THE CORPORATION OF THE TOWNSHIP OF NORTH GLENGARRY

Committee of the Whole

Agenda

Wednesday, November 20, 2024, 3:00pm

Council Chambers

3720 County Road 34

Alexandria, On, KOC 1A0

- 1. CALL TO ORDER
- 2. DECLARATION OF PECUNIARY INTEREST
- 3. ACCEPT THE AGENDA (Additions/Deletions)

4. DELEGATIONS

5. STAFF REPORTS

- a. Treasury Department
 - 1. TR 2024-17: 2024 Finance Department Update
- b. Planning/Building & By-law Enforcement Department
 - 1. BP 2024-29: 2024 By-law Department Update
- c. Fire Department
 - 1. FD 2024-02: 2024 Fire Department Update
- d. Public Works Department
 - 1. PW 2024-29: 2024 Review & Provisions of infrastructure Presentation and Outcome.

- 2. PW 2024-30 Annual DWQMS Internal Audit Report & Results
- 3. PW 2024-31: Annual DWQMS External Audit Reports & Results
- 4. PW 2024-32: 3rd Quarter Public Works Update

6. CONSENT AGENDA

7. UNFINISHED BUSINESS

8. OTHER BUSINESS

9. MATTERS OF STANDING COMMITTEES

a. Raisin Region Conservation Authority update by Councillor Jacques Massie

- b. Maxville Manor update by Councillor Gary Martin
- c. Glengarry Pioneer Museum update by Councillor Gary Martin
- d. Glengarry Archives update by Mayor Jamie MacDonald
- e. Arts, Culture & Heritage update by Councillor Jeff Manley
- f. County Council update by Deputy Mayor Carma Williams
- g. Friends of the Trails update by Councillor Jeff Manley

h. Community Development Committee update by Mayor Jamie MacDonald

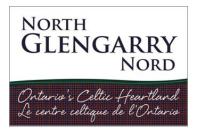
i. Rural Affairs update by Councillor Brian Caddell

10. NOTICE OF MOTION

Next Committee of the Whole Meeting

Wednesday, April 23 2025, at 3:00 p.m in the Council Chambers, 3720 County Road 34, Alexandria On.

11. ADJOURMENT



STAFF REPORT TO COMMITTEE OF THE WHOLE

Report No: TR-2024-17

September 9, 2024

From: Zoe Bougie - Director of Finance/Treasurer

RE: Finance Department Update

Recommended Motion:

THAT the Committee of the Whole receives Staff Report TR-2024-17, Finance Department Update for information purposes only.

Background / Analysis:

Staffing:

The Finance Department has welcomed two new staff members. These individuals were hired to replace upcoming retirements.

<u>Procedures and Processes</u>: Over the course of 2024, staff have reviewed processes and procedures to attempt to find efficiencies. With the changes in staffing, this is an ideal time to review the way tasks are accomplished and ensure that this is the best way. The most prominent change is the move towards digital records and a more centralized system for storing files online. This has allowed staff to more accurately and easily find records and decreased the time required for more manual and redundant tasks.

Payroll:

The Finance Department has been working on transitioning from a manual payroll system to an automated system. The current process takes a significant amount of time, is not efficient and leaves room for error. The new system will allow staff to input their hours digitally via a computer or cell phone. It will also allow for time-off requests to be processed and documented, providing management a more efficient solution to organize staff. The financial implications were considered in the 2024 budget and will be carried forward to the 2025 budget. The aim is to have the system fully implemented by January 2025.

2025 Budget:

Staff are in the process of compiling and reviewing data to complete the 2025 Budget. Staff aim to have the budget completed by mid-December to give Council time to review and provide comments before the planned budget meeting on January 7, 2025.

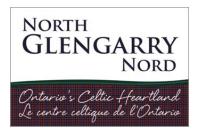
Alternatives: N/A

Financial Implications: N/A

Attachments & Relevant Legislation:

Others Consulted:

Reviewed and Approved by: Sarah Huskinson, CAO/Clerk



STAFF REPORT TO COMMITTEE OF THE WHOLE Report No: BP-2024-29

November 20, 2024

From: Jacob Rheaume – Chief Building Official / Director of Building, By-law & Planning

RE: 2024 Department Update

Recommended Motion:

THAT the Committee member of the Committee of the Whole for the Township of North Glengarry receives Staff Report No. BP-2024-29 from the Director of Building, By-law & Planning for information purposes.

Background / Analysis:

The Building, By- Law & Planning Department is presenting the Council of the Township of North Glengarry with an update on the department.

BUILDING DEPARTMENT

- Building permits
 - o 2024 VS 2023
- Larger projects
 - Maxville school
 - o Saca
 - o Elgin Street West
 - o Bishop Street North
- Deputy CBO
- Septic System (Part 8) Inspector
- Administrative Assistant

BY-LAW ENFORCEMENT DEPARTMENT

- Dog Catcher duties
- Township kennel
- AMPS
- Business Licenses for taxi, chip stands, etc.
- Exotic Animals
- On-going complaints

PLANNING DEPARTMENT

- Subdivisions
 - Alcore Homes
 - o Ladouceur
- Draft Zoning By-law
 - Dwellings on Urban vs Rural properties
- Delegated Powers
 - o ZBA
 - $\circ \quad \text{Site Plans} \quad$
 - o Part Lot Control
- Cannabis
- On-going ZBA, MV
- Severances
- Administrative Assistant
- Planner

Alternatives:

None

Financial Implications:

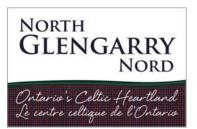
No financial implications for the Township.

Attachments & Relevant Legislation:

None

Others consulted: None

Reviewed and Approved by: Sarah Huskinson, CAO/Clerk



STAFF REPORT TO COMMITTEE OF THE WHOLE

Report No: FD-2024-02

DATE: November 20th, 2024

From: Matthew Roy - Fire Chief

RE: Departmental Workplan Update- November 2024

Recommended Motion:

THAT the Committee of the Whole of the Township of North Glengarry receives Staff Report No. FD 2024-02, the Departmental Workplan Update – November 2024 from the Fire Department for information purposes.

Background / Analysis:

TRAINING/FIREFIGHTER CERTIFICATION UPDATE

- NFPA 1001 FFII Certification requirement 2026
- NFPA 1001 FFI Recruits
- NFPA 1006 Ice Water Rescue Certification requirement 2028
- NFPA 1072 Hazmat Awareness and Operations
- Fire Prevention Inspection Division NFPA 1035/1031

HEALTH AND SAFETY

- SCBA Bottles Hydrostatic Testing (5 Yrs) End of life cycle for SCBA's 2029.
- Policy and Procedure manual under review, for updating.

FIRE PREVENTION/INSPECTION DIVISION

- The fire prevention division continues to conduct inspections as per our fire prevention policy.
- Touch a Truck Maxville Successful event held on October 12th.
- Provincial Initiative Test your smoke alarm day September 28 was a successful campaign.

FLEET/FACILITIES

- Our fleet underwent its annual MTO safety inspections.
- Fleet assessment and re-alignment.
- Pumper testing on our pumpers was completed by Battleshield, minor issues we found and repaired.
- Annual maintenance on small engines and equipment was completed, normal repairs were conducted.
- Ladder testing will be taking place throughout November and December, including the annual Aerial NFPA certification.

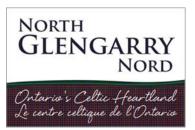
Alternatives:

Financial Implications:

Attachments & Relevant Legislation:

Other Consulted:

Reviewed and Approved by: Sarah Huskinson, CAO/Clerk



STAFF REPORT TO COMMITTEE OF THE WHOLE

Report No:PW-2024-29

DATE: November 20, 2024

From: Timothy Wright, Director of Public Works

RE: Review and Provision of Infrastructure Presentation and Outcomes

Recommended Motion:

THAT the Committee of the Whole receives Staff Report No. PW-2024-29 Review and Provision of Infrastructure Presentation and Outcomes for information purposes only.

Background / Analysis:

As per the internal communication procedure, Top Management must provide an update on the QMS status, including the Infrastructure Maintenance, Rehabilitation and Renewal Presentation and Outcomes.

- The review of the current maintenance and rehabilitation practices was completed on November 1st, 2024.
- System Overview
 - \circ $% \$ No source shortfalls or capacity issues at this point for both Glen Robertson and Alexandria
 - No major changes to risk or processes for both systems
- System Growth
 - No major expansion to system planned in the next year
 - Draft Standards being created at SDG Level for Large Projects
 - Other limiting factors such as wastewater system capacities and servicing areas shortfalls
- Infrastructure Refurbish/Replacement in WTP/Distribution
 - Planned equipment repair/refurbishment
 - To focus on laying out better 10yrs Capital Planning Targets and Asset Indexing
 - On-going work towards Alexandria water loss

Alternatives:

N/A

Financial Implications:

N/A

Attachments & Relevant Legislation:

Safe Drinking Water Act, 2002 Clean Water Act, 2006

Other Consulted:

Angela Cullen, Waterworks Compliance Coordinator Dean McDonald, Environmental Services Manager

Reviewed and Approved by: Sarah Huskinson, CAO/Clerk





Purpose

Ensure effective communication of drinking water operations and maintenance

To be used as a tool for budgeting and planning

 Helps to identify system shortfalls or pre-planned projects
 Helps to give council an understanding and advanced warning for potential budget requests Ensures a consistent and regular review of the drinking water systems conditions and capacities

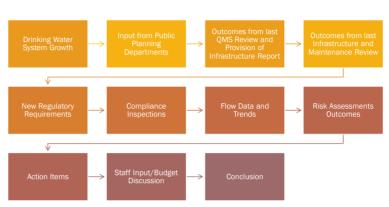
Ensure communication from Operational Staff to Top Management

 Information from Infrastructure Review and operational input
 Report must be communicated to

council through Director of Public Works



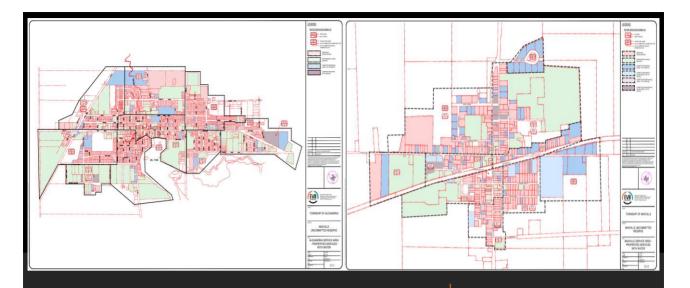
Agenda



Input from Public Planning Department

Population Growth

- SDG Growth Forecasting Study
- Expected steady employment and population growth
 - Projected annual 0.5% increase for North Glengarry
- North Glengarry does not show any deficiencies in land needs to support/promote growth
 - Applications for development are evaluated on an on-going basis
 - Some areas may not be serviceable or require major investment to develop



Future Developable Lands

INFLOW & INFILTRATION STUDY



Growth

- >Imminent Large-Scale Applications or Projects:
 - Maxville Manor Expansion
 - Alexandria McDougald St West Subdivision
- >Future Planning Large-Scale Projects (System Expansion Required)
 - Maxville Subdivision (North-West of Village)
 - Alexandria IHA Subdivision
 - East Boundary Subdivision

≻Limiting Growth Factors

- No connections on Transmission Main due to residual degradation (Alx/Max)
- · Lack of industry and opportunity, area more targeted for retirement vs working class
- Wastewater Growth Issues
- Lack of system redundancy/storage (GIn)

Maxville Water Update

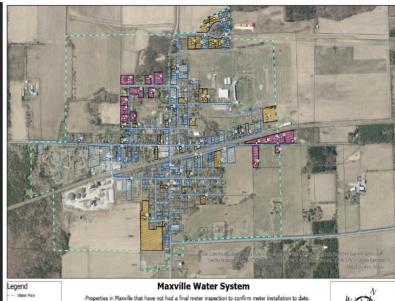
- · 29 residents on flat rate and not confirmed on water meter to date
- List of all addresses has been developed, if required

Growth Tools/Mechanisms/Processes

- SDG Construction Specs & TWP Requirements
- EVB mapping for future development (Alx/Max)
- DWS 10yrs Capital Plan

Maxville Water Project

CONNECTION STATUS



SDG Urban Settlement Ar Parcel_SDG MASTER 22 Parcel_No Meter 23 Serviced Lots 24 SDG Civic Address -Properties in Maxville that have not had a final meter inspection to confirm meter installation to date -Properties that are serviced but have an exemption for connection due to additional servicing requir (sever). -Pre-serviced lots (may require severance) for future development.

The service loss (may require service) for route development. Meter installation period was completed in 2021 and flat rate billing for all non-connections started in 2022.

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Review and Provision of Infrastructure Previous Outcomes

PREVIOUS REVIEW DATE: AUGUST 2023

- No raw water shortfalls or capacity issues identified in Alexandria and Glen Robertson
 - · Review various studies RRCA/South Nation
- · No major changes to system risk identified
 - 36mth (2022) & Annual Review (2024)
- No DWS system expansion planned, or areas targeted for growth
- No significant growth/development identified
 - Some potential future projects IHA/Maxville Subdivision
 - Limiting factors include growth restriction transmission main, and required main extensions to provide servicing to new developments, as well as wastewater system shortfalls
- Infrastructure maintenance is covered through various planning methods
 - Operational Budget/Capital Planning/Replacement Programs
 - Water Loss Program

OUTSTANDING ISSUES IDENTIFIED

- Concern about task delegation to ensure system coverage and task completion, minor changes to roles/responsibilities
- Maxville Non-Metered Listing for Building Department
 Was not completed after last review

Growth Tools

- SDG wide standardized construction specs
 - Large Scale Development where WW not installing works, but infrastructure will be handed back to for management.
 - As per Chief Building Inspector: Counties are creating set of county wide construction standards. Packages need to include:
 - copy of the system Drinking Water Works Permit
 - SOP 048 Water System Alteration: Form Selection, and
 SOP 047 New Water Main Installation
- EVB Mapping for future development
- Infrastructure 10yrs Capital Plan (Water)

Maintenance and Infrastructure Review Previous Outcomes

REVIEW DATE: JULY 2024

 Maintenance Programs are intact and operating as per design

- · Schedules and tracking forms are up to date
- All equipment included
- To ensure work is being completed as scheduled
 - Newer staff/operators are gaining experience, and routine schedules are often completed
 - Improved deficiencies followed-up through Roch delegation
 - External contractors' annual targets were improved this year for most part. Only minor number of outstanding inspections, which Roch was looking into.

Documentation

- Minor issues with lack of information in eRIS entries and lack of Access E11 entries.
- · To ensure consistency for all operational staff.

