National Oceanic and Atmospheric Administration

Safety & Environmental Compliance Office
Policy 97-01

NOAA Environmental Compliance & Safety Assessment System (NECSAS) Program

September 30, 1997 (Revised March, 2010)

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1. Policy

1.1 The National Oceanic and Atmospheric Administration (NOAA) is committed to operating facilities, at a minimum, in full compliance with environmental and occupational health and safety laws.

1.2 To assist in accomplishing this goal, NOAA, through the Safety and Environmental Compliance Office (SECO), established the NOAA Environmental Compliance and Safety Assessment System (NECSAS) program to conduct comprehensive environmental, occupational health and safety assessments of its facilities.

1.3 The goals of the NECSAS program are to:

1.3.1 sustain compliance with applicable federal, state and local laws, regulations pertaining to both environmental and occupational health & safety programs;

1.3.2 assess and enhance the safety and environmental management systems of the organization;

1.3.3 progress beyond compliance through strategic implementation of innovative policies, best management practices, procedures, and projects to mitigate potential liabilities;

1.3.4 provide a safe and healthful workplace for employees in concert with fostering stewardship of the natural environment.

1.3.5 provide an effective data management and analyses to the Line Offices to support resource programming and implementation;

1.3.6 assist the Line Offices in:

1.3.6.1 addressing environmental compliance and occupational health and safety issues through identification;

1.3.6.2 developing and tracking of corrective strategies to resolve findings; and

1.3.6.3 achieving cost-effective utilization of limited resources for resolving problems and sustaining compliance.

1.3.7 energize the NOAA community to integrate environmental, health & safety (EH&S) custodianship as a priority in everyday activities.

1.3.8 support the Environmental Management System (EMS) through a comprehensive environmental assessment program.

2. Regulatory Framework

2.1 Environmental mandates that created the need for and that have defined and structured the NECSAS Program include:

2.1.1 Federal Facility Compliance Act (FFCAct) of 1992

2.1.2 Title 40 Code of Federal Regulations (CFR) – series of Federal environmental regulations

2.1.3 Executive Order (EO) 13423, Strengthening Federal Environmental, Energy, and Transportation Management (January 24, 2007)

2.1.4 United States Environmental Protection Agency's (USEPA) *Incentives for Self-Policing: Discovery, Disclosure, Correction and Prevention of Violations*; Final Policy Statement (Federal Register, Volume 60/No. 246 [1995])

2.1.5 Department of Commerce Administrative Order (DAO) 200-0, Handbook and Manual - Environmental Management Manual (November 04, 2004)

2.1.6 NOAA Administrative Order (NAO) 216-17, *NOAA Environmental Compliance Program*

2.1.7 NOAA Environmental Management Manual

2.2 Occupational Health & Safety mandates that form the H&S foundation of the NECSAS Program include:

2.2.1 Title 29 Code of Federal Regulations (CFR) – series of federal occupational safety and health related matters

2.2.2 Title 10 CFR Part 20, Standards for Protection against Radiation

2.2.3 EO 12196, Occupational Safety and Health Programs for Federal Employees

2.2.4 Department of Commerce, *Occupational Safety and Health Manual*

3. Definitions

3.1 *Environmental, Health and Safety (EH&S) assessment* is a systematic, documented, periodic and objective assessment of facility operations and practices subject to environmental and safety requirements, which includes onsite visits or off-site assessments. There are three tiers of assessment:

3.1.1 *Tier I assessment* is an on-site assessment performed by an independent 3rd party.

3.1.2 *Tier II assessment* is an on-site assessment performed by qualified NOAA personnel external to the facility.

3.1.3 *Tier III assessment* is an off-site assessment performed by off-site personnel via telephone or email.

3.1.4 *Equivalent Assessment* may be used to satisfy NOAA's Tier I and II requirements provided it is performed by another federal agency and the scope is comparable to the NECSAS program.

3.1.5 *EMS external audit* is performed by an EMS certified lead auditor every 3 years.

3.1.6 *EMS internal audit* is performed annually by personnel trained in EMS auditing protocols.

