

AGENDA

Regular Council Meeting Tuesday, January 7, 2025, at 6:30 p.m. Powassan Council Chambers 252 Clark Street, Powassan, ON

1. CALL TO ORDER

2. LAND ACKNOWLEDGMENT

"We respectfully acknowledge that we are on the traditional territory of the Anishinaabe Peoples, in the Robinson-Huron and Williams Treaties areas. We wish to acknowledge the long history of First Nations and Métis Peoples in Ontario and show respect to the neighbouring Indigenous communities. We offer our gratitude for their care of, and teachings about, our earth and our relations. May we continue to honour these teachings."

3. ROLL CALL

4. DISCLOSURE OF MONETARY INTEREST AND GENERAL NATURE THEREOF

5. APPROVAL OF THE AGENDA

6. DELEGATIONS TO COUNCIL

6.1 Powassan and District Union Public Library 2025 Budget Presentation – Marie Rosset and Laurie Forth

7. <u>ADOPTION OF MINUTES OF PREVIOUS OPEN SESSION MEETINGS OF COUNCIL</u> 7.1 Regular Council Meeting of December 3, 2024

8. MINUTES AND REPORTS FROM COMMITTEES OF COUNCIL

9. MINUTES AND REPORTS FROM APPOINTED BOARDS

- 9.1 Powassan and District Union Public Library Minutes of November 18, 2024
- 9.2 District of Parry Sound Social Services Administration Board December 2024 CAO Report
- 9.3 The Golden Sunshine Municipal Non-Profit Housing Corporation Minutes of November 19, 2024

10. STAFF REPORTS

10.1 Operations and Facilities Manager, F. Schmeltz – Public Works and Facilities Update, December 2024

11. <u>BY-LAWS</u>

11.1 Bylaw 2025-01 – Temporary Borrowing 11.2 Bylaw 2025-02 – Interim Tax Levy

12. UNFINISHED BUSINESS

12.1 Ontario Provincial Police 2025 Annual Billing Revisions

13. NEW BUSINESS

13.1 North Bay Parry Sound District Health Unit – 2025 Municipal Levy

13.2 Ontario Clean Water Agency – 2024 Management Review Report of the Drinking Water Quality Management System

13.3 Ontario Clean Water Agency – Operational Plan for the Powassan Drinking Water System 13.4 Councillor Hall – Kraft Hockeyville 2025 Contest

13.5 Councillor Hall – Development of Powassan snowmobile/ATV trail for the 2025 season

13.6 Councillor Hall – Council Members voting online

14. CORRESPONDENCE

14.1 Ministry of Infrastructure – Municipal Housing Infrastructure Program

14.2 Town of Aurora – Redistribution of the Provincial Land Transfer Tax and GST to Municipalities for Sustainable Infrastructure Funding

14.3 Ministry of Emergency Management and Preparedness Response – Emergency Management Modernization Act

14.4 NECO Community Futures Development Corporation – 2025 Maple Syrup Week and Festival CED application

15. ADDENDUM

16. NOTICE OF SCHEDULE OF COUNCIL AND BOARD MEETINGS

17. CLOSED SESSION

17.1 Adoption of the Closed Session Minutes of November 5, 2024

17.2 Identifiable Individuals – Section 239(2)(b) of the Municipal Act and under Section 9(4)(b) of the Procedural Bylaw – Matters regarding an identifiable individual, including municipal or local board employees.

17.3 Legal Matters – Section 239(2)(e) of the Municipal Act and under Section 9(4)(e) of the Procedural Bylaw – Litigation or potential litigation, including matters before administrative tribunals, affecting the municipality or local board.

17.4 Security of Property - Section 239(2)(a) of the Municipal Act and under 9.4(a) of the Procedural Bylaw – Security of property of the municipality or local board.

18. MOTION TO ADJOURN



January 2, 2025

Mayor Peter McIsaac Municipality of Powassan 250 Clark Street Powassan, ON P0H 1Z0

Re: Library Budget 2025

Dear Mayor Peter McIsaac and Council Members:

Here is our 2025 Budget, I hope you will find it acceptable and choose to support it.

This year we have determined the Library requires \$206,740.78 to operate for 12 months of the year. This is an increase of \$28,312.89 over last year's Library fees. As agreed in the latest Library Agreement adopted in 2021 and signed in 2023, the Library fees are to be distributed among the three Union Members according to their share of <u>active</u> library patrons. An active library patron is defined as a patron who uses and renews their card at least once a year. On Dec 31, 2024 the percentage of active users for the Municipality of Powassan was recorded at 68.5%. Your share for this year equals \$141,617.43.

In 2025 the Library Board is also requesting that Library Fees be paid monthly instead of the previous 3 times a year system. It will improve the financial management of the library.

As you will see on page 2 of the budget, the library applied and received many grants in 2024. These were crucial in providing the many services to the community. For more detailed information please scan the QR code on this page to view our 2024 Highlights document.

We look forward to serving the community and continuing to provide its residents with the outstanding library services they are accustomed to.

Yours truly,

Kristnie Manti

Kristine Martin, Chair of the Board Powassan & District Union Public Library

Attachments:

2025 Budget (3 pages) Proposed Installments for 2025



Powassan & District Union Public Library - Budget 2025

Revenue	Actual 2024	Budget 2024	Budget 2025
Municipal	\$178,428.00	\$178,428.00	\$206,740.78
Powassan Chisholm Nipissing	\$114,193.85 \$ 28,548.46 \$ 35,685.58	\$114,193.85 \$ 28,548.46 \$ 35,685.58	\$141,617.43 \$ 23.568.45 \$ 41,554.90
Restoule Provincial Copier Fees LifeLabs Contribution Misc. Fees Pay Equity Grant Donations Total Revenue	4,559.00 14,500.00 4,720.00 9,396.00 4,890.00 7,601.00 18,150.00 <u>\$242,244.00</u>	5,084.00 14,500.00 9,612.00 6,400.00 7,601.00 14,850.00 <u>\$240,475.00</u>	5,083.94 14,500.00 4,500.00 10,477.00 7,150.00 0.00 *1 12,000.00 <u>\$260,451.72</u>
Expenditures	Estimates 2024	Budget 2024	Budget 2025
Payroli Benefits Pension WSIB E.H.T. Training Payroll Services Circulation Materials Interloans Programming Sewer & Water Hydro & Heating Security Elevator Insurance Janitorial Services Maintenance & Snow Removal Maintenance Reserve Internet and Telephone Computers & Related Items Contracted Computer Services Associations Fees Off. Supplies & Postage Copier Audit	\$109,027.00 8,538.00 10,000.00 611.00 1,470.00 226.00 1,803.00 7,470.00 399.00 2,283.00 555.00 6,292.00 490.00 5,708.00 6,257.00 800.00 2,874.00 0.00 981.00 1,649.00 1,110.00 3,105.00 1,000.00 3,769.00 2,671.00	\$169,027.00 8,668.00 10,000.00 611.00 1,770.00 600.00 1,600.00 5,250.00 375.00 1,000.00 6,500.00 6,500.00 6,300.00 6,300.00 6,000.00 5,700.00 4,000.00 1,200.00 1,300.00 1,500.00 3,105.00 1,450.00 3,200.00 2,800.00	9,000.00 13,496.60 671.13 1,676.97 680.00 1,700.00 5,700.00 5,700.00 5,55.00 7,100.00 5,000.00 6,240.00 5,700.00 4,003.68 1,200.00 1,500.00 1,500.00 3,148.00 1,150.00 3,700.00 4,000.00
Advertising and Promotion Bank Service Charges Miscellaneous	750.00 576.00 652.00	750.00 250.00 799.00	750.00 270.00 125.00
Total Expenditures	\$241,066.00	\$245,645.00	\$259,350.92

*1 Pay Equity Grant is reported on page two with other grants

*2 Includes Wages and Salaries plus EI and CPP benefits, Pay Equity Grant amount has been removed. actual 2024 figure

Powassan & District Union Public Library Grants & Special Project Budget 2025

Revenue	Estimates 2024	Budget 2024	Budget 2025
Pay Equity Grant Student Grants Prov. Senior Community Grant Trillium Resilience Grant *3 Trillium Capital Grant - 2024 *4 Internet Connectivity Grant	4,634.00 7,816.00 22,400.00 25,000.00 2,760.00	\$4,634.00 \$7,816.00 22,400.00 25,000.00 2,760.00	7,601.00 \$4,928.00 \$0.00 0.00 2,760.00
Total Revenue	\$62,610.00	\$62,610.00	\$15,289.00
Expenditures	Estimates 2024	Budget 2024	Budget 2025
Pay Equity Grant			\$7,601.00
Students Grants	\$6,105.00	\$5,958.00	6,028.80
Trillium Resilience Grant - Spent	12,741.07	\$22,400.00	0.00
Trillium Res. Grant - Pending	<mark>9,658.93</mark>		0.00
Trillium Capital Grant - Spent	14,236.91	\$25,000.00	0.00
Trillium Capital Grant - Pending	10,763.09		0.00 *2
Prov. Senior Com. Grant - Spent	1,126.12	\$7,816.00	0.00
Senior Com. Grant - Pending	6,689.88	* C 000 00	0.00
Quiet Room	6,836.00	\$0,830.00	0.00
Internet Connectivity Grant	2,000.00	2,760.00	2,760.00

*1 No value is recorded due to the uncertainty of application success

*2 No value recorded due to uncertainty of remaining costs carried over from previous year.

*3 The Trillium Resilience Grant application was done in partenership with the Mun. of Powassan

*4 The Trillium Capital Grant application was done in partnership with the Township of Chisholm

Powassan & District Union Public Library Budget 2025

		Estimates		
Revenue		2024	Budget 2024	Budget 2025
Operating Budget	s	242 244 00	\$ 240 475 00	\$ 260 451 72
Grants & Spec. Projects	\$	62,610.00	\$ 62,610.00	\$ 15,289.00
Total Revenue	\$	304,854.00	\$ 303,085.00	\$ 275,740.72
				
		Estimates		
Expenditures		2024	Budget 2024	Budget 2025
Operating Budget	\$	241,066.00	\$ 245,645.00	\$ 259,350.92
Grants & Spec. Projects	\$	72,917.00	\$ 72,770.00	\$ 16,389.80
Total Expenditures	\$	313,983.00	\$ 318,415.00	\$ 275,740.72
Revenue	-\$	9,129.00	-\$ 15,330.00	\$-



2025 Proposed Installments for Library Services

Municipality of Powassan	\$141,617.43
12 monthly payments of \$11,801.45	
Township of Chisholm	\$ 23,568.45
12 monthly payments of \$1,964.04	
Township of Nipissing	\$ 41,554.90
12 monthly payments of \$3,462.91	

Total 2025 Library Fees

\$206,740.78



2024-351

2024-352

2024-353

2024-354

2024-355

Regular Council Meeting Tuesday, December 3, 2024, at 6:30 pm Powassan Council Chambers

Present:	Peter McIsaac, Mayor Markus Wand, Deputy Mayor Leo Patey, Councillor	
Staff:	Brayden Robinson, Treasurer/Director of Corporate Services Allison Quinn, Clerk	5
Absent, With Regrets:	Dave Britton, Councillor Randy Hall, Councillor (Joined virtually, but does not count towards quorum).	
Presentations:	Lego Robotics Team 250 Clark – Presented on their team an upcoming competition.	d
Disclosure of Mor	M. WandSeconded by: L. Patey	
That the agenda of be approved, with	f the Regular Council Meeting of December 3, 2024, the following addendum:	
15.1 Councillor W	Vand - Landfill	Carried
Moved by: That the minutes o be adopted.	L. Patey Seconded by: M. Wand of the Regular meeting of Council of November 19, 2024,	Carried
Moved by: That the North Ba	L. Patey Seconded by: M. Wand y Mattawa Conservation Authority's draft budget be received.	Carried
Moved by: That the minutes fi 21, 2024, be receiv	M. Wand Seconded by: L. Patey from the Powassan and District Union Public Library meeting of wed.	October Carried
Moved by: That the minutes find committee meeting	L. Patey Seconded by: M. Wand from the Golden Sunshine Municipal Non-Profit Housing Corpor g of September 17, 2024, be received.	ation Carried

2024-356	Moved by: M. WandSeconded by: L. PateyThat the minutes from the Golden Sunshine Municipal Non-Profit Housing Corporation committee meeting of October 15, 2024, be received.Carried
2024-357	Moved by: L. Patey Seconded by: M. Wand That the memo from Treasurer/Director of Corporate Services, B. Robinson, regarding Tower Line Winter Maintenance be received; and,
	FURTHER that Council decline to alter the current level of service to the seasonally maintained portion of Tower Line.
2024-358	Moved by: M. Wand Seconded by: L. Patey That the memo from Treasurer/Director of Corporate Services, B. Robinson, regarding the 2024 Budget Amendment be received; and,
	FURTHER that the budget be amended as per the recommendations in the staff report dated December 3, 2024. Carried
2024-359	Moved by: L. Patey Seconded by: M. Wand That the memo from Clerk, A. Quinn, regarding the draft Animal Control Bylaw be received; and,
	FURTHER that any comments or changes be sent to staff by January 2, 2024. Carried
2024-360	Moved by: M. Wand Seconded by: L. Patey That the memo from Deputy Clerk, K. Bester, regarding the McDonald Street Sale, be received; and,
	FURTHER that Council direct staff to move forward with the sale of each portion of McDonald Street and the purchase prices be based upon the total area being sold to each person as set out in the memo. Carried
2024-361	Moved by: M. Wand Seconded by: L. Patey That the memo from Manager of Operations and Facilities, F. Schmeltz, regarding the Public Works Update, be received. Carried
2024-362	Moved by: L. Patey Seconded by: M. Wand That the memo from Treasurer/Director of Corporate Services, B. Robinson, regarding Rental Space at 250 Clark Street be received; and,
	FURTHER that Council directs staff to meet with Grace House and the Almaguin Adult Learning Centre to discuss rental options. Carried
2024-363	Moved by: M. Wand Seconded by: L. Patey That the report from Councillor Patey regarding a New Municipal Website, be received; and,
	FURTHER that staff be directed to tender out for a redesign of the Municipal Website.

2024-364	Moved by: M. WandSeconded by: L. PateyThat the notice of a public meeting on Tuesday, January 14, 2025, at 6:00 p.m. for a proposed zoning Bylaw Amendment for 44 Purdon Line, be received.Carried
2024-365	Moved by: L. PateySeconded by: M. WandThat the correspondence from the North Bay Lions Club regarding the 50 th Annual DistrictA5 Convention on May 2-4, 2025, be received.Carried
2024-366	Moved by: L. Patey Seconded by: M. Wand That the correspondence dated November 21, 2024, from the Ministry of Northern Development regarding the modernization of the Northern Services Boards Act, be received. Carried
2024-367	Moved by: M. Wand Seconded by: L. Patey That the correspondence from the Ministry of Municipal Affairs and Housing regarding changes to the Planning Act and the province's additional residential unit framework, dated November 28, 2024, be received. Carried
2024-368	Moved by: L. Patey Seconded by: M. Wand That the memo from Councillor Wand regarding the Municipal Landfill be received; and, FURTHER that Council direct senior staff to meet with the Public Works Landfill Attendant and other Public Works staff to develop an immediate plan to improve the condition of the landfill and that the necessary funds are made available to purchase and apply proper cover material at the landfill. Carried
2024-369	Moved by: M. WandSeconded by: L. PateyThat Council now adjourns at 7:09 p.m.Carried

Mayor

Clerk

Powassan & District Union Public Library Minutes for Monday, November 18, 2024 – 6:00 p.m. Board Meeting @ Library

In-person: Tina Martin, Bernadette Kerr, Steve Kirkey, Brenda Lennon, Debbie Piper, Marie Rosset Via Zoom: Pat Stephens, Valerie Morgan

Absent with regrets: Laurie Forth

Absent: Randy Hall

ltem	Action	Responsibility
1. Call to order	6:16 pm	
2. Respect and	Declaration read by CEO	
Acknowledgement	We respectfully acknowledge that we are on	
Declaration	the traditional territory of the Anishinaabe	
	Peoples, in the Robinson-Huron and Williams	
	Treaties areas. We wish to acknowledge the	
	long history of First Nations and Métis	
	Peoples in Ontario and show respect to the	
	neighbouring Indigenous communities. We	
	offer our gratitude for their care for, and	
	teachings about, our earth and our relations.	
	May we continue to honour these teachings	
	and accept their value in our quest to heal our	
	planet.	
E. Gonoral Concert Matien		
5. General Consent Motion:	Motion: 2024.25	
Motion for November 2024	That the Constal Concent Mation for	
which includes:	November 2024 be adopted as presented	
a) Approval of November 18	November 2024 be adopted as presented	
2024 Agenda- amended	Moved by: Steven Kirkey	
b) Approval of Minutes from	Seconded by: Bernadette Kerr	
the October 21 2024	boolded by: Domadelic Refi	
meeting	Adopted as presented	
c) Approval of the October	· · · · · · · · · · · · · · · · · · ·	
2024 Financial Statements	Carried	
d) Approval of October 2024		
Library Reports		
4. Disclosure of pecuniary	None	
interest		
	· · · · · · · · · · · · · · · · · · ·	
5. General Business		
a) New Board Member,	Deferred until next Board Meeting in	
Councillor Randy Hall -	December	
vveicome		

b) Grant Updates	 OTF Capital Grant Replacement of light fixture through Save on Energy has been problematic, resolution ongoing. New Heat pump installation starting November 21st. Upgrades to accessibility features should be done by end of year 	
	 OTF Resilience Grant Second payment received by Municipality Sept 14, 2024 (\$9,000) to be transferred to library. Still have not received funds. End of Grant report to be completed by April 17, 2025 End-of-Grant event needs to be organized prior mid-March 2025 	CEO meet with Municipality of Powassan CAO
	 Senior's Grant Activities proceeding as planned Final report due April 30, 2025 	CEO
	 New Canada Summer Job (CSJ) program Application deadline Dec 19. Laurie Forth volunteered to complete the application again this year. 	Laurie Forth
	 Enbridge Giving Back to Community Grant Approached by Christine Jardine- Wagner with offer of above grant Early 2025 Donation of volunteering and funding Project to be identified – carpet cleaning possibility 	
c) Library Report Update	 CEO presented updated Library Report, which will now report monthly on: total active users usage of new quiet room data from newly installed people counter. rentals - monthly numbers and revenues 	

		1
d) Upcoming Holiday Activities	CEO distributed leaflets with all the planned activities for both children and adults. - Dec 7: Festival of Lights with gathering at library afterward for all participants, Board members and family - Dec 12: Raising readers with visit with Santa, Mayors and Voodoos. - Dec 13: start of Kid' Free Shopping Initiative, open until Dec 20 th or until run out of items - Dec 13: Free Holiday Skate, subsidized by Peter Goulet – Thank You! - Dec 20: Open House with prizes and draws	
e) Janitorial Services	 In 2025 the janitorial services will no longer be provided under the staffing umbrella. Jen Fryer has accepted to continue the janitorial work independently from her library Head Clerk hours. 	
	Motion: 2024-36	
	That janitorial services be provided in house by Jen Fryer.	
	Moved by: Steven Kirkey Seconded by: Brenda Lennon	
	Carried	
6. Correspondence	None	
7. Committee Reports		
a) Property Committee	See above 2. Grants Update - OTF Capital Grant. Other than the light fixture, which has a questionable completion end date, the heat pump and accessibility upgrade should be done by end of December	Contractors
b) Budget Committee	 Committee will present a draft of the 2025 Budget to the Financial Committee (consisting of Budget Committee and three Council Members) on December 16 at 5:30pm. The Board will then meet at 6pm and approve the submitted 2025 budget. 	

c) Policy Committee	- GOV-10 Policy Development Policy	
	Motion: 2024-37 That GOV-10 Policy Development Policy be renewed as is. Moved by: Brenda Lennon Seconded by: Bernadette Kerr Carried	
	GOV-11 Record Retention Policy Policy	
	Motion: 2024-33 That GOV-11 Record Retention Policy be renewed as is. Moved by: Steven Kirkey Seconded by: Debbie Piper Carried	CEO
d) Friends of the Library	Friends raised at least \$1,300 from their end of September Crafting Items Sale. They have agreed to cover 1. cost of a new shelving unit to store the Reference Collection, and 2. renewal of the subscription to the North Bay Nugget. Will request they cover the cost of new vacuum cleaner. Christmas Basket tickets for draw will be available on November 25 th .	
f) Adjournment	Motion: 2024-39 That the November 18, 2024 meeting be adjourned at 7:15 pm Moved by: Pat Stevens	Next meeting: December 16, 2024

Kristine Martin, Chair Chairperson: **Recorder:** \Diamond Marie Rosset, CEO



Chief Administrative Officer's Report

<u>December 2024</u>

Mission Statement

To foster healthier communities by economically providing caring human services that empower and enable the people we serve to improve their quality of life.

Esprit Giving Campaigns

As a reminder, The Orange Door Project campaign continues! From November 12th to December 22rd, Home Depot customers across Canada are being empowered to be a part of the change by making a donation in support of a local charity that provides housing and supportive services. Staff have been attending the store weekly to provide information on our services and programs.



Sponsor-A-Family Program

Wow! We are overwhelmed by the response and support we've already received for our Sponsor-A-Family campaign. In less than 24 hours we had sponsors for almost all of our families!, and they are now fully sponsored!

Each one of these elves represents a family we are supporting though our programs. Your support makes a huge difference in their lives everyday, and especially during the holiday season.

More information can be found on our website at <u>www.espritplace.ca/sponsorafamily/</u>

h h	lish List		
After undergoing a much needed renovation, we o of Esprit Place Family Resource (are pleased to announce the reopening Centre in early 2025!		
The following is a list of items that are in greatest need to support these programs. Please call ahead to arrange drop off times and location 705-746-4800			
Hygiene products (dental care, hair care, etc)	New pots and pans		
Cleaning supplies	New dishes		
New pillows	New linens (dish cloths, tea towels, face cloths, towels)		
New sheets and comforters for single & double	Household management supplies (toilet paper, paper towel)		
 Non-perishable food products 	Financial support or gift cards (gas, groceries, pharmacy, etc). Please call ahead 705-746-7777 Ext. 5125 to make arrangements.		
and the second s	Place		

Esprit Place SPONSOR - A - FAMILY *Jus holiday season Jus hol*

Holiday Wish List

We are seeking donations for our reopening in early 2025. We've created our 'holiday wish list' to help identify the items most in need.

Social Media Stats

Facebook –District of Parry Sound Social Services Administration Board	JUNE 2024	JULY 2024	AUG 2024	SEPT 2024	OCT 2024	NOV 2024
Total Page Followers	601	626	642	657	671	677
Post Reach this Period (# of people who saw post)	5213	5510	6261	5343	2332	3032
Post Engagement this Period (# of reactions, comments, shares)	599	609	512	380	365	257
Facebook -Esprit Place Family Resource Centre	JUNE 2024	JULY 2024	AUG 2024	SEPT 2024	OCT 2024	NOV 2024
Facebook -Esprit Place FamilyResource CentreTotal Page Followers	JUNE 2024 192	JULY 2024 193	AUG 2024 196	SEPT 2024 198	OCT 2024 199	NOV 2024 209
Facebook -Esprit Place Family Resource CentreTotal Page FollowersPost Reach this Period (# of people who saw post)	JUNE 2024 192 421	JULY 2024 193 526	AUG 2024 196 1782	SEPT 2024 198 275	OCT 2024 199 124	NOV 2024 209 3103

DSSAB LinkedIN Stats	JUNE	JULY	AUG	SEPT	ОСТ	NOV
https://bit.ly/2YyFHlE	2024	2024	2024	2024	2024	2024
Total Followers	474	478	485	488	492	501
Search Appearances (in last 7 days)	178	226	184	90	64	10
Total Page Views	26	26	26	84	69	55
Post Impressions	1089	1251	1241	243	154	1800
Total Unique Visitors	15	11	13	41	38	23

Instagram - Esprit Place Family Resource Centre https://www.instagram.com/espritplace/	JUNE 2024	JULY 2024	AUG 2024	SEPT 2024	OCT 2024	NOV 2024
Total Followers	74	83	85	93	93	97
# of accumulated posts	23	25	27	36	37	53

Licensed Child Care Programs

Total Children Utilizing Directly Operated Child Care in the District October 2024

Age Group	Fairview ELCC	First Steps ELCC	Highlands ELCC	Waubeek ELCC	НССР	Total
Infant (0-18M)	3	2	1	5	15	26
Toddler (18-30M)	5	5	14	17	35	76
Preschool (30M-4Y)	16	14	16	32	41	119
# of Active Children	24	21	31	54	91	221

The overall enrollment has not changed in the month of October although several children have aged up to the next age-grouping.

School Age Programs October 2024

Location	Enrollment
Mapleridge After School	26
Mapleridge Before School	8
Mapleridge Summer Program	N/A
Sundridge Centennial After School	13
Home Child Care	19
# of Active Children	66

Both Mapleridge and Sundridge School Age Programs are now operating at capacity.

