

Accreditation Protocol

Operating Authorities - Municipal Drinking-Water Systems

July 2007

Preamble

This protocol details the establishment and administration of an accreditation program for operating authorities who are required to be accredited for the purposes of subsection 13 (1) of the *Safe Drinking Water Act, 2002*, S.O. 2002, c. 32 ("SDWA"). The program is based upon the Drinking Water Quality Management Standard ("DWQMS") for municipal residential drinking-water systems approved by the Minister of the Environment under section 21 of the SDWA.

Accreditation will be granted by a third party accreditation body to an operating authority that has documented, and where required, implemented a quality management system ("QMS") that meets the applicable requirements of the DWQMS. Conformity with the requirements of the Standard will be assessed on an ongoing basis using certified auditors.

Five categories of accreditation have been created to facilitate a staged accreditation process at the option of the applicant, and to address situations where transitional and emergency accreditation are required. Two of the accreditation categories, Limited Scope – Partial DWQMS and Limited Scope – Entire DWQMS, are only available during the commencement of the accreditation program and the transition from drinking-water approvals to drinking-water licenses. The accreditation categories are summarized below:

Limited Scope – Partial DWQMS

(Limited scope accreditation based on the documentation and implementation of twelve key elements of the DWQMS)

An auditor will conduct a desktop systems audit and an on-site verification audit to assess whether the QMS for the subject system meets the PLAN and DO requirements for twelve key elements of the DWQMS. Upon the resolution of any non-conformity to the satisfaction of the accreditation body, the accreditation body will issue a Certificate of Accreditation (Limited Scope – Partial DWQMS) to the operating authority. The certificate will be issued subject to the condition that the operating authority submits an application for Full Scope – Entire DWQMS accreditation to the accreditation body within twelve months of the issuance of a limited scope certificate. Full scope accreditation will be based on a systems audit and surveillance audit of the remaining nine elements of the DWQMS.

Limited Scope – Entire DWQMS

(Limited scope accreditation based on the documentation of twenty elements of the DWQMS)

An auditor will conduct a desktop systems audit to assess whether the QMS for the subject system meets the PLAN requirements for twenty elements of the DWQMS. Upon the resolution of any non-conformity to the satisfaction of the accreditation body, the accreditation body will issue a Certificate of Accreditation (Limited Scope – Entire DWQMS) to the operating authority. The certificate will be issued subject to the condition that the operating authority submits an application for Full Scope – Entire DWQMS accreditation to the accreditation body within twelve months of the issuance of a limited scope certificate. Full scope accreditation will be based on a systems audit and on-site verification audit of all of the DWQMS elements.

Full Scope – Entire DWQMS

(Full scope accreditation based on the documentation and implementation of all twenty-one elements of the DWQMS)

An auditor will conduct a desktop systems audit and an on-site verification audit to assess whether the QMS for the subject system meets the PLAN and DO requirements for all twenty-one elements of the DWQMS. Upon the resolution of any non-conformity to the satisfaction of the accreditation body, the accreditation body will issue a Certificate of Accreditation (Full Scope – Entire DWQMS) to the operating authority.

Limited Scope – Transitional

(Limited scope accreditation based on the documentation of nine key elements of the DWQMS)

Limited Scope – Transitional accreditation is available to a new operating authority for a subject system where the existing accredited operating authority for the subject system is being replaced. An auditor will conduct a desktop systems audit to assess whether the QMS for the subject system meets the PLAN requirements for nine key elements of the DWQMS. Upon the resolution of any non-conformity to the satisfaction of the accreditation body, the accreditation body will issue a Certificate of Accreditation (Limited Scope – Transitional) to the new operating authority. The certificate will be issued subject to the condition that the new operating authority submits an application for Full Scope – Entire DWQMS accreditation to the accreditation body within six months of the issuance of a limited scope certificate. Full scope accreditation will be based on a systems audit and on-site verification audit of all of the DWQMS elements.

Limited Scope – Emergency

(Limited scope accreditation based on written confirmation that the new operating authority for a subject system has reviewed the existing operational plans for the system)

Limited Scope – Emergency accreditation is available to an operating authority where the existing accredited operating authority for the subject system becomes incapable of operating the system or loses its accreditation. The accreditation body will review an application for Limited Scope – Emergency accreditation to verify that the system was operated by an accredited operating authority prior to the making of the application, the applicant is an accredited operating authority for one or more other subject systems located in the Province of Ontario, and the applicant has provided written confirmation that it has reviewed the existing operational plans for the subject system. Upon satisfactory completion of the review, the accreditation body will issue a Certificate of Accreditation (Limited Scope – Emergency) to the operating authority. The certificate will be issued subject to the condition that the operating authority submits an application for Full Scope – Entire DWQMS accreditation to the accreditation body within six months of the issuance of a limited scope certificate. Full scope accreditation will be based on a systems audit and on-site verification audit of all of the DWQMS elements.