OUTSTANDING ISSUES

≻Alx DWS

- Proactive equipment indexing and replacement scheduling
- Elevated water loss/water audit
- > Open defective equipment

≻GIn DWS

- Mineral deposits in well casing and potential impacts on well pump operation
- Intermittent sodium hypochlorite dosing issues and pump failures

New Regulatory Requirements

| Source Protection | Road Salt requirements RRCA enforcement |
|---------------------------|--|
| Drinking Water | No regulatory, procedure or guideline changes Gin System designation changes Gin PTTW Renewal & Alx/Gin MDWL Renewal |
| Operator Certification | Renewal: 2 (WD & WWC) Upgrade: 12 (OIT- All Systems) |
| Health & Safety | • 2022 Book 7 • 2023 OHSA |
| Internal Policies | Fee & Charges Bylaw 03-2024 |



9

Inspection & Audit Reports

MECP COMPLIANCE

Alexandria DWS

- 2024 Inspection: August 21
 - No report to date
 - Items identified: Form 2 requirements, DWSPI update, Potassium Pump replacement
- 2023 Inspection: November 1
- 0 Non-Compliance or Best management Practices
 - 100% Risk Ranking

≻Glen Robertson DWS

- 2024 Inspection: August 21
- No report to date
- Items identified: Form 2 requirements, DWSPI update
- 2023 Inspection: October 23, 2023
 - 1 Non-Compliance (System Certification)
 - BMP/Recommended (Backflow Prevention Program)
 - 98.80% Risk Ranking

QMS CONFORMANCE

Internal Auditor: Ewen McDonald

- > 2024 On-Site Audit: October 30
- > 2023 On-Site Audit: October 17
- 2 Non-Conformance (Documentation Currency/Protection)
- 6 OFI (Public Relation, Council Training, Document Currency, Council Communication, Asset Management)

External Auditor: SAI Global

- > 2024 scheduled November 4
- 2023 Off-Site Surveillance Audit
 - 1 Mn Non-Conformance (Documentation Currency, Required Documentation Missing)
 All items corrected immediately to ensure accreditation was maintained
 - 3 OFI (Risk Assessment Rational Inclusion, Competency Update, Management Review Follow-Up)

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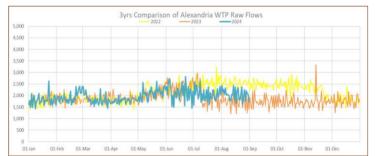
ALX WTP FLOW & TRENDING Raw Water

Source Water Trends

- Algae Blooms Monitoring May-Oct, levels lower than previous year (due environmental factors-rain/heat)
- TC/EC levels still increased from historical values after intake dyke work

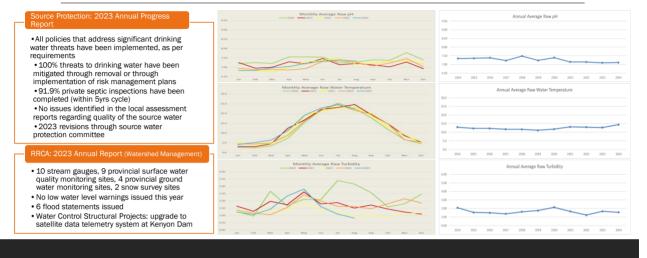
Flows Trends

- Jan-Aug consumption, noted slight increase
 - > 2022 increased due to increased flushing for quality
 - > 2023: noted flow reduction after main break repair (Jul)
- Rated Capacity 5,616m³/day
 - 2022: 38.1% (Jan-Dec)
 - 2023: 33.3% (Jan-Dec)
 - 2024: 34.9% (Jan-Aug)
- Process Water Used
 - 2021: 7.2% of raw water
 - 2022: 9.1% of raw water
 - > 2023: 9.8% of raw water
- Water Quality Trends
 - No additional treatment measures or process changes required at this time

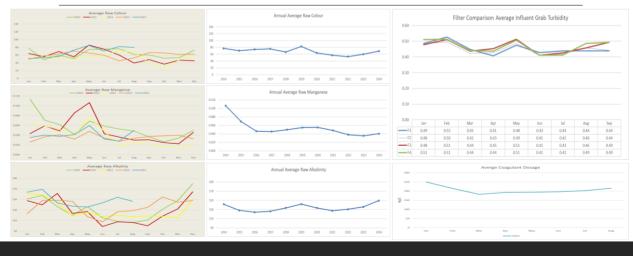


| Total Flows | 2022 | 2023 | 2024 | Average Flows | 2022 | 2023 | 2024 |
|-------------|---------|---------|---------|---------------|-------|-------|-------|
| Jan | 53,925 | 56,126 | 55,589 | Jan | 1,740 | 1,811 | 1,793 |
| Feb | 52,876 | 51,074 | 56,336 | Feb | 1,888 | 1,824 | 1,943 |
| Mar | 57,829 | 56,729 | 56,462 | Mar | 1,865 | 1,830 | 1,821 |
| Apr | 53,171 | 55,816 | 53,605 | Apr | 1,772 | 1,861 | 1,787 |
| May | 66,755 | 63,258 | 65,181 | May | 2,153 | 2,041 | 2,103 |
| Jun | 67,773 | 69,882 | 64,068 | Jun | 2,259 | 2,329 | 2,136 |
| Jul | 79,067 | 61,672 | 63,559 | Jul | 2,551 | 1,989 | 2,050 |
| Aug | 78,665 | 53,436 | 63,449 | Aug | 2,538 | 1,724 | 2,047 |
| Sep | 73,567 | 52,218 | 0 | Sep | 2,452 | 1,741 | |
| Oct | 75,471 | 53,692 | 0 | Oct | 2,435 | 1,732 | |
| Nov | 66,218 | 52,978 | 0 | Nov | 2,207 | 1,766 | |
| Dec | 56,456 | 54,713 | 0 | Dec | 1,821 | 1,765 | |
| Annual | 781,773 | 681,594 | 478,250 | Annual | 2,140 | 1,868 | 1,96 |
| Jan-Aug | 63,758 | 58,499 | 59,781 | % Capacity | 38.1% | 33.3% | 34.9% |

Alexandria Raw Water Quality/Quantity



Alexandria Raw Water Quality/Quantity



ALX WTP FLOW & TRENDING Treated Water

- Flow Trending
 - Flows slight increase in treated flows from previous year (Jan-Aug)
 - 2022 increased due to increased flushing for quality
 - 2023 noted low treated water May 19, no written log as to why
 - 2023 noted flow reduction after main break repair (Jul)
 - Rated Capacity 8,014m³/day
 - 2022: 24.3% (Jan-Dec)
 - 2023: 21.10% (Jan-Dec)
 - 2024: 22.0% (Jan-Aug)

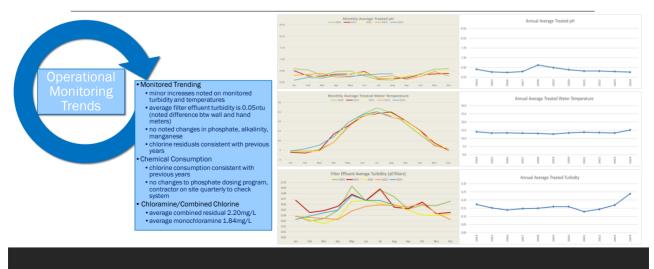
Water Quality

- No treatment shortfalls or capacity issues observed during this period
 - TOC/DOC Treatment still in good range but treatment efficiencies have decreased from previous year
- Minor noted increase in treated average turbidity
 after filters starting in May, but are slowly decreasing
- Combined chlorine residuals are more stable than 2023

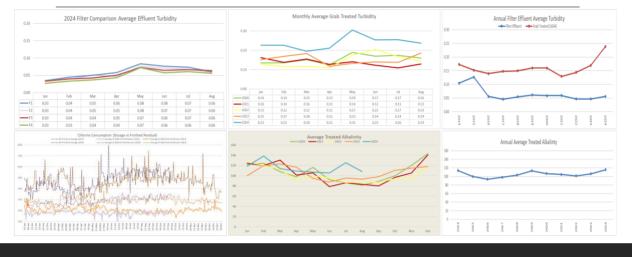
| | | 3yrs Com | parsion of Ale | exandria WTP Treated | Flows 2024 | | |
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| Total Flows | 2022 | 2023 | 2024 | Average Flows | 2022 | 2023 | 2024 |
| Total Flows Jan | 2022 48,391 | 2023 49,304 | 2024 49,914 | Average Flows Jan | 2022 1,561 | 2023 1,590 | 2024 1,610 |
| Total Flows Jan Feb | 2022 48,391 48,714 | 2023 49,304 45,908 | 2024 49,914 50,725 | Average Flows Jan Feb | 2022 1,561 1,740 | 2023 1,590 1,640 | 2024 1,610 1,749 |
| Total Flows Jan Feb Mar | 2022 48,391 48,714 52,259 | 2023 49,304 45,908 51,234 | 2024 49,914 50,725 50,528 | Average Flows Jan Feb Mar | 2022 1,561 1,740 1,686 | 2023 1,590 1,640 1,653 | 2024 1,610 1,749 1,630 |
| Total Flows Jan Feb Mar Apr | 2022 48,391 48,714 52,259 47,442 | 2023 49,304 45,908 51,234 50,583 | 2024 49,914 50,725 50,528 47,787 | Average Flows Jan Feb Mar Apr | 2022 1,561 1,740 1,686 1,581 | 2023 1,590 1,640 1,653 1,686 | 2024 1,610 1,749 1,630 1,593 |
| Total Flows Jan Feb Mar Apr May | 2022 48,391 48,714 52,259 47,442 60,837 | 2023 49,304 45,908 51,234 50,583 55,643 | 2024 49,914 50,725 50,528 47,787 58,355 | Average Flows Jan Feb Mar Apr May | 2022 1,561 1,740 1,686 1,581 1,962 | 2023 1,590 1,640 1,653 1,686 1,795 | 2024 1,610 1,749 1,630 1,593 1,882 |
| Total Flows Jan Feb Mar Apr May Jun | 2022 48,391 48,714 52,259 47,442 60,837 61,894 | 2023 49,304 45,908 51,234 50,583 55,643 64,375 | 2024 49,914 50,725 50,528 47,787 58,355 57,746 | Average Flows Jan Feb Mar Apr May Jun | 2022 1,561 1,740 1,686 1,581 1,962 2,063 | 2023 1,590 1,640 1,653 1,686 1,795 2,146 | 2024 1,610 1,749 1,630 1,593 1,882 1,925 |
| Total Flows Jan Feb Mar Apr May Jun Jun | 2022 48,391 48,714 52,259 47,442 60,837 61,894 73,015 | 2023 49,304 45,908 51,234 50,583 55,643 64,375 57,023 | 2024 49,914 50,725 50,528 47,787 58,355 57,746 57,991 | Average Flows Jan Feb Mar Apr May Jun Jun | 2022 1,561 1,740 1,686 1,581 1,962 2,063 2,355 | 2023 1,590 1,640 1,653 1,686 1,795 2,146 1,839 | 2024 1,610 1,749 1,630 1,593 1,882 1,925 1,871 |
| Total Flows Jan Feb Mar Apr May Jun Jun Jul Aug | 2022 48,391 48,714 52,259 47,442 60,837 61,894 73,015 72,921 | 2023 49,304 45,908 51,234 50,583 55,643 64,375 57,023 48,952 | 2024 49,914 50,725 50,528 47,787 58,355 57,746 57,991 | Average Flows Jan Feb Mar Apr May Jun Jul Aug | 2022 1,561 1,740 1,686 1,581 1,962 2,063 2,355 2,352 | 2023 1,590 1,640 1,653 1,686 1,795 2,146 1,839 1,579 | 2024 1,610 1,749 1,630 1,593 1,882 1,925 1,871 |
| Total Flows Jan Feb Mar Apr May Jun Jun Jul Aug Sep | 2022 48,391 48,714 52,259 47,442 60,837 61,894 73,015 72,921 67,411 | 2023 49,304 45,908 51,234 50,583 55,643 64,375 57,023 48,952 47,662 | 2024 49,914 50,725 50,528 47,787 58,355 57,746 57,991 | Average Flows Jan Feb Mar Apr May Jun Jul Jul Aug Sep | 2022 1,561 1,740 1,686 1,581 1,962 2,063 2,355 2,355 2,352 2,247 | 2023 1,590 1,640 1,653 1,686 1,795 2,146 1,839 1,579 1,589 | 2024 1,610 1,749 1,630 1,593 1,882 1,925 1,871 |
| Total Flows Jan Feb Mar Apr Jun Jun Jul Aug Sep Oct | 2022 48,391 48,714 52,259 47,442 60,837 61,894 73,015 72,921 67,411 69,521 | 2023 49,304 45,908 51,234 50,583 55,643 64,375 57,023 48,952 47,662 48,220 | 2024 49,914 50,725 50,528 47,787 58,355 57,746 57,991 | Average Flows Jan Feb Mar Apr Jun Jun Jun Jul Aug Sep Oct | 2022 1,561 1,740 1,686 1,581 1,962 2,063 2,355 2,355 2,352 2,247 2,243 | 2023 1,590 1,640 1,653 1,686 1,795 2,146 1,839 1,579 1,589 1,555 | 2024 1,610 1,749 1,630 1,593 1,882 1,925 1,871 |
| Total Flows Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov | 2022 48,391 48,714 52,259 47,442 60,837 61,894 73,015 72,921 67,411 69,521 58,328 | 2023 49,304 45,908 51,234 50,583 55,643 64,375 57,023 48,952 47,662 48,220 47,244 | 2024 49,914 50,725 50,528 47,787 58,355 57,746 57,991 | Average Flows Jan Feb Mar Apr Jun Jun Jun Jun Aug Sep Oct Nov | 2022 1,561 1,740 1,686 1,581 1,962 2,063 2,355 2,352 2,247 2,243 1,944 | 2023 1,590 1,640 1,653 1,686 1,795 2,146 1,839 1,579 1,589 1,555 1,575 | 2024 1,610 1,749 1,630 1,593 1,882 1,925 1,871 |

| Treatment Comparison | Total Raw Organic Carbon | Total Treated Organic Carbon | % Removal | Total Dissolved Raw Organic Carbon | Total Dissolved Treated Organic Carbon | % Removal | Total Raw TKN | Toal Treated TKN | % Removal |
|-------------------------|-----------------------------------|---------------------------------------|--------------|--|--|--------------|------------------|------------------------|--------------|
| 2022 Annual Average | 12.2 | 4.1 | 66 | 12.0 | 3.7 | 69 | 0.9 | 0.3 | 66 |
| 2023 Annual Average | 11.6 | 3.7 | 69 | 9.9 | 3.6 | 69 | 0.9 | 0.2 | 72 |
| 2024 Annual Average | 16.3 | 5.7 | 56 | 14 | 5.2 | 58 | 0.7 | 0.3 | 58 |

