THE CORPORATION OF THE MUNICIPALITY OF TEMAGAMI
REGULAR COUNCIL MEETING
AGENDA

Thursday, August 8, 2019, 6:30 P.M.
Main Level Chambers

An audio recording of the Open Session of this meeting is being made and will be available through the Municipal Website as a public service to further enhance access to municipal government services and to continue to promote open and transparent government. As a visitor, your presence may be recorded and your name and address may be revealed during certain parts of the Council meeting.

1. CALL TO ORDER AND ROLL CALL

2. ADOPTION OF THE AGENDA
   Draft Motion:
   BE IT RESOLVED THAT the Regular Council Agenda dated August 8, 2019 be adopted as presented/amended.

3. DECLARATION OF CONFLICT OR PECUNIARY INTEREST AND GENERAL NATURE THEREOF

4. CLOSED SESSION

5. ADOPTION OF MINUTES

   5.1 DRAFT Regular Council Meeting - July 25, 2019
   Draft Motion:
   BE IT RESOLVED THAT the Minutes of the Regular Council Meeting held on July 25, 2019 be adopted as presented/amended.

6. BUSINESS ARISING FROM THE MINUTES

7. DELEGATIONS/ PRESENTATIONS

    7.1 Registered Delegations/ Presentations
    1. Peter Christie
       RE: Memo-M-086
       Draft Motion:
       BE IT RESOLVED THAT Council receive the presentation from Peter Christie regarding Memo-M-086.

7.2 Unregistered Presentations (Maximum 15 Minutes in Total- in accordance with rules in By-law)
    * 5 minutes per each presenter for a Maximum of 15 Minutes in total for all unregistered presentations*

8. CONSENT AGENDA ITEMS
8.1 Staff Report(s) for Information:

8.2 Correspondence for Information:
Hard copies of all correspondence for information is available at the Municipal office on request. The information items have been circulated to Council prior to the meeting.

1. Ministry of Municipal Affairs and Housing
   RE: Provincial Policy Statement Review - Draft Policies

2. The Labour Market Group
   RE: LMG July 2019 Newsletter

3. Monthly Job Report
   RE: June 2019

4. Northern Ontario School of Medicine
   RE: Invitation NOSM Student Meet and Greet 2019

5. Ministry of Municipal Affairs and Housing
   RE: Infrastructure Ontario Properties and Municipalities

8.3 Minutes of Local Boards & Committee Meetings:

9. STAFF REPORTS

9.1 Memo-M-124 OCWA Operational Plan
Draft Motion:
BE IT RESOLVED THAT Council receive Memo 2019-M-124;

AND FURTHER THAT Council direct the Mayor and the Treasurer/Administrator to sign the Commitment and Endorsement page of the OCWA Operational Plan.

9.2 Memo-M-127 ICIP Funding Application
Draft Motion:

9.3 Memo-M-128 Procedural By-Law Schedules
Draft Motion:
BE IT RESOLVED THAT Council receive Memo 2019-M-128;

AND FURTHER THAT Council approve the Schedules for the Procedural By-Law;

AND FURTHER THAT the completed By-Law be placed on the next agenda for Council’s direction.

9.4 Memo-M-129 Assumption of Private and Unassumed Roads Policy
Draft Motion:
BE IT RESOLVED THAT Council receive Memo No. 2019-M-129;

AND FURTHER THAT Council direct Staff to prepare a by-law to entrench the Assumption of Private and Unassumed Road Policy for Council’s consideration at their next meeting.

9.5 Memo-M-130 TA Report
Draft Motion:
BE IT RESOLVED THAT Council receive Memo 2019-M-130.

9.6 Memo-M-131 Speed Limit
Draft Motion:
BE IT RESOLVED THAT Council receive Memo 2019-M-131;

AND FURTHER THAT Council direct the Staff to contact the Ministry of Transportation (MTO) to reconsider the speed limits approaching the hamlet of Temagami in both direction.

10. COUNCIL COMMITTEE REPORTS

11. ANNOUNCEMENTS AND VERBAL REPORTS FROM MAYOR AND COUNCILLORS

12. CORRESPONDENCE

12.1 Action Correspondence

1. Memo-M-126 Temiskaming Smallmouth Bass Series

Draft Motion:
BE IT RESOLVED THAT Council receive Memo-M-126;

AND FURTHER THAT Council authorize a donation in the amount of $450.00 for sponsorship of the 2019 events.

12.2 Resolution from Other Municipalities

1. Memo-M-125 Town of Halton Hills

RE: Reducing Litter and Waste in our Communities

Draft Motion:
BE IT RESOLVED THAT Council receive Memo No. 2019-M-125;

AND FURTHER THAT Council support the resolution passed by the Council of the Town of Halton Hills regarding Reducing Litter and Waste in our Communities.

13. BY-LAWS

13.1 By-law 19-1471 Donation Policy

Draft Motion:
BE IT RESOLVED THAT By-law 19-1471, being a by-law to establish the Council Donation Policy, be taken as read a first, second and third time and finally passed this 8th day of August;

AND FURTHER THAT the said by-law be signed by the Mayor and Clerk and recorded in the by-law book.

13.2 By-law 19-1472 Code of Conduct

Draft Motion:
BE IT RESOLVED THAT By-law 19-1472, being a by-law to establish the Code of Conduct for Council, Boards and Committees, be taken as read a first, second and third time and finally passed this 8th day of August;

AND FURTHER THAT the said by-law be signed by the Mayor and Clerk and recorded in the by-law book.

13.3 By-law 19-1473 Appointment of Municipal Law Enforcement Officer

Draft Motion:
BE IT RESOLVED THAT By-law 19-1473, being a by-law to appoint Municipal Law Enforcement Officer, be taken as read a first, second and third time and finally passed
14. **APPROVED MINUTES OF COMMITTEE MEETINGS**

Draft Motion:
BE IT RESOLVED THAT the minutes of the Advisory Committees and Local Boards that have been submitted for Council’s consideration be received listed in the minutes of this meeting.

The following item were received for information:

14.1 **Committee of Adjustment Minutes - April 2019**

15. **UNFINISHED BUSINESS**

16. **NEW BUSINESS**

17. **NOTICES OF MOTION**

18. **CONFIRMATION BY-LAW**

Draft Motion:
BE IT RESOLVED THAT By-law 19-1474, being a by-law to confirm the proceedings of the Council of the Corporation of the Municipality of Temagami, be taken as read a first, second and third time and finally passed this 8th day of August;

AND FURTHER THAT the said by-law be signed by the Mayor and Clerk and recorded in the by-law book.

19. **ADJOURNMENT**
THE CORPORATION OF THE MUNICIPALITY OF TEMAGAMI
REGULAR COUNCIL MEETING
DRAFT MINUTES

Thursday, July 25, 2019, 6:30 P.M.

PRESENT: D. O'Mara, C. Dwyer, B. Leudke, J. Harding, M. Youngs, J. Shymko, J. Koistinen
STAFF: C. Davidson, S. Fournier, S. Pandolfo, B. Turcotte, J. Sanderson

CALL TO ORDER AND ROLL CALL
Mayor O'Mara called the meeting to order at 6:30 pm.
There were 24 people in the audience. The Mayor called the Roll.

ADOPTION OF THE AGENDA
19-329
MOVED BY: J. Shymko
SECONDED BY: B. Leudke
BE IT RESOLVED THAT the Regular Council Agenda dated July 25, 2019 be adopted as presented.
CARRIED

DECLARATION OF CONFLICT OR PECUNIARY INTEREST AND GENERAL NATURE THEREOF
The Mayor requested disclosure of pecuniary interest. Administration reported that none were received prior to the meeting. There were no other disclosure made.

CLOSED SESSION
NONE.

ADOPTION OF MINUTES
DRAFT Regular Council Meeting - July 11, 2019
19-330
MOVED BY: M. Youngs
SECONDED BY: J. Koistinen
BE IT RESOLVED THAT the Minutes of the Regular Council Meeting held on July 11, 2019 be adopted as presented.
CARRIED

BUSINESS ARISING FROM THE MINUTES
NONE.

1
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DELEGATIONS/ PRESENTATIONS
NONE.

Registered Delegations/ Presentations

Unregistered Presentations (Maximum 15 Minutes in Total in accordance with rules in By-law)
* 5 minutes per each presenter for a Maximum of 15 Minutes in total for all unregistered presentations*

B. Koski brought forward concerns regarding the increase of water fees, north lagoon and the service review.

CONSENT AGENDA ITEMS

19-331
MOVED BY: C. Dwyer
SECONDED BY: J. Koistinen

BE IT RESOLVED THAT Council adopt the consent agenda motions presented on the agenda.
CARRIED

Staff Report(s) for Information:

Correspondence for Information:
19-331A
MOVED BY: C. Dwyer
SECONDED BY: J. Koistinen

BE IT RESOLVED THAT correspondence items numbered: 8.2.1 to 8.2.2 on this agenda be received by Council for information and be noted, filed, and recorded in the minutes of this meeting;
CARRIED

1. Temagami North - Turnaround
2. Planning Session - July 27, 2019

Minutes of Local Boards & Committee Meetings:

STAFF REPORTS

Items to be Considered Separately from Consent Agenda:

Marten River Volunteer Fire Department Report - June 2019
19-332
MOVED BY: C. Dwyer
SECONDED BY: J. Koistinen

BE IT RESOLVED THAT Council receive the monthly report from the Marten River Volunteer Fire Department for information.
CARRIED
Temagami Fire Department Monthly Report - June 2019
19-333
MOVED BY: M. Youngs
SECONDED BY: J. Harding

BE IT RESOLVED THAT Council receive the monthly report from the Temagami Fire Department for information.
CARRIED

Public Works Department Report - July 2019
19-334
MOVED BY: C. Dwyer
SECONDED BY: J. Shymko

BE IT RESOLVED THAT Council receive the monthly report from the Public Works Departments for information.
CARRIED

Memo-M-114 Council Donations Policy
19-335
MOVED BY: J. Shymko
SECONDED BY: B. Leudke

BE IT RESOLVED THAT Council receive Memo No. 2019-M-114;
AND FURTHER THAT Council direct Staff to prepare a by-law to entrench the Council Donation Policy for Council’s consideration at their next meeting.
CARRIED

Memo-M-115 Wishart Municipal Group Agreement Form
19-336
MOVED BY: C. Dwyer
SECONDED BY: J. Koistinen

BE IT RESOLVED THAT Council receive Memo 2019-M-115;
AND FURTHER THAT Council direct Staff to select the __________ package.
AMENDED
19-337
MOVED BY: J. Shymko
SECONDED BY: J. Koistinen

TO AMEND resolution Memo-M-115 by removing "AND FURTHER THAT Council direct Staff to select the __________ package."
CARRIED

Memo-M-116 Code of Conduct
19-338
MOVED BY: C. Dwyer
SECONDED BY: B. Leudke
BE IT RESOLVED THAT Council receive Memo No. 2019-116;

AND FURTHER THAT Council direct Staff to prepare a by-law to entrench the Code of Conduct for Council’s Consideration at their next meeting.

CARRIED

Memo-M-117 Procedural By-Law
19-339
MOVED BY: B. Leudke
SECONDED BY: C. Dwyer

BE IT RESOLVED THAT Council receive Memo-M-117;

AND FURTHER THAT Council, by further resolutions, direct Staff to edit the Draft Procedural By-Law and return the edited version at the next meeting.

CARRIED

Memo-M-119 Chief Building/By-Law Enforcement Officer
19-340
MOVED BY: C. Dwyer
SECONDED BY: J. Koistinen

BE IT RESOLVED THAT Council receive Memo No. 2019-M-119

AND FURTHER THAT Council direct staff to complete the process to hire a part time Municipal Law Enforcement Officer.

AND FURTHER THAT a letter be sent to the city of Temiskaming Shores to request that they provide the Municipality of Temagami with Building inspector services, until such time that we have a fully qualified Chief Building Official hired.

CARRIED

Memo-M-120 Electronic Waste Recycling Program
19-341
MOVED BY: C. Dwyer
SECONDED BY: J. Shymko

BE IT RESOLVED THAT Council receive Memo No.2019-M-120;

AND FURTHER THAT Council direct staff to take the necessary steps to implement an electronic waste recycling program with Electronic Products Recycling Association (EPRA);

AND FURTHER THAT a sea container be located at the Strathy Landfill and arrangements be made to make space in the landfill attendant buildings (in the addition), located at the Briggs and the Sisk Landfills to store electronic waste until it can be moved to the sea container at the Strathy location.

CARRIED

Memo-M-121 International Plowing Match 2019
19-342
MOVED BY: M. Youngs
SECONDED BY: J. Koistinen
BE IT RESOLVED THAT Council receive Memo No. 2019-M-121 and correspondence dated July 8, 2019 from Northeastern Ontario Tourism regarding the 2019 International Plowing Match.

AND FURTHER THAT council direct staff to purchase the “Gold Partner” option at a cost of $5,000 through Northeastern Ontario Tourism for a space in the Tourism Pavilion at the 2019 International Plowing Match.

AND FURTHER THAT Council direct staff to develop a team of 3 to create a plan for promoting our area at the plowing match.

CARRIED

Memo-M-122 Road Assumption Policy
19-343
MOVED BY: B. Leudke
SECONDED BY: C. Dwyer

BE IT RESOLVED THAT Council receive Memo No.2019-M-122;

AND FURTHER THAT Council direct staff to draft a policy base on the recommendation in the Memo.

CARRIED

Memo-M-118 Temagami North Ditches
19-344
MOVED BY: C. Dwyer
SECONDED BY: J. Shymko

BE IT RESOLVED THAT Council receive report Memo-M-118.

CARRIED

19-345
MOVED BY: C. Dwyer
SECONDED BY: B. Leudke

BE IT RESOLVED THAT Council directs Staff to clean the ditches and culverts as necessary;

AND FURTHER THAT Council directs Staff to investigate the installation of French Drains with costing to be completed through consultation with a Contractor;

AND FURTHER THAT group consisting of three members of Council and three members of the Public be formed to ensure the finished product is what is expected;

AND FURTHER THAT the contracts and documentation for the Spruce Drive project be reviewed to determine if there is any recourse available to the Municipality.

CARRIED

19-346
MOVED BY: C. Dwyer
SECONDED BY: J. Harding
BE IT RESOLVED that Staff consider discussing the ditch remediation project with Pederson Construction.
CARRIED

COUNCIL COMMITTEE REPORTS
NONE.

Items to be Considered Separately from Consent Agenda:

ANNOUNCEMENTS AND VERBAL REPORTS FROM MAYOR AND COUNCILLORS

Mayor D. O'Mara reported of his summer report.

Mayor D. O'Mara reported of his attendances to the DSSAB, MNRF, TFN and Police Board meetings and by teleconference regarding Temagami Tenure Modernization Project.

Mayor O'Mara would like to thank everyone who was involved in setting up and organizing the Canoe Festival.

CORRESPONDENCE
NONE.

Action Correspondence:

Resolution from Other Municipalities:

BY-LAWS

Items to be Considered Separately from Consent Agenda:

Memo-M-123 2.4% COLA Increase
19-347
MOVED BY: J. Koistinen
SECONDED BY: J. Shymko

BE IT RESOLVED THAT By-law 19-1470, being a amendment by-law to establish Schedule G of the employment & procedure manual, be taken as read a first, second and third time and finally passed this 25th day of July;

AND FURTHER THAT the said by-law be signed by the Mayor and Clerk and recorded in the by-law book.
CARRIED

APPROVED MINUTES OF COMMITTEE MEETINGS
NONE.

UNFINISHED BUSINESS
NONE.

NEW BUSINESS
NONE.

NOTICES OF MOTION
NONE.
CONFIRMATION BY-LAW

19-348
MOVED BY: C. Dwyer
SECONDED BY: B. Leudke

BE IT RESOLVED THAT By-law 19-1469, being a by-law to confirm the proceedings of the Council of the Corporation of the Municipality of Temagami, be taken as read a first, second and third time and finally passed this 25th day of July;

AND FURTHER THAT the said by-law be signed by the Mayor and Clerk and recorded in the by-law book.

CARRIED

ADJOURNMENT

THAT This meeting adjourn at 9:28p.m.

__________________________________________
Mayor

__________________________________________
Clerk
July 22, 2019

Dear Head of Council:


I am writing today to announce that my ministry is launching a consultation on proposed policy changes to the Provincial Policy Statement (PPS). The PPS is an important part of Ontario’s land use planning system, setting out the provincial land use policy direction.

Municipalities play a key role in implementing these policies through local official plans, zoning by-laws and other planning decisions. The Planning Act requires that decisions on land use planning matters be “consistent with” the Provincial Policy Statement policies.

The government is consulting on draft policy changes to:

- Encourage the development of an increased mix and supply of housing
- Protect the environment and public safety
- Reduce barriers and costs for development and provide greater predictability
- Support rural, northern and Indigenous communities
- Support the economy and job creation

The proposed PPS policy changes support the implementation of More Homes, More Choice: Ontario’s Housing Supply Action Plan. The Action Plan includes a series of distinct but coordinated initiatives to address housing supply, including a review of the Provincial Policy Statement. The proposed PPS changes work together with other recent changes to the land use planning system – including to the Planning Act through Bill 108, More Homes, More Choice Act, 2019 (once proclaimed) and A Place to Grow: Growth Plan for the Greater Golden Horseshoe.

For more information about the consultation, please visit [http://www.mah.gov.on.ca/Page215.aspx](http://www.mah.gov.on.ca/Page215.aspx) where you will find:

- A link to the posting on the Environment Registry of Ontario (ERO #019-0279), including the proposed Provincial Policy Statement and questions to consider
- Information on how to provide comments

The consultation is open for 90 days and closes on October 21, 2019.
I look forward to hearing your ideas on the proposed changes to the Provincial Policy Statement.

If you have any questions about the consultation, please contact the ministry at planningconsultation@ontario.ca or by calling 1-877-711-8208.

Sincerely,

Steve Clark
Minister

c: Planning Head and/or Clerks
WHAT IS CAUSING THE CRISIS?

• Municipal barriers to development (Zoning, by-laws, service cost & timing, fees, etc.)
• Red tape regulations (At all government levels)
• Availability & cost of land & housing

SOLUTIONS!

• Incentives for developers/investors/land owners
• Rezoning & changes to planning
• Reduce red tape & fees
• Retro-fitting existing structures

WHAT DOES THIS HOUSING CRISIS ACTUALLY LOOK LIKE?

Joe & Josephine are ready to buy a house and move to the area.

$70,000 COMBINED INCOME + GOOD CREDIT RATING can buy A HOME PRICED AT $250K - $350K

There are only 8 homes listed that fit Joe & Josephine’s budget.

Sophie just got a job and needs to find rental accommodations in the next 2 weeks.

$35,000 ANNUAL INCOME @40% OF INCOME can pay MONTHLY RENT OF $1,200

There are NO rentals available for Sophie in her price range. Therefore, Sophie must decline her job offer.

THE HOUSING CRISIS IN THE PARRY SOUND DISTRICT.

64 Organizations Collaborating!

We gathered 64 different organizations together to discuss the barriers and possible solutions to the affordable housing shortage in Parry Sound.

Non-profits, Builders, Contractors, Funders, Municipal Staffers, Employers, Real Estate Agents, Educational Institutions, Economic Developers, Land Owners

WHAT IS CAUSING THE CRISIS?

Our Goal:

Stimulate thought, discussion, and solutions that will provide accommodation for employees across our rural and urban municipalities.

JOBS REPORT MAY 2019

TOTAL NUMBER OF JOB POSTINGS

Nipissing 381
Parry Sound 131

TOP INDUSTRY WITH VACANCIES

Nipissing
Retail Trade (13.9%)

Parry Sound
Retail Trade (17.6%)

To view the full report, visit our website www.thelabourmarketgroup.ca

Questions or concerns? Feel free to contact us at info@thelabourmarketgroup.ca

T. 705.474.0812
Toll Free 1.877.223.8909
F. 705.474.2069

101 Worthington St. East
Suite 238
North Bay, Ontario

The Labour Market Group is funded by

Ontario

RESULTS OF WEST PARRY SOUND HOUSING SUMMIT HELD APRIL 24TH

Housing Supply vs. Demand

PROJECTED EMPLOYEES

Non-profits, Builders, Contractors, Funders, Municipal Staffers, Employers, Real Estate Agents, Educational Institutions, Economic Developers, Land Owners

RESULTS OF WEST PARRY SOUND HOUSING SUMMIT HELD APRIL 24TH

Housing Supply vs. Demand

PROJECTED EMPLOYEES

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SUCCESSFUL OUTCOMES

• Collaboration is critical to overcoming barriers to affordable housing & rentals.
• The scope of the housing crisis is massive.
• There is a general consensus regarding the issues presented from all perspectives.

MOST EMPLOYERS who are looking to move forward with WORKFORCE ACCOMMODATIONS are planning to or already have started THIS YEAR!
Looking for Board members!

Are you interested in the future workforce of Nipissing or Parry Sound?

Become an LMG board member! We are currently seeking applications from those individuals interested in joining the LMG team!

For more information contact info@thelabourmarketgroup.ca

SHIFTING SKILLS IN CANADA’S MINING INDUSTRY

EDUCATION: Increasing Demand for Workers with a University Degree

Workers in Mining, Quarrying, Oil and Gas Extraction (NAICS 21) By education level (1980-2017)

SKILLS: Top Five Skills in Demand from Online Job Postings

Skills Demanded in Mining and Quarrying (NAICS 212) By share of online job postings (2013-2018)

TEMPORARY EMPLOYMENT IN CANADA, 2018

In 2018, Newfoundland and Labrador had the highest proportion of temporary employees.

From 1998 to 2018, the proportion of temporary employees rose by 1.5 percentage points in Canada.

IN-DEMAND SKILLED TRADES PROJECT

The government has identified that modernizing the apprenticeship and skilled trades system is a key component to support a strong future economy.

Building on insights and knowledge of local labour markets gained through previous activities, LMG has been asked to undertake a project in relation to the skilled trades. Through engagement with local employers, LMG will complete an analysis of in-demand skilled trades and shortages in their local communities. The objective of this project is to identify the skilled trades that are in demand, and recruitment challenges and practices of local employers for the skilled trades in our region. This work will not only support local workforce planning but also complement the Province’s apprenticeship modernization efforts by providing timely, community-focused perspectives on labour market conditions for the skilled trades.

For more information on how you can become involved, contact the LMG office.
Nipissing District

There were 381 job postings recorded within Nipissing District in the month of June. This represents a substantial drop from both the previous month and the 4-year June average with decreases of -17.7% (-82) and -15.6% (-70) respectively. 171 unique employers posted jobs in this month which is also significantly below the previous month’s figure of 197 and the current 4-year June average of 194.

381 Total Number of Job Postings ↓82 from May

Parry Sound District

There were 131 job postings recorded within the Parry Sound District throughout the month of June. This total is drastically lower; -26.8%, than the previous month’s total of 179 job postings. Despite this the June 2019 figure is notably higher; +7.8%, than the current 4-year June average of 122 postings. 72 unique employers posted jobs in June.

131 Total Number of Job Postings ↓48 from May

* North American Industry Classification System (NAICS) is the system utilized by the governments of Canada, United States and Mexico in order to classify companies based on their primary functions/objectives.

Top 5 Employers Posting Jobs

<table>
<thead>
<tr>
<th># of Job Postings</th>
<th>Statistics Canada</th>
<th>SDI Marketing</th>
<th>J.G. Fitzgerald &amp; Sons Ltd.</th>
<th>Kaltech Mining Services Ltd.</th>
<th>Canadore College</th>
</tr>
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<tbody>
<tr>
<td>30</td>
<td>25</td>
<td>10</td>
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</table>

Top 5 Industries Hiring (NAICS)

1. Retail Trade (NAICS 44-45) 13.9% of all job postings

Top 5 Positions

1. Retail Service Clerk / Rep. / Associate
2. Retail Manager / Assistant Manager
3. Automotive Service Technician / Apprentice
3. Parts Clerk
3. Cashier

Top 5 Employers Posting Jobs

<table>
<thead>
<tr>
<th># of Job Postings</th>
<th>Connor Industries</th>
<th>Phoenix Building Components Inc.</th>
<th>The Home Depot</th>
<th>Walmart Canada</th>
<th>Di Salvo’s Bella Cucina</th>
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</tr>
</tbody>
</table>

Top 5 Industries Hiring (NAICS)

1. Retail Trade (NAICS 44-45) 17.6% of all job postings

Top 5 Positions

1. Retail Sales Associate / Representative
2. Cashier
2. Retail Supervisor
2. Manager / Assistant Manager
1. 7 Tied at 1
1. **Sales & Service (NOC 6)** - 37.3%

- Sales Representative - Marketing (17)
- Security Guard (15)
- Retail Service Clerk / Representative / Associate (25)
- Cook / Kitchen Worker (14)
- Cleaner / Housekeeper (11)

2. **Trades, Transportation & Equipment Operators (NOC 7)** - 20.2%

- Labourer - General / Construction (25)
- Driver - Truck / Bus (12)
- Automotive Service Technician / Apprentice (5)
- Welder / Welder-Fitter (5)
- Roofer (4)

3. **Business, Finance & Administration (NOC 1)** - 18.6%

- Survey Interviewer (30)
- Admin. Assistant / Executive Assistant (10)
- Receptionist / Secretary (6)
- Bookkeeper / Accounting Clerk (3)
- Human Resources / Labour Specialist (3)

4. **Top 3 Occupational Categories (NOC)**

1. **Sales & Service (NOC 6)**

   - 37.3%

   ![Bar Chart](chart1.png)

2. **Trades, Transportation & Equipment Operators (NOC 7)**

   - 20.2%

   ![Bar Chart](chart2.png)

3. **Business, Finance & Administration (NOC 1)**

   - 18.6%

   ![Bar Chart](chart3.png)

* National Occupation Classification (NOC) is the system utilized by the Government of Canada to organize occupations based on the primary job requirements and skill level.

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2. **12.3%**: Public Administration (NAIC 91)

3. **11%**: Health Care & Social Assistance (NAIC 62)

4. **8.9%**: Professional, Scientific & Technical Services (NAIC 54)

5. **8.7%**: Manufacturing (NAICS 31-33)

2. **14.5%**: Accommodation & Food Services (NAIC 72)

3. **13.7%**: Manufacturing (NAICS 31-33)

4. **13%**: Construction (NAIC 23)

5. **9.9%**: Health Care & Social Assistance (NAIC 62)
Highest Paying Posted Jobs By Hourly Wage

1. $36.93  
   Manager - Clinical Services  
   @ Hands the Family Help Network

2. $36.00  
   Paramedic  
   @ North Bay Regional Health Centre

3. $36.00  
   Paramedic  
   @ Mattawa Hospital

4. $32.50  
   Mediator  
   @ Mediation Centre

5. $30.92  
   Plumber  
   @ National Defense

Highest Paying Posted Jobs By Annual Salary

1. $60,632  
   Caseworker  
   @ Ministry of Children, Community & Social Services

2. $60,000  
   Manager - Financial Services  
   @ True North Chevrolet Cadillac Ltd.

3. $54,825  
   Program Worker - Community Action Program for Children Team  
   @ The Children’s Aid Society of the District of Nipissing and Parry Sound

Highest Paying Posted Job By Annual Salary

1. $73,845  
   Director of Public Works  
   @ The Corporation of the Township of Nipissing

2. $70,000  
   Water Well Driller  
   @ Marshall Well Drilling

3. $64,214  
   Superintendent - Public Works  
   @ Township of Strong
**Educational Level Requested:**

- No Formal Education: 28.2%
- High School: 15.5%
- College: 46.7%
- University: 9.4%

**Required Experience Breakdown:**

- Entry Level / Experience an asset: 30.2%
- 1-12 Months: 13.3%
- 1-3 Years: 10.2%
- 3-5 Years: 10.2%
- 5+ Years: 9.4%

275
Postings listed experience requirements (72.2%)

71
Postings listed experience requirements (54.2%)

**Full-time / Part-time Breakdown**

- Full-time (35+ Hours): 32.4%
- Part-time (20-34 Hours): 46.7%
- Casual (Under 20 Hours): 20%

312
Postings listed hours offered (81.9%)

111
Postings listed hours offered (84.7%)
There were 381 job postings recorded within Nipissing District in the month of June. This represents a substantial drop from both the previous month and the 4-year June average with decreases of -17.7% (-82) and -15.6% (-70) respectively. 171 unique employers posted jobs in this month which is also significantly below the previous month’s figure of 197 and the current 4-year June average of 194.

Of the 381 job postings 98.2% (374) were discovered through online sources, 23.4% (89) required the successful candidate to have some form of driver’s license, 5.0% (19) needed access to a personal vehicle, 4.7% (18) were seeking a bilingual candidate and 30.4% (116) stated that a criminal record check would be performed as a condition of hiring.

The average hourly wage offered for postings in June was $17.74/hour. This is a significant decrease; -6.9%, from the May average of $19.05/hour and also falls below; -6.0%, the current 12-month average of $18.87/hour. Of the 216 postings which provided an hourly wage 25.0% (54) were offering the provincial minimum wage of $14.00/hour. The average annual salary for June was $39,367.97/year; representing a large drop of -16.9% from the current 4-year June average of $52,093.45/year.

The Retail Trade (NAICS-44-45) and Public Administration (NAICS-91) industries made up a combined one in every four jobs in the month with 13.9% and 12.3% of the overall job posting share respectively. The largest month-over-month increase amongst all major industry classifications occurred in the Professional, Scientific and Technical Services (NAICS-54) industry with a modest +3.7% to make up 8.9% of all postings in June. In contrast the Health Care and Social Assistance (NAICS-62) saw the largest month-over-month decrease dropping -6.3% to make up 11.0% of the postings in June.

**WHAT IS THE LMG MONTHLY JOBS REPORT?**

This Jobs Report is a monthly publication produced by The Labour Market Group. Each month we compile a list of jobs that were posted or advertised through a variety of sources in our community. This report provides current, key information about job postings in the Nipissing & Parry Sound districts. Job postings were gathered online from www.jobbank.gc.ca, www.indeed.ca, and www.wowjobs.ca, and the North Bay & District Jobs Facebook page. They were also gathered from our local newspapers including: Almaguin News, Parry Sound North Star, North Bay Nugget, Mattawa Recorder, and West Nipissing Tribune. The job postings in this study are by no means an exhaustive list of every available job during the collection period. It is simply a tally of jobs posted from the sources listed above. For more clarification on the collection process of this Jobs report, please contact info@thelabourmarketgroup.ca. We would be more than happy to review our process with you!

2 Includes placement agencies, employment service providers and temporary agencies postings which could otherwise fall under other industries but actual employers are unknown at this time.

3 HGS and Zedd both post very frequently and state they are looking for large numbers of employees. As a result only 1 posting for each was considered

For more information & further details about local jobs, please contact:

The Labour Market Group
Toll Free: 1-877-223-8909
info@thelabourmarketgroup.ca
Please join us for a Welcome Breakfast!
(May come and go)
Come meet our 2019/20 NOSM Medical Students & Residents. Snacks and refreshments will be served.

Location:
Temiskaming Hospital – Auditorium
Monday, August 26th at 8:00a.m – 9:30a.m.

Please RSVP:
Amber Sayer at asayer@nosm.ca or by phone at 705-650-0338
July 12, 2019

Dan O’Mara, Mayor
Municipality of Temagami
PO Box 220
Temagami ON P0H 2H0
visit@temagami.ca

Dear Mayor O’Mara:

I am writing to acknowledge receipt of your correspondence received on July 5, 2019 to the Honourable Steve Clark, Minister of Municipal Affairs and Housing. Thank you for taking the time to write regarding the properties owned by Infrastructure Ontario and the municipality's interest.

Please be assured that your comments will be forwarded to appropriate staff in the Ministry of Municipal Affairs and Housing for consideration and that the minister, or a ministry staff member, will respond to you as soon as possible.

Thank you again for writing.

Yours truly,

Kathy Horgan
Manager, Local Government and Housing
Corporation of the Municipality of Temagami

Memorandum to Council

Memo No. 2019-M-124

<table>
<thead>
<tr>
<th>Subject:</th>
<th>OCWA Operational Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agenda Date:</td>
<td>August 8, 2019</td>
</tr>
<tr>
<td>Attachments:</td>
<td>Pdf of OCWA Operational Plan</td>
</tr>
</tbody>
</table>

**RECOMMENDATION**

BE IT RESOLVED THAT Council receive Memo 2019-M-124;

AND FURTHER THAT Council direct the Mayor and the Treasurer/Administrator to sign the Commitment and Endorsement page of the OCWA Operational Plan.

**INFORMATION**

Recently, the Ontario Clean Water Agency (OCWA) updated their operational plan for the Temagami Drinking Water Systems. As noted on the Commitment and Endorsement page, the purpose of the operational plan is to provide the framework for the Quality & Environmental Management System specific to our system with the overall goal of providing safe and cost-effective drinking water through sustained cooperation.

By endorsing this plan, Council is committing to work with OCWA to facilitate this goal.

Respectfully Submitted:
Craig Davidson
Treasurer/Administrator
The Municipality of Temagami

MULTI-FACILITY
OPERATIONAL PLAN

for the *Temagami North & South Drinking Water Systems*

This Operational Plan is designed for the exclusive use of the system(s) specified in this Operational Plan.

This Operational Plan has been developed with OCWA’s operating practices in mind and utilizing OCWA personnel to implement it.

Any use which a third party makes of this Operational Plan, or any part thereof, or any reliance on or decisions made based on information within it, is the responsibility of such third parties. OCWA accepts no responsibility for damages, if any, suffered by any third party as a result of decisions made or actions taken based on this Operational Plan or any part thereof.