3.2 Environmental Management System (EMS). An EMS is that component of any organization's overall management system that takes into account organizational structure, planning, activities, procedures, processes, and resources for developing, implementing, achieving, reviewing, and maintaining environmental programs and policy. It serves as a tool for improving overall environmental performance. An EMS integrates responsibilities and practices into an overall management system to increase efficiency while reducing environmental affairs by:

3.2.1 Identifying and addressing immediate, cumulative and long-term environmental results of missions, services and processes; and

3.2.2 Providing order and consistency in addressing environmental impacts through the allocation of resources, assignment of responsibility and ongoing evaluation of practices, procedures, and processes.

3.3 *Facilities* are land-based complexes owned, operated, maintained, or occupied by NOAA. A complex represents a campus of buildings, structures, and/or land located in one contiguous property boundary.

3.3.1 *High Risk Facilities (HRF)* are NOAA facilities that pose a large risk in the realms of Safety, Occupational Health, or Environmental Management because of the materials present or the operations performed at the facility. Consequently, HRF have a higher likelihood of a compliance violation and/or a higher magnitude of consequence if a violation occurs. HRF are selected by the criteria outlined in Attachment 1 and will receive a Tier I assessment every 3 years.

3.3.2 *Medium Risk Facilities (MRF)* are NOAA facilities that pose a moderate risk in the realms of Safety, Occupational Health, or Environmental Management because of the materials present or the operations performed at the facility. MRF are also selected by the criteria outlined in Attachment 1 and will receive a Tier II assessment every 5 years.

3.3.3 *Low Risk Facilities (LRF)* are NOAA facilities that pose little to no risk in the realms of Safety, Occupational Health, or Environmental Management because of the materials present or the operations performed at the facility. LRF are facilities that do not meet the HRF and MRF selection criteria. LRF will receive a Tier III assessment every 5 years.

3.4 *Facility selection criteria* are measures used to determine the risk level at NOAA facilities. These criteria are explained further in the NECSAS Facility Selection Criteria document included as Attachment 2. The NECSAS Working Group shall review and update these criteria at least once every five years. Tier I, II, and III will be conducted for high, medium, and low risk facilities, respectively.

3.5 *Findings* are the formal notation of the observations from the assessor's surveys of the

facility or operation. Both Environmental and Health and Safety findings are divided into three classes.

3.5.1 Environmental findings are findings that have the potential to impact the environment surrounding a NOAA Facility or the location of a NOAA operation.

3.5.1.1 *Class I Finding* is an observed noncompliant condition with federal, state, or local regulations that has a potential for adverse impacts to human health or the environment. Class I environmental findings are divided into High, Moderate, or Low risk.

3.5.1.1.1 *High risk* – The most extreme degree of environmental endangerment and liability assigned to a noncompliant condition that requires a timely corrective action requiring immediate attention. Such a condition poses, or has likelihood of posing an imminent, a direct threat to the environment or mission at the time of discovery.

3.5.1.1.2 *Moderate* – A serious degree of environmental endangerment and liability assigned to a noncompliant condition that requires a timely corrective action, but not necessarily immediate. Such a condition poses a threat to the environment or mission at the time of discovery.

3.5.1.1.3 *Low*- A minimal degree of environmental endangerment and liability assigned to a noncompliant condition that requires resolution, but not of an urgent nature. Such a condition poses a potential but very small threat to the environment or mission at the time of discovery. This type of Class I environmental findings may be related to administrative or recordkeeping requirements if punitive penalties are not associated with its noncompliance.

3.5.1.2 *Class II Finding* is an observed future noncompliant condition with federal, state, or local regulations that has a potential for future adverse impacts to human health or the environment. Class II environmental findings are divided into Moderate and Low risk subcategories.

3.5.1.2.1 *Moderate* - A serious degree of environmental endangerment and liability assigned to a noncompliant condition that requires a corrective action within one year. Such a condition will be expected to pose a threat to the environment or mission at some future date if not addressed.

