



Town of Arnprior Staff Report

Subject: 2025 DWQMS Audits and Management Review Results

Report Number: 26-03-09-02

Report Author and Position Title: Sheena Baum, A/ Environmental Engineering Officer

Department: Operations - Engineering

Meeting Date: March 9, 2026

Recommendations:

That Council receive Report Number 26-03-09-02 authorizing the Chief Administrative Officer (CAO) and the General Manager, Operations on behalf of Top Management, and the Mayor, on behalf of Council, to endorse the QMS Commitment and Endorsement Policy, to meet the requirements of the Town of Arnprior Drinking Water Quality Management System Operational Plan.

Background:

DWQMS

The Town of Arnprior has an established Quality Management System (QMS) for its drinking water system. DWQMS is mandated through the Safe Drinking Water Act, 2002 (SDWA) with the specific requirements for the QMS coming from the document titled "Ontario's Drinking Water Quality Management Standard – Ver 2.0".

The intention of this staff report is to fulfill communication responsibilities listed between Top Management and the Owner (Council) as outlined in Element 12 of the QMS. Element 12 states:

"The status of the DWQMS and its effectiveness shall be communicated to the Owner by Top Management, or by the QMS Representative as directed by Top Management during scheduled Council meetings summary reports, e-mails, memos, etc."

Discussion:

External Audit Results

On October 3, 2025, SAI Global, the Town's external auditor, completed the desk top portion of the system audit (an off-site review of documentation) of the Town's QMS for 2025. The on-site component of the system audit was conducted on November 6, 2025.

The 2025 audit was completed as Year 1 of the 3-year audit cycle. Next year's audit (for the year 2026) will be a Year 2 surveillance audit.

The audit reports provided by SAI Global found a total of nineteen (19) opportunities for improvement (OFI's). There was one (1) non-conformity identified in the Systems audit.

Note that this year being a System Audit provided an opportunity for a more thorough review. Items identified during the external audit provide an outside view on ways we can improve our QMS. Improvements made to the QMS help to proactively name issues with the Town's Drinking Water System, helping to ensure the continued delivery of safe drinking water in Arnprior.

For complete external audit results, the external audit for 2025 is attached as Appendix 1 and Appendix 2. Closing of non-conformity is attached as Appendix 3.

OFI's from External Desktop Audit

The first two columns are comments provided by external auditor.

| OFI # and Description | Recommended Corrective/Improvement Plan | Corrective Action Anticipated Date of Completion |
|--|--|---|
| OFI-2025-01 - Element 1: While a Subject System Description Form has been included in the Operational Plan, an outdated version of the form was used. The current Ministry form requires the Licence Number to be provided on the form. | Update the Subject System Description Form to include the Licence Number | Completed during internal audit. |
| OFI-2025-02 - Element 1: Viewed the Drinking Water Quality Management System Operational Plan on the website on Oct 3, 2025. Noted that the version online is from 2021. | There is an opportunity to ensure that the most current version of the OP is available online. | Complete for 2025, website to be updated annually following signing of Commitment and Endorsement Policy |
| OFI-2025-03 - Element 7: Opportunity for Improvement While redundancy is considered in the risk assessment outcomes, it is not clearly described in the procedure that the reliability and redundancy of equipment is considered when conducting the risk assessment. | Ensure that the requirement to consider the reliability and redundancy of equipment is clearly stated in the risk assessment procedure | Completed during internal audit. |

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|---|--|---|
| <p>OFI-2025-04 - Element 8: It was noted that the emergency response procedures that may be implemented in response to a hazardous events are not specifically referenced under the “Emergency procedure or contingency plan” column in the risk assessment table.</p> | <p>There is an opportunity to include a reference to the specific emergency response procedures for related hazards in the “Emergency procedure or contingency plan” column in the risk assessment table</p> | <p>Review during next Risk Assessment Review scheduled for September 2026</p> |
| <p>OFI-2025-05 - Element 18: Each of the emergency response procedures has a section entitled “Contingency and Recovery”. While all procedures have items listed in a table under this section, most of the items listed speak to the contingencies and do not include instructions or criteria to return the system to normal operations (recovery) after an emergency.</p> | <p>There is an opportunity to more clearly describe recovery processes for the identified emergencies</p> | <p>WW Supervisor to Review and update Summer 2026</p> |
| <p>OFI-2025-06 - Element 20: During the Management Review, agenda item e) covered internal audit findings, but the external audit results from October 25, 2024, were not discussed. The Standard requires consideration of both internal and third-party Audit results.</p> | <p>Ensure that external audit results are included in the Management Review</p> | <p>Complete - External audits were discussed in Top Management Review January 19, 2026. Formatting of minutes and forms for tracking OFI’s have been updated for ease both internal and external review.</p> |