Any documents developed and owned by OCWA which are referred to in this Operational Plan (including, but not limited to, OCWA’s QEMS documents, Standard Operating Procedures, policies and Facility Emergency Plans) remain the property of OCWA. Accordingly, these documents shall not be considered to form part of the Operational Plan belonging to the owner of a drinking-water system under Section 17 of the *Safe Drinking Water Act, 2002.*
<table>
<thead>
<tr>
<th>TABLE OF CONTENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewed by: R. Marshall, PCT</td>
</tr>
</tbody>
</table>

**OP-01** OCWA’s Quality & Environmental Management System (QEMS)

**OP-02** Quality & Environmental Management System Policy

**OP-03** Commitment & Endorsement of OCWA’s QEMS & Operational Plan
  - **OP-03A** Signed Commitment and Endorsement

**OP-04** Quality Management System Representative

**OP-05** Document and Records Control
  - **OP-05A** Document and Records Control Locations

**OP-06** Drinking Water System

**OP-07** Risk Assessment

**OP-08** Risk Assessment Outcomes
  - **OP-08A** Summary of Risk Assessment Outcomes

**OP-09** Organizational Structure, Roles, Responsibilities & Authorities
  - **OP-09A** Organizational Structure

**OP-10** Competencies

**OP-11** Personnel Coverage

**OP-12** Communications

**OP-13** Essential Supplies and Services

**OP-14** Review and Provision of Infrastructure

**OP-15** Infrastructure Maintenance, Rehabilitation and Renewal

**OP-16** Sampling, Testing and Monitoring

**OP-17** Measurement and Recording Equipment Calibration and Maintenance

**OP-18** Emergency Management

**OP-19** Internal QEMS Audits

**OP-20** Management Review

**OP-21** Continual Improvement

**Schedule “C”** MOECC’s Director’s Directions *Minimum Requirements for Operational Plans*
1. Purpose

To document OCWA’s Quality & Environmental Management System (QEMS). This Operational Plan defines and documents the QEMS for the Temagami Drinking Water Systems operated by the Ontario Clean Water Agency (OCWA). It sets out OCWA’s policies and procedures with respect to quality and environmental management in accordance with the requirements of the Province of Ontario’s Drinking Water Quality Management Standard (DWQMS) version 2.0.

2. Definitions

Drinking Water Quality Management Standard (DWQMS) – means the quality management standard approved by the Minister in accordance with section 21 of the SDWA.

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

Quality & Environmental Management System (QEMS) – a system to:
   a) Establish policy and objectives, and to achieve those objectives; and
   b) Direct and control an organization with regard to quality.

3. Procedure

3.1 The Temagami Drinking Water Systems are owned by the Municipality of Temagami. OCWA is the contracted Operating Authority for the Temagami Drinking Water Systems, which includes the Temagami water treatment plants and distribution systems.

3.2 OCWA’s Quality & Environmental Management System (QEMS) is structured and documented with the purpose of:

   1. Establishing policy and objectives with respect to the effective management and operation of water facilities;
   2. Understanding and controlling the risks associated with the facility’s activities and processes;
   3. Achieving continual improvement of the QEMS and the facility’s performance.

3.3 The Operational Plan for the facility listed above fulfils the requirements of the MOECC’s DWQMS version 2.0. The 21 QEMS Procedures within this Operational Plan align with the 21 elements of the DWQMS.

4. Related Documents

All QEMS Procedures and Documents referenced in this Operational Plan
MOECC’s Drinking Water Quality Management Standard
5. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision #</th>
<th>Reason for Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019 05 27</td>
<td>0</td>
<td>Procedure issued – Information within OP-01 was originally set out in the main body of the Temagami Drinking Water Systems Operational Plan (revision 7, dated June 19, 2017). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Addition of new wording (s. 3.3) to clarify that the Operational Plan now aligns with the 21 elements of the DWQMS.</td>
</tr>
</tbody>
</table>
1. Purpose

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

2. Definitions

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

3. Procedure

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

OCWA’s Policy is to:

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

(Originally issued as Environmental Policy on June 8, 1995
Last revised, approved by OCWA’s Board of Directors on April 6, 2016
(This policy is annually reviewed)

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

3.3 OCWA’s QEMS Policy is readily communicated and available to all OCWA personnel, the Owner and the public through OCWA’s intranet and public websites. A hardcopy of the QEMS Policy is posted as specified in the OP-05 Document and Records Control procedure.

3.4 Essential suppliers and service providers are advised of OCWA’s QEMS Policy as per the OP-13 Essential Supplies and Services procedure.)
3.5 Corporate Compliance coordinates the annual review and approval of the QEMS Policy by the Board of Directors and communicates the approval to all OCWA employees via an electronic communication.

3.6 The current version of the policy indicates the date of the last revision and that the policy is annually reviewed. Electronic and hard-copy documents that include the QEMS Policy will only be required to be updated in years when the Policy has been revised. A complete review/revision history of the QEMS Policy (documenting the annual policy review and/or revision approval date) is maintained on OCWA’s intranet.

4. Related Documents

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

5. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision #</th>
<th>Reason for Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019 05 27</td>
<td>0</td>
<td>Procedure issued – Section 3.4, 3.5 and 3.6 were added to the information originally set out in the main body of the Temagami Drinking Water Systems Operational Plan (revision 7, dated June 19, 2017). New sections: Purpose, Definitions, Procedure, Related Documents and a separate Revision History. Minor revisions to wording in s. 3.3 to reference location of posted copy of the policy. Added sections on how annual policy review is conducted (s. 3.5 and s. 3.6) and reference to OP-13 ESS (s. 3.4). The full revision history for the QEMS policy is available on OCWA's intranet.</td>
</tr>
</tbody>
</table>
1. Purpose

To document the endorsement of the Operational Plan for the Temagami Drinking Water Systems by OCWA Top Management and the Municipality of Temagami (Owner) and to set out when re-endorsement would be required.

2. Definitions

*Top Management* – a person, persons or a group of people at the highest management level within an Operating Authority that makes decisions respecting the QMS and recommendations to the Owner respecting the Subject System or Subject Systems

3. Procedure

3.1 The Operational Plan is provided to OCWA Top Management and to the Owner for endorsement. The signed written endorsement is presented in Appendix OP-03A. At a minimum, two members of Top Management must endorse the Operational Plan; however, the Operational Plan is made available to all members of Top Management in the specified document control location (refer to OP-05 Document and Records Control). Endorsement by OCWA’s Top Management is represented by Senior Operations Manager and the Regional Hub Manager.

3.2 Any major revision of the operational plan will be re-endorsed by OCWA Top Management and the Owner. Major revisions include:

1. A revision to OCWA’s QEMS Policy;
2. A change to both representatives of the facility’s Top Management and/or both of the Owner’s representatives that endorsed the Operational Plan;
3. A modification to the drinking water system processes/components that would require a major change to the description in OP-06 Drinking Water System;
4. The addition of a drinking water subsystem owned by the same Owner to this operational plan.

Any other changes would be considered a minor change and would not require the Operational Plan to be re-endorsed.

4. Related Documents

OP-03A Signed Commitment and Endorsement
OP-05 Document and Records Control
OP-06 Drinking Water System
5. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision #</th>
<th>Reason for Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019-05-27</td>
<td>0</td>
<td>Procedure issued – Information within OP-03 was originally set out in the main body of the Temagami Drinking Water System Operational Plans (revision 7, dated June 19, 2017). Procedure provides information on who from Top Management endorses the Operational Plan (s. 3.1); when owner re-endorsement is sought and ‘criteria’ as to what is considered a major revision to the Plan (s. 3.2). Appendix OP-03A includes the Owner and Top Management sign-off section.</td>
</tr>
</tbody>
</table>
This Operational Plan sets out the framework for OCWA’s Quality & Environmental Management System (QEMS) that is specific and relevant to your drinking water system(s) and supports the overall goal of OCWA and the Municipality of Temagami (Owner) to provide safe, cost-effective drinking water through sustained cooperation. OCWA will be responsible for developing, implementing, maintaining and continually improving its QEMS with respect to the operation and maintenance of the Temagami Drinking Water Systems and will do so in a manner that ensures compliance with applicable legislative and regulatory requirements.

Through the endorsement of this Operational Plan, the Owner commits to work with OCWA to facilitate this goal.

**OCWA Top Management Endorsement**

<table>
<thead>
<tr>
<th>Victor Legault</th>
<th>Date</th>
<th>Craig Davidson</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Operations Manager</td>
<td></td>
<td>Treasurer/Administrtor</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Eric Nielson</th>
<th>Date</th>
<th>Dan O’Mara</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional Hub Manager, Northeastern</td>
<td></td>
<td>Mayor</td>
<td></td>
</tr>
<tr>
<td>Ontario Regional Hub</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

2. Definitions

None

3. Procedure

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

3.2 The QEMS Representative is responsible for:

- Administering the QEMS for the Temagami Drinking Water Systems by ensuring that processes and procedures needed for the facility’s QEMS are established and maintained;
- Reporting to Top Management on the facility’s QEMS performance and identifying opportunities for improvement;
- Ensuring that current versions of documents related to the QEMS are in use;
- Promoting awareness of the QEMS to all operations personnel; and
- In conjunction with Top Management, ensuring that operations personnel are aware of all applicable legislative and regulatory requirements that pertain to their duties for the operation of the system.

4. Related Documents

None

5. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision #</th>
<th>Reason for Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019-05-27</td>
<td>0</td>
<td>Procedure issued – Information within OP-04 was originally set out in the main body of the Temagami Drinking Water System Operational Plan (revision 7, dated June 19, 2017). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Change to responsibilities: Operations Manager no longer considered QEMS Representative and SPC Manager to act as alternate as required (s. 3.1); added wording to clarify shared responsibilities for Top Management and QEMS Representative to ensure operations personnel are aware of applicable legislative and regulatory requirements (s. 3.2).</td>
</tr>
</tbody>
</table>
1. Purpose

To describe how OCWA’s QEMS documents are kept current and how QEMS documents and records are kept legible, readily identifiable, retrievable, stored, protected, retained and disposed of. This procedure applies to QEMS Documents and QEMS records pertaining to the Temagami Drinking Water Systems as identified in this procedure.

2. Definitions

*Document* – includes a sound recording, video tape, film, photograph, chart, graph, map, plan, survey, book of account, and information recorded or stored by means of any device

*Record* – a document stating results achieved or providing proof of activities performed

*QEMS Document* – any document required by OCWA’s QEMS as identified in this procedure

*QEMS Record* – any record required by OCWA’s QEMS as identified in this procedure

*Controlled* – managed as per the conditions of this procedure

*Retention Period* – length of time that a document or record must be kept; starts from the date of issue for QEMS records or from the point of time when a QEMS document is replaced by a new or amended document

3. Procedure

3.1 Documents and records required by OCWA’s QEMS and their locations are listed in Appendix OP-05A Document and Records Control Locations.

3.2 Internally developed QEMS documents and QEMS records (whenever possible) are generated electronically to ensure legibility and are identified through a header/title and issue date. Handwritten records must be legible and permanently rendered in ink or non-erasable marker.

3.3 Controls for the Operational Plan include the use of authorized approval, alpha-numeric procedure code, issue date, page numbers on every page, revision number and revision history.

Authorized personnel for review and approval of this Operational Plan are:

Review: QEMS Representative, Team Lead or ORO
Approval: SPC Manager or Operations Management

3.4 The QEMS Representative is responsible for ensuring that current versions of QEMS documents are being used at all times. Current QEMS documents and records are
DOCUMENT AND RECORDS CONTROL

Reviewed by: R. Marshall, PCT

Approved by: Y. Rondeau, SPC Manager

readily accessible to operations personnel and to internal and external auditors/inspectors at established document control locations. The currency of internal documents is ensured by comparing the date on the document to that of the master hardcopy and/or electronic copy residing in the designated document control location(s) specified in Appendix OP-05A.

Document control locations are established in areas that provide adequate protection to prevent unauthorized use/access, damage, deterioration or loss of QEMS documents and records. Copies of QEMS documents and records located outside of designated control locations are considered uncontrolled.

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

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

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

The QEMS Representative communicates any changes made to QEMS documents to relevant operations personnel and coordinates related training (as required). Changes to corporately controlled QEMS documents are communicated and distributed to facility QEMS Representatives by OCWA’s Corporate Compliance Group through e-mails, memos and/or provincial, regional hub/cluster or facility-level training sessions.

3.7 When a QEMS document is superseded, the hardcopy of the document is promptly removed from its location for disposal or retention (as appropriate).

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

3.9 QEMS documents and records are retained in accordance with applicable regulations and legal instruments. Relevant regulatory and corporate minimum retention periods are as follows:
### DOCUMENT AND RECORDS CONTROL

<table>
<thead>
<tr>
<th>Type of Document/Record</th>
<th>Minimum Retention Time</th>
<th>Requirement Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>DWQMS Operational Plan</td>
<td>10 years</td>
<td>Director’s Direction under SDWA</td>
</tr>
<tr>
<td>Internal QEMS Audit Results</td>
<td>10 years</td>
<td>OCWA Requirement</td>
</tr>
<tr>
<td>External QEMS Audit Results</td>
<td>10 years</td>
<td>OCWA Requirement</td>
</tr>
<tr>
<td>Management Review Documentation</td>
<td>10 years</td>
<td>OCWA Requirement</td>
</tr>
<tr>
<td>Documents/records required to demonstrate conformance with the DWQMS (specifically all the documents/records listed in OP-05A)</td>
<td>3 years<em>if no specified legislative requirement below</em></td>
<td>OCWA Requirement</td>
</tr>
<tr>
<td>Log Books or other record-keeping mechanisms</td>
<td>5 years</td>
<td>O. Reg. 128/04</td>
</tr>
<tr>
<td>Training Records for water operators and water quality analysts</td>
<td>5 years</td>
<td>O. Reg. 128/04</td>
</tr>
<tr>
<td>Operational checks, sampling and testing (e.g., chlorine residuals, turbidity, fluoride, sampling records), microbiological sampling and testing and chain of custodies</td>
<td>2 years</td>
<td>O. Reg. 170/03</td>
</tr>
<tr>
<td>Schedule 23 &amp; 24 (LMR) and THM, HAA, nitrates, nitrites and lead program sampling and testing, Section 11 Annual Reports and Schedule 22 Summary Reports</td>
<td>6 years</td>
<td>O. Reg. 170/03</td>
</tr>
<tr>
<td>Sodium test results and related corrective action records/reports, 60 month fluoride test results (if the system doesn’t fluoridate), Engineering Reports</td>
<td>15 years</td>
<td>O. Reg. 170/03</td>
</tr>
<tr>
<td>Lead samples, correction action records/reports for E. Coli, Total Coliforms and bacterial species</td>
<td>2 years</td>
<td>O. Reg. 170/03</td>
</tr>
<tr>
<td>Corrective action records/reports for chemical and radiological parameters under SDWA O. Reg. 169/03, pesticides not listed under O. Reg. 169/03 and health-related parameters in an order or approval</td>
<td>6 years (LMR) 15 years (SMR)</td>
<td>O. Reg. 170/03</td>
</tr>
<tr>
<td>Flow Meter Calibration Records, Analyzer Calibration Reports Maintenance Records/Work Orders</td>
<td>2 years</td>
<td>O. Reg. 170/03</td>
</tr>
</tbody>
</table>

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

4. Related Documents

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

5. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision</th>
<th>Reason for Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009-08-31</td>
<td>0</td>
<td>Procedure issued</td>
</tr>
<tr>
<td>2011-09-07</td>
<td>1</td>
<td>Correction of Process Compliance Manager’s title; clarification of responsibility and method of maintaining currency of documents (5.4); description of how network security is maintained (5.5); clarification of retention times (5.9); inclusion of the operation plan review (5.10)</td>
</tr>
<tr>
<td>2013-03-13</td>
<td>2</td>
<td>Revised position titles; Operations Manager has been changed to Senior Operations Manager, Cluster Manager has been changed to Operations Manager, Operator has been changed to Operator, and Process Compliance Manager has been removed as the position was discontinued. Removed references to certificate of approval.</td>
</tr>
<tr>
<td>2013-06-24</td>
<td>3</td>
<td>Added second location for public access of the Operational Plan, AWWA Standard location, and lead notification form; grouped documents together that are found in the same location; on-call schedule is found on the Shared Outlook Calendar.</td>
</tr>
<tr>
<td>2013-10-29</td>
<td>4</td>
<td>Changed the name of the system to Temagami Drinking Water Systems to include the distribution system, added location of distribution system maps and QEMS – Summary of Findings</td>
</tr>
<tr>
<td>2015-02-05</td>
<td>5</td>
<td>Added Monthly Operational Reports to Internal QEMS Documents</td>
</tr>
<tr>
<td>2017-06-19</td>
<td>6</td>
<td>Changed Monthly report to Quarterly, removed Operations Manager. Changed location of operator certificates from at the Temagami WTP’s to the Haileybury WTP. Changed WMS from Hansen to Maximo. Changed location of WMS Reports to Maximo</td>
</tr>
<tr>
<td>2019-05-27</td>
<td>7</td>
<td>OP-01 procedure renamed OP-05. Removed Scope and Responsibilities sections. Moved the former Table 1 (Designated location for documents and records required by OCWA’s QEMS) to its own appendix (OP-05A). Assigned responsibility for ensuring current versions of QEMS documents are being used to the QEMS Representative (s. 3.4). Clarified that requests for revisions/new QEMS...</td>
</tr>
</tbody>
</table>
documents are made to the QEMS Representative (s. 3.6). Moved the former Table 2 (Relevant regulatory and corporate minimum retention periods) to be part of s. 3.9 and expanded on the minimum retention times for documents and records required to demonstrate compliance with legislation. Other minor wording changes.
## DOCUMENT AND RECORDS CONTROL LOCATIONS

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

<table>
<thead>
<tr>
<th>Type of Document/Record</th>
<th>Designated Document Control Location</th>
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<tbody>
<tr>
<td><strong>Internal QEMS Documents</strong></td>
<td></td>
</tr>
<tr>
<td>Confined Space Program</td>
<td>HC – Haileybury Water Treatment Plant</td>
</tr>
<tr>
<td>Emergency Response Plan (corporate)</td>
<td>EC - OCWA’s intranet (ocwanet.ocwa.com)</td>
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</table>
| Facility Emergency Plan (FEP) Binder (includes Emergency Contact List, Essential Supplies and Services List, Contingency Plans, Site Specific Emergency Procedures and OCWA’s Emergency Management Program) | HC - Temagami North & Temagami South WTP’s  
EC - \ocwfile\public\NEO DWQMS\DWQMS |
| OCWA’s Health & Safety Management System | EC - OCWA’s Portal http://portal.ocwa.com/ |
| On-call Schedule | EC - Microsoft Outlook Shared Calendar |
| Operational Plan (includes QEMS Procedures) | EC - \ocwfile\public\NEO DWQMS\DWQMS - Temagami Drinking Water System  
HC – The Municipality of Temagami |
| ORO Letter | EC - \ocwfile\public\NEO DWQMS\DWQMS  
HC - Temagami North & Temagami South WTP’s |
| QEMS Policy | EC – OCWA’s public website www.ocwa.com & OCWA’s intranet (ocwanet.ocwa.com)  
HC – Haileybury WTP |
| Sample Schedule | EC - \ocwfile\public\NEO DWQMS\DWQMS - Temagami Drinking Water Systems  
HC - Temagami North & Temagami South WTP’s |
<p>| Vacation Calendar | EC - Microsoft Outlook Shared Calendar |
| <strong>Internal QEMS Forms (blank)</strong> |                                       |
| Analysis and Action Plan (AAP) Form |                                       |
| Community Complaint Form |                                       |
| Contingency Plan Review/Test Summary Form |                                       |
| Distribution Maintenance and Repair Form |                                       |
| Environmental Incident Report Form |                                       |
| Facility Rounds Sheets |                                       |
| Incidents of Non-Compliance Form | EC - \ocwfile\public\NEO DWQMS\DWQMS |
| Instrumentation Calibration/Maintenance Report Form |                                       |
| Laboratory Chain of Custody Forms |                                       |
| Loss of Pressure Incident Form |                                       |
| QEMS – Summary of Findings Spreadsheet |                                       |
| Tailgate Meeting Form |                                       |
| Transportation of Dangerous Goods Form |                                       |
| <strong>External QEMS Documents</strong> |                                       |
| American Water Works Association (AWWA) | EC - \ocwfile\public\NEO DWQMS\DWQMS |</p>
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<tr>
<td>Standards (as referenced in the DWWP) &amp; MOECC’s Watermain Disinfection Procedure</td>
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<tr>
<td>Applicable Federal and Provincial Legislation</td>
<td>Online at <a href="http://www.e-laws.gov.on.ca">www.e-laws.gov.on.ca</a></td>
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<tr>
<td>DWQMS Standard</td>
<td>EC: <a href="https://www.ontario.ca">https://www.ontario.ca</a></td>
</tr>
<tr>
<td>Equipment Operation /Maintenance Manuals</td>
<td>HC: Temagami North &amp; Temagami South WTPs, EC: Internet (if available)</td>
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<tr>
<td>MOECC Inspection Reports</td>
<td>EC: \ocwfile\public\NEO DWQMS\DWQMS - Temagami Drinking Water System</td>
</tr>
<tr>
<td>Municipal By-laws</td>
<td>Municipal Office</td>
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<tr>
<td>Municipal Drinking Water Licence (MDWL) / Drinking Water Works Permit (DWWP) / Permit to Take Water (PTTW)</td>
<td>EC: \ocwfile\public\NEO DWQMS\DWQMS - Temagami Drinking Water System, HC: Temagami North &amp; Temagami South WTPs</td>
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<tr>
<td>Operations Manual (including standard operating procedures)</td>
<td>HC: Temagami North &amp; Temagami South WTPs</td>
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<td>Operator Certificates (OCWA)</td>
<td>HC: Haileybury Water Treatment Plant</td>
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<td><strong>External QEMS Forms (blank)</strong></td>
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<tr>
<td>Adverse Water Quality Incident (AWQI) Form</td>
<td>EC: \ocwfile\public\NEO DWQMS</td>
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<td>MOECC Forms (Form 1,2,3 and Director Notification)</td>
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<td>Adverse Water Quality Incident (AWQI) Reports</td>
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<td>Analysis and Action Plan (AAP) Report</td>
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<tr>
<td>Annual Compliance / Summary Reports for Municipalities</td>
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<tr>
<td>Call-in Reports</td>
<td>EC: Workplace Management System (Maximo)</td>
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<td>Community Complaint Records</td>
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<tr>
<td>Contingency Plan Review/Test Summary</td>
<td>EC: \ocwfile\public\NEO DWQMS\DWQMS - Temagami Drinking Water Systems</td>
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<td>Distribution Maintenance and Repair Records</td>
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<td>Environmental Incident Reports</td>
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<td>Facility Logbooks</td>
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<td>Facility Rounds Sheets</td>
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<td>Incidents of Non-Compliance Records</td>
<td>HC - Haileybury WTP</td>
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<td>Infrastructure Review (Capital Letter &amp; 5 Year Capital/Major</td>
<td>EC - \ocwfile\public\NEO DWQMS\DWQMS - Temagami Drinking Water Systems</td>
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<td>Maintenance &amp; Calibration Records (completed WMS work orders)</td>
<td>EC - Workplace Management System (WMS)</td>
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<td>Management Review Documentation</td>
<td>EC - \ocwfile\public\NEO DWQMS\DWQMS - Temagami Drinking Water Systems</td>
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<td>MOECC Records (Form 1,2,3 &amp; Director Notification)</td>
<td>EC - \ocwfile\public\NEO DWQMS\DWQMS - Temagami Drinking Water Systems</td>
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<td>Operator Training Records (OCWA)</td>
<td>EC - OCWA’s Training Summary Database</td>
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<tr>
<td>Operator Training Records (Municipality)</td>
<td>HC - Municipal Office</td>
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<td>EC - Microsoft Outlook E-mail</td>
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<td>QEMS Communications - Internal</td>
<td>EC - Microsoft Outlook E-mail</td>
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<tr>
<td>QEMS – Summary of Findings Record</td>
<td>EC - \ocwfile\public\NEO DWQMS\DWQMS - Temagami Drinking Water Systems</td>
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<td>Quarterly Operations Reports (to the Owner)</td>
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<td>SCADA Records</td>
<td>EC - Outpost5/Wonderware</td>
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<tr>
<td>Tailgate Records</td>
<td>HC - Haileybury Water Treatment Plant</td>
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<tr>
<td>Transportation of Dangerous Goods Record</td>
<td>HC - Haileybury Water Treatment Plant</td>
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## Revision History

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<td>Appendix issued; Table was originally included within the Document and Records Control Procedure (QP-01) (revision 6, dated June 19, 2017). Added section for blank external QEMS forms, changed location for Confined Space Program and Operational Plan and changed name of OCWA’s Safety Manual to OCWA’s Health and Safety Management System and its location.</td>
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</table>
1. **Purpose**

To document the following for the Temagami Drinking Waters Systems:
- The name of the Owner and Operating Authority; and
- Provide a description of the system, including all applicable water sources, treatment system processes and distribution system components.

2. **Definitions**

*Distribution System* - means the part of a drinking water system that is used in the distribution, storage or supply of water and that is not part of a treatment system.

*Primary Disinfection* - means a process or series of processes intended to remove or inactivate human pathogens such as viruses, bacteria and protozoa in water.

*Secondary Disinfection* - means a process or series of processes intended to provide and maintain a disinfectant residual in a drinking water system’s distribution system, and in plumbing connected to the distribution system, for the purposes of:
  (a) protecting water from microbiological re-contamination;
  (b) reducing bacterial regrowth;
  (c) controlling biofilm formation;
  (d) serving as an indicator of distribution system integrity; and includes the use of disinfectant residuals from primary disinfection to provide and maintain a disinfectant residual in a drinking water system’s distribution system for the purposes described in clauses (a) to (d).

*Treatment System* - means any part of a drinking water system that is used in relation to the treatment of water and includes,
  (a) any thing that conveys or stores water and is part of a treatment process, including any treatment equipment installed in plumbing,
  (b) any thing related to the management of residue from the treatment process or the management of the discharge of a substance into the natural environment from the system, and
  (c) a well or intake that serves as the source or entry point of raw water supply for the system;

3. **Procedure**

3.1 Refer to OP-6A for a description of the facilities in the Temagami North Drinking Water System.

3.2 Refer to OP-6B for a description of the facilities in the Temagami South Drinking Water System.
3 Related Documents

None

4 Revision History

<table>
<thead>
<tr>
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<tbody>
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<td>2019-05-27</td>
<td>0</td>
<td>Procedure issued – Information within OP-06 (s. 3) was originally set out in main body of the Temagami Drinking Water Systems Operational Plan (revision 7, dated June 19, 2017). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections.</td>
</tr>
</tbody>
</table>
TEMAGAMI NORTH DRINKING WATER SYSTEM

Reviewed by: R. Marshall, PCT
Approved by: Y. Rondeau, SPC Manager

Temagami North Drinking Water System Overview

Owner / Operating Authority

The Temagami North Drinking Water System is owned by The Corporation of the Municipality of Temagami. The treatment system is operated by the Ontario Clean Water Agency and the distribution system is operated by OCWA. This subject system is not interconnected to any other drinking water systems owned by different owners.

Source Water

Raw Water Supply

The intake pipe for the Temagami North water treatment plant is located approximately 165 m off the west shore of Net Lake at 10 m below the low water level of the lake. The raw water is directed by gravity via a 222 m long, 250 mm diameter intake pipe to a low lift pumping station consisting of a wet well and two submersible low lift pumps, each rated at 3.8 L/s (328 m3/day). These pumps are controlled by the system PLC (programmable logic controller) and discharge to the two BCA Pre-Fabricated package treatment plants.

General Characteristics

The raw water source for the treatment plant is Net Lake. The water from Net Lake is typically low in turbidity, slightly basic and stable in alkalinity. Temperature fluctuates significantly through the seasons ranging from approximately 0.01 °C in the winter to as high as 28 °C during the summer. Bacteriological analysis of the raw water indicates a source of relatively good quality. The results of chemical analyses are consistently below the Ontario Drinking Water Quality Standards.

Net Lake: Raw Water Characteristics

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Min</td>
<td>Max</td>
<td>Mean</td>
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<tr>
<td>E. coli (CFU/100 mL)</td>
<td>0</td>
<td>2</td>
<td>1.9</td>
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<tr>
<td>Total Coliforms (CFU/100 mL)</td>
<td>0</td>
<td>80</td>
<td>17.3</td>
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<tr>
<td>Turbidity (NTU)</td>
<td>0</td>
<td>10</td>
<td>2.8</td>
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<tr>
<td>pH</td>
<td>3.62</td>
<td>10.9</td>
<td>6.5</td>
</tr>
<tr>
<td>Alkalinity (mg/L)</td>
<td>5</td>
<td>28</td>
<td>22.9</td>
</tr>
<tr>
<td>Colour (TCU)</td>
<td>5</td>
<td>5</td>
<td>5</td>
</tr>
</tbody>
</table>
Common Fluctuations

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

Threats

Potential sources of raw water contamination include fuel spills from recreational water crafts, beaver activity, train derailment, and a major surcharge of effluent from the Temagami North Lagoon.

Operational Challenges

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

Treatment System Description

Water Treatment

The BCA plants each consist of 2 flash mixing chambers, 2 flocculation tanks, two clarification chambers, and two deep dual media filters (sand/anthracite). Aluminum sulphate and polymer are added for the coagulation/flocculation process, sodium carbonate for pH adjustment and sodium hypochlorite for disinfection. All chemicals are added using metering pumps. The plant is equipped with an automated monitoring system that records various components of the process including system flows and chemical dosages.

Filter backwashes are initiated by head loss, turbidity levels, time or manually by the operator. The backwash wastewater and sedimentation sludge is directed to a drainage system that leads to the Municipal sanitary sewer system for disposal. Alarmed chlorine and turbidity monitoring systems are in place to ensure the water is of acceptable quality before entering the distribution system.

Water Storage and Pumping Capabilities

The treated water is directed to two of the three clearwells, which have a combined capacity of 167 m³. The two highlift pumps direct the treated water into the distribution system, which is equipped with a standpipe known as the North Tower. The standpipe has a total storage capacity of 732 m³ and helps to maintain water pressure within the system. The distribution
system is composed of 218 service connections, 20 fire hydrants, and 3 dead end locations. The watermains are made of cast iron material and range in size from 6” to 8”.

Emergency Power

A diesel generator with automatic start is located in a nearby sewage pumping station and is available to provide emergency power for the entire facility in the event of a power interruption.

Treatment System Process Flow Chart

Refer to Figure 1 on page 4

Description of the Distribution System Components

The Temagami North DWS is a standalone system not connected to another drinking water system. There are no upstream or downstream processes relied upon to ensure the provision of safe drinking water. It is classified as a Large Municipal Residential Drinking Water System, serving an estimated population of 300 residents.

Distribution System Components Flow Chart

Refer to Figure 2 on page 5

Revision History

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<tr>
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<td>Procedure issued – Information within OP-06 (s. 3) was originally set out in main body of the Temagami Drinking Water Systems Operational Plan (revision 7, dated June 19, 2017). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Updates based on revisions to DWQMS (e.g. removal of critical upstream or downstream processes, separation of systems that provide primary and/or secondary disinfection and systems that do not, for systems that are connected to another system with different owners, must now include which system is relied upon to ensure the provision of safe drinking water). Moved order of system description to follow the process (e.g., source water first, then treatment, then distribution). Updated the Raw Water Characteristics table with more current data.</td>
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</table>
Figure 1 - Temagami North Water Treatment Plant - Process Flow Chart (2018)
Figure 2 - Temagami North Distribution System Map. Larger scale version available at the Temagami Public Works office.
Temagami South Drinking Water System Overview

Owner / Operating Authority

The Temagami South Drinking Water System is owned by The Corporation of the Municipality of Temagami. The treatment system is operated by the Ontario Clean Water Agency and the distribution system is operated by OCWA. This subject system is not interconnected to any other drinking water systems owned by different owners.

Source Water

Raw Water Supply

Located on Lakeshore Road, the Temagami South treatment plant obtains its source water from Lake Temagami. The water is drawn through a 20 m long, 200 mm diameter intake pipe that extends from a submerged intake structure 5.7 m below the average water level. The intake pipe directs water by gravity to a low lift pumping station consisting of a wet well and two submersible low lift pumps, each rated at 11 L/s (950 m3/day). These pumps are controlled by the treatment systems’ PLC and discharge to the two package plants located with the WTP.

General Characteristics

The raw water source for the treatment plant is Lake Temagami. The water from Lake Temagami is typically low in turbidity with a neutral pH and stable alkalinity. Temperature fluctuates significantly through the seasons ranging from approximately 2.5 °C in the winter to as high as 27 °C during the summer. Bacteriological analysis of the raw water indicates a source of relatively good quality. The results of chemical analysis are consistently below the Ontario Drinking Water Quality Standards.

Lake Temagami: Raw Water Characteristics

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<thead>
<tr>
<th>Characteristic</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Min</td>
<td>Max</td>
<td>Mean</td>
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<tr>
<td>E. coli (CFU/100 mL)</td>
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<td>2.27</td>
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<tr>
<td>Total Coliforms (CFU/100 mL)</td>
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<td>Colour (TCU)</td>
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</table>
Common Fluctuations

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

Threats

Potential sources of raw water contamination include fuel spills from boats, planes or highway traffic. Other sources would be the heavy recreational use, beaver activity, and train derailment.

Operational Challenges

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

Treatment System Description

Water Treatment

The treatment systems are two different package plants. One is a BCA Pre-Fabricated package treatment plant which operates automatically and the other is a Neptune Microfloc "Trident" package treatment plant which operates manually. Each plant provides chemically assisted filtration through coagulation, flocculation, sedimentation and filtration operations. Aluminum sulphate and polymer are added to the raw water upstream of the static mixer for the coagulation/flocculation process. Sodium carbonate is injected for pH adjustment and sodium hypochlorite is used for disinfection. All chemicals are added using two metering pumps. The plant is equipped with an automated monitoring system that records various components of the process.