1.0 Definitions

The following definitions, in addition to the definitions in subsection 2 (1) of the SDWA and the definitions in subsection 1 (1) of the Drinking-Water Systems regulation, O. Reg. 170/03, apply for the purposes of this protocol:

“accreditation body” means a person designated or established as an accreditation body under Part IV of the SDWA;

“Certificate of Accreditation” means a document issued in accordance with this protocol that identifies the scope of accreditation granted to an operating authority;

“Director” means a Director appointed for the purposes of subsection 44 (1) of the SDWA;

“Drinking Water Quality Management Standard” or “DWQMS” means the Quality Management Standard approved by the Minister in accordance with section 21 of the SDWA;

“major non-conformity”, in respect of a quality management system means that in the opinion of an auditor:

- (a) a required element of the DWQMS has not been incorporated into a quality management system;
- (b) a systemic problem with a quality management system is evidenced by two or more minor non-conformities; or
- (c) a minor non-conformity identified in a corrective action request has not been remedied.

“**management committee**” means a committee made up of representatives of the accreditation body, the Ministry of the Environment, and the drinking-water sector;

“**minor non-conformity**” in respect of a quality management system means, that in the opinion of an auditor, part of a required element of the DWQMS has not been incorporated satisfactorily into a quality management system;

“**municipal residential drinking-water system**” means a large municipal residential system or a small municipal residential system as defined in O. Reg. 170/03;

“**operating authority**” means, in respect of a subject system, the person or entity that is given responsibility by the owner for the operation, management, maintenance or alteration of the subject system;

“**operational subsystem**” means a part of a municipal residential drinking-water system operated by a single operating authority and designated by the owner within operational plans as being an operational subsystem;

“**quality management system**” or “**QMS**” means policies and procedures established to implement the elements of the DWQMS;

“**SDWA**” means the *Safe Drinking Water Act, 2002*, S.O. 2002, c. 32, as amended; and

“**subject system**” means:

- (a) a municipal residential drinking-water system where the system is operated by one operating authority, or
- (b) an operational subsystem where two or more parts of a municipal residential drinking-water system are operated by different operating authorities.

2.0 Accreditation Process

2.1 Application for Accreditation Services

2.1.1 The accreditation body will prepare an accreditation program handbook that details the accreditation program including rules of accreditation and appeal procedures. The handbook will include the forms necessary for an applicant to apply for accreditation. A copy of the handbook is to be provided to a potential applicant upon written request.

2.1.2 The accreditation body will not process an application for accreditation unless the application includes, as appropriate, completed application forms, owner endorsed draft operational plans for the subject system for which accreditation is sought, and all required fees.

2.1.3 The accreditation body will inform an applicant in writing of any deficiencies in an accreditation application.

2.1.4 The accreditation body will have a procedure in place that requires the submission of any application for Limited Scope – Transitional accreditation to be made at least 30 days prior to the commencement of operation of the subject system by the applicant. The accreditation body, however, will not accept an application for Limited Scope – Transitional accreditation unless the subject system was previously operated by an accredited operating authority.

2.1.5 The accreditation body shall not accept an application for Limited Scope – Partial DWQMS accreditation or Limited Scope – Entire DWQMS accreditation after the latest of the dates set out in the headings to the schedules in O. Reg. 188/07.

2.2 Accreditation Process – General

2.2.1 The accreditation body will use the following process to consider an application for the accreditation of an operating authority, excluding applications for Limited Scope – Emergency accreditation.

Assignment of Auditor

2.2.2 Each application for accreditation will be assigned to an auditor who will review the application in accordance with the applicable accreditation processes set out in this protocol.

2.2.3 When assigning auditors, the accreditation body will assign auditors who are not in a conflict of interest, who have experience with applications of similar complexity, and with a view towards minimizing travel costs.

