel • Monitor, maintain and operate facilities in accordance with applicable regulations, approvals and established operating procedures • Collect samples and perform laboratory tests and equipment calibrations as required • Regularly inspect operating equipment, perform routine preventive maintenance and repairs and prepare and complete work orders as assigned • Ensure records of adjustments made to the process under their responsibility, equipment operating status during their shifts and any departures from normal operations observed and actions taken are maintained within facility logs/record keeping mechanisms (as per O. Reg. 128) • Participate in facility inspections and audits • May act as OIC and/or ORO when required (based on certification). Refer to the ORO Letter. <p>NOTE: OITs cannot act as OIC and/or ORO. OITs perform the above duties under the direction of the OIC/ORO and as assigned by Operations Management or designate.</p>
<p>Instrumentation Technician</p> <p>May include the following positions:</p> <ul style="list-style-type: none"> • Utility Plant Instrument Technician (UPIT) • Instrumentation Technician 	<ul style="list-style-type: none"> • Provide advice and technical expertise on the services required for process control and automation systems • Discuss and advise on detailed system and programming requirements, modify existing and new software in response to plant requests, analyze and resolve problems/error conditions, document changes/modifications and configure, install and support related software, hardware and network for such systems • Conduct inspections of the process control and automation systems to validate that all is operating within established parameters as requested • Install and commission new electrical/electronic equipment and automation systems • May fulfill role of Certified Operator as required (based on certification).

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

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-09 Rev Date: 2024-08-15 Rev No: 2 Pages: 6 of 6
ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

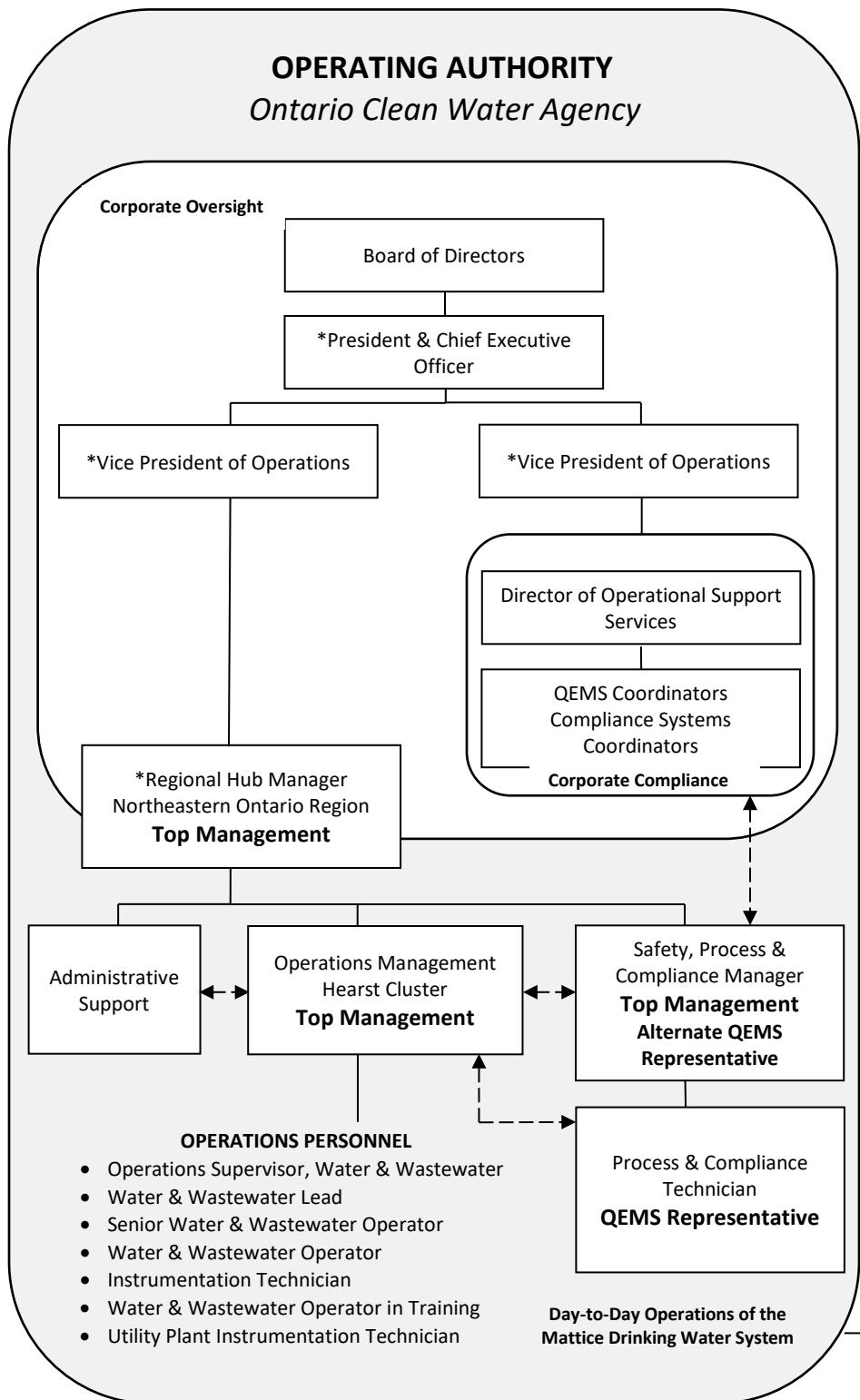
OCWA Position Descriptions/Job Specifications

5. Revision History

Date	Revision #	Reason for Revision
2018-12-17	0	Procedure issued – Information within OP-09 (s. 3) was originally set out in Appendix H of the Mattice Drinking Water System Operational Plan (revision 2, dated March 12, 2013). 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’. 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. Re-worded QEMS Roles, Responsibilities and Authorities for each position. Added QEMS Roles, Responsibilities and Authorities for Mechanic and Data Clerk..
2019-08-26	1	Replaced ‘Senior Operator/Mechanic’ with ‘Team Lead’, removed the position of ‘Mechanic’ and ‘Data Clerk’
2024-08-15	2	Procedure updated with revisions to Table 9-2 as follows: Role/Position updated to clarify roles are performed by multiple positions, position titles updated, note added regarding OITs operating limitations. Removed position/roles no longer applicable. Additional revisions include replaced MOECC with Ministry, minor rewording and type-o’s, removed watermark.