OFI's from External On-site Audit

The first two columns are comments provided by external auditor

| OFI # and Description | Recommended Corrective/Improvement Plan | Anticipated Date of Completion |
|--|--|--|
| <p>OFI-2025-07 - Element 8: Appendix D5 – Distribution Pressure Critical Limit Response Procedure mostly speaks to what to do in the plant should the distribution pressure drop below the critical control limit, but there are no details regarding what to do in the distribution system in the event of the pressure dropping below the critical control limit of 60psi</p> | <p>There is an opportunity to consider adding distribution response procedures to the Distribution Pressure Critical Limit Response Procedure</p> | <p>DWQMS Rep to review this spring and consult, Eng. Dept and Roads and Services</p> |
| <p>OFI-2025-08 - Element 8: The last 36-month risk assessment was completed on Sep 24, 2025, however in viewing the risk assessment table in the Risk Assessment Outcomes Procedure (PW-DWQMS-08), that date is not included so it is not immediately apparent when the 36-month assessment was completed</p> | <p>Consider adding the date of the 36-month assessment to the RA Table</p> | <p>Completed during internal audit. Risk Assessment Table was updated to include date of last full assessment and date of next.</p> |
| <p>OFI-2025-09 – Element 12: The procedure requires new employees to receive DWQMS Employee Orientation</p> | <p>Ensure that orientation sessions are being conducted for new employees.</p> | <p>Tracker added to HR training tracker to maintain record of orientation. Refresher to be provided at Emergency Response Training</p> |
| <p>OFI-2025-10 – Element 13: Essential supplies and services are listed in section 8.0 of the procedure. It was noted that not all suppliers have an identified back up, and that there does not appear to be a supplier listed for the handheld instruments and supplies.</p> | <p>There is an opportunity to consider identifying back up suppliers/services and more clearly indicate suppliers of handheld instruments and reagents.</p> | <p>Updated during audit, additional review for back up suppliers ongoing. QMS Rep to coordinate with WW Supervisor.</p> |
| <p>OFI-2025-11 – Element 13: The procedure states that all tender documents shall provide list of relevant quality requirements (e.g. AWWA, ANSI/NSF). During the audit, a current tender document was reviewed and while some AWWA requirements are referenced, the Municipal Drinking Water Licence (MDWL) requirements are</p> | <p>There is an opportunity to ensure that water system inventory (e.g. repair parts) complies with the regulatory requirements (e.g. NSF/14, NSF/60, NSF/61 and NSF/372) and to vet tender documents to ensure the</p> | <p>Noted and Eng. Dept. into account for next relevant tender.</p> |

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| <p>not fully stated. It was also discussed that the new MDWL includes new requirements for PVC pipe (NSF14) and that condition 14.2 of the MDWL requires “The most current chemical and material product registration documentation from a testing institution accredited by either the Standards Council of Canada or by the American National Standards Institution ("ANSI") shall be available at all times for each chemical and material used in the operation of the drinking water system that comes into contact with water within the system.”</p> | <p>MDWL requirements are stated.</p> | |
| <p>OFI-2025-12 – Element 14: The justification column of the long-range capital and operating budget forecast would include the reason(s) for a budget request but doesn't clearly indicate if requests are based on Infrastructure Review and/or Risk Assessment outcomes.</p> | <p>There is an opportunity to ensure that the Infrastructure Review information and any links to Risk Assessment outcomes are included in the long-range forecast/budget submission to council</p> | <p>Fall 2026 – Ongoing in following years</p> |
| <p>OFI-2025-13 – Element 15: There is no formal watermain commissioning process nor form for contractors (capital projects or development) to follow or use. Tender documents require contractors to complete commissioning as per the Provincial Watermain Disinfection Procedure and AWWA C651. It was also discussed that there is no formal final connection approval paperwork.</p> | <p>There is an opportunity to consider creating a watermain commissioning process for contractors and formalizing the recordkeeping and connection approval requirements.</p> | <p>To be included in upcoming projects</p> |
| <p>OFI-2025-14 – Element 17: During the audit, it was noted that the colorimeter verification records include the tolerance range of the SpecCheck standard handwritten at the top of the record for each colorimeter. This is a great initiative to assist staff in quickly confirming that the colorimeter they are verifying is reading within the range, rather than pulling out the range form from the SpecCheck standard. By making</p> | <p>There is an opportunity to consider adding the verification tolerance ranges for the colorimeters to the Analyzer Calibration Record</p> | <p>Review with staff preferences and update form from there – March 2026</p> |