Sequence of Procedures

2.2.4 If an application is for Limited Scope – Partial DWQMS or Full Scope – Entire DWQMS accreditation, the application will proceed, as appropriate, through the following procedures in the order listed:

- (a) the systems audit procedure;
- (b) the corrective action request procedure, if a major non-conformity is identified during the systems audit;
- (c) the on-site verification audit procedure;
- (d) the corrective action request procedure; and
- (e) the certificate of accreditation procedure.

2.2.5 If an application is for Limited Scope – Entire DWQMS or Limited Scope – Transitional accreditation, the application will proceed, as appropriate, through the following procedures in the order listed:

- (a) the systems audit procedure;
- (b) the corrective action request procedure; and
- (c) the certificate of accreditation procedure.

2.3 Accreditation Process – Emergency

2.3.1 The accreditation body will use the following process to consider an application for a Limited Scope – Emergency accreditation of an operating authority.

2.3.2 The accreditation body will only accept an application for Limited Scope – Emergency accreditation for a subject system if the system was operated by an accredited operating authority prior to the making of the application, the applicant is the accredited operating authority for one or more other subject systems located in the Province of Ontario, and:

- (a) the accreditation of the previous operating authority for the subject system was suspended or revoked by the accreditation body; or
- (b) the previous accredited operating authority ceases to be able to operate the subject system because of strike, business failure or other emergency reason.

2.3.3 The accreditation body will require the applicant to provide written confirmation that it has reviewed the existing operational plans for the subject system.

2.3.4 If the requirements of sections 2.3.2 and 2.3.3 are met to the satisfaction of the accreditation body, a

Certificate of Accreditation (Limited Scope – Emergency) will be issued subject to the condition that the accredited operating authority submits an application for Full Scope – Entire DWQMS accreditation to the accreditation body within six months of the issuance of the certificate.

2.3.5 The accreditation body will have a procedure in place to process an application for Limited Scope – Emergency accreditation within one business day of the application being received by the accreditation body.

2.4 Systems Audit Procedure

2.4.1 Where this protocol requires that the systems audit procedure be conducted, the procedure in this section will be followed.

2.4.2 An auditor will conduct a desktop audit of the operational plans for the subject system to assess whether the documented QMS meets the PLAN requirements of the DWQMS elements marked as “X” in Column A of Table One under the heading that corresponds to the category of accreditation being sought.

2.4.3 Despite section 2.4.2, where the application results from a condition of accreditation that requires the applicant to apply for Full Scope – Entire DWQMS accreditation, an auditor will conduct a desktop audit of the operational plans for the subject system to assess whether the documented QMS meets the PLAN requirements of the DWQMS elements marked as “X” in Column B of Table One under the heading that corresponds to the category of accreditation currently held.

2.4.4 During the audit, the auditor will identify all major and minor non-conformities.

2.4.5 If the application relates to Limited Scope – Entire DWQMS or Limited Scope – Transitional accreditation, the auditor will prepare a systems audit report detailing all major and minor non-conformities and a recommendation on whether the applicant should be accredited.

2.4.6 If the application relates to Limited Scope – Partial DWQMS or Full Scope – Entire DWQMS accreditation, and any major non-conformity is identified, the auditor will prepare a systems audit report detailing all major and minor non-conformities.

2.5 On-site Verification Audit Procedure

2.5.1 Where this protocol requires that the on-site verification audit procedure be conducted, the procedure in this section will be followed.

2.5.2 An auditor will conduct an on-site verification audit to assess whether a QMS has been implemented for the subject system that meets the “DO” requirements of the DWQMS elements marked as “X” in Column A of Table One under the heading that corresponds to the category of accreditation being sought.

2.5.3 Despite section 2.5.2, where the application results from a condition of accreditation that requires the applicant to apply for Full Scope – Entire DWQMS accreditation, an auditor will conduct an on-site verification audit to assess whether a QMS has been implemented for the subject system that meets the “DO” requirements of the DWQMS elements marked as “X” in Column B of Table One under the heading that corresponds to the category of accreditation currently held.

2.5.4 During the audit, the auditor will identify all major and minor non-conformities.

2.5.5 The auditor will prepare an on-site verification audit report detailing all major and minor non-conformities and a recommendation on whether the applicant should be accredited.

2.6 Corrective Action Request Procedure

2.6.1 Where this protocol requires that the corrective action request procedure be conducted, the procedure in this section will be followed.

2.6.2 The accreditation body will review the report of an auditor and consider whether modifications are required to an applicant's QMS to meet the applicable requirements of the DWQMS.

2.6.3 If the accreditation body concludes that a non-conformity identified in the audit report must be addressed, the accreditation body will require the applicant to resolve the non-conformity to the satisfaction of the accreditation body.