ORGANIZATIONAL STRUCTURE

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager



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

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

OWNER
 The Township
 Mattice - Val
 Côté



Ontario Clean Water Agency

OPERATIONAL PLAN

Mattice Drinking Water System

QEMS Doc.: OP-09A
Rev Date: 2024-08-15
Rev No: 6
Pages: 2 of 2

ORGANIZATIONAL STRUCTURE

Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

Revision History

Date	Revision #	Reason for Revision
2010-03-31	0	Organizational Chart issued.
2011-09-09	1	Added position of Process and Compliance Manager
2013-03-12	2	Removed position of Process and Compliance Manager, changed Operations Manager to Senior Operations Manager, changed Cluster Manager to Operations Manager.
2016-04-30	3	Changed Director of Risk, Compliance & Training to Director of Operational Services.
2018-12-17	4	Added Safety Process and Compliance Manager Position Appendix issued - Organizational Chart previously contained as Appendix C of the Operational Plan. Moved to a new Appendix.
2019-08-26	5	Replaced 'Senior Operator/Mechanic' with 'Team Lead'
2024-08-15	6	Revision to reflect change to reporting structure - Corporate Compliance now reports to VP of Operations. Revised to include Senior Leadership Team (SLT) in reporting structure and identify members, added Compliance System Coordinators, updated Operations Personnel position titles, removed watermark.

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-10 Rev Date: 2024-08-15 Rev No: 2 Pages: 1 of 5
COMPETENCIES		
Reviewed by: Process and Compliance Technician	Approved by: Senior Operations Manager	

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.

Role/Position	Required Minimum Competencies
Operations Management (Top Management)	<ul style="list-style-type: none"> Valid operator certification; if required to act as Overall Responsible Operator (ORO), certification must be at the level of the facility or higher Experience and/or training in managing/supervising drinking water system operations, maintenance, financial planning and administration 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 Experience using computers and operational computerized systems

COMPETENCIES

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager

Role/Position	Required Minimum Competencies
Safety, Process & Compliance (SPC) Manager (Top Management) (May also fulfill the role of Alternate QEMS Representative)	<ul style="list-style-type: none"> Valid operator certification required to fulfil certified operator duties (if assigned). Experience in providing technical support and leading/managing programs related to process control and compliant operations Experience and/or training in conducting compliance audits, and management system audits Experience and/or training in preparing and presenting informational and training material Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures Experience using computers and operational computerized systems
Process & Compliance Technician (QEMS Representative)	<ul style="list-style-type: none"> Valid operator certification required to fulfil certified operator duties (if assigned) Experience and/or training in resolving/addressing compliance issues for drinking water systems 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 in conducting management system audits or internal auditor education/training Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures Experience using computers and operational computerized systems
Certified Operator May include the following: <ul style="list-style-type: none"> Operations Supervisor Water & Wastewater Water & Wastewater Lead Senior Water & Wastewater Operator Water & Wastewater Operator 	<ul style="list-style-type: none"> Valid operator certification If required to act as ORO, certification must be at the level of the facility or higher If required to act as Operator-in-Charge (OIC), certification must be level 1 or higher Training and/or 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 Experience using computers and operational computerized systems

COMPETENCIES

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager

Role/Position	Required Minimum Competencies
• Water & Wastewater Operator-in-Training	
Instrumentation Technician May include the following: • Utility Plant Instrument Technician • Instrumentation Technician	<ul style="list-style-type: none"> Valid operator certification required to fulfil certified operator duties (if assigned) Experience and/or training in monitoring, programming, installing and troubleshooting network, hardware, software and instrumentation Experience and/or training in drinking water system processes, design, instrumentation, process control and automation systems Training on OCWA's QEMS and the DWQMS Training on relevant legislation, regulations, codes, policies, guidelines and procedures Experience using computers and operational computerized systems

- 3.2 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.
- 3.3 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.
- 3.4 The Program consists of Director Approved, continuing education and on-the-job training and is delivered using a combination of methods (e.g., traditional classroom courses, e-learning/webinars and custom/program-based courses/sessions). A formal evaluation process is in place for all sessions under the Operational Training Program and is a critical part of the Program's continual improvement.
- 3.5 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. All new staff are required to complete the EC 101 course within their first year of joining OCWA. The purpose of the EC 101 course is to ensure staff are 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.

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COMPETENCIES		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

- 3.6 Staff are also required to complete the training listed in OCWA's Mandatory Training Requirements procedure, based on their position and/or the duties they perform. This list includes mandatory environmental and health and safety compliance training, as well as the training deemed mandatory by OCWA corporate and Ontario Public Service (OPS) policies and is available on OCWA's intranet (sharepoint site).
- 3.7 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.
- 3.8 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.
- 3.9 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.
- 3.10 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.
- 3.11 Individual OCWA employee training records are maintained and tracked using a computerized system, the Training Summary database, which is administrated by OCWA's Learning and Development Department. Training records maintained at the facility are controlled as per OP-05 Document and Records Control.