Inclusion Support Services October 2024

Age Group	EarlyON	Licensed ELCC's	Monthly Total	YTD Total	Waitlist	New Referrals	Discharges
Infant (0-18M)	0	2	2	4	0	0	0
Toddler (18-30M)	5	4	9	19	3	3	1
Preschool (30M-4Y)	1	32	33	51	7	0	1
School Age (4Y+)	7	32	39	30	2	0	15
Monthly Total	13	70	83	-	12	3	17
YTD Total	19	85	-	104	39	40	44

The ISS Resource Consultants continue to discharge children that have fully transitioned to school and are now receiving services through the school boards.

EarlyON Child and Family Programs October 2024

Activity	Monthly Total	YTD
Number of Children Attending	989	9,582
Number of New Children Attending	44	372
Number of Adults Attending	801	7,473
Number of Virtual Programming Events	10	101
Number of Engagements through Social Media	1,080	7,333
Number of Views through Social Media	16,796	140,485

There were 265 more visits by children this month in the EarlyON Child and Family Centres with 44 new children in attendance that have not previously visited a program. With the children, there was an increase of 236 adults attending one or more programs.

Funding Sources for District Wide Childcare Spaces - October 2024

Funding Source - Active	# of Children	# of Families
CWELCC*	56	54
CWELCC Full Fee	190	188
Extended Day Fee Subsidy	5	5
Fee Subsidy	33	27
Full Fee	28	26
Ontario Works	2	2
Total	314	302

Funding Source - New	# of Children	# of Families
CWELCC*	2	2
CWELCC Full Fee	5	5
Extended Day Fee Subsidy	2	2
Fee Subsidy	5	4
Full Fee	1	1
Ontario Works		
Total	15	14

Exits	# of Children	# of Families
Fee Subsidy	0	0
CWELCC Full Fee	0	0
Extended Day Fee Subsidy	0	0
Total	0	0

* CWELCC: Canada-Wide Early Learning Child Care; eligible for children 0 - 6



Ontario Works Intake - Social Assistance Digital Application (SADA) & Local Office Ontario Works Applications Received



7



ODSP Participants in Ontario Works Employment Assistance

The OW Caseload continues to plateau at **616**, but it should be noted that as of September 2024, the caseload is up 6% over 2023. We are supporting **40** ODSP participants in our Employment Assistance program. We also have **61** Temporary Care Assistance cases. We received **61** Ontario Works Applications, 48 (79%) of which were online through SADA and managed through IBAU in the month of October.



Employment Assistance & Performance Outcomes

8



As we are firmly entrenched in autumn, we continue to support people to exit the program through employment. We exceeded our performance in October from the same time in 2023. We also had 8.4% of caseload exit OW for any reason.



MyBenefits Enrollment 2024

9

DBD Enrollment



Income Support & Stability Update

Income Support and Stability Program Case Management involves the coordination of appropriate services and the provision of consistent and on-going weekly or bi-weekly supports, required by the individual to succeed in achieving and maintain life stabilization goals.

Contact / Referrals - October 2024

The data collected is initial contact made with a client to determine eligibility for on going support. This includes ongoing Housing Stability and Ontario Works cases.



Emergency Assistance Applications October 2024

An application can be created when the applicant is not currently in receipt of social assistance, or not serving a period of ineligibility. Administrator also must be satisfied the applicant to the best of their ability made a reasonable effort to access other resources.



Client Referrals

Clients who identify as experiencing homelessness, or at immediate risk of homelessness

October 2024	East	West	YTD
Homeless	0	4	37
At Risk	1	5	80
Program Total (Esprit In Shelter Clients calculated in Homelessness Numbers)			117
Esprit Outreach Homeless	0	0	0
Esprit Outreach at Risk	0	0	0
Esprit in Shelter	1		3

Short Term Housing Allowance

Max of \$400 for 6 months

	Active	YTD
October	10	14

Household Income Sources and Issuance from Homelessness Prevention Programs Funding (HPP)

October 2024 Income Source	Total	НРР		
Senior	3	\$2,100.00		
ODSP	2	\$11,336.84		
Ontario Works	13	\$8,533.16		
Low Income	13	\$2,760.50		
No Income				

October 2024 Reason for Issue	Total
Rental Arrears	\$7,920.00
Utilities/Firewood	\$2,500.72
Transportation	
Food/Household/Misc.	\$14,309.78
Emergency Housing	
Total	\$24,730.50

By-Name List Data September 1, 2021– October 31, 2024

The By Name List is real-time list of all known people who are experiencing homelessness in our community that are willing to participate in being on the list and connecting with our agency for ongoing support to maintain affordable and sustainable housing. The individuals who are connected to this program are provided Intense Case Management supports with the foundations from Coordinated Access.



Through the end of October, we have housed 60% of all people that have been active on our By Name List. 39% of those active on our By Name List are experiencing Chronic Homelessness. Our transitional housing program in East Parry Sound remains at capacity.

Housing Programs

Social Housing Centralized Waitlist Report October 2024					
	East Parry Sound	West Parry Sound	Total		
Seniors	48	131	179		
Families	128	463	591		
Individuals	508	159	667		
Total	684	753	1437		
Total Waitlist Unduplicated402					

Social Housing Centralized Waitlist (CWL) 2023 - 2024 Comparison Applications and Households Housing from the CWL

Month 2023	New App.	New SPP	Cancelled	Housed	SPP Housing	Month 2024	New App.	New SPP	Cancelled	Housed	SPP Housing
Jan	5	1	13			Jan	3		2	1	
Feb	5	1	10			Feb	5		11	1	
Mar	6		35			Mar	7		3	3	
Apr	11		17	6		Apr	10	1	7		
May	13	2	9	2		May	4	1	5	1	
June	9	1	2	1		June	1		15	3	
July	5	1	5	1		July	9	1	19		
Aug	14	1	3	1		Aug	9	1	21		
Sept	12		4			Sept	6		16	2	
Oct	8	1	1	4	2	Oct	6		9		
Nov	12		3			Nov					
Dec	1		2	3	3	Dec					
Total	101	8	104	18	5	Total	60	4	108	15	

SPP = Special Priority Applicant

- Housing Programs had 6 new applications to the centralized waitlist, one being an approved Special Priority Program (SPP) application.
- There were 9 applications cancelled in October. 3 were cancelled at the applicants request, 2 were ineligible due to income or assets in excess, 2 were deceased, and 2 were unable to be contacted.
- 4 applicants were housing in the month of October.

Parry Sound District Housing Corporation October 2024

Activity for Tenant Services

	Current	YTD
Move outs	3	29
Move in	4	32
L1/L2 forms	0	4
N4 - notice of eviction for non payment of rent	1	4
N5 - notice of eviction disturbing the quiet enjoyment of the other occupants	3	8
N6 - notice of eviction for illegal acts or misrepresenting income for RGI housing	0	0
N7 - notice of eviction for willful damage to unit	0	1
Repayment agreements (formal & informal)	1	51
No Trespass Order	0	4
Tenant Home Visits	47	331
Mediation/Negotiation/Referrals	9	151
Tenant Engagements/Education	1	42

Property Maintenance & Capital Projects October 2024

Pest Control		3 buildings are currently being inspected monthly for bedbugs; 10 units treated for bedbugs.
Vacant Units	10	one-bedroom (9); multiple bedroom (1) (asbestos abatement, and significant repair contributes to longer vacancy times)
Vacant Units - The Meadow View	7	5-one bedroom (market), 2-studio (affordable) vacant
After Hours Calls	9	Lock out, leaks, no hot water, washing machine malfunction.
Work Orders	138	Work orders are created for our staff to complete routine maintenance repairs
Purchase Orders	200	Purchase orders are for services, and materials required outside of the Housing Operations Department
Fire Inspections	0	
Annual Inspections	0	
Incident Reports	0	

Esprit Place Family Resource Centre

Emergency Shelter Services	October 2024	YTD
Number of women who stayed in shelter this month This month's stats include women who were housed in a hotel	0	31
Number of children who stayed in the shelter this month <i>This month's stats include women who</i> <i>were housed in a hotel</i>	0	14
Number of hours of direct service to women (shelter and counselling)	98	1239
Number of days at capacity	0	0
Number of days over capacity	0	0
Overall capacity %	-	-
Resident bed nights (women & children)	-	-
Phone interactions (crisis/support)	45	311

- Please note: Esprit Place closed for renovations mid April 2024. Statistics are reflective of minimum occupancy during closure preparations, but accurately reflect outreach and business day crisis line management.
- We are also currently housing 1 family of three, and 1 woman in two transitional housing units.

Transitional Support	October 2024	YTD
Number of women served this month	6	35
Number of NEW women registered in the program	1	17
Number of public ed/groups offered		0

Child Witness Program	October 2024	YTD
Number of children/women served this month	0	119
Number of NEW clients (mothers and children) registered in the program	0	11
Number of public ed/groups offered	0	2

The Golden Sunshine Municipal Non-Profit Housing Corporation Minutes of the Board of Directors Meeting 2024- 11

November 19, 2024

A regular meeting of the Golden Sunshine Municipal Non-Profit Housing Corporation board was held on Tuesday November 19, 2024.

Present: Bernadette Kerr, Mieke Krause, Nancy McFadden, Tom Piper, Dave Britton, Kalvin Young

Regrets: Amber McIsaac. Leo Patey

1. Call to order

Resolution No. 2024-74– Moved by Kalvin, seconded by Mieke that the meeting was called to order at 9:30 am. Carried

- 2. Additions to Agenda none
- 3. Approval of the Agenda

Resolution No. 2024-75– Moved by Kalvin, seconded by Mieke that the agenda be adopted as presented.

- 4. Conflict of Interest Disclosure None
- 5. Approval of the Minutes from the October 15, 2024, board meeting

Resolution No. 2024-76– Moved by Kalvin, seconded by Nancy that the minutes from the board meeting on October 15, 2024, were adopted as presented.

6. Business arising

a) OPHI

The \$64,000 in funding has been received and the following projects were completed; purchase drawing for accessible patio upgrades, paint building interior, replace ceiling tiles, replace rotting wood siding and install automatic door openers on garbage room doors.

\$160, 000 OPHI 2024-2025 agreement will need to be signed before December 31st, 2024. The GSMNP received the report from the DSSAB with the recommendation to upgrade patio entrances and elevator modernization. 2025 will see one project completed with this funding. Amber will be advised to follow up with this request.

b) DSSAB Service Agreement

Pam Nelson and Meaghan Mullen presented the proposed service agreement. Verified we had insurance, went over schedule A, B, C &D. Clarified section D is part of the Capital Repair funding, amount per unit is \$5000, same as before but is not guaranteed for the 10-year contract term. Financials are re-visited after 5 years. In 2023 we received \$30,000 in funding to cover RGI subsidy and created a surplus of \$16,000. The funding has made it possible for very health reserves. In the event the DSSAB did not give the GSMNP any funding the reserves would still remain healthy.

c) Pines 2, Request to hold mortgage

Differed to December's meeting.

7. Correspondences

a) Christmas Gift Cards

Resolution No. 2024-77 Moved by Tom, seconded by Dave that the Golden Sunshine Municipal Non-Profit Housing association will present Christmas Gift cards or payment by cheque as per employees/volunteers wishes. Non-council appointed board members, Kalvin Young, Nancy McFadden, Mieke Krause, \$150.00. Property Manager, Amber McIsaac \$500.00. Maintenance, Tim Young, \$300. Cleaner, Rhondalee Czaikowsky \$200.00

b) Financials

World source financials, Capital Account, statement for the period of July 1 to September 30th, reviewed by the board and accepted.

Resolution No. 2024-78 Moved by Nancy, seconded by Kal that the board approves the October 2024 Transaction Report as presented. Carried

Resolution No. 2024-79 Moved by Tom, seconded by Dave that the board approves the October 2024 Income Statement as presented. Carried

8. Next Board Meeting – December 17, 2024 at 9:30am with Christmas Brunch for all board members and staff.

9. Adjournment - Resolution No. 2024-07 – Moved by Kal, seconded by Tom that the board meeting be adjourned. Carried

President, Bernadette Kerr

Recorded by Tom Piper scribed by Amber McIsaac



To: CouncilFrom: OperationsRe: December Public Works and Facilities Update

RECOMMENDATION:

Received for information purposes.

ANALYSIS:

The installation of the temporary support posts at the Trout Creek Arena was completed the first week of December. The posts were then marked for location, by Tatham Engineering. Monitoring the post indicators is ongoing during and after each snow event. Monitoring is completed daily while there is a snow load on the roof or if snowfall is expected. After each snow event, public works has been clearing the snow along the side of the building as per the Engineer's recommendations.

Late in December, the IT department replaced "cut" wires in the Sportsplex sound system. While completing these repairs, it was discovered the center ice speaker was improperly wired. IT rewired the speaker to function correctly, and it will be an addition to the audio for the building. Two speakers were replaced in the lobby and, with the new wiring, the system works as intended.

One of the public works pickup trucks required a transmission rebuild. The repair took 8 days to complete but the truck is back in the lineup and working as intended. The 2013 Freightliner snowplow was down for ten days during the month.

A sewer break was repaired on Spetz Ave. The repair included 11m of sanitary pipe and the installation of two cleanouts.

Additional tasks completed during the month included trimming trees, pulling of beaver dams to prevent road flooding, maintenance of street lighting, pothole repairs, snow removal, and equipment maintenance.

At the December 3, 2024 meeting, Council asked senior staff to meet with the landfill attendant to discuss a plan for the landfill. The Director of Corporate Services/Treasurer and Manager of Operations went to the landfill site and met with the attendant. The only change to this plan from previous discussions with the landfill attendant are the use of fill materials for coverage and road/berm building instead of a more expensive gravel use, as previously requested by the operator.

It was discussed using existing on-site material to build a containment berm. Currently there is an adequate amount of clay soil fill available at the landfill to build the containment berm. Once the berm has been established, the next "lift" platform/ramp can be established using portions of the existing shred mixed with fill materials for stability. Once the ramp has been roughly established, Operations will determine if a load bearing surface of gravel will need to be applied to the road/ramp.

Fill materials will be received through day-to-day operations along with materials gained from public works activities such as ditching and waste from sewer/water main digs. Ongoing coverage operations will also be completed with soils, sands, and gravels/overburden as recommend by our landfill engineering firm.

The above plan can be achieved with the use of a contractor; however, Operations recommends the purchase of a piece of landfill equipment as noted in a previous memo to council. Purchasing equipment will give the landfill operator and the municipality the ability to tightly manage compaction and the building of containment berms and road systems within our landfill.

Winter operations 14 days.

The 2013 Freightliner was down for 10 days. The bolts on the compressor came loose so the replaced the 2 o-rings and put lock tight on the bolts when putting it back together. Roughly two days later we picked it up and only made it to Trout Creek and the oil leaked out at Mcfadden Line. Had it towed to freightliner as they were at a loss for why the compressor was coming loose. Freightliner replaced the compressor with a new one as well as fixed the fan that was running continuously. We picked the 2013 FI up on Dec 18.

Trimmed trees in Trout Creek and Powassan, pulled a beaver dam on Moyels Line, (beaver dam is on private property) was flooding Moyels Line.

Dec 2nd the 710 backhoe went to j&j for hydraulic oil overheating. We picked it back up repaired on Dec 16, there was a hydraulic valve by-passing.

Had electrician test outlets on Main St light posts. Installed remaining wreaths and banners.

Dec 8th the transmission failed in the gmc ³/₄ ton, was brought to Mr. Transmission on Dec 10th, and had the transmission rebuilt. We picked it back up on Dec 16th.

Removed snow in Handicap parking spots on Main St Dec 10th.

Fixed hole in walking bridge at Queens St Dec 11.

Changed oil in the grader.

Pulled Beaver dam from culvert on oakwood Rd.

Dec 16th, garbage truck went to Powassan Auto for broken wheel stud. We had it back the following morning. They recommend we re-torque the rear wheels every week as this is an ongoing issue.

Removed snow from the East side of the Trout Creek Community Center Dec 16th.

Dec 17th, replaced a broken sanitary sewer lateral at 326 Spetz Ave. 11m of 4" sanitary service and 2 clean outs installed.

Dec 17, PTO valve on the 2011 Fl broke, picked up a new one and had it replaced.

Dec 19th the 2011 FI sander would not work, was diagnosed to be the Rexroth sander controller needing to be reset.

Collected garbage.

THE CORPORATION OF THE MUNICIPALITY OF POWASSAN

BYLAW NO. 2025-01

Being a Bylaw to authorize temporary borrowing from time to time to meet current expenditures during the fiscal year 2025 and ending December 31, 2025

WHEREAS Section 407 of the Municipal Act, 2001, as amended, provides authority for a Council by Bylaw to authorize the Head of Council or the Treasurer or both of them to borrow from time to time, such sums as the Council considers necessary to meet, until taxes are collected and other revenues are received, the current expenditures of the Municipality for the year; and,

WHEREAS the total amount which may be borrowed from all sources at any one time to meet the current expenditures of the Municipality, except with the approval of the Municipal Board, is limited by Section 407 of the Municipal Act, 2001;

NOW THEREFORE the Council of the Corporation of the Municipality of Powassan enacts as follows:

- 1. That the Head of Council or the Treasurer or both of them are hereby authorized to borrow from time to time during the fiscal year (hereinafter referred to as the current year) such sums as may be necessary to meet, until taxes are collected and other revenues are received, the current expenditures of the Municipality for the current year.
- 2. That the lender(s) from whom amounts may be borrowed under authority of this Bylaw shall be Scotiabank and such other lender(s) as may be determined from time to time by Bylaw of Council.
- 3. That the total amount which may be borrowed at any one time under this Bylaw, plus any outstanding amounts of principal borrowed and accrued interest under Section 407 together with the total of any similar borrowings that have not been repaid, shall not exceed, from January 1st to September 30th of the current year, 50 percent of the total estimated revenues of the Municipality as set out in the budget adopted for the current year, and from October 1st to December 31st of the current year, 25 percent of the total estimated revenues of the Municipality as set out in the budget adopted for the current year; or \$600,000.00, whichever is less.
- 4. That the Treasurer shall, at the time when any amount is borrowed under this Bylaw, ensure that the lender is or has been furnished with a certified copy of this Bylaw, a certified copy of the resolution mentioned in Section 2 determining the lender, if applicable, and a statement showing the nature and amount of the estimated revenues for the current year and also showing the total of any other amounts borrowed from any and all sources under authority of Section 407 of the Municipal Act that have not been repaid.
- 5. That if the budget for the current year has not been adopted at the time an amount is borrowed under this Bylaw, the limitation on total borrowing, as set out in Section 3 of this Bylaw, shall be temporarily calculated until such budget is adopted using the estimated revenues of the Municipality as set forth in the budget adopted for the next previous year.
- 6. That for purposes of this Bylaw, estimated revenues referred to in Section 3, 4, and 5, do not include revenues derivable or derived from, a) any borrowing, including through any issue of debentures; b) a surplus, including arrears of taxes, fees or charges; or c) a transfer from the capital fund, reserve funds or reserves.
- 7. That the Treasurer be and is hereby authorized and directed to apply in payment of all or any sums borrowed under this Bylaw, together with interest thereon, all or any of the moneys hereafter collected or received, either on account of or realized in respect of the taxes levied for the current year and previous years or from any other source, that may be lawfully applied for such purpose.
- 8. That evidences of indebtedness in respect of borrowings made under Section 1 shall be signed by the Head of the Council or conform to the Treasurer or both of them.
- 9. That the lender shall not be responsible for establishing the necessity of temporary borrowing under this Bylaw or the manner in which the borrowing is used.
- 10. That this Bylaw shall take effect on January 1, 2025.

READ a **FIRST** and **SECOND** time and considered **READ** a **THIRD** and **FINAL** time and adopted as such in open Council meeting this the 7th day of January 2025, for the immediate wellbeing of the Municipality.

Mayor

Clerk

THE CORPORATION OF THE MUNICIPALITY OF POWASSAN

BYLAW NO. 2025-02

Being a Bylaw to provide for an interim Tax Levy for 2025

WHEREAS a local municipality, before the adoption of the estimated for the year under section 317 of the Municipal Act, 2001, S.O. 2001, c.25, may pass a Bylaw levying amounts on the assessment of property in the local municipality ratable for local municipal purposes; and,

WHEREAS the amount levied on the property shall not exceed 50 percent of the total amount of taxes for municipal and school purposes levied on the property for the previous year;

NOW THEREFORE the Council of the Corporation of the Municipality of Powassan enacts as follows:

CLASS	RATE
Residential/Farm	0.00699359
Multi-residential	0.01299876
New Multi-Residential	0.00699359
Commercial Occupied	0.01345883
Commercial Vacant Units	0.01074119
Commercial Vacant Land	0.01074119
Commercial New Construction	0.01345883
Industrial Occupied	0.01530046
Industrial Vacant Units	0.01148530
Industrial New Construction	0.01530046
Large Industrial	0.01829233
Large Industrial Excess Land	0.01343001
Pipelines	0.01023039
Farmlands	0.00174840
Managed Forests	0.00174840
Landfills	0.01829886

1. That an interim tax rate be imposed and levied on the whole of the assessment for real property in the following classes according to the last revised assessment roll:

2. That the said interim levy shall become due and payable on the **31st day of March**, **2025** and nonpayment of the amount on the dates stated in accordance with this section shall constitute default.

- 3. That a charge of one and one-quarter percent (1 ¼%) shall be imposed as a penalty for non-payment of taxes in accordance with section 345 (2) the Municipal Act, 2001, S.O. 2001, c.25, and shall be added to the amount of taxes due and unpaid, on the first day of default. Therefore after, in accordance with section 345(3) of the Municipal Act, 2001, S.O. 2001, S.O. 2001, c. 25, interest charges of one and one-quarter percent (1 ¼%) each month of the amount of taxes due and unpaid, shall be imposed for non-payment of taxes not accruing before the first day of default.
- 4. That the Treasurer may mail or cause the same to be mailed to the resident or place of business of such person indicated on the last revised assessment roll, a written or printed notice specifying the amount of taxes payable.
- 5. That the taxes be payable at the Municipality of Powassan, <u>PO Box 250</u>, 250 Clark Street, Powassan, Ontario, P0H 1Z0.
- 6. That this Bylaw shall take effect upon its adoption.

READ a **FIRST** and **SECOND** time and considered **READ** a **THIRD** and **FINAL** time and adopted as such in open Council meeting this the 7th day of January 2025, for the immediate wellbeing of the Municipality.

Mayor

Clerk

Solicitor General

Office of the Solicitor General

25 Grosvenor Street, 18th Floor Toronto ON M7A 1Y6 Tel: 416 326-5000 Toll Free: 1 866 517-0571 Minister.SOLGEN@ontario.ca

Solliciteur général

Bureau du solliciteur général

25, rue Grosvenor, 18^e étage Toronto ON M7A 1Y6 Tél. : 416 326-5000 Sans frais : 1 866 517-0571 Minister.SOLGEN@ontario.ca



December 02, 2024

His Worship Peter McIsaac Mayor Municipality of Powassan pmcisaac@powassan.net

Dear Mayor McIsaac:

Our government is proud to have a strong working relationship with both our municipal partners and the police services that keep our communities safe. The collective agreement that was reached between the province and the Ontario Provincial Police Association (OPPA) earlier this year reflects this strong relationship and will support our brave women and men in uniform across Ontario.

At the same time, we understand the impact these changes are having on the budgets of municipalities that are served by the OPP, including your own, which is why we are stepping up with additional provincial support. With that in mind, I am pleased to share with you the following proposed billing changes:

- A 3.75 per cent reduction of the total 2023 reconciled costs to all communities to approximate the full (100 per cent) impact of the Ontario Provincial Police Association (OPPA) salary increases, excluding the 1 per cent increase that was built into the 2023 estimates; and
- A 44 per cent reduction on overtime 2023 reconciled costs to all communities;
- A 10 per cent reduction of 2025 invoice amounts to all communities to approximate the full (100 per cent) impact of the OPPA salary increases excluding the 1 per cent increase that was already built into the 2023 estimate.

These changes would provide over \$77 million in relief to OPP-policed municipalities.

The total billing statement that was initially provided to you for 2025, inclusive of the increases resulting from the new collective agreement, was \$572,098. Today's proposed billing changes will provide an estimated \$84,055 in financial relief for your municipality, bringing the new total for OPP services being billed to your municipality in 2025 to \$488,044.

In addition to these changes, the Government of Ontario is continuing its annual \$125 million Court Security & Prisoner Transportation Transfer Payment Program for the 2025 calendar year. The province will also be examining options for reviewing the OPP billing model to ensure that it meets the needs of communities across the province.

If you have any questions, please contact Ryan Whealy, Deputy Director of Issues and Legislative Affairs, at <u>Ryan.Whealy@ontario.ca</u>.

Thank you for your continued collaboration, valuable relationship, input and dedication to ensuring the safety and well-being of your community.

Sincerely,

Chundhul Fren

Michael Kerzner Solicitor General

Ontario Police Provincial provinciale Police de l'Ontario

Municipal Policing Bureau Bureau des services policiers des municipalités

777 Memorial Ave.	777, avenue Memorial				
Orillia ON L3V 7V3	Orillia ON L3V 7V3				
Tel: 705 329-6140	Tél. : 705 329-6140				
Fax: 705 330-4191	Téléc.: 705 330-4191				
File Reference:	612-20				

December 19, 2024

Dear Mayor/Reeve/CAO/Treasurer,

Further to the letter sent to you by the Solicitor General on November 29, 2024, please find attached your revised OPP municipal policing 2025 Annual Billing Statement package.