Alexandria Treated Water Quality/Quantity



Alexandria Treated Water Quality/Quantity



DISTRIBUTION TRENEDING Alexandria-Maxville

- Flows in distribution up slightly
 - Overall Water Consumption (2024)
 - Alexandria 85.2%
 - Maxville 14.8%
 - Values from month to month are more consistent, as compared to previous years
 - Noticeable decreases after watermain repairs (2023)

| Total Flows | 2022 | | 202 | 23 | 2024 | | | | |
|--------------|---------|--------|---------|--------|---------|--------|--|--|--|
| Total Thoms | ALX | MAX | ALX | MAX | ALX | MAX | | | |
| Jan | 42,712 | 5,679 | 42,749 | 6,555 | 42,644 | 7,270 | | | |
| Feb | 43,273 | 5,441 | 39,704 | 6,204 | 43,856 | 6,870 | | | |
| Mar | 46,445 | 5,815 | 44,839 | 6,395 | 43,890 | 6,638 | | | |
| Apr | 41,856 | 5,585 | 43,487 | 7,096 | 41,559 | 6,228 | | | |
| May | 53,469 | 7,368 | 46,995 | 8,648 | 49,008 | 9,347 | | | |
| Jun | 52,335 | 9,560 | 56,102 | 8,274 | 48,477 | 9,270 | | | |
| Jul | 63,587 | 9,428 | 49,388 | 7,635 | 48,129 | 9,862 | | | |
| Aug | 64,950 | 7,971 | 40,441 | 8,511 | 48,522 | 8,303 | | | |
| Sep | 58,588 | 8,823 | 39,732 | 7,930 | | | | | |
| Oct | 59,916 | 9,604 | 40,398 | 7,821 | | | | | |
| Nov | 50,549 | 7,779 | 40,227 | 7,017 | | | | | |
| Dec | 43,276 | 6,562 | 42,293 | 7,365 | | | | | |
| Annual Total | 620,956 | 89,615 | 526,354 | 89,452 | 366,085 | 63,787 | | | |
| Jan-Aug Avg | 51,078 | 7,106 | 45,463 | 7,415 | 45,761 | 7,973 | | | |

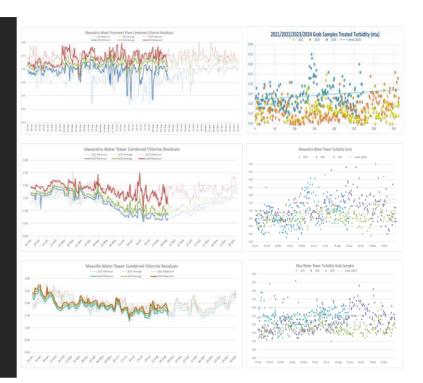


Alexandria/Maxville Distribution Trending

- Chlorine Residual
 - Distribution residual monitoring has improved due to closer tracking on WTP residuals, inputting operational objectives
 - Minimum residuals are greatly improved from previous year from WTP
 - Alx & Max WT showing similar trending to previous year
 - Values are being maintained at appropriate levels, and operational staff are quicker to react to ensure residuals are maintained
- Turbidity

19

- Grab samples appears to be higher than wallmounted values
 - Recommended to recording AT1502 to get a better sense of values (WTP)
 - Levels are well below aesthetic guideline, but are elevated from previous years
- Dead End Check
 - Being completed intermittently,
 - Auto flusher installed in Maxville in May (4 units)
 - Auto flushed installed in Alexandria in July (3 units)
 - Residuals checks showed results well over 1mg/L



WATER LOSS FLOW TRENDING

Alexandria and Maxville 2024 Water loss is estimated based

- on traditional values collected

 Water loss information gathering was started at the wrong time of year and
 - started at the wrong time of year and information was not available when request to complete before meeting
 - All values are estimates only
 - Installed Bulk Water Station for contractors
 - System not set up through billing to date, values still be sent over manually
 - > Hydrant Use Bylaw still not in effect
- 2023 Water Audit was undertaken due to increasing water loss observations
 - Report received
 - Alx Non-Revenue Water (NRW): 55%

2024

196.677 29.165

225,842

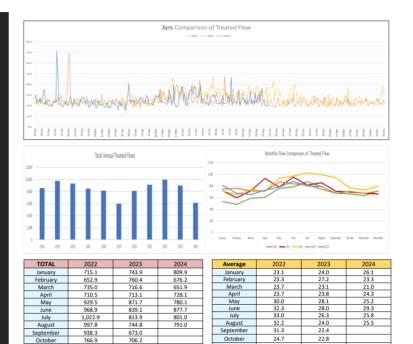
Non-Revenue Water Max: 49%

| | Monthly Report Calculated Water Loss | | | | | | | | | | | |
|----------------|--------------------------------------|---------|-----------|--------------|--------------------------|----|---------|--------------------|-----------|-----------------|--------------------------|----|
| Month (billin | g cycle) | Alx WTP | Alx Meter | Alx Flushing | Unaccounted for Water | % | Bst Stn | Max Water Tower | Max Meter | Max Flushing | Unaccounted for Water | % |
| Nov 15-Jan 14 | Jan | 96,199 | 36,786 | 84 | 44,912 | 47 | 14,417 | 13,778 | 5,925 | 656 | 7,836 | 57 |
| Dec 15-Feb 14 | Feb | 101,094 | 38,799 | 15 | 47,322 | 47 | 14,957 | 14,464 | 5,989 | 717 | 8,251 | 57 |
| Jan 15-Mar 14 | Mar | 102,408 | 39,015 | 82 | 49,350 | 48 | 13,962 | 13,634 | 7,341 | 651 | 5,970 | 44 |
| Feb 15-Apr 14 | Apr | 100,102 | 36,697 | 103 | 50,308 | 50 | 12,994 | 12,596 | 5,621 | 601 | 6,773 | 54 |
| Mar 15-May 14 | May | 99,735 | 36,979 | 3,719 | 45,831 | 46 | 13,205 | 12,863 | 6,814 | 413 | 5,978 | 46 |
| Apr 15- Jun 14 | Jun | 112,009 | 42,258 | 5,305 | 47,141 | 42 | 17,305 | 16,632 | 6,185 | 3,629 | 7,491 | 45 |
| May 15-Jul 14 | Jul | 117,087 | 43,050 | 2,098 | 51,725 | 44 | 20,214 | 18,047 | 6,512 | 4,465 | 9,238 | 51 |
| Jun 15-Aug 14 | Aug | 113,976 | 43,290 | 1,308 | 51,044 | 45 | 18,334 | 16,494 | 6,396 | 2,176 | 9,763 | 59 |



RAW/TREATED FLOW TRENDING Glen Robertson

- Flows are slightly decreased from previous year,
 - High flows in Jan attributed to distribution issue
 - Flow have been decreasing slightly since 2022
 - ≻monthly flow comparison (Jan-Aug)
 - 2022: + 5.8%
 - 2023: -7.9%
 - 2024: -1.4%
- Rated Capacity 224m³/day
 - 2022: 12.2% (Jan-Dec)
 - 2023: 11.0% (Jan-Dec)
 - 2024: 11.2% (Jan-Aug)
- No noted treatment shortfalls or capacity issues



24.3

25.6

Novemb

December

22.4

22.9

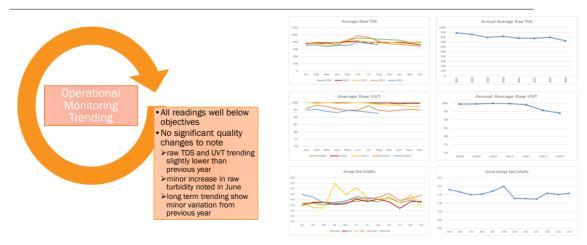
24.6

25.1

21

Raw Water Quality/Quantity

November



729.4

793.4

9,960,8

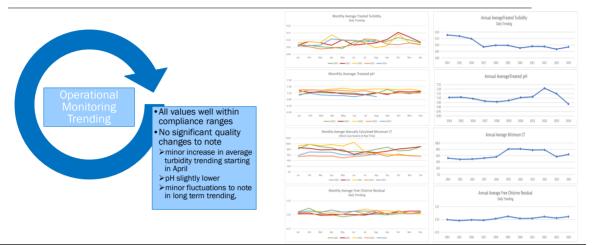
671.5

710.1

8.964

6.116

Treated Water Quality/Quantity



23

DISTRIBUTION TRENDING Glen Robertson

Residual Degradation

- Distribution residual has improved, minimum values are regularly above 1.20mg/L
- Average levels have increased from 1.39mg/L to 1.53mg/L

Water Loss

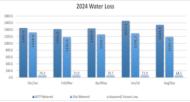
- Small Distribution System
 - water leaks are normally easily detectible
 - No potential for water taking from other departments or contractors
 No additional work required in this
 - area
 - 2024: Annual Average: 11.6%
 - Jun-Sep higher due to missing flushing data
 - No water breaks or service leaks to note during this period
- 2023 Annual Average: 10.2%
 - External Water Audit showed system was too small to get accurate data



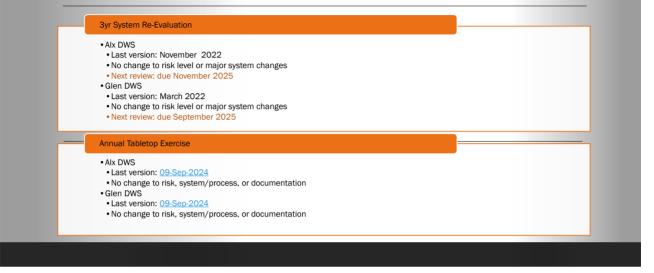
| | Bi-Monthly Meter Totals | | | | | | | | | | | |
|---------|-------------------------|-------|-------|-------|--|--|--|--|--|--|--|--|
| Month | 2024 | 2023 | 2022 | 2021 | | | | | | | | |
| Dec/Jan | 1,318 | 1,265 | 1,118 | 959 | | | | | | | | |
| Feb/Mar | 1,185 | 1,242 | 2,447 | 1,038 | | | | | | | | |
| Apr/May | 1,264 | 1,290 | 1,241 | 977 | | | | | | | | |
| Jun/Jul | 1,291 | 1,372 | 1,707 | 1,435 | | | | | | | | |
| Aug/Sep | 1,193 | 1,226 | 1,667 | 1,315 | | | | | | | | |

| Billing Cycle | WTP | Dist | | Difference | % Water |
|------------------|---------|---------|------|------------|------------|
| Oyolo | Metered | Metered | Loss | | Loss |
| Jan/Dec | 1447.0 | 1318.0 | 75.7 | 53.3 | 3.7 |
| Feb/Mar | 1416.9 | 1185.0 | 71.5 | 160.4 | 11.3 |
| Apr/May | 1439.9 | 1263.7 | 75.8 | 100.4 | 7.0 |
| Jun/Jul | 1657.1 | 1291.2 | 68.5 | 297.4 | 17.9 |
| Aug/Sep | 1543.9 | 1192.7 | 68.5 | 282.7 | 18.3 |



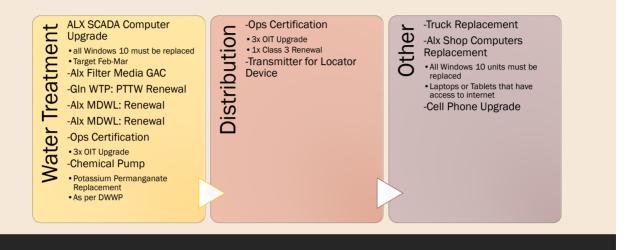


DWS Risk Assessment

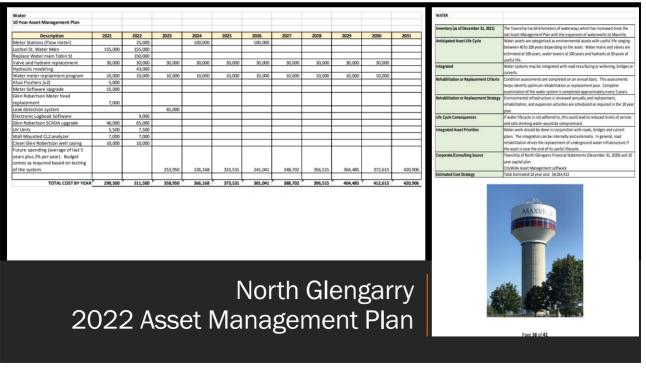


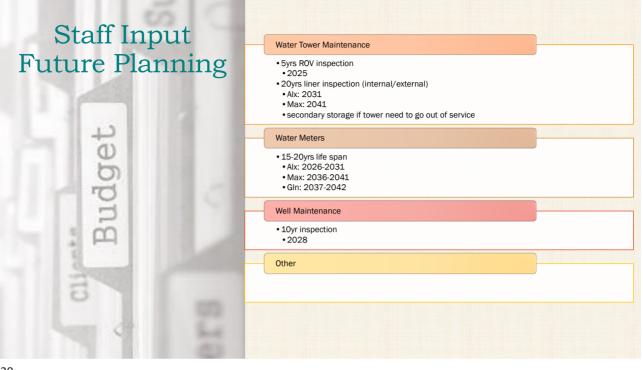
Action Items Internal **Documentation:** Plan OM/SOP/CAP Operational Projects Documents Required • 10yrs Capital Plan Hydrant Usage · coagulant tank cleaning • OM update required for System Condition • no action to date Glen DWS due to SCADA and valve replacement assessment contracted Backflow Devices to EVB • OM Update required for defective valve draft bylaw Alx DWS due to new replacement (V809, V911, V941) no final documentation • External Construction • Twp Asset Management chlorinator Draft through SDG • LLP210 leaking actuator Plan 2022 SOP development valve required for . Ensure that copies of Indexing Equipment • GIn WTP shut down, MDWL and DWWP • no action to date • Monitor Equipment Fail, incorporated into new asset management Water Tower Turn Over and Documentation process thorough Chemical pump failure Finance, to be implemented in 2025

Staff Input: 2024 Proposed Budget Ideas (Operations)



27



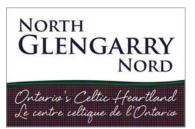


| 2025 Capital Budget | Water Tower Inspection | Internal ROV |
|------------------------|------------------------------|-------------------------------|
| | Watermain | no main rehabilitation |
| 4 | | Flow testing for Dominion St? |
| Ige | Other: | |
| Budd | Other: | |
| CI CI | Other: | |

Conclusions

- System Overview
 - >No source shortfalls or capacity issues at this point for both Glen Robertson and Alexandria
 - >No major changes to risk or processes for both systems
- System Growth
 - > No major expansion to system planned in the next year
 - > Draft Standards being created at SDG Level for Large Projects
 - >Other limiting factors such as wastewater system capacities and servicing areas shortfalls
- >Infrastructure Refurbish/Replacement in WTP/Distribution
 - Planned equipment repair/refurbishment
 - \succ To focus on laying out better 10yrs Capital Planning Targets and Asset Indexing
 - >On-going work towards Alexandria water loss





STAFF REPORT TO COMMITTEE OF THE WHOLE

Report No:PW-2024-30

DATE: November 20, 2024

From: Timothy Wright, Director of Public Works

RE: Annual DWQMS Internal Audit Report and Results

Recommended Motion:

THAT the Committee of the Whole receives Staff Report No. PW-2024-30 Annual DWQMS Internal Audit Report and Results for information purposes only.