2.6.4 Where the accreditation body makes a request of the applicant in accordance with section 2.6.3, the request will be in writing and will provide the applicant with 30 days to respond. A copy of the request will also be provided to the owner of the subject system if the owner is not the operating authority.

2.6.5 Where the accreditation body is not satisfied with the applicant's response, the accreditation body may make additional requests to the applicant or may suspend the accreditation process.

2.6.6 If the applicant is seeking Limited Scope – Transitional accreditation, the 30 day response period required by section 2.6.4 will be reduced to 5 days, excluding holidays as defined in the *Legislation Act, 2006*.

2.7 Certificate of Accreditation Procedure

2.7.1 Where this protocol requires that the certificate of accreditation procedure be conducted, the procedure in this section will be followed.

2.7.2 The accreditation body will issue a Certificate of Accreditation for the appropriate accreditation category to the applicant, subject to the following:

- (a) A Certificate of Accreditation (Limited Scope – Partial DWQMS) will be issued subject to the condition that the accredited operating authority submits an application for Full Scope – Entire DWQMS accreditation to the accreditation body within 12 months of the issuance of the certificate;
- (b) A Certificate of Accreditation (Limited Scope – Entire DWQMS) will be issued subject to the condition that the accredited operating authority submits an application for Full Scope – Entire DWQMS accreditation to the accreditation body within 12 months of the issuance of the certificate; and
- (c) A Certificate of Accreditation (Limited Scope – Transitional) will be issued subject to the condition that the accredited operating authority submits an application for Full Scope – Entire DWQMS accreditation to the accreditation body within six months of the issuance of the certificate.

3.0 Reports by Auditor

3.1 Notice of Violations

3.1.1 The accreditation process developed by the accreditation body shall contain the necessary procedures to ensure compliance with section 26 of the SDWA.

4.0 Notification

4.1 Audit Reports

4.1.1 Within 30 days of any audit conducted by an auditor, the accreditation body will provide an electronic

copy of the audit report, if any, to the applicant, Director and owner of the subject system.

4.1.2 Within 90 days of any audit conducted by an auditor, the accreditation body will make available to the public the results of the audit, including any recommendation respecting accreditation.

4.2 Public Notification

4.2.1 The accreditation body will maintain a list, sorted by owner, that contains the following information in respect of every municipal residential drinking-water system:

- (a) the name of the municipal residential drinking-water system and its owner;
- (b) the name of every subject system comprising the drinking-water system;
- (c) the name of the accredited operating authority for each subject system;
- (d) the scope of every operating authority's accreditation;
- (e) the applicable accreditation certificate number and date for each accreditation;
- (f) any decisions related to the revocation or suspension of an accreditation;
- (g) any audit results made available to the public in accordance with 4.1.2; and
- (h) any other information required to be provided to the public in accordance with this protocol.

4.2.2 The information required to be maintained in accordance with section 4.2.1 shall be made available on a publicly accessible website on the Internet and shall be kept current.

5.0 Audit Cycle

5.1 Annual Audits

5.1.1 The accreditation body will annually audit the QMS of an operating authority with a Certificate of Accreditation (Full Scope – Entire DWQMS), in accordance with the following schedule:

- (a) in the first year following the year in which the certificate was issued and every third year thereafter, the accreditation body will undertake a surveillance audit in accordance with the surveillance audit procedure of this protocol;
- (b) in the second year following the year in which the certificate was issued and every third year thereafter, the accreditation body will undertake a surveillance audit in accordance with the surveillance audit procedure of this protocol; and
- (c) in the third year following the year in which the certificate was issued and every third year thereafter, the accreditation body will undertake a re-accreditation audit in accordance with the re-accreditation audit procedure of this protocol.

5.2 Surveillance Audit Procedure

5.2.1 Where this protocol requires that the surveillance audit procedure be conducted, the procedure in this section will be followed.

5.2.2 An auditor will conduct a systems audit in accordance with the systems audit procedure of this protocol as it applies to an application for Full Scope – Entire DWQMS accreditation. The audit will also include consideration of the results of the most recent audit undertaken in accordance with this protocol and any of the following that have occurred subsequent to that audit:

- (a) the results of any audits undertaken in accordance with element 19 of the DWQMS;
- (b) historical responses taken to address corrective action requests made by the accreditation body;
- (c) the results of any management reviews undertaken in accordance with element 20 of the DWQMS; and
- (d) any changes to the documentation and implementation of the QMS.