As per the amended Ontario Regulation 413/23, a discount has been applied to the 2023 yearend reconciliation statement that includes both a 44 per cent discount on reconciled overtime costs as well as a 3.75 per cent discount on total 2023 reconciled costs (after the discount on overtime is applied). Additionally, a 10 per cent discount has been applied to the total 2025 estimated costs.

The Municipal Policing Bureau will be hosting rescheduled webinar information sessions on Wednesday, January 15, 2025 at 2:00 p.m. and on Friday, January 17, 2025 at 9:00 a.m. E-mail invitations will be forwarded to your municipality. The webinar content will be the same on both dates, please accept the invitation for the date that works best for your schedule.

If you have questions about the Annual Billing Statement, please e-mail OPP.MPB.Financial.Services.Unit@OPP.ca.

Yours truly,

the find

S.B. (Steve) Ridout Superintendent Commander - Municipal Policing Bureau

OPP 2025 Annual Billing Statement - Revised

Powassan M

Estimated costs for the period January 1 to December 31, 2025

Please refer to www.opp.ca for 2025 Municipal Policing Billing General Information summary for further details.

			Cost per Property \$	Total Cost \$
Base Service	Property Counts	-		
	Household	1,523		
	Commercial and Industrial	99		
	Total Properties	1,622	189.44	307,265
Calls for Service	(see summaries)			
	Total all municipalities	209,489,870		
	Municipal portion	0.0954%	123.19	199,815
Overtime	(see notes)		15.74	25,524
Prisoner Transportation	(per property cost)		1.67	2,709
Accommodation/Cleaning Serv	ices (per property cost)	_	5.70	9,245
Total 2025 Estimated Cost			335.73	544,558
10% Discount on 2025 Estimate	ed Costs		(33.57)	(54,456)
Total 2025 Estimated Cost After	r Discount	=	302.16	490,102
2023 Year-End Adjustment	(see summary)			(2,058)
Revised Grand Total Billing for	2025			488,044
Revised 2025 Monthly Billing A	mount			40,670

Notes

A 10% Discount has been applied to the grand total of all 2025 estimated costs. The 2023 Year-End Adjustment also includes discounts applied to 2023 reconciled costs (44% on OT and 3.75% on total reconciled costs), see 2023 reconciled statement page for more information.

OPP 2025 Annual Billing Statement

Powassan M Estimated costs for the period January 1 to December 31, 2025

Notes to Annual Billing Statement

- Municipal Base Services and Calls for Service Costs The costs allocated to municipalities are determined based on the costs assigned to detachment staff performing municipal policing activities across the province. A statistical analysis of activity in detachments is used to determine the municipal policing workload allocation of all detachment-based staff as well as the allocation of the municipal workload between base services and calls for service activity. For 2025 billing purposes the allocation of the municipal workload in detachments has been calculated to be 50.7 % Base Services and 49.3 % Calls for Service. The total 2025 Base Services and Calls for Service cost calculation is detailed on the Base Services and Calls for Service Cost Summary included in the municipal billing package.
- 2) Base Services The cost to each municipality is determined by the number of properties in the municipality and the standard province-wide average cost per property of \$189.44 estimated for 2025. The number of municipal properties is determined based on MPAC data. The calculation of the standard province-wide base cost per property is detailed on Base Services and Calls for Service Cost Summary included in the municipal billing package.
- 3) Calls for Service The municipality's Calls for Service cost is a proportionate share of the total cost of municipal calls for service costs calculated for the province. A municipality's proportionate share of the costs is based on weighted time standards applied to the historical billable calls for service. The municipality's total weighted time is calculated as a percentage of the total of all municipalities.
- 4) Overtime Municipalities are billed for overtime resulting from occurrences in their geographic area and a portion of overtime that is not linked specifically to a municipality, such as training. Municipalities are not charged for overtime identified as a provincial responsibility. The overtime activity for the calendar years 2020, 2021, 2022, and 2023 has been analyzed and averaged to estimate the 2025 costs. The costs incorporate the estimated 2025 salary rates and a discount to reflect overtime paid as time in lieu. The overtime costs incurred in servicing detachments for shift shortages have been allocated on a per property basis based on straight time. Please be advised that these costs will be reconciled to actual 2025 hours and salary rates and included in the 2027 Annual Billing Statement.
- 5) Court Security and Prisoner Transportation (CSPT) Municipalities with court security responsibilities in local courthouses are billed court security costs based on the cost of the staff required to provide designated court security activities. Prisoner transportation costs are charged to all municipalities based on the standard province-wide per property cost. The 2025 costs have been estimated based on the 2023 activity levels. These costs will be reconciled to the actual cost of service required in 2025.

There was no information available about the status of 2025 Court Security Prisoner Transportation Grant Program at the time of the Annual Billing Statement preparation.

6) Year-end Adjustment - The 2023 adjustment accounts for the difference between the amount billed based on the estimated cost in the Annual Billing Statement and the reconciled cost in the Year-end Summary. The most significant year-end adjustments are resulting from the cost of actual versus estimated municipal requirements for overtime, contract enhancements and court security.

OPP 2025 Estimated Base Services and Calls for Service Cost Summary Estimated Costs for the period January 1, 2025 to December 31, 2025

				Total Base Services	Base	Calls for	
Salaries and Benefits	Positions	Base		and Calls for Service	Services	Service	
	FTE	%	\$/FTE	\$	\$	\$	
Uniform Members Note 1							
Inspector	26.56	100.0	187,318	4,975,177	4,975,177	-	
Staff Sergeant-Detachment Commander	8.60	100.0	156,717	1,347,770	1,347,770	-	
Staff Sergeant	38.53	100.0	168,657	6,498,335	6,498,335	-	
Sergeant	226.23	50.7	143,480	32,459,478	16,460,024	15,999,454	
Constable	1,618.15	50.7	120,835	195,529,705	99,147,813	96,381,892	
Part-Time Constable	. 11.97	50.7	91,572	1,096,112	555,839	540,272	
Total Uniform Salaries	1,930.04			241,906,577	128,984,959	112,921,618	
Statutory Holiday Payout			6,207	11,906,411	6,262,929	5,643,483	
Shift Premiums			1,129	2,095,821	1,062,740	1,033,081	
Uniform Benefits - Inspector			29.47%	1,466,114	1,466,114	-	
Uniform Benefits - Full-Time Salaries			36.38%	85,791,541	44,909,750	40,881,790	
Uniform Benefits - Part-Time Salaries			18.75%	205,571	104,245	101,326	
Total Uniform Salaries & Benefits				343,372,035	182,790,737	160,581,298	
Detachment Civilian Members Note 1							
Detachment Administrative Clerk	164.29	50.7	75.342	12.377.949	6.276.748	6.101.201	
Detachment Operations Clerk	3.41	50.7	69.798	238.011	120.750	117.260	
Detachment Clerk - Typist	1.74	50.7	62.349	108.488	54.867	53.620	
Court Officer - Administration.	28.73	50.7	92.124	2.646.719	1.342.245	1.304.474	
Crimestoppers Co-ordinator	0.89	50.7	73.240	65.184	32.958	32.226	
Cadet	1.62	50.7	51.219	82.974	41.999	40.975	
Total Detachment Civilian Salaries	. 200.68			15,519,324	7,869,568	7,649,757	
Civilian Benefits - Full-Time Salaries			36.13%	5,606,608	2,843,009	2,763,599	
Total Detachment Civilian Salaries & Benefits				21,125,933	10,712,577	10,413,355	
Support Costs - Salaries and Benefits Note 2			6 602	42 006 527	6 702 220	6 44 4 207	
Communication Operators		• • • • •	6,682	12,896,527	6,782,230	6,114,297	
Prisoner Guards			2,061	3,977,812	2,091,915	1,885,897	
Operational Support			7,119	13,/39,955	7,225,785	6,514,170	
			3,208	6,191,568	3,256,120	2,935,448	
Office Automation Support			157	303,016	159,355	143,001	
Mobile and Portable Padio Support			930 257	1,010,378	952,070	006,000 277 976	
Total Support Staff Salaries and Benefits Costs			357	29 612 554	20 821 997	18 780 557	
Total Support Star Salaries and Denents Costs				404 110 531	20,031,337	100 775 210	
Total Salaries & Benefits				404,110,521	214,335,311	189,775,210	
Other Direct Operating Expenses Note 2							
Communication Centre			150	289,506	152,250	137,256	
Operational Support			1,112	2,146,204	1,128,680	1,017,524	
RHQ Municipal Support			360	694,814	365,400	329,414	
Telephone			1,458	2,813,998	1,479,870	1,334,128	
Mobile Radio Equipment Repairs & Maintenance			168	326,258	171,540	154,718	
Office Automation - Uniform			4,487	8,660,089	4,554,305	4,105,784	
Office Automation - Civilian			1,154	231,585	116,485	115,100	
Vehicle Usage			10,219	19,723,079	10,372,285	9,350,794	
Detachment Supplies & Equipment			1,073	2,070,933	1,089,095	981,838	
Uniform & Equipment			2,360	4,583,144	2,409,725	2,173,418	
Uniform & Equipment - Court Officer			1,037	29,793	15,109	14,684	
Total Other Direct Operating Expenses				41.569.403	21.854.744	19.714.660	
	or Somies	Cost		¢ 445 670 005	6 336 400 055	¢ 200,400,070	
Total 2025 Municipal base services and Calls f	or service	COST		\$ 445,679,925	\$ 236,190,055	ې 209,489,870 ې 209,489,870	
Total OPP-Policed Municipal Properties					1,246,809		
Base Services Cost per Property					\$ 189.44		

OPP 2025 Estimated Base Services and Calls for Service Cost Summary

Estimated Costs for the period January 1, 2025 to December 31, 2025

Notes:

Total Base Services and Calls for Service Costs are based on the cost of salary, benefit, support and other direct operating expenses for staff providing policing services to municipalities. Staff is measured in full-time equivalent (FTE) units and the costs per FTE are described in the notes below.

1) Full-time equivalents (FTEs) are based on average municipal detachment staffing levels for the years 2020 through 2023. Contract enhancements, court security, prisoner transportation and cleaning staff are excluded.

The equivalent of 85.71 FTEs with a cost of \$17,779,996 has been excluded from municipal costs to reflect the average municipal detachment FTEs required for provincially-mandated responsibilities eligible for Provincial Service Usage credit.

Salary rates are based on weighted average rates for municipal detachment staff by rank, level, and classification. The 2025 salaries incorporate the 2025 general salary rate increase set in the 2023 to 2026 OPPA Uniform and Civilian Agreements (uniform and civilian staff - 4.75% in 2023, 4.50% in 2024 and 2.75% in 2025.)

The benefit rates are estimated based on the most recent rates set by the Treasury Board Secretariat, (2024-25). Statutory Holiday Payouts, Shift Premiums, and Benefit costs are subject to reconciliation.

Two new premiums were added in these new agreements: a 3% Frontline Patrol Premium (which applies to Constables and Sergeants in Frontline roles only) and a 3% Second-In-Command Premium (which applies to members when temporarily backfilling a short term platoon command position.) An allowance of \$2,101 per Constable FTE and \$3,330 per Sergeant FTE for the Frontline Patrol Premium and \$76 per Constable FTE for the Second-In-Command premium have been included in the salary rates for Constables and Sergeants. These allowances are subject to reconciliation.

FTEs have been apportioned between Base Services and Calls for Service costs based on the current ratio, 50.7% Base Services : 49.3% Calls for Service.

2) Support Staff Costs and Other Direct Operating Expenses for uniform FTEs are calculated on a per FTE basis as per rates set in the 2024 Municipal Policing Cost-Recovery Formula.

OPP 2025 Calls for Service Billing Summary

Powassan M

Estimated costs for the period January 1 to December 31, 2025

	Calls for Service Count			2025	Total	% of Total	2025		
Calls for Service Billing Workgroups	2020	2021	2022	2023	Four Year Average	Average Time	Weighted Time	Provincial Weighted	Estimated Calls for
						Standard		Time	Service Cost
					Α	В	C = A * B		
					Note 1			Note 2	Note 3
Drug Possession	0	1	2	0	1	5.9	4	0.0002%	509
Drugs	1	1	0	1	1	88.1	66	0.0036%	7,601
Operational	179	189	155	150	168	3.9	656	0.0360%	75,478
Operational 2	44	61	47	49	50	1.7	85	0.0047%	9,826
Other Criminal Code Violations	13	9	20	11	13	7.1	94	0.0052%	10,821
Property Crime Violations	54	49	42	39	46	6.2	285	0.0157%	32,806
Statutes & Acts	24	59	29	39	38	3.5	132	0.0073%	15,198
Traffic	21	30	38	27	29	3.8	110	0.0061%	12,676
Violent Criminal Code	14	18	21	29	21	14.8	303	0.0167%	34,899
Municipal Totals	350	417	354	345	367		1,737	0.0954%	\$199,815

Provincial Totals (Note 4)

	Calls for Service Count			2025	Total	% of Total	2025		
Calls for Service Billing					Four Year	Average	Weighted	Provincial	Estimated
Workgroups	2020	2021	2022	2023	Average	Time	Time	Weighted	Calls for
						Standard		Time	Service Cost
					Α	В	C = A * B		
					Note 1			Note 2	Note 3
Drug Possession	2,803	2,979	2,483	2,363	2,657	5.9	15,676	0.8608%	1,803,207
Drugs	1,127	1,050	797	920	974	88.1	85,765	4.7092%	9,865,380
Operational	178,171	180,823	176,502	180,423	178,980	3.9	698,021	38.3272%	80,291,662
Operational 2	48,046	48,395	46,304	47,019	47,441	1.7	80,650	4.4283%	9,276,939
Other Criminal Code Violations	12,123	12,103	12,206	12,931	12,341	7.1	87,619	4.8110%	10,078,638
Property Crime Violations	46,799	47,403	48,878	49,446	48,132	6.2	298,415	16.3855%	34,325,987
Statutes & Acts	31,261	32,888	32,697	34,047	32,723	3.5	114,531	6.2887%	13,174,266
Traffic	32,067	34,757	38,776	32,713	34,578	3.8	131,397	7.2148%	15,114,318
Violent Criminal Code	19,343	20,055	21,513	22,640	20,888	14.8	309,139	16.9743%	35,559,474
Provincial Totals	371,740	380,453	380,156	382,502	378,713		1,821,214	100%	\$209,489,870

Notes to Calls for Service Billing Summary

- 1) Displayed without decimal places, exact numbers used in calculations
- 2) Displayed to four decimal places, nine decimal places used in calculations
- 3) Total costs rounded to zero decimals
- 4) Provincial Totals exclude data for dissolutions and post-2021 municipal police force amalgamations.

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OPP 2025 Calls for Service Details

Powassan M

For the calendar years 2020 to 2023

Calle for Somice Billing Workgroups		Calls for Service Count					
	2020	2021	2022	2023	Average		
	_						
Grand Total	350	417	354	345	366.50		
Drug Possession	0	1	2	0	0.75		
Drug Related Occurrence	0	0	2	0	0.50		
Possession - Methamphetamine (Crystal Meth)	0	1	0	0	0.25		
Drugs	1	1	0	1	0.75		
Cultivate/Propagate/Harvest cannabis by adult	0	1	0	0	0.25		
Trafficking – Opioid (other than heroin)	1	0	0	0	0.25		
Trafficking - Other Controlled Drugs and Substances Act	0	0	0	1	0.25		
Operational	179	189	155	150	168.25		
Animal - Bite	0	2	0	0	0.50		
Animal - Dog Owners Liability Act	0	2	0	1	0.75		
Animal - Injured	1	0	5	2	2.00		
Animal - Left in Vehicle	1	4	0	0	1.25		
Animal - Master Code	0	1	0	0	0.25		
Animal - Other	0	1	1	1	0.75		
Animal - Stray	3	2	2	2	2.25		
Assist Fire Department	1	0	0	1	0.50		
Assist Public	9	28	20	23	20.00		
Bomb Threat	0	0	0	1	0.25		
Compassionate Message	1	0	0	0	0.25		
Distressed / Overdue Motorist	0	1	0	0	0.25		
Domestic Disturbance	39	26	29	24	29.50		
Family Dispute	13	15	10	8	11.50		
Fire - Building	2	2	1	0	1.25		
Fire - Other	0	2	0	2	1.00		
Fire - Vehicle	2	1	1	1	1.25		
Firearms (Discharge) By-Law	1	0	0	0	0.25		
Found - Household Property	0	1	0	0	0.25		
Found - Machinery & Tools	0	1	0	0	0.25		
Found - Others	0	2	0	0	0.50		
Found - Personal Accessories	1	0	0	0	0.25		
Found Property - Master Code	6	8	6	4	6.00		
Insecure Condition - Building	1	1	0	0	0.50		
Insecure Condition - Master Code	2	3	0	0	1.25		
Lost - Accessible Parking Permit	0	0	1	0	0.25		
Lost - License Plate	1	1	0	1	0.75		
Lost - Others	0	0	2	4	1.50		
Lost - Personal Accessories	0	1	1	3	1.25		
Lost Property - Master Code	3	1	2	2	2.00		
Medical Assistance - Other	0	0	1	0	0.25		
Missing Person - Master Code	1	1	2	0	1.00		
Missing Person 12 & older	2	0	0	1	0.75		
Missing Person Located 12 & older	6	1	1	1	2.25		
Neighbour Dispute	10	10	15	16	12.75		
Noise Complaint - Animal	2	0	1	0	0.75		

OPP 2025 Calls for Service Details Powassan M For the calendar years 2020 to 2023

Calls for Service Pilling Workgroups		Calls for Service Count				
	2020	2021	2022	2023	Average	
		1	1	1	1	
Noise Complaint - Master Code	18	8	10	4	10.00	
Noise Complaint - Others	1	1	1	0	0.75	
Phone - Nuisance - No Charges Laid	4	2	1	0	1.75	
Phone - Other - No Charges Laid	0	0	1	1	0.50	
Sudden Death - Apparent Overdose/Overdose	0	0	0	1	0.25	
Sudden Death - Drowning	0	1	0	0	0.25	
Sudden Death - Natural Causes	5	8	8	1	5.50	
Sudden Death - Others	0	1	0	1	0.50	
Sudden Death - Suicide	1	0	0	0	0.25	
Suspicious Person	23	24	10	28	21.25	
Suspicious vehicle	10	14	13	5	10.50	
Text- related Incident (Texting)	0	0	0	1	0.25	
Trouble with Youth	5	3	2	3	3.25	
Unwanted Persons	3	5	8	6	5.50	
Vehicle Recovered - Automobile	1	1	0	1	0.75	
Vehicle Recovered - Snow Vehicles	0	1	0	0	0.25	
Vehicle Recovered - Trucks	0	2	0	0	0.50	
Operational 2	44	61	47	49	50.25	
911 call - Dropped Cell	5	13	6	7	7.75	
911 call / 911 hang up	21	18	20	2	15.25	
False Alarm - Cancelled	3	0	0	1	1.00	
False Alarm - Others	8	13	15	20	14.00	
False Holdup Alarm - Accidental Trip	0	2	3	1	1.50	
Keep the Peace	7	15	3	18	10.75	
Other Criminal Code Violations	13	9	20	11	13.25	
Bail Violations - Breach of Recognizance	0	1	2	0	0.75	
Bail Violations - Fail To Comply	5	3	7	4	4.75	
Bail Violations - Others	0	0	2	0	0.50	
Breach of Probation	1	0	4	2	1.75	
Child Pornography - Making or distributing	0	0	0	1	0.25	
Child Pornography - Possess child pornography	0	0	0	1	0.25	
Disturb the Peace	0	1	0	1	0.50	
Indecent acts - Master Code	1	1	3	0	1.25	
Indecent acts - Other	1	1	0	0	0.50	
Offensive Weapons - Careless use of firearms	1	0	0	2	0.75	
Offensive Weapons - Other Weapons Offences	0	0	1	0	0.25	
Offensive Weapons - Possession of Weapons	1	0	0	0	0.25	
Possess Firearm while prohibited	0	1	0	0	0.25	
Trespass at Night	3	1	1	0	1.25	
Property Crime Violations	54	49	42	39	46.00	
Arson - Building	1	0	0	0	0.25	
Break & Enter	7	4	2	3	4.00	
Fraud - False Pretence Under \$5.000	0	0	0	1	0.25	
Fraud - Forgery & Uttering	0	0	0	2	0.50	
Fraud - Fraud through mails	2	0	0	1	0.75	

OPP 2025 Calls for Service Details Powassan M

For the calendar years 2020 to 2023

Calls for Service Billing Workgroups		Four Year			
		2021	2022	2023	Average
Fraud - Master Code	0	0	3	5	2.00
Fraud - Money/property/security Over \$5,000	2	0	1	1	1.00
Fraud - Money/property/security Under \$5,000	4	4	5	3	4.00
Fraud - Other	5	3	7	2	4.25
Fraud - Steal/Forge/Poss./Use Credit Card	0	4	0	2	1.50
Identity Fraud	0	0	1	0	0.25
Mischief	3	7	7	2	4.75
Possession of Stolen Goods over \$5,000	0	0	1	0	0.25
Possession of Stolen Goods under \$5,000	0	1	0	0	0.25
Property Damage	3	0	0	1	1.00
Theft Over - Master Code	0	0	1	0	0.25
Theft from Motor Vehicles Under \$5,000	6	7	1	1	3.75
Theft of - All Terrain Vehicles	1	0	0	2	0.75
Theft of - Automobile	1	0	1	0	0.50
Theft of - Motorcycles	0	2	0	0	0.50
Theft of - Trucks	1	0	0	0	0.25
Theft of Motor Vehicle	1	2	0	2	1.25
Theft Over \$,5000 - Construction Site	0	0	0	1	0.25
Theft Over \$5,000 - Other Theft	1	0	0	0	0.25
Theft Over \$5,000 - Trailers	1	0	1	0	0.50
Theft Under \$5,000 - Bicycles	0	1	2	1	1.00
Theft Under \$5,000 - Construction Site	1	1	0	0	0.50
Theft Under \$5.000 - Gasoline Drive-off	1	1	0	1	0.75
Theft Under \$5,000 - Master Code	3	3	1	1	2.00
Theft Under \$5,000 - Other Theft	5	9	5	6	6.25
Theft Under \$5,000 - Trailers	4	0	0	0	1.00
Theft Under \$5,000 Shoplifting	0	0	2	1	0.75
Trafficking in Stolen Goods over \$5,000	1	0	0	0	0.25
Unlawful in a dwelling house	0	0	1	0	0.25
Statutes & Acts	24	59	29	39	37.75
Landlord / Tenant	8	21	7	8	11.00
Mental Health Act	2	5	4	8	4.75
Mental Health Act - Apprehension	0	1	3	7	2.75
Mental Health Act - Attempt Suicide	1	0	4	1	1.50
Mental Health Act - No contact with Police	0	1	2	1	1.00
Mental Health Act - Placed on Form		1	0	0	0.50
Mental Health Act - Threat of Suicide	2	3	1	3	2.25
Mental Health Act - Voluntary Transport		0	0	2	1.00
Trespass To Property Act		27	8	9	13.00
Traffic	21	30	38	27	29.00
MVC - Others (Motor Vehicle Collision)	0	1	0	0	0.25
MVC - Pers. Inj. Failed to Remain (Motor Vehicle Collision)	0	0	0	1	0.25
MVC - Personal Injury (Motor Vehicle Collision)	2	4	1	1	2.00
MVC - Prop. Dam. Failed to Remain (Motor Vehicle Collision)	1	0	0	1	0.50
MVC - Prop. Dam. Non Reportable (Motor Vehicle Collision)	11	9	13	10	10.75

OPP 2025 Calls for Service Details Powassan M

For the calendar years 2020 to 2023

Calls for Sorvice Billing Workgroups		Calls for Service Count					
Calls for Service Billing workgroups	2020	2021	2022	2023	Average		
MVC - Prop. Dam. Reportable (Motor Vehicle Collision)	7	16	21	14	14.50		
MVC (Motor Vehicle Collision) - Master Code	0	0	3	0	0.75		
Violent Criminal Code	14	18	21	29	20.50		
Assault - Level 1	2	6	13	9	7.50		
Assault With Weapon or Causing Bodily Harm - Level 2	1	0	0	4	1.25		
Criminal Harassment	4	4	0	4	3.00		
Forcible confinement	0	0	0	1	0.25		
Indecent / Harassing Communications	2	0	0	0	0.50		
Other Assaults / Admin Noxious thing	1	0	0	0	0.25		
Sexual Assault	0	2	3	3	2.00		
Sexual Interference	1	0	1	0	0.50		
Using firearm (or imitation) in commission of offence	0	0	1	0	0.25		
Utter Threats to Person	3	6	3	8	5.00		

OPP 2023 Reconciled Year-End Summary - Revised Powassan M Reconciled cost for the period January 1 to December 31, 2023

			Cost per Property \$	Reconciled Cost \$	Estimated Cost \$
Base Service	Property Counts	-			
	Household	1,499			
	Commercial and Industrial	105			
	Total Properties	1,604	174.11	279,280	265,722
Calls for Service					
	Total all municipalities	187,830,598			
	Municipal portion	0.0966%	113.13	181,462	172,522
Overtime			16.13	25,878	21,587
Prisoner Transportation	(per property cost)		1.45	2,326	1,877
Accommodation/Cleaning Services	(per property cost)	_	5.06	8,116	7,811
Total 2023 Costs			309.89	497,062	469,519
Discount on 2023 Reconciled Costs	(see notes)	_	(18.45)	(29,599)	-
Total Revised 2023 Costs		=	291.44	467,463	469,519
2023 Billed Amount				469,521	
2023 Revised Year-End-Adjustment	:			(2,058)	

Notes

The discount on 2023 Reconciled Costs was calculated by first applying a 44% discount to reconciled OT costs, and then applying a 3.75% discount to the total reconciled costs (after the OT discount had been applied).