Background / Analysis:

As per the internal communication procedure, Top Management must provide an update on the QMS status, including the Annual DWQMS Internal Audit Report and Results.

- The internal audit took place between October 21st and November 1st 2024 and was performed by Ewen McDonald who is a certified auditor through the Walkerton Clean Water Centre.
- There were two non-conformities that have since been corrected:
 - Minor Non-Conformance The DWQMS Station at the Alexandria Water Treatment Plan is not up to date. The QMS Representative updated the dates on the whiteboard when on-site.
 - Minor Non-Conformance The Emergency Contact and Services Listing QMS SYS-T13 is not up to date. There are changes to the Waterworks staff that are not reflected on the list.

Alternatives:

N/A

Financial Implications:

N/A

Attachments & Relevant Legislation:

Safe Drinking Water Act, 2002 Clean Water Act, 2006

Other Consulted:

Angela Cullen, Waterworks Compliance Coordinator Dean McDonald, Environmental Services Manager Reviewed and Approved by: Sarah Huskinson, CAO/Clerk Drinking Water Quality Management Standard

Internal Audit Report

For the period of:

October 10, 2024 to November 1, 2024

For:

The Township of North Glengarry

Alexandria/Maxville Water System

(System #220001030)

Glen Robertson Drinking Water System

(System #220008408)

Conducted by: Ewen MacDonald

Audit dates: October 21 – November 1, 2024

1.0 Overview & Objectives

An internal audit of the Township of North Glengarry quality management system (QMS) was conducted on October 30, 2024 to determine whether it conforms to the requirements of the Standard and version; and to assess whether the QMS is effectively implemented.

The internal audit was conducted by Auditor Ewen MacDonald

This report summarizes the audit results in section 2.0 Audit Findings, categorizing positive findings, nonconformities and opportunities for improvement.

1.1 Scope

The internal audit was performed at the Township of North Glengarry Alexandria/Maxville Water Treatment Plant located at 90 Main Street, Alexandria, Ontario

Operational Plans, Records, and Documents for the Township of North Glengarry were reviewed entirely for conformity to the Standard and version. This audit also reviewed the Township of North Glengarry's planned processes and programs to evaluate how well QMS requirements are integrated into them.

Process audits examine the resources (equipment, materials and people) used to transform the inputs into outputs, the methods (procedures and instructions) followed and the measures collected to determine process performance. Process audits check the adequacy and effectiveness of the process controls established by procedures, work instructions, training and process specifications.

The last Internal Audit was conducted on Oct 10, 2023. This audit focused on the period between October 19, 2022 and October 10, 2023.

Methodology

The audit was conducted in accordance with CAN/CSA-ISO 19011:03, Guidelines for Quality and /or Environmental Management Systems Auditing, and the Walkerton Clean Water Centre Course "Internal Auditing for the DWQMS".

The list of all auditing criteria is included in Appendix "A" – Audit Plan. Appendix "B" – Documents and Records reviewed. Appendix "C" – Document Review Checklist and Auditors Comments

In order to conduct audits within scope, time and budgetary constraints, they are based upon a sampling of processes, systems, operations and documents. Not every single document, operation, system, process, or piece of information relating to management system performance is reviewed. The size of the sample selected by the auditors is appropriate to the size and scale of the operation and information available. Objective evidence collected by the auditors is based upon the sampling.

The conclusions presented in this report are based on information presented during the internal audit.

1.2 Audit Program Monitoring and Reviewing

The implementation of the audit program was monitored and, at appropriate intervals, reviewed to assess whether the objectives have been met and to identify opportunities for improvement. The results of this review will be included in this report, if applicable.

Performance indicators were used to monitor characteristics such as:

- the ability to implement the audit plan,
- conformity with the audit program, schedules and audit objectives, and
- feedback from top management, auditees, auditors and other interested parties.

The audit program review considered:

- a) results and trends from monitoring,
- b) conformity with procedures,
- c) evolving needs and expectations of staff involved,
- d) audit program records,
- e) alternative or new auditing practices,
- f) effectiveness of the measures to address the risks associated with the audit program, and
- g) confidentiality and information security issues relating to the audit program.

Corrective actions and opportunities for improvement from the results of audit program reviews, if any, are included in the internal audit report's section 2.0 Audit Findings.

1.3 Auditors

The Auditor was Ewen MacDonald, who has received Internal Auditing for the DWQMS training through the Walkerton Clean Water Centre. Auditor qualifications are included in Appendix "D" – Auditor Training Certificates.

1.4 Confidentiality

The information gathered by the Auditor is the property of the Township of North Glengarry only and will not be transmitted to any third party without the prior written consent of an authorized representative.

All documents provided by the organization prior to and during the assessment are kept only for the purpose of audit review and audit report

2.0 Audit Findings

2.1 Positive Findings

The following positive audit findings were noted during the audit:

Competency

The QMS Representative has prepared an Orientation Presentation for new hires that is very thorough and well organized.

The QMS Representative demonstrates a high level of competency with the Operations Plan and all of the associated documents. Requests for documents and information related to this Internal Audit were provided without any issues that clearly show that the QMS Representative is organized and familiar with the DWQMS.

Commitment

The Township's CAO Participated in the Management Review demonstrating a high level of Commitment to the DWQMS.

All of Council and Top Management have taken the Standard of Care training. This training will assist the Owner (Council) in understanding their responsibilities to provide safe and reliable drinking water to the customers of North Glengarry

Communications

The QMS Representative has created a white board annual calendar with Milestone Dates for the DWQMS requirement along with other Legislative requirements that facilitates scheduling of Audits, Reviews etc. This provides a visual reminder for not only Angela but to all of the Operators and Top Management.

2.2 Non-Conformities

The following two non-conformities were noted during the audit:

- 1. Minor Non-Conformance The DWQMS Station at the Alexandria Water Treatment Plan is not up to date. The QMS Representative updated the dates on the whiteboard when on-site.
- Minor Non Conformance The Emergency Contact and Services Listing QMS SYS-T13 is not to date. There are changes to the Water Works Staff that are not reflected on the list.

2.3 Opportunities for Improvement

| Reference | Opportunity for Improvement – Description |
|-------------------------|---|
| Element 2 | The DWQMS policy could be posted at the top of the Water & Sewage Tab |
| QMS System Policy | as a banner to provide a higher level of importance to the Standard. |
| Element 3 | OFI – Copies of for the DWQMS Commitment and Endorsement and the |
| Commitment & | Purchasing By-laws should be Certified True |
| Endorsement | |
| Element 12 | OFI – The Power Point Presentation for the QMS Update to Council is |
| Communications | included with the Agenda Package. This would be an opportunity for the |
| | QMS Team to make a presentation to Council to enhance Council's understanding of the importance of the DWQMS. |
| Element 14 | Ensure that the Consultants update currently being worked on for the |
| Review and Provision of | Township Asset Management Plan references Element 14 and incorporates |
| | the Asset Management Plan as a link to QMS SYS-P3 Review and |
| | Provision of Infrastructure Procedure. |
| Element 20 | OFI – the Internal Audit OFI's should be included in the DWQMS Power |
| Management Review | Point Presentation to Council |

The following is a list of opportunities for improvement noted in conducting this audit:

3.0 Conclusions

The results of the internal audit performed at the Township of North Glengarry for the drinking water system confirm that the quality management system was Implemented and Maintained over the past year.

While non-conformities and/or opportunities for improvement are cited in this audit report, they do not undermine the positive programs and attitudes already in place among the North Glengarry staff.

Ewen MacDonald

Ewen MacDonald

| Internal A | Internal Audit Start Date: October 23, 2024 Internal Audit End Date: November 1, 2024 | | | | | | | | | | | | | | | | | | | | | | | |
|---------------|---|-------------|------------------|---------------|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|
| Date | Time Participants | | Process / | DWQMS Element | | | | | | | | | | | | | | | | | | | | |
| Date | Time | | Program | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| October | | EM | Desk Top | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х |
| 21 – | | | Review | | | | | | | | | | | | | | | | | | | | | |
| October 25 | | | | | | | | | | | | | | | | | | | | | | | | |
| October | 10:00- | EM/AC/DM | Kick off | х | | | | | | | | | | | | | | | | | | х | | |
| 25 | 11:00 | | Meeting | | | | | | | | | | | | | | | | | | | | | |
| Oct 30 | 9:00- | EM/AC/DM | Previous Audit | х | | | | | | | | | | | | | | | | | | х | х | |
| | 9:30 | | Management | | | | | | | | | | | | | | | | | | | | | |
| | | | Review | | | | | | | | | | | | | | | | | | | | | |
| Oct 30 | 10:30- | EM/AC | QMS | | х | | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х | х |
| | 1:30 | | Representative | | | | | | | | | | | | | | | | | | | | | |
| | | | Responsibilities | | | | | | | | | | | | | | | | | | | | | |
| Nov 1 | 9:30 - | EM/AC/DM/TW | Тор | х | х | х | | | | | | | | | х | | х | х | | | | х | х | х |
| | 10:00 | | Management | | | | | | | | | | | | | | | | | | | | | |
| | | | Responsibilities | | | | | | | | | | | | | | | | | | | | | |
| Nov 1 | 9:30 - | EM/AC/DM/TW | Closing | х | х | х | | | | | | | | | | | | | | | | х | х | Х |
| | 10:00 | | Meeting | | | | | | | | | | | | | | | | | | | | | |

Appendix "A" – Audit Plan

Initials EM-Ewen MacDonald Auditor, AC-Angela Cullen QMS Rep, DM-Dean McDonald Top Management, TW-Timothy Wright Top Management

Appendix "B" – Documents and Records

The list of documents and records were reviewed and observations made during the audit include:

- QMS SYS-OP Plan V8 Nov 2022
- Internal Audit 2023
- Corrective Action Report 2023-1
- Corrective Action Report 2023-2
- Intertek External Audit Report Nov 30, 2023
- Directors Direction Minimum Requirements for Operations Plans May 2021
- QMS SYS E-1 Commitment & Endorsement
- QMS SYS P9 Communications Procedure
- QMS SYS P-2 Records Control Procedure
- October 2024 O.Reg 170/03 Certification of Analysis from Caduceon Laboratory for the Trihalomethanes (THM) at the Glen Robertson Water Treatment Plant
- QMS SYS M-40 Maintenance Log for the 175kW Genset at the Alexandria Water Treatment Plant
- Gen Xpert December 2023 Invoice for the External Maintenance for the 175kW Genset at the Alexandria Water Treatment Plant
- QMS SYS P-8 Risk Assessment Procedure
- QMS SYS F-5 Annual Risk Assessment Form September 2024
- Training Log for Rock Seguin
- 2024 On-Call Schedule
- QMS SYS-F9 Emergency Management Communications Form SCADA PLC Failure February 2024
- QMS SYS-F2 General Communications Form SCADA PLC Failure February 2024
- QMS SYS-F12 Management Review Checklist December 2023

– Appendix "C"

| DOCUMENT REVIEW – DWQMS 2.0 (Condition Expected) | DOCUMENT REVIEW – Auditor Comments (Condition Found) |
|---|--|
| Quality Management System (QMS) PLAN – The OP shall document a QMS that meets the requirements of this Standard. DO – The OA shall establish and maintain the QMS in accordance with the requirements of this Standard and the policies and procedures documented in the OP. | The DWQMS Operations Plan V8, Conforms to the requirements of the Standard. |
| | The Township received a Certificate of Reaccreditation from SAI Global in June 2023 |
| | The Operations Plan covers the two drinking water systems as subsystems with the Township as the Owner with common Top Management, QMS Representative, and Operations Staff. |
| | The Maxville System is an extension of the Alexandria System and fall under the same Licence number |
| QMS Policy PLAN – The OP shall document a QMS Policy that provides the foundation for the QMS, and: a) includes a commitment to the maintenance and continual improvement of the QMS, b) includes a commitment to the Consumer to provide safe drinking water, | The DWQMS Operations Plan Conforms with the requirements of the Standard |
| c) includes a commitment to <i>comply with applicable legislation and regulations</i> , and d) is in a form that <i>can be communicated</i> to all OA <i>personnel</i> , the <i>Owner</i> and the <i>Public</i> . DO – The OA shall <i>establish and maintain a QMS</i> that is consistent with the QMS Policy. | Minor Non-Conformance – The DWQMS Station at the Alexandria Water Treatment Plan is not up to date. The QMS Representative updated the dates on the whiteboard when on- site. |
| | The DWQMS is posted on the Township Website as per QMS-SYS- P9, 4.5.2 |
| | OFI – The DWQMS Policy Statement could be posted at the top of the Water & Sewage Tab as a banner to provide a higher level of importance to the Standard. |