3.5.1.2.2 *Low*- A minimal degree of environmental endangerment and liability assigned to a future noncompliant condition that requires resolution, but not of an urgent nature. Such a condition poses a potential but very small threat to the environment or mission within one year's time. This type of Class II environmental finding may be related to administrative or recordkeeping requirements if punitive penalties are not

associated with its noncompliance.

3.5.1.3 *Class III findings* involve noncompliance with internal NOAA/Line Office policies, procedures, or directives. Class III findings are subdivided into two categories, Moderate and Low risk.

3.5.1.3.1 *Moderate* – A violation of an internal policy or standard, which could adversely affect environmental compliance. Examples of moderate risk classifications include failure to conduct an internal inspection, which is more frequent than a regulatory required inspection (e.g., weekly versus monthly inspections).

3.5.1.3.2 *Low* – This category is a violation of an internal requirement to go beyond regulatory standards.

3.5.2 Health and Safety Findings are findings that have the potential to impact the health, safety, and well being of individuals working or visiting NOAA facilities or operations.

3.5.2.1 *Class I Health and Safety Findings* indicate substantial probability that death or serious physical harm could result, and management knew or should have known of the hazard. These findings are determined by using the accident probability and hazard severity matrix of risk assessment codes (RAC) and categorized in terms of RAC 1 or 2.

3.5.2.2 *Class II Health and Safety Findings* indicate Moderate to low probability of resulting in an injury or illness. These findings are determined by using the accident probability and hazard severity matrix of risk assessment codes (RAC) and categorized in terms of RAC 3, 4 or 5.

3.5.2.3 *Class III Health and Safety Findings* suggest programmatic, written or other administrative deficiencies with minor probability of resulting in an injury or illness. Typical examples are as follows:

3.5.2.3.1 no formal posting of injury and illness reporting and/or record-keeping requirements;

3.5.2.3.2 no training records;

3.5.2.3.3 no formal program documentation (i.e., emergency drills or inspection records).

3.5.3 *Best Management Practices (BMP)* are findings of either an environmental or health and Safety nature that do not fall under specific regulations. Sources for Best management practices include:

3.5.3.1 Policies or guidance implemented by other federal agencies

3.5.3.2 Line office policy

3.5.3.3 Industry consensus standards (e.g., ACGIH, ANSI, NIOSH, or ISO documents)

3.5.3.4 Benchmark with private industry

3.5.4 *Finding status* provides information on the progress made to correct a finding. The status may be Open, In-Progress, or Closed. Each status is defined as follows:

3.5.4.1 *Closed finding* indicates that all appropriate corrective actions have been completed.

3.5.4.2 *In-Progress status* denotes that closure actions have been initiated but not yet complete.

3.5.4.3 *Open finding* suggests that no action has been taken to correct the finding.

3.6 *Web-Hosted Assessment Manager (WHAM)* is a web-based application used to track and manage NECSAS findings.

4. Roles and Responsibilities

4.1 The SECO Director shall:

4.1.1 provide overall guidance and direction to the NECSAS Program Manager (PM);

4.1.2 represent the PM and the NECSAS working group to the NOAA Safety Council;

4.1.3 advocate and request funding for all assessment related activities excluding costs associated with the correction of findings;

4.1.4 assist the NECSAS PM in resolving any discrepancy related to findings; and

4.1.5 make recommendations to the NOAA Safety Council for the addition/removal of a facility to and from any tier assessment. Below are illustrations of reasons for adding or removing a facility to or from any tier assessment:

4.1.5.1 Designated as "HRF" or "MRF" facility by the NOAA Safety Council;

4.1.5.2 Received an EPA Notice of Violation or OSHA Citation;

4.1.5.3 Had a class "A" Mishap;

4.1.5.4 Had a spill release requiring a notification to regulatory agencies, oversight from any agency, or procedural changes;

4.1.5.5 Recently vacated facilities;

4.1.5.6 Newly acquired or constructed facilities.

4.2 The Environmental Compliance and Safety (ECS) Committee shall:

4.2.1 advise and oversee the NECSAS working group; and

4.2.2 provide recommendations to the NOAA Safety Council through the SECO

Director and Line Office's Safety Council representative for consideration on the overall NECSAS program policy, procedure, and direction.