The Year-End Adjustment above is included as an adjustment on the 2025 Billing Statement.

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December 20, 2024

SENT ELECTRONICALLY

Mr. Brayden Robinson Treasurer/Director of Corporate Services Municipality of Powassan 466 Main Street Powassan, ON POH 1Z0

Dear Mr. Robinson,

Re: 2025 Municipal Levy

Your **2025 Municipal Levy Information Package** is attached. At its budget meeting on December 4, 2024, the Board of Health approved the 2025 budget. It has a 1% increase (already confirmed) in provincial mandatory program funding and a 3% increase in Municipal share (billed at 5% increase - 2% paid from the Reserve in 2024 and 3% for 2025).

For 2025, with the previous mitigation funding rolled into provincial base funding, the sharing split is 77.8% provincial and 22.2% municipal.

There are two years left in the Strengthening Public Health Initiative. A 1% increase to Health Units has been communicated for 2025 and a 1% increase in Public Health funding provincially for 2026. The Ontario Public Health Standards, which set the minimum requirements for public health programming, are still in the review process and should be in effect for 2026. The new funding arrangement for Public Health should be communicated in 2025, effective in 2026.

As instructed by the province our health unit investigated merging with our neighbouring health units earlier in 2024, but no talks were successful. How this will affect our funding under the new funding arrangement is not known at this time.

COVID-19 specific funding has been promised for 2024 but has not yet been received. 2025 COVID-19 funding arrangements are unknown at this time.

../2

Your lifetime partner in healthy living. Votre partenaire à vie pour vivre en santé.

myhealthunit.ca

- 345 Oak Street West, North Bay, ON P1B 2T2
- ✔ 1-800-563-2808
 705-474-1400
- 705-474-8252
- 90 Bowes Street, Suite 201, Parry Sound, ON P2A 2L7
- 1-800-563-2808 705-746-5801
- 8 705-746-2711



In accordance with the Board of Health By-Laws, the Municipal Reserve status will be updated to you with the 2024 audited financial statements. For your information the Municipal Reserve balance at October 31, 2024 was \$2,174,943.

To learn more about your health unit programs, activities and reports, refer to the North Bay Parry Sound District Health Unit website at <u>www.myhealthunit.ca</u>. The website is completely searchable and contains information on a wide range of health topics.

The following information is attached:

- Appendix A 2025 Levy Payment Schedule
- Appendix B 2025 Board of Health Approved Budget Summary Sheet

Please do not hesitate to contact Isabel Churcher, Executive Director, Finance at (705) 499-6016, if you have any questions.

Yours truly,

Rick Champagne Chairperson, Board of Health

Enclosures (2)

Copy to: Isabel Churcher, Executive Director, Finance Dr. Carol Zimbalatti, Medical Officer of Health/Executive Officer Board of Health

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myhealthunit.ca

- 345 Oak Street West, North Bay, ON P1B 2T2
- North Bay, ON P18 21
 1-800-563-2808
 705-474-1400
- 705-474-8252
- 90 Bowes Street, Suite 201, Parry Sound, ON P2A 2L7
- 1-800-563-2808 705-746-5801
- 705-746-2711

Appendix A

December 20, 2024

Municipality of Powassan 466 Main St. P.O. Box 250 Powassan, ON P0H 1Z0

2025 LEVY PAYMENT SCHEDULE

2025 Annual Levy

\$116,465

Monthly Payment Schedule effective January 1, 2025	Amount
January 1	9705.38
February 1	9705.42
March 1	9705.42
April 1	9705.42
May 1	9705.42
June 1	9705.42
July 1	9705.42
August 1	9705.42
September 1	9705.42
October 1	9705.42
November 1	9705.42
December 1	9705.42
Total	\$116,465

Levy based on population of: 3,092

Per Capita Rate: \$37.67

Due Date: The first day of every month Interest is charged at 1.25% per month on outstanding balances.

Please remit to: North Bay Parry Sound District Health Unit Attention: Finance Department 345 Oak St W North Bay, ON P1B 2T2 Or Direct Deposit to: Account # 03442 003 1287499

2025 Board of Health Public Health Br	Judget - Budget Summary Sheet
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Budget Summary	Budget 2024	Forecast 2024	Budget 2025	Cost Sharing Percentage for 2025	Notes
Total Expenses	22,826,086	22,713,127	22,786,421		1
Less Program Revenues	485,840	635,695	481,041		2
Net Expenses	22,340,246	22,077,432	22,305,380	1200	2 100
Less: 100% Funding and One-Time Funding and Grants	4,979,566	5,099,701	4,695,094		3
Total Shareable Base	17,360,680	16,977,731	17,610,286		10 2 5 1
Ministry of Health Share	13,565,310	13,259,608	13,701,054	77.80%	4
Municipal Share	3,795,370	3,718,123	3,909,232	22.20%	
Plus: 100% Municipal - Adult Dental	95,414	95,414	98,277		
Gross Municipal Levy	3,890,784	3,813,537	4,007,509		5
Contribution from Municipal Reserve	-74,108	0	0		
Net Municipal Levy	3,816,676	3,813,537	4,007,509		
Per Capita Municipal Population	106,394	106,394	106,394		_
Per Capita Rate	36.57	35.84	37.67		6

Notes	for	Bud	get	Sun	nmary
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1	Total expenses include the cost of all Health Unit programs and services except for Infection Prevention and Control Hub funding.
2	Program revenues are generated through payments from the public or the government on a fee-for-service basis.
3	The forecast for 2024 includes all usual 100% funded programs from multiple sources and one- time funding for COVID-19 Vaccination, Respiratory Syncytial Virus (RSV) Vaccine, Strengthening Public Health (Merger) etc. Not all funds are officially confirmed.
4	The Ministry of Health's funding will increase by 1% over last year. Funding increases of 1% per year have been confirmed for 2024, 2025, and 2026. The new total of \$13,701,054 is 77.8% of the shareable base.
5	The municipal share is calculated using the 2024 levy plus 3% which amounts to a 5% increase to the municipalities' payments for 2025 since 2% of last year's levy increase was taken from the municipal reserve. The municipal share for 2025 is 22.2%.
6	As per the Health Protection and Promotion Act, R.S.O. 1990, c. H.7, O. Reg. 489-97 Allocation of Board of Health Expenses, populations used for calculations are current (2022) Municipal Dependence (MPAC) enumeration data. As per regulations from MPAC

Property Assessment Corporation (MPAC) enumeration data. As per regulations from MPAC, their total population data may not be shared publicly.

The Corporation of the Municipality of Powassan 2024 Management Review Report

Prepared By Monique Malette (PCT) QEMS Representative, Attended By Jeremy Galda (Safety, Process and Compliance Manager) QEMS Representative,

> Paul Dyrda (Senior Operations Manager) Darren Aljoe (O&M Team Lead/ORO) November 1, 2023 to October 31, 2024

Drinking Water Quality Management System



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2023 Management Review			
Date/Location of	December 12, 2024 @ Meeting VIA Teleconference between Callander		
Management Review: Office and Compliance Office			
Attendees:	Paul Dyrda – Senior Operations Manager, Monique Malette – PCT, Jeremy Galda – SPC Manager, Darren Aljoe – O&M Team Lead/ORO		

Introduction to DWQMS Management Review

The requirement to conduct a management review is dictated by Element # 20 'Management Review' of the Ministry of the Environment, Conservation and Parks (MECP) DWQMS. This element requires that a management review be conducted at least once every calendar year to evaluate the effectiveness and adequacy of the Quality Management System (QMS).

Through this management review process, any deficiencies identified shall be detailed in action plans, which include the personnel responsible and proposed timelines for implementation.

The management review process looks at certain indicators that show how well QMS has been implemented, and how effectively it is operating.

Management reviewers are required to consider:

- Incidents of regulatory non-compliance,
- Incidents of adverse drinking-water tests,
- Deviations from critical control point limits and response actions,
- The efficacy of the risk assessment process,
- Internal and third-party audit results,
- Results of emergency response testing,
- Operational performance,
- Raw water supply and drinking water quality trends,
- Follow-up on action items from previous management reviews,
- The status of management action items identified between reviews,
- Changes that could affect the QMS,
- Consumer feedback,
- The resources needed to maintain the QMS,
- The results of the infrastructure review,
- Operational plan currency, content and updates,
- Staff suggestions and
- Consideration of applicable Best Management Practices (BMPs)



Executive Summary

This report contains a summary of information that Top Management must review annually in accordance with the Management Standard.

The DWQMS is the key tool that supports and ensures that Council, as the Owner of the drinking water systems, is meeting its duties and responsibilities under the Safe Drinking Water Act and Standard of Care.

The DWQMS has been designed for continual improvement, which is the foundation of the DWQMS Policy endorsed by Top Management and Council.

The current review is for the period of November 1, 2023 to October 31, 2024 (the "review period").

Highlights of the review findings are:

- There are no outstanding action items from the previous management review;
- Annual Risk Assessment Review completed on October 3, 2024;
- Internal Audit was completed on DWQMS 2.0 on October 3, 2024 listed 0 nonconformances (NCR), 5 opportunities for improvement (OFI)s;
- Off-site external S2 Surveillance audit completed May 7, 2024. There were no findings during the off-site external audit. Accreditation Certificate issued June 9, 2022;
- Service Loss contingency was tested and reviewed on November 21, 2024;
- According to info kept on record, the facility had zero non-compliance issues identified during the review period;
- The Powassan Drinking Water System was last inspected by the Ministry of the Environment Conservation and Parks (MECP) on January 30, 2024, provided a grade of 92.53%; 2 non-compliance issues and 0 best management practices were noted by the inspector;
- There were 16 alarms received and 6 relating to critical control points;
- There were 0 adverse water quality incident (AWQI);
- Staff is following procedures and showing a commitment to continual improvement.

In short, the 2024 Management Review shows the DWQMS is being implemented successfully and reinforces the fact that the Municipality of Powassan produces and supplies high quality, safe drinking water.



Opening Remarks

The QEMS representative leading the management review will give a brief overview of the requirements of DWQMS and the purpose of the management review. Reviews are conducted once every calendar year and include the PCT (QEMS Rep.), Senior Operations Manager (Top Management), Safety, Process and Compliance Manager (Top Management/Alternate QEMS Rep) and at least one facility operator, at a minimum. The QEMS Representative ensures that minutes of and action plans resulting from the Management Review meeting are prepared and distributed to the appropriate OCWA management and personnel and to the Municipal Owner.

The discussion lead for the management review was Monique Malette, Process and Compliance Technician (PCT) for OCWA. Minutes from the previous management review were reviewed.

Roles and Responsibilities Outlined in the DWQMS

Element 9 of the DWQMS requires that the Operational Plan document an organizational structure, roles, responsibilities and authorities of the Operating Authority (OCWA). The table below outlines the structure of all personnel who have a role in delivering safe drinking water.

See Organizational Chart on page 6.





Municipality of Powassan 2024 DWQMS Management Review Monique Malette (PCT), QEMS Representative Issue date: December 12, 2024



Drinking Water System Performance

Incidents of Regulatory Non-Compliance

All regulatory non compliances reported through MECP inspections or through PCT notifications are reviewed during the management review. The results help Management identify regulatory deficiencies in the drinking water system.

According to the information kept on record by OCWA, zero non-compliance issues occurred in the review period. Last MECP inspection took place on January 30, 2024, which identified 2 non-compliance items and 0 best practice recommendation.

Two Incidents of Non-Compliance: Failure to monitor POE Chorine residuals while the facility was producing water to the distribution system & Failure to alarm / lock out well pumps when analyzer failed. Operator Arrived at Well House July 17, 2023 at 12:30 to complete 72 Hr. compliance review via online data logger. Chlorine POE analyzer was off, and no residuals were being displayed on the data logger. Root Cause (RC): The chlorine analyzer was plugged into a ground fault circuit interrupter (GFCI) outlet that was tripped. The GFCI outlet was reset and the analyzer was restored immediately. Trending shows the analyzer lost power on July 16, 2023 at 12:50 pm and was restored July 17, 2023 at 12:35 pm. No alarms were triggered and four pumping cycles occurred during the time the analyzer was without power. Corrective Action (CA): Analyzer plugged into a different receptacle. Round sheet completed upon arrival indicating chlorine dosage calculated from Friday is consistent (slightly higher) than previous dosage calculations, online trending at the in-ground reservoir is consistent with the previous trending, low chlorine alarm / lockout test is conducted monthly (last test was June 20, 2023), RAW, POE and Distribution microbiological samples and residuals were collected today and residuals are consistent with normal operations (see attached chain of custody and weekly residual sampling sheets). An instrument technician will be contacted to help identify the failure of the analyzer to alarm out on power failure. MECP notified verbally and send non-compliance form via email.

Incidents of Adverse Drinking Water Tests

To assist in the detection of water quality issues, OCWA utilizes online monitoring through SCADA and Wonderware programs and maintains a rigorous sampling schedule. The drinking water regulation identifies particular indicators of Adverse Water Quality incidents (AWQI) which must be reported to the MECP and the Ministry of Health (MOH) and establishes how to carry out specific corrective actions.

During the review period, there were zero AWQIs.



 Table 1: Adverse Water Quality Incidents

Incident Date	AWQI#	Adverse issue	Corrective action taken	Additional comments
N/A				

A Critical Control Point (CCP) is a step in the process where some control can be administered to prevent or eliminate a drinking water health hazard or to reduce it to an acceptable level. A CCP limit is the point at which a response procedure is deemed required. CCPs were established through the Risk Assessment exercise and are monitored through the SCADA and Wonderware systems. Any deviation from normal CCP limits is recorded in logbook and does not necessarily mean that unsafe drinking water was delivered to the consumer.

Deviations from critical control point (CCP) Limits

For this facility, 2 CCP's were identified within the water treatment process.

CCP listed	Setpoints
Primary Disinfection (Sodium Hypochlorite System)	Free Chlorine residual:
	sent, no delay
	Minimum CT required = 0.45 mg/L
Secondary disinfection	Operational
	Low: greater than 0.2 mg/L Free Chlorine residual
	High: less than 4.0 mg/L Free Chlorine residual
	Regulatory
	Low: greater than 0.05 mg/L Free Chlorine residual

 Table 2: Critical Control Points

Operators record any CCP deviation in their facility logbook. Additionally, any afterhours deviations are recorded in the facility's call out reports (Maximo) and in facility logbook. During this review period, there were sixteen (16) incidents that required the operator's attention. A total of six (6) incidents were related to CCP's, six (6) were low treated free chlorine residual lockouts. The others were: four (4) related to low or high reservoir alarms, two (2) related to power failure alarms, and four (4) related to well pump failure alarms. Monthly alarm testing completed as well.

For more information on all call outs and/or daytime alarms during the review period, refer to the Maximo Call Out Summary and/or facility e-logbook report.



Operational Performance

The operational performance section is used to discuss the MECP's latest inspection rating and determine any actions required to maintain or improve the water treatment system and all associated programs.

The latest inspection held on January 30, 2024 provided a grade of 92.53%. There were two non-compliances and zero best management practices provided by the inspector.

The safety of the drinking water is not reflected by the MECP's score. The MECP district office determines a risk factor and grants each question a value. The rating is calculated based on each inspector's answers. Although inspectors cannot themselves provide their own rating, opinions sometimes influences the answers given for a specific topic which could affect the score provided for the inspection.

Any issues raised from the MECP inspection are reviewed and appropriate actions are taken to prevent future occurrences. To help preserve the drinking water system, flushing is conducted biannually. Hydrants are inspected simultaneously.

Raw Water Supply and Drinking Water Quality Trends

Raw water and drinking water trends are monitored through OCWA's SCADA and Wonderware systems and numerical data is maintained within our Process Data Management (PDM) program.

The facility has a Permit to Take Water (PTTW) which limits the amount of water the Water Treatment Plant (WTP) can obtain from a surface or ground water supply.

This facility's PTTW limits are 1313 m³/d from the two ground wells combined. Flow rates are limited to 15.2 L/s per well. The system's Municipal Drinking Water Licence provides a rated capacity for the WTP which is determined to be 1313 m³/d.

Raw and treated flows were within limits.

Raw water characteristics are monitored at this facility by sampling for the following parameters: Turbidity, *E.coli* and Total Coliforms. Bacteriological data is consistently having no coliforms or *E. coli*.

Bacteriological samples are taken weekly to monitor raw, treated and distribution water health. Regulations require that pesticides and other chemicals (schedule 23/24) be tested every three years as well as sodium and fluoride which are on a 60 month rotation. Schedule 23/24



parameters were sampled on January 17, 2024. Sodium completed January 24, 2022 and fluoride completed January 17, 2024. All results were below the Ontario Drinking Water Standards.

THMs are being collected and tested quarterly in 2024. The running annual average for the system at the end of October is 0.003 mg/L (RAA limit = 0.1 mg/L).

The HAAs are also being collected and tested quarterly. The system has a running annual average <0.0053 mg/L at the end of October. The maximum RAA allowable limit of 0.08 mg/L came into effect on January 1, 2020.

OCWA has sampled at the far end of the distribution system in 2017, near the plant and middle of the distribution system in 2018 and 2019 as per guidance provided in a Ministry's letter "HAA Concerns" dated May 9, 2018. It should be noted that all THM and HAA results are very low throughout the distribution system as the system is fed by wells. After following a Best Management Practice based on MECP guidance in 2018, HAA were sampled at various locations throughout the distribution system to find the most elevated results. See HAA RAA Summary for further information. Based on sampling and MECP guidance, the recommended sampling point for future sampling is 21 Birch St. Due to Covid-19, sampling point changed to public location (LCBO) 601 Main St. Levels are low throughout system.

Currently, the system is in exemption for plumbing lead sampling, which means alkalinity and pH are taken in the distribution at 2 locations bi-annually and lead, alkalinity and pH are taken every third year, bi-annually. Distribution pH and Alkalinity were sampled on April 15, 2024 and October 3, 2024. There were no samples taken during this review period which required adverse notifications.

The Powassan Drinking Water System continually provides good quality drinking water to the community.

Consumer Feedback

Community complaints are reported the Operating Authority, either directly from consumers or through the Municipal office. Complaints are promptly dealt with and the source of the problem identified. Below is a list of all community complaints received for this facility during the review period.

During this review period, there were zero (0) community complaints received.



 Table 3: Community Complaints

Complaint	Date	Root cause/actions taken
N/A		

Management System Performance

Internal and Third Party Audits

The DWQMS requires each Operating Authority to implement a procedure that ensures internal audits are conducted at least once every calendar year to evaluate conformance to the Standard. External audits are conducted by a third party accreditation body every 12 months for off-site audits and every 3 years for on-site audits. All internal and external audit results are reviewed during management reviews and action plans created for all outstanding items found. The table below lists all audit results along with actions required and implementation date.

An internal audit was conducted on DWQMS 2.0 on October 3, 2024 with 5 OFIs identified. Internal audits are performed by PCTs and include a review of documents and an onsite visit where operators are interviewed to verify implementation of the QEMS. Every year, PCTs focus on a particular subject when conducting audits based on non-conformances found within the Organization throughout Ontario and problems found in other locations within the Hub. The QEMS for Powassan is maintained, as it should be; therefore, continual improvement is the main focus of the internal audit.

Off-site external S1 Surveillance audit completed May 7, 2024. There were no findings during the off-site external audit. Accreditation Certificate issued June 9, 2022.

Non conformances, OFIs and comments from each audit can be found in the table below.



Table 4: Int	ernal and	External	Audit	Results
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Section	Section Description of Findings		Action	Responsibility/ Assignee	Resolution Target Date
OP-6 Drinking Water System	Consider updating raw water characteristics to 2023.	OFI	Update raw water characteristics to 2023. Updated OP-06 and sent to SOM for approval.	Monique Malette PCT/QEMS rep	24-Oct
OP-6 Drinking Water System	Consider updating disinfection pumps in description	OFI	Updated pumps for disinfection OP-06	Monique Malette PCT/QEMS rep	24-Oct
OP-8 Risk Assessment Outcomes	Consider updating old obsolete info in the reviewed SOP.	OFI	Minor updates required to Failure of Chlorine Pump SOP.	Monique Malette PCT/QEMS rep	24-Oct
OP-18 - Emergency Management	Consider updating OCWA's emergency contact list. New VP of Operations.	OFI	Update OCWA's emergency contact list. New VP of Operations. Contact list updated and sent to operator on October 03, 2024	Monique Malette PCT/QEMS rep	24-Oct
OP-18 - Emergency Management	Consider updating local emergency contact list.	OFI	Update local emergency contact list. Contact list updated and sent to operator on October 3, 2024.	Monique Malette PCT/QEMS rep	Oct-24

A root cause analysis and documented corrective actions are mandatory for any minor or major nonconformances uncovered during the internal or external audits.

The Risk Assessment Process

Element 7 requires a risk assessment procedure be documented that would identify potential hazards and assess the ranks related to each hazardous event. Control measures must be identified for each hazardous event and critical control points must be recognized along with their limits. Risk assessments are required to be verified annually and re-assessed for the system every 36 months.

The last 3 year risk assessment re-write was conducted on June 7, 2023 by Joshua Gravelle (PCT,QEMS Rep.), Paul Dyrda (Senior Operations Manager), Curtis Green (O&M Team Lead) and Dan Finnigan (O&M Team Lead). Added prolonged network communication loss to risk assessment outcomes, see OP-08A table 3 and revision history for details. Annual risk assessment reviewed October 3, 2024. The next 3 year risk assessment re-write is scheduled for June 2026.

Emergency Response Testing

An emergency is considered a situation that could potentially result in a loss of ability to maintain service to the customers. The DWQMS requires that the Operating Authority list potential emergency situations and provide emergency response programs. OCWA maintains 6 mandatory contingency plans which cover the majority of possible emergency situations: Spill Response; Critical Injury; Critical Shortage of Staff; Loss of Service; Unsafe Water; and, Security Breach.

For this review period, the Loss of Service contingency was reviewed and tested on November 21, 2024 by staff in the Near North Cluster. The Essential Supplies and Services list was updated



on May 16, 2024; however, was reviewed during internal audit, no updates required. Specifics of the test and scenario are listed within the Contingency Plan Review/Test Summary Form.

Action Items from Previous Management Reviews

Action Items are initiated during management reviews when deficiencies are found within the Quality Management System. These action items are required to be completed by the person and date listed within them. At each management review, the status of the previous action items is to be examined.

For this review period, there were no action items from previous Management Review.

Status of Other Actions Items identified Between Reviews

Action items are sometimes initiated in response to other audits or incidents. These items are to be reviewed during the management review process.

Section	Description of Findings	Туре	Action	Responsibility/ Assignee	Resolution Target Date
OP-01 - QEMS	Action items identified by OCWA Internal Memo Dated June 6. 2024: 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.	AI	Update OP-01 to match the corporate template. OP-01 updated in DRAFT form on June 17, 2024.	OCWA (QEMS Rep.)	Oct-24
OP-02 - QEMS Policy	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, removed watermark.	AI	Update OP-02 to match the corporate template. Ensure new QEMS Policy posted at faclities with staff training on new policy. OP- 02 updated in DRAFT form on June 18, 2024.	OCWA (QEMS Rep.)	Oct-24
OP-03 - Commitment and Endorsement	New QEMS Policy is a major revision to the Operational Plan and requires re-endorsement. Once all updates have been made to OP, the Plan should be re-endorsed by Top Management and the Owner. Consider scheduling updates to align with your audit schedule, removed watermark.	AI	Re-endorse the Operational Plan following all necessary updates.	OCWA (QEMS Rep.)	Oct-24
OP-05 - Document and Records Control	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 GDDI/Non-GUDI Reports, minor wording and type-o's, removed watermark.	AI	Update OP-05 and OP-05A to match the corporate template. OP-05 and OP-05A updated in DRAFT form on June 19, 2024.	OCWA (QEMS Rep.)	Oct-24

Municipality of Powassan 2024 DWQMS Management Review Monique Malette (PCT), QEMS Representative Issue date: December 12, 2024 13 | Page


Section	Description of Findings	Туре	Action	Responsibility/ Assignee	Resolution Target Date
OP-09 - Organizational Structure and OP-09A Organizational Chart	OP-09: 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. Additional revisions include replaced MOECC with Ministry, minor rewording and type-o's, removed watermark. Add Captial Manager with responsibilities and authorities. OP- 09A:Revised to include Senior Leadership Team (SLT) in reporting structure and identify members, added Compliance System Coordinators, updated Operations Personnel position titles, removed watermark.	AI	Update OP-09 and OP-09A to match the corporate template. Add new Capital Manager with appropriate info.	OCWA (QEMS Rep.)	Oct-24
OP-10 - Competencies	Procedure updated [update revision history based on your current OP-10 revision history] 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.	AI	Update OP-10 to match the corporate template.	OCWA (QEMS Rep.)	Oct-24
OP-12 - Communications	Procedure revised to reference updated title of Corporate Emergency Response Plan, removed watermark.	AI	Update OP-12 to match the corporate template. OP-12 updated in DRAFT form on June 17, 2024.	OCWA (QEMS Rep.)	Oct-24
OP-18 - Emergency Management	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).	AI	Update OP-18 to match the corporate template. OP-18 updated in DRAFT form on June 17, 2024.	OCWA (QEMS Rep.)	Oct-24
OP-19 - Internal QEMS Audits	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.	AI	Update OP-19 to match the corporate template. OP-19 updated in DRAFT form on June 17, 2024.	OCWA (QEMS Rep.)	Oct-24

Changes that could Affect the Quality Management System

This discussion is held to examine any changes which have occurred within the organization, the Municipality or the Quality Management System throughout this review period.

