



Management Review Minutes
The Town of Kingsville

Issue Date: 03-Dec-2021
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Date: December 3, 2021

Location: Town of Kingsville, Committee Room A

Participants: Shaun Martinho, Erica Allen, and Steve Branch (Recording secretary: Gemma Bélanger)

Review Period: 2021

<i>Item</i>	<i>Description</i>	<i>Action</i>	<i>Responsible</i>	<i>Due Date</i>
1.	<p><i>Introductions</i></p> <p>The following staff were in attendance:</p> <ul style="list-style-type: none"> • Shaun Martinho • Erica Allen • Steve Branch <p>The purpose and objectives of the Management Review meeting were:</p> <p>To evaluate the continuing suitability, adequacy and effectiveness of The Town of Kingsville’s QMS. The Management Review will include a review of the DWQMS operational plan, external audit reports, internal audit report and other related operational documents/records as required.</p>			
2.	<p><i>Review of minutes from most recent Management Review</i></p> <p>The minutes from the last Management Review held on Nov. 4th, 2020</p> <p>SM- Valve turning program is behind due to staffing.</p> <p>SB- We have done almost 500, 2 needed immediate repair and 10-11 are non-operable. They are on the schedule to be looked at a later date. We are awaiting a report. The plan is to geotag each location and to do approximately 35-40 per day.</p> <p>SM – We are information gathering and will have 800 complete by January. Risk Management Process was done in 2020, we did an internal audit to rectify NCIs. There is now a template for emergency response training and a standard form is to come. We will administer management review from 2020. The ES calendar is up to date, Erica was able to populate it. There are new disinfection procedures in QMS. There has been no customer feedback, complaints for taste and odour have gone down.</p>			
3.	<p><i>Standing agenda items:</i></p> <p>a. Incidents of regulatory non-compliance:</p> <p>SM- We have followed SOPs and there has been no incidence of non-compliance. We have the same valve training program. There is a low secondary disinfectant. The annual flushing program is done 3 times per year, with low residuals.</p> <p>There was a small Issue with how NCIs are documented which was addressed. The risk assessment was done with Tim Del Greco for 2021. No modifications to the risk assessment scores, they are still current.</p>			



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	<p>b. Incident of adverse drinking water test: SM - We had two precautionary boil water advisories. These were not boil water advisories, they were precautionary. We did advise the proper channels and there was no contamination (sanitary or chemical).</p>			
	<p>c. Deviations from critical control limits and response actions: SM - There were no deviations from critical control limit this year.</p>			
	<p>d. The effectiveness of the risk assessment process: SM - No modifications to the risk assessment scores. They are still current and in 2022 we will do a 36 month review. We will go through the review line by line and get it endorsed by council.</p> <p>We review it annually and update it every 3 years. We identify new possible risks, for example; terrorism which ranks low, but we will produce a plan.</p> <p>Most municipalities will now include pandemic response. We are drafting an SOP for pandemic response.</p>			
	<p>e. Internal and third party audits result: <u>Noncompliance tracking form.</u> SM- DWQMS reps, response is getting better and document is getting more robust. There are ways to improve the document each year. Small list of OFIs which have been rectified.</p> <p><u>External Audit</u> SM- One non conformity which was rectified. Took the non-conformity off the record by submitting both last year and current year's documents.</p> <p>SM- We have included OFIs with target date. The changes have been made in the operational plan.</p>			
	<p>f. Results of emergency response testing: <u>Results of emergency response testing.</u></p>	SM - We are expected to supplement and provide	Shaun M	Dec 31, 2022



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	<p>Cottam as an example, we identified different valves to isolate. We would have to relocate feeds under highway 3 and relocate the water main. While we do the work utilizing the contingency plan in place.</p>	<p>resources to other events. We will begin treating our departments like a 3rd party. Even in internal meetings. If we provide resources to other departments, we will run through the entire project, estimate timings for tie ins etc. We will also run through contingencies to be prepared.</p> <p>There are some informal touch points, create a formal meeting where there are minutes being taken, perhaps include contractor. Schedule in advance and provide contingency plans. Specific to capital project that have a water component.</p>		
	<p><i>g. Operational performance:</i></p> <p>Operationally, we are hitting the mark for minimum standards. Operationally, we have great feedback from staff, they are willing to take on more responsibility.</p>			
	<p><i>h. Raw Water Supply and drinking water quality trends:</i></p> <p>SM- No issues with raw water supply for taste and odor, no complaints this week. No adverse samples this year. Only issue is being able to create more water.</p> <p>The way it works for water quality complaints, we direct them to the plant. Complaints have to do with water treatment not water distribution. The plant, Union water supply system, documents everything.</p> <p>If a resident requests to speak to a manager, direct them to Shaun.</p>			



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	<p><i>i. Follow-up on action items from previous Management Review:</i></p> <p>SM – Training tracking spreadsheet Training for disinfecting procedures Asset management incorporate in summary report for council Review operations and residuals, look for abnormalities, SSK17 (nowhere close to minimum) Review all hazards in risk assessment – this has been done this year.</p>	SM - Create a standard form for emergency response and training	SB	Dec. 31, 2022
	<i>j. The status of management action items identified between reviews:</i>			
	<i>k. Changes that could affect the QMS:</i>			
	<i>l. Consumer feedback:</i>			
	<i>m .The resources needed to maintain the QMS:</i>			
	<i>n. The results of the Infrastructure Review:</i>			
	<i>o. Operations plan currency, content and updates:</i>			
	<p><i>p. Staff suggestions:</i></p> <p>None</p>			
4.	<p><i>New Agenda Items:</i></p> <p>SM - Risk assessment outcomes, one critical control point is the age of infrastructure and number of breaks. We use the information from the asset management database. Look at material types and complaints from residents and determine highest risk assets to lowest and use this information for capital planning.</p>			



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	This is updated annually and done again this year.			
	a. Risk Assessment Outcomes			
	b. Effectiveness of Actions SM - Nonconformance tracking form, able to clear some out. When we have an audit, they are effective.			
	c. Best Management Practices SM - Best management practices, proposed in 2018 and adopted in 2020 for disinfection procedures. MECP best management practices launched in 2015, there have been no new policies, procedures or documents since 2015.	Include Steve Branch risk assessment and capital planning.	SM	Jan 1, 2022
	d. Essential Supplies and Services List SM - Essential supplies and services list, updated and current list. List of annual certifications from certified labs. Continue to gather them from all our suppliers should an MECP inspector check materials and supplies onsite.			
	e. Complete review/update of Procedure 7/8: Risk Assessment and Outcomes. Update OP as required. SM - Operational performance. We use City Works to track meter issues, water main commissioning and water main breaks. They are being closed out on an ongoing basis. Valve turning and winterizing hydrants, they are winterized, So far, 16 are done, almost about to be done 17. Operationally, we are hitting the mark for minimum standards.			
5.	Round Table SM- Operational plan needs to reflect the changes to job descriptions and titles (we are in the midst of editing this). Question becomes; do we modify the OP (does Tim need to be on OP).			