5.2.3 The auditor will prepare a systems audit report detailing all major and minor non-conformities and a recommendation on whether the accreditation of the operating authority should be continued, suspended or revoked.

5.2.4 The accreditation body will review the systems audit report prepared by the auditor in accordance with the corrective action request procedure of this protocol.

5.2.5 At any time during the course of the audit, an auditor may request further information from an accredited operating authority or, with the permission of the accreditation body and after appropriate notice is given to the owner and operating authority of the subject system, attend at the subject system to verify information for the purposes of the audit.

5.3 Re-Accreditation Audit Procedure

5.3.1 Where this protocol requires that the re-accreditation audit procedure be conducted, the procedure in this section will be followed.

5.3.2 An auditor will conduct a systems audit in accordance with the systems audit procedure of this protocol as it applies to an application for Full Scope – Entire DWQMS accreditation. The audit will also include consideration of the results of the most recent audit undertaken in accordance with this protocol and any of the following that have occurred subsequent to that audit:

- (a) the results of any audits undertaken in accordance with element 19 of the DWQMS;
- (b) historical responses taken to address corrective action requests made by the accreditation body;
- (c) the results of any management reviews undertaken in accordance with element 20 of the DWQMS; and
- (d) any changes to the documentation and implementation of the QMS.

5.3.3 If a major non-conformity is identified during the systems audit, the auditor will prepare a systems audit report detailing all major and minor non-conformities.

5.3.4 The accreditation body will review the systems audit report prepared by the auditor in accordance with the corrective action request procedure of this protocol.

5.3.5 Following the completion of the corrective action request procedure if required, an auditor will conduct an on-site verification audit in accordance with the on-site verification audit procedure of this protocol as it applies to an application for Full Scope – Entire DWQMS accreditation. The audit will also include consideration of the results of the most recent audit undertaken in accordance with this protocol and any of the following that have occurred subsequent to that audit:

- (a) the results of any audits undertaken in accordance with element 19 of the DWQMS;
- (b) historical responses taken to address corrective action requests made by the accreditation body;
- (c) the results of any management reviews undertaken in accordance with element 20 of the DWQMS; and
- (d) any changes to the documentation and implementation of the QMS.

5.3.6 The auditor will prepare an on-site verification audit report detailing all major and minor non-conformities and a recommendation on whether the accreditation of the operating authority should be continued, suspended or revoked.

5.3.7 The accreditation body will review the on-site verification audit report prepared by the auditor in accordance with the corrective action request procedure of this protocol.

6.0 Suspension and Revocation of Accreditation

6.1 Grounds for Suspension

6.1.1 The accreditation body may suspend an operating authority's accreditation where:

- (a) suspension is recommended by an auditor;
- (b) corrective action requests are not addressed to the satisfaction of the accreditation body;
- (c) any fees owed by the operating authority to the accreditation body have not been paid in full;
- (d) a condition of accreditation is not fulfilled;
- (e) an operating authority prevents or obstructs an auditor from conducting or completing an audit;
or
- (f) an operating authority's QMS for a subject system does not meet the requirements of the DWQMS.

6.2 Suspension Process

6.2.1 The following process will apply to the suspension of the accreditation of an operating authority:

- (a) The accreditation body will provide notice of the proposed suspension to the accredited operating authority. The notice will include reasons for the proposed suspension and will indicate that any submissions from the operating authority will be considered if provided within 30 days of the date of the notice. The notice will also indicate that, if an accreditation is suspended, a failure to remedy the reasons underlying the suspension within 30 days will result in the automatic revocation of the accreditation.
- (b) The accreditation body, after considering any submissions made by the accredited operating authority, will provide its decision to the operating authority on the suspension of accreditation within 15 days of the receipt of any submissions from the operating authority.
- (c) If a decision issued by the accreditation body under subsection 6.2.1 (b) suspends an accreditation, the decision will also indicate that a failure to remedy the reasons underlying the suspension within 30 days will result in the automatic revocation of the accreditation.
- (d) The notice required by subsection 6.2.1 (a), any decision made in accordance with subsection 6.2.1 (b), and any decision by the accreditation body to reinstate a suspended accreditation in accordance with section 8.1.1 will be provided to the accredited operating authority in writing and copied to the following persons or entities:
 - i. the owner of the subject system;
 - ii. the management committee; and
 - iii. the Director.
- (e) In addition to the notification requirements in subsection 6.2.1 (d), if the accreditation body suspends the accreditation of an operating authority, the accreditation body shall immediately notify the operating authority and the persons listed in subsection 6.2.1 (d) by telephone.