New version DWQMS 2.0 has been implemented and Operational Plan has been updated to include all the new requirements of DWQMS 2.0. Endorsement of Operational Plan was completed May 17, 2018. Recently plan was re-endorsed due to change in Owner Representatives on December 19, 2024.



Resources needed to maintain the DWQMS

Resources are defined as those things needed to implement or maintain the QMS such as physical work, financial resources and time involved by personnel. At each management review, it should be discussed what resources will be required to maintain or improve the QMS for the next review period.

The PCTs maintain the DWQMS and ensures management is kept informed of all aspects of the QEMS. An internal auditing and management review schedule is maintained by the PCTs and adequate time is provided to conduct each of these. Internal and external audit results confirm a well-documented and implemented QEMS for the Powassan Drinking Water System.

Current resources were reviewed and were deemed to be adequate for the next review period.

Infrastructure Review

An infrastructure review is required annually by contractual obligations and DWQMS requirements. Infrastructure is assessed and recommendations are made to maintain or optimize the facility. The Operating Authority presents this review, in the form of a Capital Letter, to the Municipality and together, it is decided where resources should be prioritized.

Work on capital projects are in progress. Regular maintenance is performed as needed and all emergencies were provided adequate funding by the Municipality.

- New spare free chlorine residual analyzer installed complete with alarming
- Removed Electrical wires that served no use
- Assisted with installation of new 1" service line on Valley View Drive West.
- Hydrant repairs

The 2025 capital plans have been created. The Municipality has been provided with the plans and will provide feedback on accepted expenses sometime in the New Year once budget approvals have been completed.

Operational Plan: Currency, Content, Updates

The DWQMS requires the Operating Authority to documents QMS for the drinking water system in the form of an Operational Plan. This operational plan is updated regularly to correspond with ongoing changes and to include any improvements made to the QMS.



The DWQMS operational Plan has only had minor revisions made during this review period. All updates have been done due to action items which were found through internal and external audits. This information can be found in Table 4.

The DWQMS Operational Plan version 2.0 was endorsed on May 17, 2018 after numerous updates. The DWQMS Operational Plan was updated June 26, 2023 to resolve action items from internal and external audits.

Staff Suggestions, Recommendation for Improvement

Staff suggestions are made, either directly to the Manager or the Process and Compliance Technician, and are reviewed during the Management review. Should the suggestions be accepted, action items are created and assigned to the appropriate personnel to complete.

For this review period, there were no staff suggestions presented.

Consideration of applicable Best Management Practices (BMPs)

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).

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 Powassan 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, Conservation and Parks.

At a minimum, applicable BMPs must be reviewed and considered once every 36 months.

There were no applicable BMP identified during the review period, none identified in most recent MECP inspection report.



Description of	Туре	Action	Responsibility /	Resolution	Resolution
Findings			Assignee	Target	Date
				Date	
Perform internal		Complete internal audits			
audits on facilities		on facilities in different	SPC Manager	Dec 2025	
in different cluster		cluster			

There were no applicable BMPs to consider during this review period.

Next Management Review Meetings

Scheduled for November 2024.

	Action Items Resulting from F	Review	
Root Location of Action Within Minutes	Action Item	Personnel Responsible	Proposed Timeline
	None to report		

Powassan Drinking Water System - 2024 Summary of Findings

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Corrective Actions	Preventative Actions	Other Actions
Mj - Major Non-conformance	OFI - Opportunity for Improvement	AI - Action Item
Mn - Minor Non-conformance		C/Obs - Comments or Observations

BMP - Best Management Practices

IMPORTANT NOTE: A root cause analysis must be completed for all Corrective Actions

Section	Description of Findings	Type	Action	Responsibility/ Assignee	Resolution Target Date	Resolution Date	Verification/ Effectiveness of Action (include date and details)
			Management Review: (Date)				
		Ш.	ternal Audit (S2-12 Month Surveillance): (Offsite:	: May 7, 2024)			
0P-21 - Continual Improvement	Consider including any Ministry Non- Compliances on the Summary of Findings Table and identify as a Corrective Action (as noted in the Management Review, 2 incidents had occurred in July 2023 and did have full root cause and corrective action detailed).	Ğ	OCWA uses an Analysis and Action Plan (AAP) to track non-compliances identified in MECP inspections. This AAP includes the root cause analysis and documents the corrective actions (CA). We have considered this OFI; however, we currently have another method of tracking. In future audits, we can provide the AAP to auditor to show root cause analysis and corrective actions for any non-compliances.	ocwA (QEMS Rep.)	Jun-24	07-May-24	The AAP is effective at showing all findings from the MECP inspections and documenting the root cause analysis and corrective actions. The AAPs are verified, completed and sent to OCWA's VP, Corporate Compliance and Top Management.
		Inte	rnal Audit: (Desktop: February 9, 2024, Onsite: O	October 3, 2024)			
OP-6 Drinking Water System	Consider updating raw water characteristics to 2023.	OFI	Update raw water characteristics to 2023. Updated OP-06 and sent to SOM for approval.	Monique Malette PCT/QEMS rep	24-Oct	18-Oct-24	
OP-6 Drinking Water System	Consider updating disinfection pumps in description	OFI	Updated pumps for disinfection OP-06	Monique Malette PCT/QEMS rep	24-Oct	18-Oct-24	
OP-8 Risk Assessment Outcomes	Consider updating old obsolete info in the reviewed SOP.	OFI	Minor updates required to Failure of Chlorine Pump SOP.	Monique Malette PCT/QEMS rep	24-Oct	18-Oct-24	
OP-18 - Emergency Management	Consider updating OCWA's emergency contact list. New VP of Operations.	OFI	Update OCWA's emergency contact list. New VP of Operations. Contact list updated and sent to operator on October 03, 2024	Monique Malette PCT/QEMS rep	24-Oct	18-Oct-24	
OP-18 - Emergency Management	Consider updating local emergency contact list.	OFI	Update local emergency contact list. Contact list updated and sent to operator on October 3, 2024.	Monique Malette PCT/QEMS rep	Oct-24	18-Oct-24	
			MECP Inspection: (January 30, 2024) (No BMPs i	ide ntified)			
No BMPs identied in most recent MECP Inspection (non- compliances tracked with AAP)							
	-	Action Items	dentified Between Management Reviews (include	e date item was identifie	d)		

Verification/ Effectiveness of Action (include date and details)	Once updated OP-01 will be effective at showing the most current QEMS Policy and other current info. Updated OP-01 will be sent to Owner and Operator to update copies on site. This will be verified during next internal audit.	Once updated OP-O2 will be effective at showing the most current QEMS Policy and other current info. Updated OP-02 will be sent to Owner and Operator to update copies on site. This will be verified during next internal audit.	Once updated OP-03A will be effective at showing the most current endorsement. Updated OP-03A will be sent to Owner and Operator to update copies on site. This will be verified during next internal audit.	Once updated OP-O5 will be effective at showing current info as per corporate template. Updated OP-O5 will be sent to Owner and Operator to update copies on site. This will be verified during next internal audit.	Once updated OP-09 and OP-09A will be effective at showing current info as per corporate template. Updated OP- 09/OP-09A will be sent to Owner and Operator to update copies on site. This will be verified during next internal audit.
Resolution Date	18-Oct-24	18-Oct-24	18-Oct-24	18-Oct-24	18-Oct-24
Resolution Target Date	Oct-24	Oct-24	Oct-24	Oct-24	Oct-24
Responsibility/ Assignee	OCWA (QEMS Rep.)	OCWA (QEMS Rep.)	OCWA (QEMS Rep.)	OCWA (QEMS Rep.)	OCWA (QEMS Rep.)
Action	Update OP-01 to match the corporate template. OP-01 updated in DRAFT form on June 17, 2024.	Update OP-02 to match the corporate template. Ensure new QEMS Policy posted at faclities with staff training on new policy. OP-02 updated in DRAFT form on June 18, 2024.	Re-endorse the Operational Plan following all necessary updates.	Update OP-05 and OP-05A to match the corporate template. OP-05 and OP-05A updated in DRAFT form on June 19, 2024.	Update OP-09 and OP-09A to match the corporate template. Add new Capital Manager with appropriate info.
Type	ч	АІ	А	ы	А
Description of Findings	Action items identified by OCWA Internal Memo Dated June 6. 2024: Procedure updated definition of DWQMS, added definition of Ministry as the Ortario 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.	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, removed watermark.	New QEMS Policy is a major revision to the Operational Plan and requires re-endorsement. Once all updates have been made to OP, the Plan should be re-endorsed by Top Management and the Owner. Consider scheduling updates to align with your audit schedule, removed watermark.	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 GUD/Non-GUDI Reports, minor wording and type-o's, removed watermark.	OP-09: 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. Additional revisions include replaced MOECC with Ministry, minor rewording and type-0's, removed watermark. Add Captial Manager with responsibilities and authorities. OP-09A:Revised to include Senior Leadership Team (SLT) in reporting structure and identify members, added Compliance System Coordinators, updated Operations Personnel position titles, removed watermark.
Section	-01-QEMS	2P-02 - QEMS Policy	DP-03 - Commitment and Endorsement	DP-05 - Document and Records Control	OP-09 - Organizational Structure and OP-09A Organizational Chart

	Description of Findings	Type	Action	Responsibility/ Assignee	Resolution Target Date	Resolution Date	Verification/ Effectiveness of Action (include date and details)
	Procedure updated [update revision history based on your current OP-10 revision history] 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.	AI	Update OP-10 to match the corporate template.	OCWA (QEMS Rep.)	Oct-24	18-Oct-24	Once updated OP-10 will be effective at showing current info as per corporate template. Updated OP-10 will be sent to Owner and Operator to update copies on site. This will be verified during next internal audit.
su	Procedure revised to reference updated title of Corporate Emergency Response Plan, removed watermark.	AI	Update OP-12 to match the corporate template. OP-12 updated in DRAFT form on June 17, 2024.	OCWA (QEMS Rep.)	Oct-24	18-Oct-24	Once updated OP-12 will be effective at showing current info as per corporate template. Updated OP-12 will be sent to Owner and Operator to update copies on site. This will be verified during next internal audit.
anagement	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).	АІ	Update OP-18 to match the corporate template. OP-18 updated in DRAFT form on June 17, 2024.	OCWA (QEMS Rep.)	Oct-24	18-Oct-24	Once updated OP-18 will be effective at showing current info as per corporate template. Updated OP-18 will be sent to Owner and Operator to update copies on site. This will be verified during next internal audit.
Audits	Procedure updated to describe and document how objectivity is maintained when an internal auditor is not fully independent of the activity ^b eing audited with additions to 3.3.3, removed watermark.	ы	Update OP-19 to match the corporate template. OP-19 updated in DRAFT form on June 17, 2024.	OCWA (QEMS Rep.)	Oct-24	18-Oct-24	Once updated OP-19 will be effective at showing current info as per corporate template. Updated OP-19 will be sent to Owner and Operator to update copies on site. This will be verified during next internal audit.

Root Cause Analysis

IMPORTANT NOTE: A root cause analysis must be performed on any major or minor non-conformance identified during an internal QEMS audit

Date:	
Assignee:	
Description of Non- conformance:	
<i>Root Cause:</i> Reason for non- conformance	
<i>Corrective Action:</i> (immediate fix)	
<i>Sign- off</i> Corrective Action Complete	
Long Term Corrective Action (if applicable)	
<i>Sign - off</i> Corrective Action Validated	

Revision Date	Revision No.	Revision History
April 14, 2012	0	Form issued
		Controlled under the QEMS, added
		revision date and number, added Obs -
May 17, 2013	1	observations
		Updated summary to include a section for
April 2, 2015	2	Root Cause Analysis
		Added preventative and corrective actions
04-Apr-18	3	and sections for all activities
		Added Verification/Effectiveness of Action
28-Nov-18	4	column, updated MOECC to MECP

For the Powassan 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.





Powassan Drinking Water System

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Reviewed by: PCT

Approved by: Senior Operations Manager

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- **OP-02** Quality & Environmental Management System Policy
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Schedule "C" MECP's Director's Directions Minimum Requirements for Operational Plans



Powassan Drinking Water System

QEMS Proc.: OP-01 Rev Date: 2024-06-17 Rev No: 2 1 of 2 Pages:

Reviewed by: PCT

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 Powassan Drinking Water System operated by the Ontario Clean Water Agency (OCWA). It sets out the OCWA's policies and procedures with respect to guality and environmental management in accordance with the requirements of the Province 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 guality.

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

3. Procedure

- 3.1 The Powassan Drinking Water System is owned by the Corporation of the Municipality of Powassan. OCWA is the contracted Operating Authority for the Powassan Water Drinking Water 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 the MECP'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



Powassan Drinking Water System

QEMS Proc.: OP-01 2024-06-17 Rev Date: Rev No: 2 2 of 2 Pages:

Reviewed by: PCT

Approved by: Senior Operations Manager

5. Revision History

Date	Revision #	Reason for Revision
2018-03-21	0	Procedure issued – Information within OP-01 (s. 3) was originally set out in main body of Powassan Operational Plan (last revision 7 dated 2017- 09-22). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Addition of new wording (s. 3.3) to clarify that the Powassan Operational Plan now aligns with the 21 elements of the DWQMS.
2019-08-22	1	Updated MOECC to MECP.
2024-06-17	2	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.



Powassan Drinking Water System

QEMS Proc.:	OP-02
Rev Date:	2024-06-18
Rev No:	1
Pages:	1 of 2

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) POLICY

Reviewed by: PCT

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 (<u>www.ocwa.com</u>). 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.



Powassan Drinking Water System

 QEMS Proc.:
 OP-02

 Rev Date:
 2024-06-18

 Rev No:
 1

 Pages:
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QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) POLICY

Reviewed by: PCT

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
2018-03-21	0	Procedure issued – Information within OP-02 (s. 3) was originally set out in main body of Powassan Operational Plan (last revision 7 dated 2017- 09-22). 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.
2024-06-18	1	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, removed watermark.



Powassan Drinking Water System

QEMS Doc: Rev Date:	OP-03A 2024-10-24
Rev No:	2
Pages:	1 of 1

Ontario Clean Water Agency

SIGNED COMMITMENT AND ENDORSEMENT

This Operational Plan sets out the framework for OCWA' 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 Corporation of the Municipality of Powassan (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 Powassan 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.

Owner Endorsement OCWA Top Management Endorsement Dec 141 24 C Fred Schmeltz Date Jerémy Galda Date Safety, Frocess and Compliance Manager, North Eastern Ontario **Operations and Facilities Manager Regional Hub** ٦ Dec 19/14 Eric Nielson Date Brayden Robinson Date Regional Hub Manager, North Eastern Treasurer Ontario Regional Hub

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



Powassan Drinking Water System

QEMS Proc.:	OP-03
Rev Date:	2024-10-24
Rev No:	3
Pages:	1 of 2

COMMITMENT AND ENDORSEMENT

Reviewed by: PCT	Approved by: Senior Operations Manager
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1. Purpose

To document the endorsement of the Operational Plan for the Powassan Drinking Water System by OCWA Top Management and the Corporation of the Municipality of Powassan (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 Safety, Process and Compliance Manager and Regional Hub Manager.

Endorsement by the Owner is represented by the Operations and Facilities Manager and Treasurer.

- 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



Powassan Drinking Water System

COMMITMENT AND ENDORSEMENT

Reviewed by: PCT

Approved by: Senior Operations Manager

OP-06 Drinking Water System

5. Revision History

Date	Revision #	Reason for Revision
2018-03-22	0	Procedure issued – 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). Element 3 of main body of Powassan Operational Plan (last revision 7 dated 2017-09-22) was incorporated into Appendix OP-03A which also includes the Owner and Top Management sign-off section.
2019-08-22	1	Updated step 3.1 to clarify representatives of the Owner who are responsible for re-endorsement of the Operational Plan and changed step 3.2.3 by adding "major" changes in the system description will require re-endorsement of the Plan.
2022-09-08	2	Updated owner representatives in step 3.1 after re-endorsement.
2024-10-24	3	Updated step 3.1 representatives of the Owner who are responsible for re-endorsement. Removed Director of Public Works and Engineering and added Operations and Facilities Manager. Removed watermark.



Powassan Drinking Water System

QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) REPRESENTATIVE

Reviewed by: PCT

Approved by: Senior Operations Manager

1. Purpose

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

2. Definitions

None

3. Procedure

- 3.1 The role of QEMS Representative for the Powassan 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 Powassan 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
2018-03-22	0	Procedure issued – Information within OP-04 (s. 3) was originally set out in main body of Powassan Operational Plan (last revision 7 dated 2017-09-22). 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



Powassan Drinking Water System

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QUALITY & ENVIRONMENTAL MANAGEMENT SYSTEM (QEMS) REPRESENTATIVE

Reviewed by: PCT

Approved by: Senior Operations Manager

Date	Revision #	Reason for Revision
		personnel are aware of applicable legislative and regulatory requirements (s. 3.2).
2024-10-18	1	Removed Watermark



Powassan Drinking Water System

DOCUMENT AND RECORDS CONTROL

OP-05
2024-0
10
1 of 5

06-19

Reviewed by: PCT

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 Powassan 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 issue 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:

PCT (QEMS Representative) Review Senior Operations Manager or SPC Manager Approval



Powassan Drinking Water System

QEMS Proc.:	OP-05
Rev Date:	2024-06-19
Rev No:	10
Pages:	2 of 5

DOCUMENT AND RECORDS CONTROL

Reviewed by: PCT

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 and tracking updates/changes with the Summary of Findings.

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.

Data logger records are maintained as per Appendix OP-05A and are accessible when required. Data logger records are kept on the data logger at the Powassan Well House. Operators can retrieve data from the data logger. Data can also be retrieved from Wonderware. The data logger 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 request, (in writing) or verbally to the QEMS Representative, a revision be made to improve an existing internal QEMS document or the preparation of a new document. Written and verbal requests should indicate the reason for the requested 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



Powassan Drinking Water System

DOCUMENT AND RECORDS CONTROL

Reviewed by: PCT

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	10 years	Director's Direction under SDWA
Long term forecast of major infrastructure maintenance, rehabilitation and renewal activities		
Sampling plan/schedule/ calendar		
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 all the documents/records listed in OP-05A)	3 years*if no specified legislative requirement below*	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



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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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Approved by: Senior Operations Manager

4. Related Documents

OP-05A Document and Records Control Locations OP-19 Internal QEMS Audits OP-20 Management Review Summary of Findings

5. Revision History

Date	Revision #	Reason for Revision
2010-04-01	0	Procedure issued.
2011-09-20	1	Table 1 and Table 2 revised, document reissued.
2011-12-12	2	Table 1 updated to reflect change in document locations Change in Hub location Change in management position titles.
2012-10-17	3	Change in document locations.
2014-07-08	4	Change PDC to PDM.
2016-08-17	5	Added "or verbally" to section 5.6; Updated location to Public Drive to reflect the recent internal transition from Espanola Hub.
2017-07-04	6	Added OCWA's safety manual, sample schedule, MOECC drinking water Inspection reports, updated location of DWWP/MDWL, added SPCM, removed Operations Manager.
2018-03-22	7	Updated to Corporate Template. Procedure issued.
2018-08-15	8	Removed previous section 3.9 and updated section 3.8.
2022-03-23	9	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).
2024-06-19	10	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.



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DOCUMENT AND RECORDS CONTROL LOCATIONS

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

Type of Document/Record	Designated Document Control Location (HC = Hardcopy, E = Electronic)
Internal QEMS Documents	
Operational Plan (OP-01 to OP-21 and appendices, including Schedule "C" – Subject System Description Form)	E – Maintained on \\ocwfilereg\NEO Collab HC – Powassan Municipal Office HC – Powassan Public Works Shop HC – Powassan Water Treatment Plant
QEMS Policy	E - OCWA's Sharepoint site and public website HC – Posted at Powassan Well House
OCWA's Safety Manual	E – OCWA's Sharepoint site
Facility Emergency Plans	E – Maintained on \\ocwfilereg\NEO Collab HC – Powassan Well House
Corporate Emergency Response Plan (CERP)	E - OCWA's Sharepoint site
Standard Operating Procedures (referenced in Operational Plan and QEMS Procedures)	E – Maintained on \\ocwfilereg\NEO Collab HC – Powassan Well House
Essential Supplies & Services List	E – Maintained on \\ocwfilereg\NEO Collab HC – Powassan Well House
Vacation/On-call Schedule	E – Maintained on \\ocwfilereg\NEO Collab
Sampling Schedule	E- Maintained on \\ocwfilereg\NEO Collab HC – Powassan Well House
Chain of Custody Forms	E- Maintained on \\ocwfilereg\NEO Collab
External QEMS Documents	
Maintenance/equipment manuals	HC – Powassan Well House
Engineering schematics/plans/drawings	HC – Powassan Well House
Municipal Drinking Water Licence	E – Maintained on \\ocwfilereg\NEO Collab HC – Powassan Well House HC – Powassan Municipal Office
Drinking Water Works Permit	E – Maintained on \\ocwfilereg\NEO Collab HC – Powassan Well House HC – Powassan Municipal Office
Permit to Take Water	E – Maintained on \\ocwfilereg\NEO Collab HC – Powassan Well House
Ministry Inspection Reports	E – Maintained on \\ocwfilereg\NEO Collab
Operator certificates	HC – Powassan Well House
AWWA Standards	E - \\Torwan\PCT\AWWA Standards
Ontario's Watermain Disinfection Procedure	E - https://www.ontario.ca
DWQMS Standard	E - https://www.ontario.ca
ANSI/NSF product registration documentation for Chemicals/Materials Used	HC – Powassan Well House



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Type of Document/Record	Designated Document Control Location (HC = Hardcopy, E = Electronic)	
Applicable federal and provincial legislation and	Provincial Online at www.e-laws.gov.on.ca	
municipal by-laws	Federal online at www.laws.justice.gc.ca	
Operations Manual	HC – Powassan Well House	
Original Equipment Manuals (OEM)	HC – Powassan Well House	
QEMS Records		
Rounds sheets (in use)	HC – Powassan Well House	
Rounds sheets (completed)	Process data maintained electronically through PDM HC – Callander Water Treatment Plant	
Data Logger Records	E – Powassan Well House	
Facility Operations Logbook(s)	HC – Powassan Well House	
	E - https://ocwa.eriscloud.com/	
Visitor's Logbook	HC – Powassan Well House	
Operator training records	E – Electronic records are maintained in OCWA's Training Summary Database (OPEX)	
Maintenance records	E - maintained through WMS	
Internal Calibration records	E - maintained through WMS	
External Calibration records	E – Maintained on \\ocwfilereg\NEO Collab	
Chain of Custodies	E – Maintained on \\ocwfilereg\NEO Collab	
Laboratory analyses	Electronic reports from Laboratory – Maintained on \\ocwfilereg\NEO Collab	
	E - maintained through PDM	
Additional Sampling records	E – Maintained on \\ocwfilereg\NEO Collab	
In-house lab results	E - maintained through PDM HC – Powassan Well House	
SCADA records (Wonderware, OCWA)	E - maintained through Wonderware	
Internal Audit Reports	E – Maintained on \\ocwfilereg\NEO Collab	
External Audit Reports	E – Maintained on \\ocwfilereg\NEO Collab	
Management Review documentation	E – Maintained on \\ocwfilereg\NEO Collab	
Ministry forms referenced in the Drinking Water Works Permit, including Form 1, Form 2, Form 3 and Director Notifications	E – Maintained on \\ocwfilereg\NEO Collab	
Summary of Findings Spreadsheet (Preventive/Corrective) records	E - Maintained on \\ocwfilereg\NEO Collab	
Internal QEMS Communications	E – Microsoft Outlook E-mail	
External QEMS Communications	E – Microsoft Outlook E-mail	
(including essential suppliers and service providers)	E - Maintained on \\ocwfilereg\NEO Collab	
Annual Reports	E – Maintained on \\ocwfilereg\NEO Collab HC – Powassan Municipal Office	



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Type of Document/Record	Designated Document Control Location (HC = Hardcopy, E = Electronic)
Summary Reports for Municipalities	E – Maintained on \\ocwfilereg\NEO Collab HC – Powassan Municipal Office
AWQI Reports	E – Maintained on \\ocwfilereg\NEO Collab HC – Callander Water Treatment Plant
Incidents of Non-Compliance Records	E – Maintained on \\ocwfilereg\NEO Collab
Analysis and Action Plan (AAP) Report	E – Maintained on \\ocwfilereg\NEO Collab
Contingency Plan Review/Test Summary	E – Maintained on \\ocwfilereg\NEO Collab
Infrastructure review (Capital Letter & Capital and Major Maintenance Recommendations Report)	E – Maintained on \\ocwfilereg\NEO Collab
Community complaint records	E – Maintained on \\ocwfilereg\NEO Collab
Call In/Call Back/Call Out Reports	E – Maintained in WMS
Quarterly Operations Report (to the Owner)	E – Maintained on \\ocwfilereg\NEO Collab
Results of emergency test exercises/emergency response debriefs	E – Maintained on \\ocwfilereg\NEO Collab



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DOCUMENT AND RECORDS CONTROL LOCATIONS

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Revision History

Date	Revision #	Reason for Revision
2018-03-22	7	Appendix issued; Table was originally included within the Document and Records Control Procedure (QP-01) (last revision 6 dated 2017- 07-04). Added OCWA's safety manual, Emergency Response Plan (corporate), DWWP, MDWL, and updated location of in-house lab results in table 1. Added Safety, Process and Compliance Manager, removed Operations Manager.
2018-07-26	8	Removed Public Library from Designated Document Control Location for the Operational Plan.
2019-08-22	9	Updated MOECC to MECP.
2021-08-23	10	Updated table to include new eRIS electronic logbook now in use and included hyperlink to location.
2022-03-23	11	Added: exact location of documents/records, clarity on which documents are included under the Operational Plan, new documents/records (Watermain Disinfection Procedure results of emergency test exercises/emergency response debriefs and Ministry forms referenced in the Drinking Water Works Permit, visitor logbook) and clarity to external communications and inspection reports; Removed: reference to QEMS Reference Manual and OCWA's intranet (replaced with OCWA's Sharepoint site). Added row to header to show who reviewed and approved the document.
2024-06-19	12	Appendix updated with MECP revised to Ministry, updated Corporate Emergency Plan (CERP) name, minor wording, removed watermark.