4. Related Documents

- OCWA's Learning and Development Resources (OCWA Intranet/sharepoint)
- OCWA's Mandatory Training Requirements (OCWA intranet/sharepoint)
- Performance Planning and Review Database
- OP-5 Document and Records Control
- OCWA Training Summary Database

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-10 Rev Date: 2024-08-15 Rev No: 2 Pages: 5 of 5
COMPETENCIES		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

5. Revision History

Date	Revision #	Reason for Revision
2018-12-17	0	Procedure issued – Information within OP-10 (s. 3) was originally set out in Appendix J of the Mattice Drinking Water System Operational Plan (revision 2, dated March 12, 2013). 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 Manager and Data Clerk 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
2019-08-26	1	Removed positions of ‘Mechanic’ and ‘Data Entry Clerk’
2024-08-15	2	Procedure updated with revisions to table in 3.1 Role/Position updated to clarify roles are performed by multiple positions, position titles updated, removed watermark, updated Procedure to reflect changes to title and content of OCWA’s Mandatory Training Requirements Document, added sharepoint.

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-11 Rev Date: 2018 12 17 Rev No: 3 Pages: 1 of 3
PERSONNEL COVERAGE		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

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 Mattice 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.

3.2 The Mattice Drinking Water System is considered an un-manned facility. OCWA operations personnel routinely visit the system twice per week and monitor the facility daily using OCWA's remote monitoring SCADA system

Both OCWA operators are available 24 hours a day, 7 days a week by an alarm system and cell phone.

3.3 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.

A properly certified operator is designated as ORO. When the ORO is unavailable, the alternate is designated as the ORO and is recorded as such in the facility logbook (refer to the ORO Letter).

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

3.4 The Senior Operations Manager assigns an on-call operator for the time that the facility is un-staffed (i.e., evenings, weekends and Statutory Holidays). The on-call shift

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

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-11 Rev Date: 2018 12 17 Rev No: 3 Pages: 2 of 3
PERSONNEL COVERAGE		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

change is start of the business day on the first day of the work week at 08:00. The on-call schedule is maintained by the Senior Operations Manager (or designate) and is available to on-call operators in the Microsoft Outlook shared calendar.

- 3.5 The on-call operator conducts an inspection of the facility process at least once per day during the weekends and Statutory Holidays either on-site or via OCWA's remote monitoring system. Details of the inspection are recorded in the facility logbook and/or round sheets.
- 3.6 The alarm system auto dialer is programmed to contact the operator on-call. The operator on-call is responsible for responding to the alarm within a reasonable timeframe. If the nature of the alarm requires additional staff, the on-call operator can request assistance from any of the other certified operators. The on-call operator records details of the call-in in the facility logbook and OCWA operators also record details in OCWA's Workplace Management System (WMS/Maximo).
- 3.7 Operations Management 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 is included in the Facility Emergency Plan. This plan 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 \(WMS\)](#)
[Critical Shortage of Staff Contingency Plan \(Facility Emergency Plan\)](#)
[Facility Logbook](#)
[Facility Round Sheets](#)
[On-Call Schedule](#)
[ORO Letter](#)
[Vacation Schedule](#)
[OP-10 Competencies](#)

5. Revision History

Date	Revision #	Reason for Revision
2010 05 30	0	Procedure issued

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-11 Rev Date: 2018 12 17 Rev No: 3 Pages: 3 of 3
PERSONNEL COVERAGE		
Reviewed by: A. Swanson, PCT		Approved by: Y. Rondeau, SPC Manager

Date	Revision #	Reason for Revision
2011 09 09	1	Procedure 5.9 was added to reference contingency planning for Critical Shortage of Staff
2013 03 12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if redundant; updated Table 1 to reflect current locations.
2018 12 17	3	Appendix K, QP-03 procedure renamed OP-11. Removed Scope and Responsibilities sections. Other minor edits in wording.

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-12 Rev Date: 2018 12 17 Rev No: 4 Pages: 1 of 4
COMMUNICATIONS		
Reviewed by: A. Swanson, PCT		Approved by: Y. Rondeau, SPC Manager

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 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 Representative 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 (i.e., Facility Emergency Plan and OCWA's Emergency Response Plan). Refer to OP-18 Emergency Management for more information.
- 3.3 Communication with OCWA staff:
 - 3.3.1 Within the first year of hire, all staff are required to complete the Environmental Compliance 101 (EC101) course. The objective of the EC 101 course is to ensure that staff are 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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-12 Rev Date: 2018 12 17 Rev No: 4 Pages: 2 of 4
COMMUNICATIONS		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

- 3.3.3 The Safety, Process and Compliance (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 Representative 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 Representative (as per OP-05).
- 3.3.8 The QEMS Representative 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 cluster/facility level.
- 3.3.9 The SPC Manager reports to the Regional Hub Manager on the compliance 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 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 compliance performance during regularly scheduled meetings and/or through electronic and/or verbal communications. The QEMS Representative/PCT 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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COMMUNICATIONS		
Reviewed by: A. Swanson, PCT		Approved by: Y. Rondeau, SPC Manager

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 as identified in the Facility Emergency Plan. 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 Mattice Water Treatment Plant.
- 3.6.3 Facility tours of interested parties must be approved in advance by the Owner. A record of any tour is made in the facility logbook.
- 3.6.4 All complaints, whether received from the consumer, the community or other interested parties, are documented on a Community Complaint form. As appropriate, the Operations Management or the Senior Operator 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 Representative ensures that consumer feedback is included for discussion at the Management Review.