| 3. Commitment and Endorsement PLAN – The OP shall contain a written endorsement of its contents by Top Management and the Owner. DO – Top Management shall provide evidence of its commitment to an effective QMS by: a) ensuring that a QMS is in place that meets the requirements of this Standard, b) ensuring that the OA is aware of all applicable legislative and regulatory requirements, c) communicating the QMS according to the procedure for communications, d) determining, obtaining or providing the resources needed to maintain and continually improve the QMS. | In February 2024 all Council Members attended the Responsibilities Under the Standard of Care Course from the Walkerton Clean Water Agency OFI – Copies of for the DWQMS Commitment and Endorsement and the Purchasing By-laws should be Certified True |
|--|--|
| 4. QMS Representative PLAN – The OP shall <i>identify</i> a QMS representative. D0 – Top Management shall appoint and authorize a QMS representative who, irrespective of other responsibilities, shall: a) administer the QMS by ensuring that processes and procedures needed for the QMS are established and maintained, b) report to Top Management on the performance of the QMS and any need for improvement, c) ensure that current versions of documents required by the QMS are being used at all times, d) ensure that personnel are aware of all applicable legislative and regulatory requirements that pertain to their duties for the operation of the Subject System, and e) promote awareness of the QMS throughout the OA. | Top Management has appointed Water Works Compliance Coordinator Angela Cullen as the QMS Representative The QMS Representative has demonstrated a high level of commitment and competence with all of the required responsibilities of the role. |
| 5. Document and Records Control PLAN – The OP shall document a procedure for Document and Records control that describes how: a) Documents required by QMS are: i. kept current, legible and readily identifiable ii. retrievable iii. stored, protected, retained and disposed of, and b) Records required by the QMS are: i. kept legible, and readily identifiable ii. retrievable iii. stored, protected, retained and disposed of, and b) Records required by the QMS are: i. kept legible, and readily identifiable ii. retrievable iii. stored, protected, retained and disposed of. D0 – The OA shall implement and conform to the procedure for Document and Records control and shall ensure that QMS documentation for the Subject System includes: a) the OP and its associated policies and procedures, b) Documents and Records determined by the OA as being needed to ensure the effective planning, operation and control of its operations, and c) the results of internal and external Audits and management reviews. | Records are retained in files that protect them from damage or loss as per QMS-SYS-P2 4.7.2 Viewed the October 2024 O.Reg 170/03 Certification of Analysis from Caduceon Laboratory for the Trihalomethanes (THM) at the Glen Robertson Water Treatment Plant The records are retained for a minimum of 6 years as per QMS-SYS-P2 4.8.1.3 |
| 6. Drinking Water System (DWS) PLAN - The OP shall document, as applicable: a) for the Subject System: i. the name of the Owner and OA, ii. if the system includes equipment that provides Primary Disinfection and/or Secondary Disinfection: A. a description of the system including all applicable Treatment System processes and Distribution System components, B. a Treatment System process flow chart, C. a description of the water source, including: l. general characteristics of the raw water supply, ll. common event-driven fluctuations, and DOCUMENT REVIEW – DWQMS 2.0 (Condition Expected) | There have been no changes to the Drinking Water Systems DOCUMENT REVIEW – Auditor Comments (Condition Found) |

| III. any resulting operational challenges and threats. iii. if the system does not include equipment that provides Primary Disinfection or Secondary Disinfection: A. a description of the system including all Distribution System components, and B. a description of any procedures that are in place to maintain disinfection residuals. b) if the Subject System is an Operational Subsystem, a summary description of the Municipal Residential Drinking Water System it is a part of including the name of the OA(OA's) for the other Operational Subsystems. c) if the Subject System is connected to one or more other Drinking Water Systems owned by different Owners, a summary description of those systems which: i. indicates whether the Subject System obtains water from or supplies water to those systems, ii. names the Owner and OA(OA's) of those systems, and iii. identifies which, if any, of those systems that the Subject System obtains water from are relied upon to ensure the provision of safe drinking water. | The 175kW Genset Generator at the Alexandria Drinking Water Plant has received routine internal and external maintenance as per the Treatment Process Description in 6.1.2. Viewed QMS SYS M-40 for the Internal Maintenance Log and the December 2023 Invoice from Gen Xpert for the External Maintenance. The Glen Robertson Permit to Take Water is to be renewed in March 2025. The Permit Application is well underway. |
|--|---|
| D0 - The OA shall ensure that the <i>description</i> of the Drinking Water System is <i>kept current</i>. 7. Risk Assessment PLAN - The OP shall document a risk assessment process that: a) Considers potential hazardous events and associated hazards, as identified in MOECC document titled <i>Potential Hazardous Events for Municipal Residential Drinking Water Systems</i>, dated February 2017 as it may be amended. A copy of this document is available at www.ontario.ca/drinkingwater. b) ID's <i>additional potential</i> hazardous events & associated hazards, c) assesses the risks assoc. w/ the <i>occurrence</i> of hazardous events, d) <i>ranks</i> the hazardous events to address the potential hazards and hazardous events, f) identifies <i>Control measures</i> to address the potential hazards and hazardous events, f) identifies a method to <i>verify, at least once every calendar year</i>, the <i>currency</i> of the information and the <i>validity of the assumptions</i> used in the risk assessment, h) ensures that the risks are <i>assessed at least once every thirty-six months</i>, and i) considers the <i>reliability and redundancy of equipment</i>. D0 – The OA shall <i>perform</i> a risk assessment <i>consistent with the documented</i> process. | Reviewed QMS SYS-P8 A 36 Month Comprehensive Risk Assessment as per 4.2.1 of QMS SYS-P8 was completed for the Glen Robertson DWS in March 2022. A 36 Month Comprehensive Risk Assessment as per 4.2.1 of QMS SYS-P8 was completed for the Alexandria DWS on November 16-17 2022 Annual Risk Assessments were completed by the QMS Representative as per QMS SYS-P8 4.1 and revised/updated on QMS SYS-F5 |
| 8. Risk Assessment Outcomes PLAN – The OP shall document: a) the <i>identified potential hazardous events and associated hazards</i>, b) the <i>assessed risks associated with the occurrence</i> of hazardous events, c) the <i>ranked</i> hazardous events, d) the <i>identified control measures</i> to address the potential hazards and hazardous events, e) the identified <i>Critical Control Points</i> and their respective <i>Critical Control Limits</i>, f) procedures and/or processes to <i>monitor the Critical Control Limits</i>, and h) procedures for <i>reporting and recording deviations</i> from the Critical Control Limits. D0 – The OA shall <i>implement and conform</i> to the procedures. | The Water Department uses a stand-alone server that is managed by an IT Technician in house. The Township is a member of the OnWarn System for industry updates and requests. |

| 9. Org. Structure, Roles, Responsibilities and Authorities | The Director of Public Works and the Environmental Services |
|---|--|
| PLAN – The OP shall: | Participated in the Infrastructure Review, the Provision of |
| a) describe the organizational the structure of the OA including respective roles, responsibilities and authorities, | |
| b) delineate corporate oversight roles, responsibilities, authorities in the case where the OA operates multiple Subject Systems, | Infrastructure and the Management Review |
| c) identify the person, persons or group of people within the management structure of the org. responsible for | |
| undertaking the <i>Management Review</i> described in Element 20, | The Water Works Foreman understands their role within the QMS as |
| d) identify the person, persons or group of people, having Top Management responsibilities required by this Standard, | |
| along with their responsibilities, & | per 9.2.6. |
| e) identify the Owner of the Subject System. | |
| DO – The OA shall keep current the description of the organizational structure including respective roles, responsibilities | |
| and authorities, and shall communicate this information to OA personnel and the Owner. | DOCUMENT REVIEW – Auditor Comments (Condition Found) |
| DOCUMENT REVIEW – DWQMS 2.0 (Condition Expected) | |
| 10. Competencies PLAN – The OP shall document. | The Township has implemented "Compliance 365' to electronically |
| a) competencies required for personnel performing duties directly affecting drinking water quality, | track Operator Training. |
| b) activities to develop and/or maintain competencies for personnel performing duties directly affecting drinking water | a son operator mannig. |
| quality, and | |
| c) activities to ensure that personnel are aware of the relevance of their duties and how they affect safe drinking | Viewed Training Log for Rock Seguin |
| water. | |
| DO – The OA shall undertake activities to: | All of Council and Top Management have taken the Standard of |
| a) meet and maintain competencies for personnel directly affecting drinking water quality and shall maintain records of | |
| these activities, and | Care Training? |
| b) ensure that personnel are aware of the relevance of their duties and how they affect safe drinking water and shall | |
| maintain records of these activities. | |
| 11. Personnel Coverage | Viewed Annual On Call Schedule that was posted by the Lead hand |
| PLAN - The OP shall document a procedure to ensure that sufficient personnel meeting identified competencies are | |
| available for duties that directly affect drinking water quality. | as per Emergency Scheduling and Response 11.2 |
| DO – The OA shall implement and conform to the procedure. | |
| 12. Communications | New Hires have received DWQMS Training within 6 months of their |
| PLAN – The OP shall document a <i>procedure</i> for communications that describes <i>how</i> the <i>relevant aspects of the QMS</i> are <i>communicated</i> between Top Management and: | Starting Date as per QMS-SYS-P9 4.3.1 |
| a) the <i>Owner</i> . | |
| b) OA personnel, | |
| c) Suppliers that have been identified as essential under Plan (a) of Element 13 of this Standard, and | The QMS Representative has prepared an Orientation Presentation |
| d) the <i>Public</i> . | for new hires that is very thorough and well organized. |
| DO – The OA shall <i>implement and conform</i> to the procedure. | , |
| bo - The on shair implement and contorn to the procedule. | The OMC Depresentative has area and Device Deint Dresentation |
| | The QMS Representative has prepared Power Point Presentation |
| | for the Annual Management Review Of the QMS as per QMS SYS- |
| | P9 4.1.2 that was attached to Staff Report PW 2024-01 and |
| | |
| | approved by Council at the January 29, 2024 Council Meeting. |
| | |
| | OFI – The Power Point Presentation is included with the |
| | Agenda Package. This would be an opportunity for the QMS |
| | |
| | Team to make a presentation to Council to enhance Council's |
| | understanding of the importance of the DWQMS. |
| | |

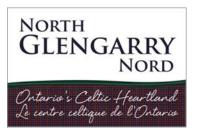
| 13. Essential Supplies and Services PLAN – The OP shall: a) identify all supplies and services essential for the delivery of safe drinking water and shall state, for each supply or service, the means to ensure its procurement, and | There are no changes to the Essential Suppliers and Service Providers. |
|---|---|
| b) include a procedure by which the OA <i>ensures the quality</i> of essential supplies and services, in as much as they may affect drinking water quality. DO – The OA shall implement and conform to the procedure. | The lists are very comprehensive and well organized! |
| 14. Review and Provision of Infrastructure PLAN – The OP shall document a procedure for reviewing the adequacy of the infrastructure necessary to operate and maintain the Subject System that: a) Considers the outcomes of the risk assessment documented under Element 8, and b) Ensures that the adequacy of the infrastructure necessary to operate and maintain the Subject System is reviewed at least once every Calendar Year. | The 2024 Review and Provision of Infrastructure is Scheduled for November 1, 2024 as per QMS SYS-P3 |
| DO – The OA shall <i>implement and conform</i> to the procedure and <i>communicate the findings</i> of the review to the <i>Owner</i> . | The Township is currently Updating their Asset Management Plan. |
| 15. Infrastructure Maintenance, Rehabilitation and Renewal PLAN - The OP shall document: a) a summary of the OA's infrastructure maintenance, rehabilitation and renewal programs for the Subject System, and b) a long term forecast of major infrastructure maintenance, rehabilitation and renewal activities. D0 - The OA shall: a) keep the summary of the infrastructure maintenance, rehabilitation and renewal programs current, b) ensure that the long term forecast is reviewed at least once every Calendar Year, c) communicate the programs to the Owner, and d) monitor the effectiveness of the maintenance program. | The Operations Plan V8 includes long term planning and forecasting |
| DOCUMENT REVIEW – DWQMS 2.0 (Condition Expected) | DOCUMENT REVIEW – Auditor Comments (Condition Found) |
| 16. Sampling, Testing and Monitoring PLAN - The OP shall document: a) a sampling, testing and monitoring procedure for process control and finished drinking water quality including requirements for sampling, testing and monitoring at the conditions most challenging to the Subject System, b) a description of relevant sampling, testing or monitoring activities, if any, that take place upstream of the Subject System, and c) a procedure that describes how sampling, testing and monitoring results are recorded and shared between the OA and the Owner, where applicable. | |
| D0 - The OA shall implement and conform to the procedures. 17. Measurement and Recording Equipment Calibration and Maintenance | There are no issues with the scheduled calibration and maintenance |
| PLAN – The OP shall document a procedure for the calibration and maintenance of measurement and recording equipment. | of measurement and recording equipment. |
| DO – The OA shall <i>implement and conform</i> to the procedure. | |

| 18. Emergency Management PLAN – The OP shall document a procedure to maintain a state of emergency preparedness that includes: a) a list of potential emergency situations or service interruptions, b) processes for emergency response and recovery, c) emergency response training and testing requirements, d) Owner and OA responsibilities during emergency situations, e) references to municipal emergency planning measures as appropriate, and f) an emergency communication protocol and an up-to-date list of emergency contacts. D0 – The OA shall implement and conform to the procedure. | Minor Non Conformance – The Emergency Contact and Services Listing QMS SYS-T13 is not to date. There are changes to the Water Works Staff Viewed the Emergency Management Table Top Exercise on a SCADA PLC Failure. QMS SYS-F9 Emergency Management Communications Form and QMS SYS-F2 General Communications Form. An Electronic copy of the Township's 2024 Emergency Management Plan is available to the QMS Representative. |
|--|--|
| 19. Internal Audits PLAN - The OP shall document a procedure for internal Audits that: a) evaluates conformity of the QMS with the requirements of this Standard, b) identifies internal Audit criteria, frequency, scope, methodology and record-keeping requirements, c) considers previous internal and external Audit results, and d) describes how QMS Corrective Actions are identified and initiated. D0 - The OA shall implement and conform to the procedure and shall ensure that internal Audits are conducted at least once every Calendar Year. | An Internal Audit was conducted in October 2024 and finalized and submitted on November 1, 2024 |
| 20. Management Review PLAN - The OP shall document a procedure for management review that evaluates the continuing suitability, adequacy and effectiveness of the QMS and that includes consideration of: a) incidents of regulatory non-compliance, b) incidents of adverse drinking water tests, c) deviations from Critical Control Point limits and response actions, d) the effectiveness of the risk assessment process, e) internal and third-party Audit results, f) results of emergency response testing, 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 QMS, n) the resources needed to maintain the QMS, | Viewed the Management Review QMS SYS-F12 Checklist completed by Top Management and the QMS Representative on December 13 th 2023 OFI – the Internal Audit OFI's should be included in the DWQMS Power Point Presentation to Council The Township's CAO Participated in the Management Review demonstrating a high level of Commitment to the DWQMS The next Management Review is scheduled for November 2024 |
| DOCUMENT REVIEW – DWQMS 2.0 (Condition Expected) | DOCUMENT REVIEW – Auditor Comments (Condition Found) |

| D0 - Top Management shall implement and conform to the procedure and shall: a) ensure that a management review is conducted at least once every Calendar Year, b) consider the results of the management review and identify deficiencies and actions items to address the deficiencies, c) provide a record of any decisions and action items related to the management review including the personnel responsible for delivering the action items and the proposed timelines for their implementation, and d) report the results of the management review, the identified deficiencies, decisions and action items to the Owner. 21. Continual Improvement PLAN - The OA shall develop a procedure for tracking and measuring continual improvement of its QMS by: a) reviewing and considering applicable best management practices, including any published by the Ministry of the Environment and Climate Change and available on www.ontario.ca/drinkingwater, at least once every thirty-six months; b) documenting a process for identification and management of QMS Corrective Actions that includes: i. investigating the cause(s) of an identified non-conformity, ii. documenting the action(s) that will be taken to correct the non-conformity and prevent the non-conformity from re-occurring, and iii. reviewing the action(s) take that are identified to determine if preventive actions may be necessary, ii. documential non-conformities that are identified to determine if preventive actions may be necessary, iii. documenting the outcome of the review, including the action(s), if any, that will be taken to prevent a non-conformity. D0 - The OA shall strive to continually improve the effectiveness of its QMS by implementing and conforming to the procedure. | The QMS Representative has created a white board annual calendar with Milestone Dates for the DWQMS requirement along with other Legislative requirements that facilitates scheduling of Audits, Reviews etc. This provides a visual reminder for not only Angela but to all of the Operators and Top Management. |
|--|---|
|--|---|

Appendix "D" – Auditor Training Certificate





STAFF REPORT TO COMMITTEE OF THE WHOLE

Report No:PW-2024-31

DATE: 20-NOV-24

From: Timothy Wright, Director of Public Works

RE: Annual DWQMS External Audit Report and Results

Recommended Motion:

THAT the Committee of the Whole receives Staff Report No. PW-2024-31 Annual DWQMS External Audit Report and Results for information purposes only.