Powassan Drinking Water System

DRINKING WATER SYSTEM

Reviewed by: PCT

Approved by: Senior Operations Manager

1. Purpose

To document the following for the Powassan 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 Powassan Drinking Water System is owned by the Corporation of the Municipality of Powassan. As the Operating Authority, the Ontario Clean Water Agency provides management and oversight (under OCWA's Quality and Environmental Management System) to the Powassan Drinking Water System. OCWA employees have operational



Powassan Drinking Water System

DRINKING WATER SYSTEM

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Approved by: Senior Operations Manager

responsibilities in the Drinking Water System. The Powassan Well Supply is a "Water Treatment Subsystem Class 1", and the Powassan Distribution System is a "Water Distribution Subsystem Class 1".

3.2 Source Water

General Characteristics

This is a ground water well system, with good, consistent characteristics. Both wells do not appear to be vulnerable to bacteriological contamination.

Characteristic	Minimum	Maximum	Annual Average
Turbidity (NTU) Well #1	0.05	0.16	0.09
Turbidity (NTU) Well #2	0.06	0.21	0.10
<i>E. coli</i> (CFU/100 mL) Well #1	0	0	0
<i>E. coli</i> (CFU/100 mL) Well #2	0	0	0
Total Coliforms Well #1	0	0	0
Total Coliforms Well #2	0	0	0

Raw Water Characteristics at Raw Water Source (based on 2023 PDM data)

Common Fluctuations / Threats

The facility has a Source Water Protection Plan, which identifies various risks. Visit <u>www.nbmca.on.ca</u> for details.

Operational Challenges

There are no operational challenges envisioned.

3.3 Treatment System Description

The Municipality of Powassan obtains water from a ground water source through two (2) municipal drilled (overburden) wells. The water treatment facility was constructed in 1981 and the system was upgraded in 2003 including the addition of a chlorine contact chamber and a new standby diesel gen set. The water system also includes an in ground storage reservoir. The Powassan water system serves an approximate population of 1000. In accordance with the Municipal Drinking Water Licence, the drinking water system shall not be operated to exceed 1,313 cubic meters per day.

The well house houses valves, piping, magnetic flow meters chlorination system, pressure gauge, transducers to facilitate well level monitoring, and electrical controls. The well house is a 4.7 m x 6.9 m masonry building containing the process piping, flow meters and treated water sample points and disinfection system.



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Well #1 consists of a 0.15 m diameter steel casing, 23.2 m deep drilled production well including 3.8 meters of screen, pump is 15 kW, 3 phase, 60 Hertz, 575 Volt Grudfos Submersible Pump with the capacity of 15.2 L/s or 1,313 m³/d at a TDH of 76.2 m. The well is capped, and a monitoring well is located 5 m south of well #1, which is protected by a vertical 0.45 m diameter corrugated steel pipe around the well casing and standing 1.2 m above the ground. Well No. 1 is operated at 7.56 L/s at an operating pressure of 470 kPa. Well #1 is located about 75 m South of Well #2.

Well #2 pump is 22.4 kW, 3 phase, 60 Hertz, 575 Volt Grudfos Submersible Pump with the capacity of 15.2 L/sec or 1,313 m³/d at a TDH of 92.2 m. The well casing was raised 2 m in 2003 and furnished with a pitless adapter and locked down insect proof vented cap. A 0.15 m diameter test well is located approximately 3 m east of well #2. Well No. 2 is operated at 15.1 L/s at an operating pressure of 380 kPa. Well #2 is situated about 30 m from Genesee Creek within the Genesee Creek floodplain.

Both wells No.1 and 2 raw water supply lines have a pressure reducing flow control valve to ensure water taking does not exceed 912 L/min in accordance with the Permit To Take Water.

Two magnetic flow meters are installed on the raw water piping and connected to a video graphic recorder. The purpose of the flow meters are to measure and record the water flow rate to ensure the limit of each well is not exceeded as well as total water taking as required in the certificate of Approval. Another function of the flow meters if for chlorination system pump pacing. The flow meters are both alike: ABB Kent Taylor Magnetic Flow meters, 100 mm diameter with a minimum flow of 3.53 L/Min and a maximum flow of 4716 L/min.

The disinfection system includes a sodium hypochlorite feed system that consists of two (2) Prominent GammaX metering pumps with a maximum capacity of 3.6 L/hr. The two sodium hypochlorite pumps are mounted on a pre-piped, pre-wired panel. There are two (2) chemical injection points (one duty and one standby) with manual duty pump selection and plant interlock on low free chlorine residual. Two (2) 160 L capacity polyethylene solution tanks are installed in the treatment plant. As well one (1) Poly Spill Pallet 2000 with drain is provided for secondary spill containment.

Chlorinated water leaves the well house and enters chlorine contact piping to ensure 15 minutes of contact time prior to distribution to the first consumer. The chlorine contact piping has a serpentine configuration piping 600 mm diameter and a length of 48.5 meters of concrete pressure pipe supplied by Hyprescon.

A sample line is installed from the main header downstream of the chlorine contact piping to a Prominent Chlorine Residual Analyzer, mounted on the wall of the water treatment plant.

A sample line is installed from the main header downstream of the chlorine contact piping to an ABB turbidimeter, Model No. 4670 Series with a range of 0-100 NTU, and



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mounted on the wall of the water treatment plant. The ABB turbidimeter is out of service and a handheld turbidimeter is located on site.

An 8 channel Endress-Hauser advanced graphic data manager, Model No. RSG 40, 20 analog and 14 digital inputs, and 12 relays with 2 analog outputs, is installed on the wall of the water treatment plant adjacent to the chlorine analyzer. The advanced graphic data manager has a mathematic formula editor with a thin-film-transistor (TFT) 7" colour graphic display.

Electrical power to the water facility and nearby St. Gregory School sewage lift station is provided from the Hydro One electricity distribution grid through the well house. There is a permanent 75 kW 3 phase standby diesel generator equipped with an automatic transfer switch should there be a power failure. The standby generator and double walled fuel storage is located outside adjacent to the well house in a weather proof acoustical enclosure.



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3.4 Treatment System Process Flow Chart





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Reviewed by: PCT

Approved by: Senior Operations Manager

3.5 Description of the Distribution System Components

The distribution system consists of approximately 9.2 km of water mains ranging in size from 100 mm to 250 mm in diameter. They are mostly ductile and PVC piping.

The municipality has constructed a new 1278 cubic meter in-ground water storage reservoir to replace the aging standpipe. The dual celled reservoir located at the end of McRae Drive is equipped as a re-chlorination facility. The reservoir improves water pressure in the distribution system which had been a concern for many years.

Industrial /institutional /commercial at risk are required to have backflow preventers.



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3.6 Distribution System Components Flow Chart – Original copy of full size distribution system drawings can be found at Public Works Shop and/or Water Treatment Plant



4. Related Documents

None


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DRINKING WATER SYSTEM

Reviewed by: PCT

Approved by: Senior Operations Manager

5. Revision History

Date	Revision #	Reason for Revision
2018-03-23	0	Procedure issued – Information within OP-06 (s. 3) was originally set out in main body of Powassan Operational Plan (last revision 7 dated 2017-09-22). 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 raw water characteristics.
2019-08-22	1	Updated raw water characteristics.
2020-09-02	2	Updated raw water characteristics and updated description to remove automatic switchover of sodium hypochlorite pumps.
2021-08-23	3	Updated raw water characteristics.
2022-06-28	4	Updated raw water characteristics and updated distribution system drawing to show new reservoir and removed standpipe, added note to location of original drawings.
2023-06-26	5	Updated raw water characteristics. Update the reservoir info from future tense to present tense on page 6.
2024-10-18	6	Updated raw water characteristic. Updated pumps used for disinfection. Removed watermark.



Powassan Drinking Water System

RISK ASSESSMENT

Reviewed by: PCT

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 anything 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: PCT

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 of the Environment, Conservation and Parks (MECP) 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 MECP's "Procedure for Disinfection of Drinking Water in Ontario" 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 <u>not</u> 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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RISK ASSESSMENT

Reviewed by: PCT

Approved by: Senior Operations Manager

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 <u>all</u> 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 MECP 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: PCT

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

4. Related Documents

OP-08 Risk Assessment Outcomes OP-20 Management Review MECP's "Potential Hazardous Events for Municipal Residential Drinking Water Systems" MECP's "Procedure for Disinfection of Drinking Water in Ontario"

5. Revision History

Date	Revision #	Reason for Revision
2018-02-12	0	Procedure issued – Information within OP-07 was originally set out in QEMS Procedure QP-02 Risk Assessment and Risk Assessment Outcomes (last revision 3 dated 2017-09-22). 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.
2019-08-22	1	Updated MOECC to MECP.
2024-11-29	2	Removed watermark



Powassan Drinking Water System

RISK ASSESSMENT OUTCOMES

Reviewed by: PCT

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 1 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 MECP's "Potential Hazardous Events for Municipal Residential Drinking Water Systems" are indicated in the appropriate column using the reference numbers in Table 4 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 <u>not</u> 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 2 of OP-08A.

3.4 A summary of the results of the annual review/36-month risk assessment is recorded in Table 3 of OP-08A.



Powassan Drinking Water System

RISK ASSESSMENT OUTCOMES

Reviewed by: PCT

Approved by: Senior Operations Manager

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 MECP's "Potential Hazardous Events for Municipal Residential Drinking Water Systems"

5. Revision History

Date	Revision #	Reason for Revision
2018-02-12	0	Procedure issued – Information within OP-08 was originally set out in QEMS Procedure QP-02 Risk Assessment and Risk Assessment Outcomes (last revision 3 dated 2017-09-22). 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.
2019-08-22	1	Updated MOECC to MECP.
2024-11-29	2	Removed watermark

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CEMS	Powassan Drinking Water System	Rev Date.	15 15 10-00
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	SUMMARY OF RISK ASSESSMENT OUTCOMES		
Reviewed by: PCT	Approved by: Senior Operations Manager		

Table 1: Risk Assessment Table

Note: Processes referred to in section 3.3.4 of OP-07 Risk Assessment must be identified as mandatory Critical Control Points (CCPs) as applicable. Mandatory CCPs are not required to be ranked.

CCP?	Ves – Mandatory CCP Yes – Additional CCP identified for facility No	Ves – Mandatory CCP Tyes – Additional CCP identified for facility No	 Yes - Mandatory CCP Yes - Additional Yes - Additional CCP identified for facility No 	 │ Yes – Mandatony CCP │ Yes – Additional └ No
Risk Value	4	4	10	Q
eonsequece	2	2	<i>ي</i>	m
Likelihood	2	7	2	2
Existing Control Measures	Backup well and pump, provisions of an alternate water source SOP	Backup well and pump, provisions of an alternate water source SOP	No method of control until contaminant has been identified – response may include shutting down the well, supplying bottled water, following CP for Unsafe Water and following provisions of an alternate water source SOP	No method of control until contaminant has been identified – response may include shutting down the well, supplying bottled water, following CP for Unsafe Water and following provisions of an alternate water source SOP
Possible Outcome (Hazards)	Loss of raw water	Loss of raw water	Contamination of aquifer	Contamination of aquifer
Description of Hazardous Event	Well casing collapse, due to natural disaster or vandalism/terrorism	Well pump failure	Chemical, biological, radioactive spill to the well, accidently or intentionally	Agricultural run-off
MECP Potential Hazardous Event/Hazard Reference # (see Table 4)	1, 2, 3, 4, 6	2	2, 5, 6, 9	2, 5, 9
Activity/ Process Step	Raw Water/Well			

:: OP-08A 2024-10-03 15 2 of 13			ССР?	 ∑ Yes - landatory CCP Yes - Additional Yes - Additional clentified for clifty No 	 ∑ Yes - landatory CCP Yes - Additional Yes - Additional CP identified for cility No 	 ∑ Yes - landatory CCP ∑ Yes - Additional CP identified for cility No
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			рооцііэяі І			
AN stem	NT OUTCOMES	I by: Senior Operations Manager	Existing Control Measures	Redundancy (backup pump), low chlorine residual alarm and auto plant lockout, continuous on-line monitoring, scheduled maintenance activities, site specific spreadsheet to calculate Specific spreadsheet to calculate CT, CT SOP, adverse water quality reporting SOP, CP for Unsafe Water	Low chlorine residual alarm and auto plant lockout, in-house residual testing, scheduled maintenance activities, spare on shelf site specific spreadsheet to calculate CT, CT SOP, adverse water quality reporting SOP, CP for Unsafe Water	Low chlorine residual alarm and auto plant lockout, operator checks, chemical available within the Region, site specific spreadsheet to calculate CT, CT SOP, adverse water quality reporting SOP, CP for Unsafe Water
:RATIONAL PL	RISK ASSESSME	Approved	Possible Outcome (Hazards)	Ineffective removal of pathogens (minimum treatment requirements not met), loss of disinfection, potential for AWQI	Unknown chlorine residual levels, potential for inadequate inactivation of pathogens, potential for AWQI	Low chlorine residual, Inadequate disinfection, potential for AWQI
OPE	SUMMARY OF		Description of Hazardous Event	Sodium hypochlorite pump failure	Analyzer failure	Low supply of sodium hypochlorite
			MECP Potential Hazardous Event/Hazard Reference # (see Table 4)	10	10	10
OEMS		Reviewed by: PCT	Activity/ Process Step	Primary Disinfection (Sodium Hypochlorite System)		

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2	-	SUMMARY OF	RISK ASSESSMEN	IT OUTCOMES				
Reviewed by: PCT			Approved	by: Senior Operations Manager				
Activity/ Process Step	MECP Potential Hazardous Event/Hazard Reference # (see Table 4)	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Poorience	Sonsuperios BulaV AsiA		CCP?
Distribution System Secondary Disinfection)	11	Loss of free chlorine residual in distribution	Failure to control biofilm and pathogens (long-term), potential for AWQI	Continuous on-line monitoring of chlorine residual into the distribution system, low chlorine residual alarm and auto plant lockout, chlorine residual testing as per O. Reg. 170/03, regularly scheduled maintenance, adverse water quality reporting SOP, CP for Unsafe Water				es – atory CCP és – Additional identified for /
Distribution System		Adverse water quality as described in O. Reg. 170/03 (eg. Bacteriological, TotalTrihalomethanes.)	Potential for unsafe drinking water	Site specific sampling schedule, adverse water quality reporting SOP, CP for Unsafe Water	с с	6		es – atory CCP es – Additional identified for /o
	1, 2, 3, 4, 6, 7, 8	Main break due to weather, time or vandalism/terrorism	Contamination, loss of supply, loss of pressure	Alarm SOPs, training, AWWA standards, MECP procedures for disinfection, capital replacements, alarms (low reservoir level), operator checks, notifications/complaints from customers	3	Q		es – atory CCP 'es – Additional identified for /o
	6, 7, 8	Fire, accidental or vandalism/terrorism	Low pressure, contamination/turbidity	Communication with fire department, fire flow design, extra well, reservoir	4	ω		es – atory CCP es – Additional identified for /o

c.: OP-08A 2024-10-03 15 4 of 13			ССР?	☐ Yes – Mandatory CCP ☐ Yes – Additional CCP identified for facility No	☐ Yes – Mandatory CCP Yes – Additional Yes – Additional factifity ∑ No	☐ Yes - Mandatory CCP Yes - Additional CCP identified for facility No	☐ Yes – Mandatory CCP Mandatory CCP Yes – Additional CCP identified for facility	☐ Yes – Mandatory CCP Yes – Additional CCP identified for facility No
AS Do Date: No: es:			eulsV AsiA	<u>ه</u>	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	9	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	6
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			Likelihood	2	4	ε	4	ε
AN stern	NT OUTCOMES	by: Senior Operations Manager	Existing Control Measures	Plumbing code, inspections, respond to complaints and collect bacteriological samples, cross-connection by-law, adverse water quality reporting SOP, CP for Unsafe Water	Training, inspections, quick response time, alarm SOPs, certified staff	Maintenance and valve inspections, customer complaints, flushing, reservoir	Contingency plans, alarm SOPs, back-up generator, alarms, reservoir, backup operators to reset phase controller	Capital programs, alarm SOPs, provisions of an alternate water source SOP, isolation of a zone, security measures, public complaints, reservoir, backup well, CP for Unsafe Water
ERATIONAL PL/	RISK ASSESSMEN	Approved	Possible Outcome (Hazards)	Contamination	Contamination, loss of supply, loss of pressure	Loss of pressure, loss of public trust	Loss of pressure, surges	Loss of pressure, contamination
OPE	SUMMARY OF		Description of Hazardous Event	Cross-connection, backflow, siphonage	Human error	Air in the line	Power loss, due to weather or vandalism/terrorism	Single main contamination accidental or vandalism/terrorism
			MECP Potential Hazardous Event/Hazard Reference # (see Table 4)	80	2, 7, 8	2, 8	1, 3, 4, 6, 7, 8	6, 7, 8
OBMS		Reviewed by: PCT	Activity/ Process Step	Distribution System				

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		SUMMARY OF	RISK ASSESSMEN	VT OUTCOMES				
Reviewed by: PCT			Approved	by: Senior Operations Manager				
Activity/ Process Step	MECP Potential Hazardous Event/Hazard Reference # (see Table 4)	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	eouenbesuoo		CCP?
Distribution System	1, 3, 7, 8	Natural disaster	Loss of pressure, contamination	Contingency plans, alarm SOPs, provisions of an alternate water source SOP	N	4 8	3 Ma Ma fac CC	Yes – ndatory CCP Yes – Additional P identified for No
		Leaching contaminants into hydrant drain port	Contamination	Maintain positive pressure, inspections	4	2	3 Ma Ma fac CC	Yes – ndatory CCP Yes – Additional P identified for No
	7, 8	Residential service leak	Loss of pressure	Response to customer	4	1	t Ma Ma cc fac	Yes – ndatory CCP Yes – Additional P identified for liity No
		Biofilm and tuberculation	Public health	Flushing, maintenance, capital replacement	4	~ ~		Yes – ndatory CCP Yes – Additional P identified for No
		Dead ends and related flushing operations	Contamination	Flushing, performance standards	4	N		Yes – ndatory CCP Yes – Additional P identified for lilty No

QEMS Ontario Clean Water Agency		OPE	ERATIONAL PLA san Drinking Water Sys	N tem		QEMS Rev D Rev N Pages	S Doc.: ate: lo:	OP-08A 2024-10-03 15 6 of 13
		SUMMARY OF	RISK ASSESSMEN	JT OUTCOMES				
Reviewed by: PCT			Approved	by: Senior Operations Manager				
Activity/ Process Step	MECP Potential Hazardous Event/Hazard Reference # (see Table 4)	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures	Likelihood	Consequence		ССР?
Distribution System		Critical shortage of staff	Contamination, loss of supply	Cross-training staff, extra staff available within region, emergency contractors, CP for Critical Shortage of Staff	0	4		Yes – datony CCP Yes – Additional i to identified for No
Reservoir	1, 2, 3, 4, 7, 8	Loss of structural integrity due to time and weather	Loss of pressure, loss of supply, contamination	Low level alarms, security, inspections, two wells can be run with one reservoir cell isolated	1	4		Yes – datory CCP Yes – Additional i dentified for ty
	N	Loss of communication	Loss of service, public health	Manual inspections and operation, heart beat alarm, pressure gauge on discharge header at well house	4	4		Yes – datory CCP Yes – Additional i dentified for ty
	2, 7, 8	Reservoir out of service for maintenance, repair	Loss of supply, loss of pressure	Manual inspections, level indicator alarm, public water restriction notices, convert to pressurized system configuration, redundancy (2 cells)	N	1 2	Man CCF	Yes – datory CCP Yes – Additional i dentified for ty
	Q	Intentional contamination, vandalism/terrorism	Contamination	Security, inspections	N	2 2 3		Yes – datory CCP Yes – Additional Pidentified for ty

c.: OP-08A 2024-10-03 15 7 of 13			CCP?	Yes – Yes – Mandatony CCP Yes – Additional CCP identified for facility No	Yes - Yes - Mandatony CCP Yes - Additional CCP identified for facility No	Yes - Yes - Mandatory CCP Yes - Additional Yes - Additional CCP identified for facility No	 Yes – Mandatory CCP Mandatory CCP Yes – Additional Yes – Yes – Yes	☐ Yes – Mandatory CCP
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DEN Rev Pag			eoneequee	4	4	ε	4	4
			Likelihood	2	N	ε	r.	2
AN stern	NT OUTCOMES	by: Senior Operations Manager	Existing Control Measures	Alarms, inspections	Communication with treatment plant, visual inspections, investigations	Notifications/complaints from customers, alarms (low reservoir level), operator checks, CP for Unsafe Water	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	Implementing Identity and Access Management throughout the account management lifecycle. Privileges are granted to users with two principles –
:RATIONAL PL/	RISK ASSESSMEI	Approved	Possible Outcome (Hazards)	Contamination, loss of pressure, loss of supply	Contamination	Contamination, loss of water supply, loss of pressure	Shortage of staff Supply shortages Loss of sample locations	Loss of system process visibility for operators (e.g.,
OPE	SUMMARY OF		Description of Hazardous Event	Fire	Water theft	Accident, vandalism/terrorism	Pandemic	Cybersecurity threats
			MECP Potential Hazardous Event/Hazard Reference # (see Table 4)	2, 7, 8	Q	2, 6, 7, 8	F	13
OEMS Omanio Clean Water Agency		Reviewed by: PCT	Activity/ Process Step	Reservoir	Fire Hydrants	All (watermains, connections, hydrants, valves, construction, etc.)		

.: OP-08A 2024-10-03 15 8 of 13				CCP?	 Yes - Additional CP identified for icility No No
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				Likelihood	
AN stem	NT OUTCOMES	I by: Senior Operations Manager		Existing Control Measures	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 Eriewalls 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 trisk compliance checks
ERATIONAL PL	RISK ASSESSME	Approved		Possible Outcome (Hazards)	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)
OPE	SUMMARY OF			Description of Hazardous Event	
			-	MECP Potential Hazardous Event/Hazard Reference # (see Table 4)	
QEMS Ontario Clean Water Agency		Reviewed by: PCT		Activity/ Process Step	All (watermains, connections, hydrants, valves, construction, etc.)