4. Related Documents

- Community Complaint Form
- Emergency Response Plan
- Facility Emergency 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
2010 05 30	0	Procedure issued
2011 09 09	1	Correction of some employee titles and update to Procedure 5.2 to include information how revisions are communicated

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-12 Rev Date: 2018 12 17 Rev No: 4 Pages: 4 of 4
COMMUNICATIONS		
Reviewed by: A. Swanson, PCT		Approved by: Y. Rondeau, SPC Manager

Date	Revision #	Reason for Revision
2013 03 12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if redundant. Clarification of the training referred to in 5.2
2017 05 18	3	Added the client reports to the related documents section
2018 12 17	4	Appendix L, 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'. Updated training sections for OCWA personnel (s. 3.3.1 to s. 3.3.4) to reference new Environmental Compliance 101 course completed within first year of hire and to outline how training is coordinated between SPC Manager/Operations Management, and QEMS Representative. 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.

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-12 Rev Date: 2024-08-15 Rev No: 5 Pages: 1 of 4
COMMUNICATIONS		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

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 Representative 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 (i.e., Facility Emergency Plan and OCWA's Corporate Emergency Response Plan). Refer to OP-18 Emergency Management for more information.
- 3.3 Communication with OCWA staff:
 - 3.3.1 Within the first year of hire, all staff are required to complete the Environmental Compliance 101 (EC 101) course. The objective of the EC 101 course is to ensure that staff are 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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Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

- 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 Representative 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 Representative (as per OP-05).
- 3.3.8 The QEMS Representative is responsible for ensuring that the Operations Management and the Safety, Process and Compliance Manager are informed regarding the compliance/quality status of the facility and QEMS implementation and any need for improved processes/procedures at the cluster/facility level.
- 3.3.9 The SPC Manager reports to the Regional Hub Manager on the compliance 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, 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 compliance performance during regularly scheduled meetings and/or through electronic and/or verbal communications. The QEMS Representative/PCT 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).

3.5 Communications with Essential Suppliers and Service Providers:

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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 as identified in the Facility Emergency Plan. The media spokesperson coordinates with local and corporate personnel (as appropriate) and the Owner in responding to media inquiries.
- 3.6.2 OCWA's QEMS and QEMS Policy are communicated to the public through OCWA's public website (www.ocwa.com). The QEMS Policy is also posted at the Mattice Water Treatment Plant.
- 3.6.3 Facility tours for interested parties must be approved in advance by the Owner or Operations Management. A record of any tour is made in the facility logbook.
- 3.6.4 All complaints, whether received from the consumer, the community or other interested parties, are documented on a Community Complaint form. 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 Representative ensures that consumer feedback is included for discussion at the Management Review.

4. Related Documents

- 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
- Facility Emergency Plan
- Corporate Emergency Response Plan
- Community Complaint Form

5. Revision History



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COMMUNICATIONS

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Date	Revision #	Reason for Revision
2010-05-30	0	Procedure issued
2011-09-09	1	Correction of some employee titles and update to Procedure 5.2 to include information how revisions are communicated
2013-03-12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if redundant. Clarification of the training referred to in 5.2
2017-05-18	3	Added the client reports to the related documents section
2018-12-17	4	Appendix L, 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'. Updated training sections for OCWA personnel (s. 3.3.1 to s. 3.3.4) to reference new Environmental Compliance 101 course completed within first year of hire and to outline how training is coordinated between SPC Manager/Operations Management, and QEMS Representative. 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.
2024-08-15	5	Procedure revised to reference updated title of Corporate Emergency Response Plan, removed watermark.

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ESSENTIAL SUPPLIES AND SERVICES		
Reviewed by: A Swanson, PCT		Approved by: Y. Rondeau, SPC Manager

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 Mattice Drinking Water System are contained in the Facility Emergency Plan on the Essential Supplies and Services List. The list is reviewed at least once every calendar year by the QEMS Representative and updated as required.

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. Essential suppliers and service providers (including those contracted locally) are sent a letter that provides an overview of the relevant aspects of the QEMS.

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, Conservation and Parks (MECP) has agreement with The Canadian Association for Laboratory Accreditation (CALA) for accreditation of laboratories testing drinking water. The QEMS Representative is

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ESSENTIAL SUPPLIES AND SERVICES		
Reviewed by: A Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

responsible for notifying the MECP of any change to the drinking water testing services being utilized.

- 3.6 Internal verification and calibration activities (e.g. chlorine analyzer, turbidimeter, flowmeters, 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, if required 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

Essential Supplies and Services List

Municipal Drinking Water Licence (MDWL)

OP-17 Measurement Recording Equipment Calibration and Maintenance

5. Revision History

Date	Revision #	Reason for Revision
2010 05 30	0	Procedure issued
2011 09 09	1	Addition of Procedure 5.3 clarifying how suppliers are informed of relevant aspects of OCWA's QEMS
2013 03 12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if



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ESSENTIAL SUPPLIES AND SERVICES

Reviewed by: A Swanson, PCT

Approved by: Y. Rondeau, SPC Manager

Date	Revision #	Reason for Revision
2018 12 17	3	redundant. Appendix M, 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).

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-14 Rev Date: 2018 10 19 Rev No: 3 Pages: 1 of 2
REVIEW AND PROVISION OF INFRASTRUCTURE		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

1. Purpose

To describe OCWA's procedure for reviewing the adequacy of infrastructure necessary to operate and maintain the Mattice 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

3. Procedure

3.1 At least once every calendar year, Operations Management in conjunction with operations personnel (Senior Operator, PCT, operators, mechanics and instrumentation technicians) 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
- QEMS Audit 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 5 year rolling Recommended Capital and Major Maintenance Report to assist the Owner and OCWA with planning infrastructure needs for the short and long-term. A letter, summarizing capital works recommendations and estimated expenditures for the upcoming year, is submitted to the Owner for review and approval. A capital letter is submitted, at least once every calendar year by Operations Management.