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| <p>this a fillable part of the form, this would formalize recording the ranges to ensure this information is consistently recorded by all staff. This may also assist in traceability (e.g. linking the verification results to the specific SpecCheck standard).</p> | | |
| <p>OFI-2025-15 – Element 17: Section 8.1 in PW-DWQMS-17 requires any instrumentation that forms part of the monitoring system for CT to be checked and where necessary, calibrated at least once every 12 months when the system is in operation or more frequently in accordance with manufacturer’s Audit Report recommendations. It was discussed during the audit that Hach has published a Free and total chlorine analyzer verification document which meets the requirements of USEPA Method 334.0: Determination of Residual Chlorine in Drinking Water using an On-Line Chlorine Analyzer Paragraph 11.1.1 requires a check standard to be analyzed when a grab sample is used to adjust the calibration of an on-line chlorine analyzer.</p> | <p>Consider reviewing Hach’s calibration/verification recommendations to confirm if the “manufacturer’s recommendations” statement in PW-DWQMS-17 is accurate.</p> | <p>Completed - Reviewed and found current calibration/verification procedure to exceed manufacturer’s recommendations.</p> |
| <p>OFI-2025-16 – Element 17: Section 8.5 of the Management Review Procedure lists the items to be discussed during the meeting; however, this list does not fully match the list provided in the Standard or the Top Management Review Form.</p> | <p>The OA may wish to vet the list provided in the procedure for consistency with the Standard and Appendix 20A – Top Management Review Form (PW-DWQMS-FR8).</p> | <p>Completed during internal audit, documents updated for consistency.</p> |
| <p>Minor Non-Conformity # ARN NCR-01: Element 17 –The Operating Authority shall develop a procedure for tracking and measuring continual improvement of its Quality Management System by: a) Reviewing and considering applicable best management practices including any published by the Ministry..., at least once every</p> | <p>Addition of BMP’s to agenda template for infrastructure review (Appendix 14A). Create method to track BMP discussion in reference to MECP guidelines which can be used at meetings throughout the year. Utilised the Internal Audit</p> | <p>Completed forms created and sent to auditor for review. BMP’s were reviewed as part of Top Management Review conducted on January 19, 2026.</p> |

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| <p>thirty-six months. DO – The Operating Authority shall strive to continually improve the effectiveness of it's Quality Management System by implementing and conforming to the procedure. Section 8.10 in the Continual Improvement Procedure (PW-DWQMS-21) states that a review of best management practices shall be discussed during the annual infrastructure review meeting. There is no evidence of best management practices being discussed in the last thirty-six months during the annual infrastructure review meeting.</p> | <p>Checklist which includes review of BMP's at least once every thirty-six months.</p> | |
| <p>OFI-2025-17 – Element 21: Note that the new https://www.ontario.ca/page/drinking-water-system-best-managementpractices document has been published. There is an opportunity to define the process to consider the specific BMPs (e.g. consider how the continual improvement procedure can be modified to include high level consideration of the BMPs based on factors like relevance to the system or practicality of implementation) with a more detailed consideration of the BMPs that are relevant to the system) to demonstrate consideration of all the BMPs.</p> | <p>There is an opportunity to review the Ministry's recently published BMPs and consider defining the Operating Authority's review process.</p> | <p>Completed – New form to track internal BMP's against latest ministry BMPs was created and reviewed in Top Management Review.</p> |
| <p>OFI-2025-18 – Element 21: Noted that the Appendix 5F – DWQMS Master List of Documents and Records (PW-DWQMSFR11), did not contain action items from the emergency test, nor from the infrastructure review. These are noted in separate documents (e.g. Appendix 18H – Action Items from Emergency Management Training (PW-DWQMS-FR28)) – however, there is an opportunity to consolidate and have all findings in one spot.</p> | <p>There is an opportunity to use the Appendix 5F – DWQMS Master List of Documents and Records (PW-DWQMS-FR11) to track action items arising during annual reviews (e.g. infrastructure, management) and emergency tests.</p> | <p>Completed – Action items are recorded in Appendix 5F in the table that records OFI's and links back to original meeting minutes for context.</p> |