Water Storage and Pumping Capabilities

The filtered water is then directed to two clearwells having a total capacity of 257 m³. Two high lift pumps rated at 916 m³/day direct finished water to the distribution system and an elevated tower, which maintains pressure to the distribution system. The distribution system is composed of 182 service connections, 19 fire hydrants, and 7 dead end locations. The watermains are made of cast iron and some pvc material that range in size from 6" to 8".
Emergency Power

For emergency purposes, a diesel generator set is available to provide emergency power to the entire facility in the event of a power outage.

Treatment System Process Flow Chart

Refer to Figure 1 on page 5

Description of the Distribution System Components

Temagami South is classified as a Large Municipal Residential Drinking Water System and has 182 service connections serving a nominal population of 350 residents. The distribution system is equipped with an elevated storage reservoir known as the “South Tower” which has a working storage capacity of 570 m³ and assists with maintaining water pressure in the system.

Distribution System Components Flow Chart

Refer to Figure 2 on page 5

Revision History

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<tr>
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</tr>
</tbody>
</table>
Figure 1 – Temagami South Water Treatment Plant - Process Flow Chart (2018)
Figure 2 - Temagami South Distribution System Map. Larger scale version available at the Temagami Public Works office.
1. **Purpose**

   To document the process for conducting a risk assessment to identify and assess potential hazardous events and associated hazards that could affect drinking water safety.

2. **Definitions**

   **Consequence** – the potential impact to public health and/or operation of the drinking water system if a hazard/hazardous event is not controlled

   **Control Measure** – includes any processes, physical steps or other practices that have been put in place at a drinking water system to prevent or reduce a hazard before it occurs

   **Critical Control Point (CCP)** – An essential step or point in the subject system at which control can be applied by the Operating Authority to prevent or eliminate a drinking water health hazard or reduce it to an acceptable level

   **Drinking Water Health Hazard** – means, in respect of a drinking water system,
   - a) a condition of the system or a condition associated with the system’s waters, including anything found in the waters,
     - i. that adversely affects, or is likely to adversely affect, the health of the users of the system,
     - ii. that deters or hinders, or is likely to deter or hinder, the prevention or suppression of disease, or
     - iii. that endangers or is likely to endanger public health,
   - b) a prescribed condition of the drinking water system, or
   - c) a prescribed condition associated with the system’s waters or the presence of a prescribed thing in the waters

   **Hazardous Event** – an incident or situation that can lead to the presence of a hazard

   **Hazard** – a biological, chemical, physical or radiological agent that has the potential to cause harm

   **Likelihood** – the probability of a hazard or hazardous event occurring

3. **Procedure**

   3.1 Operations Management ensures that operations personnel are assigned to conduct a risk assessment at least once every thirty-six months. At a minimum, the Risk Assessment Team must include the QEMS Representative, at least one Operator for the system and at least one member of Operations Management.

   3.2 The QEMS Representative is responsible for coordinating the risk assessment and ensuring that documents and records related to the risk assessment activities are maintained.
3.3 The Risk Assessment Team performs the risk assessment as follows:

3.3.1 OP-07 Risk Assessment and OP-08 Risk Assessment Outcomes are reviewed.

3.3.2 For each of the system’s activities/process steps, potential hazardous events and associated hazards (possible outcomes) that could impact the system’s ability to deliver safe drinking water are identified.

*The following is applicable for 36 month Risk Assessments conducted after the issuance of this procedure:*

At a minimum, potential hazardous events and associated hazards as identified in the most current version of the Ministry of the Environment and Climate Change (MOECC) document titled “Potential Hazardous Events for Municipal Residential Drinking Water Systems” (as applicable to the system type) must be considered.

3.3.3 For each of the hazardous events, control measures currently in place at the system to eliminate the hazard or prevent it from becoming a threat to public health are specified. Control measures may include alarms, monitoring procedures, standard operating procedures/emergency procedures/contingency plans, preventive maintenance activities, backup equipment, engineering controls, etc.

3.3.4 To ensure that potential drinking water health hazards are addressed and minimum treatment requirements as regulated by SDWA O. Reg. 170/03 and the MOECC’s “Procedure for Disinfection of Drinking Water in Ontario” are met, OCWA has established mandatory Critical Control Points (CCPs).

As a minimum, the following must be included as CCPs (as applicable):

- Equipment or processes required to achieve primary disinfection (e.g., chemical and/or UV disinfection system, coagulant dosing system, filters, etc.)
- Equipment or processes necessary for maintaining secondary disinfection in the distribution system
- Fluoridation system

3.3.5 Additional CCPs for the system are determined by evaluating and ranking the hazardous events for the remaining activities/process steps (i.e., those not included as OCWA’s minimum CCPs).

3.3.6 Taking into consideration existing control measures (including the reliability and redundancy of equipment), each hazardous event is assigned a value for the likelihood and a value for the consequence of that event occurring based on the following criteria:
The likelihood and consequence values are multiplied to determine the risk value (ranking) of each hazardous event. Hazardous events with a ranking of 12 or greater are considered high risk.

3.3.7 Hazardous events and rankings are reviewed and any activity/process step is identified as an additional CCP if all of the following criteria are met:

- The associated hazardous event has a ranking of 12 or greater;
- The associated hazardous event can be controlled through control measure(s);
- Operation of the control measures can be monitored and corrective actions can be applied in a timely fashion;
- Specific control limits can be established for the control measure(s); and
- Failure of the control measures would lead to immediate notification of Medical Officer of Health (MOH) or MOECC or both.
RISK ASSESSMENT

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

3.5 At least once every calendar year, the QEMS Representative facilitates the verification of the currency of the information and the validity of the assumptions used in the risk assessment in preparation for the Management Review (OP-20). When performing this review, the following may be considered:

- Process/equipment changes
- Reliability and redundancy of equipment
- Emergency situations/service interruptions
- CCP deviations
- Audit/inspection results

4. Related Documents

MOECC’s “Potential Hazardous Events for Municipal Residential Drinking Water Systems”
MOECC’s “Procedure for Disinfection of Drinking Water in Ontario”
OP-08 Risk Assessment Outcomes
OP-20 Management Review

5. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision #</th>
<th>Reason for Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019-05-28</td>
<td>0</td>
<td>Procedure issued – Information within OP-07 was originally set out in the QEMS Procedure QP-02 Risk Assessment and Risk Assessment Outcomes (revision 3, dated October 29, 2013). Revised Purpose to reflect element 7 requirements only. Included minimum requirements for the Risk Assessment Team (QEMS Representative, at least one operator for the system and at least one member of Operation Management. Clarified role of QEMS Representative in coordinating the risk assessment and maintaining documents and records. Re-worded procedure for performing the risk assessment (process itself remains essentially unchanged). Included reference to MOECC’s “Potential Hazardous Events for Municipal Residential Drinking Water Systems”. Removed requirements for documenting the outcomes of the risk assessment (now covered in OP-08). Changed annual review to at least once every calendar year and included potential considerations when performing the review.</td>
</tr>
</tbody>
</table>
1. Purpose

To document the outcomes of the risk assessment conducted as per OP-07 Risk Assessment.

2. Definitions

*Critical Control Point (CCP)* – An essential step or point in the subject system at which control can be applied by the Operating Authority to prevent or eliminate a drinking water health hazard or reduce it to an acceptable level.

*Critical Control Limit (CCL)* – The point at which a Critical Control Point response procedure is initiated.

3. Procedure

3.1 The QEMS Representative is responsible for updating the information in OP-08A (Temagami North DWS) and OP-08B (Temagami South DWS) Summary of Risk Assessment Outcomes as required.

3.2 The results of the risk assessment conducted as per OP-07 are documented in Table 1 of OP-08A and OP-08B. This includes:

- Identified potential hazardous events and associated hazards (possible outcomes) for each of the system’s activities/process steps;

  *Note (applicable for 36 month Risk Assessments conducted after the issuance of this procedure): Hazards listed in the MOECC’s “Potential Hazardous Events for Municipal Residential Drinking Water Systems” are indicated in the appropriate column using the reference numbers in Table 4 of OP-08A and OP-08B.*

- Identified control measures to address the potential hazards and hazardous events; and

- Assigned rankings for the hazardous events (likelihood x consequence = risk value) and whether the hazardous event is a Critical Control Point (CCP) (mandatory or additional).

Note: If the hazardous event is ranked as 12 or higher and it is not being identified as a CCP, provide rationale as to why it does not meet the criteria set out in section 3.3.7 of OP-07).

3.3 Operations Management is responsible for ensuring that for each CCP:

- Critical Control Limits (CCLs) are set;

- Procedures and processes to monitor the CCLs are established; and

- Procedures to respond to, report and record deviations from the CCLs are implemented.

The identified CCPs, their respective CCLs and associated procedures are documented in Table 2 of OP-08A and OP-08B.
3.4 A summary of the results of the annual review/36-month risk assessment is recorded in Table 3 of OP-08A and OP-08B.

3.5 Operations Management considers the risk assessment outcomes during the review of the adequacy of the infrastructure (Refer to OP-14 Review and Provision of Infrastructure).

4. Related Documents

MOECC’s “Potential Hazardous Events for Municipal Residential Drinking Water Systems”
OP-07 Risk Assessment
OP-08A Summary of Risk Assessment Outcomes
OP-14 Review and Provision of Infrastructure

5. Revision History

<table>
<thead>
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<td>Procedure issued – Information within OP-08 was originally set out in the QEMS Procedure QP-02 Risk Assessment and Risk Assessment Outcomes (revision 3, dated October 29, 2013). Clarified role of QEMS Representative in updating the information in OP-08A and OP-08B. Summary of Risk Assessment Outcomes. Included requirements for how to document the risk assessment outcomes using the tables in OP-08A&amp;B. Clarified responsibility of Operations Management to ensure Critical Control Limits are set and related procedures are developed. Included reference to OP-14 Review and Provision of Infrastructure to emphasize the need for Operations Management to review the risk assessment outcomes during the infrastructure review.</td>
</tr>
</tbody>
</table>
**Table 1 - Risk Assessment Table**

*Note: Processes referred to in OP-07 Risk Assessment and OP-08 Risk Assessment Outcomes must be identified as mandatory Critical Control Points (CCPs) as applicable for all OCWA-operated facilities. Mandatory CCPs are not required to be ranked.*

<table>
<thead>
<tr>
<th>Activity/Process Step</th>
<th>Description of Hazardous Event</th>
<th>Possible Outcome (Hazards)</th>
<th>Existing Control Measures</th>
<th>Likelihood</th>
<th>Consequence</th>
<th>Risk Value</th>
<th>CCP?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Source/Intake</td>
<td>Spill of biological or chemical material into Net Lake (Railway, beaver activity, water crafts, or lagoon surcharge)</td>
<td>Contamination of source water</td>
<td>Monitor and sample Site specific Environmental Emergency Procedure (EEP) for Off-site Chemical/Fuel Spill Site specific EEP for Contaminated Raw Water</td>
<td>3</td>
<td>3</td>
<td>9</td>
<td>![ ] No</td>
</tr>
<tr>
<td>Breakage/blockage of intake pipe</td>
<td>Loss of water supply</td>
<td>None – staff would take appropriate response measures - alternate intake pipe, supply from tower</td>
<td></td>
<td>2</td>
<td>3</td>
<td>6</td>
<td>![ ] Yes – Mandatory CCP ![ ] Yes – Additional CCP identified for facility ![ ] No</td>
</tr>
<tr>
<td>Spring/fall turnover</td>
<td>Increased demand on process operations such as chemical optimization for changes in pH, alkalinity, temperature and turbidity.</td>
<td></td>
<td>Staff would keep higher alkalinity and make appropriate operational changes Raw Water Turbidity Analyzer Treated Water Turbidity Alarms</td>
<td>4</td>
<td>2</td>
<td>8</td>
<td>![ ] Yes – Mandatory CCP ![ ] Yes – Additional CCP identified for facility ![ ] No</td>
</tr>
<tr>
<td>Low Lift Pumps</td>
<td>Low lift pump failures</td>
<td>Loss of water supply</td>
<td>Redundancy (2 pumps), scheduled maintenance activities, back-up generator for loss of power situations, alarms for BCA and low clearwell level Site specific EEP for Low Lift Pump Failure</td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>![ ] Yes – Mandatory CCP ![ ] Yes – Additional CCP identified for facility ![ ] No</td>
</tr>
<tr>
<td>Activity/Process Step</td>
<td>Description of Hazardous Event</td>
<td>Possible Outcome (Hazards)</td>
<td>Existing Control Measures</td>
<td>Likelihood</td>
<td>Consequence</td>
<td>Risk Value</td>
<td>CCP?</td>
</tr>
<tr>
<td>-----------------------</td>
<td>--------------------------------</td>
<td>-----------------------------</td>
<td>---------------------------</td>
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<td>------</td>
</tr>
<tr>
<td>Filtration Process (includes flocculation, coagulation, dual media gravity filters)</td>
<td>Aluminum Sulphate feed pump failure</td>
<td>Ineffective removal of pathogens (minimum treatment requirements not met)</td>
<td>Redundancy (1 back-up pump), automatic switchover, operator inspections (tank levels, calculate dosage), scheduled maintenance activities, chemical pump failure alarm Site specific EEP for Aluminum Sulphate Pump Failure</td>
<td>Yes – Mandatory CCP</td>
<td>Yes – Additional CCP identified for facility</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Soda Ash feed pump failure (pre and post treatment)</td>
<td>Lowered pH, ineffective coagulation process, potential for increased turbidity and/or AWQI</td>
<td>Redundancy (1 back-up pump), automatic switchover, operator inspections (tank levels, calculate dosage), scheduled maintenance activities, chemical pump failure alarm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Polymer feed pump failure</td>
<td>Increased turbidity, ineffective removal of pathogens</td>
<td>Redundancy (1 back-up pump), automatic switchover, operator inspections (tank levels, calculate dosage), scheduled maintenance activities, chemical pump failure alarm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Filter breakthrough</td>
<td>Increased turbidity, ineffective removal of pathogens, potential for AWQI</td>
<td>On-line monitoring of filter effluent turbidity, alarm on high turbidity, redundancy (2 filters), regular backwashes, scheduled maintenance activities, visual inspection of media Site specific EEP for Reporting and Responding to Adverse Turbidity in Large Municipal Residential Systems</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Backwash system failure</td>
<td>Increased turbidity, ineffective removal of pathogens, potential for loss of treated water supply</td>
<td>Pump failure alarms, two backwash pumps (redundancy), on-line monitoring, scheduled maintenance activities, alternate system for backwashing (manual) Site specific EEP for Backwash Failure (Filters)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blower Failure</td>
<td>Backwash System Failure and increased turbidity</td>
<td>Back up blower available, 2 backwash pumps (redundancy), site specific SOP for</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activity/Process Step</td>
<td>Description of Hazardous Event</td>
<td>Possible Outcome (Hazards)</td>
<td>Existing Control Measures</td>
<td>Likelihood</td>
<td>Consequence</td>
<td>Risk Value</td>
<td>CCP?</td>
</tr>
<tr>
<td>-----------------------</td>
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<td>--------------------------</td>
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</tr>
<tr>
<td>Backwash Failure</td>
<td>Turbidity meter failure</td>
<td>Unknown turbidity levels, potential for AWQI</td>
<td>Filter redundancy (take filter out of service until analyzer replaced/repaired), scheduled maintenance activities, in-house readings, operator inspections</td>
<td>✔️</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Desludge valve failure</td>
<td>Plugged filter and potentially high turbidity</td>
<td>Manually open valve, turbidity monitoring, turbidity alarm, operator maintenance checks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Clearwells            | Low level                      | Inadequate contact time for primary disinfection Inadequate treated water supply | Redundancy (3 clearwells), schedule maintenance and inspection activities, low level clearwell alarm, town ordered water conservation or ban Site specific EEP for Water Supply Shortage | | | | ✔️ – Mandatory CCP
|                       | Clearwell out of service for repair, maintenance | Inadequate contact time for primary disinfection | Three-celled clearwell with isolation valves, increase chlorine dosage into clearwell, schedule controlled maintenance plan | | | | |
| Sodium Hypochlorite System (for primary disinfection) | Chlorine feed pump failure | Loss of disinfection Low chlorine residual Inadequate inactivation of pathogens Potential for AWQI | Redundancy (1 standby and 1 back-up pumps), on-line monitoring with alarms, in-house residual testing and dosage calculations, scheduled maintenance activities, spare pumps are also available within the hub Site specific EEP for Chlorine Pump Failure, Site specific EEP for Low or High Chlorine Residual in Treated Water, Site specific Standard Operating Procedure (SOP) for CT, EEP for Reporting and Responding to Adverse Chlorine Residuals in Large Municipal Residential Systems, Contingency Plan for Adverse | | | | ✔️ – Mandatory CCP

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<table>
<thead>
<tr>
<th>Activity/Process Step</th>
<th>Description of Hazardous Event</th>
<th>Possible Outcome (Hazards)</th>
<th>Existing Control Measures</th>
<th>Likelihood</th>
<th>Consequence</th>
<th>Risk Value</th>
<th>CCP?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Analyzer failure</td>
<td>Unknown chlorine residual levels, potential for AWQI</td>
<td>Low level Alarm, in-house residual testing, scheduled maintenance activities, back-up analyzers Site specific SOP for CT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low supply of sodium hypochlorite</td>
<td>Inadequate disinfection, potential for AWQI</td>
<td>Operator checks, chemical available within hub</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tower</td>
<td>Tower out of service for repair, maintenance</td>
<td>Lowered fire fighting capability</td>
<td>Supply water from clearwells, scheduled controlled maintenance plan, Site specific EEP for Tower Low Level</td>
<td>2</td>
<td>3</td>
<td>6</td>
<td>Yes – Mandatory CCP Yes – Additional CCP identified for facility No</td>
</tr>
<tr>
<td>High Lift</td>
<td>High lift pump failures</td>
<td>Low pressure in distribution system, possible contamination due to infiltration</td>
<td>Redundancy (2 pumps), scheduled maintenance activities, operational control, on-line monitoring of discharge pressure, alarms for low pressure, tower as a back-up for pressure and supply Site specific EEP for High Lift Pump Failure, EEP for Low Pressure Events in the Distribution System.</td>
<td>2</td>
<td>3</td>
<td>6</td>
<td>Yes – Mandatory CCP Yes – Additional CCP identified for facility No</td>
</tr>
<tr>
<td>Secondary Disinfection</td>
<td>Loss of residual in distribution system</td>
<td>Failure to control biofilm and pathogens (long term), AWQI</td>
<td>Continuous on-line monitoring of chlorine residual into the distribution system, System-wide residual testing, Regulatory scheduled maintenance (performed by municipality), Alarms for low/high chlorine residual in water entering distribution system, EEP for Reporting and Responding to Adverse Chlorine Residuals in Large Municipal Residential Systems</td>
<td></td>
<td></td>
<td></td>
<td>Yes – Mandatory CCP Yes – Additional CCP identified for facility No</td>
</tr>
<tr>
<td>Activity/Process Step</td>
<td>Description of Hazardous Event</td>
<td>Possible Outcome (Hazards)</td>
<td>Existing Control Measures</td>
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<td>Consequence</td>
<td>Risk Value</td>
<td>CCP?</td>
</tr>
<tr>
<td>-----------------------</td>
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</tr>
<tr>
<td><strong>Water Treatment System</strong></td>
<td>Power failure</td>
<td>Loss of treated water supply</td>
<td>Back-up diesel generator, Scheduled maintenance activities for back-up generator, Site specific EEP for Power Failure of Long Duration</td>
<td>4</td>
<td>2</td>
<td>8</td>
<td>☑ Yes – Mandatory CCP ☑ Yes – Additional CCP identified for facility ☑ No</td>
</tr>
<tr>
<td><strong>Standby power failure</strong></td>
<td>Loss of treated water supply</td>
<td>Power failure alarm, scheduled maintenance, portable generator available within the NEO Hub (within 4-8 hours), Site specific EEP for Standby Power Failure.</td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>☑ Yes – Mandatory CCP ☑ Yes – Additional CCP identified for facility ☑ No</td>
<td></td>
</tr>
<tr>
<td><strong>Vandalism/terrorism</strong></td>
<td>Contamination of the water supply, Damage to critical equipment</td>
<td>Locked (water plant , Signage, Visited daily by operational staff, Site specific Environmental Emergency Procedure for Vandalism or Suspected Unauthorized Entry.</td>
<td>2</td>
<td>4</td>
<td>8</td>
<td>☑ Yes – Mandatory CCP ☑ Yes – Additional CCP identified for facility ☑ No</td>
<td></td>
</tr>
<tr>
<td><strong>Distribution System</strong></td>
<td>Adverse Water Quality Result as described in O. Reg. 170/03</td>
<td>Potential for unsafe drinking water</td>
<td>Site specific SOP Sampling Schedule EEP for Reporting and Responding to Adverse Results in Large Municipal Residential Systems (several EEPs)</td>
<td>3</td>
<td>4</td>
<td>12</td>
<td>☑ Yes – Mandatory CCP ☑ Yes – Additional CCP identified for facility ☑ No – no control limits</td>
</tr>
<tr>
<td><strong>Watermains</strong></td>
<td>Watermain structural failure/breaks</td>
<td>Contamination, loss of pressure, loss of supply, road damage</td>
<td>Notification/complaints from consumers, increased demand in treated water, increase in waste water collection, SOP for main waterline and waterline repair</td>
<td>4</td>
<td>2</td>
<td>8</td>
<td>☑ Yes – Mandatory CCP ☑ Yes – Additional CCP identified for facility ☑ No</td>
</tr>
<tr>
<td><strong>Valves</strong></td>
<td>Failure</td>
<td>Loss of control, line breaks and/or contamination, loss of water supply</td>
<td>Maintenance program, Response to consumer complaints</td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>☑ Yes – Mandatory CCP ☑ Yes – Additional CCP identified for facility ☑ No</td>
</tr>
<tr>
<td><strong>Flushing (clean out pipes, remove accumulation)</strong></td>
<td>Failure to flush</td>
<td>Contamination, loss of supply, loss of fire protection</td>
<td>Maintenance program, Training, Procedures for flushing</td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>☑ Yes – Mandatory CCP ☑ Yes – Additional CCP identified for facility ☑ No</td>
</tr>
<tr>
<td>Activity/Process Step</td>
<td>Description of Hazardous Event</td>
<td>Possible Outcome (Hazards)</td>
<td>Existing Control Measures</td>
<td>Likelihood</td>
<td>Consequence</td>
<td>Risk Value</td>
<td>CCP?</td>
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</tr>
<tr>
<td>Connection, hydrants, valves, constructions, etc.</td>
<td>Accident, vandalism</td>
<td>Contamination, loss of supply</td>
<td>Inspection, Notification/complaints from consumers, Increase in water/wastewater usage</td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>No</td>
</tr>
<tr>
<td>Service Connections</td>
<td>Cross connection</td>
<td>Contamination</td>
<td>Consumer notification/complaints Distribution system microbiological testing</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>Yes – Mandatory CCP Yes – Additional CCP identified for facility No</td>
</tr>
<tr>
<td>Structural failure/breaks</td>
<td>Contamination, loss of pressure, loss of supply</td>
<td></td>
<td>Consumer notification/complaints</td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>Yes – Mandatory CCP Yes – Additional CCP identified for facility No</td>
</tr>
<tr>
<td>Maintain System Pressure</td>
<td>Major fire</td>
<td>Contamination, loss of pressure</td>
<td>Emergency management, Notification by fire department for major fires,</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>Yes – Mandatory CCP Yes – Additional CCP identified for facility No</td>
</tr>
<tr>
<td>New Construction</td>
<td>Sub-standard construction and/or commissioning</td>
<td>Contamination</td>
<td>AWWA guidelines, testing, Provincial Standard Inspection, training</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>Yes – Mandatory CCP Yes – Additional CCP identified for facility No</td>
</tr>
<tr>
<td>Temporary Water Distribution System (temporary system put in place during construction)</td>
<td>Infiltration</td>
<td>Contamination</td>
<td>AWWA guidelines, testing, Provincial Standard Inspection, training</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>Yes – Mandatory CCP Yes – Additional CCP identified for facility No</td>
</tr>
</tbody>
</table>
### Table 2 - Identified Critical Control Points (CCPs)

<table>
<thead>
<tr>
<th>CCP</th>
<th>Critical Control Limits</th>
<th>Monitoring Procedures</th>
<th>Response, Reporting and Recording Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Filtration Process</td>
<td><strong>Alum, Soda Ash and Polymer Feed</strong></td>
<td>• SCADA (continuous online analyzers)</td>
<td>Refer to:</td>
</tr>
<tr>
<td></td>
<td>Both pumps fail an alarm is initiated</td>
<td>• Operator checks including dosage calculations</td>
<td>• Site specific EEP for Reporting and Responding to Adverse Turbidity in Large Municipal Residential Systems</td>
</tr>
<tr>
<td></td>
<td><strong>Filter Effluent Turbidity Alarms (Filters 1-2)</strong></td>
<td>• Redundancy (2 filters)</td>
<td>• Site specific EEP for Backwash Failure (Filters)</td>
</tr>
<tr>
<td></td>
<td>High set point = 1.0 NTU</td>
<td>• Trend review and sign-off as per O. Reg. 170/03</td>
<td></td>
</tr>
<tr>
<td>Sodium Hypochlorite System</td>
<td><strong>Free Chlorine Residual Alarms - Treated Alarms</strong></td>
<td>Refer to:</td>
<td></td>
</tr>
<tr>
<td>(Chemical Feed)</td>
<td>Low set point ≥ 0.85 mg/L</td>
<td>• Site specific SOP for CT</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High set point = 3.50 mg/L</td>
<td>• Site specific EEP for Chlorine Pump Failure</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Site specific EEP for Low or High Chlorine Residual in Treated Water</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• EEP for Reporting and Responding to Adverse Chlorine Residuals in Large Municipal Residential Systems</td>
<td></td>
</tr>
<tr>
<td>Clearwell</td>
<td><strong>Clearwell Level Alarms – Plant</strong></td>
<td>Refer to:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clearwell No. 1:</td>
<td>• Site specific SOP for CT</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Low set point = 1.30 m</td>
<td>• Site specific EEP for Water Supply Shortage</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High set point = 2.98 m</td>
<td>• CP for Unsafe Water</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clearwell No. 2+3:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Low set point = 1.75 m</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>High set point = 2.98 m</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary Disinfection</td>
<td><strong>Free Chlorine Residual - Distribution</strong></td>
<td>Refer to:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Low = 0.05 mg/L</td>
<td>• EEP for Reporting and Responding to Adverse Chlorine Residuals in Large Municipal Residential Systems</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High = 4.0 mg/L</td>
<td>• Distribution chlorine residuals monitored as per O. Reg. 170/03</td>
<td></td>
</tr>
</tbody>
</table>
Table 3 - Record of Annual Review/36-Month Risk Assessment

The Drinking Water Quality Management Standard (DWQMS) requires that the currency of the information and the validity of the assumptions used in the risk assessment be verified at least once a year. In addition, the risk assessment must be conducted at least once every thirty-six months. Refer to OP-07 and OP-08.

<table>
<thead>
<tr>
<th>Date of Activity</th>
<th>Type of Activity</th>
<th>Participants</th>
<th>Summary of Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009-08-11</td>
<td>Risk Assessment</td>
<td>Amanda Dubuc (PCT), Ilona Bruneau (PCT), Michael Del Monte (Operations Manager), Ed Hillman (ORO)</td>
<td>Conducted initial risk assessment.</td>
</tr>
<tr>
<td>2009-08-31</td>
<td>Review</td>
<td>Amanda Dubuc (PCT)</td>
<td>Desktop review prior to submission of Partial Accreditation application. No changes.</td>
</tr>
<tr>
<td>2010-07-14</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Eric Nielson (Senior Operations Manager)</td>
<td>Review during Internal Audit. No changes.</td>
</tr>
<tr>
<td>2010-10-14</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Michael Del Monte (Operations Manager), Tony Janssen (Senior Operations Manager)</td>
<td>Review during management review meeting. No changes.</td>
</tr>
<tr>
<td>2011-09-15</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Ilona Bruneau (PCT), Eric Nielson (Senior Operations Manager), Michael Del Monte (Operations Manager), Tony Janssen (Senior Operations Manager), Claude Mongrain (ORO)</td>
<td>Review during Internal Audit. No changes.</td>
</tr>
<tr>
<td>2011-12-20</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Eric Nielson (Senior Operations Manager), Michael Del Monte (Operations Manager), Tony Janssen (Senior Operations Manager)</td>
<td>Review during management review meeting. No changes.</td>
</tr>
<tr>
<td>2012-08-30</td>
<td>Risk Assessment</td>
<td>Amanda Dubuc (PCT), Claude Mongrain (ORO)</td>
<td>Conducted risk assessment. Several changes; see revision history.</td>
</tr>
<tr>
<td>2012-12-04</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Eric Nielson (Senior Operations Manager), Michael Del Monte (Operations Manager), Tony Janssen (Senior Operations Manager)</td>
<td>Review during management review meeting. No changes.</td>
</tr>
<tr>
<td>2013-09-26</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Patrick Dinel (Operator)</td>
<td>Review during Internal Audit. Changes to Table 2.</td>
</tr>
<tr>
<td>2013-10-29</td>
<td>Risk Assessment</td>
<td>Amanda Dubuc (PCT), Claude Mongrain (ORO)</td>
<td>Conducted risk assessment. Several changes; see revision history.</td>
</tr>
</tbody>
</table>
### Date of Activity | Type of Activity | Participants | Summary of Results
---|---|---|---
2016-09-20 | Risk Assessment Re-Do & Review | Rebecca Marshall (PCT), Claude Mongrain (ORO), Pat Dinel, Chris Barkhouse, Ed Hillman, Rico Guindon | Conducted risk assessment during the internal audit. See revision history for changes.|
2018-10-31 | Review | Joshua Gravelle (PCT), Bryce Logan (ORO) | Reviewed. See revision history for changes.|

### Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision</th>
<th>Description of Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009-08-11</td>
<td>0</td>
<td>Initial risk assessment conducted</td>
</tr>
<tr>
<td>2011-09-07</td>
<td>1</td>
<td>Template revised to include ‘Record of Annual Review/36-Month Risk Assessment’ (Table 3)</td>
</tr>
<tr>
<td>2012-10-30</td>
<td>2</td>
<td>Added ‘BCA alarm’ control measure to low lift pumps, removed ‘note’ under polymer feed pump, added ‘visual inspection of media’ control measure to filter breakthrough, added ‘BCA alarm’ control measure to backwash system failure, added ‘desludge valve failure’ as a hazardous event with the filtration process step, fixed a typo under clearwell hazardous event, re-ranked the likelihood and consequence for tower out of service, added ‘tower provides pressure and supply when high lifts off’ control measure to high lift failure, removed ‘low fuel level alarm’ and re-ranked the likelihood and consequence for power failure, added ‘standby power failure’ as a hazardous event with the water treatment system process step, added ‘Soda Ash and Polymer Feed’ in Table 2 as part of the filtration process CCP, and changed Operations Manager title to Senior Operations Manager and Cluster Manager title to Operations Manager in Table 3.</td>
</tr>
<tr>
<td>2013-06-24</td>
<td>3</td>
<td>Added review during management review meeting in Table 3.</td>
</tr>
<tr>
<td>2013-08-09</td>
<td>4</td>
<td>Updated the CCP set points in Table 2 to reflect the actual set points at the water treatment plant and in response to the non-conformance item from the onsite external audit.</td>
</tr>
<tr>
<td>2013-10-29</td>
<td>5</td>
<td>Added risk assessment processes for the distribution system, as the two systems (treatment and distribution) are under one operating authority. Changed the system name to Temagami Drinking Water System.</td>
</tr>
<tr>
<td>2017-06-19</td>
<td>6</td>
<td>Added Blower failure as a hazardous event under filtration. Added spare pumps as a control measure to chlorine feed failure. Changed chlorine low set point to ≥0.85 from 0.82.</td>
</tr>
<tr>
<td>2018-10-31</td>
<td>7</td>
<td>Updated clearwells to a critical control point and updated table 2 to include clearwell and relevant EEP/SOPs with alarm setpoints.</td>
</tr>
</tbody>
</table>
Table 1 - Risk Assessment Table

Note: Processes referred to in OP-07 Risk Assessment and OP-08 Risk Assessment Outcomes must be identified as mandatory Critical Control Points (CCPs) as applicable for all OCWA-operated facilities. Mandatory CCPs are not required to be ranked.