3.4 The final approved capital items form the long term forecast for any major infrastructure maintenance, rehabilitation and renewal activities as per OP-15.

3.5 Operations Management ensures that results of this review are considered during the Management Review process (OP-20).

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-14 Rev Date: 2018 10 19 Rev No: 3 Pages: 2 of 2
REVIEW AND PROVISION OF INFRASTRUCTURE		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

4. Related Documents

Capital and Major Maintenance Recommendations Report
 Capital Letter & Acknowledgement/Approval from the Owner
 Management Review Minutes
 OP-08 Risk Assessment Outcomes
 OP-15 Infrastructure Maintenance, Rehabilitation and Renewal
 OP-20 Management Review

5. Revision History

Date	Revision #	Reason for Revision
2010 05 30	0	Procedure issued
2011 09 09	1	Revised to include the position of Process Compliance Manager
2013 03 12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if redundant.
2018 10 19	3	Appendix N, QP-06 procedure renamed OP-14. Removed Scope and Responsibilities sections. Replaced 'once every 12 months' with 'once every calendar year' (s. 3.1) to reflect wording in DWQMS v. 2.0. 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).

 QEMS <small>Ontario Clean Water Agency</small>	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-15 Rev Date: 2018 12 17 Rev No: 0 Pages: 1 of 3
INFRASTRUCTURE MAINTENANCE, REHABILITATION AND RENEWAL		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

1. Purpose

To describe OCWA's infrastructure maintenance, rehabilitation and renewal program for the Mattice 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, adjust and calibrate process control equipment to ensure proper operation of water systems, pumps, chemical feeders, and all other equipment installed at the facilities.
- Inspect reservoir
- Perform routine maintenance duties to equipment including checking machinery and electrical equipment when required.
- Maintain an inventory of all equipment
- 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;
- 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.

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INFRASTRUCTURE MAINTENANCE, REHABILITATION AND RENEWAL		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

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 schedule is set up by the Senior Operator. 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 Senior Operator maintains the inventory of equipment in WMS and ensures that appropriate maintenance plans are in place. 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 in the facility's logbook and as corrective/emergency work order 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. In addition to the short-term facility needs (i.e. current year), the Capital and Major Maintenance Recommendations Report also provides a long-term (i.e. rolling 5-year) list of major maintenance recommendations. (Refer to OP-14 Review and Provision of Infrastructure).

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 (Senior Operator, PCT, operators, mechanics and instrumentation technicians) conduct a review of the drinking water system's infrastructure to assess its adequacy for the

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INFRASTRUCTURE MAINTENANCE, REHABILITATION AND RENEWAL		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

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 (or designate) are provided monthly summary reports which are automatically generated and emailed from WMS.

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 on an on-going basis through client reports and at a minimum once every calendar year through submission of the capital letter and the results of the Management Review.

4. Related Documents

Capital and Major Maintenance Recommendations Report
 Capital Letter & Acknowledgement/Approval from the Owner
 Minutes of Management Review
 OP-05 Document and Records Control
 OP-14 Review and Provision of Infrastructure

5. Revision History

Date	Revision #	Reason for Revision
2018 12 17	0	Procedure issued – Information within OP-15 (s. 3) was originally set out in Appendix O of the Mattice Drinking Water System Operational Plan (last revision 2, dated March 12, 2013). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Added the requirement to ensure the long term forecast is reviewed at once every calendar year and to document a long term forecast (s. 3.1.3) to reflect in DWQMS v. 2.0. Minor wording updates to reflect OCWA's current WMS.

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SAMPLING, TESTING AND MONITORING		
Reviewed by: Process and Compliance Technician	Approved by: Senior Operations Manager	

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, the facility's Municipal Drinking Water License (MDWL).
- 3.2 Sampling requirements for the facility are defined in the facility's sampling schedule/plan/calendar which is available to operations personnel, at the location(s) noted in OP-05 Document and Records Control. The sampling schedule 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 laboratory(ies) that conducts the analysis. The laboratory(ies) used for this facility are listed in the Essential Supplies and Services List (within the Facility Emergency Plan (FEP)).

Electronic and/or hardcopy 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 Continuous monitoring equipment is used to sample and test for the following parameters related to process control and finished drinking water quality:

- pH – process water and treated water into distribution system
- Discharge pressure
- Flow rates for raw water, filter effluent, and treated water
- Filter turbidity
- Levels for the raw water wet well and Clearwell depths
- Free chlorine at the reservoir
- Total chlorine at the clearwell and point of entry into distribution system

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. A Data Review Protocol and a Standard Operating Procedure for the

SAMPLING, TESTING AND MONITORING

Reviewed by: Process and Compliance Technician Approved by: Senior Operations Manager

Continuous Monitoring of Operational Parameters for Drinking Water Systems are available in the systems Facility Emergency Plan (FEP) Binder.

- 3.5 Adverse water quality incidents are responded to and reported as per the procedures found in the Facility Emergency Plan (FEP) Binder.
- 3.6 In-house process control activities are conducted on a regular basis by the certified operator(s) on duty and at a minimum are conducted as follows:

Operational Parameter	Location	Minimum Frequency
Alkalinity	Raw Water	1x per week (normally 2x)
Turbidity	Raw Water	1x per week (normally 2x)
Colour	Raw Water	1x per week (normally 2x)
pH	Raw Water	1x per week (normally 2x)
Temperature	Raw Water	1x per week (normally 2x)
Process pH	Floc Tank	1x per week (normally 2x)
Process Alkalinity	Floc Tank	1x per week (normally 2x)
Turbidity	Filter Influent	1x per week (normally 2x)
Aluminum Residual	Filter Effluent	1x per week (normally 2x)
Colour	Filter Effluent	1x per week (normally 2x)
Turbidity	Filter Effluent	1x per week (normally 2x)
Colour	Treated Water	1x per week (normally 2x)
Alkalinity	Treated Water	1x per week (normally 2x)
Turbidity	Treated Water	1x per week (normally 2x)
pH	Treated Water	1x per week (normally 2x)
Temperature	Treated Water	1x per week (normally 2x)
Free Chlorine	Treated Water	1x per week (normally 2x)
Total Chlorine	Treated Water	1x per week (normally 2x)
Free Chlorine	Reservoir	1x per week (normally 2x)
Total Chlorine	Reservoir	1x per week (normally 2x)
Total Chlorine	Clearwell	1x per week (normally 2x)
Ammonium Sulfate Dosage	Chemical Room	1x per week (normally 2x)
Soda Ash Dosage	Chemical Room	1x per week (normally 2x)
Aluminum Sulfate Dosage	Chemical Room	1x per week (normally 2x)
Chlorine Dosage	Chemical Room	1x per week (normally 2x)
Caustic Dosage	Chemical Room	1x per week (normally 2x)
Polymer Dosage	Chemical Room	1x per week (normally 2x)
Free Chlorine	Distribution Water	2x per week
Total Chlorine	Distribution Water	2x per week

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SAMPLING, TESTING AND MONITORING		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

In-house samples are analyzed following approved laboratory procedures. The sampling results are recorded on a facility round sheet and entered into the PDM system. Any required operational process adjustments are recorded in the facility log book.

- 3.7 Additional sampling, testing and monitoring activities related to the facility's most challenging conditions are summarized as follows;
 - Monitoring/sampling for harmful algal blooms (HABs) is conducted during the HAB season (the warm seasonal period at a minimum starting on June 1st and continuing until October 31st each year) based on the drinking water systems HAB Monitoring, Reporting and Sampling Plan.
- 3.8 There are no relevant upstream sampling, testing and monitoring activities that take place for this facility/system.
- 3.9 Sampling, testing and monitoring results are readily accessible to the Owner at the Mattice Water Treatment Plant and/or the Municipal Office.

At a minimum, Owners are provided Operations Reports, which include regulatory results and operational issues, an annual summary of sampling, testing and monitoring results through the SDWA O. Reg. 170/03 Section 11 Annual Report, the Schedule 22 Municipal Summary Report and through the Management Review process outlined in OP-20 Management Review.

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

4. Related Documents

Facility Logbook
 Facility Roundsheets
 OP-05 Document and Records Control
 OP-06 Drinking Water System
 OP-20 Management Review
 Laboratory Analysis Reports
 Laboratory Chain of Custody Forms
 Annual Report (O. Reg. 170 Section 11)
 Municipal Summary Report (O. Reg. 170 Schedule 22)
 Operations Reports
 Process Data Management System (PDM) records
 Emergency Contact List and Essential Supplies & Services List (Contacts section of FEP)
 Facility Emergency Plan (FEP) Binder
 SOP - Reporting and Responding to Adverse Results (FEP Binder)
 SOP - Online Check - Water and Wastewater Facilities (FEP Binder)
 Sampling Plan/Calendar/Schedule
 SCADA Records

	<p style="text-align: center;">OPERATIONAL PLAN Mattice Drinking Water System</p>	<p>QEMS Proc.: OP-16 Rev Date: 2024-08-16 Rev No: 6 Pages: 4 of 4</p>
SAMPLING, TESTING AND MONITORING		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

HAB Monitoring, Reporting and Sampling Plan

5. Revision History

Date	Revision #	Reason for Revision
2010-05-30	0	Procedure issued
2011-09-09	1	Addition of Process and Compliance Manager (3.0 Responsibility) and clarification of sampling under 5.0 Procedure
2013-03-12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if redundant. Section 5.4: chemical room reading frequency was changed.
2017-05-18	3	Added reference to client report in related documents section
2018-12-17	4	Appendix P, 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 and removed sampling table. Expanded information related to accredited and licensed laboratories (s. 3.3). Removed pumping and static levels. Reordered some sections and other minor edits.
2019-08-26	5	Corrected location of alum residual sampling to filter, added soda ash monitoring
2024-08-16	6	Updated section 3.4 to reflect the complete list of continuous monitoring equipment and updated the table in Section 3.6 to reflect the current sampling parameters and frequency. Removed OCWA watermark from document. Modified section 3.6 to clarify that the frequency of in-house process control activities is at a 'minimum' frequency which will allow for flexibility if additional sampling conducted beyond that referenced in table/sampling schedule. Added reference to HAB Plan under s. 3.7 and s. 4.

 Ontario Clean Water Agency	OPERATIONAL PLAN Mattice Drinking Water System	QEMS Proc.: OP-17 Rev Date: 2018 12 17 Rev No: 3 Pages: 1 of 2
MEASUREMENT AND RECORDING EQUIPMENT CALIBRATION AND MAINTENANCE		
Reviewed by: A. Swanson, PCT		Approved by: Y. Rondeau, SPC Manager

1. Purpose

To describe the procedure for the calibration and/or verification and maintenance of measurement and recording equipment at the Mattice 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 Instrumentation Technician establishes and maintains 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 added to the WMS system by a primary user. 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, and in the facility logbook.
- 3.4 Calibration and maintenance activities are carried out in accordance with procedures specified in the manufacturer's manual, instructions specified in WMS or OCWA's calibration procedures.
- 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 Operations Management and ORO, 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 Instrumentation Calibration/Maintenance form. Operations Management or 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: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

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
2010 05 30	0	Procedure issued
2011 09 09	1	Revised to include proper title for Process Compliance Manager
2013 03 12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if redundant.
2018 12 17	3	Appendix Q, 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.