QEMS		OPE	:RATIONAL PL/ san Drinking Water Sys	N stem	Оккц	EMS Doc. ev Date: ev No: ages:	: OP-08A 2024-10-03 15 9 of 13
	-	SUMMARY OF	RISK ASSESSMEN	NT OUTCOMES			
Reviewed by: PCT			Approved	by: Senior Operations Manager			
Activity/ Process Step	MECP Potential Hazardous Event/Hazard Reference # (see Table 4)	Description of Hazardous Event	Possible Outcome (Hazards)	Existing Control Measures		eulsV AsiA	CCP?
All (watermains, connections, hydrants, valves, construction, etc.)	3,4,6,13	Prolonged Network Communication Loss	Loss of automatic controls, loss of remote monitoring	72 hour reviews, cellular back-up 2 to Bell telephone alarming, manual plant operation, plant checks	4	∞ □≥ □0 ₫ ⊠	Yes – andatory CCP Yes – Additional CP identified for cility 3 No

Table 2: Identified Critical Control Points (CCPs)

Response, Reporting and Recording Procedures	Well pump shutdown, adverse water quality reporting SOP, Alarm SOPs, Restoration & chlorination equipment &	adequate residual, Flushing, site specific spreadsheet to calculate CT, CT SOP, CCP exceedances tracked in logbook and/or WMS (Maximo), CP for Unsafe Water	Adverse water quality reporting SOP, Receipt and investigation of water quality complaints, scheduling of sampling, records, log book, Chlorine residual reports, alarm SOPs,	CCP exceedances tracked in logbook and/or WMS (Maximo), CP for Unsafe Water
Monitoring Procedures	SCADA (continuous online analyzers), Trend review and sign-off as per O. Reg. 170/03,	Routine on-site checks conducted by OCWA staff	Distribution chlorine residuals monitored as per O. Reg. 170/03	
Critical Control Limits	Free Chlorine Residual – Treated Alarms Low set point = 0.80 mg/L for 0 seconds,	auto plant lockout High set point = 4.00 mg/L for 300 seconds	Free Chlorine Residual – Distribution Operational Low = 0.2 mg/L Regulatory: Low = 0.05 mg/L Operational High = 4.0 mg/L	
ССР	Primary Disinfection (Sodium Hypochlorite System)		Secondary disinfection	

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

QEMS	OPERATIONAL PLAN Powassan Drinking Water System	QEMS Doc.: Rev Date: Rev No: Parae:	OP-08A 2024-10-03 15
Ontario Clean Water Agency	SUMMARY OF RISK ASSESSMENT OUTCOMES	- 000 -	5
Reviewed by: PCT	Approved by: Senior Operations Manager		

Table 3: 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 calendar year.

Date of Activity	Type of Activity	Participants	Summary of Results
2013-03-29	36-Month Risk Assessment	Darryl Colnar (Operations Manager)	Information in summary remains current and assumptions still valid – no revisions necessary
2013-04-03	Annual Review	Darren Aljoe (Operator)	Information in summary remains current and assumptions still valid – no revisions necessary
2014-04-23	Annual Review	Natalie Wagar (PCT), John Hemingway (Operator)	Information in summary remains current and assumptions still valid – no revisions necessary
2014-12-19	Annual Review	Natalie Wagar (PCT), Patti O'Handley (PCT)	Information in summary remains current and assumptions still valid – no revisions necessary
2015-07-16	Annual Review	Natalie Wagar (PCT)	Information in summary remains current and assumptions still valid – no revisions necessary
2016-03-09	36-Month Risk Assessment	Paul Dyrda (Senior Operations Manager), Donald Michaud (Operator)	Information in summary remains current and assumptions still valid – small revisions – see revision history
2017-03-01	Annual Review	Joshua Gravelle (PCT)	Information in summary remains current and assumptions still valid – no revisions necessary
2017-06-21	Annual Review	Joshua Gravelle (PCT), John Hemingway (Operator)	Information in summary remains current and assumptions still valid – no revisions necessary
2018-04-11	36-Month Risk Assessment	Joshua Gravelle (PCT), John Hemingway (Senior Operator), Paul Dyrda (Senior Operations Manager)	All Activities/Process Steps were re-assessed and new hazardous events and hazards identified (including those in the MECP's "Potential Hazardous Events for Municipal Residential Drinking Water Systems") and ranked according to OP-07 (revision 0). Results captured in Revision 8 of this Summary of Risk Assessment Outcomes
2019-07-24	Annual Review	Joshua Gravelle (PCT), John Hemingway (O&M Team Lead)	Information in summary remains current and assumptions still valid – small revisions necessary – see Revision History

Structure SUMMARY OF RISK ASSESSMENT OUTCOMES Eviewed by: PCT Senior Operations Manager Eviewed by: PCT Approved by: Senior Operations Manager 20-08-19 36-Month Risk Assessment Joshua Gravelle (PCT), John Information in summary remains current and assu 20-08-19 36-Month Risk Assessment Joshua Gravelle (PCT), John Information in summary remains current and assu 21-07-21 Annual Review Joshua Gravelle (PCT), Dan Finnigan Information in summary remains current and assu 21-07-21 Annual Review Joshua Gravelle (PCT), Dan Finnigan Information in summary remains current and assu 21-07-21 Annual Review Joshua Gravelle (PCT), Dan Finnigan Information in summary remains current and assu 22-04-14 Annual Review Joshua Gravelle (PCT), Dan Finnigan Information in summary remains current and assu 22-04-14 Annual Review Joshua Gravelle (PCT) Information in summary remains current and assu 22-04-14 Annual Review Joshua Gravelle (PCT) Information in summary remains current and assu 22-04-14 Annual Review Joshua Gravelle (PCT) Information in summary remains current and assu 23-06-07 <th>QEMS</th> <th></th> <th>OPERATIONAL PLA Powassan Drinking Water Sysi</th> <th>e^m Z</th> <th>QEMS Doc.: Rev Date: Rev No: Pages:</th> <th>OP-08A 2024-10-03 15 11 of 13</th>	QEMS		OPERATIONAL PLA Powassan Drinking Water Sysi	e ^m Z	QEMS Doc.: Rev Date: Rev No: Pages:	OP-08A 2024-10-03 15 11 of 13
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-04-14 Annual Review Joshua Gravelle (PCT) Information in summary remains current and assumative mains current and assumative matine astrent and astrent and astrent and assumatina current and assumativ	-07-21	Annual Review	Joshua Gravelle (PCT), Dan Finnigan (Senior Operator/Mechanic)	Information in summary remains current small revisions necessary – see Revisio	t and assumptic on History	ns still valid –
-06-07 Annual Review Joshua Gravelle (PCT), Dan Finnigan Information in summary remains current and assu (Senior Operator/Mechanic) -06-07 36-Month Risk Assessment Joshua Gravelle (PCT), Dan Finnigan Information in summary remains current and assu (Senior Operator/Mechanic) -06-07 36-Month Risk Assessment Joshua Gravelle (PCT), Dan Finnigan Information in summary remains current and assu (Sem Lead), Curtis Green (O&M -06-07 36-Month Risk Assessment Joshua Gravelle (PCT), Dan Finnigan Information in summary remains current and assu small revisions necessary - see Revision History Operations Manager) -10-03 Annual review Monique Malette (PCT), Dan Finnigan Information in summary remains current and assu small revisions necessary - see Revision History (O&M Team Lead)	-04-14	Annual Review	Joshua Gravelle (PCT)	Information in summary remains current small revisions necessary – see Revisio	t and assumptic on History	ns still valid –
-06-07 36-Month Risk Assessment Joshua Gravelle (PCT), Dan Finnigan Information in summary remains current and assu -06-07 36-Month Risk Assessment Joshua Gravelle (PCT), Dan Finnigan Information in summary remains current and assu -10-03 Annual review Nonique Malette (PCT), Dan Finnigan Information in summary remains current and assu	-00-02	Annual Review	Joshua Gravelle (PCT), Dan Finnigan (Senior Operator/Mechanic)	Information in summary remains current small revisions necessary – see Revisio	t and assumptic on History	ns still valid –
-10-03 Annual review Monique Malette (PCT), Dan Finnigan Information in summary remains current and assu (O&M Team Lead) small revisions necessary – see Revision History	-06-07	36-Month Risk Assessment	Joshua Gravelle (PCT), Dan Finnigan (O&M Team Lead), Curtis Green (O&M Team Lead), Paul Dyrda (Senior Operations Manager)	Information in summary remains current small revisions necessary – see Revisio	t and assumptic on History	ns still valid –
	-10-03	Annual review	Monique Malette (PCT), Dan Finnigan (O&M Team Lead)	Information in summary remains current small revisions necessary – see Revisio	t and assumptic on History	ns still valid –

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	S	UMMARY OF I	RISK ASSESSMENT OUTCOMES		
Reviewe	d by: PCT		Approved by: Senior Operations Manager		
Table 4: F Drinking V	Potential Hazardous Event/Hazard F Vater Systems" dated April 2022)	Reference Numt	oers (based on MECP's "Potential Hazardous Events for	r Municipal R	esidential
If the haze	ardous event/hazard is not applicab	le to this drinkin	g water system (DWS), it will be noted in the first colum	n of this table	
(indic	System Type ate all that apply to this DWS)	Reference Number	Description of Hazardous Event/Ha:	zard	
×	All Systems	1	Long Term Impacts of Climate Change		
×	All Systems	2	Water supply shortfall		
×	All Systems	3	Extreme weather events (e.g., tornado, ice storm)		
×	All Systems	4	Sustained extreme temperatures (e.g., heat wave, deep fre	eze)	
×	All Systems	5	Chemical spill impacting source water		
×	All Systems	6	Terrorist and vandalism actions		
×	Distribution Systems	7	Sustained pressure loss		
×	Distribution Systems	8	Backflow		
×	Treatment Systems	6	Sudden changes to raw water characteristics (e.g., turbidity	, рН)	
×	Treatment Systems	10	Failure of equipment or process associated with primary dis (e.g., coagulant dosing system, filters, UV system, chlorinat	sinfection tion system)	
×	Treatment Systems and Distribution Systems providing secondary disinfection	11	Failure of equipment or process associated with secondary chlorination equipment, chloramination equipment)	disinfection (e	.g.,
N/A	Treatment Systems using Surface Water	12	Algal blooms		
×	All Systems	13	Cybersecurity threats		

		OPERATIONAL PLAN	QEMS Doc.: Rev Date:	OP-08A 2024-10-03
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		SUMMARY OF RISK ASSESSMENT OUTCOMES		
Reviewed by: PCT		Approved by: Senior Operations Manager		
Revision History				
Date	Revision #	Reason for Revision		
2010-03-10	0	Initial risk assessment conducted.		
2011-05-20	1	Added Table 3: Record of Annual Review.		_
2012-10-17	2	Added comment as to how CCP are tracked.		-
2013-03-29	3	Re-write of Risk assessment conducted.		
2014-04-23	4	Annual review.		
2016-03-09	5	Changed critical control limits of free chlorine residual.		-
2017-03-01	6	Annual review updated table 3, no changes to Risk Assessment.		
2017-06-26	7	Annual review updated table 3, no changes to Risk Assessment.		
2018-04-11	8	Summary of Risk Assessment Outcomes assigned document number (OP-08A reference MECP's "Potential Hazardous Events for Municipal Residential Drink Table 1 updated to include [hazard]based on results of 36-month risk assess 2018-04-11. Updated existing control measures and response, reporting and r); added table ing Water Sysi ment that took ecording proce	4 to tems"; place on edures.
2019-08-22	6	Updated alarm set points in table 2. Updated to MECP from MOECC. Added r MECP's "Potential Hazardous Events for Municipal Residential Drinking Water pressure outcomes.	eference numb Systems" to al	er 8 from I loss of
2020-09-02	10	36 month risk assessment completed, added pandemic to risk assessment out existing control measures. Minor update to Table 2.	comes and inc	luded
2021-08-23	11	Annual review, updated table 3, no changes to Risk Assessment.		
2022-04-14	12	Annual review, updated table 1 and 4 to include MECP's new hazardous event Added possible outcomes and existing control measures.	, cybersecurity	threats.
2022-06-28	13	Annual review, updated table 3, no changes to Risk Assessment.		
2023-06-26	14	36 month risk assessment completed, added Prolonged Network Communicati assessment outcomes and included existing control measures. Updated table show latest revision date of MECP's "Potential Hazardous Events for Municipal Water Systems".	on Loss to risk 3. Updated Ta Residential Di	able 4 to rinking
2024-10-03	15	Annual review, updated table 3, no changes to Risk Assessment.		



Powassan Drinking Water System

ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: PCT

Approved by: Senior Operations Manager

1. Purpose

To document the following for the Powassan 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 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 Powassan Drinking Water System is owned by The Corporation of the Municipality of Powassan and is represented by the Clerk-Treasurer.

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

3.2 Top Management

Top Management for the Powassan Drinking Water System consists of:

- Operations Management Near North Cluster
- Regional Hub Manager North Eastern Ontario Regional Hub
- Operations Management, Capital Projects North Eastern Ontario Regional Hub
- Safety, Process & Compliance Manager North Eastern Ontario Regional Hub



Powassan Drinking Water System

ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: PCT

Approved by: Senior Operations Manager

Irrespective of other duties (see Table 9-2 below), Top Management's responsibilities and authorities include:

- 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
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Role	Responsibilities and Authorities
Board of Directors	 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)	 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
Corporate Compliance	 Approve corporate GEMS programs and procedures 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



Powassan Drinking Water System

ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: PCT

Approved by: Senior Operations Manager

3.4 Regional Hub Roles, Responsibilities and Authorities

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 North Eastern Ontario Regional Hub

Role/Position	Responsibilities and Authorities
All Operations Personnel	 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)	 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 Manages 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)	 Manage the day-to-day operations and maintenance of their assigned facilities and supervise facility operational 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



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Reviewed by: PCT

Role/Position	Responsibilities and Authorities
	 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) Act as Overall Responsible Operator (ORO) when required (based on certification). Refer to SOP ORO-2010.
Operations Management, Capital Projects (Top Management)	 Provide support to the regional operations teams related to planning and execution of capital projects. Develop standard processes to provide efficiency when providing capital project related support to clients (internal/external) Report to the Regional Hub Manager on regional capital project status' Prepare and manage project budgets, ensuring cost-effectiveness Develop detailed project plans, including timelines, budgets and resource allocation.
Safety, Process & Compliance (SPC) Manager (Top Management)	 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 SOP ORO-2010
Process & Compliance Technician (PCT) / Operations & Compliance (O&C) Team Lead (QEMS Representative)	 Implement, monitor and support corporate programs relating to environmental compliance and support management by evaluating and implementing process control systems at his/her assigned facilities Fulfill role of QEMS Representative (OP-04) Monitor, evaluate and report on compliance/quality status of their assigned facilities



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Reviewed by: PCT

Role/Position	Responsibilities and Authorities		
	 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) Communicates to Owners on facility compliance and DWQMS accreditation as directed Deliver/participate in/coordinate training including applicable legislative and regulatory requirements and the QEMS May fulfil role of Certified Operator when required (based on certification) 		
Certified Operator Includes the following positions: • Operations Supervisor Water & Wastewater • Water & Wastewater Lead • Senior Water & Wastewater Operator • Water & Wastewater Operator • Water & Wastewater Operator • Water & Wastewater Operator-In- Training (OIT)]	 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 SOP ORO-2010. 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. 		
Maintenance Personnel Include the following positions: • Mechanic/Operator	 Schedule and perform maintenance on equipment and processes in accordance with established procedures and record the maintenance data Regularly inspect operating equipment, perform routine preventive maintenance and repairs May fulfill role of Certified Operator when required (based on certification). 		



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Role/Position	Responsibilities and Authorities
 Maintenance Technician Maintenance Shift Lead Senior Water & Wastewater Operator 	
Instrumentation Technician Includes the following positions: • Utility Plant Instrument Technician (UPIT) • Utility Plant Electrician Operator • Instrumentation Technician • Operations Supervisor Water & Wastewater	 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).
Electrical Maintenance Personnel Include the following positions: • Utility Plant Electrician Operator • Maintenance Electrician • Electrician Shift Lead	 Perform repairs, inspections, preventive maintenance and/or scheduled maintenance on electrical systems, equipment, components and devices in accordance with established procedures and record the maintenance data Examine, trouble shoot and carry out systematic diagnostic testing of faults/failures, identification, assessment, repairs/service to equipment, fixtures and other electrical component May fulfill role of Certified Operator as required (based on certification)
 Administrative Support Includes the following: Regional Hub Business Manager Administrative Assistants 	 Support the administrative functions of the Regional Hub/cluster/facility including coordinating delivery of training as directed Assist with entering operational data (including operational training records, process data and maintenance records) into the appropriate database as directed



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ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

Reviewed by: PCT

Approved by: Senior Operations Manager

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**

OCWA Position Descriptions/Job Specifications

5. Revision History

Date	Revision #	Reason for Revision
2018-03-28	0	Procedure issued – Information within OP-09 was originally set out in the main body of Powassan Operational Plan (last revision 7 dated 2017-09-22). 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 Data Clerk.
2019-08-22	1	Updated MOECC to MECP and removed the position of data clerk.
2021-08-23	2	Removed name of personnel in section 3.1.
2024-08-27	3	Procedure updated revision 3 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. Additional revisions include replaced MECP with Ministry, minor rewording and type-o's, removed watermark



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ORGANIZATIONAL STRUCTURE

Reviewed by: PCT





Powassan Drinking Water Systems

ORGANIZATIONAL STRUCTURE

Reviewed by: PCT

Approved by: Senior Operations Manager

Revision History

Date	Revision #	Reason for Revision
2010-04-01	0	Procedure issued.
2011-05-20	1	Minor update to Organization Chart.
2011-12-12	2	Procedure re-issued.
2015-07-16	3	Addition of Revision Chart.
2017-09-20	4	Updated Organization Chart to include new management structure.
2018-03-28	5	Appendix issued - Organizational Chart previously contained as Appendix C of the Operational Plan. Moved to a new Appendix .
2020-08-27	6	The corporate template OP-09A has been updated to reflect that Corporate Compliance now reports to the VP of Operations (previously reported to Vice President of Engineering, Capital & Support Services).
2024-09-05	7	Revised to include Senior Leadership Team (SLT) in reporting structure and identify members, added Compliance System Coordinators, updated Operations Personnel position titles, removed watermark.



Powassan Drinking Water System

COMPETENCIES

Reviewed by: PCT

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 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)	 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



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COMPETENCIES

Reviewed by: PCT

Role/Position	Required Minimum Competencies	
Safety, Process & Compliance (SPC) Manager (Top Management) (May also fulfill the role of Alternate QEMS Representative)	 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, Operations and Compliance Team Lead (QEMS Representative)	 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 Includes the following: • Operations Supervisor Water & Wastewater • Water & Wastewater Lead • Senior Water & Wastewater Operator • Water & Wastewater Operator	 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 	



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Role/Position	Required Minimum Competencies
 Water & Wastewater Operator-in-Training 	
 Maintenance Personnel Includes the following: Mechanic/Operator Maintenance Technician Maintenance Shift Lead Operations Supervisor Water & Wastewater 	 Valid operator certification required to fulfil certified operator duties (if assigned) Millwright and/or other trades certificates Experience in maintaining and repairing equipment and structures and in planning and scheduling maintenance and repair tasks Training and/or experience related to drinking water system processes 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
Instrumentation Technician Includes the following: • Utility Plant Instrument Technician • Instrumentation Technician	 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
O&M Team Lead	 Valid operator certification Experience and/or training in managing and planning multiple projects, assessing priorities and effectively coordinating operation and maintenance programs Training and/or experience related to operations and maintenance of 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



Powassan Drinking Water System

COMPETENCIES

Reviewed by: PCT

Approved by: Senior Operations Manager

3.2 The following table presents the minimum competencies required by staff that provide administration support to operations personel

Role and/or Position	Required Minimum Competencies
Administrative Staff	 Experience and/or training related to procurement and business administration practices Training on OCWA's QEMS and the DWQMS
Includes the following: Administrative Assistant Project Clerk	 Training on relevant legislation, regulations, codes, policies, guidelines and procedures Experience using computers

- 3.3 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.
- 3.4 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.
- 3.5 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.
- 3.6 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.



Powassan Drinking Water System

COMPETENCIES

Reviewed by: PCT

Approved by: Senior Operations Manager

- 3.7 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)
- 3.8 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.
- 3.9 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.
- 3.10 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.
- 3.11 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.
- 3.12 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 Training Resources (OCWA Intranet) OCWA's Mandatory Compliance Training list (OCWA intranet) Performance Planning and Review Database OP-05 Document and Records Control OCWA Training Summary Database



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COMPETENCIES

Reviewed by: PCT

Approved by: Senior Operations Manager

5. Revision History

Date	Revision #	Reason for Revision
2018-03-29	0	Procedure issued – Information within OP-10 was originally set out in the main body of Powassan Operational Plan (last revision 7 dated 2017-09-22). 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 Managers and Admin Assistants 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.
2018-07-26	1	Un-highlighted "minimum" in the competency table.
2019-08-22	2	Updated competencies for Instrumentation Technician/Maintenance Electrician, as two competencies were listed twice. Removed the minimum competencies required by a data clerk – this position is being eliminated.
2024-12-03	3	Procedure updated [update revision history based on your current OP- 10 revision history] 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.



Powassan Drinking Water System

PERSONNEL COVERAGE

Reviewed by: PCT

Approved by: Senior Operations 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 Powassan 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 Powassan Drinking Water System is staffed by OCWA personnel as follows:

Covered 24/7 and staffed to the level to meet regulatory requirements and to ensure compliant operations. 24/7 coverage is accomplished by SCADA monitoring and on-call staff during non-regular hours (e.g. evenings and weekends and Statutory Holidays).

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 designated operator is the designated overall responsible operator (ORO). When the designated operator is unavailable, a backup is designated as the ORO and is recorded as such in the facility logbook. Refer to SOP - ORO-2010.

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

3.4 Operations Management assigns an on-call operator for the time that the facility is unstaffed (i.e., evenings, weekends and Statutory Holidays). The on-call shift change is

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


Powassan Drinking Water System

PERSONNEL COVERAGE

Reviewed by: PCT

Approved by: Senior Operations Manager

beginning of the business day on Monday. The on-call responsibilities alternate weekly.

- 3.5 The operator(s) conducts a remote and/or onsite inspection of the facility at least once per day during the weekdays and at least once per weekend during Statutory Holidays. Details of the inspection are recorded in facility logbook and/or round sheets.
- 3.6 Facility alarms are programmed to call True Steel Alarm Monitoring Service who then contacts the on-call operator via cell phone whenever there is an alarm condition. If the nature of the alarm requires additional staff, the on-call operator can request assistance from any of the other certified operators in the NEO Hub. The on-call operator records details of the call-in in the facility logbook and in OCWA's WMS.
- 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

OP-10 Competencies Facility Logbook Round Sheets Call-In Reports Vacation/On-call Schedule Critical Shortage of Staff Contingency Plan (Facility Emergency Plan) SOP – ORO-2010



Powassan Drinking Water System

PERSONNEL COVERAGE

Reviewed by: PCT

Approved by: Senior Operations Manager

Date	Revision #	Reason for Revision	
2010-04-01	0	Procedure issued.	
2011-09-20	1	Corporate updates.	
2011-12-12	2	Change in management titles.	
2017-09-22	3	Removed Operations Manager, updated to NEO Hub.	
2018-03-29	4	QP-03 procedure renamed OP-11. Removed Scope and Responsibilities sections. Other minor edits in wording.	
2018-07-18	5	Updated section 3.6 to include True Steel Alarm Monitoring Service.	
2019-08-22	6	Updated section 3.6 to include all facility alarms.	
2020-09-02	7	Updated section 3.5 to capture remote Wonderware checks completed by other operators.	
2024-10-18	8	Removed watermark	



Powassan Drinking Water System

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COMMUNICATIONS

Reviewed by: PCT

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;
- suppliers of essential supplies and services (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 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 (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.



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COMMUNICATIONS

Reviewed by: PCT

Approved by: Senior Operations Manager

- 3.3.3 The Safety Process and Compliance 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).



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COMMUNICATIONS

Reviewed by: PCT

Approved by: Senior Operations Manager

- 3.5 Communications with Suppliers of Essential Supplies and Services:
 - 3.5.1 Communication requirements to ensure suppliers of essential supplies and services 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 (<u>www.ocwa.com</u>). The QEMS Policy is also posted at Powassan Well House.
 - 3.6.3 Facility tours of interested parties must be approved in advance by the Operations Management. Also, facility tours are documented in facility log book.
 - 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



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COMMUNICATIONS

Reviewed by: PCT

Approved by: Senior Operations Manager

Date	Revision #	Reason for Revision
2010-04-01	0	Procedure issued.
2011-05-20	1	Updated procedure to reflect communications with new employees.
2011-12-12	2	Change in management titles.
2017-09-22	3	Removed Operations Manager, added SPCM, updated media spokesperson to Regional Hub Manager.
2018-04-03	4	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.
2019-08-22	5	Added Community Complaint Form to section 4.
2021-08-23	6	Updated OP-12 with phrase "suppliers of essential supplies and services", as it is the products and services that are essential, and not the suppliers.
2024-06-17	7	Procedure revised to reference updated title of Corporate Emergency Response Plan, removed watermark.