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| OFI-2025-19 – Element 21: Viewed the blank Corrective Action Request Form (PW-DWQMS-FR5) and noted that there is no section on the form to document the root cause of the nonconformance. It is a requirement of the standard to investigate the cause of nonconformance. | Ensure that the Corrective Action Request Form (PW-DWQMS-FR5) includes a section to document the root cause of the nonconformance. | Completed during internal audit |

Internal Audit Results

The QMS rep undertook an internal audit of the Towns QMS system in September to December 2025. The results of the internal audit listed eight (8) opportunities for improvement (OFI's). Two (2) of which were carried over from 2024's internal audit.

As a reminder, items identified during the internal audit or management review processes should be looked upon positively, as they demonstrate to the external auditors that the Town reviews its processes critically and continually work to improve its QMS.

For complete internal audit results, the internal audit checklist for 2025 is attached as Appendix 4.

| OFI # and Description | Recommended Corrective/Improvement Plan | Corrective Action Anticipated Date of Completion |
|---|--|---|
| OFI-2025-20 - Element 5 Records of the last (5) years DWQMS documents are to be kept on record. Gap missing in physical, FileHold and SharePoint systems for years 2020-2022. Files located in previous QMS rep local files and uploaded to SharePoint. | Maintain previous 5-year QMS files on back-up in case of cyber event. Update annually for continuity of documents. | March 2026 |
| OFI- 2025-21 - Element 6 Some sections describing the water filtration plant equipment and processes are outdated. | Update Appendix 6A/B | Work in progress, updated documents to be reviewed by WFP staff prior to finalizing. Goal is for March 2026 |
| OFI- 2025-22 - Element 10 (Carried over from OFI-2024-02) The Operating Authority shall meet and maintain competencies for personnel directly affecting drinking water quality and shall maintain records of these activities. | Develop training tracking sheet with Health and Safety and HR. Existing training tracker for all staff includes occupational health and safety training. Working to update tracking for MECP related | Completed - developed water treatment and distribution specific licence tracking, and health and safety training that is maintained by HR. It was determined that current practices of |

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| | requirements to ensure annual hours are met. | training hour record keeping being most practical and procedure for managing has been updated in Element 10 of DWQMS |
| <p>OFI- 2025-23 - Element 10 Requirement the Operating Authority shall undertake activities to:</p> <p>a.) ensure that personnel are aware of the relevance of their duties and how they affect safe drinking water and shall maintain records of these activities.</p> | Develop DWQMS orientation presentation for new staff and track training in operator tracking sheet. | Complete and on-going. Overview manual is available at DWQMS Rep's office but could be revised for orientation training uses. Proposed refresher of DWQMS at Emergency Response Training |
| <p>OFI-2025-24 - Element 11 (Carried over from OFI-2024-01): There continues to be difficulty scheduling and completing mechanical maintenance activities at the WFP, due to two issues:</p> <ul style="list-style-type: none"> • The availability of reliable contracted millwright services to complete both large repair projects but also regularly required mechanical maintenance. | Top Management working to fill role of Mechanical Technician position for WFP. Current maintenance tasks are completed by external contractors until position is filled. Review opportunities for recruitment. | On-going review of position including job description and salary range to attract talent. |
| <p>OFI-2025-25 - Element 14: Current employee feedback provided at infrastructure review. Provide opportunity for feedback throughout the year and insure it is incorporated back into infrastructure review. Create employee suggestion form for equipment maintenance to be reviewed against budgets.</p> | Create employee suggestion form for equipment maintenance to be reviewed against budgets. | DWQMS Rep to review with DWQMS Alternate and finalize in February. |
| <p>OFI-2025-26 - Element 15: Procedures and forms do not include timelines for maintenance work.</p> | Consider adding frequency schedule for inspections to procedures and to forms in section 15 | Discussed at Top Management Review, SB to create schedule in March 2026 that will be incorporated into infrastructure review meetings. |