EMERGENCY MANAGEMENT

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager

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

Corporate Emergency Response Plan (CERP) – 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 Emergency Response Plan (CERP) 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 plant staff and regular contractors. The event and the actions taken to resolve it (and to prevent a reoccurrence, if possible) are then included in regular reporting (both internally and externally). Examples may include response to an operational alarm, first aid incident, small on-site spill, or a process upset that can be easily brought under control.

Level 2 is an event that is more serious and requires immediate notification of others (regulator, owner). Examples may include minor basement flooding, injury to staff that requires medical attention, or a spill that causes or is likely to cause localized, off-site adverse effects. If the event reaches this level, the instructions indicate the need to contact the Safety, Process and Compliance Manager/Regional Hub Manager.

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 CERP. Level 3 events usually involve

EMERGENCY MANAGEMENT

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager

intervention from outside organizations (client, emergency responders, Ministry, media, etc.). Examples may include:

- 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 Mattice 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 /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 a 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 each CP must be reviewed at least once in a five-calendar year period. The reviews and tests are recorded on the FEP-01 Contingency Plan Review/Test Summary Form and in WMS as appropriate. This record includes the outcomes of the review/test, and identifies any opportunities for improvement and actions taken. A scheduled test of a CP may be regarded as a review of that particular CP as long as the outcomes are evaluated using the FEP-01

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EMERGENCY MANAGEMENT		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

form. A CP-related response to an actual event may also be considered a review or 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.

- 3.7 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).
- 3.8 Roles and responsibilities for emergency management at OCWA-operated facilities are set out in the FEP. Specific roles and responsibilities related to a particular emergency 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*).
- 3.9 Where they exist, any relevant sections of the Municipal Emergency Response Plan (MERP) are included or referenced in the appendices section of the FEP. Measures specified in the MERP are incorporated into CPs where appropriate.
- 3.10 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 CERP.

4. Related Documents

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

5. Revision History



Ontario Clean Water Agency

OPERATIONAL PLAN

Mattice Drinking Water System

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EMERGENCY MANAGEMENT

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager

Date	Revision #	Reason for Revision
2010-05-30	0	Procedure issued
2011-09-09	1	Corrected Process Compliance Manager's title; addition of site specific contingencies (5.2)
2013-03-12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if redundant.
2015-01-20	3	Updated procedure as per OCWA's revised corporate template which: reflects updates to OCWA's improved Facility Emergency Plan; References the three levels of operations-related events, OCWA's Emergency Management Program and OCWA's Emergency Communications Protocol; Clarifies training requirements in step 5.5; Updates reviewing frequencies of CPs in step 5.6; Describes when revision changes to procedures are required in step 5.7
2018-12-17	4	Appendix R, 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 is documented (s. 3.6). Other minor edits.
2024-08-15	5	Procedure updated as follows: Ministry of Environment and Climate Change revised to Ministry, removed watermark. Modified references to Emergency Response Plan to indicate it is now referred to as Corporate Emergency Response Plan (CERP).

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INTERNAL QEMS AUDITS		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

1. Purpose

To describe the procedure for conducting internal audits at the facility level that 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 Mattice 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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Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

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.

3.2.2 The QEMS Representative is responsible for maintaining the internal QEMS audit schedule. The audit schedule may be modified based on previous audit results.

3.3 Internal Auditor Qualifications

3.3.1 Internal QEMS audits shall only be conducted by persons approved by the QEMS Representative and having the following minimum qualifications:

- Internal auditor training or experience in conducting management system audits; and
- Familiarity with the DWQMS requirements.

3.3.2 Internal Auditors that do not meet the qualifications in s.3.3.1 may form part of the Audit Team for training purposes, but cannot act as Lead Auditor.

3.3.3 Internal Auditors must remain objective and, where practical, be independent of the areas/activities being audited. It may not be possible for internal auditors to be fully independent of the activity being audited, but every effort should be made to remove bias and encourage objectivity. Auditors should maintain objectivity throughout the audit process to ensure that the audit findings and conclusions are based only on the audit evidence. Objectivity can be demonstrated by obtaining sufficient appropriate evidence to provide a reasonable basis for the audit findings.

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3.4 Audit Preparation

3.4.1 Together, the QEMS Representative and the Lead Auditor:

- Establish the audit objectives, scope and criteria;
- Confirm the audit logistics (locations, dates, expected time and duration of audit activities, any health and safety considerations, availability of key personnel, audit team assignments, etc.).

3.4.2 Each Internal Auditor is responsible for:

- Reviewing documentation to prepare for their audit assignments including:
 - 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 Representative 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 (s. 3.1.3). 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 Representative and Top Management. 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

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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 Representative. The submitted documentation must identify (at a minimum):
 - Audit objectives, scope and criteria;
 - Audit Team member(s) and audit participants;
 - Date(s) and location(s) where audit activities where conducted;
 - Audit findings including:
 - Related objective evidence for each element;
 - Any non-conformance identified referencing the requirement that was not met; and
 - OFIs or other observations.
 - Audit conclusions.
- 3.6.3 The QEMS Representative distributes the audit results to Top Management and others as appropriate.
- 3.6.4 The QEMS Representative 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 Representative and retained as per OP-05 Document and Records Control.