Background / Analysis:

As per our internal communication procedure, Top Management must provide an update on the QMS status, including the Annual DWQMS External Audit Report and Results.

- The external surveillance audit took place on November 4th 2024 and was performed by Intertek
- We received only one opportunity for improvement and no non-conformities:
 - Opportunity for Improvement: Consider including reference to the MECP's Potential Hazardous Events for Municipal Residential Drinking Water Systems to Consider in the DWQMS Risk Assessment, April 2022 within the risk assessment procedure.

Alternatives:

N/A

Financial Implications: N/A

Attachments & Relevant Legislation:

Safe Drinking Water Act, 2002 Clean Water Act, 2006

Other Consulted:

Angela Cullen, Water Wastewater Compliance Coordinator Dean McDonald, Environmental Services Manager Reviewed and Approved by: Sarah Huskinson, CAO/Clerk



Audit Report

DWQMS Surveillance Audit for

The Corporation of the Township of North Glengarry

Audited Address: 3270 County Road 34, RR2, Alexandria, Ontario, K0C 1A0

Start Date: Nov. 4/24 End Date: Nov.4/24

Type of audit - Surveillance System Audit

Issue Date: November 6, 2024 Revision Level: *Final*



BACKGROUND INFORMATION

Intertek - SAI Global conducted an audit of The Corporation of the Township of North Glengarry beginning on Nov.4/24 and ending on Nov.4/24 to DWQMS ver 2(2017).

The purpose of this audit report is to summarise the degree of compliance with relevant criteria, as defined on the cover page of this report, based on the evidence obtained during the audit of your organization. This audit report considers your organization's policies, objectives, and continual improvement processes. Comments may include how suitable the objectives selected by your organization appear to be in regard to maintaining customer satisfaction levels and providing other benefits with respect to policy and other external and internal needs. We may also comment regarding the measurable progress you have made in reaching these targets for improvement.

Intertek - SAI Global audits are carried out within the requirements of Intertek - SAI Global procedures that also reflect the requirements and guidance provided in the international standards relating to audit practice such as ISO/IEC 17021-1, ISO 19011 and other normative criteria. Intertek - SAI Global Auditors are assigned to audits according to industry, standard or technical competencies appropriate to the organization being audited. Details of such experience and competency are maintained in our records.

In addition to the information contained in this audit report, Intertek - SAI Global maintains files for each client. These files contain details of organization size and personnel as well as evidence collected during preliminary and subsequent audit activities (Documentation Review and Scope) relevant to the application for initial and continuing certification of your organization.

Please take care to advise us of any change that may affect the application/certification or may assist us to keep your contact information up to date, as required by Intertek - SAI Global Terms and Conditions.

This report has been prepared by Intertek - SAI Global Limited (Intertek - SAI Global) in respect of a Client's application for assessment by Intertek - SAI Global. The purpose of the report is to comment upon evidence of the Client's compliance with the standards or other criteria specified. The content of this report applies only to matters, which were evident to Intertek - SAI Global at the time of the audit, based on sampling of evidence provided and within the audit scope. Intertek - SAI Global does not warrant or otherwise comment upon the suitability of the contents of the report or the certificate for any particular purpose or use. Intertek - SAI Global accepts no liability whatsoever for consequences to, or actions taken by, third parties as a result of or in reliance upon information contained in this report or certificate.

Please note that this report is subject to independent review and approval. Should changes to the outcomes of this report be necessary as a result of the review, a revised report will be issued and will supersede this report.

| Drinking Water Systems | |
|------------------------------|--|
| Activities: | Treatment Distribution |
| Population Services: | 3500 |
| Operating Authority: | North Glengarry Water Works Department |
| Drinking Water System Owner: | The Corporation of the Township of North Glengarry |
| Scope of Certification: | DWQMS ver 2 (2017) |
| Applicable codes: | DWQMS ver 2 (2017) |
| Standard: | DWQMS ver 2 (2017) |

Alexandria DWS - 220001030

Glen Robertson DWS - 220008408

Day(s): 0.88

| lotal audit duration: | |
|-----------------------|----|
| Audit Team Member(s |): |

Person(s): 1 Janet McKenzie

Other Participants:

n/a

Audit Report

Definitions and action required with respect to audit findings

Major Non-conformance:

Based on objective evidence, the absence of, or a significant failure to implement and/or maintain conformance to requirements of the applicable standard. Such issues may raise significant doubt as to the capability of the management system to achieve its intended outputs (i.e. the absence of or failure to implement a complete Management System clause of the standard); or

A situation which would on the basis of available objective evidence, raise significant doubt as to the capability of the Management System to achieve the stated policy and objectives of the customer.

NOTE: The "applicable Standard" is the Standard which Intertek - SAI Global are issuing certification against, and may be a Product Standard, a management system Standard, a food safety Standard or another set of documented criteria.

Action required: This category of findings requires Intertek - SAI Global to issue a formal NCR; to receive and approve client's proposed correction and corrective action plans; and formally verify the effective implementation of planned activities. Correction and corrective action plan should be submitted to Intertek - SAI Global prior to commencement of follow-up activities as required. Follow-up action by Intertek - SAI Global must 'close out' the NCR or reduce it to a lesser category within 90 days for initial certification and within 60 days for surveillance or re-certification audits. from the last day of the audit

If significant risk issues (e.g. safety, environmental, food safety, product legality/quality, etc.) are detected during an audit these shall be reported immediately to the Client and more immediate or instant correction shall be requested. If this is not agreed and cannot be resolved to the satisfaction of Intertek - SAI Global, immediate suspension shall be recommended.

In the case of initial certification, failure to close out NCR within the time limits means that the Certification Audit may be repeated.

If significant risk issues (e.g. safety, environmental, food safety, product legality/quality, etc.) are detected during an audit these shall be reported immediately to the Client and more immediate or instant correction shall be requested. If this is not agreed and cannot be resolved to the satisfaction of Intertek - SAI Global, immediate suspension shall be recommended.

In the case of an already certified client, failure to close out NCR within the time limits means that suspension proceedings may be instituted by Intertek - SAI Global.

Follow-up activities incur additional charges.

Minor Non-conformance:

Represents either a management system weakness or minor issue that could lead to a major nonconformance if not addressed. Each minor NC should be considered for potential improvement and to further investigate any system weaknesses for possible inclusion in the corrective action program

Action required: This category of findings requires Intertek - SAI Global to issue a formal NCR; to receive and approve client's proposed correction and corrective action plans; and formally verify the effective implementation of planned activities at the next scheduled audit.

Opportunity for Improvement:

A documented statement, which may identify areas for improvement however shall not make specific recommendation(s).

Action required: Client may develop and implement solutions in order to add value to operations and management systems. Intertek - SAI Global is not required to follow-up on this category of audit finding.

Audit Type and Purpose

Surveillance Audit:

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

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

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

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

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

Audit Objectives

The objective of the audit was to determine whether the drinking water Quality Management System (QMS) of the subject system conforms to the requirements of the Ontario Ministry of the Environment & Climate Change (MOECC) Drinking Water Quality Management Standard (DWQMS V2).

The audit was also intended to gather the information necessary for Intertek - SAI Global to assess whether accreditation can continue or be offered or to the operating authority.

Audit Scope

The facilities and processes associated with the operating authority's QMS were objectively evaluated to obtain audit evidence and to determine a) whether the quality management activities and related results conform with DWQMS V2 requirements, and b) if they have been effectively implemented and/or maintained.

Audit Criteria:

- The Drinking Water Quality Management Standard Version 2
- Current QMS manuals, procedures and records implemented by the Operating Authority
- Intertek SAI Global Accreditation Program Handbook

Confidentiality and Documentation Requirements

The Intertek - SAI Global stores their records and reports to ensure their preservation and confidentiality. Unless required by law, the Intertek - SAI Global will not disclose audit records to a third party without prior written consent of the applicant. The only exception will be that the Intertek - SAI Global will provide audit and corrective action reports to the Ontario Ministry of the Environment. For more information, please refer to the Intertek - SAI Global Accreditation Program Handbook.

any changes to your Quality Management System that you believe are significant enough to risk non-conformity with DWQMS V2: For more information, please refer to the Intertek - SAI Global Accreditation Program Handbook.

Review of any changes

Changes to the company since last audit include: n/a

EXECUTIVE OVERVIEW

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

Recommendation

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

Opportunities for Improvement:

The following opportunities for improvement have been identified:

• Consider including reference to the MECP's *Potential Hazardous Events for Municipal Residential Drinking Water Systems to Consider in the DWQMS Risk Assessment, April* 2022 within the risk assessment procedure.

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

Management System Documentation

The management systems operational plan(s) was reviewed and found to be in conformance with the requirements of the standard.

Management Review

Records of the most recent management review meetings were verified and found to meet the requirements of the standard. All inputs were reflected in the records, and appear suitably managed as reflected by resulting actions and decisions.

Internal Audits

Internal audits are being conducted at planned intervals to ensure conformance to planned arrangements, the requirements of the standard and the established management system.

Corrective, Preventive Action & Continual Improvement Processes

The company is implementing an effective process for the continual improvement of the management system through the use of the quality policy, quality objectives, audit results, data analysis, the appropriate management of corrective and preventive actions and management review.

Summary of Findings

| 1. Quality M | anagement System | Conforms |
|---|--|-----------|
| 2. Quality M | anagement System Policy | NANC |
| 3. Commitment and Endorsement | | Conforms |
| 4. Quality Management System Representative | | Conforms |
| 5. Documen | t and Records Control | Conforms |
| 6. Drinking-\ | Nater System | NANC |
| 7. Risk Asse | essment | OFI |
| 8. Risk Asse | essment Outcomes | Conforms* |
| 9. Organizat | ional Structure, Roles, Responsibilities and Authorities | NANC |
| 10. Compete | ncies | NANC |
| 11. Personne | el Coverage | NANC |
| 12. Commun | ications | NANC |
| 13. Essential Supplies and Services | | NANC |
| 14. Review and Provision of Infrastructure NANC | | NANC |
| 15. Infrastruc | ture Maintenance, Rehabilitation & Renewal | NANC |
| 16. Sampling | 16. Sampling, Testing and Monitoring NANC | |
| 17. Measure | ment & Recording Equipment Calibration and Maintenance | NANC |
| 18. Emergen | cy Management | Conforms |
| 19. Internal A | 19. Internal Audits Conforms | |
| 20. Managen | nent Review | Conforms |
| 21. Continua | l Improvement | Conforms |
| Major NCR # | Major non-conformity. The auditor has determined one of the following: (a) a required element of the DWQMS has not been incorporated into a QMS; (b) a systemic problem with a QMS is evidenced by two or more minor non-conformities; or (c) a minor non-conformity identified in a corrective action request has not been remedied. | |
| Minor NCR # | Nor NCR # Minor non-conformity. In the opinion of the auditor, part of a required element of the DWQMS has not been incorporated satisfactorily into a QMS. | |
| OFI | Opportunity for improvement. Conforms to the requirement, but there is an opportunity for improvement. | |
| Conforms | rms Conforms to requirement. | |
| NANC | NANC Not applicable/Not Covered during this audit. | |
| **** Additional comment added by auditor in the body of the report. | | |

PART D. Audit Observations, Findings and Comments

| DWQMS Reference: | 1 Quality Management System |
|--------------------|---|
| Client Reference: | Township of North Glengarry DWQMS Multi-System Operational Plan 2.0, v 8, Nov.24/22 (QMS SYS-OP PLAN) |
| Details: Conforms. | |

| DWQMS Reference: | 3 Commitment and Endorsement |
|--|--|
| Client Reference: | Commitment and Endorsement Procedure, QMS SYS-P13. V5, Dec 6, 2023 |
| | Appendix G1 – Endorsement (QMS SYS -E1) – QMS SYS-E1 v2, November 24/22 |
| Details: Conforms. The Commitment and Endorsement procedure has been updated to include reference to the current by-law. The actual council endorsement has not changed. | |

| DWQMS Reference: | 4 Quality Management System Representative | |
|--|--|-------|
| Client Reference: Section 4 of Operational Plan QMS Representative | | |
| Details: Conforms. Compliance Coordina | The QMS Representative continues to be appointed to Water V or. | Works |

| DWQMS Reference: | 5 Document and Record Control |
|--|--|
| Client Reference: | Appendix A1 QMS SYS-P1, QMS Document Control Procedure, V6, Dec 6/23 |
| | Appendix A2 QMS Records Control SYS-P2, v5, Sept 20/22 |
| Details: Conforms. Revision to QMS SYS-P1 changed Directors Direction reference to current date of issue and now ties in endorsement element for re-endorsement triggers. Revision to QMS SYS-P2 reflects retention and destruction timelines for records. | |

| DWQMS Reference | 7 Risk Assessment |
|--|---|
| Client Reference: | Section 7 of Operational Plan Risk Assessment |
| | QMS Risk Assessment Procedure (QMS SYS-P8, v6, Nov2022) |
| Details: Opportunity for Improvement | |
| Consider including reference to the MECP's <i>Potential Hazardous Events for Municipal Residential Drinking Water Systems to Consider in the DWQMS Risk Assessment, April 2022</i> within the risk assessment procedure. | |

| DWQMS Reference: | 8 Risk Assessment Outcomes |
|-------------------|--|
| Client Reference: | Section 8 of Operational Plan Risk Assessment Outcomes |
| | QMS SYS-F4G in Appendix C2 for Glen Roberston, ver 5, March 2022 |
| | Annual review for Glen Robertson risk assessment (Sept 9, 2024) |

Audit Report

| | QMS SYS-F4A in Appendix C1 for Alexandria, ver 6, Nov 2022 |
|---|---|
| Annual review for Alexandria risk assessment (Sept 9, 2024) | Annual review for Alexandria risk assessment (Sept 9, 2024) |

Details: Conforms.