| OFI # and Description | Recommended Corrective/Improvement Plan | Corrective Action Anticipated Date of Completion |
|---|---|--|
| OFI-2025-27 - Element 20 Make sure all elements and records are taking place throughout the year. | Checklist to be developed to track key DWQMS activities to be undertaken annually, to help avoid tasks being missed by new/fill in staff during leaves of absences. | Completed |

OFI's may be suggested outside of audit activities. In review of a water main break on December 4, 2025, the following OFI was brought forth.

| OFI # and Description | Recommended Corrective/Improvement Plan | Corrective Action Anticipated Date of Completion |
|--|--|--|
| OFI-2025-28 - Element 18 Update boil water advisory procedure and communication templates. | Review current procedure from 2015 and update as required. | March 2026 |

Top Management Review

The Top Management review meeting was completed on January 19, 2026. This meeting covered DWQMS activities of 2025.

Action items discussed during the Top Management Review that require follow up by Staff in 2026 include:

| ACTION PLAN: | ASSIGNED TO: | COMPLETION DATE |
|---|--|-----------------|
| Consider possibility of adding logic to SCADA for flow meter on ammonia pumps to register a minimum flow. | BR – to discuss with controls supplier | Summer 2026 |
| Update Boil Water Advisory Procedure and Communication Templates | SB/LW | March 2026 |
| Update locations of dead-ends for flushing routine | Eng. Dept. Summer Student | July 2026 |
| Develop Routine Inspection/Maintenance tracking form for use during annual Infrastructure Review | SB | March 2026 |

Commitment and Endorsement by the Owner

Element 3 of the Standard states that the Owner and Top Management are responsible for ensuring that the Quality Management System is implemented through their commitment and endorsement of the DWQMS.

A copy of the Commitment and Endorsement Policy is attached for your review (Appendix 3). The policy must be endorsed by the CAO and the General Manager, Operations (Top Management) and by the Mayor on behalf of Council as the Owner.

The Operational Plan for the Town of Arnprior, titled "Town of Arnprior Walter E. Prentice Water Filtration Plant and Distribution System, Drinking Water Quality Management Standard Operational Plan" is available for your review in hard copy or digital from the Environmental Engineering Officer (QMS Rep).

Options:

N/A

Policy Considerations:

This report is in keeping with the Strategic Plan's Vision of Improved infrastructure and Guiding Principle of Accountability, Dependability and Reliability.

Ontario's Drinking Water Quality Management Standard (Ver 2)

Safe Drinking Water Act (SDWA), 2002.

- O. Reg. 170/03
- O. Reg. 128/04

Financial Considerations:

N/A

Meeting Dates:

N/A

Consultation:

John Steckly - General Manager, Operations
Ben Ritchie - Waterworks Supervisor
Mike Ledgerwood - Supervisor, Roads and Services

Documents:

Attached

Appendix 1 – SAI Global System Audit – October 3, 2025
Appendix 2 – SAI Global System Audit – November 6, 2025
Appendix 3 - Finding Detail
Appendix 4 – Internal Audit Checklist – 2025
Appendix 5 – QMS Commitment and Endorsement Policy

Referenced Documents/By-laws:

Town of Arnprior Drinking Water System, Drinking Water Quality Management Standard
Operational Plan

Signatures

Reviewed by Department Head: John Steckly

Reviewed by General Manager, Client Services/Treasurer: Jennifer Morawiec

CAO Concurrence: Robin Paquette

Workflow Certified by Town Clerk: Kaila Zamojski