4. Related Documents

Internal Audit Records (checklists, forms, reports, etc.)
 OP-05 Document and Records Control
 OP-20 Management Review
 OP-21 Continual Improvement
 Mattice DWS - Summary of Action Items



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Mattice Drinking Water System

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INTERNAL QEMS AUDITS

Reviewed by: Process and Compliance Technician | Approved by: Senior Operations Manager

5. Revision History

Date	Revision #	Reason for Revision
2010-05-30	0	Procedure issued
2011-09-09	1	Clarification of time frames in Procedure 5.1; corrected Process Compliance Manager's title; updated the development of audit protocol in Procedure 5.2
2013-03-12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if redundant.
2018-12-17	3	Appendix S, 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. Replaced 'once every 12 months' with 'once every calendar year' (s. 3.2.1, s. 3.2.3 and s. 3.4.1) to reflect wording in DWQMS v. 2.0. Added s. 3.2.3 (and modified s. 3.4.1) to describe the frequency for auditing all DWSs covered in multi-facility Operational Plans. 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.
2024-08-15	4	Procedure updated to describe and document how objectivity is maintained when an internal auditor is not fully independent of the activity being audited with additions to 3.3.3, removed watermark.

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MANAGEMENT REVIEW		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

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 (documented) meeting 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 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 Mattice Drinking Water System as:

- Operations Management – Hearst Cluster
- Regional Hub Manager – Northeastern Ontario Regional Hub
- Safety, Process & Compliance (SPC) Manager – Northeastern Ontario Regional Hub

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 meeting 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 Representative, at least one member of Top Management and at least one facility operator must attend the Management Review meeting. Other members of Top Management may participate though their attendance is optional.

3.3 Other staff may be invited to attend the Management Review meeting 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;

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MANAGEMENT REVIEW		
Reviewed by: A. Swanson, PCT	Approved by: Y. Rondeau, SPC Manager	

- d) The effectiveness of the risk assessment process;
- 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 In relation to standing agenda item q), applicable BMPs, if any, to address drinking water system risks discussed during other agenda items, are 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 SPC Manager coordinates the Management Review and distributes the agenda with identified responsibilities to participants in advance of the Management Review meeting along with any related reference materials.

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 Representative ensures that minutes of and actions resulting from the Management Review meeting are prepared and distributed to the appropriate OCWA Top Management, personnel and the Owner.

3.9 The QEMS Representative monitors the progress and documents the completion of actions resulting from the Management Review.

4. Related Documents

Management Review Reference Materials
 Minutes and actions resulting from the Management Review
 OP-21 Continual Improvement

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MANAGEMENT REVIEW		
Reviewed by: A. Swanson, PCT		Approved by: Y. Rondeau, SPC Manager

5. Revision History

Date	Revision #	Reason for Revision
2010 05 30	0	Procedure issued
2011 09 09	1	Corrected Process Compliance Manager's title
2013 03 12	2	Updated managerial title changes – Operations Manager is now the Senior Operations Manager and Cluster Manager is now the Operations Manager. References to Process Compliance Manager have been replaced with Senior Operations Manager or removed if redundant.
2018 12 17	3	Appendix T, OP-11 renamed OP-20. Removed Scope and Responsibilities sections. Added definitions for Top Management and Operations Management. Revisions based on new requirements of the Standard; at least once every 12 months changed to once every calendar year (s. 3.1) and efficacy changed to effectiveness (s. 3.4). 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: Process and Compliance Technician		Approved by: Senior Operations Manager

1. Purpose

To describe the procedure for tracking and measuring continual improvement of the Quality & Environmental Management System (QEMS) for the Mattice Drinking Water 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 Representative (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 Representative 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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CONTINUAL IMPROVEMENT		
Reviewed by: Process and Compliance Technician		Approved by: Senior Operations Manager

3.2.4 The QEMS Representative ensures corrective actions are documented using the Summary of Action Items spreadsheet. The QEMS Representative 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 (or designate) 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 Representative (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 Representative determines the action to be taken based on this consultation and the Operations Management (or designate) assigns responsibility and a target date for implementation.

3.3.4 The implementation of preventive actions are tracked by the QEMS Representative using the Summary of Action Items spreadsheet.

3.3.5 The implementation and effectiveness of preventive actions are verified during subsequent internal QEMS audits and are considered during the Management Review. If there is evidence that the action taken was not effective, the Operations Management (or designate) may consider further preventive actions and assigns resources as appropriate.

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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.

3.5 Best Management Practices (BMPs)

3.5.1 The QEMS Representative and/or Operations Management in consultation with the SPC Manager will review and consider applicable internal and/or external BMPs identified by internal and/or external sources as part of the Management Review (OP-20) 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

OP-05 Document and Records Control
 OP-20 Management Review
 Internal Audit Records
 Summary of Action Items spreadsheet

5. Revision History

Date	Revision #	Reason for Revision
2018-12-17	0	Procedure issued – The original information within the main body of the Mattice Drinking Water System Operational Plan (revision 3, dated May 18, 2017) 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 (s. 5.7 and s. 5.8) 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.

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Date Revision # Reason for Revision		
2024-09-10	1	Updated template to the new corporate standard, which removed the watermark and included the uncontrolled printed document disclaimer in the footer. Updated the document reference from "QEMS – Summary of Findings" to the correct document name "Summary of Action Items"



Ministry of the Environment,
Conservation and Parks

Schedule C – Director’s Directions for Operational Plans (Subject System Description Form) Municipal Residential Drinking Water System

Fields marked with an asterisk (*) are mandatory.

Owner of Municipal Residential Drinking Water System *
[The Corporation of the Township of Mattice - Val Cote](#)

Subject Systems

Name of Drinking Water System (DWS) *	Licence Number *	Name of Operating Subsystems (if applicable)	Name of Operating Authority *	DWS Number(s) *
1. Mattice Drinking Water System	291-101		Ontario Clean Water Agency	2100001781

Contact Information for Questions Regarding the Operational Plan

Primary Contact

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Safety Process and Compliance Manager	705-642-7208 ext.	jgalda@ocwa.com