<table>
<thead>
<tr>
<th>Activity/Process Step</th>
<th>Description of Hazardous Event</th>
<th>Possible Outcome (Hazards)</th>
<th>Existing Control Measures</th>
<th>Likelihood</th>
<th>Consequence</th>
<th>Risk Value</th>
<th>CCP?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Source/Intake</td>
<td>Spill of biological or chemical material into Lake Temagami (Railway, highway, planes)</td>
<td>Contamination of source water</td>
<td>Monitor and sample, online raw water pH, turbidity and temperature monitoring, Site specific Environmental Emergency Procedure (EEP) for Off-site Chemical/Fuel Spill Site specific EEP for Contaminated Raw Water</td>
<td>3</td>
<td>3</td>
<td>9</td>
<td>Yes – Mandatory CCP Yes – Additional CCP identified for facility No</td>
</tr>
<tr>
<td>Breakage/blockage of intake pipe</td>
<td>Loss of water supply</td>
<td>None – staff would take appropriate response measures - alternate intake pipe, supply from tower</td>
<td></td>
<td>1</td>
<td>2</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Spring/fall turnover</td>
<td>Increased demand on process operations such as chemical optimization for changes in pH, alkalinity, temperature and turbidity.</td>
<td></td>
<td>Staff would keep higher alkalinity and make appropriate operational changes Raw Water Turbidity analyzer Treated Water Turbidity Alarms</td>
<td>4</td>
<td>2</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>Low Lift Pumps</td>
<td>Low lift pump failures</td>
<td>Loss of water supply</td>
<td>Redundancy (2 pumps), scheduled maintenance activities, back-up generator for loss of power situations, alarms for power loss and low clearwell level Site specific EEP for Low Lift Pump Failure</td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>Yes – Mandatory CCP Yes – Additional CCP identified for facility No</td>
</tr>
<tr>
<td>Activity/ Process Step</td>
<td>Description of Hazardous Event</td>
<td>Possible Outcome (Hazards)</td>
<td>Existing Control Measures</td>
<td>Likelihood</td>
<td>Consequence</td>
<td>Risk Value</td>
<td>CCP?</td>
</tr>
<tr>
<td>------------------------</td>
<td>--------------------------------</td>
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<td>------------</td>
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</tr>
<tr>
<td>Filtration Process (includes flocculation, coagulation, dual media gravity filters)</td>
<td>Aluminum Sulphate feed pump failure</td>
<td>Ineffective removal of pathogens (minimum treatment requirements not met)</td>
<td>Redundancy (1 back-up pump), automatic switchover, operator inspections (tank levels, calculate dosage), scheduled maintenance activities, chemical pump failure alarm Site specific EEP for Aluminum Sulphate Pump Failure</td>
<td>Yes – Mandatory CCP</td>
<td>Yes – Additional CCP identified for facility</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Soda Ash feed pump failure (pre and post treatment)</td>
<td>Lowered pH and alkalinity, ineffective coagulation process, potential for increased turbidity and/or AWQI</td>
<td>Redundancy (1 back-up pump), automatic switchover, operator inspections (tank levels, calculate dosage), scheduled maintenance activities, chemical pump failure alarm</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Polymer feed pump failure</td>
<td>Increased turbidity, ineffective removal of pathogens</td>
<td>Redundancy (1 back-up pump), automatic switchover, operator inspections (tank levels, calculate dosage), scheduled maintenance activities, chemical pump failure alarm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Filter breakthrough</td>
<td>Increased turbidity, ineffective removal of pathogens, potential for AWQI</td>
<td>On-line monitoring of filter effluent turbidity, alarm on high turbidity, redundancy (2 filters), second filter needs to be run in manual, regular backwashes, scheduled maintenance activities, visual inspection of media Site specific EEP for Reporting and Responding to Adverse Turbidity in Large Municipal Residential Systems</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Backwash system failure</td>
<td>Increased turbidity, ineffective removal of pathogens, potential for loss of treated water supply</td>
<td>Pump failure alarms, on-line monitoring, scheduled maintenance activities, alternate system for backwashing (manual), BCA alarm Site specific EEP for Backwash Failure (Filters)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blower Failure</td>
<td>Backwash System Failure and increased turbidity</td>
<td>Back up blower available, 2 backwash pumps (redundancy), site specific SOP for Backwash Failure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activity/Process Step</td>
<td>Description of Hazardous Event</td>
<td>Possible Outcome (Hazards)</td>
<td>Existing Control Measures</td>
<td>Likelihood</td>
<td>Consequence</td>
<td>Risk Value</td>
<td>CCP?</td>
</tr>
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</tr>
<tr>
<td>Turbidity meter failure</td>
<td>Unknown turbidity levels, potential for AWQI</td>
<td>Filter redundancy (take filter out of service until analyzer replaced/repairsed), scheduled maintenance activities, in-house readings, operator inspections</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Desludge valve failure</td>
<td>Plugged filter and potentially high turbidity</td>
<td>Manually open valve, turbidity monitoring, turbidity alarm, operator maintenance checks</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clearwells</td>
<td>Low level</td>
<td>Inadequate contact time for primary disinfection Inadequate treated water supply</td>
<td>Redundancy (2 clearwells), schedule maintenance and inspection activities, low level clearwell alarm, town ordered water conservation or ban Site specific EEP for Water Supply Shortage</td>
<td></td>
<td></td>
<td></td>
<td>Yes – Mandatory CCP</td>
</tr>
<tr>
<td></td>
<td>Clearwell out of service for repair, maintenance</td>
<td>Inadequate contact time for primary disinfection</td>
<td>Three-celled clearwell with isolation valves, increase chlorine dosage into clearwell, schedule controlled maintenance plan</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sodium Hypochlorite System (for primary disinfection)</td>
<td>Chlorine feed pump failure</td>
<td>Loss of disinfection Low chlorine residual Inadequate inactivation of pathogens Potential for AWQI</td>
<td>Redundancy (1 standby and 1 back-up pumps), on-line monitoring with alarms, in-house residual testing and dosage calculations, scheduled maintenance activities, spare pumps with the hub Site specific EEP for Chlorine Pump Failure, Site specific EEP for Low or High Chlorine Residual in Treated Water, Site specific Standard Operating Procedure (SOP) for CT, EEP for Reporting and Responding to Adverse Chlorine Residuals in Large Municipal Residential Systems, Contingency Plan for Adverse Water/Potential and/or Unsafe Water.</td>
<td></td>
<td></td>
<td></td>
<td>Yes – Mandatory CCP</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Activity/Process Step</th>
<th>Description of Hazardous Event</th>
<th>Possible Outcome (Hazards)</th>
<th>Existing Control Measures</th>
<th>Likelihood</th>
<th>Consequence</th>
<th>Risk Value</th>
<th>CCP?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Analyzer failure</td>
<td>Unknown chlorine residual levels, potential for AWQI</td>
<td>Low level Alarm, in-house residual testing, scheduled maintenance activities, back-up analyzers, Site specific SOP for CT, EEP for adverse chlorine residual.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low supply of sodium hypochlorite</td>
<td>Inadequate disinfection, potential for AWQI</td>
<td>Operator checks, chemical available within hub</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tower</td>
<td>Tower out of service for repair, maintenance</td>
<td>Lowered fire fighting capability</td>
<td>Supply water from clearwells, scheduled controlled maintenance plan, Site specific EEP for Tower Low Level</td>
<td>2</td>
<td>3</td>
<td>6</td>
<td>No</td>
</tr>
<tr>
<td>High Lift</td>
<td>High lift pump failures</td>
<td>Low pressure in distribution system, possible contamination due to infiltration</td>
<td>Redundancy (2 pumps), scheduled maintenance activities, operational control, on-line monitoring of discharge pressure, alarms for low pressure, tower provides pressure and supply when high lifts are off, Site specific EEP for High Lift Pump Failure, EEP for Low Pressure Events in the Distribution System.</td>
<td>2</td>
<td>3</td>
<td>6</td>
<td>No</td>
</tr>
<tr>
<td>Secondary Disinfection</td>
<td>Loss of residual in distribution</td>
<td>Failure to control biofilm and pathogens (longterm), AWQI</td>
<td>Continuous on-line monitoring of chlorine residual into the distribution system, System-wide residual testing, Regulatory scheduled maintenance (performed by municipality), Alarms for low/high chlorine residual in water entering distribution system, EEP for Reporting and Responding to Adverse Chlorine Residuals in Large Municipal Residential Systems.</td>
<td></td>
<td></td>
<td></td>
<td>Yes – Mandatory CCP No</td>
</tr>
<tr>
<td>Water Treatment</td>
<td>Power failure</td>
<td>Loss of treated water</td>
<td>Back-up diesel generator</td>
<td>4</td>
<td>2</td>
<td>8</td>
<td>Yes – Mandatory CCP</td>
</tr>
<tr>
<td>Activity/Process Step</td>
<td>Description of Hazardous Event</td>
<td>Possible Outcome (Hazards)</td>
<td>Existing Control Measures</td>
<td>Likelihood</td>
<td>Consequence</td>
<td>Risk Value</td>
<td>CCP?</td>
</tr>
<tr>
<td>-----------------------</td>
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<td>---------------------------</td>
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</tr>
<tr>
<td>System</td>
<td></td>
<td></td>
<td>Scheduled maintenance activities for back-up generator Low fuel level alarm (gen-set), Site specific EEP for Power Failure of Long Duration Site specific EEP for Standby Power Failure</td>
<td></td>
<td></td>
<td></td>
<td>Yes – Additional CCP identified for facility No</td>
</tr>
<tr>
<td>Standby power failure</td>
<td>Loss of treated water supply</td>
<td></td>
<td>Power failure alarm, scheduled maintenance activities, portable generator available within 4-8 hours</td>
<td>3 2 6</td>
<td></td>
<td></td>
<td>Yes – Mandatory CCP No</td>
</tr>
<tr>
<td>Distribution System</td>
<td>Adverse Water Quality Result as described in O. Reg. 170/03</td>
<td>Potential for unsafe drinking water</td>
<td>Site specific SOP Sampling Schedule EEP for Reporting and Responding to Adverse Results in Large Municipal Residential Systems (several EEPs)</td>
<td>3 4 12</td>
<td></td>
<td></td>
<td>Yes – Mandatory CCP No – no control measures</td>
</tr>
<tr>
<td>Watermains</td>
<td>Watermain structural failure/breaks</td>
<td>Contamination, loss of pressure, loss of supply, road damage</td>
<td>Notification/complaints from consumers, increased demand in treated water, increase in waste water collection, SOP for main waterline and waterline repair</td>
<td>4 2 8</td>
<td></td>
<td></td>
<td>Yes – Mandatory CCP No</td>
</tr>
<tr>
<td>Valves</td>
<td>Failure</td>
<td>Loss of control, line breaks and/or contamination, loss of water supply</td>
<td>Maintenance program, Response to consumer complaints</td>
<td>3 2 6</td>
<td></td>
<td></td>
<td>Yes – Mandatory CCP No</td>
</tr>
<tr>
<td>Flushing (clean out pipes, remove accumulation)</td>
<td>Failure to flush</td>
<td>Contamination, loss of supply, loss of fire protection</td>
<td>Maintenance program, Training, Procedures for flushing</td>
<td>3 2 6</td>
<td></td>
<td></td>
<td>Yes – Mandatory CCP No</td>
</tr>
<tr>
<td>Connection, hydrants, valves, constructions, etc.</td>
<td>Accident, vandalism</td>
<td>Contamination, loss of supply</td>
<td>Inspection, Notification/complaints from consumers, Increase in water/wastewater usage</td>
<td>3 2 6</td>
<td></td>
<td></td>
<td>Yes – Mandatory CCP No</td>
</tr>
<tr>
<td>Activity/Process Step</td>
<td>Description of Hazardous Event</td>
<td>Possible Outcome (Hazards)</td>
<td>Existing Control Measures</td>
<td>Likelihood</td>
<td>Consequence</td>
<td>Risk Value</td>
<td>CCP?</td>
</tr>
<tr>
<td>-----------------------</td>
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<td>------</td>
</tr>
<tr>
<td>Service Connections</td>
<td>Cross connection</td>
<td>Contamination</td>
<td>Consumer notification/complaints, Distribution system microbiological testing</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>☐ No</td>
</tr>
<tr>
<td></td>
<td>Structural failure/breaks</td>
<td>Contamination, loss of pressure, loss of supply</td>
<td>Consumer notification/complaints</td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>☐ No</td>
</tr>
<tr>
<td>Maintain System Pressure</td>
<td>Major fire</td>
<td>Contamination, loss of pressure</td>
<td>Emergency management, Notification by fire department for major fires,</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>☐ Yes – Mandatory CCP, ☐ Yes – Additional CCP identified for facility</td>
</tr>
<tr>
<td>New Construction</td>
<td>Sub-standard construction and/or commissioning</td>
<td>Contamination</td>
<td>AWWA guidelines, testing, Provincial Standard Inspection, training</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>☐ Yes – Mandatory CCP, ☐ Yes – Additional CCP identified for facility</td>
</tr>
<tr>
<td>Temporary Water Distribution System (temporary system put in place during construction)</td>
<td>Infiltration</td>
<td>Contamination</td>
<td>AWWA guidelines, testing, Provincial Standard Inspection, training</td>
<td>1</td>
<td>4</td>
<td>4</td>
<td>☐ Yes – Mandatory CCP, ☐ Yes – Additional CCP identified for facility</td>
</tr>
</tbody>
</table>
### Table 2 - Identified Critical Control Points (CCPs)

<table>
<thead>
<tr>
<th>CCP</th>
<th>Critical Control Limits</th>
<th>Monitoring Procedures</th>
<th>Response, Reporting and Recording Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Filtration Process</td>
<td><strong>Alum, Soda Ash and Polymer Feed</strong>&lt;br&gt;Both pumps fail an alarm is initiated</td>
<td>- SCADA (continuous online analyzers)&lt;br&gt;- Daily operator checks including dosage calculations&lt;br&gt;- Redundancy (2 filters)&lt;br&gt;- Trend review and sign-off as per O. Reg. 170/03</td>
<td>Refer to:&lt;br&gt;- Site specific EEP for Reporting and Responding to Adverse Turbidity in Large Municipal Residential Systems&lt;br&gt;- Site specific EEP for Backwash Failure (Filters)</td>
</tr>
<tr>
<td></td>
<td><strong>Filter Effluent Turbidity Alarms (Filters 1-2)</strong>&lt;br&gt;High set point = 1.0 NTU</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sodium Hypochlorite System</td>
<td><strong>Free Chlorine Residual Alarms - Treated Alarms</strong>&lt;br&gt;Low set point ≥1.0 mg/L&lt;br&gt;High set point = 3.50 mg/L</td>
<td>- SCADA (continuous online analyzers)&lt;br&gt;- Daily operator checks including dosage calculations&lt;br&gt;- Trend review and sign-off as per O. Reg. 170/03</td>
<td>Refer to:&lt;br&gt;- Site specific SOP for CT&lt;br&gt;- Site specific EEP for Chlorine Pump Failure&lt;br&gt;- Site specific EEP for Low or High Chlorine Residual in Treated Water&lt;br&gt;- EEP for Reporting and Responding to Adverse Chlorine Residuals in Large Municipal Residential Systems</td>
</tr>
<tr>
<td>(Chemical Feed)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clearwell</td>
<td><strong>Clearwell Level Alarms – Plant</strong>&lt;br&gt;Clearwell No. 1+2:&lt;br&gt;Low set point = 2.20 m&lt;br&gt;High set point = 3.40 m</td>
<td>- SCADA (continuous online analyzers)&lt;br&gt;- Daily operator checks&lt;br&gt;- Trend review and sign-off as per O. Reg. 170/03</td>
<td>Site specific SOP for CT&lt;br&gt;- Site specific EEP for Water Supply Shortage&lt;br&gt;- CP for Unsafe Water</td>
</tr>
<tr>
<td>Secondary Disinfection</td>
<td><strong>Free Chlorine Residual - Distribution</strong>&lt;br&gt;Low = 0.05 mg/L&lt;br&gt;High = 4.0 mg/L</td>
<td>- Distribution chlorine residuals monitored as per O. Reg. 170/03</td>
<td>Refer to:&lt;br&gt;- EEP for Reporting and Responding to Adverse Chlorine Residuals in Large Municipal Residential Systems.</td>
</tr>
</tbody>
</table>
Table 3 - Record of Annual Review/36-Month Risk Assessment

The Drinking Water Quality Management Standard (DWQMS) requires that the currency of the information and the validity of the assumptions used in the risk assessment be verified at least once a year. In addition, the risk assessment must be conducted at least once every thirty-six months. Refer to OP-07 and OP-08.

<table>
<thead>
<tr>
<th>Date of Activity</th>
<th>Type of Activity</th>
<th>Participants</th>
<th>Summary of Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009-08-11</td>
<td>Risk Assessment</td>
<td>Amanda Dubuc (PCT), Ilona Bruneau (PCT), Michael Del Monte (Operations Manager), Ed Hillman (ORO)</td>
<td>Conducted initial risk assessment.</td>
</tr>
<tr>
<td>2009-08-31</td>
<td>Review</td>
<td>Amanda Dubuc (PCT)</td>
<td>Desktop review prior to submission of Partial Accreditation application. No changes.</td>
</tr>
<tr>
<td>2010-10-14</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Eric Nielson (Senior Operations Manager), Michael Del Monte (Operations Manager), Tony Janssen (Senior Operations Manager)</td>
<td>Review during management review meeting. No changes.</td>
</tr>
<tr>
<td>2011-09-15</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Ilona Bruneau (PCT), Eric Nielson (Senior Operations Manager), Michael Del Monte (Operations Manager), Tony Janssen (Senior Operations Manager), Claude Mongrain (ORO)</td>
<td>Review during Internal Audit. No changes.</td>
</tr>
<tr>
<td>2011-12-20</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Eric Nielson (Senior Operations Manager), Michael Del Monte (Operations Manager), Tony Janssen (Senior Operations Manager)</td>
<td>Review during management review meeting. No changes.</td>
</tr>
<tr>
<td>2012-08-30</td>
<td>Risk Assessment</td>
<td>Amanda Dubuc (PCT), Claude Mongrain (ORO)</td>
<td>Conducted risk assessment. Several changes; see revision history.</td>
</tr>
<tr>
<td>2012-12-04</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Eric Nielson (Senior Operations Manager), Michael Del Monte (Operations Manager), Tony Janssen (Senior Operations Manager)</td>
<td>Review during management review meeting. No changes.</td>
</tr>
<tr>
<td>2013-09-26</td>
<td>Review</td>
<td>Amanda Dubuc (PCT), Patrick Dinel (Operator)</td>
<td>Review during Internal Audit. Changes to Table 2.</td>
</tr>
<tr>
<td>2013-10-29</td>
<td>Risk Assessment</td>
<td>Amanda Dubuc (PCT), Claude Mongrain (ORO)</td>
<td>Conducted risk assessment. Several changes; see revision history.</td>
</tr>
</tbody>
</table>
Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision</th>
<th>Description of Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009-08-11</td>
<td>0</td>
<td>Initial risk assessment conducted</td>
</tr>
<tr>
<td>2011-09-07</td>
<td>1</td>
<td>Template revised to include ‘Record of Annual Review/36-Month Risk Assessment’ (Table 3)</td>
</tr>
<tr>
<td>2012-10-30</td>
<td>2</td>
<td>Removed ‘beaver activity/lagoon surcharge’ and added ‘online pH, temperature and turbidity monitoring’ in the source/intake process step, removed ‘note’ under polymer feed pump, added ‘visual inspection of media, second filter has to be run in manual’ control measure to filter breakthrough, added ‘BCA alarm’ control measure to backwash system failure, added ‘desludge valve failure’ as a hazardous event with the filtration process step, changed clearwell redundancy from 3 to ‘2’, fixed a typo under clearwell hazardous event, added ‘reporting procedures’ control measure to the sodium hypochlorite process step, re-ranked the likelihood and consequence for tower out of service, added ‘tower provides pressure and supply when high lifts off’ control measure to high lift failure, removed ‘low fuel level alarm’ and re-ranked the likelihood and consequence for power failure, added ‘standby power failure’ as a hazardous event with the water treatment system process step, added ‘Soda Ash and Polymer Feed’ in Table 2 as part of the filtration process CCP, and changed Operations Manager title to Senior Operations Manager and Cluster Manager title to Operations Manager in Table 3.</td>
</tr>
<tr>
<td>2013-06-24</td>
<td>3</td>
<td>Added review during management review meeting to Table 3.</td>
</tr>
<tr>
<td>2013-08-09</td>
<td>4</td>
<td>Updated the CCP set points in Table 2 to reflect the actual set points at the water treatment plant and in response to the non-conformance item from the onsite external audit.</td>
</tr>
<tr>
<td>2013-10-29</td>
<td>5</td>
<td>Added risk assessment processes for the distribution system, as the two systems (treatment and distribution) are under one operating authority. Changed the system name to Temagami Drinking Water System.</td>
</tr>
<tr>
<td>2017-06-19</td>
<td>6</td>
<td>Added Blower failure as a hazardous event under filtration. Added spare pumps as a control measure to chlorine feed failure. Changed chlorine low set point to ≥1.0 from 0.92.</td>
</tr>
</tbody>
</table>
Updated clearwells to a critical control point and updated table 2 to include clearwell and relevant EEP/SOPs with alarm setpoints.
1. Purpose

To document the following for the Temagami Drinking Water Systems:

- Owner;
- Organizational structure of the Operating Authority;
- QEMS roles, responsibilities and authorities of staff, Top Management and individuals/groups that provide corporate oversight; and
- Responsibilities for conducting the Management Review

2. Definitions

*Operations Management* – refers to the Senior Operations Manager and/or Operations Manager that directly oversees a facility’s operations

*Senior Leadership Team (SLT)* – members include President and CEO, Executive Vice President and General Counsel, Vice Presidents of OCWA’s business units and Regional Hub Managers

*Top Management* – a person, persons or a group of people at the highest management level within an operating authority that makes decisions respecting the QMS and recommendations to the owner respecting the subject system or subject systems

*Operations Personnel* – Employees of the drinking water system who perform various activities related to the compliance, operations and maintenance of the drinking water system that may directly affect drinking water quality

3. Procedure

3.1 Organizational Structure

The Temagami Drinking Water Systems are owned by the Corporation of the Municipality of Temagami, represented by the Mayor, Treasurer/Administrator and Council.

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

3.2 Top Management

Top Management for the Temagami Drinking Water Systems consists of:

- Operations Management – Temiskaming Shores Cluster
- Regional Hub Manager – Northeastern Ontario Regional Hub
- Safety, Process & Compliance Manager – Northeastern Ontario Regional Hub
Irrespective of other duties (see Table 9-2 below), Top Management’s responsibilities and authorities include:

- Endorsing the Operational Plan as per the Commitment and Endorsement procedure (OP-03);
- Ensuring that the QEMS meets the requirements of the DWQMS;
- Ensuring staff are aware of the applicable legislative and regulatory requirements;
- Communicating the QEMS according to the Communications procedure (OP-12);
- Providing resources needed to maintain and continually improve the QEMS;
- Appointing and authorizing a QEMS Representative (OP-04); and
- Undertaking Management Reviews as per the Management Review procedure (OP-20).

Note: Specific responsibilities of the individual members of Top Management are identified in the referenced procedures.

3.3 Corporate Oversight

Roles, responsibilities and authorities for individuals/groups providing corporate oversight of OCWA’s QEMS are summarized in Table 9-1 below.

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibilities and Authorities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Directors</td>
<td>• Set the Agency’s strategic direction, monitor overall performance and ensure appropriate systems and controls are in place in accordance with the Agency’s governing documents  &lt;br&gt;• Review and approve the QEMS Policy</td>
</tr>
<tr>
<td>Senior Leadership Team (SLT)</td>
<td>• Establish the Agency’s organizational structure and governing documents and ensure resources are in place to support strategic initiatives &lt;br&gt;• Monitor and report on OCWA’s operational and business performance to the Board of Directors &lt;br&gt;• Review the QEMS Policy and recommend its approval to the Board &lt;br&gt;• Approve corporate QEMS programs and procedures</td>
</tr>
<tr>
<td>Corporate Compliance</td>
<td>• Manage the QEMS Policy and corporate QEMS programs and procedures &lt;br&gt;• Provide support for the local implementation of the QEMS &lt;br&gt;• Monitor and report on QEMS performance and any need for improvement to SLT &lt;br&gt;• Consult with the MOECC and other regulators and provide compliance support/guidance on applicable legislative, regulatory and policy requirements &lt;br&gt;• Manage contract with OCWA’s DWQMS accreditation body</td>
</tr>
</tbody>
</table>
3.4 Regional Hub Roles, Responsibilities and Authorities

QEMS roles, responsibilities and authorities of Northeastern Ontario Regional Hub personnel are summarized in Table 9-2 below. This information is kept current as per the Document and Records Control procedure (OP-05) and is communicated to staff as per the Communications procedure (OP-12).

Additional duties of employees are detailed in their job specifications and in the various QEMS programs and procedures that form, or are referenced in, this Operational Plan.

Table 9-2: QEMS Roles, Responsibilities and Authorities for the Regional Hub

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibilities and Authorities</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Operations Personnel</td>
<td>• Perform duties in compliance with applicable legislative and regulatory requirements</td>
</tr>
<tr>
<td></td>
<td>• Be familiar with the QEMS Policy and work in accordance with QEMS programs and procedures</td>
</tr>
<tr>
<td></td>
<td>• Maintain operator certification (as required)</td>
</tr>
<tr>
<td></td>
<td>• Attend/participate in training relevant to their duties under the QEMS</td>
</tr>
<tr>
<td></td>
<td>• Document all operational activities</td>
</tr>
<tr>
<td></td>
<td>• Identify potential hazards at their facility that could affect the environmental and/or public health and report to Operations Management</td>
</tr>
<tr>
<td></td>
<td>• Report and act on all operational incidents</td>
</tr>
<tr>
<td></td>
<td>• Recommend changes to improve the QEMS</td>
</tr>
<tr>
<td>Regional Hub Manager (Top Management)</td>
<td>• Oversee the administration and delivery of contractual water/wastewater services on a Regional Hub level</td>
</tr>
<tr>
<td></td>
<td>• Fulfill role of Top Management</td>
</tr>
<tr>
<td></td>
<td>• Ensure corporate QEMS programs and procedures are implemented consistently throughout the Regional Hub</td>
</tr>
<tr>
<td></td>
<td>• Manages the planning of training programs for Regional Hub</td>
</tr>
<tr>
<td></td>
<td>• Report to VP of Operations/SLT on the regional performance of the QEMS and any need for Agency-wide improvement</td>
</tr>
<tr>
<td>Operations Management (Top Management)</td>
<td>• Manage the day-to-day operations and maintenance of his/her assigned facilities and supervise facility operational staff</td>
</tr>
<tr>
<td></td>
<td>• Fulfill role of Top Management</td>
</tr>
<tr>
<td></td>
<td>• Ensure corporate and site-specific QEMS programs and procedures are implemented at his/her assigned facilities</td>
</tr>
<tr>
<td></td>
<td>• Determine necessary action and assign resources in response to operational issues</td>
</tr>
<tr>
<td></td>
<td>• Report to the Regional Hub Manager on facility operational performance</td>
</tr>
<tr>
<td></td>
<td>• Ensure operational training is provided for the cluster (in consultation with the SPC Manager as required)</td>
</tr>
<tr>
<td></td>
<td>• Act as Overall Responsible Operator (ORO) when required.</td>
</tr>
</tbody>
</table>
## ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibilities and Authorities</th>
</tr>
</thead>
</table>
| **Safety, Process & Compliance (SPC) Manager (Top Management)** | • Supervise facility compliance staff and provide technical and program support to the Regional Hub related to process control and compliant operations  
• Fulfill role of Top Management  
• Ensure corporate/regional QEMS programs and procedures are implemented consistently throughout the Regional Hub  
• Assist in the development of site-specific operational procedures as required  
• Ensure training on applicable legislative and regulatory requirements and the QEMS is provided for the Regional Hub (in consultation with Operations Management as required)  
• Monitor and report to the Regional Hub Manager and Operations Management on the compliance status and QEMS performance within his/her Regional Hub and any need for improvement  
• Act as alternate QEMS Representative (when required) |
### ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

**Reviewed by:** R. Marshall, PCT  
**Approved by:** Y. Rondeau, SPC Manager

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibilities and Authorities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>reviewing process data and trouble-shooting</td>
</tr>
<tr>
<td></td>
<td>• Meet with clients regularly</td>
</tr>
<tr>
<td></td>
<td>• Meet with the Health and Safety representative regularly and manage any health &amp; Safety issues</td>
</tr>
<tr>
<td></td>
<td>• Acts as Overall Responsible Operator (ORO).</td>
</tr>
<tr>
<td></td>
<td>• May act as Operator-in-Charge (OIC)</td>
</tr>
<tr>
<td>Team Lead - Capital</td>
<td>• Perform duties as assigned by the Senior Operations Manager</td>
</tr>
<tr>
<td></td>
<td>• Plan and oversee capital projects</td>
</tr>
<tr>
<td></td>
<td>• Ensure capital projects comply with applicable legislation, regulations, approvals and established operating procedures</td>
</tr>
<tr>
<td></td>
<td>• Coordinate staffing with Operations &amp; Maintenance Team Lead</td>
</tr>
<tr>
<td></td>
<td>• Assist with facility operations including monitoring facility processes, reviewing process data and trouble-shooting</td>
</tr>
<tr>
<td></td>
<td>• Perform Operations &amp; Maintenance Team Lead responsibilities as required</td>
</tr>
<tr>
<td></td>
<td>• Acts as Overall Responsible Operator (ORO).</td>
</tr>
<tr>
<td></td>
<td>• May act as Operator-in-Charge (OIC)</td>
</tr>
<tr>
<td>Overall Responsible Operator (ORO)</td>
<td>• Fulfill duties assigned by the Senior Operations Manager</td>
</tr>
<tr>
<td></td>
<td>• Participate as a technical advisor to staff and management and provide specialized training on technical or other issues.</td>
</tr>
<tr>
<td></td>
<td>• Prepare and/or coordinate staff work assignments and follow up to ensure completion</td>
</tr>
<tr>
<td></td>
<td>• Assist management in providing recommendation for annual capital forecasts and gathering information for operational reports as required</td>
</tr>
<tr>
<td></td>
<td>• Assist with facility operations including monitoring facility processes, reviewing process data and trouble-shooting</td>
</tr>
<tr>
<td></td>
<td>• Oversee maintenance activities on equipment and process in order to maintain compliance with applicable legislation, regulations, approvals and established operating procedures</td>
</tr>
<tr>
<td></td>
<td>• Assist in the preparation of facility manuals and documenting operating processes and procedures for staff</td>
</tr>
<tr>
<td></td>
<td>• Actively participate in the development and maintenance of facility emergency plans and assist with emergencies as required.</td>
</tr>
<tr>
<td></td>
<td>• Act for management during vacations or periodic absences.</td>
</tr>
<tr>
<td></td>
<td>• Perform duties of Operator/Mechanic as required</td>
</tr>
<tr>
<td></td>
<td>• Maintain the facility log book according to regulatory requirements</td>
</tr>
<tr>
<td></td>
<td>• May act as Operator-in-Charge (OIC)</td>
</tr>
<tr>
<td>Operator and Operator/Mechanic</td>
<td>• Perform duties as assigned by Operations Management or designate</td>
</tr>
<tr>
<td></td>
<td>• Monitor, maintain and operate facilities in accordance with applicable regulations, approvals and established operating procedures</td>
</tr>
</tbody>
</table>
### ORGANIZATIONAL STRUCTURE, ROLES, RESPONSIBILITIES AND AUTHORITIES

**Reviewed by:** R. Marshall, PCT  
**Approved by:** Y. Rondeau, SPC Manager

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibilities and Authorities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Collect samples and perform laboratory tests and equipment calibrations as required</td>
</tr>
<tr>
<td></td>
<td>• Regularly inspect operating equipment, perform routine preventive maintenance and repairs and prepare and complete work orders as assigned</td>
</tr>
<tr>
<td></td>
<td>• Participate in facility inspections and audits</td>
</tr>
<tr>
<td></td>
<td>• May act as Operator-in-Charge (OIC) and/or Overall Responsible Operator (ORO) when required. Refer to ORO Letter</td>
</tr>
<tr>
<td>Instrumentation Technician</td>
<td>• Provide advice and technical expertise on the services required for process control and automation systems</td>
</tr>
<tr>
<td></td>
<td>• Discuss and advise on detailed system and programming requirements, modify existing and new software in response to plant requests, analyze and resolve problems/error conditions, document changes/modifications and configure, install and support related software, hardware and network for such systems</td>
</tr>
<tr>
<td></td>
<td>• Conduct inspections of the process control and automation systems to validate that all is operating within established parameters as requested</td>
</tr>
<tr>
<td></td>
<td>• Install and commission new electrical/electronic equipment and automation systems</td>
</tr>
<tr>
<td></td>
<td>• May act as Operator-in-Charge (OIC)</td>
</tr>
<tr>
<td>Electronics Technician</td>
<td>• Perform repairs, inspections, calibrations, preventive maintenance and/or scheduled maintenance on electrical systems, equipment, components and devices in accordance with established procedures and record the maintenance data</td>
</tr>
<tr>
<td></td>
<td>• Monitor facility processes through visual inspection, the SCADA system or by taking readings from the process control equipment</td>
</tr>
<tr>
<td></td>
<td>• Operate and adjust equipment/processes to maintain compliance with applicable legislation, regulations, approvals and established operating procedures</td>
</tr>
<tr>
<td></td>
<td>• May act as Operator-in-Charge (OIC)</td>
</tr>
</tbody>
</table>

### 4. Related Documents

- OP-03 Commitment and Endorsement
- OP-04 QEMS Representative
- OP-05 Document and Records Control
- OP-09A Organizational Structure
- OP-12 Communications
- OP-20 Management Review
5. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision #</th>
<th>Reason for Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019-07-10</td>
<td>0</td>
<td>Procedure issued – Information within OP-09 (s. 3) was originally set out in main body of the Temagami Drinking Water Systems Operational Plan (revision 7, dated June 19, 2017). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Added definitions for Operations Management and Operations Personnel and throughout procedure replaced ‘Senior Operations Manager’ references with ‘Operations Management’. Incorporated OCWA’s new org structure, including SPC Manager. Removed two levels of Top Management (e.g. Facility Level and Corporate level), instead Top Management is only at the facility level and corporate has been moved to Corporate oversight. Re-worded QEMS Roles, Responsibilities and Authorities for each position. Removed foreman and added O&amp;M and capital Team Lead positions</td>
</tr>
</tbody>
</table>
1. Purpose

To document a procedure that describes:
- the competencies required for personnel performing duties directly affecting drinking water quality;
- the activities to develop and/or maintain those competencies; and
- the activities to ensure personnel are aware of the relevance of their duties and how they affect safe drinking water.