Comment: Consider including details on the 36-month cycle to Glen Robertson's risk assessment outcomes table.

| DWQMS Reference: | 18 Emergency Management |
|--------------------|---|
| Client Reference: | QMS Sys-P10 Emergency Management procedure, v9, Nov 2022 |
| | 2024 Emergency test exercise – SCADA PLC failure, Feb 27/24 |
| Details: Conforms. | |

| DWQMS Reference: | 19 Internal Audits |
|---|---|
| Client Reference: | QMS SYS-P11, QMS Internal Audit Procedure, v6, Nov 2022 |
| | 2024 Internal audit report for Audit dates: October 21 – November 1, 2024 |
| | CAR#2024-01 and CAR#2024-2 |
| Details: Conforms. Two minor non-conformances and 5 OFIs were raised. | |

| DWQMS Reference: | 20 Management Review | |
|--------------------|---|--|
| Client Reference: | QMS SYS-P12 QMS Management Review , v5, Nov2022 | |
| | QMS Management Review minutes: December 13, 2023 (covers November 2022 – November 2023) | |
| Details: Conforms. | · | |

| DWQMS Reference: | 21 Continual Improvement |
|--------------------|---|
| Client Reference: | QMS SYS-P14 QMS Preventative and Corrective Actions, v5, Dec 2023 |
| | Action Item Form – QMS SYS F8 "Competencies under Owner and Top Management", Dec 8/23 |
| Details: Conforms. | |

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

This report was prepared by:

Intertek - Intertek - SAI Global Management Systems Auditor

Audit Report

The audit report is distributed as follows:

- Intertek Intertek SAI Global
- Operating Authority
- Owner
- MOECC

Notes

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

| NORD | | The Township of North Glengarry g Water Quality Management System |
|---|------------------------------|--|
| Document Title: QMS Review and Provision of Infrastructure Report | | QMS Form Number: QMS SYS-F3 |
| | | Revision Number: v4 |
| Authorized By: Angela Cullen | Issued Date: August 10, 2010 | Revision Date: August 14, 2023 |

QMS Review and Provision of Infrastructure Report

A copy of this report, once completed, is to be forwarded to the Owner.

| Date of Review | November 1, 2022 | |
|---------------------------------|--------------------------|----------------------|
| Review Cycle | Aug 2023-Aug 2024 | |
| Drinking Water Systems Included | 🛛 Alexandria DWS | 🛛 Glen Robertson DWS |
| Infrastruc | cture Review Participant | ts |
| Name | Sig | nature |
| Tim Wright | | |
| Dean McDonald | | |
| Angela Cullen | | |
| Roch Seguin | | |
| Jacob Rheaume | | |
| | | |

Conclusions and Recommendations (attach any supporting documents and records)

- System Overview
 - No source shortfalls or capacity issues at this point for both Glen Robertson and Alexandria
 - No major changes to risk or processes for both systems
 - Inspection processes have been completed as planed
 - Reviews have been conducted as per requirements, but timelines have varied slightly
- System Growth
 - No major expansion to system planned in the next year
 - Draft Standards being created at SDG Level for Large Projects
 - Other limiting factors such as wastewater system capacities and servicing areas shortfalls
- Infrastructure Refurbish/Replacement in WTP/Distribution
 - Planned equipment repair/refurbishment
 - A few suggestions from Operational Staff
 - Focus on laying out better 10yrs Capital Planning Targets and Asset Indexing to help future planning and budget preparation
 - On-going work towards Alexandria water loss
- Outstanding Issues/Follow-Up Requirements
 - -10yrs Capital Plan Update
 - Asset Indexing
 - Equipment Deficiencies follow-up
 - Documentation follow-up

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| Document Title: QMS Review and Provision of Infrastructure Report |
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| Discussion Item | Notes, Comments | |
|---|--|--|
| 1. Purpose Review | Ensure effective communication of drinking water system operations and maintenance Ensure consistent and regular review of drinking water system conditions and capacities Review outcomes to be used as a tool for planning and budgeting Ensures communication from Operational Staff to Top Management | |
| 2. Agenda | Review topics to be covered Other topics to be included no additions | |
| 3. Input from Public Planning Departments | CBO was unable to attend today, but all information on growth and planning were forwarded for review. No comments or revisions received from Jacob Rheaume Population Growth SDG Growth Forecast Study Applications are evaluated through SDG before comping down to NG Minor projected steady employment and growth No deficiencies in land mass/needs to promote growth No specific areas targeted for development, displayed mapping provided from Maxville Uncommitted Reserve Study Covers both Alx & Max due to WTP and Distribution Projects are evaluated as part of ongoing application process, potential minor changes due to passing of the SDG Application & Design Standards There are areas in village boundaries are not easily serviceable without major infrastructure investment and/or development | |
| 4. Growth | Planned System Expansions Large-Scale Applications or Projects: Maxville Manor Expansion currently on-going No current capacity issues Alexandria McDougald St West Subdivision → Estimated capacity needs or concerns? > EVB had completed preliminary studies to ensure capacities needs are met (water) → Infrastructure development needs > Plan is currently not approved - 6mth timeframe between approval and earliest possible breaking ground on construction potential - phased construction based on contractor work plan estimates - Initial estimate is to start with 4 units > Watermain installation is needed for subdivision needs - management would be handed over to Township - built in possibly 2 phases, to evaluate the best way forward Maxville Subdivision (North-West of Village) → System expansion required to meet servicing needs → Project is stalled due to wastewater capacity issues | |

| NORTH GLENGARRY NORD | The Township of North Glengarry Drinking Water Quality Management System |
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Document Title: QMS Review and Provision of Infrastructure Report

QMS Form Number: QMS SYS-F3

| Discussion Item | Notes, Comments |
|---|--|
| | may be future project, but limited to no movement |
| 4. Growth | IHA Alexandria Subdivision → project has reverted to design phase, as project was taken over by new developer with more experience → project is dependent on grant funding (sewage system) and plan approval through Departments based on normal process reviews → planned multi-phase development, phase 1 estimated construction estimated for 160 units → Estimated earliest construction would be 2yrs+ (2027) East Boundary Subdivision Multi-Phase Project → no progress, action or movement on the next phase → Issues on owner side through approval requirements (MECP & Twp) Known Limiting Factors Lack of industry and opportunity for growth to draw in population (Alx/Max/Gln) Exclusion from connection to transmission main due to residual degradation (Alx/Max) Lack of system redundancy/storage (Gln) Maxville Water 29 residences not currently metered Listing provided to Building Dept 16 exemptions not included non-meter total Growth Tools/Mechanisms/Processes SDG Construction Specs Standard (Draft) EVB system Modelling (Water & Sewer) discussed above DWS 10yrs Capital Plan (process assessment vs capital plan) |
| 5. Previous Outcomes from last Infrastructure Provision Review | Last Review Date: August 2023 No shortfalls identified in Alx & Gln DWS systems No major or new risks identified No imminent expansion or infrastructure growth planned No significant growth forecast identified Maintenance programs and provisions are covered through operational budgets |
| | Minor concerns identified Most items identified on operations side have been rectified Growth Development documentation work is still on-going |

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| Document Title: QMS Review and Provision of Infrastructure Report | | QMS Form Number: QMS SYS-F3 |

Document Title: QMS Review and Provision of Infrastructure Report QMS Form Number: QMS SYS-F3

| Discussion Item | Notes, Comments |
|--|--|
| 6. Previous Outcomes from last Infrastructure and Maintenance Review | Last Review Date: July 2024 Programs intact and operating as per design Work Delegation issue have been corrected Documentation issue Outstanding Issues Alx: proactive equipment indexing and replacement planning Alx: elevated water loss Alx: open defective equipment Billing issues identified → Dean/Roch to follow up on invoices from Denis Lepin Gln: well casing mineral deposits (historical issues) Work to be incorporated into building expansion work Gln: NaCl₂ pump intermittent operational issues |
| 7. New regulatory requirements | to look into if budget item is required Source Protection road salt storage Drinking Water no changes to regulations no changes to procedures or guidelines Gln PTTW Renewal (Mar 2025) & MDWL Renewal (Sep 2025) Operator Renewal Renewals: Dean WWC & Roch WD 12 Potential Upgrades (OIT to Class 1: Aaron, Patrick, Randall) Health & Safety 2022 new Book 7 (traffic control) 2023 new OHSA update All books replaced |
| 8. Compliance inspection reports | Fee & Charges Bylaw 03-2024 MECP Compliance Inspection: Alx DWS 2024: On-site Aug 21 no report to date → discussed items that were followed up on and potential issues discovered MECP Compliance Inspection: Gln DWS 2024: On-site Inspection: Aug 21 no report to date → discussed items that were followed up on and potential issues discovered QMS System Audit: Alx & Gln DWS 2024 Internal: on-site completed, 2 minor non-conformances which have been dealt with External: surveillance audit, scheduled Nov 4, documentation to be sent to auditor |

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Document Title: QMS Review and Provision of Infrastructure Report

QMS Form Number: QMS SYS-F3

| Discussion Item | Notes, Comments |
|----------------------------|--|
| | Alx Raw Water Flows: Currently at 34.9% of rated capacity No shortfalls noted Quality: Algae bloom monitoring in place, less observed due to environmental factors Treatment: processes in place are sufficient to treat current conditions |
| 9. Flow data and trends | Flows: Currently at 22.0% of rated capacity No shortfalls noted Quality: Noted turbidity increase in May noticeable difference between handheld and analyzer readings discussed operation options to better monitor real-time values Seasonal fluctuations appear to be within normal ranges Treatment: Processes in place are sufficient to treat current conditions noted increase turbidity starting in May, as such visible increase in chlorine dosing to compensate to maintain residuals minor decrease in treatment efficiencies for organic carbon increase in treated alkalinity, but no impact to treatment process |
| | Alx Distribution Water Flows: values similar to 2023 values, in Alexandria values slightly increased from year to year in Maxville, which is to be expected Quality: Combined chlorine residuals are being maintained better and dosing adjustments are being monitored more closely Turbidity values are still well below aesthetic values, trending increase noted which follows the trending observed through the treatment process Dead end monitoring still being completed intermittently, but Aug-Sep checks became more regularly completed Water Loss: 2023 was not completed, cause by information request at the wrong time of the year 2024 target will be in Jan/Feb to ensure information is available, as per billing clerk |

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| Document Title: QMS Review and Provision of Infrastructure Report | | QMS Form Number: QMS SYS-F3 |

| Discussion Item | Notes, Comments |
|-------------------------|---|
| | Gin Raw/Treated Water • Flows: - No concerns for quantity shortfalls - Overall flows have decreased by 1.4% • Quality: - No significant changes to note in raw and treated water quality • all values withing normal operating ranges • all values well below all compliance and or conformance limits • minor fluctuations noted → pH and potential treatment impacts • Treatment: |
| 9. Flow data and trends | All processes in place and operating no treatment shortfalls identified Minor to Moderate issue with NaCl2 Pump operation issues are still intermittent, had reduced Apr through Jun |
| | Gln Distribution Water Flows: Consistent with normally observed values Quality: Chlorine residuals have improved Water Loss: Values are very low, Jun/Jul & Aug/Sep, possibly because flushing was not included. |
| 10. Risk Assessment | Annual Tabletop Alexandria completed Sep 2024 no new or increased risks identified, current risk assessment still applicable Glen Robertson completed Sep 2024 no new or increased risks identified, current risk assessment still applicable 36mth System Review Next scheduled 36mth Risk Assessment: 2025 Alx: November Gln: March |
| 11. Action Items | Equipment Deficiencies Coagulant Tank and Valves Defective Valves (V809, V911, V941) Leaking Actuator (LLP210) Asset Management 10yrs Capital Plan or System Assessment Asset Management plan in place but not current to standard, have discussed with Zoe plan was written form financial perspective work required to update and ensure currency is reflective to actual system and future planning |

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| Document Title: QMS Review and Provision of Infrastructure Report | | QMS Form Number: QMS SYS-F3 |

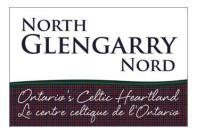
| Discussion Item | Notes, Comments |
|------------------|--|
| 11. Action Items | Documentation Shortfalls OM Manuals minor updates required based on equipment changes SOPs Angela to delegate some work on to operational staff to help complete outstanding items Bylaws Hydrant Use Bylaw (BMP) Backflow Devices (BMP) Large Construction Bylaw Application/Design Standards are covers through draft subdivision manual ensure that on-site construction follows requirements through |
| 12.Staff input | 2025 Budget Requests • Operational - SCADA Computer Upgrade • Windows 10 no longer supported • Target Feb-Mar (as per Capital Control) - Filter GAC Testing/Replacement • 2025 Media will be 5yrs old • Possible cause for elevated THM/HAA in Dist - Gln PTTW Renewal • Alx DWS & Gln DWS - Ops Certification • Renewal: Class 3 (Sep) • Possible Upgrade: 3 OIT Upgrades per system (WTP/DIS) - Addition: Water Meter Exchange Program • difficult access areas left on residential side • to incorporate budget allowance to get work competed • listing of locations must be generated for contractor • 2022 Asset Management Plan - Review information in current plan • suggested to look into reformatting areas to ensure currency • suggested to adjust 10yr Capital Planning Schedule to make it more relevant instead of using Capital Budget Items • Capital - Alx Tower Inspection (\$4500) - SCADA upgrades, • as describe above under SCADA Computer Upgrades - Detail Design for Future Planning - Instrumentation and Construction (pre-palnning) |

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Document Title: QMS Review and Provision of Infrastructure Report

QMS Form Number: QMS SYS-F3

| Discussion Item | Notes, Comments | | | | |
|------------------|--|--|--|--|--|
| | Other Future Planning Ideas | | | | |
| | – Water Tower | | | | |
| | 5yrs: Internal ROV | | | | |
| | \rightarrow 2025: ALX | | | | |
| | → 2027: MAX | | | | |
| | 20yrs: Internal/External Liner | | | | |
| | \rightarrow 2031: ALX | | | | |
| | \rightarrow 2041: MAX | | | | |
| | → Concern for storage if tower needs to be taken out of service, could take up to 2 years for all application approval, if required | | | | |
| | – Water Meters | | | | |
| | 15-20yrs: Battery Life | | | | |
| | \rightarrow 2026-2031: ALX | | | | |
| | $ \rightarrow 2036-2041: MAX \rightarrow 2037-2042: GLN $ | | | | |
| | \rightarrow 2037-2042: GLN – Well Maintenance | | | | |
| | 10yrs: Internal CCTV Inspection | | | | |
| | \rightarrow 2028: Gin | | | | |
| | – Other Items to Consider | | | | |
| | HLP Maintenance | | | | |
| | \rightarrow 2-year schedule | | | | |
| | Watermain Upgrade or Cleaning | | | | |
| | \rightarrow 4" replacement | | | | |
| | → Main scouring | | | | |
| | Discussion | | | | |
| | -No concerns or questions on content | | | | |
| | -Main St Re-Development Project | | | | |
| | – carry over from previous year due to project delays and change to | | | | |
| | overseeing consultant | | | | |
| 13. Questions or | – area to cover street between Cnty Rd10 to Cnty Rd 43 | | | | |
| Concerns | -Discussed remaining unused budget | | | | |
| | to verify and touch based where expenditures can be used | | | | |
| | discussed issues with 2024 budget shortfalls due to finance staff | | | | |
| | change over | | | | |
| | | | | | |
| | work to better strengthen future planning and work targeting as well as equipment indexing and input into CityWide | | | | |



STAFF REPORT TO THE COMMITTEE OF THE WHOLE

Report No: PW-2024-32

November 20, 2024

From: Timothy Wright Director of Public Works

RE: 3rd Quarter Public Works Update

Recommended Motion:

THAT the Committee of the Whole receives report PW-2024-32 3rd Quarter Public Works Update for informational purposes only.