Powassan Drinking Water System

ESSENTIAL SUPPLIES AND SERVICES

Reviewed by: PCT

Approved by: Senior Operations 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 Powassan Drinking Water System are contained in the Facility Emergency Plan, Essential Supplies and Services List. The list is reviewed and updated at least once every calendar year by the QEMS Representative.
- 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



Powassan Drinking Water System

ESSENTIAL SUPPLIES AND SERVICES

Reviewed by: PCT

Approved by: Senior Operations 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, flow meters 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 (e.g. portable chlorine analyzers and portable turbidity analyzers) 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 shortterm 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

Essential Supplies and Services List OP-17 Measurement Recording Equipment Calibration and Maintenance ANSI/NSF Documentation AWWA Standards MDWL Calibration Certificates/Records



Powassan Drinking Water System

ESSENTIAL SUPPLIES AND SERVICES

Reviewed by: PCT

Approved by: Senior Operations Manager

Date	Revision #	Reason for Revision	
2010-04-01	0	Procedure issued.	
2011-05-20	1	Corporate directive regarding Element 13—Essential Supplies and Services: Procedure reissued.	
2011-12-12	2	Change in management titles.	
2017-09-22	3	Updated location of ESS list to OCWA's Public drive, removed Operations Manager.	
2018-04-03	4	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).	
2019-08-22	5	Updated MOECC to MECP.	
2024-10-21	6	Removed watermark	



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REVIEW AND PROVISION OF INFRASTRUCTURE

Reviewed by: PCT

Approved by: Senior Operations Manager

1. Purpose

To describe OCWA's procedure for reviewing the adequacy of infrastructure necessary to operate and maintain the Powassan 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 and mechanic/operator) 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
 - MECP 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 minimum rolling Capital and Major Maintenance Recommendations 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).



Powassan Drinking Water System

REVIEW AND PROVISION OF INFRASTRUCTURE

Reviewed by: PCT

Approved by: Senior Operations Manager

4. Related Documents

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

Date	Revision #	Reason for Revision
2009-04-01	0	Procedure issued.
2011-12-12	1	Change in management titles.
2016-08-17	2	5.2 changed capital letter to Capital Forecast Spreadsheet.
2017-09-21	3	Updated to Senior Operations Manager.
2018-04-03	4	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).
2019-08-22	5	Updated MOECC to MECP.
2024-10-21	6	Removed watermark



Powassan Drinking Water System

INFRASTRUCTURE MAINTENANCE, REHABILITATION AND RENEWAL

Reviewed by: PCT

Approved by: Senior Operations Manager

1. Purpose

To describe OCWA's infrastructure maintenance, rehabilitation and renewal program for the Powassan 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.
- Perform routine maintenance of the distribution systems (flushing and valve cycling)
- 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.

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. 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 and mechanic/operator) conduct a review of the



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INFRASTRUCTURE MAINTENANCE, REHABILITATION AND RENEWAL

Reviewed by: PCT

Approved by: Senior Operations Manager

drinking water system's infrastructure to assess its adequacy for the 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) can generate summary reports as needed 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 quarterly 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

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

Date	Revision #	Reason for Revision
2018-04-05	0	Procedure issued – Information within OP-15 (s. 3) was originally set out in main body of the Powassan Drinking Water System Operational Plan (last revision 7, dated 2017-09-22). 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.
2024-10-18	1	Removed watermark



Powassan Drinking Water System

SAMPLING, TESTING AND MONITORING

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Reviewed by: PCT

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 and the facility's Municipal Drinking Water License (MDWL).
- 3.2 Sampling requirements for the facility are defined in the facility's sampling schedule 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:
 - Free chlorine residual treated water to distribution system
 - Flow rates (including totalized flows) raw/treated water
 - Water levels reservoir

Test results from continuous monitoring equipment are captured by OCWA's SCADA and are reviewed by a certified operator in accordance with the requirements of SDWA O. Reg. 170/03. A Standard Operating Procedure for Continuous Monitoring Data Review is available in the systems SOP Binder.

3.5 Adverse water quality incidents are responded to and reported as per Adverse Water Quality Reporting SOP found in the Facility Emergency Plan Binder.



Powassan Drinking Water System

SAMPLING, TESTING AND MONITORING

Reviewed by: PCT

Approved by: Senior Operations Manager

3.6 In-house process control activities are conducted on a regular basis by the certified operator(s) on duty and are as follows:

Operational Parameter	Location	Frequency
Turbidity	Raw Water Tap	Grab – minimum once per month on each well
	Treated Water Tap	Grab - weekly
Free Chlorine Residual	Distribution Water (various locations)	Grab - weekly (4 & 3)
Sodium Hypochlorite Usage	Water Treatment Plant	Reading – 2-4 times per week

In-house samples are analyzed following approved laboratory procedures. The sampling results are recorded on a facility round sheet and are 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 captured in the existing in-house program as described above.
- 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 Kirkland Lake Process and Compliance office and/or the Municipal Office.

Owners are provided Quarterly Operations Reports which discusses regulatory results and operational issues. Owners are also provided with an annual summary of sampling, testing and monitoring results through the SDWA O. Reg. 170/03 Section 11 - Annual Report, 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

Annual Report (O. Reg. 170 Section 11) Continuous Monitoring Data Review SOP Facility Emergency Plan (FEP) Binder Facility Logbook Round Sheets Laboratory Analysis Reports



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SAMPLING, TESTING AND MONITORING

Reviewed by: PCT

Approved by: Senior Operations Manager

Laboratory Chain of Custody Forms Municipal Summary Report (O. Reg. 170 Schedule 22) Process Data Management System (PDM) Quarterly Operations Reports Adverse Water Quality Reporting SOP Sampling Schedule SOP Binder OP-05 Document and Records Control OP-06 Drinking Water System OP-20 Management Review

Date	Revision #	Reason for Revision
2010-04-01	0	Procedure issued.
2011-05-20	1	Distribution chlorine sampling added to in-house process control table Procedure reissued.
2011-12-12	2	Change in management titles.
2012-10-17	3	Added table to 5.2; removed comment that hardcopy of lab reports are kept in the hub office; removed reference to non-existent SOPs.
2014-10-21	4	Changed frequency of IH parameters from daily to during rounds.
2015-06-30	5	Changed PDC to PDM.
2017-07-04	6	Added HAAs and Lead to lab sampling table, updated to NEO Hub, removed Operations Manager.
2018-04-04	7	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.
2018-07-26	8	Updated Table 3.6 to include frequency of sodium hypochlorite usage reading taken 2-4 times per week.
2019-08-22	9	Added minimum once per month on each well to grab frequency for raw water turbidity. Removed pressure from section 3.4 as it is not continuously monitored.
2021-08-23	10	Updated paragraph below section 3.4 to mention location of Continuous Monitoring Data Review SOP is in the SOP Binder.
2024-10-18	11	Updated watermark



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MEASUREMENT AND RECORDING EQUIPMENT CALIBRATION AND MAINTENANCE

Reviewed by: PCT A

Approved by: Senior Operations Manager

1. Purpose

To describe the procedure for the calibration and/or verification and maintenance of measurement and recording equipment at the Powassan 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 thirdparty calibration service provider (refer to OP-13 Essential Supplies and Services).
- 3.2 Operations personnel 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 SuperUser. 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/or in the facility logbook and/or on verification certificate.
- 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 Hach (a qualified third party calibration service provider) also performs annual calibration/verification on the portable chlorine analyzer and benchtop instrument(s). The calibration/maintenance records are maintained on the public drive.
- 3.6 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.
- 3.7 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 the 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



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Reviewed by: PCT

Approved by: Senior Operations Manager

malfunctioning device. Any actions taken as a result of the failure are recorded in the facility logbook and/or WMS work order. Operations Management or the PCT ensures that any notifications required by applicable legislation are completed and documented within the specified time period.

3.8 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

Date	Revision #	Reason for Revision
2010-04-01	0	Procedure issued.
2011-12-12	1	Change in management titles.
2017-09-22	2	Updated to Senior Operations Manager.
2018-04-05	3	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.
2019-08-22	4	Updated section 3.3 to include and/or facility logbook and/or on verification certificate. Updated section 3.5 – Hach (qualified third party calibration service provider) also performs annual calibration/verification on the portable chlorine analyzer and benchtop instrument(s). The calibration/maintenance records are maintained on public drive.
2024-11-29	5	Removed watermarks



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EMERGENCY MANAGEMENT

Reviewed by: PCT

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 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 and/or 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 corporate ERP. Level 3 events usually



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involve 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 Powassan 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 situation/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. 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



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CP as long as the outcomes are evaluated using the FEP-01 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 situation 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 ERP.

4. Related Documents

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



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Approved by: Senior Operations Manager

Date	Revision #	Reason for Revision
2010-04-01	0	Procedure issued.
2011-12-12	1	Change in management titles.
2017-09-22	2	Updated to new template, updated to Senior Operations Manager.
2018-04-06	3	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 edit.
2019-08-22	4	Updated Ministry of the Environment and Climate Change to Ministry of the Environment, Conservation and Parks.
2024-06-17	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: PCT

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 Powassan 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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- 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:
 - \circ $\;$ 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;
 - o the status/consideration of OFIs identified in previous audits; and
 - o 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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Approved by: Senior Operations Manager

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
 - o 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.) Summary of Findings Spreadsheet OP-05 Document and Records Control OP-20 Management Review OP-21 Continual Improvement



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Approved by: Senior Operations Manager

Date	Revision #	Reason for Revision
2010-04-01	0	Procedure issued.
2011-12-12	1	Change in management titles.
2012-10-17	2	Update to section 5.2; the auditor updates and reviews the protocol.
2014-10-21	3	Added to Senior Operations Manager - (or designate).
2017-09-22	4	Updated to new template, removed Operations Manager, added SPCM.
2018-04-06	5	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.
2024-06-17	6	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.



Powassan Drinking Water System

MANAGEMENT REVIEW

Reviewed by: PCT

Approved by: Senior Operations 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 Powassan Drinking Water System as:

- Operations Management Near North Cluster
- Regional Hub Manager North Eastern Ontario Regional Hub
- Safety, Process & Compliance (SPC) Manager North Eastern 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;
 - d) The effectiveness of the risk assessment process;



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- 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;
- I) 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: PCT

Approved by: Senior Operations Manager

Date	Revision #	Reason for Revision
2010-04-01	0	Procedure issued.
2011-12-12	1	Change in management titles.
2017-09-21	2	Update to include new SPCM.
2018-04-06	3	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.
2024-10-18	4	Removed watermark



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CONTINUAL IMPROVEMENT

Reviewed by: PCT

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 Powassan 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 Powassan Drinking Water System 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 Powassan 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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Reviewed by: PCT

Approved by: Senior Operations Manager

- 3.2.4 The QEMS Representative ensures corrective actions are documented using Summary of Findings Spreadsheet. A root cause analysis is performed on any major or minor non-conformance identified during the audit. 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 Findings 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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CONTINUAL IMPROVEMENT

Reviewed by: PCT

Approved by: Senior Operations Manager

- 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 Powassan 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, Conservation and Parks.
 - 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 Findings Spreadsheet



Powassan Drinking Water System

 QEMS Proc.:
 OP-21

 Rev Date:
 2024-11-29

 Rev No:
 3

 Pages:
 4 of 4

CONTINUAL IMPROVEMENT

Reviewed by: PCT

Approved by: Senior Operations Manager

Date	Revision #	Reason for Revision
2018-03-23	0	Procedure issued – The original information within the main body of Powassan Operational Plan (last revision 7, dated 2017-09-22) was not used in OP-21 as it did meet the requirements of the new DWQMS v. 2.0. Information from QP-10 Internal Audit (revision 4, dated 2017- 09-22) (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.
2018-07-20	1	Updated fifth bullet in section 3.3.1, removed Powassan and left as other drinking water systems. Updated section 3.2.4 to include a statement referring to the root cause analysis for major and minor non-conformances.
2019-08-22	2	Updated Ministry of the Environment and Climate Change to Ministry of the Environment, Conservation and Parks.
2024-11-28	3	Removed watermarks

Ontario 👻 Minist

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 Municipality of Powassan

Subject Systems

Name of Drinking Water System (DWS) *	Licence Number *	Name of Operating Subsystems (if applicable)	Name of Operating Authority *	DWS Number(s) *
1. Powassan Drinking Water System	266-101		Ontario Clean Water Agency	220000576

Contact Information for Questions Regarding the Operational Plan

Primary Contact			
Last Name *	First Name *		Middle Initial
Dyrda	Paul		
Title *	Telephone Number *	Email Address *	
Senior Operations Manager	705-303-9767 ext.	pdyrda@ocwa.com	
Secondary Contact			
Last Name	First Name		Middle Initial
Malette	Monique		
Title	Telephone Number	Email Address	
Process & Compliance Technician	705-492-6907 ext.	mmalette@ocwa.com	


To:CouncilFrom:Councillor Randy HallRe:Kraft Hockeyville 2025 ContestDate:January 2, 2025

RECOMMENDATION:

Initiate the Municipality of Powassan involvement of the Kraft Hockeyville 2025 Contest.

BACKGROUND:

The Trout Creek Arena is going to need a lot of money to stay in operation. Winning this contest is worth \$250,000.00.



To: Council
From: Councillor Randy Hall
Re: Initiate Development of Powassan Snowmobile/ATV Trail for 2025 Season
Date: January 2, 2025

RECOMMENDATION:

Initiate the development of a trail through or around Powassan to link to Provincial Trail systems.

BACKGROUND:

Support the 2025 development of a snowmobile/ATV trail through or around Powassan. Possibly collaborate with South Shore Restoule Club, the OFSC and/or organize a Snowmobile/ATV Club.



To: CouncilFrom: Councillor Randy HallRe: Allow Member of Council to Vote OnlineDate: January 2, 2025

RECOMMENDATION:

Revisit policy.

Allow Member of Council to vote if attending meeting on-line.

BACKGROUND:

Was put in place after COVID to promote individual attendance to meetings.

Ministry of Infrastructure

Office of the Minister

5th Floor, 777 Bay Street Toronto, Ontario M7A 2E1 Telephone: 416-327-4412

December 16, 2024

His Worship Tom Piper Mayor The Corporation of the Township of Nipissing piper@nipissingtownship.com

His Worship Peter McIsaac Mayor The Municipality of Powassan pmcisaac@powassan.net

Dear Mayors:

Ministère de l'Infrastructure

Bureau du ministre



777, rue Bay, 5^e étage Toronto (Ontario) M7A 2E1 Téléphone: 416-327-4412

Association of Municipalities of Ontario Conference. It was a pleasure to meet with you and your delegation. I understand the pressure the township is facing. That is why the 2024 Ontario Budget introduced the Municipal Housing Infrastructure Program (MHIP), a \$1 billion initiative aimed at supporting core municipal infrastructure projects to help unlock more homes and promote

On behalf of the Ministry of Infrastructure, I would like to thank you for attending the 2024

growth in communities. This program focuses on the construction, repair, rehabilitation, and expansion of essential infrastructure such as roads, bridges, and water systems to sustain housing needs. Increases to HEWSF was the first step in delivering on this investment. Under this program, Ontario is investing \$400 million to launch the Housing-Enabling Core Servicing (HECS) Stream that aims to build, maintain, and repair core assets such as municipal roads, bridges and culverts that will enable new housing opportunities and ensure communities have reliable roads and bridge assets. For any additional questions or concerns, you may contact the ministry by emailing MHIP@ontario.ca.

The remaining funding under MHIP will help municipalities target other key infrastructure priorities, including maintaining the health and safety of local water and wastewater systems. More information about this funding, including eligibility and application intake details, will be announced next year.

Together the MHIP and the HEWSF will provide municipalities with over \$1.9 billion in provincial funding for housing and community-enabling infrastructure. We understand the importance of investing in critical core infrastructure to support growth, as well as the importance of supporting all municipalities, especially small, rural and northern municipalities.

Thank you again for meeting with the Ministry of Infrastructure.

Sincerely,

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The Honourable Kinga Surma Minister of Infrastructure



100 John West Way Aurora, Ontario L4G 6J1 (905) 727-3123 aurora.ca

Town of Aurora Member Motion

Mayor's Office

Re:Request the Redistribution of the Provincial Land Transfer Tax and GST
to Municipalities for Sustainable Infrastructure FundingTo:Members of CouncilFrom:Mayor Tom MrakasDate:November 5, 2024

Whereas municipalities face growing infrastructure needs, including roads, bridges, public transit, water systems, and other critical services, which are essential to community well-being and economic development; and

Whereas the current sources of municipal revenue, including property taxes and user fees, are insufficient to meet these increasing demands for infrastructure investment; and

Whereas the Province of Ontario currently collects the Land Transfer Tax (LTT) on property transactions in municipalities across the province, generating significant revenue that is not directly shared with municipalities; and

Whereas the Federal Government collects the Goods and Services Tax (GST) on property transactions, a portion of which could be directed to municipalities to address local infrastructure needs; and

Whereas redistributing a portion of the Provincial Land Transfer Tax and GST to municipalities would provide a predictable and sustainable source of funding for local infrastructure projects without creating a new tax burden on residents or homebuyers; and

Whereas a redistribution of a portion of the existing Land Transfer Tax and GST would allow municipalities to better plan and invest in long-term infrastructure initiatives, supporting local economic growth and improving the quality of life for residents;

1. Now Therefore Be It Hereby Resolved That Aurora Town Council formally requests the Provincial Government to consider redistributing a portion of the Land Transfer Tax collected on property transactions to municipalities; and

- 2. Be It Further Resolved That Aurora Town Council calls on the Federal Government to allocate a percentage of the GST collected on property sales to municipalities; and
- 3. Be It Further Resolved That this redistribution of the Land Transfer Tax and GST should be structured to provide predictable and sustainable funding to municipalities, allowing for better long-term planning and investment in infrastructure projects that benefit local communities, thus ensuring that local governments receive a fair share of the revenue to address critical infrastructure needs; and
- Be It Further Resolved That copies of this resolution be forwarded to Prime Minister Justin Trudeau, Premier Doug Ford, the Ontario Minister of Finance, the Minister of Municipal Affairs and Housing, local Members of Parliament (MPs) and Members of Provincial Parliament (MPPs); and
- 5. Be It Further Resolved That copies of this resolution be forwarded to all 444 Municipalities in Ontario, the Federation of Canadian Municipalities (FCM), and the Association of Municipalities of Ontario (AMO) for their endorsement and advocacy.



Resolution no. 2025 -

Date: January 7, 2025

Moved by:

Seconded by:

That the correspondence dated November 5, 2024, from the Town of Aurora regarding a request for the Redistribution of the Provincial Land Transfer Tax and GST to Municipalities for Sustainable Infrastructure Funding, be received; and,

FURTHER Be It Resolved that the Council of the Municipality of Powassan formally requests the Provincial Government to consider redistributing a portion of the Land Transfer Tax collected on property transactions to municipalities; and,

FURTHER that Council calls on the Federal Government to allocate a percentage of the GST collected on property sales to municipalities; and,

FURTHER that this redistribution of the Land Transfer Tax and GST should be structured to provide predictable and sustainable funding to municipalities, allowing for better long-term planning and investment in infrastructure projects that benefit local communities, thus ensuring that local governments receive a fair share of the revenue to address critical infrastructure needs; and,

THAT copies of this resolution be forwarded to Prime Minister Justin Trudeau, Premier Doug Ford, the Ontario Minister of Finance, the Minister of Municipal Affairs and Housing, local Members of Parliament (MPs) and Members of Provincial Parliament (MPPs), and all 444 Municipalities in Ontario, the Federation of Canadian Municipalities (FCM), and the Association of Municipalities of Ontario (AMO) for their endorsement and advocacy.

Carried

Defeated

Deferred

Lost

Mayor

Recorded Vote: Requested by____

Name	Yeas	Nays	Name	Yeas	Nays
Councillor Randy Hall			Mayor Peter McIsaac		
Councillor Markus Wand					
Councillor Dave Britton					
Councillor Leo Patey					

Treasury Board Secretariat Secrétariat du Conseil du Trésor

Office of the Associate Minister of Emergency Preparedness and Response Bureau du ministre associé de la Protection civile et des interventions d'urgence



Whitney Block, Room 4320Édifice Whitney, bureau 432099 Wellesley Street West99, rue Wellesley OuestToronto ON M7A 1W3Toronto ON M7A 1W3

December 9, 2024

Dear Emergency Management Partners,

Today, our government introduced the *Emergency Management Modernization Act* that, if passed, would modernize the *Emergency Management and Civil Protection Act* (EMCPA).

The EMCPA and its regulations have not been comprehensively updated in more than 15 years. Since then, the nature of emergencies has changed. The rising frequency of extreme weather events and the threat of cyber-attacks on Ontario's digital infrastructure mean that we must ensure our emergency management framework reflects today's realities.

If passed, these amendments to the EMCPA would strengthen provincial leadership and coordination of emergency management by facilitating Emergency Management Ontario as the one window for coordinating provincial emergency management activities. Additionally, the proposed legislation would enhance community capacity in emergency management. This includes clarifying the process for municipalities to declare local emergencies and granting municipalities the authority to plan for and respond to emergencies based on their unique needs and capacity.

The proposed amendments, if passed, would strengthen planning and coordination with emergency management partners, including by outlining the ability to enter into agreements and liaise with public and private sector partners, including municipalities, Indigenous communities, and other governments. In addition, the proposed amendments would enable future emergency management program and plan requirements to be established for designated entities that provide or operate critical infrastructure, subject to further engagement with partners, to support continuity of services and operations.

Over the summer, Emergency Management Ontario engaged with more than 480 partners to inform proposed amendments, including municipalities, First Nations communities, and emergency management organizations. We look forward to further collaboration with our partners as we build a stronger, more resilient province, capable of ensuring the safety and wellbeing of communities across Ontario. The proposed amendments are posted on <u>Ontario's Regulatory Registry and Environmental Registry</u> for your review and feedback.

On behalf of Premier Ford and the Government of Ontario, thank you for your continued partnership in emergency management.

Sincerely,

The Honorable Trevor Jones Associate Minister of Emergency Preparedness and Response Treasury Board Secretariat

c: The Honorable Caroline Mulroney President of the Treasury Board and Minister of Francophone Affairs

Bernie Derible Deputy Minister and Commissioner of Emergency Management Treasury Board Secretariat



NECO

Community Futures Development Corporation Société d'aide au développement des collectivités

December 10, 2024

Kimberly Bester Municipality of Powassan 250 Clark Street Powassan, ON P0H 1Z0

Via email: kbester@powassan.net

Re: 2025 Maple Syrup Week & Festival - CED application

Dear Ms. Bester,

I am pleased to confirm that your proposal for Community Economic Development (CED) funding for Small Business programming and events has been approved, in the amount of \$1,500.00.

We are proud to support the Powassan Maple Syrup Festival – April 26, 2025, as an initiative that celebrates and supports these unique businesses in the Almaguin region.

We are also pleased to see it as a collaborative effort between Powassan and the surrounding areas to bring a family friendly event to the region. We also recognize the importance of this festival, not only for locals, but for visitors to the region.

Once the project is completed, we would also require a short report be submitted to include the following, by May 30, 2025:

- Total Number of Small Businesses/Vendors attending, and total number of public attending
- Benefit derived from the funding by these businesses or the event
- Any other pertinent information that shows the event/project was successful

.../2

222 McIntyre Street West, Suite 312, North Bay ON P1B 2Y8 ● Tel: (888) 476-8822 ● Fax: (705) 495-6038 Email info@neco.on.ca ● www.neco.on.ca

Municipality of Powassan December 10, 2024 Page 2

Should marketing materials be developed to promote the project, please ensure that the logos recognizing the Government of Canada, FedNor and NECO are included.

If you can provide an invoice for this project in the amount of \$1,500.00, we can transfer the funds. Please work with Joe in our office to ensure proper transfer. Joe's contact is jandraos@neco.on.ca or 705-476-8822 ext 102.

Please sign and return a copy of this letter, with the invoice, as acknowledging your acceptance of the terms of this offer.

NECO is pleased to be able to participate in supporting small businesses in Nipissing/Parry Sound districts, and in particular the maple syrup producers in the Powassan area. We wish you success on this project.

Sincerely,

NECO Community Futures Development Corporation

atti Can

Patti Carr Executive Director

Witness

Brayden Robinson Municipality of Powassan (I have the authority to bind the Corporation)

Date

222 McIntyre Street West, Suite 312, North Bay ON P1B 2Y8 ● Tel: (888) 476-8822 ● Fax: (705) 495-6038 Email info@neco.on.ca ● www.neco.on.ca

222 rue McIntyre ouest, suite 312, North Bay (Ontario) P1B 2Y8 • Tél.: (888) 476-8822 • Téléc.: (705) 495-6038 Courriel info@neco.on.ca • www.neco.on.ca

January 2	2025			January 2025 Su Mo Tu We Th 5 6 7 1 2 12 13 14 15 16 26 27 28 29 30	Fr Sa Su Mo 3 4 2 3 10 11 9 24 25 23 24 31 25 23 24	February 2025 Tu We Th Fr Sa 4 5 6 7 8 11 12 13 14 15 18 19 20 21 22 25 26 27 28
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Dec 29	30	31	Jan 1, 25	2	£	4
ц	6 6:00pm Committee of Adjustment	7 Council	8 6:00pm MAPLE SYRUP FESTIVAL	б	10	11
12	13	14 6:00pm PUBLIC MEETING - ZBA	15	16	17	18
19	20	21 Council	22 Recreation Committee meeting	23	24	25
26	27	28	29	30	31	Feb 1
Allison Quinn			1			2025-01-03 3:16 PM