2. Definitions

**Competence** – the combination of observable and measurable knowledge, skills, and abilities which are required for a person to carry out assigned responsibilities

**Operations Management** – refers to the Senior Operations Manager and/or Operations Manager that directly oversees a facility’s operations

**Operations Personnel** – employees of the drinking water system who perform various activities related to the compliance, operations and maintenance of the drinking water system that may directly affect drinking water quality

**Top Management** – a person, persons or a group of people at the highest management level within an operating authority that makes decisions respecting the QMS and recommendations to the Owner respecting the subject system or subject systems

3. Procedure

3.1 The following table presents the minimum competencies required by operations personnel.

<table>
<thead>
<tr>
<th>Position</th>
<th>Required Minimum Competencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations Management</td>
<td>• Valid operator certification&lt;br&gt;• Experience and/or training in managing/supervising drinking water system operations, maintenance, financial planning and administration&lt;br&gt;• Training and/or experience related to drinking water system processes, principles and technologies&lt;br&gt;• Training on OCWA’s QEMS and the DWQMS&lt;br&gt;• Training on relevant legislation, regulations, codes, policies, guidelines and procedures&lt;br&gt;• Experience using computers and operational computerized systems</td>
</tr>
</tbody>
</table>
## COMPETENCIES

<table>
<thead>
<tr>
<th>Position</th>
<th>Required Minimum Competencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety, Process &amp; Compliance</td>
<td>• Valid operator certification&lt;br&gt;• Experience in providing technical support and leading/managing programs related to process control and compliant operations&lt;br&gt;• Experience and/or training in conducting compliance audits, and management system audits&lt;br&gt;• Experience and/or training in preparing and presenting informational and training material&lt;br&gt;• Training on OCWA’s QEMS and the DWQMS&lt;br&gt;• Training on relevant legislation, regulations, codes, policies, guidelines and procedures&lt;br&gt;• Experience using computers and operational computerized systems</td>
</tr>
<tr>
<td>Compliance (SPC) Manager</td>
<td></td>
</tr>
<tr>
<td>Process &amp; Compliance Technician</td>
<td>• Valid operator certification&lt;br&gt;• Experience and/or training in resolving/addressing compliance issues for drinking water systems&lt;br&gt;• Experience and/or training in monitoring, assessing and reporting on facility performance against legal requirements and corporate goals&lt;br&gt;• Experience and/or training in preparing and presenting informational and training material&lt;br&gt;• Experience in conducting management system audits or internal auditor education/training&lt;br&gt;• Training on OCWA’s QEMS and the DWQMS&lt;br&gt;• Training on relevant legislation, regulations, codes, policies, guidelines and procedures&lt;br&gt;• Experience using computers and operational computerized systems</td>
</tr>
<tr>
<td>Team Lead</td>
<td>• Valid operator certification&lt;br&gt;• Experience leading/directing operations personnel, and providing technical guidance to resolve operational issues&lt;br&gt;• Training and experience in inspecting and monitoring drinking water system processes and performing/planning maintenance activities&lt;br&gt;• Training on OCWA’s QEMS and the DWQMS&lt;br&gt;• Training on relevant legislation, regulations, codes, policies, guidelines and procedures&lt;br&gt;• Experience using computers and operational computerized systems</td>
</tr>
<tr>
<td>Overall responsible Operator</td>
<td>• Valid operator certification&lt;br&gt;• Experience leading/directing operations personnel, and providing technical guidance to resolve operational issues&lt;br&gt;• Training and/or experience related to operations and maintenance of drinking water system processes, principles and technologies&lt;br&gt;• Training on OCWA’s QEMS and the DWQMS&lt;br&gt;• Training on relevant legislation, regulations, codes, policies, guidelines and procedures&lt;br&gt;• Experience using computers and operational computerized systems</td>
</tr>
<tr>
<td>Operator (ORO)</td>
<td>• Valid operator certification&lt;br&gt;• Experience leading/directing operations personnel, and providing technical guidance to resolve operational issues&lt;br&gt;• Training and/or experience related to operations and maintenance of drinking water system processes, principles and technologies&lt;br&gt;• Training on OCWA’s QEMS and the DWQMS&lt;br&gt;• Training on relevant legislation, regulations, codes, policies, guidelines and procedures&lt;br&gt;• Experience using computers and operational computerized systems</td>
</tr>
<tr>
<td>Operator and Mechanic</td>
<td>• Valid operator certification&lt;br&gt;• Training and/or experience in inspecting and monitoring drinking water system processes, principles and technologies&lt;br&gt;• Training on OCWA’s QEMS and the DWQMS&lt;br&gt;• Training on relevant legislation, regulations, codes, policies, guidelines and procedures&lt;br&gt;• Experience using computers and operational computerized systems</td>
</tr>
</tbody>
</table>
### COMPETENCIES

<table>
<thead>
<tr>
<th>Position</th>
<th>Required Minimum Competencies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>system processes and performing/planning maintenance activities</td>
</tr>
<tr>
<td></td>
<td>● Training on OCWA’s QEMS and the DWQMS</td>
</tr>
<tr>
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<td>● Training on relevant legislation, regulations, codes, policies, guidelines and procedures</td>
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<tr>
<td>Instrumentation Technician</td>
<td>● Valid operator certification</td>
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<tr>
<td></td>
<td>● Experience and/or training in monitoring, programming, installing and troubleshooting network, hardware, software and instrumentation</td>
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<tr>
<td></td>
<td>● Experience and/or training in drinking water system processes, design, instrumentation, process control and automation systems</td>
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<td></td>
<td>● Training on OCWA’s QEMS and the DWQMS</td>
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<tr>
<td>Electronic Technician</td>
<td>● Valid operator certification</td>
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<td></td>
<td>● Instrumentation Diploma and/or Electrical Engineering Automated Systems Diploma</td>
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<td></td>
<td>● Experience in performing maintenance and repair of electrical and electronic equipment</td>
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<td>● Experience and/or training in drinking water system processes design, instrumentation, process control and automation systems</td>
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<td>● Experience using computers and operational computerized systems</td>
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</table>

3.2 OCWA’s recruiting and hiring practices follow those of the Ontario Public Service (OPS). As part of the OPS, minimum competencies, which include education, skills, knowledge and experience requirements, are established when designing the job description for a particular position. As part of the recruitment process, competencies are then evaluated against the job description. Based on this evaluation, the hiring manager selects and assigns personnel for specific duties.

3.3 OCWA’s Operational Training Program aims to:
- Develop the skills and increase the knowledge of staff and management;
- Provide staff with information and access to resources that can assist them in performing their duties; and
- Assist OCWA certified operators in meeting the legislative and regulatory requirements with respect to training.

3.4 The Program consists of Director Approved, continuing education and on-the-job training and is delivered using a combination of methods (e.g., traditional classroom courses, e-learning/webinars and custom/program-based courses/sessions). A formal
evaluation process is in place for all sessions under the Operational Training Program and is a critical part of the Program’s continual improvement.

3.5 Awareness of OCWA’s QEMS is promoted during the orientation of new staff, at facility/cluster/regional hub level training sessions and meetings and through OCWA’s Environmental Compliance 101 (EC 101) course. All new staff are required to complete the EC 101 course within their first year of joining OCWA. The purpose of the EC 101 course is to ensure staff are aware of applicable legislative and regulatory requirements, to promote awareness of OCWA’s QEMS and to reinforce their roles and responsibilities under OCWA’s QEMS.

3.6 Staff are also required to complete the mandatory environmental and health and safety compliance training listed in OCWA’s Mandatory Compliance Training Requirements document, based on their position and/or the duties they perform. This list is available on OCWA’s intranet.

3.7 Operations personnel also receive site-specific training/instruction on relevant operational and emergency response procedures to ensure effective operational control of processes and equipment which may impact the safety and quality of drinking water.

3.8 As part of OCWA’s annual Performance Planning and Review (PPR) process, employee performance is evaluated against their job expectations. Professional development opportunities and training needs (which could include formalized courses as well as site-specific on-the-job training or job shadowing/mentoring) are identified as part of this process (and on an ongoing basis). In addition to this process, OCWA employees may at any time request training from either internal or external providers by obtaining approval from their Manager.

3.9 Certified drinking water operators are responsible for completing the required number of training hours in order to renew their certificates based on the highest class of drinking water subsystem they operate. They are also responsible for completing mandatory courses required by Safe Drinking Water Act (SDWA) O. Reg. 128/04 Certification of Drinking Water System Operators and Water Quality Analysts. The Operations Management takes reasonable steps to ensure that every operator has the opportunity to attend training to meet the requirements.

3.10 It is the responsibility of operations personnel to ensure Operations Management are aware of any change to the status/classification of their drinking water operator certificate(s), the validity of their driver’s licence (required to hold at a minimum a Class G license which is initially verified upon hire) and/or the validity of any other required certificates/qualifications.

3.11 Individual OCWA employee training records are maintained and tracked using a computerized system, the Training Summary database, which is administrated by OCWA’s Training Department.
4. Related Documents

OCWA’s Mandatory Compliance Training list (OCWA intranet)
OCWA’s Training Resources (OCWA Intranet)
OCWA’s Training Summary Database
Performance Planning and Review (PPR) Database
OP-5 Document and Records Control

5. Revision History

<table>
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<tr>
<th>Date</th>
<th>Revision #</th>
<th>Reason for Revision</th>
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<tr>
<td>2019-05-28</td>
<td>0</td>
<td>Procedure issued – Information within OP-10 (s. 3) was originally set out in main body of the Temagami Drinking Water Systems Operational Plan (revision 7, dated June 19, 2017). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Added definitions for Operations Management and Operations Personnel and throughout procedure replaced ‘Senior Operations Manager’ references with ‘Operations Management’. Modified table in procedure (s. 3.1 and s. 3.2): removed/revised non-measurable competencies, added the word ‘minimum’ to competencies; removed ‘Valid Class G Driver’s License’ listed under individual positions and referenced in s. 3.11; added competencies for SPC Manager and Data Clerk and merged competencies for Senior Operations Manager and Operations Manager under Operations Management. Updated training sections (s. 3.4 to s. 3.7) to reference new Environmental 101 course, Mandatory Compliance Training list and removed specific references to Orientation Training Program. Added s. 3.11 related to ensuring operators make Operations Management aware of changes to operator certification and other certificates/licenses. Other minor changes to wording. Removed Administration staff.</td>
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</table>
1. Purpose

To describe the procedure for ensuring that sufficient and competent personnel are available for duties that directly affect drinking water quality at the Temagami Drinking Water Systems.

2. Definitions

**Competency** – an integrated set of requisite skills and knowledge that enables an individual to effectively perform the activities of a given occupation *

**Essential Services** – services that are necessary to enable the employer to prevent,
(a) danger to life, health or safety,
(b) the destruction or serious deterioration of machinery, equipment or premises,
(c) serious environmental damage, or
(d) disruption of the administration of the courts or of legislative drafting.

*(Crown Employees Collective Bargaining Act, 1993)*

3. Procedure

3.1 Operations Management ensures that personnel meeting the competencies identified in OP-10 Competencies are available for duties that directly affect drinking water quality.

3.2 The Temagami Drinking Water Systems are considered un-manned facilities. OCWA operations personnel routinely visit the system at least twice per week and monitor the facility daily using OCWA’s remote monitoring SCADA system.

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

The Municipality of Temagami Public Works staff conduct checks of the distribution system. They inform OCWA operations of any problems.

3.3 Operations personnel are assigned to act as and fulfill the duties of Overall Responsible Operator (ORO) and Operator-in-Charge (OIC) in accordance with SDWA O. Reg. 128/04.

Refer to the ORO Letter for current ORO and alternate.

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

---

* Based on the 2005 National Occupational Guidelines for Canadian Water and Wastewater Operators and International Board of Standards for Training, Performance and Instruction
3.4 The Senior Operations Manager and/or designate assigns an on-call operator for the time that the facility is un-staffed (i.e.: evenings, weekends and Statutory Holidays). The on-call shift rotates every Monday morning at 07:30, unless Monday is a statutory holiday in which case the change is on Tuesday morning at 07:30. The on-call schedule consists of a weekly rotation, is set on an annual basis and posted in the Haileybury WTP.

3.5 The on-call operator is responsible for responding to the alarm monitoring service within a reasonable time frame. Details of the call-ins are maintained electronically in OCWA Workplace Management System (WMS).

3.6 The alarm system auto dialer is programmed to contact the operator on-call. The operator on-call is responsible for responding to the alarm within a reasonable timeframe. If the nature of the alarm requires additional staff, the on-call operator can request assistance from any of the other certified operators. The on-call operator records details of the call-in in the facility logbook and on the Call-In Report form.

3.7 The Senior Operations Manager and/or designate is responsible for approving vacation time for staff in a manner which ensures sufficient personnel are available for the performance of normal operating duties.

3.8 OCWA’s Operations staff are represented by the Ontario Public Service Employees Union (OPSEU). In the event of a labour disruption, the Operations Manager, together with the union, identifies “essential services” required to operate the facility so that the quality of drinking water is not compromised in any way.

3.9 A contingency plan for Critical Shortage of Staff is included in the Facility Emergency Plan. This plan provides direction to staff in the event that there is a severe shortage of staff due to sickness (e.g., pandemic flu) or other unusual situations where personnel might not be available.

4. Related Documents

Call-In Reports (WMS)
Critical Shortage of Staff Contingency Plan (Facility Emergency Plan)
Facility Logbook
Facility Round Sheets
On-Call Schedule
ORO Letter
Vacation Schedule
OP-10 Competencies

5. Revision History

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<td>2009-08-31</td>
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<td>Procedure issued</td>
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<tr>
<td>2011-09-07</td>
<td>1</td>
<td>Procedure 5.9 was added to reference contingency planning for Critical Shortage of Staff</td>
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**PERSONNEL COVERAGE**

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<td>2013-03-13</td>
<td>2</td>
<td>Revised position titles; Operations Manager has been changed to Senior Operations Manager, Cluster Manager has been changed to Operations Manager, Operator has been changed to Operator, and Process Compliance Manager has been removed as the position was discontinued. Changed the coverage start time from 08:00 to 07:30.</td>
</tr>
<tr>
<td>2013-10-29</td>
<td>3</td>
<td>Changed name of system to Temagami Drinking Water System to include the distribution system. Added details about the role of the Municipality of Temagami Public Works staff to section 5.2.</td>
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</table>
1. **Purpose**

To describe the procedure for facility level internal and external QEMS-related communications between Top Management and:

- OCWA staff;
- the Owner;
- essential suppliers and service providers (as identified in OP-13); and
- the public.

2. **Definitions**

*Operations Management* – refers to the Senior Operations Manager and/or Operations Manager that directly oversees a facility’s operations

*Operations Personnel* – employees of the drinking water system who perform various activities related to the compliance, operations and maintenance of the drinking water system that may directly affect drinking water quality.

3. **Procedure**

3.1 Operations Management and the QEMS Representative are responsible for identifying and coordinating any site-specific communications in relation to the status/development of the facility's QEMS.

3.2 Internal and external communication responsibilities and reporting requirements for emergency situations are set out under OCWA’s Emergency Management Program (i.e., Facility Emergency Plan and OCWA’s Emergency Response Plan). Refer to OP-18 Emergency Management for more information.

3.3 Communication with OCWA staff:

3.3.1 Within the first year of hire, all staff are required to complete the Environmental Compliance 101 (EC101) course. The objective of the EC 101 course is to ensure that staff are aware of applicable legislative and regulatory requirements and of OCWA’s QEMS and to reinforce their roles and responsibilities under OCWA’s QEMS.

3.3.2 Operations Management are responsible for ensuring operations personnel receive site-specific training on the Operational Plan, the organizational structure for the facility including the roles and responsibilities and authorities (outlined in OP-09 Organizational Structure, Roles, Responsibilities and Authorities), QEMS Procedures and other related operating instructions and procedures as part of the orientation process and on an on-going basis as required.
COMMUNICATIONS

Reviewed by: R. Marshall, PCT
Approved by: Y. Rondeau, SPC Manager

3.3.3 The Safety, Process and Compliance (SPC) Manager is responsible for ensuring training is provided for the Regional Hub (in consultation with Operations Management as required) on applicable legislative and regulatory requirements and the QEMS.

3.3.4 The QEMS Representative assists Operations Management and/or the SPC Manager in the coordination/delivery of training as required.

3.3.5 Revisions to the QEMS and associated documentation are communicated as per OP-05 Document and Records Control.

3.3.6 The QEMS Policy is available to all OCWA personnel through OCWA’s intranet and as outlined in 3.6.2 of this procedure.

3.3.7 Operations personnel are responsible for identifying potential hazards at the facility that could affect the environmental and/or public health, and communicating these to Operations Management. They may also recommend changes be made to improve the facility’s QEMS by making a request to the QEMS Representative (as per OP-05).

3.3.8 The QEMS Representative is responsible for ensuring that the Operations Management and the SPC Manager are informed regarding the compliance/quality status of the facility and QEMS implementation and any need for improved processes/procedures at the cluster/facility level.

3.3.9 The SPC Manager reports to the Regional Hub Manager on the compliance status, the QEMS performance and effectiveness, any need for improvement and on issues that may have Agency-wide significance. Operations Management reports to the Regional Hub Manager on facility operational performance.

3.4 Communication with the Owner:

3.4.1 The Regional Hub Manager, Operations Management and SPC Manager ensures that the Owner is provided with QEMS updates and that they are kept informed of the status of the facility’s operational and compliance performance during regularly scheduled meetings and/or through electronic and/or verbal communications. The QEMS Representative assists in the coordination of these meetings and with communicating the updates as directed.

3.4.2 The continuing suitability, adequacy and effectiveness of OCWA’s QEMS are communicated to the Owner as part of the Management Review process (refer to OP-20 Management Review).
3.5 Communications with Essential Suppliers and Service Providers:

3.5.1 Communication requirements to ensure essential suppliers and service providers understand the relevant OCWA QEMS policies, procedures and expectations are described in OP-13 Essential Supplies and Services.

3.6 Communication with the Public:

3.6.1 Media enquiries must be directed to the facility’s designated media spokesperson as identified in the Facility Emergency Plan. The media spokesperson coordinates with local and corporate personnel (as appropriate) and the Owner in responding to media enquiries.

3.6.2 OCWA’s QEMS and QEMS Policy are communicated to the public through OCWA’s public website. The QEMS Policy is also posted at the Kirkland Lake Wastewater Treatment Plant and the Kirkland Lake Process and Compliance Office.

3.6.3 Facility tours of interested parties must be approved in advance by the Owner. A record of any tour is made in the facility logbook.

3.6.4 All complaints, whether received from the consumer, the community or other interested parties, are documented on a Community Complaint form. As appropriate, Operations Management or designate ensures that the Owner is informed of the complaint and/or an action is developed to address the issue in a timely manner. The QEMS Representative ensures that consumer feedback is included for discussion at the Management Review.

4. Related Documents

Community Complaint Form
Emergency Response Plan
Facility Emergency Plan
OP-05 Document and Records Control
OP-09 Organizational Structure, Roles, Responsibilities and Authorities
OP-13 Essential Supplies and Services
OP-18 Emergency Management
OP-20 Management Review

5. Revision History

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<td>Procedure issued</td>
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<tr>
<td>2011-09-07</td>
<td>1</td>
<td>Correction of some employee titles and update to Procedure 5.2</td>
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**COMMUNICATIONS**

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<td>2013-10-29</td>
<td>3</td>
<td>Changed name of system to Temagami Drinking Water Systems to include the distribution system</td>
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<tr>
<td>2017-06-19</td>
<td>4</td>
<td>Added quarterly operations report to Related Documents</td>
</tr>
<tr>
<td>2019-05-28</td>
<td>5</td>
<td>QP-04 procedure renamed OP-12. Removed Scope and Responsibilities sections. Added definitions for Operations Management and Operations Personnel. Reordered and created separate sections to clarify communications to each of the 4 parties. Clarified suppliers were those listed as essential as per Element 13 (as per DWQMS v. 2.0) and replaced references to Senior Operations Manager with 'Operations Management'. Updated training sections for OCWA personnel (s. 3.3.1 to s. 3.3.4) to reference new Environmental Compliance 101 course completed within first year of hire and to outline how training is coordinated between SPC Manager/Operations Management, and QEMS Representative. Included sections on R&amp;Rs for performance reporting within OCWA (s. 3.3.7 to s. 3.3.9) and to Client (3.4.1). Replaced identification of media spokesperson (s. 3.6.1) with 'as identified in Facility Emergency Plan'. Added reference to site-specific records/documents used for recording tours (s. 3.6.3). Other minor edits.</td>
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1. Purpose

To describe OCWA’s procedures for procurement and for ensuring the quality of essential supplies and services.

2. Definitions

*Essential Supplies and Services* – supplies and services deemed to be critical to the delivery of safe drinking water

3. Procedure

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

3.2 Purchasing is conducted in accordance with OCWA’s Corporate Procurement and Administration policies, procedures and guidelines, which are adopted from those of the Ontario Public Service.

Purchases of capital equipment are subject to formal approval by the facility’s owner.

3.3 As part of the corporate procurement process, potential suppliers/service providers are informed of relevant aspects of OCWA’s QEMS through the tendering process and through specific terms and conditions set out in our agreements and purchase orders. Essential suppliers and service providers (including those contracted locally) are sent a letter that provides an overview of the relevant aspects of the QEMS.

3.4 Contractors are selected based on their qualifications and ability to meet the facility’s needs without compromising operational performance and compliance with applicable legislation and regulations.

Contracted personnel including suppliers may be requested or required to participate in additional relevant training/orientation activities to ensure conformance with facility procedures and to become familiar with OCWA workplaces.

If necessary, appropriate control measures are implemented while contracted work is being carried out and communicated to all relevant parties to minimize the risk to the integrity of the drinking water system and the environment.

3.5 All third-party drinking water testing services are provided by accredited and licensed laboratories. The Ministry of the Environment, Conservation & Parks (MECP) has an agreement with The Canadian Association for Laboratory Accreditation (CALA) for accreditation of laboratories testing drinking water. The QEMS Representative is...
responsible for notifying the MECP of any change to the drinking water testing services being utilized.

3.6 Internal verification and calibration activities (e.g. chlorine analyzer, turbidimeter, flowmeters, etc.) are conducted by operations personnel in accordance with equipment manuals and/or procedures (Refer to OP-17 Measurement Recording Equipment Calibration and Maintenance).

3.7 External calibration activities, if required are conducted by qualified third-party providers. Qualifications of the service provider are verified during the procurement process. The service provider is responsible for providing a record/certificate of all calibrations conducted.

3.8 Chemicals purchased for use in the drinking water treatment process must meet AWWA Standards and be ANSI/NSF certified as per the Municipal Drinking Water Licence (MDWL).

3.9 The facility orders and receives ongoing deliveries of chemicals to satisfy current short-term needs based on processing volumes and storage capacities. Incoming chemical orders are verified by reviewing the manifest or invoice in order to confirm that the product received is the product ordered.

3.10 Process components/equipment provided by the supplier must meet applicable regulatory requirements and industry standards for use in drinking water systems prior to their installation.

4. Related Documents

ANSI/NSF Documentation
AWWA Standards
Calibration Certificates/Records
Essential Supplies and Services List
Municipal Drinking Water Licence (MDWL)
OP-17 Measurement Recording Equipment Calibration and Maintenance

5. Revision History

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<td>Procedure issued</td>
</tr>
<tr>
<td>2011-09-07</td>
<td>1</td>
<td>Addition of Procedure 5.3 clarifying how suppliers are informed of relevant aspects of OCWA’s QEMS</td>
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<tr>
<td>2013-03-13</td>
<td>2</td>
<td>Revised position titles; Operations Manager has been changed to Senior Operations Manager, Cluster Manager has been changed</td>
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to Operations Manager, Operator has been changed to Operator, and Process Compliance Manager has been removed as the position was discontinued.

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<td>2013-06-20</td>
<td>3</td>
<td>Added statement to ensure that received product and services are verified upon receipt and prior to use, see procedure 5.9.</td>
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<td>2013-10-29</td>
<td>4</td>
<td>Changed name of system to Temagami Drinking Water Systems to include the distribution system</td>
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<tr>
<td>2019-05-28</td>
<td>5</td>
<td>QP-05 procedure renamed OP-13. Removed Scope and Responsibilities sections. Changes to wording to provide clarification on ensuring quality of essential supplies and services (s. 3.5, 3.6, 3.7 and 3.9).</td>
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1. Purpose

To describe OCWA’s procedure for reviewing the adequacy of infrastructure necessary to operate and maintain the Temagami Drinking Water Systems.

2. Definitions

*Infrastructure* – the set of interconnected structural elements that provide the framework for supporting the operation of the drinking water system, including buildings, workspace, process equipment, hardware, software and supporting services, such as transport or communication.

3. Procedure

3.1 At least once every calendar year, Operations Management in conjunction with operations personnel conducts a review of the drinking water system’s infrastructure to assess its adequacy for the operation and maintenance of the system. Operations personnel assist with identifying the need for infrastructure repairs, replacements or alterations and with prioritizing each identified item. Documents and records that are reviewed may include:
- Maintenance records
- Call-in reports
- Adverse Water Quality Incidents (AWQIs) or other incidents
- Health & Safety Inspections
- MECP Inspection Reports
- QEMS Audit Reports

3.2 The outcomes of the risk assessment documented as per OP-08 are considered as part of this review.

3.3 The output of the review is a 5 year rolling Recommended Capital and Major Maintenance Report to assist the Owner and OCWA with planning infrastructure needs for the short and long-term. A letter, summarizing capital works recommendations and estimated expenditures for the upcoming year, is submitted to the Owner for review and approval. A capital letter is submitted, at least once every calendar year by Operations Management.

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

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

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

5. Revision History

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<td>2011-09-07</td>
<td>1</td>
<td>Revised to include the position of Process Compliance Manager</td>
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<td>Revised position titles; Operations Manager has been changed to Senior Operations Manager, Cluster Manager has been changed to Operations Manager, Operator has been changed to Operator, and Process Compliance Manager has been removed as the position was discontinued.</td>
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<td>2013-10-29</td>
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<td>Changed name of system to Temagami Drinking Water Systems to include the distribution systems.</td>
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<td>2019-05-28</td>
<td>4</td>
<td>QP-06 procedure renamed OP-14. Removed Scope and Responsibilities sections. Replaced 'once every 12 months' with 'once every calendar year' (s. 3.1) to reflect wording in DWQMS v. 2.0. Added s. 3.2 to consider the outcomes of the risk assessment under Element 8 during the review to reflect wording in DWQMS v. 2.0. Changes to wording to provide clarification on who is required to attend the review and what documents and records may be considered during the review (s. 3.1). Linked the procedure with OP-15 in terms of documenting a long-term forecast (s. 3.3 and s. 3.4).</td>
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</table>
1. Purpose

To describe OCWA's infrastructure maintenance, rehabilitation and renewal program for the Temagami Drinking Water Systems.

2. Definitions

*Infrastructure* – the set of interconnected structural elements that provide the framework for supporting the operation of the drinking water system, including buildings, workspace, process equipment, hardware, software and supporting services, such as transport or communication.

*Rehabilitation* – the process of repairing or refurbishing an infrastructure element.

*Renewal* – the process of replacing the infrastructure elements with new elements.

3. Procedure

3.1 OCWA, under contract with the Owner, maintains a computerized Work Management System (WMS) to manage maintenance, rehabilitation and renewal of infrastructure for which it is operationally responsible. The major components of the WMS consist of planned maintenance, unplanned maintenance, rehabilitation, renewal and program monitoring and reporting.

3.1.1 Planned Maintenance

Routine planned maintenance activities include:
- Inspect, adjust and calibrate process control equipment to ensure proper operation of water systems, pumps, chemical feeders, and all other equipment installed at the facilities.
- Inspect reservoir
- Perform routine maintenance duties to equipment including checking machinery and electrical equipment when required.
- Perform routine maintenance of the distribution system (flushing and valve cycling)
- Maintain an inventory of all equipment
- Maintain accurate records of work conducted, activities, and achievements.

Planned maintenance activities are scheduled in the WMS that allows the user to:
- Enter detailed asset information;
- Generate and process work orders;
- Access maintenance and inspection procedures;
- Plan preventive maintenance and inspection work;
- Plan, schedule and document all asset related tasks and activities; and
• Access maintenance records and asset histories.

Planned maintenance activities are communicated to the person responsible for completing the task through the issuance of WMS work orders. Work orders are automatically generated on a daily, weekly, monthly, quarterly and annual schedule as determined based on manufacturer’s recommendations and site specific operational and maintenance needs and are assigned directly to the appropriate operations personnel. This schedule is set up by a Team Lead. Work orders are completed and electronically entered into WMS by the person responsible for completing the task. Records of these activities are maintained as per OP-05 Document and Records Control.

The Team Leads maintain the inventory of equipment in WMS and ensures that appropriate maintenance plans are in place. Maintenance plans are developed according to the manufacturer’s instructions, regulatory requirements, industry standards, and/or client service requirements. Equipment Operation and Maintenance (O&M) manuals are accessible to operations personnel at the locations specified in OP-05 Document and Records Control.

3.1.2 Unplanned Maintenance

Unplanned maintenance is conducted as required. All unplanned maintenance activities are authorized by the Operations Management. Unplanned maintenance activities are recorded in the facility’s logbook and as corrective/emergency work order and are entered into WMS by the person responsible for completing the unplanned maintenance activity.

3.1.3 Rehabilitation and Renewal

Rehabilitation and renewal activities including capital upgrades (major infrastructure maintenance) are determined at least once every calendar year in consultation with Operations Management and the Owner. A list of required replacement or desired new equipment is compiled and prioritized by Operations Management in conjunction with operations personnel and is presented to the Owner for review and comment. All major expenditures require the approval of the Owner. In addition to the short-term facility needs (i.e. current year), the Capital and Major Maintenance Recommendations Report also provides a long-term (i.e. rolling 5-year) list of major maintenance recommendations. (Refer to OP-14 Review and Provision of Infrastructure).

3.1.4 Program Monitoring and Reporting

Maintenance needs for the facility are determined through review of manufacturer’s instructions, regulatory requirements, industry standards, and/or client service requirements and are communicated by means of work orders. Additionally, Operations Management and operations personnel conduct a
review of the drinking water system’s infrastructure to assess its adequacy for the operation and maintenance of the system. (Refer to OP-14 Review and Provision of Infrastructure).

To assist in monitoring the effectiveness of the program Operations Management (or designate) is provided monthly summary reports which are automatically generated and emailed from WMS.

3.2 OCWA’s infrastructure maintenance, rehabilitation and renewal program is initially communicated to the Owner through the operating agreement. OCWA’s program is communicated to the Owner on an on-going basis through quarterly reports and at a minimum once every calendar year through submission of the capital letter and the results of the Management Review.

4. Related Documents

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

5. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision #</th>
<th>Reason for Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019-05-28</td>
<td>0</td>
<td>Procedure issued – Information within OP-15 (s. 3) was originally set out in main body of the Temagami Drinking Water System Operational Plan (last revision 7, dated June 19, 2017). New Purpose, Definitions, Procedure, Related Documents and separate Revision History sections. Added the requirement to ensure the long term forecast is reviewed at once every calendar year and to document a long term forecast (s. 3.1.3) to reflect in DWQMS v. 2.0. Minor wording updates to reflect OCWA’s current WMS.</td>
</tr>
</tbody>
</table>
1. Purpose

To describe the procedure for sampling, testing and monitoring for process control and finished drinking water quality.

2. Definitions

**Challenging Conditions** – any existing characteristic of the water source or event-driven fluctuations that impact the operational process as identified and listed under OP-06A and OP-06B Drinking Water System

3. Procedure

3.1 All sampling, monitoring and testing is conducted at a minimum in accordance with SDWA O. Reg. 170/03 and the facility’s Municipal Drinking Water License (MDWL).

3.2 Sampling requirements for the facility are defined in the facility’s sampling schedule which is available to operations personnel, at the location(s) noted in OP-05 Document and Records Control. The sampling schedule is maintained by the PCT and is updated as required.

3.3 Samples that are required to be tested by an accredited and licensed laboratory, are collected, handled and submitted according to the directions provided by the licensed laboratory(ies) that conducts the analysis. The laboratory(ies) used for this facility are listed in the Essential Supplies and Services List (within the Facility Emergency Plan (FEP)).

Electronic and/or hardcopy reports received from the laboratory are maintained as per OP-05 Document and Records Control. Analytical results from laboratory reports are uploaded into OCWA’s Process Data Management system (PDM).

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

**Temagami North DWS**
- Temperature – raw water
- Turbidity – raw water, filter 1 & 2 effluent, discharge
- Free chlorine residual – treated water
- pH – raw water and treated water
- Discharge pressure – treated/distribution water (point of entry)
- Flow rates – raw water, filter 1 & 2 effluent, backwash and treated water
- Levels – clearwell 1, 2 & 3 and tower

**Temagami South DWS**
- Temperature – raw water
SAMPLING, TESTING AND MONITORING

Reviewed by: R. Marshall, PCT
Approved by: Y. Rondeau, SPC Manager

- Turbidity – raw water, filter 2 effluent, discharge
- Free chlorine residual – treated water
- pH – raw water and treated water
- Discharge pressure – treated/distribution water (point of entry)
- Flow rates – raw water, filter 2 effluent, backwash and treated water
- Levels – clearwell 1 & 2, sump, waste pit, tower

Test results from continuous monitoring equipment are captured by OCWA’s SCADA system and are reviewed by a certified operator in accordance with the requirements of SDWA O. Reg. 170/03.

3.5 Adverse water quality incidents are responded to and reported as per Environmental Emergency Procedures (EEPs) found in the Facility Emergency Plan Binder.