4.3 The NOAA Safety Council is comprised of senior representatives from Line and Corporate offices and is chaired by the NOAA Chief Administrative Officer in the Office of the Chief Administrative Officer (OCAO). The Council shall:

4.3.1 provide guidance and direction to the SECO Director on the NECSAS Program;

4.3.2 review and decide on each recommendation to change the level of assessment (e.g., Tier I to II, II to III, or vice versa);

4.3.3 designate or remove facilities to or from the HRF or MRF category; and

4.3.4 have final authority on all NECSAS program related issues.

4.4 NOAA Line and Corporate Offices shall:

4.4.1 take appropriate actions to close NECSAS findings; and

4.4.2 provide observations and other suggestions to better develop and implement the NECSAS program.

4.5 The Line Office Environmental Compliance Officer (LECO) is the headquarter representative from each Line Office. The LECO shall:

4.5.1 Recommend adding facilities to, or removing facilities from any tier assessment levels to the ECS Committee. The LECO must provide a justification to support each recommendation;

4.5.2 provide observations and other suggestions to better develop and implement the NECSAS program;

4.5.3 participate in planning, scheduling, and coordination of assessment activities, including identification of facility points of contact;

4.5.4 coordinate communication between the NECSAS PM and the facility;

4.5.5 track findings from draft to closure; and

4.5.6 review and verify the completion of all required corrective actions prior to closing a finding.

4.6 The NECSAS Program Manager (PM) is a staff member in the NOAA Safety and Environmental Compliance Office. The NECSAS PM shall:

4.6.1 develop and implement the NECSAS program;

4.6.2 chair the NECSAS Working Group;

4.6.3 serve as the Contracting Officer’s Technical Representative (COTR) on all

NECSAS related contracts;

4.6.4 formulate funding requests and procure contractor services;

4.6.5 develop a standard Statement of Work (SOW) to be used on all NOAA Tier I assessments to ensure consistency;

4.6.6 plan, schedule, and coordinate assessment activities with all Line Offices;

4.6.7 resolve any assessment finding discrepancy at the lowest level possible. Any unresolved findings shall be forwarded to the SECO Director for further guidance;

4.6.8 review and approve any request for an extension of the reviewing time; and

4.6.9 compile the annual report on the NECSAS program performance.

4.7 The NECSAS Working Group is comprised of representatives from all Line/Corporate offices and is chaired by the NECSAS PM. This Group shall:

4.7.1 assist in developing and implementing the NECSAS program;

4.7.2 discuss issues and solutions as related to the NECSAS program;

4.7.3 submit reports to the ECS Committee;

4.7.4 make recommendations for program improvement to the SECO Director; and

4.7.5 assist in planning assessment activities.

4.8 The SECO Safety Division Chief shall:

4.8.1 ensure appropriate SECO Safety Division personnel are assigned to review safety findings when requested by the NECSAS PM; and

4.8.2 assist the NECSAS PM in resolving any discrepancy related to safety findings.

4.9 The SECO Environmental Compliance Division Chief shall:

4.9.1 ensure appropriate SECO Environmental Compliance Division personnel are assigned to review safety findings when requested by the NECSAS PM; and

4.9.2 assist the NECSAS PM in resolving any environmental finding discrepancy.

4.10 The Field Safety Manager (FSM) is a NOAA SECO staff member who reviews safety findings and who assists the NECSAS PM in resolving safety findings. The FSM serves as a safety compliance assessor in Tier II assessments.

4.11 The Environmental Compliance Officer (ECO) is a NOAA SECO staff member who reviews environmental findings and who assists the NECSAS PM in resolving any environmental findings. The ECO serves as an environmental compliance assessor in

Tier II assessments.

4.12 The Facility Environmental Coordinator (FEC) is a facility-level staff member who ensures environmental compliance at the site. The FEC shall:

4.12.1 participate in all assessment activities outlined in Section 6 where required;

4.12.2 provide facility-related information and pertinent records to the assessment team when requested;

4.12.3 coordinate review and closure of assessment findings with local management.