6.3 Automatic Revocation Process

6.3.1 If a decision issued by the accreditation body under subsection 6.2.1 (b) suspends an accreditation, and the operating authority has not addressed the reasons underlying the suspension within 30 days of the date of the decision to the satisfaction of the accreditation body, the accreditation body will revoke the operating authority's accreditation.

6.3.2 If an operating authority's accreditation is revoked in accordance with section 6.3.1, a written notice of revocation will be provided to the operating authority and copied to the following persons or entities:

- i. the owner of the subject system;
- ii. the management committee; and
- iii. the Director.

6.3.3 In addition to the notification requirements in subsection 6.3.2, if the accreditation body revokes the accreditation of an operating authority, the accreditation body shall immediately notify the operating authority and the persons listed in subsection 6.3.2 by telephone.

7.0 Appeals and Appeal Process

7.1 Decisions Subject to Appeal

7.1.1 The accreditation body will establish a two-level appeal process and related procedures and rules consistent with the requirements of this protocol that allows an appeal by an operating authority of a decision by the accreditation body to:

- (a) suspend an accreditation;
- (b) revoke an accreditation;
- (c) not grant an accreditation; or
- (d) suspend an accreditation process.

7.1.2 The appeal process will be operated in accordance with the following:

- (a) all appeals will be conducted in writing;
- (b) the adjudicator for the first and second level appeals will be the accreditation body and the management committee, respectively;
- (c) to initiate a first level appeal, a notice of appeal summarizing the reasons for the appeal and evidence supporting the reasons must have been delivered to the accreditation body within 15 days of the decision being appealed from;
- (d) all decisions on a first level appeal will be made in writing and within 30 days of the receipt of a notice of appeal;
- (e) to initiate a second level appeal, a notice of appeal summarizing the reasons for the appeal and evidence supporting the reasons must have been delivered to the management committee within 15 days of the decision being appealed from; and
- (f) all decisions on a second level appeal will be made in writing and within 15 days of the receipt of a notice of appeal.

7.1.3 All written decisions made in accordance with section 7.1.2 will be provided to the following persons or entities:

- (a) the operating authority;
- (b) the owner of the subject system;
- (c) the accreditation body or management committee, as appropriate; and
- (d) the Director.

8.0 Reinstatement of Accreditation under Suspension

8.1 Removal of suspension

8.1.1 The accreditation body may remove a suspension of an accreditation where the reasons for the suspension have been addressed to the satisfaction of the accreditation body.

Table One: Applicable DWQMS Elements for Audit Purposes

Accreditation Category:	Limited Scope – Partial DWQMS		Limited Scope – Entire DWQMS		Full Scope – Entire DWQMS	Limited Scope – Transitional	
	Column A Systems Audit & On-Site Verification Audit	Column B Systems Audit & On-Site Verification Audit	Column A Systems Audit	Column B Systems Audit & On-Site Verification Audit	Column A Systems Audit & On-Site Verification Audit	Column A Systems Audit	Column B Systems Audit & On-Site Verification Audit
1. Quality Management System		X	X	X	X		X
2. Quality Management System Policy	X		X	X	X		X
3. Commitment and Endorsement	X		X	X	X	X	X
4. Quality Management System Representative	X		X	X	X	X	X
5. Document and Records Control	X		X	X	X		X
6. Drinking-Water System	X		X	X	X	X	X
7. Risk Assessment	X		X	X	X		X
8. Risk Assessment Outcomes	X		X	X	X		X
9. Organizational Structure, Roles, Responsibilities and Authorities	X		X	X	X	X	X
10. Competencies		X	X	X	X		X
11. Personnel Coverage		X	X	X	X	X	X
12. Communications	X		X	X	X		X
13. Essential Supplies and Services		X	X	X	X	X	X
14. Review and Provision of Infrastructure		X	X	X	X		X
15. Infrastructure Maintenance, Rehabilitation and Renewal		X	X	X	X		X
16. Sampling, Testing and Monitoring		X	X	X	X	X	X
17. Measurement and Recording Equipment Calibration and Maintenance		X	X	X	X	X	X
18. Emergency Management	X		X	X	X	X	X
19. Internal Audits	X		X	X	X		X
20. Management Review	X		X	X	X		X
21. Continual Improvement		X		X	X		X