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

<table>
<thead>
<tr>
<th>Operational Parameter</th>
<th>Location</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alkalinity</td>
<td>Raw water</td>
<td>Grab weekly</td>
</tr>
<tr>
<td></td>
<td>Process water</td>
<td></td>
</tr>
<tr>
<td>Aluminum Residual</td>
<td>Treated water</td>
<td>Grab weekly</td>
</tr>
<tr>
<td>Aluminum Sulphate Usage</td>
<td>Chemical room</td>
<td>Bi-weekly reading</td>
</tr>
<tr>
<td>Colour</td>
<td>Treated water</td>
<td>Grab weekly</td>
</tr>
<tr>
<td>Free Chlorine Residual</td>
<td>Treated water</td>
<td>Grab weekly</td>
</tr>
<tr>
<td></td>
<td>Distribution water (various locations)</td>
<td></td>
</tr>
<tr>
<td>Sodium Hypochlorite Usage</td>
<td>Chemical room</td>
<td>Bi-weekly reading</td>
</tr>
<tr>
<td>Soda Ash Usage</td>
<td>Chemical room</td>
<td>Bi-weekly reading</td>
</tr>
<tr>
<td>Turbidity</td>
<td>Process water</td>
<td>Grab monthly</td>
</tr>
</tbody>
</table>

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

3.7 Additional sampling, testing and monitoring activities related to the facility’s most challenging conditions are captured in the existing in-house program as described above.

3.8 There are no relevant upstream sampling, testing and monitoring activities that take place for this facility/system.

3.9 Sampling, testing and monitoring results are readily accessible to the Owner at the Kirkland Lake Process and Compliance office and/or the Municipal Office.
The owner is provided a Quarterly Operations Reports which discusses regulatory results and operational issues. Owners are also provided with an annual summary of sampling, testing and monitoring results through the SDWA O. Reg. 170/03 Section 11 - Annual Report, Schedule 22 - Municipal Summary Report and through the Management Review process outlined in OP-20 Management Review.

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

4. Related Documents

Annual Report (O. Reg. 170 Section 11)
Facility Emergency Plan (FEP) Binder
Facility Logbook
Facility Round Sheets
Laboratory Analysis Reports
Laboratory Chain of Custody Forms
Municipal Summary Report (O. Reg. 170 Schedule 22)
Process Data Management System (PDM)
Quarterly Operations Reports
Reporting and Responding to Adverse Results (EEPs)
Sampling Schedule
OP-05 Document and Records Control
OP-06 Drinking Water System
OP-20 Management Review

5. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision</th>
<th>Reason for Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009-08-31</td>
<td>0</td>
<td>Procedure issued</td>
</tr>
<tr>
<td>2011-09-07</td>
<td>1</td>
<td>Addition of Process and Compliance Manager (3.0 Responsibility) and clarification of sampling under 5.0 Procedure</td>
</tr>
<tr>
<td>2013-03-13</td>
<td>2</td>
<td>Revised position titles: Operations Manager has been changed to Senior Operations Manager, Cluster Manager has been changed to Operations Manager, Operator has been changed to Operator, and Process Compliance Manager has been removed as the position was discontinued.</td>
</tr>
<tr>
<td>2013-10-29</td>
<td>3</td>
<td>Updated the name of the system to Temagami Drinking Water System to include the distribution systems</td>
</tr>
<tr>
<td>2015-02-05</td>
<td>4</td>
<td>Added Monthly Reports as a means of communicating to the client and included them as a Related Document</td>
</tr>
<tr>
<td>2017-06-19</td>
<td>5</td>
<td>References made to PDC have been replaced with the new program WISKI, Changed Monthly Report to Client Report.</td>
</tr>
<tr>
<td>2019-06-10</td>
<td>6</td>
<td>QP-07 procedure renamed OP-16. Removed Scope and</td>
</tr>
</tbody>
</table>
**OPERATIONAL PLAN**
Temagami Drinking Water Systems

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision</th>
<th>Reason for Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Responsibilities sections. Updated s. 3.1 to reference Municipal Drinking Water License and s. 3.2 to reference sampling calendar/plan and removed sampling table. Expanded information related to accredited and licensed laboratories (s. 3.3). Removed pumping and static levels. Reordered some sections and other minor edits.</td>
</tr>
</tbody>
</table>

Reviewed by: R. Marshall, PCT
Approved by: Y. Rondeau, SPC Manager
1. Purpose

To describe the procedure for the calibration and/or verification and maintenance of measurement and recording equipment at the Temagami Drinking Water Systems.

2. Definitions

None

3. Procedure

3.1 All measurement and recording equipment calibration and maintenance activities must be performed by appropriately trained and qualified personnel or by a qualified third-party calibration service provider (refer to OP-13 Essential Supplies and Services).

3.2 The Instrumentation Technician establishes and maintains a list of measurement and recording devices and associated calibration and/or verification schedules using the automated Work Management System (WMS). When a new device is installed, it is added to the WMS system by a SuperUser. The new device is tagged with a unique identification number and the maintenance schedule is set up. Work orders are then automatically generated as per the schedule (refer to OP-15 Infrastructure Maintenance, Rehabilitation and Renewal).

3.3 Details regarding the results of the calibration and/or verification are recorded within each individual work order generated by the WMS, and in the facility logbook.

3.4 Calibration and maintenance activities are carried out in accordance with procedures specified in the manufacturer’s manual, instructions specified in WMS or OCWA’s calibration procedures.

3.5 Standards, reagents and/or chemicals that may be utilized during calibration and/or verification and/or maintenance activities are verified before use to ensure they are not expired. Any expired standards, reagents and/or chemicals are appropriately disposed of and are replaced with new standards, reagents and/or chemicals as applicable.

3.6 Any measurement device which does not meet its specified performance requirements during calibration and/or verification must be removed from service (if practical) until repaired, replaced or successfully calibrated. The failure must be reported to Operations Management and the ORO, as soon as possible so that immediate measures can be taken to ensure that drinking water quality has not been compromised by the malfunctioning device. Any actions taken as a result of the failure are recorded in the facility logbook and Instrumentation Calibration/Maintenance form. Operations Management or the PCT ensures that any notifications required by applicable legislation are completed and documented within the specified time period.
3.7 Calibration and maintenance records and maintenance/equipment manuals are maintained as per OP-05 Document and Records Control.

4. Related Documents

- Calibration/Maintenance Records
- Facility Logbook
- Maintenance/Equipment Manuals
- WMS Records
- OP-05 Document and Records Control
- OP-13 Essential Supplies and Services
- OP-15 Infrastructure Maintenance, Rehabilitation and Renewal

5. Revision History

<table>
<thead>
<tr>
<th>Date</th>
<th>Revision</th>
<th>Reason for Revision</th>
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</thead>
<tbody>
<tr>
<td>2009-08-31</td>
<td>0</td>
<td>Procedure issued</td>
</tr>
<tr>
<td>2011-09-07</td>
<td>1</td>
<td>Revised to include proper title for Process Compliance Manager</td>
</tr>
<tr>
<td>2013-03-13</td>
<td>2</td>
<td>Revised position titles: Operations Manager has been changed to Senior Operations Manager, Cluster Manager has been changed to Operations Manager, Operator has been changed to Operator, and Process Compliance Manager has been removed as the position was discontinued.</td>
</tr>
<tr>
<td>2013-10-29</td>
<td>3</td>
<td>Updated system name to Temagami Drinking Water Systems to include the distribution systems</td>
</tr>
<tr>
<td>2019-06-10</td>
<td>4</td>
<td>QP-08 procedure renamed OP-17. Removed Scope and Responsibilities sections. Added s. 3.3 to clarify how calibration and/or verification activities are documented. Added s. 3.5 to include how standards, reagents and/or chemicals are verified before use to ensure they are not expired. Other minor edits.</td>
</tr>
</tbody>
</table>
1. Purpose

To describe the procedure for maintaining a state of emergency preparedness at the facility level under OCWA’s Emergency Management Program.

2. Definitions

*Emergency Response Plan (ERP)* – a corporate-level emergency preparedness plan for responding to and supporting serious (Level 3) operations emergencies

*Facility Emergency Plan (FEP)* – a facility-level emergency preparedness plan for responding to and recovering from operations emergencies

*Operations Management* – refers to the Senior Operations Manager and/or Operations Manager that directly oversees a facility’s operations

3. Procedure

3.1 The Facility Emergency Plan (FEP) is the corporate standard for emergency management at OCWA-operated facilities. The FEP supports the facility-level response to and recovery from Level 1, 2 and 3 events related to water and wastewater operations and directly links to the corporate-level Emergency Response Plan (ERP) for management of Level 3 events that require corporate support. Operations Management is responsible for establishing a site-specific FEP that meets the corporate standard for these drinking water systems.

3.2 OCWA recognizes three levels of events:

**Level 1** is an event that can be handled entirely by plant staff and regular contractors. The event and the actions taken to resolve it (and to prevent a recurrence, if possible) are then included in regular reporting (both internally and externally). Examples may include response to an operational alarm, first aid incident, small on-site spill, or a process upset that can be easily brought under control.

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

**Level 3** is an actual or potential situation that will likely require significant additional resources and/or threatens continued operations. It may require corporate-level support including activation of the OCWA Action Group and opening of an Emergency Operations Centre (EOC) as described in the corporate ERP. Level 3 events usually...
EMERGENCY MANAGEMENT

Reviewed by: R. Marshall, PCT
Approved by: Y. Rondeau, SPC Manager

involve intervention from outside organizations (client, emergency responders, Ministry of the Environment and Climate Change, media, etc.). Examples may include:

- Disruption of service/inability to meet demand;
- Critical injury including loss of life;
- Breach of security that is a threat to public health;
- Intense media attention;
- Community emergency affecting water supply/treatment;
- Declared pandemic; or
- Catastrophic failure that could impact public health or the environment or cause significant property damage.

3.3 Potential emergency situations or service interruptions identified for the Temagami Drinking Water Systems include:

- Unsafe Water
- Spill Response
- Critical Injury
- Critical Shortage of Staff
- Loss of Service
- Security Breach

3.4 The processes for responding to and recovering from each potential emergency situation/service disruption are documented within a site-specific contingency plan (CP). The CPs and related standard operating procedures (SOPs) are contained within the FEP.

3.5 OCWA's training requirements related to the FEP are as follows:

<table>
<thead>
<tr>
<th>Training Topic</th>
<th>Training Provider</th>
<th>Type of Training</th>
<th>Frequency</th>
<th>Required For</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establishing and maintaining a FEP that meets the</td>
<td>Safety, Process and Compliance Manager and/or Corporate Compliance (as required)</td>
<td>On-the-Job Practical</td>
<td>Upon hire and when changes are made to the</td>
<td>PCTs (or others identified by the Operations</td>
</tr>
<tr>
<td>corporate standard</td>
<td></td>
<td></td>
<td>corporate standard*</td>
<td>Management)</td>
</tr>
<tr>
<td>Contents of the site-specific FEP</td>
<td>Facility Level (coordinated by QEMS Representative)</td>
<td>On-the-Job Practical</td>
<td>Upon hire and when changes to the FEP are</td>
<td>All operations personnel with responsibilities for</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>made*</td>
<td>responding to an emergency</td>
</tr>
</tbody>
</table>

*Note: Changes to the corporate standard or site-specific FEP may only require the change to be communicated to Operations for implementation. Therefore, not all changes will require training.

3.6 At least one CP must be tested each calendar year and each CP must be reviewed at least once in a five-calendar year period. The reviews and tests are recorded on the FEP-01 Contingency Plan Review/Test Summary Form. This record includes the outcomes of the review/test, and identifies any opportunities for improvement and
actions taken. A scheduled test of a CP may be regarded as a review of that particular CP as long as the outcomes are evaluated using the FEP-01 form. A CP-related response to an actual event may also be considered a review or a test. A review of the incident including lessons learned should be recorded on FEP-01 following the resolution of the actual event, along with any opportunities for improvement/ actions identified.

3.7 Revisions to the CPs, SOPs and other FEP documents are made (as necessary) following a review, test, actual event or other significant change (e.g., changes in regulatory requirements, corporate policy or operational processes and/or equipment, etc.). Results of the emergency response testing and any opportunities for improvement/actions identified are considered during the Management Review (OP-20).

3.8 Roles and responsibilities for emergency management at OCWA-operated facilities are set out in the FEP. Specific roles and responsibilities related to a particular emergency situation or service interruption (including those of the Owner where applicable) are set out in the relevant site-specific CP. A general description of the respective responsibilities of the Owner and the operating authority in the event an emergency occurs is included in the service agreement with the Owner (as required by the Safe Drinking Water Act).

3.9 Where they exist, any relevant sections of the Municipal Emergency Response Plan (MERP) are included or referenced in the appendices section of the FEP. Measures specified in the MERP are incorporated into CPs where appropriate.

3.10 An emergency contact list in conjunction with the essential supplies and services list is contained within the FEP and is reviewed/updated at least once per calendar year. An emergency communications protocol is contained within the FEP. Specific notification requirements during emergency situations or service interruptions are set out in the individual CPs and in the ERP.

4. Related Documents

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

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>2009-08-31</td>
<td>0</td>
<td>Procedure issued</td>
</tr>
<tr>
<td>2011-09-07</td>
<td>1</td>
<td>Corrected Process Compliance Manager’s title</td>
</tr>
<tr>
<td>2013-03-13</td>
<td>2</td>
<td>Revised position titles; Operations Manager has been changed to Senior Operations Manager, Cluster Manager has been changed to Operations Manager, Operator has been changed to Operator, and Process Compliance Manager has been removed as the position was discontinued.</td>
</tr>
<tr>
<td>2013-06-24</td>
<td>3</td>
<td>Revised step 5.3 to state that all contingency plans must be tested over a 3 year period.</td>
</tr>
<tr>
<td>2013-10-29</td>
<td>4</td>
<td>Updated name of system to Temagami Drinking Water System to include the distribution systems.</td>
</tr>
<tr>
<td>2015-02-05</td>
<td>5</td>
<td>Updated procedure as per OCWA’s revised corporate template which; reflects updates to OCWA’s improved Facility Emergency Plan; References the three levels of operations-related events, OCWA’s Emergency Management Program and OCWA’s Emergency Communications Protocol; Clarifies training requirements in step 5.5; Updates reviewing frequencies of CPs in step 5.6; Describes when revision changes to procedures are required in step 5.7</td>
</tr>
<tr>
<td>2019-06-10</td>
<td>6</td>
<td>QP-09 procedure renamed OP-18. Removed Scope and Responsibilities sections and reordered some sections. Added definition ‘Operations Management’. Throughout procedure replaced ‘Senior Operations Manager’ references with ‘Operations Management’. Removed references to ‘OCWA’s Approach to Facility Emergency Planning’ document throughout procedure and referenced FEP instead. Aligned wording for level 1, 2 &amp; 3 events (s. 3.2) with wording in ‘OCWA’s Emergency Response Plan’. Updated training section to include role of SPC Manager (s. 3.5) and expanded testing/review section specifically to clarify how an actual test is documented (s. 3.6). Other minor edits.</td>
</tr>
</tbody>
</table>
1. Purpose

To describe the procedure for conducting internal audits at the facility level that evaluate the conformance of OCWA’s Quality & Environmental Management System (QEMS) to the requirements of the Drinking Water Quality Management Standard (DWQMS).

This procedure applies to Internal QEMS Audits conducted at the Temagami Drinking Water Systems for the purpose of meeting the DWQMS requirements for internal audits.

Note: This procedure does not apply to internal compliance audits conducted in accordance with OCWA’s Internal Audit Program.

2. Definitions

Audit Team – one or more Internal Auditors conducting an audit

Internal Auditor – an individual selected to conduct an Internal QEMS Audit

Internal QEMS Audit – a systematic and documented internal verification process that involves objectively obtaining and evaluating documents and processes to determine whether a quality management system conforms to the requirements of the DWQMS

Lead Auditor – Internal Auditor responsible for leading an Audit Team

Non-conformance – non-fulfillment of a DWQMS requirement

Objective Evidence – verifiable information, records or statements of facts. Audit evidence is typically based on interviews, examination of documents, observations of activities and conditions, reviewing results of measurements and tests or other means. Information gathered through interviews should be verified by acquiring supporting information from independent sources

Opportunity for Improvement (OFI) – an observation about the QEMS that may, in the opinion of the Internal Auditor, offer an opportunity to improve the effectiveness of the system or prevent future problems; implementation of an OFI is optional

3. Procedure

3.1 Audit Objectives, Scope and Criteria

3.1.1 In general, the objectives of an internal QEMS audit are:
   - To evaluate conformance of the implemented QEMS to the requirements of the DWQMS;
   - To identify non-conformances with the documented QEMS; and
   - To assess the effectiveness of the QEMS and assist in its continual improvement.
3.1.2 The scope of an internal QEMS audit includes activities and processes related to the QEMS as documented in the Operational Plan.

3.1.3 The criteria covered by an internal QEMS audit include:
- Drinking Water Quality Management Standard (DWQMS)
- Current Operational Plan
- QEMS-related documents and records

3.1.4 The audit scope and criteria may be customized as necessary to focus on a particular process/critical control point and/or any elements of the DWQMS which may warrant specific attention. The results of previous internal and external audits should also be considered.

3.2 Audit Frequency

3.2.1 Internal QEMS audits may be scheduled and conducted once every calendar year or may be separated into smaller audit sessions scheduled at various intervals throughout the calendar year. However, all elements of the DWQMS must be audited at least once every calendar year.

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

3.3 Internal Auditor Qualifications

3.3.1 Internal QEMS audits shall only be conducted by persons approved by the QEMS Representative and having the following minimum qualifications:
- Internal auditor training or experience in conducting management system audits; and
- Familiarity with the DWQMS requirements.

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

3.3.3 Internal Auditors must remain objective and, where practical, be independent of the areas/activities being audited.

3.4 Audit Preparation

3.4.1 The Lead Auditor:
- Establishes the audit objectives, scope and criteria;
- Confirms the audit logistics (locations, dates, expected time and duration of audit activities, any health and safety considerations, availability of key
personnel, audit team assignments, etc.).

3.4.2 Each Internal Auditor is responsible for:

- Reviewing documentation to prepare for their audit assignments including:
  - the Operational Plan and related procedures;
  - results of previous internal and external QEMS audits;
  - the status and effectiveness of corrective and preventive actions implemented;
  - the results of the management review;
  - the status/consideration of OFIs identified in previous audits; and
  - other relevant documentation.
- Preparing work documents (e.g., checklists, forms, etc.) for reference purposes and for recording objective evidence collected during the audit.

3.5 Conducting the Audit

3.5.1 Opening and closing meetings are not required, but may be conducted at the discretion of the QEMS Representative and the Lead Auditor taking into account expectations of Top Management.

3.5.2 The Audit Team gathers and records objective evidence by engaging in activities that may include conducting interviews with Operations Management and staff (in person, over the phone and/or through e-mail), observing operational activities and reviewing documents and records.

3.5.3 The Audit Team generates the audit findings by evaluating the objective evidence against the audit criteria (s. 3.1.3). In addition to indicating conformance or non-conformance, the audit findings may also lead to the identification of opportunities for improvement (OFIs). The Lead Auditor is responsible for resolving any differences of opinion among Audit Team members with respect to the audit findings and conclusions.

3.6 Reporting the Results

3.6.1 The Lead Auditor reviews the audit findings and conclusions with the QEMS Representative (if different from Lead Auditor) and Top Management. Other audit participants may also take part in this review as appropriate. This review may take place in person (e.g., during a closing meeting) or through other means (phone call, email, etc.). Any diverging opinions regarding the audit findings and conclusions should be discussed and, if possible, resolved. If not resolved, this should be noted by the Lead Auditor.

3.6.2 The Lead Auditor prepares a written report and/or completed work documents. The report/documents are submitted to the QEMS Representative (if different from Lead Auditor). The submitted documentation must identify (at a minimum):
INTERNAL QEMS AUDITS

Reviewed by: R. Marshall, PCT
Approved by: Y. Rondeau, SPC Manager

- Audit objectives, scope and criteria;
- Audit Team member(s) and audit participants;
- Date(s) and location(s) where audit activities were conducted;
- Audit findings including:
  - Related objective evidence for each element;
  - Any non-conformance identified referencing the requirement that was not met; and
  - OFIs or other observations.
- Audit conclusions.

3.6.3 The QEMS Representative distributes the audit results to Top Management and others as appropriate.

3.6.4 The QEMS Representative ensures that results of internal QEMS audits are included as inputs to the Management Review as per OP-20 Management Review.

3.7 Corrective Actions and Opportunities for Improvement (OFIs)

3.7.1 Corrective actions are initiated when non-conformances are identified through internal QEMS audits and are documented and monitored as per OP-21 Continual Improvement.

3.7.2 OFIs are considered, and preventive actions initiated, documented and monitored as per OP-21 Continual Improvement.

3.8 Record-Keeping

3.8.1 Internal QEMS audit records are filed by the QEMS Representative and retained as per OP-05 Document and Records Control.

4. Related Documents

   - Internal Audit Records (checklists, forms, reports, etc.)
   - QEMS – Summary of Findings spreadsheet
   - OP-05 Document and Records Control
   - OP-20 Management Review
   - OP-21 Continual Improvement

5. Revision History

<table>
<thead>
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<th>Date</th>
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<tbody>
<tr>
<td>2009-08-31</td>
<td>0</td>
<td>Procedure issued</td>
</tr>
<tr>
<td>2011-09-07</td>
<td>1</td>
<td>Clarification of time frames in Procedure 5.1; corrected Process</td>
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INTERNAL QEMS AUDITS

Reviewed by: R. Marshall, PCT  
Approved by: Y. Rondeau, SPC Manager

<table>
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<tr>
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<tr>
<td>2013-03-13</td>
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<td>Compliance Manager’s title; updated the development of audit protocol in Procedure 5.2</td>
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<tr>
<td>2013-10-29</td>
<td>3</td>
<td>Revised position titles; Operations Manager has been changed to Senior Operations Manager, Cluster Manager has been changed to Operations Manager, and Process Compliance Manager has been removed as the position was discontinued.</td>
</tr>
<tr>
<td>2017-06-19</td>
<td>4</td>
<td>Updated name of system to Temagami Drinking Water System to include the distribution system. Updated step 5.5 to include the review of opportunities for improvements (OFIs); revised step 5.6 to indicate the development of action plans for significant OFIs and the use of the QEMS–Summary of Findings form; Updated section 6.0 by removing Action Plans and adding the QEMS-Summary of Findings form</td>
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<tr>
<td>2019-06-10</td>
<td>5</td>
<td>Major revisions throughout procedure to clarify requirements for conducting internal QEMS audits, reporting results and dealing with corrective actions</td>
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</table>

QP-10 procedure renamed OP-19. Removed Scope and Responsibilities sections and moved scope wording to purpose section. Added definition ‘Objective Evidence’ and modified ‘non-conformance’ definition. Replaced ‘audit evidence’ with ‘objective evidence’, and ‘conformity’ with ‘conformance’ throughout procedure. Replaced ‘once every 12 months’ with ‘once every calendar year’ (s. 3.2.1, s. 3.2.3 and s. 3.4.1) to reflect wording in DWQMS v. 2.0. Added s. 3.2.3 (and modified s. 3.4.1) to describe the frequency for auditing all DWSs covered in multi-facility Operational Plans. Changed s. 3.4.2 to include preventive actions, the results of the management review and the status/consideration of OFIs. Included wording ‘for each element’, and ‘identified referencing the requirement that was not met’ to s. 3.6.2. Moved description of process for corrective actions from QP-10 s. 5.7 and OFIs from QP-10 s. 5.8 to OP-21. Added s. 3.7 to refer to OP-21.
1. **Purpose**

   To describe the procedure for conducting a Management Review of the Quality & Environmental Management System (QEMS) at the facility level.

2. **Definitions**

   *Management Review* – a formal (documented) meeting conducted at least once every calendar year by Top Management to evaluate the continuing suitability, adequacy and effectiveness of OCWA’s Quality & Environmental Management System (QEMS).

   *Operations Management* – refers to the Senior Operations Manager and/or Operations Manager that directly oversees a facility’s operations.

   *Top Management* – a person, persons or group of people at the highest management level within an operating authority that makes decisions respecting the QMS and recommendations to the owner respecting the subject system or subject systems.

   OCWA has defined Top Management for the Temagami Drinking Water Systems as:

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

3. **Procedure**

   3.1 Top Management ensures that a Management Review is conducted at least once every calendar year.

   Management Reviews for more than one drinking water system may be conducted at the same meeting provided the systems belong to the same owner and the considerations listed in section 3.4 below are taken into account for each individual system and documented in the Management Review meeting minutes.

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

   3.3 Other staff may be invited to attend the Management Review meeting or to assist with presenting information or in reviewing the information presented, where they offer additional expertise regarding the subject matter.

   3.4 The standing agenda for Management Review meetings is as follows:
   a) Incidents of regulatory non-compliance;
   b) Incidents of adverse drinking water tests;
   c) Deviations from critical control limits and response actions;
d) The effectiveness of the risk assessment process;

e) Internal and third-party audit results (including any preventive actions implemented to address Opportunities for Improvement (OFI) or rationale as to why OFIs were not implemented);

f) Results of emergency response testing (including any OFIs identified);

g) Operational performance;

h) Raw water supply and drinking water quality trends;

i) Follow-up on action items from previous Management Reviews;

j) The status of management action items identified between reviews;

k) Changes that could affect the QEMS;

l) Consumer feedback;

m) The resources needed to maintain the QEMS;

n) The results of the infrastructure review;

o) Operational Plan currency, content and updates;

p) Staff suggestions; and

q) Consideration of applicable Best Management Practices (BMPs).

3.5 In relation to standing agenda item q), applicable BMPs, if any, to address drinking water system risks discussed during other agenda items, are identified and documented in the Management Review minutes. Review and possible adoption of applicable BMPs are revisited during subsequent Management Reviews and are incorporated into preventive and/or corrective actions as per OP-21 as appropriate.

3.6 The SPC Manager coordinates the Management Review and distributes the agenda with identified responsibilities to participants in advance of the Management Review meeting along with any related reference materials.

3.7 The Management Review participants review the data presented and make recommendations and/or initiate action to address identified deficiencies as appropriate as per OP-21.

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

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

4. Related Documents

Management Review Reference Materials
Minutes and actions resulting from the Management Review
OP-21 Continual Improvement
## 5. Revision History

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<tr>
<td>2019-06-10</td>
<td>4</td>
<td>Removed Scope and Responsibilities sections. Added definitions for Top Management and Operations Management. Revisions based on new requirements of the Standard; at least once every 12 months changed to once every calendar year (s. 3.1) and efficacy changed to effectiveness (s. 3.4). Added s. 3.2 and s. 3.3 to describe who is participating in the Management Review process. Added clarification on including any preventive actions implemented to address Opportunities for Improvement (OFI) or rationale as to why OFIs were not implemented when reviewing audit results (s. 3.4.e). Added Best Management Practices (BMPs) as a standing agenda item (s. 3.4.q). Added s. 3.5 to include consideration of BMPs and link OP-20 to OP-21 Continual Improvement.</td>
</tr>
</tbody>
</table>
1. **Purpose**
   To describe the procedure for tracking and measuring continual improvement of the Quality & Environmental Management System (QEMS) for the Temagami Drinking Water Systems.

2. **Definitions**
   
   *Continual Improvement* - recurring activity to enhance performance *(ISO 14001:2014)*
   
   *Corrective Action* – action to eliminate the cause of detected nonconformity of the QMS with the requirements of the DWQMS or other undesirable situation
   
   *Non-conformance* – the non-fulfilment of a DWQMS requirement
   
   *Preventive Action* – action to prevent the occurrence of nonconformity of the QMS with the requirements of the DWQMS or other undesirable situation

3. **Procedure**

   3.1 OCWA strives to continually improve the effectiveness of its QEMS for this drinking water system(s) through the identification and implementation of corrective/preventive actions and, as appropriate, through review and consideration of applicable Best Management Practices (BMPs).

   3.2 **Corrective Actions**

      3.2.1 Non-conformances may be identified through an internal or external QEMS audit(s) conducted for these drinking water systems. They may also be identified as a result of other events such as:
      
      - an incident/emergency;
      - community/Owner complaint;
      - other reviews; and
      - operational checks, inspections or audits.

      3.2.2 The QEMS Representative (in consultation with Operations Management and/or the SPC Manager) investigates the need for a corrective action to eliminate the root cause(s) so as to prevent the non-conformance from recurring. The investigation may also include input from the operators and other stakeholders and the consideration of BMPs as appropriate.

      3.2.3 The QEMS Representative determines the corrective action needed based on this consultation. The Operations Management (or designate) assigns responsibility and a target date for resolution.
3.2.4 The QEMS Representative ensures corrective actions are documented using the QEMS - Summary of Findings spreadsheet. The QEMS Representative monitors the progress of corrective action(s) and provides status updates to Top Management.

3.2.5 The implementation and effectiveness of corrective actions are verified during subsequent internal QEMS audits and are considered during the Management Review. If there is evidence that the action taken was not effective, the Operations Management (or designate) initiates further corrective action and assigns resources as appropriate until the non-conformance is fully resolved.

3.3 Preventive Actions

3.3.1 Potential preventive actions may be identified through an internal or external QEMS audit as Opportunities For Improvement (OFIs), during the Management Review or through other means such as:

- staff/Owner suggestions;
- regulator observations;
- evaluation of incidents/emergency response/tests;
- the analysis of facility/Regional Hub or OCWA-wide data/trends;
- non-conformances identified at other drinking water systems; or
- a result of considering a BMP.

3.3.2 The QEMS Representative (in consultation with Operations Management and/or the SPC Manager) considers whether a preventive action is necessary. The review may also include input from the operators and other stakeholders and the consideration of BMPs as appropriate.

3.3.3 If it is decided that a preventive action is necessary, the QEMS Representative determines the action to be taken based on this consultation and the Operations Management (or designate) assigns responsibility and a target date for implementation.

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

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

3.4 The QEMS Rep. and Operations Management monitor corrective/preventive actions on an ongoing basis and review the status and effectiveness of the actions during
subsequent Management Review meetings.

3.5 Best Management Practices (BMPs)

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

3.5.2 BMPs may include, but are not limited to:
- Facility/Regional Hub practices developed and adopted as a result of changes to legislative or regulatory requirements, trends from audit findings or drinking water system performance trends;
- OCWA-wide BMPs/guidance or recommended actions;
- Drinking water industry based standards/BMPs or recommendations; or
- Those published by the Ministry of the Environment and Climate Change.

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

4. Related Documents

Internal Audit Records
QEMS - Summary of Findings spreadsheet
OP-05 Document and Records Control
OP-20 Management Review

5. Revision History

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<tbody>
<tr>
<td>2019-06-10</td>
<td>0</td>
<td>Procedure issued – The original information within the main body of the Temagami Drinking Water System Operational Plan (revision 7, dated June 19, 2017) was not used in OP-21 as it did meet the requirements of the new DWQMS v. 2.0. Information from OP-10 Internal Audit (s. 5.7 and s. 5.8) was incorporated into s. 3.2 and s. 3.3 of OP-21 but was modified to address non-conformances identified from additional inputs other than internal audits and preventive actions resulting from means other than OFIs from internal audits. In addition R&amp;Rs were revised to include the SPC Manager, and to clarify the role of the QEMS Representative in investigating and determining corrective and preventive actions needed. A section on Best Management Practices (s. 3.5) was added to meet the new requirements of DWQMS v. 2.0.</td>
</tr>
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</table>
Fields marked with an asterisk (*) are mandatory.

Owner of Municipal Residential Drinking Water System *
The Corporation of the Municipality of Temagami

Name of Municipal Residential Drinking Water System *
Temagami North Drinking Water System

Subject Systems

☑ Check here if the Municipal Residential Drinking Water System is operated by one operating authority. Enter the name of the operating authority in the below table.

<table>
<thead>
<tr>
<th>Name of Operational Subsystems(if Applicable)</th>
<th>Name of Operating Authority *</th>
<th>DWS Number(s) *</th>
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<tbody>
<tr>
<td>1</td>
<td>Ontario Clean Water Agency</td>
<td>220000433</td>
</tr>
</tbody>
</table>

Provide the information outlined in the ‘Contact Information’ section for each Operational Subsystem.

Contact Information 1

<table>
<thead>
<tr>
<th>Last Name *</th>
<th>First Name *</th>
<th>Middle Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legault</td>
<td>Victor</td>
<td></td>
</tr>
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Title *
Senior Operations Manager

Phone Number *
705 679-4164

Email Address *
vlegault@ocwa.com

Contact Information 2

<table>
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<tr>
<th>Last Name *</th>
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<tbody>
<tr>
<td>Marshall</td>
<td>Rebecca</td>
<td></td>
</tr>
</tbody>
</table>

Title *
Process & Compliance Technician

Phone Number *
705 648-4267

Email Address *
rmarshall@ocwa.com
Schedule C – Director’s Directions for Operational Plans (Subject System Description Form)
Municipal Residential Drinking Water System

Fields marked with an asterisk (*) are mandatory.

Owner of Municipal Residential Drinking Water System *
The Corporation of the Municipality of Temagami

Name of Municipal Residential Drinking Water System *
Temagami South Drinking Water System

Subject Systems

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RECOMMENDATION


INFORMATION

Recently we received a reply from the application made for the rehabilitation of the Lake Temagami Access Road. As we were not successful we took advantage of the offer to receive additional details regarding our project's assessment.

There were four criteria used to assess the submissions received through the most recent intake. They were Health & Safety Concerns, Technical Merit, Financial Need with the fourth being whether the project was a Joint Project or not. As highlighted in the letter, it was also pointed out during our call that they received almost $1 billion in requests for $417 million in combined funding. It was also pointed out that Road projects competed with other Road projects only and not with other types of funded programs being supported through this intake.