Background / Analysis:

Roads

Staff – The Roads Department has hired one operator this year as a temporary replacement for another employee who remains on sick leave.

Crack sealing - The crack sealing machine has been heavily used both in Alexandria and on country roads this year in line with the maintenance strategy for hard surface roads. The previous years' work has also held up to a much better standard than of the companies that were performing the work before. Staff have also undertaken work for SDG Counties on County Road 22. With the success of that work, staff are expected to rent out the machine and services more frequently in 2025 assuming there is enough staffing.

Hot Mix – 13 kilometer of hot mix work was completed successfully on Dornie Road, Marcoux Road, McCormick Road and Skye Road this year resulting in a 13 kilometer reduction in difficult to maintain LCB surfaces. Combined with taking a kilometer and a half back to gravel there is only 55 kilometers of LCB roads left to convert to the more sustainable and maintainable HCB mix. Centre line painting cost was much more due to the large quantity of roads that were paved this year and the 2025 budget will reflect the desired edge lines that will help keep the roads optimal and in safer condition by signposting the more fragile road edges.

Lochiel Roof – The Lochiel Roof has been replaced and is in good condition, The remaining section on the extension will need to be replaced in the coming years.

Fleet – A major maintenance cycle has been completed on the excavator. Two new snow plows were received and staff will be disposing of Unit 72 (1999 tandem), the pumper truck and Unit 22 (2004 Tandem) in short order. The transmission on Unit 72 is still in good condition, so staff are going to take that transmission and swap it with unit 35s transmission that is skipping gears and replace the clutch in that unit. We have made a deal to swap the labour cost for the transmission swap with the pumper truck. The slip in water tank procured last year has been incredibly valuable for the roads department this year and is the main factor contributing to a better overall gravel road performance. The 2025 budget adds provision to purchase one more slip in tank so we can provide good coverage over the township and also do tasks like sidewalk washing which is currently being done by the pumper truck being retired.

Roadside mowing - The new roadside ditch mowers purchased jointly with the County have been an incredible boon to operations with mowing operations that previously took half a season to complete only taking a week. There is a higher operational cost to replacing parts, but the repairs require no special skills or equipment, and we are able to do it in house. The time saving is well worth the time saved on manpower and tractor runtime.

SUVs - The small SUVs along with the 2024 replacement trucks have had a very positive impact on the fuel budget for 2024 however this is hard to discern from the lower quantity of snow received and generally lower gas prices from the previous period

Permit system - Public works has implemented the Transnomis permit central system. This system has reduced administration costs, and the system has paid for itself through permit fees. Rogers has contacted the Township about putting broadband infrastructure in to be active for 2025. This permit system will be critical to deal with the high demand expected from their submissions.

Bridges – Bishop st and Dominion St Bridges are nearing completion. With Bishop St complete and open to traffic. Dominion St's structure and associated sidewalks have been completed with only the Architectural handrails left to complete. HP Engineering is working on the detailed design and tender documentation for the 2025 replacement of Centre St bridge

Signage – In 2023 Roughly 40% of the Township's signage had been found to have failed the retro reflectivity inspections (RRI). This year with the replacements completed only 17% of the Townships signage remains defective with only the less critical categories of signs needing replacement – for example neighborhood watch signs. Critical signs such as stop signs have been replaced and have passed the RRI.

Pedestrian Crossings – Pedestrian Crossings have been installed on main St in front of Glengarry District High School and on MacDonald.

Stormwater System ECA - New provincial requirements have the Township completing a environmental compliance approval for stormwater. In a joint tender with the County, the

Township engaged a contractor to do investigative works of our system that could then be provided to a consultant to help us develop a hydraulic model and 10 year capital and operations plan. We are still awaiting the results of the investigation.

Water and sewer

Staff - Unfortunately, we have had two staff members leave but have also picked up two more. The new hires are showing talent and enthusiasm but still need to be trained up.

Fleet - Waterworks has benefited from a new work truck this year that has shown has reduced overall operating costs of the small waterworks fleet. We have found that we need one more vehicle to be able to move staff to where they are needed and this will be reflected in the 2025 budget

Master Plans - Public Works has been continuously meeting with EVB who have successfully created a water and sewer hydraulic model.

Dominion St Work - Water Works completed the Dominion St watermain replacement this year, currently is it projected to come in around 40k under budget however we are still awaiting the variable AC price for the asphalt reinstatement. Several fire hydrants were replaced at the same time as the project along with the replacement of many lateral sewer lines.

Process Equipment – Some Chlorinators and miscellaneous process equipment were replaced in the water treatment plant in line with their lifecycle maintenance. The team is starting to look at the lifecycle replacements of critical components such as the main lift pumps to ensure that we never have any major breakdowns

<u>Landfill</u>

RWM update - Public Works participated in the regional waste management group meeting. The coordination between the groups is helping and we have been talking communications for the upcoming switch to producer responsibility in 2025. There are several communications that will be put out on a county level to inform residents as to the change that will support the Townships own messaging

Landfill Sampling monitoring, capacity and closures- Landfill sampling and monitoring continues with services. The Landfill closure cost report that came through last year estimated \$720,000 of anticipated costs for procuring final landfill cover for the Alexandria waste disposal site so Public Works have been working on procuring landfill cover through our municipal partners. We are projecting that we will be able to reduce this cost by up to 90% depending on what projects take place in the region and what deals can be struck to procure clean material for cover.

Garbage Collection Contract – In 2023 public works successfully tendered a new collection contract with HGC management. While the reception from the public has been less than desirable the overall effect on the landfill budget has been very good with the township only spending just over 100k on landfill disposal fees so far this year including October's numbers. For comparison 2021s values were \$186,197 and 2022s was \$172,590 at year end. This puts us on track to only spend 120k this year (50k under budget) for Landfill tipping fees at GFL. Please note none of the changes for a new rate with GFL has taken effect yet and so all of these savings are not due to that change.

<u>RARE</u>

RARE is closing as of December 31st 2024. All staff have been given advanced notice and plans are being made to convert the building into a public works garage and storage facility. In 2023/2024 the single stream sorting equipment was removed, and the area was used to store materials for the parks, roads and water departments as well as some community organizations.

Communications have been posted on social media sites informing residents of the change and letters have been sent to business owners informing them that they can no longer utilize the recycling depot to process their materials for free. Unfortunately, each institution, commercial operation and industrial facility will need to make their own arrangements in 2025.

Hazardous waste day is still projected to take place at this facility in 2025 but no other recycling activities including electronic waste can take place at the facility while it is not staffed. It is projected that public works and storage operations will not be able to be fully consolidated at the facility until the summer of 2025 as some of the operations necessary for the conversion can only take place in warm weather. Once operations have been consolidated at the facility we can look at introducing electronic waste depot type operations back to the facility.

2025 Recycling Calendar The township has entered into an agreement with CMO to integrate recycling information into our calendar for 2025 to provide a convenient source of information for residents in 2025. This includes the correct details for residents to have complaints about garbage and recycling taken care of by calling the respective collection agency, either Emterra for recycling or HGC for garbage.

GARBAGE – HGC Management 613 933 0202 kparisien@hgcmanagement.ca

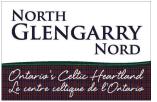
RECYCLING – Emterra 1-888-597-1541 customercareont@emterra.ca WEBSITE: North Glengarry - Circular Materials

Alternatives: N/A

Financial Implications: N/A

Attachments & Relevant Legislation: 2025 Recycling Calendar

Others Consulted: Public Works Staff Reviewed and approved by: Sarah Huskinson, CAO/Clerk





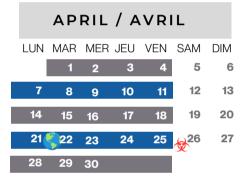
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GARBAGE AND RECYCLING CALENDAR Garbage is picked up weekly alongside your recycling. / Les ordures sont ramassées chaque en même temps que votre recyclage. CALENDRIER D'ORDURES ET RECYCLAGE

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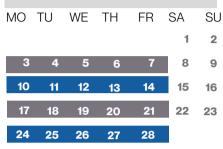


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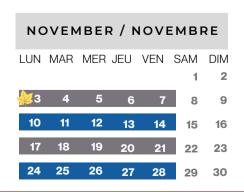
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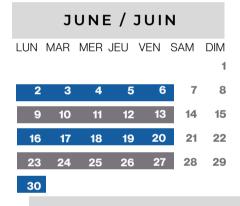


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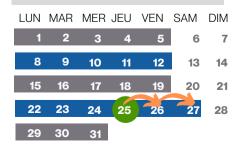
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| МО | TU | WE | ΤH | FR | SA | SU |
| | | | | | 1 | 2 |
| 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 24 | 25 | 26 | 27 | 28 | 29 | 30 |
| 31 | | | | | | |



SEPTEMBER / SEPTEMBRE

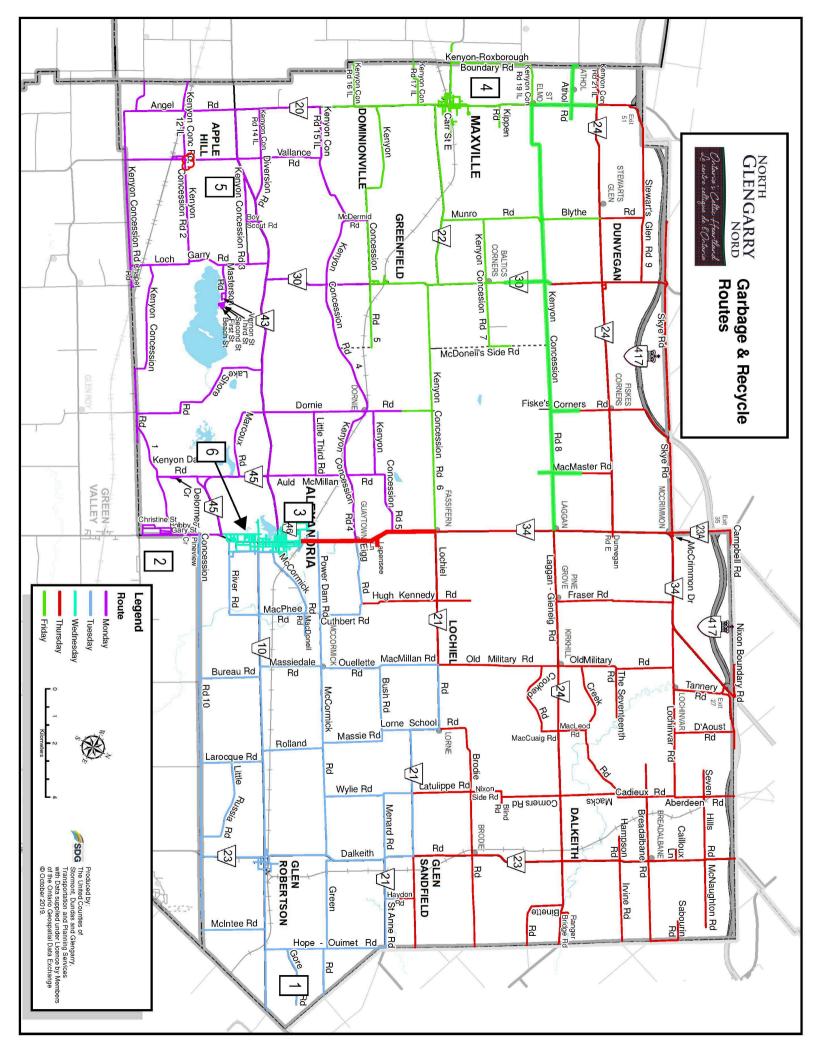
| MO | TU | WE | ΤН | FR | SA | SU |
|----|----|----|----|----|----|----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| 29 | 30 | 31 | | | | |

DECEMBER / DÉCEMBRE



For **questions regarding your recycling** collection, please contact Emterra at: 1-888-597-1541 or <u>customercareont@emterra.ca</u>

For **questions regarding your garbage** collection, please contact HCG at: 613-933-0202 or <u>kparisien@hgcmanagement.ca</u>





ADDITIONAL INFORMATION 2025

INFORMATION ADDITIONNELLE



ELECTRONIC WASTE

DECHETS ELECTRONIQUES

Electronic waste drop-off at: Best Buy, Tollgate Rd, Cornwall Staples, Cornwall Staples, Hawkesbury

Battery recycling locations can be found at https://www.call2recycle.org/locator/



Electronic waste pick up can be booked through https://recyclemyelectronics.ca/. The City of Cornwall also has recycling and waste disposal programs available. Learn more at https://www.cornwall.ca/en/live-here/specialprograms.aspx

IMPORTANT DATES



LEAF & YARD WASTE MAY 5 **NOVEMBER 3**



HAZARDOUS WASTE APRIL 26

EVENTMENTS SPECIAUX



PITCH IN WEEK WFFK OF APRIL 21



APRIL 22

LANDFILL

Located at 3485 County Rd 23, Glen Robertson. Proof of residency in North Glengarry required.

SUMMER HOURS May 1 - October 31 Wednesday, Friday and Saturday

November 1 - April 30 WINTER HOURS Wednesday and Saturday

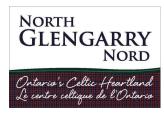
8am - 4pm

STAY INFORMED — RESTEZ INFORMÉ

Stay up to date with Voyent Alert on service disruptions, road closures and community events. If vou notice issues with your collections, you can notify us through our digital system, Access E-11.

Restez informé avec Voyent Alert des interruptions de service, des fermetures de routes et des événements communautaires. Vous pouvez aussi utiliser notre plateforme numérique Access E-11 afin de nous aviser d'un problème avec votre collecte.





613-525-3087 For inquiries:

www.northglengarry.ca