We were able to score well in the Technical Merit and Financial Need categories. When compared to other road projects being nominated, we did not score as well in the Critical Health and Safety as the number and severity of accidents on roads covered by other projects was greater than was the case with our project. We submitted as a stand-alone grant.

Respectfully Submitted:
Craig Davidson
Treasurer/Administrator
Dear CAO/Clerk:

I am writing to provide you with an update to your community’s project, which was submitted under the 2019 intake of the Rural and Northern funding stream of the Investing in Canada Infrastructure Program (ICIP).

Following an evidence-based provincial review process, your project was not nominated for federal review and approval. The 2019 intake of the Rural and Northern funding stream was highly competitive, and demand far exceeded the available funding – about $1 billion in funding was requested, however only $417 million in federal and provincial funding is available.

Projects that were nominated to the federal government for review and approval were those that most closely aligned with provincial assessment criteria and federal requirements. The provincial assessment criteria included reviewing projects based on critical health and safety aspects, the technical merit of the proposed project, the funding need of the proposed project and efficiencies through joint projects.

Your community could access federal funding through other ICIP streams launching this year including the Community, Culture and Recreation funding stream and/or Green funding stream. Details for the funding streams will be shared as soon as the information is available.

Ministry staff are available to provide additional details on your project’s assessment. Staff can be reached via phone at 1-877-424-1300 or email at ICIPRural@ontario.ca.

Sincerely,

Julia Danos
Director of Intergovernmental Policy
Ministry of Infrastructure
Corporation of the Municipality of Temagami

Memorandum to Council

Memo No.
2019-M-128

Staff
Committee

Subject: Procedural By-Law Schedules
Agenda Date: August 8, 2019
Attachments: Schedules B, E, F and G

RECOMMENDATION

BE IT RESOLVED THAT Council receive Memo 2019-M-128;

AND FURTHER THAT Council approve the Schedules for the Procedural By-Law;

AND FURTHER THAT the completed By-Law be placed on the next agenda for Council’s direction.

INFORMATION

Further to the Procedural By-Law that was reviewed at the last meeting, two schedules have been added that include guidelines for the various types of delegations and the recording of meetings. In addition, Schedule B – Agenda Outline has been added to this report as it was blank at the last meeting, and Schedule E – Electronic Participation has been updated to make it easier to read.

Once these schedules have been approved, adjusted as required, we can then return the full Procedural By-Law, complete with Schedules A-G, for Council’s consideration.

Respectfully Submitted:
Craig Davidson
Treasurer/Administrator
“Schedule B”

AGENDA

The Agenda will shall be prepared by the Clerk using the following headings:

1. Call to Order and Roll Call  
2. Adoption of the Agenda  
3. Declaration of Conflict of Pecuniary Interest and the General Nature thereof  
4. Report from Closed Sessions  
5. Adoption of the Minutes of previous meetings  
6. Business Arising from Minutes  
7. Delegations/Presentations  
   7.1 Registered Delegations – With Presentations  
   7.2 Invited Presentations  
   7.3 Registered Delegations – Without Presentations  
   7.4 Unregistered Delegations  
8. Consent Agenda Items  
   8.1 Staff Reports for Information  
   8.2 Correspondence for Information  
   8.3 Minutes of Local Boards & Committees  
9. Staff Reports  
10. Council Committee Reports  
11. Announcements – Mayor and Council  
12. Correspondence  
   a. Action Correspondence  
   b. Resolutions from Other Municipalities  
13. By-Laws  
14. Committee Minutes  
15. Unfinished Business  
16. New Business  
17. Notice of Motion  
18. Questions from Public – Items on the Agenda  
19. Confirmation By-Law  
20. Adjournment
“SCHEDULE E”

ELECTRONIC PARTICIPATION

The Municipal Act, under Section 238 (2), permits electronic participation. Municipalities are able to permit and provide the extent and manner of this participation.

Members may participate electronically by phone or internet. Other forms of electronic communication may be permitted at the time by Council resolution. The Municipality shall pay costs associated with conference calling required for electronic participation. In the event there is a service interruption, the Chair may call one recess for ten (10) minutes to rectify the situation.

Members participating through electronic means shall declare any Conflicts as may arise through notice filed with the Clerk’s office.

There is no restriction to the number of meetings that an individual Member of Council may participate through electronic means.

Electronic participation is permitted for any Open Session of Council.

Electronic participation is NOT permitted for any Closed Session of Council.

Members participating in the meeting by electronic means are not included when determining quorum. Accordingly, a maximum of three Members may participate by electronic means provided that the rest of Council is present in Council Chambers. Members wishing to participate electronically shall advise the Clerk. Once three requests have been received the Clerk shall advise Council that the limit for electronic participation has been met. Requests should be received by noon on the business day preceding the meeting.

The Chair of the meeting shall be physically present. When the Head of Council, or Chair of the Committee as the case may be, is participating electronically, the Chair for the meeting will be determined as set out in the Procedural By-Law.

The Chair shall ensure that Members participating electronically are given the same opportunity to speak to each questions as they would have been given if present in Council Chambers.

Members participating electronically shall be permitted to vote through verbal means.

Members participating electronically shall have the same privileges related to ‘rising on a point of order’ or moving amendments verbally.
Delegations/Presentations

The general rules of conduct shall apply to all delegations and presentations received by Council

Registered Delegations – With Presentations

1. Council may hear a maximum of two registered delegations at each Regular Council Meeting. Staff may schedule delegations for later meetings with respect to this guideline.

2. Any person wishing to register as a delegation shall submit to the Clerk a written request including their name and contact information by Wednesday at 4:30 pm, eight days prior to the regular meeting at which the person wishes to be heard. This request should include the full content of the delegation. Staff will respond in the appropriate format to advise if Council will hear the presentation and outline details that may be necessary.

3. Delegations are not allowed to appear on an issue that has already been heard by Council unless there is new information.

4. Prior to a delegation being heard at Council, Staff shall prepare reports that may be necessary.

5. Those addressing Council shall confine their remarks to the business stated in their request.

6. Delegations shall limit their presentations to not more than ten (10) minutes except where delegations consisting of more than two (2) people, delegations shall be limited to two (2) speakers and limited to speaking not more than fifteen (15) minutes in total.

7. Council shall receive the delegation by resolution.

8. Council shall, as a matter of course, defer decisions arising from the delegation until the next regular session of Council.

Registered Delegations – No Presentation

1. Delegations wishing to appear before Council but without a formal presentation shall, within the time prescribed above, make a request to appear with the Clerk.

2. The request shall include the person’s name and the general nature and the general nature of the topic they wish to discuss.

3. The guidelines for Delegations stated above apply.

Invited Presentations

1. Persons or groups invited by Council to make a special presentation on a specific subject shall not be constrained by the time limits set out for other delegations. Sufficient time will be allowed as required to present their information and respond to questions from Council as necessary. In consultation with the Mayor and the Treasurer/Administrator, the Clerk shall determine whether invited presentations will count towards the maximum delegations permitted at any meeting.

2. Council may choose to receive invited presentations at a Special meeting called for that purpose or to alter the start time of the regular session based on the needs of the needs and nature of the presentation.
Unregistered Delegations

1. At regular sessions of Council, following Registered Delegations and Invited Presentations, Council shall allow a further fifteen (15) minutes (maximum) to hear unregistered delegations.

2. Unregistered Delegations shall confine their remarks to items on the current agenda adopted by Council.

3. The Minutes of the meeting shall list only the name of the presenter and the agenda topic they spoke to.

4. Each presenter shall be limited to a maximum of five (5) minutes and shall be heard in the order designated by the Chair.

5. One the maximum of fifteen (15) minutes in total has been reached, no further unregistered delegations shall be heard.

6. Unregistered delegations shall not be permitted to address matters related to statutory public meetings or items related to hearing or tribunals that may be on the agenda. Those wishing to comment relative to a statutory public meeting will be asked to save their remarks for the appropriate time during the statutory public meeting.
1. **PURPOSE**

As stated in the Municipality of Temagami’s Accountability and Transparency Policy: “The Council of The Corporation of the Municipality of Temagami acknowledges that it is responsible to provide good government for its stakeholders in an accountable and transparent manner … Accountability, transparency and openness are standards of good government that enhance public trust. They are achieved through the municipality adopting measures ensuring, to the best of its ability, that all activities and services are undertaken utilizing a process that is open and accessible to its stakeholders.”

A high percentage of Temagami’s taxpaying population resides outside the physical land base of Temagami, making attendance at council meetings difficult for the majority, therefore Council has decided to provide audio recordings of the public sessions of Council meetings to enhance transparency and accountability by providing an additional means for its residents to be fully aware of council proceedings.

This document is to specify the policy for creating, storing, accessing and disposing of audio recordings of Council meetings.

2. **SCOPE**

This policy will apply to the recording of both open and closed sessions Council meetings.

3. **DEFINITIONS**

For the purposes of this Policy:

3.1. Council meeting – means a regular or special meeting of Council as provided for in the Procedural By-law.

3.2. Audio recording – means any recording made by any electronic device capable of recording sound. This includes but is not limited to recordings made by digital audio files and stored on a computer, or in any other format.

3.3. Official Record of a Meeting – means the written minutes of the proceedings of the meeting as prepared by the Municipal Clerk.

3.4. Transitory Record – for the purpose of this policy means a record, that has only a temporary value and is not required to meet statutory obligations, set policy,
4. OFFICIAL RECORD

In accordance with the Municipal Act, 2001, minutes of meetings are to be recorded by the Clerk and approved minutes are the official record of the Municipality of Temagami meetings. The keeping of audio recordings of meetings in no way detracts or undermines the position of approved minutes as the official record of decisions and are considered to be transitory records.

5. PURPOSE OF RECORDINGS

Audio recordings of open sessions of Council meetings shall be for the primary purpose of making the recordings available to the public thorough the municipal website, and may also be used by the Clerk or designate for the purpose of reference when compiling the minutes of the meeting.

Audio recordings of Closed Session meetings of Council shall be for the primary purpose of making the recordings available to an investigator from the Ombudsman’s office (or other official closed meeting investigator appointed by Council in accordance with the Municipal Act) in the event of a formal investigation of a closed meeting complaint, and may also be used by the Clerk or designate for the purpose of reference when compiling the minutes of the meeting.

6. TECHNICAL DIFFICULTIES

The inability to record any meeting due to technical difficulties with recording equipment will not prohibit the meeting from commencing or continuing.

The Municipality shall not be liable for failing to publish or produce audio recordings of any meeting where recording the meeting was not viable due to technical difficulties.

Due to the nature of technical equipment, it is not guaranteed that audio recordings will be continuous or fault-free.

7. NOTICE

Notice shall be provided to ensure that presenters and members of the public are aware that the meeting proceedings are being audio recorded and made available through the municipal website.

The wording of the notice shall be as follows:

“An audio recording of the Open Session of this meeting is being made and will be available through the Municipal Website as a public service to further enhance access to
municipal government services and to continue to promote open and transparent government”.

“As a visitor, your presence may be recorded and your name and address may be revealed during certain parts of the Council meeting”.

The Notice shall be displayed/expressed in the following manner:

- On the agenda for the relevant meeting of Council
- On notices posted at the entry doors to the meeting room
- On the municipal website
- On the information sheet for delegations
- Verbally to phone-in delegations

8. TERMINATION OR SUSPENSION OF RECORDING

The recording of Council meetings shall begin at the commencement of the meeting and conclude at the adjournment of the meeting. The Chair has the authority to request termination or suspension of the recording of a meeting if continuing the recording would prejudice the proceedings of the meeting. This would include:

- Public disturbance or other suspension of the meeting
- Exclusion of the public and press
- Any other reason as agreed by Council.

9. RESPONSIBILITY

9.1. Municipal Clerk and/or Designate

Shall be responsible for:

- Audio recordings of all open sessions and closed sessions of Council.
- Ensuring that closed sessions are recorded in separate files from open session recordings.
- Publishing the audio recordings of all open sessions so that they are accessible through the municipal website (by means of storage on the municipal website or a link to an outside provider such as SoundCloud) without alterations to the original recording.
- Archiving and storing the audio recordings of Council meetings electronically.
- Ensuring the confidential storage of closed session recordings

9.2. Chair

Shall be responsible for:

- Clearly announcing all business before Council
- Maintaining order as outlined within the Procedural By-law, and acknowledging each member by name prior to him or her speaking.

9.3. Members of Council

Shall be responsible for:
• Ensuring that his or her microphone at the council table is turned on any and every time he or she has the floor to speak.
• Speaking directly into his or her microphone at the council table to ensure that his or her words are recorded.
• Refraining from speaking at the same time as another member is speaking to ensure that the member who has the floor is clearly recorded.

10. STORAGE AND RETENTION
Storage of audio recordings of Council meetings will be maintained by the Municipal Clerk.
Archived audio meeting files will be maintained and disposed of in accordance with the Municipal Record Retention Schedule.

11. ACCESS TO RECORDINGS
Audio recordings of Council meetings can be accessed through the municipal website for a period of up to six (6) months.

Access to archived and stored recordings of Council meetings must be requested in writing to the Municipal Clerk.

Any costs for reproduction of audio recordings, including the cost of the medium they are recorded on and staff time involved shall be the responsibility of the requester and must be paid before an audio recording is released. These costs shall be included in the annual Municipal User Fees By-law.

Copyright to the records of council meetings made available on the Municipal website is owned by the Municipality. No part of the recorded materials posted on the Municipal website may be reproduced except in accordance with the provisions of the Copyright Act, as may be amended or replaced from time to time or without the express written permission of the Municipality.

12. POLICY REVIEW
This policy shall be reviewed a minimum of once per Council term to ensure its effectiveness.
Corporation of the Municipality of Temagami

Memorandum to Council

Memo No. 2019-M-129

Subject: Assumption of Private and Unassumed Road Policy
Agenda Date: July 11, 2019
Attachments: Assumption of Private and Unassumed Road Policy

RECOMMENDATION

BE IT RESOLVED THAT Council receive Memo No. 2019-M-129;

AND FURTHER THAT Council direct Staff to prepare a by-law to entrench the Assumption of Private and Unassumed Road Policy for Council’s consideration at their next meeting.

Respectfully Submitted:
Suzie Fournier
Municipal Clerk
PURPOSE
This policy establishes guidelines and minimum construction standards required for any road not presently maintained by the Municipality as Council is considering the possibility of assuming the road and providing maintenance through municipal resources. These could be ‘Crown Roads’, unmaintained municipal road, seasonal roads or private roads. While seasonal roads may be maintained, except for winter maintenance, by the Municipality, this policy would apply to any changes in the services provided.

The goal of this policy is:

a) To ensure consistency in the upgrading of existing municipal roads;

b) To ensure adherence to the relevant Official Plan policies;

c) To avoid passing any new upgrading costs are borne by those receiving the benefit rather the ratepayers of the municipality as a whole;

d) To ensure that proponents upgrading existing seasonal or private roads to municipal roads abide by a minimum municipal standard; and

e) To control the means by which the Municipality of Temagami may assume; private or seasonally maintained municipal roads to provide fairness and consistency.

DEFINITIONS
Corporation: shall mean the Corporation of the Municipality of Temagami.

Council: shall mean the Council of the Corporation of the Municipality of Temagami.

Superintendent: shall mean the Superintendent of the Public Works Department.

Proponents: shall mean developers, residents, or ratepayers or other associations who are requesting the municipality assume for maintenance purposes an existing seasonal or private road so that it becomes a municipal road or seasonal road.

Assumption: shall mean the process by which a municipality passes a by-law to accept a road into the municipal road system.

Non-Assumed Road: An existing road or road to be constructed that was or will be constructed and maintained by a person or group or persons without any responsibility or obligation to construct or maintain same by the Corporation of the Municipality of Temagami.
**Municipal Roads:** shall mean roads and highways in municipal ownership, care and control, and that have been assumed by the municipality for year-round maintenance by the municipality.

**Private Road:** shall mean roads in private ownership that have not been assumed by the municipality, which provide access by means of registered right-of-way to private property; the use and maintenance of which is the responsibility of the abutting land owners.

**Public Roads:** shall mean roads that are not part of the municipal road system, typically owned by the Province.

**Seasonal Roads:** shall mean no year-round maintenance (no snowplowing and sanding).

**POLICY**
When submitting a proposal to the Municipality, all documentation and information must satisfy Council that the assumption of the unassumed road is in the public interest, and that the proponent acknowledges and accepts that any and all costs associated with such assumption are to be borne by the proponent. To do this the following procedures applied.

**CRITERIA FOR ASSUMPTION**
Without being necessarily limited to the items listed below, the following criteria should be considered in determining if it is in the public interest to assume the unassumed, or private road:

a) The number of residences/properties served by the road.

b) Would the assumption of the road over-extend existing municipal roads maintenance programs, operations and resources?

c) Was the road constructed to a minimum municipal standard? In order for an unassumed road to be transferred to a municipal road it must meet the municipal minimum construction standard.

d) Will the assumption of the road promote further desired development?

e) The owner(s) of the unassumed road shall be responsible to conduct an assessment of the current state, whether it be the Public Works Superintendent or a Professional Engineer that conducts the assessment. In the case of ‘Crown Roads’ landowners serviced by the road may need permission from the Province to conduct this assessment.

f) The assessment report shall provide a cost estimate for any upgrades required to the unassumed road.

g) Have the Conservation Authorities or the Ministry of Natural Resources and Forestry, whichever has jurisdiction, been notified and are regulations followed where there could be any interference with wetlands or any alterations to shorelines and watercourses?

h) Does the Ministry of Transportation supports the proposed assumption by the Municipality?
i) The proposal conforms to the land use policies of the relevant Official Plan and Zoning By-law if lot creation would occur as a result of the assumption process.

j) There is a reference plan prepared by an Ontario Land Surveyor or documenting lands affected by the proposed assumption.

k) If there are non-road related consideration (economic development) that should be considered. If there are terms outside of the road area that are relevant in the circumstances, Council can direct these to be included in the report on assuming roads into the Municipal Road System.

**PROPONENT RESPONSIBILITIES**
The cost and associated process (studies, surveys etc.) of bringing the road up to municipal standard will be the responsibility of the proponents.

**STAFF RESPONSIBILITIES**

a) Prior to assuming the road, municipal staff or professional engineer will prepare a report, an estimate of all costs relating to the construction or reconstruction of the unassumed road to the minimum standards. The cost of the independent engineering review and cost-benefit analysis will be borne by the Proponents.

b) Municipal staff or professional engineering consultant will conduct a cost-benefit analysis to determine the operational costs of maintaining the road and the impact on Municipal resources.

c) Year round road service will not be provided on seasonal roads or private roads until Council passes a by-law to formally assume the road and until the subject road is upgraded to the road standards detailed in Appendix “A” to this policy, at the expense of the benefitting property owners.

**MUNICIPAL ROAD STANDARDS**
Appendix “A” to his policy provide specifics for the Minimum Road Construction Standards that must be met prior to the assumption of any unmaintained municipal road or private road.

Road improvement and work necessary to bring a road up to the standards listed in Appendix “A” may include: property acquisition for road allowance widening and/or turnarounds, tree removal, road base and/or surface improvements, drainage improvement, horizontal and vertical alignment improvements, removal of encroachments and signage installation.
## APPENDIX A
Municipality of Temagami Minimum Road Construction Standards

<table>
<thead>
<tr>
<th>DESIGN CRITERIA</th>
<th>MINIMUM STANDARD</th>
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<tbody>
<tr>
<td>Right-of-way</td>
<td>20 m (66’) required</td>
</tr>
<tr>
<td>Minimum Clearing Width</td>
<td>12 m (40’)</td>
</tr>
<tr>
<td>Design Speed</td>
<td>40 km/hr</td>
</tr>
<tr>
<td>Horizontal Radius</td>
<td>50 m</td>
</tr>
<tr>
<td>Maximum Grade</td>
<td>12%</td>
</tr>
<tr>
<td>Vertical Crest</td>
<td>K=5</td>
</tr>
<tr>
<td>Vertical Sag</td>
<td>K=7</td>
</tr>
<tr>
<td>Minimum Stopping Sight Distance</td>
<td>45 m</td>
</tr>
<tr>
<td>Surface Width</td>
<td>6 m (19.7’)</td>
</tr>
<tr>
<td>Shoulder Width</td>
<td>0.5 m (1.5’) each side</td>
</tr>
<tr>
<td>Horizontal Clearance</td>
<td>2 m (6’) each side</td>
</tr>
<tr>
<td>Vertical Clearance</td>
<td>4.3 m (14’)</td>
</tr>
<tr>
<td>Turnarounds OPSD 500.01</td>
<td>10 m (33’) radius including 1 m shoulder</td>
</tr>
<tr>
<td>Surface Material</td>
<td>Granular “A”</td>
</tr>
<tr>
<td>Ditches</td>
<td>300 mm (12”)</td>
</tr>
<tr>
<td>Signage</td>
<td>As specified in the Ontario Traffic Manual</td>
</tr>
</tbody>
</table>

### NOTE

The standards detailed above are suggested guidelines except for the requirement for a deeded right-of-way of 20 m, which is required to provide for adequate maintenance width in the event that the road is ever assumed by the municipality. These standards are not applicable to new construction.
Deviations from the minimum standard may be approved by the Public Works Superintendent and/or Professional Engineer where the minimum standards cannot be achieved. The deviation must not result in any significant loss of safety or increased maintenance costs to the municipality.

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Corporation of the Municipality of Temagami

Memorandum to Council

Subject:  Report from Treasurer Administrator

Agenda Date:  August 8, 2019

Attachments:  

**RECOMMENDATION**

BE IT RESOLVED THAT Council receive Memo 2019-M-130.

**INFORMATION**

Taxes – Current year
Property taxes have been billed for the year. Installments are August 27th and October 29th. For those properties that do not receive a tax bill, the invoices for special charges (water/sewer/grinder/garbage) have also been issued.

Taxes – outstanding from 2016 and beyond
We have issued 39 letters to property owners who have taxes outstanding in 2016 and prior. Included in the letters is an offer of a monthly payment, including amount, which if accepted and paid for five years, should clear taxes owing on their account. An unsigned agreement was included to allow the effected ratepayers an opportunity to take advantage of this in a time effective way.

The letter also highlighted that those properties where there was no action (agreement or payment) by October that registration procedures will commence. For Council’s information, the services of Realtax will be used to administer the registrations process. Once files have been transferred to them, a more indepth search is completed on the properties prior to registering the tax arrears certificate on title. Once registered, the property owner has one year to pay the amount owing or enter into an extension agreement (in the first 283 days) which sets out the minimum monthly payment required until the balance is paid in full. Should any property remain unpaid after the year (and without an extension agreement) then the Municipality has a further year to organize a conduct a tax sale.

Communication was also sent to the Province as there are a number of Provincial properties where previously assessed Grant In Lieu amounts have not been paid. We are working with the province to identify the reasons for this non payment.

We are also compiling information for about 10 more properties that owe money for the 2017 tax levy which should be leaving the office by Labour Day. These properties, if no payment plan is accepted or payments received would be sent for registration at the start of 2020.

Grants
The Province recently announced the next intake for the Rural Economic Development Grant program. Applications will be accepted until early September. There will be a report for the next meeting to provide options for this program.

Ambulance Building
At the next session of Council, a report on required improvements and priorities for the Ambulance will be presented for discussion.
Ambulance Service

Earlier this year, there were two items that have an effect on the Temagami Ambulance Service. One is the departure of Jim Steward from the North Bay Regional Health Centre and the other was the threatened reduction of Provincial Funding.

The Municipality of Temagami has an agreement with the North Bay Regional Health Centre for ‘Management Services’. Presently, now that Mr. Stewart is no longer our point of contact, the definition of ‘Management Services’ is being questioned. This is also evolving into larger discussions between the DSSAB and the three ambulance service operators in light of changes being contemplated by the Province related to Emergency Medical Services. While we are not yet at a point where there are any tangible recommendations, I thought it was important for Council to know that the discussions were taking place. As we work through the Fall, there will be further information presented to Council once it is available.

Respectfully Submitted:
Craig Davidson
Treasurer/Administrator
Corporation of the Municipality of Temagami

Memorandum to Council

Memo No. 2019-M-131

Subject: Proposed Speed Limit
Agenda Date: August 8, 2019
Attachments: Letter from Ministry of Transportation (MTO)/

RECOMMENDATION

BE IT RESOLVED THAT Council receive Memo 2019-M-131;

AND FURTHER THAT Council direct the Staff to contact the Ministry of Transportation (MTO) to reconsider the speed limits approaching the hamlet of Temagami in both direction.

Respectfully Submitted:
Suzie Fournier
MUNICIPAL CLERK
His Worship Dan O'Mara
Mayor
Municipality of Temagami
7 Lakeshore Drive, P.O. Box 220
Temagami, ON P0H 2H0

Dear Mayor O'Mara:

This letter is to inform you that this office is processing an Ontario Regulation to implement a change in speed zones on Highway 11 in the Municipality of Temagami located in the area of Finlayson Point Provincial Park.

The Northeastern Region Traffic Section has conducted an operational review on Highway 11 within the Municipality of Temagami. The results of this review support replacing the existing 80 km/h speed zone with a 70 km/h speed zone. This revision will improve safety in the area and will require drivers to reduce their speed further in advance as they approach the Municipality of Temagami.

Pending the Minister's approval, these changes will be implemented. Illustrations are attached for your reference.

If you have any questions or concerns regarding this matter, please feel free to contact me at 705-497-6834.

Sincerely,

John Pratte
Traffic Analyst

Encl.
Hi Suzie,

This is a follow up to my initial email indicating that we would review the traffic operation and speed through and approaching Temagami.

Our review considered the traffic operation, collision history and existing posted speed limits. The school crossing location was also reviewed with consideration of the issues raised. The result of our study indicated that the that the current posted speed limits for southbound motorists are appropriately placed and have good compliance and the school crossing is operating effectively. It was noted during our review that a pedestrian ahead sign was in place for the northbound direction but requires relocation to provide advance warning for the southbound traffic entering Temagami. Arrangements have been made to relocate the pedestrian crossing sign.

With regard to the boulevard that is used by pedestrians on the south side of Highway 17 north of the school crossing there was concern with the ability for the municipality to clear the snow. To help address this concern the ministry will be taking steps to relocate the signs off the boulevard adjacent to it to allow for ease of clearing.

Additional items noted for improvement include the northbound approach to Temagami. The ministry will be taking the appropriate measures to revise the existing 80km/h posted speed limit to provide a transition speed of 70km/h between the existing posted 90km/h zone and the existing posted 50/km/h zone. This process can take from 3 to 6 months for regulations to be revised.

I trust this information has been of assistance and thank you for bringing your concerns to our attention.

Sincerely

Robert Long
Traffic Supervisor / Northeastern Region
Office (705)497-6843 cell (705)497-4676
Corporation of the Municipality of Temagami

Memorandum to Council

Memo No.
2019-M-126

Subject: Temiskaming Smallmouth Bass Series Tournament

Agenda Date: August 8, 2019

Attachments: Correspondence Dave LaFontaine C/O for Temiskaming Smallmouth Bass Series

RECOMMENDATION

BE IT RESOLVED THAT Council receive Memo 2019-M-126;

AND FURTHER THAT Council authorize a donation in the amount of $450.00 for sponsorship of the 2019 events.

INFORMATION


As per the donation policy interpretation the organization falls under the eligibility guidelines, as it is a non-profit organization and the event occurs within our municipality.

The organization has been supported by the Municipality for past 17 years, as per the policy if an organization has received funding for three years for the same project, Council will be asked during the 2020 budget guideline stage whether this should be included as a line item outside of the municipal donations.

Respectfully Submitted:
Suzie Fournier
Municipal Clerk
The Corporation of the Municipality of Temagami
June 10th 2019

Temiskaming Smallmouth Bass Series
Dave LaFontaine
1-705-647-2793

Spring is here and the 17th year as the biggest live release Bass Tournament Series in northern Ontario is underway.

The Qualifier for Lake Temagami is on July 14th.
The Qualifier for Cassels Lake is August 4th.

We are proud to say that the Corporation of the Municipality of Temagami has been part of our great sponsor family for the last 17 years, and to announce the 1019 Classic will be on Lake Temagami August the 31st and September 1st.
The price for 2019 sponsorship will be $450 for the 2 qualifiers plus Classic. Please make cheque out to Dave LaFontaine C/O for Temiskaming Smallmouth Bass Series and forward it to Dave LaFontaine, Englehart Ontario, Hwy. 569 953587 POJ 1HO.

Thank You

Dave LaFontaine
Corporation of the Municipality of Temagami

Memo No. 2019-M-125

Subject: Reducing Litter and Waste in our Communities

Agenda Date: August 8, 2019

Attachments: Correspondence from Town of Halton Hills

RECOMMENDATION

BE IT RESOLVED THAT Council receive Memo No. 2019-M-125;

AND FURTHER THAT Council support the resolution passed by the Council of the Town of Halton Hills regarding Reducing Litter and Waste in our Communities.

INFORMATION

Correspondence has been received from the Town of Halton Hills regarding Reducing Litter and Waste in our Communities.

The resolution is requesting that the Province of Ontario, through the discussion paper entitled “Reducing Litter and Waste in our Communities”, to review and implement a deposit/return program for all single use plastic, aluminum and metal drink containers and that the Province of Ontario review current producer requirements and look for extended producer responsibility for all packaging.

Respectfully Submitted:
Suzie Fournier
Municipal Clerk
WHEREAS the Province of Ontario, through the Ministry of the Environment, Conservation and Parks, has posted a discussion paper entitled “Reducing Litter and Waste in our Communities”;

AN WHEREAS producer responsibility has not been adequately addressed by the Province of Ontario;

AND WHEREAS a successful deposit/return program for single use plastic, aluminum and metal drink containers has been in existence in other Provinces in Canada including Newfoundland, Nova Scotia and British Columbia;

AND WHEREAS these successful program have eliminated many of these containers from the natural environment;

THEREFORE BE IT RESOLVED that the Council of the Town of Halton Hills call upon the Province of Ontario, through the discussion paper entitled “Reducing Litter and Waste in our Communities”, to review and implement a deposit/return program for all single use plastic, aluminum and metal drink containers;

AND FURTHER THAT that the Province of Ontario review current producer requirements and look for extended producer responsibility for all packaging;

AND FURTHER THAT a copy of this motion be sent to the Premier of Ontario; the Minister of the Environment, Conservation and Parks; the Minister of Municipal Affairs; the Association of Municipalities of Ontario; the Region of Halton, and all municipalities in the Province of Ontario.

Mayor Rick Bonnette
THE CORPORATION OF THE
MUNICIPALITY OF TEMAGAMI

BY-LAW NO. 19-1471

Being a By-law to adopt a Council Donation Policy

WHEREAS The Municipality of Temagami deems it desirable to adopt and maintain a policy with respect the process of approval of remitting of municipal donations to non-profit groups, associations and organization;

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

1. THAT the Municipality of Temagami adopts the Council Donation Policy attached hereto as Schedule “A” which forms part of this By-Law;

2. That the Clerk of the Municipality of Temagami is hereby authorized to make minor modifications or corrections of a grammatical or typographical nature to the By-Law and schedule, after the passage of this By-Law, where such modifications or corrections do not alter the intent of the By-Law.

3. That this By-Law shall come into full force and effect upon final passing thereof.

READ A FIRST time this 8th day of August, 2019.

READ A SECOND AND THIRD time and finally passed this 8th day of August, 2019.

__________________________
Mayor

__________________________
Clerk
PURPOSE
The purpose of this policy is to establish guidelines regarding the process of approval and of remitting of municipal donations to non-profit groups, associations and organizations.

GUIDELINES ELIGIBILITY
Municipal donations are available to groups, associations and organizations that are not for profit.

Preference will be given to non-profit groups, associations or organizations that are based in The Municipality of Temagami and to events that will be held within its boundaries. Council may consider and remit donations to groups or activities that are held outside of his boundaries at their discretion.

Applicants can make only ONE request for the year (either for one event or for the years’ events).

INELIGIBILITY
Municipal donations will not be given to the following:

- Individuals;
- Organizations or activities of a political nature;
- Activities benefitting board members only;
- If an activity is deemed discriminatory, contrary to municipal policies and values, or unlawful;
- School bursaries.

FUNDS
The municipal donations given are not intended to be the sole source of financial support for the non-profit group, association, organization, nor for the event.

Amounts will be included in the annual budget for cash contributions and “In-Kind” contributions. The total of these two budget amount shall not exceed 1% of the municipal tax levy.

APPLICATION PROCESS
Applicants must fully and legibly complete the application Form – see Annex “A”.

The Municipality will accept applications for support twice each calendar year, April 30th and October 31st. Applications received at times other than these two intake periods would either be held to be considered at the next application date or, at Council’s sole discretion, be considered by when received.

Past recipients shall report on how the donation was used and the impact the donation had on the organization, event, and ongoing operations. This donation report shall be received prior to the organization’s application for support being considered. Organization shall also include a
financial statement of their activities where possible.

**APPROVAL PROCESS**
Requests for Municipal Donations will be received by the Office.

In the month following an application intake period, staff will prepare a report summarizing requests received. Included in this report will be the value of any cash and “in-kind” contributions requested as well as any previously approved requests and the approved budget for donations.

Council will review the report and make their decision in the form of a resolution.

Requests made outside the application intake periods where Council has decided to consider the request as it is received, will be presented to Council through a Staff report. The report will include the value of the contribution requested, other contributions approved by Council in the fiscal year as well as the budget approved for donations. Again, Council will review the report and make their decision in the form of a resolution.

**AFTER APPROVAL AND REPORTING**
Applicants must recognize the Municipality of Temagami contribution (for example a banner or sign at their event with the Municipality logo.

If a municipal contribution of more than $500.00 is approved, a report detailing how the funds were spent must be sent to The Municipality Council within 60 days following the event or events.

Staff will track the value of ‘In Kind’ donations and add this amount to the financial donation made.

**BUDGET CONSIDERATIONS**
If an organization has received funding for three years for the same project, Council will be asked during the budget guideline stage whether this should be included as a line item outside of the Municipal Donations.

At their discretion, Council could provide direction to Staff to include further requests in the Municipal Donation budget, include further requests in a separate area of the budget, or direct Staff to inform the potential applicant that their event will no longer be supported.

**REQUIREMENTS**
If a donation request is received from the same organization for the same purpose on a yearly basis a secondary review will be done in the fourth year.

**CANCELLATION**
If your event is cancelled or if the non-profit group, association or organization is disbanded and funds have been received, a full refund must be made to The Municipality of Temagami within 30 days of the notice of cancellation or closure.

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ANNEX A

SECTION A – ORGANIZATION'S INFORMATION
Name of organization:

Mailing Address:

Telephone number:

Fax or Email:

Contact Person Name:

Contact Telephone Number: Email:

SECTION B – APPLICATION SUMMARY

Is your request for: ☐ 1 activity / Event

Note that only one donation will be given per application / organization per year.

Amount Requested: $ 

Name of activity or list of activities:

Description of activity / activities’ summary:

Start date / End date of activity / List of dates:

Location of activity / activities:

Is admission free? ☐ Yes/ ☐ No, the admission fee is: $

Describe how the Municipality will be recognized during your event(s):

______________________________________________________________

If the amount given to the organization is more than $500.00, they are required to submit a report of how the money was spent.

If applicable, the organization consents to sending a report to The Municipality of Temagami Council:

☐ Yes/ ☐ No,

______________________________________________________________

Signature of applicant Date
THE CORPORATION OF THE MUNICIPALITY OF TEMAGAMI

BY-LAW NO. 19-1472

Being a By-law to adopt a Code of Conduct respecting the behaviors of Members of Council in the performance of their duties and responsibilities as elected community representatives and the behaviors of Local Board/Committee Members

WHEREAS, Section 8(1) of the Municipal Act, 2001, S.O. 2001, as amended, provides that the powers of a municipality under this or any other Act shall be interpreted broadly so as to confer broad authority on the municipality to enable the municipality to govern its affairs as it considers appropriate and to enhance the municipality’s ability to respond to municipal issues;

AND WHEREAS, Section 10(2) of the Municipal Act, 2001, S.O. 2001, as amended, authorizes that single tier municipalities may pass by-laws regarding accountability and transparency of the municipality and its operations;

AND WHEREAS, Section 223.2 (1) of the Municipal Act, 2001, S.O. 2001, as amended, authorizes municipalities to establish codes of conduct for members of the council of the municipality and of local boards of the municipality;

AND WHEREAS the Code of Conduct sets minimum standards for the behavior of Council members, Local Boards and Committees members in carrying out their functions and has been developed to assist all members to:

1. Understand the standards of conduct that are expected of them and the law that applies in relation to these standards;

2. Fulfill their duty to act honestly and exercise reasonable care and diligence;

3. Act in a way that enhances public confidence in local government.

NOW THEREFORE BE IT RESOLVED, the Council of the Corporation of the Municipality of Temagami enacts as follows:

1. THAT this Council does hereby adopt the Code of Conduct for Council, Boards and Committees as provided in Schedule “A”;

2. That this By-Law shall come into full force and effect upon final passing thereof.
READ A FIRST time this 8th day of August, 2019.

READ A SECOND AND THIRD time and finally passed this 8th day of August, 2019.

______________________________
Mayor

______________________________
Clerk
Important Disclaimer: this protocol complies with the relevant provisions of the *Municipal Act, 2001*, SO 2001, c 25 (the “Act”). If you have any questions or concerns about this protocol or how to implement it, please contact Wishart Law Firm LLP. Wishart Law Firm LLP is not responsible for the results of any edit to this protocol other than as expressly authorized or directed by Wishart Law Firm LLP.

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1. Principles Upon Which This Code is Based

1.1 A municipality is a responsible level of government. Improving the quality of municipal governance and administration can best be achieved by encouraging high standards of conduct on the part of all Members. In particular, the public is entitled to expect the highest standards of conduct from the Members of its local government. In turn, adherence to these standards will protect and promote the Municipality’s reputation and integrity.

1.2 Key statements of principle that underline this Code of Conduct are as follows:

a) Council, and its Members are the leaders of the Municipality both inside and outside its geographic boundaries. Especially in an age of social media and electronic messaging, strong positive management of the reputation of the Municipality is needed. The statements and behaviour of Council affect the Municipality’s reputation as a place to live and do business. Conflict and inappropriate conduct among Members, staff, officers and members of the public, adversely affects the Municipality’s reputation and is to be avoided. Put differently, Council has a strong role to protect and promote the Municipality and its reputation as an excellent place to live, work and do business;

b) Members must serve and be seen to serve their constituents in a conscientious and diligent manner;

c) Members must be committed to performing their functions with integrity, avoiding the improper use of the influence of their office, and conflicts of interest, both real and perceived;

d) Members are expected to conduct themselves and perform their duties in office and arrange their private affairs in a manner that promotes public confidence and will bear close public scrutiny;

e) Members must recognize and act upon the principle that democracy is best achieved when the operation of government is as transparent and accountable to the Public as possible;

f) Members shall seek to serve the public interest by upholding both the letter and spirit of the laws of Parliament and the Ontario Legislature, as well as the laws and policies adopted by the Municipal Council;
g) Members must not use the status of their position to inappropriately influence the decision of another individual or body. For example, to obtain a personal advantage for the Member, the Member’s parents, children, spouse, staff, friends, associates, business or otherwise; or to disadvantage another party.

h) Members shall be respectful of the role of staff to provide advice with political neutrality and objectivity and without undue influence from a Member or Members.

2. Application of this Code

2.1 This Code of Conduct applies to every Member.

3. Definitions

3.1 In this Code of Conduct:

a) “Benefit” means preferential treatment, privileged access, favours or other advantage including, but not necessarily limited to, invitations to sporting, cultural or social events, access to discounts and loyalty programs and promises of a new employment.

b) “Ceremonial Gift” means official gifts provided as part of the culture or practices of communities or government within Canada or internationally, which although they may be given to a Member, are accepted by a Member on behalf of a municipality and become the property of a municipality.

c) “Child” means a child born within or outside marriage and includes any adopted child, step child, foster child and a person whom a Member has a demonstrated a settled intention to treat as a child of his or her family;

d) “Confidential Information” means any information in the possession of, or received in confidence by, the Municipality that the Municipality is prohibited from disclosing, or has decided to refuse to disclose, under the Municipal Freedom of Information and Protection of Privacy Act or any other law. Confidential Information also includes information of a corporate, commercial, scientific or technical nature received in confidence from third parties; personal information; information that is subject to solicitor-client privilege; information that concerns any confidential matters pertaining to personnel, labour relations, litigation, property acquisition, the security of the property of the Municipality or a Local
Board; and any other information lawfully determined by the Council to be confidential, or required to remain or be kept confidential by legislation or order.

e) “Council” means the Council of the Municipality of Temagami.

f) “Gift” means free or discounted items or services and any item or service that would, when viewed in light of all the circumstances, be regarded as a gift by a reasonable Person not including Ceremonial Gifts.

g) “Hospitality” means the friendly reception and entertainment of guests, which may range from light refreshments at a meeting to expensive restaurant meals and sponsored travel or accommodation.

h) “In-camera meeting” means a meeting, or part of a meeting, closed to the public pursuant to section 239 of the Municipal Act, 2001.

i) “Information” includes a record or document written or otherwise;

j) “Integrity Commissioner” means the Person appointed by by-law in accordance with section 223.3 of the Municipal Act, 2001 and who is responsible for performing, in an independent manner, the functions assigned by the Municipality with respect to the application of the Code of Conduct for Members.

k) “Local Board” means, for the purpose of this Code of Conduct, a local board other than:

   i. A society as defined in subsection 2(1) of the Child, Youth and Family Services Act, 2017;

   ii. A board of health as defined in subsection 1(1) of the Health Protection and Promotion Act;

   iii. A committee of management established under the Long-Term Care Homes Act, 2007;

   iv. A police services board established under the Police Services Act and/or the Police Services Act, 2018;

   v. A board as defined in section 1 of the Public Libraries Act; and

   vi. A corporation established in accordance with section 203 of the Municipal Act, 2001;
l) “Member” means a member of Council, which shall include the Mayor/Reeve, members of Committees and members of Local Boards, unless, with respect to members of Local Boards, the context requires otherwise, and shall not include staff or ratepayers.

m) “Officer(s)” means a person who holds a position of responsibility with definite rights and duties prescribed by statute or by-law.

n) “Parent” means a person who has demonstrated a settled intention to treat a child as a part of his or her family whether or not that person is the natural parent of the child;

o) “Person” includes a corporation, partnership, association and any other entity, as the context allows; and

p) “Spouse” means an individual to whom an individual is married or with whom an individual is living in a conjugal relationship outside marriage.

q) “Transparency” means that the municipality actively encourages and fosters stakeholder participation and openness in its decision-making processes. It means that the municipality’s decision-making process is open and clear to the public.

4. Compliance with Declaration of Office

4.1 Every Member shall act in accordance with his or her declaration of office sworn pursuant to section 262 of the Municipal Act, 2001. A copy of the Declaration of Office is attached as Schedule “A”.

5. Adherence to Council Policies and Procedures

5.1 Every Member shall observe and comply with every provision of this Code of Conduct, as well as all other policies and procedures adopted or established by Council.

6. Conduct at Meetings

6.1 Every Member shall conduct himself or herself properly and in a civil and respectful manner at meetings, and in accordance with the provisions of the Procedural By-law, this Code of Conduct, and other applicable law.
6.2 Members will respect the decision-making process. Members will attempt to accurately and adequately communicate the attitudes and decisions of Council, even if they disagree with a majority decision of Council.

6.3 Members shall strive to attend all Council Meetings. Any Member who is unable to attend a Council Meeting shall advise the clerk as soon as is reasonably possible of the reason for their absence.

7. Conduct Respecting Others

7.1 Every Member has the duty and responsibility to treat members of the public, one another and staff appropriately and without abuse, bullying or intimidation, and to ensure that the municipal work environment is free from discrimination and harassment. The Member shall be familiar with, and comply with, the Municipality’s Workplace Anti-Violence, Harassment and Sexual Harassment Policy.

7.2 A Member shall not use indecent, abusive or insulting words, tone or expressions toward any other Member, any municipal staff or any member of the public.

7.3 A Member shall not speak in a manner that is discriminatory to any individual, based on any protected grounds. Protected grounds include: citizenship, race, place of origin, ethnic origin, colour, ancestry, disability, age, creed, sex/pregnancy, family status, marital status, sexual orientation, gender identity, and gender expression.

8. Conduct Respecting Staff and Officers

8.1 Under the direction of the senior administrative staff, and in accordance with the decisions of Council, staff and Officers are required to serve the municipal corporation as a whole. Every Member shall be respectful of the role of staff and Officers to provide advice based on political neutrality and objectivity and without undue influence from any Member or group of Members. Accordingly, no Member shall maliciously or falsely injure or impugn the professional or ethical reputation of any staff person or Officer.

8.2 Members shall acknowledge and respect the fact that staff carry out directions of Council, through senior staff, including but not limited to the Treasurer/Administrator, Clerk, Public Works Superintendent, and Administrators that administer the policies of the Municipality. No Member shall perform, direct or attempt to undermine the duties of any staff person or Officer except in accordance with the Municipality’s procedural by-law.

1 See Human Rights Code, R.S.O. 1990, c.H.19
8.3 Every Member shall show respect for staff and Officers, and for their professional capacities and responsibilities.

8.4 No Member shall direct, instruct or compel any staff member or Officer to engage in partisan political activities or subject any staff member or Officer to threats or discrimination for refusing to engage in any such activity.

8.5 No Member shall use or attempt to further his or her authority or influence by intimidating, threatening, coercing, commanding or improperly influencing any staff person or Officer or interfering with that person's duties, including the duty to disclose improper activity.

9. Gifts, Benefits and Hospitality

9.1 For the purposes of this Code, Gifts, Benefits and Hospitality provided, with a Member's knowledge, to that Member's spouse, child or parent, or to his or her staff, that is connected directly or indirectly to the performance of the Member's duties, are deemed Gifts, Benefits and Hospitality provided to that Member.

9.2 No Member shall accept Gifts, Benefits and Hospitality connected directly or indirectly with the performance of his or her duties, unless permitted under one or more of the exceptions listed below:

9.3 Each of the following is recognized as an exception:

a) compensation authorized by law;

b) Gifts, Benefits and Hospitality of the kind that normally accompanies the responsibilities of office and is received as an incident of protocol or social obligation;

c) a political contribution otherwise authorized and reported as required by law, in the case of a Member running for office;

d) services provided without compensation by a Person volunteering their time in a function that would not normally be provided for compensation;

e) a suitable memento of a function honouring the Member;
f) food, lodging, transportation or entertainment lawfully provided by any Provincial, regional or local government or board or political subdivisions of any of them, by the Federal government, a foreign government, or by those organizing a conference, seminar or event where the Member is speaking or attending in an official capacity;

g) food and beverage consumed at a banquet reception or similar event, if:
   i. attendance by the Member is for a legitimate municipal purpose;
   ii. the Person extending the invitation, or a representative of the organization holding the event, is in attendance; and
   iii. the value is reasonable;

h) communications to the office of a Member, even if such communication would, in the ordinary course, require a subscription; and

i) a sponsorship or donation for a community event organized or run by a Member, or a third party on behalf of a Member, subject to the limitations set out in any applicable municipal policy.

9.4 Except for exception 9.3 (c) (political contributions allowable by law), these exceptions do not apply where Gifts, Benefits and Hospitality are provided by a lobbyist or a lobbyist’s client or employer. In this provision, a lobbyist is an individual, organization or business who or that:

a) lobbies, or causes the lobbying of, any public office holder of the Municipality, the municipal council or corporation or a Local Board;

b) the Member knows and is attempting or intending to lobby the Member or any of the public, Persons or bodies listed in paragraph (a); or

c) is maintaining an active lobbyist registration with the Municipality, whether or not with respect to any specific or current subject matter.

9.5 The exceptions in section 9.3 do not apply to a gift from an anonymous sender. No Member shall accept a gift from an anonymous sender. Where a Member receives a gift from an anonymous sender, the Member will turn the gift in to the Clerk who will donate the gift to a charity/organization on the Municipality’s approved donation list.
In the case of any of the recognized exceptions in sections 9.3 (b), (e), (f), (h) and (i), to enhance transparency and accountability with respect to Gifts, Benefits and Hospitality, if the value of the Gift, Benefit or Hospitality is over $300, or if the total value of Gifts, Benefits and Hospitality received from any one source during the course of a calendar year exceeds $300, the Member shall file, within 30 days of receipt, or of reaching the annual limit, a disclosure statement with the Municipality or with its Integrity Commissioner.

The disclosure statement must set out:

a) the nature of all Gifts, Benefits, and Hospitality;

b) its source and date of receipt;

c) the circumstances under which it was given and received;

d) its estimated value or, if determinable, its exact value;

e) what the recipient intends to do with any gift; and

f) whether any gift will at some point be provided to the Municipality.

Every disclosure statement filed under this Code shall be made a public record and posted in a place available for public review.

Upon receiving a disclosure statement, the Municipality or the Integrity Commissioner, as the case may be, shall examine, or in the case of the Municipality, appoint a Person to examine, the disclosure statement to ascertain whether the receipt of any Gifts, Benefits, or Hospitality, in his or her opinion, acting reasonably, contravenes this Code. Making such determination shall include providing the Member an opportunity to provide an explanation as to why receipt of any Gift, Benefit or Hospitality does not contravene this Code.

Should a determination be made that receipt of any Gift, Benefit or Hospitality contravenes this Code, the Member shall be directed to promptly return, dispose of, or reimburse the person giving the Gift, Benefit or Hospitality, for the full value thereof, as applicable or remit the value of any gift or benefit already consumed to the Municipality.
10. **Confidential Information**

10.1 No Member shall disclose, release, sell or publish by any means directly or indirectly, to any person or to the public, any Confidential Information acquired by virtue of his or her office, in any form including, but not limited to, written notes, reports, oral and video recording, pictures, electronic correspondence, and any form of social media except when required or authorized by Council or otherwise by law to do so.

10.2 No Member shall use Confidential Information for personal or private gain or benefit, or to disadvantage any other person or body.

10.3 Unless required by law, no Member shall disclose the substance of deliberations of meetings held in-camera and that are authorized to be held in-camera under the Municipal Act, 2001 or any other legislation unless or until Council discloses such information at a meeting that is open to the public or otherwise releases such information to the public.

10.4 Without limiting the generality of the foregoing, no Member shall, without lawful authority, disclose or make personal use of any of the following types of Confidential Information:

   a) Information concerning litigation, negotiation or personnel or labour matters;

   b) Information and the publication of which may infringe on the rights of any person (e.g. source of a complaint where the identity of a complainant is given in confidence);

   c) Price schedules in any contract, tender or proposal document while such remains Confidential Information;

   d) Information deemed to be “personal information” under the Municipal Freedom of Information and Protection of Privacy Act; and

   e) Any other information or statistical data required by law not to be released.

10.5 No Member shall obtain access, or attempt to gain access, to Confidential Information in the custody of the Municipality, Local Board or Committee except to the extent that such access is necessary for the performance of his or her duties and such access is not prohibited by Council or otherwise by law.
11. **Use of Municipal Property, Services and Other Resources**

11.1 No Member shall use, or permit the use of, municipal equipment, land, facilities, supplies, services, staff or other resource, including any municipally-owned information, website, or funds allocated for Member expenses, for any purpose or activity other than the lawful business of the municipal corporation. No Member shall seek or acquire any personal financial gain from the use or sale of Confidential Information, or of any municipally-owned intellectual property including any invention, creative writing or drawing, computer program, technical innovation, or any other information or item capable of being patented or copyrighted, for which property remains exclusively that of the Municipality.

12. **Conduct of Election Campaign**

12.1 Every Member shall comply with all applicable requirements of the *Municipal Elections Act, 1996* and with the Municipality’s municipal or board resources rules and procedures established pursuant to section 88.18 of the *Municipal Elections Act, 1996*.

12.2 No Member shall use Confidential Information, facilities, equipment, supplies, services, or other resources of the Municipality, including any Member newsletter or website linked through the Municipality’s website, for any election campaign or campaign-related activity. No Member shall undertake campaign-related activities on municipal property during regular working hours unless authorized by the Municipality.

12.3 No Member shall use the services of any person for election-related purposes during hours in which that person receives any compensation from the Municipality.

13. **No Improper Use of Influence**

13.1 No Member shall use the influence of his or her office for any purpose other than for the lawful exercise of his or her official duties and for municipal purposes.

13.2 No Member shall use his or her office or position to influence or attempt to influence the decision of any other person, for the Member’s private advantage, the private advantage of the Member’s parent, child, spouse, staff member, friend or associate, business or otherwise or the disadvantage of others. No Member shall attempt to secure preferential treatment beyond activities in which Members normally engage on behalf of their constituents as part of their official duties. No Member shall hold out the
prospect or promise of future advantage through the Member’s supposed influence within Council in return for any action or inaction.

13.3 For the purposes of this provision “private advantage” does not include a matter:

a) That is an interest in common with electors generally as defined in the Municipal Conflict of Interest Act;

b) that affects a Member, his or her parents/children or spouse, staff, friends or associates, business or otherwise, as one of a broad class of persons; or

c) that concerns the remuneration or benefits of a Member.

13.4 This provision does not prevent a Member from requesting that Council grant a lawful exemption from a policy.

14. Non-Compliance with this Code of Conduct – Sanctions

14.1 A Member found by the Integrity Commissioner to have contravened any provision of this Code, may be subject to one or more of the following consequences imposed by Council as referred to in the following:

a) a reprimand;

b) suspension of the remuneration paid to the Member in respect of his or her services as a Member of the Council or Local Board, for a period of up to 90 days;

c) Other penalties, including, but not necessarily limited to:

   i. Removal from membership of a Committee or Local Board;
   
   ii. Removal as Chair of a Committee or Local Board;
   
   iii. Require repayment or reimbursement of moneys received;
   
   iv. Return of property or reimbursement of its value;
   
   v. A request for an apology;
   
   vi. Revocation of travel or another budget;
   
   vii. Request for resignation; and
viii. Trespass order restricting access except for Council Meetings.

15. **No Reprisal or Obstruction in the Application or Enforcement of this Code**

15.1 Every Member must respect the integrity of the Code of Conduct and inquiries and investigations conducted under it and shall co-operate in every way possible in securing compliance with its application and endorsement. Any reprisal or threat of reprisal against a complainant or any other person for providing relevant information to the Integrity Commissioner or any other person is prohibited. It is also a violation of the Code of Conduct to obstruct the Integrity Commissioner or any other municipal official involved in applying or furthering the objectives or requirements of this Code, in the carrying out of such responsibilities or pursuing any such objective.

15.2 Every Member shall cooperate with the Integrity Commissioner if the Integrity Commissioner conducts an inquiry concerning an alleged contravention of this Code.

16. **Statutes and Policies Regulating the Conduct of Members**

16.1 In addition to this Code of Conduct, the following Ontario legislation also governs the conduct of Members:

a) the *Municipal Act, 2001* as amended;

b) the *Municipal Conflict of Interest Act*;

c) the *Municipal Elections Act, 1996*;

d) the *Municipal Freedom of Information and Protection of Privacy Act*;

e) the *Ontario Human Rights Code*; and,

f) the *Occupational Health and Safety Act*. 
16.2 The following policies govern the conduct of Members:

<table>
<thead>
<tr>
<th>Policy</th>
<th>Date of Adoption</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accountability and Transparency Policy</td>
<td>August 26, 2010</td>
<td>10-939</td>
</tr>
<tr>
<td>Audio Recording Policy</td>
<td>August 10, 2017</td>
<td>17-1361</td>
</tr>
<tr>
<td>Social Media Policy</td>
<td>July 17, 2014</td>
<td>14-1202</td>
</tr>
<tr>
<td>Travel Expense Policy</td>
<td>November 20, 2014</td>
<td>14-1215</td>
</tr>
<tr>
<td></td>
<td>Amended by September 28, 2017</td>
<td>17-1370</td>
</tr>
<tr>
<td>Workplace Harassment Policy</td>
<td>June 24, 2010</td>
<td>10-932</td>
</tr>
<tr>
<td></td>
<td>Amended by April 6, 2017</td>
<td>17-1337</td>
</tr>
<tr>
<td>Procedural By-Law Currently Under Review</td>
<td>September 28, 2017</td>
<td>17-1365</td>
</tr>
<tr>
<td></td>
<td>Amended by April 17, 2018</td>
<td>18-1393</td>
</tr>
</tbody>
</table>

16.3 The *Criminal Code* also governs the conduct of Members.

16.4 A Member may become disqualified and lose his or her seat by operation of law, including being convicted of an offence under the *Criminal Code* or being found to have failed to comply with the *Municipal Conflict of Interest Act*, whether or not the conduct in question involves contravention of this Code of Conduct. In the case of any inconsistency between this Code and a Federal or Provincial statute or regulation the statute or regulation shall prevail. Should any provision of the Code become or be determined to be invalid, illegal or unenforceable, it shall be considered separate and several from the agreement and the remaining provisions shall remain in force.

17. **Complaints Alleging Violation of This Code**

17.1 Where a Member, a municipal employee, Officer, or a member of the public has reasonable grounds to believe that a Member(s) has contravened this Code, a complaint may be submitted to the Clerk’s Department in the prescribed form which will be forwarded to the Municipality’s Integrity Commissioner who will process it in accordance with the Integrity Commissioner Inquiry Protocol attached hereto as Schedule “B”. The Complaint may also be submitted directly to the Integrity Commissioner in the event that such office is readily accessible.

17.3 Where a Member is found not to have contravened this Code, the Municipality is authorized to protect that Member against costs or expenses incurred by the Member as a result of the complaint proceedings.
DECLARATION OF OFFICE
(Section 232 of the Municipal Act, 2001)

I, ________________________________, having been elected or appointed to the office

(name of person)

of ____________________________________________________________

(name of office)

in the municipality of ________________________________________________

(name of municipality)

do solemnly promise and declare that:

1. I will truly, faithfully and impartially exercise this office to the best of my knowledge and ability.

2. I have not received and will not receive any payment or reward, or promise thereof, for the

   exercise of this office in a biased, corrupt or in any other improper manner.

3. I will disclose any pecuniary interest, direct or indirect, in accordance with the Municipal Conflict

   of Interest Act.

4. I will be faithful and bear true allegiance to Her Majesty Queen Elizabeth the Second (or the

   reigning sovereign for the time being).

And I make this solemn promise and declaration conscientiously believing it to be true and knowing that

it is of the same force and effect as if made under oath.

Declared before me

at the .................................................................

.................................................................

.................................................................

.................................................................

on .................................................................

20......

________________________________________________________________________

Commissioner for taking Affidavits
THE CORPORATION OF THE
MUNICIPALITY OF TEMAGAMI

BY-LAW NO. 19-1472

Being a By-law to appoint Municipal Law Enforcement Officer

WHEREAS, Section 15 of the Police Services Act, R.S.O 1990, Chapter P. 15, provides that council of a municipality may appoint persons to enforce the by-laws of the municipality and such municipal law enforcement officers are peace officers for the purpose of enforcing municipal by-laws;

AND WHEREAS, pursuant to section 1 of the Provincial Offences Act, R.S.O 1990, Chapter P.33 the Attorney General of Ontario has designated municipal law enforcement officers as provincial offences officers to enforce the by-laws of the municipality under the Provincial Offences Act;

AND WHEREAS, the Council of the Municipality of Temagami deems it desirable and expedient to appoint a Municipal By-Law Enforcement Officer to enforce the Municipality By-Laws;

NOW THEREFORE BE IT RESOLVED, the Council of the Corporation of the Municipality of Temagami enacts as follows:

1. THAT Daryl Bell be herby appointed as a Municipal By-Law Enforcement Officer for the Corporation of the Municipality of Temagami;

2. That this By-Law shall come into full force and effect upon final passing thereof.

READ A FIRST time this 8th day of August, 2019.

READ A SECOND AND THIRD time and finally passed this 8th day of August, 2019.

__________________________________________
Mayor

__________________________________________
Clerk
THE CORPORATION OF THE MUNICIPALITY OF TEMAGAMI
COMMITTEE OF ADJUSTMENT
MINUTES
April 25, 2019, 1:00 P.M.
Boardroom

An audio recording of this meeting has been made and is available through the Municipal Website.

PRESENT: (Chair) C. Dwyer, N. Brooker, B. Graham
ABSENT: D. Paradis (With Notice), G. Cline (With Notice), B. Rice (With Notice)
STAFF: Secretary-Treasurer: T. Lepage; Planner: J. Robinson (By Phone)
GUESTS: B. Lowery, S. Fournier

CALL TO ORDER
The Secretary-Treasurer called the meeting to order at 1:00 p.m. The meeting took a brief recess at 1:02 and resumed at 1:06 p.m. in the Boardroom.

Appointment of Chair
19-01
MOVED BY: B. Graham
SECONDED BY: N. Brooker
WHEREAS subsection 44(7) of the Planning Act states, the members of the Committee shall elect one of themselves as Chair; NOW THEREFORE BE IT RESOLVED THAT the Committee of Adjustment appoint Cathy Dwyer as Chair.
CARRIED

The Secretary-Treasurer introduced the Committee members.

The Secretary-Treasurer read out the meeting procedures.

ADOPTION OF THE AGENDA
Adoption of the Agenda dated April 25, 2019
19-02
MOVED BY: N. Brooker
SECONDED BY: B. Graham
BE IT RESOLVED THAT the agenda dated April 25, 2019 be adopted as presented.
CARRIED

ADOPTION OF THE MINUTES
Adoption of the Minutes from the November 22, 2018 meeting.
19-03
MOVED BY: B. Graham
SECONDED BY: C. Dwyer
BE IT RESOLVED THAT the minutes of the Committee of Adjustment meeting held November 22, 2018 be adopted presented.

COA Minutes April 25, 2019
CARRIED

DECLARATION OF CONFLICT OF INTEREST
None.

DEFERRED APPLICATIONS
None

ADJOURNED APPLICATIONS
None

**J. Robinson joined the meeting by phone at: 1:12p.m.**

NEW APPLICATIONS
Application No. MV-19-01
Applicant: John. O. Shepard & Mary S. Shepard
Property Location: 2 Lake Temagami Island 1176

**THE PURPOSE** of the application is: to permit the construction of a new cottage that does not meet the minimum required setback from the shore. The proposed new cottage is replacing an existing cottage in approximately the same location.

**THE EFFECT** of the Application is: to vary s. 7.4.2 Any Dwelling Unit a) to permit an addition to an existing cottage that is located 14 metres from the shore, where a minimum setback of 15 metres is required.

Presentation of the Application:
The Committee had received a copy of the application and the Planning Report from MHBC Planning dated April 16, 2019, with the meeting package. Jamie Robinson of MHBC attended by telephone and summarized the application with a power point presentation for the Committee. He explained the four test of the minor variance as per s. 45 of the Planning Act, He explained that the Island is very unique in size and the property is currently developed with a one story cottage of approx. 48 square metres, the proposed development slightly largely cottage overall approx.. gross floor area is estimated at 88 square metres and the height does comply with the current zoning by-law. He explained that on the Eastern side of the cottage has a setback of 14 metres from the shore that setback is to be maintained and not exceeded. The proposed structure is seeking on the Western side of the structure a 1metre reduction in the 15 metre set back requirement in the zoning by-law. He further explained that the based on his review of the application, the application does satisfy the four tests of a minor variance and recommends the variance be approved.

Presentation of the Application by the Applicant/Agent:
The applicant or agent was not present at the hearing.

Questions/Comments by other Property Owners:
• Question from B. Lowery regarding section 2.17 - 6th bullet point of the Official Plan was reviewed as the height of the building should not accede the canopy; however, in favour of the application.
• J. Robinson informed the Committee that the proposed development is not seeking a variance from the maximum height requirement of 9 metres in the Zoning By and that the 6th bullet point under §2.17 wasn’t considered.

Questions/Comments by Committee of Adjustment Members:
- Comment regarding photographs being provided with all applications. The Secretary-Treasurer informed the Committee that the intake of the application was performed during her absence and upon her return she requested for photographs and informed the property owners that moving forward any future applications will require photographs.
- Comments regarding the application being incomplete.
- Comment regarding deferring the application until photographs are provided.
- J. Robinson informed the Committee that photographs are not required as part of a complete application for minor variance according to the Planning Act.

Correspondence Included in the Packages
• Correspondence from Timiskaming Health Unit dated April 12, 2019 - no objections.
• Correspondence from Temagami First Nation dated April 16, 2019 - no objections or concerns.

Correspondence Received After Packages were Compiled
The Secretary-Treasurer read out the correspondence below:
• Correspondence from Paul Tamburro dated April 18, 2019 - no issues with the proposed development.

Discussion/Decision by Committee Members:
The Committee members discussed the application and the following resolution was passed:

19-04
MOVED BY: N. Brooker
SECONDED BY: B. Graham
BE IT RESOLVED THAT
The Committee of Adjustment: Grants
Minor Variance Application: MV-19-01
Applicant: John O. Shepard & Mary S. Shepard
Subject to the attached Notice of Decision
CARRIED

J. Robinson was excused from the meeting at 1:45 p.m.

ITEMS FOR INFORMATION
None

NEXT MEETING DATE
The Committee discussed that the next meeting will be based upon receiving a planning application.
ADJOURNMENT
19-05
MOVED BY: N. Brooker
SECONDED BY: B. Graham
BE IT RESOLVED THAT the April 25, 2019 Committee of Adjustment meeting be adjourned at 1:50 p.m.
CARRIED

Prepared by: Tammy Lepage Secretary-Treasurer Committee of Adjustment
THE CORPORATION OF THE
MUNICIPALITY OF TEMAGAMI

BY-LAW NO. 19-1474

Being a By-Law to confirm the proceedings of Council of the Corporation of the Municipality of Temagami

WHEREAS pursuant to Section 5(1) of the Municipal Act, 2001, S.O. 2001, c. 25 as amended, the powers of a municipality shall be exercised by its Council; and

WHEREAS pursuant to Section 5(3) of the Municipal Act, 2001, S.O. 2001, c. 25 as amended, a municipal power, including a municipality’s capacity rights, powers and privileges under Section 8 of the Municipal Act, 2001, S.O. 2001, c. 25 as amended, shall be exercised by By-Law unless the municipality is specifically authorized to do otherwise; and

WHEREAS it is deemed expedient that the proceedings of the Council of the Corporation of the Municipality of Temagami at this Session be confirmed and adopted by By-Law.

NOW THEREFORE the Council of the Corporation of the Municipality of Temagami hereby enacts as follows:

1. THAT the actions of the Council of The Corporation of the Municipality of Temagami in respect of all recommendations in reports and minutes of committees, all motions and resolutions and all actions passed and taken by the Council of the Corporation of the Municipality of Temagami, documents and transactions entered into during the August 8, 2019 Regular meeting of Council are hereby adopted and confirmed, as if the same were expressly embodied in this By-Law.

2. THAT the Mayor and proper officials of The Corporation of the Municipality of Temagami are hereby authorized and directed to do all the things necessary to give effect to the action of the Council of The Corporation of the Municipality of Temagami during the said meetings referred to in paragraph 1 of this By-Law.

3. THAT the Mayor and the Treasurer/Administrator or Clerk are hereby authorized and directed to execute all documents necessary to the action taken by this Council as described in Section 1 of this By-Law and to affix the Corporate Seal of The Corporation of the Municipality of Temagami to all documents referred to in said paragraph 1.

Read a first, second and third time and finally passed this 8th day of August, 2019.

Mayor

Clerk