4.13 The Environmental Focal Point (EFP) has the same responsibilities as outlined in paragraph 4.12.

4.14 The Facility Safety Coordinator (FSC) is a facility-level staff member who ensures safety compliance at the site. The FSC shall:

4.14.1 participate in all assessment activities outlined in Section 6 where required;

4.14.2 provide facility-related information and pertinent records to the assessment team when requested;

4.14.3 coordinate review and closure of assessment findings with local management.

4.15 The Safety Focal Point (SFP) has the same responsibilities as outlined in paragraph 4.14.

4.16 The LO Regional Office (LORO) might have a representative participate in the assessment. The LORO Representative shall:

4.16.1 participate in all assessment activities outlined in Section 6 where required;

4.16.2 provide facility-related information and pertinent records to the assessment team when requested;

4.16.3 assist focal point as requested in the review and closure of all assessment findings.

4.17 The Designated Responsible Official (DRO) at every NOAA facility is the senior NOAA official on-site. This official has authority over operations or activities which are subject to environmental statutes. The responsibility of the DROs is inherent in their position and need not be formally designated or ascribed. The DRO shall:

4.17.1 ensure resources are allocated to correcting assessment findings; and

4.17.2 ascertain all assessment findings are addressed and closed.

4.18 The NOAA General Council provides legal consultation and regulatory interpretations.

5. General Guidelines

5.1 Environmental, Health and Safety (EH&S) assessments are designed to identify potential health and safety findings that may adversely affect NOAA employees, contractors and visitors. Discovery of an EH&S finding during such assessments allows the facility to correct the problem without the immediate threat of adverse actions by regulatory agencies (e.g., citations, Notice of Violations, and/or monetary fines). These findings are good leading indicators for planning purposes and application of limited funding to areas where corrections are needed to minimize operational interruptions at the facility.

5.2 The evaluation methodology used to conduct assessments through the NECSAS Program incorporates media based protocols developed by The Environmental Assessment and Management (TEAM) Guide and its associated supplements for Occupational Safety and Health Administration (OSHA) and State regulations. These protocols have been specifically developed for Federal agency use and maintained by the Construction Engineering Research Laboratories (USACERL) of the United States Army Corps of Engineers (USACE), which also provides continuous, on-line maintenance and updating of the coded regulatory material in an electronic catalogue format. These protocols are listed in Attachment 3.

5.3 EMS audits are conducted using protocols outlined in ISO 14001 to meet requirements in the DOC Environmental Management Manual. This policy does not mandate an EMS; therefore, the specific procedure is not included in this document. EMS is only applicable to appropriate facilities and not subject to the Facility Selection Criteria in Attachment 2.

5.4 NECSAS and EMS findings are collected, tracked, and managed via a web-based application called Web-Hosted Assessment Manager (WHAM).

5.5 Generally, the assessment process progresses through the following phases: Planning and Preparation; Field Assessment; and Lessons Learned (see Attachment 4).

5.6 The NOAA Safety and Environmental Compliance Office (SECO) manages the Assessments Schedule in concert with Line and Staff Offices.

5.6.1 Tier I assessment are performed at all HRF at least once every three (3) years as required by the Department of Commerce Administrative Order 200-0;

5.6.2 Tier II assessment are performed at all MRF at least once every five (5) years; and

5.6.3 Tier III assessment are performed at all LRF at least once every five (5) years.

The assessor shall contact the facility to complete Attachment 5 and determine if a higher tier assessment is required based on the newly collected information.

5.7 Tier I and II assessments are performed on-site by off-site qualified personnel.

5.7.1 Assessment teams will be comprised of a combination of personnel from NOAA SECO staff, LO staff from different than the LO under assessment, and from a contracted source. If a contractor is involved, there will be at least one NOAA representative on each assessment team.

5.7.2 The use of personnel external to the facility ensures objectivity of the assessment process.

5.7.3 Assessors will possess a good working knowledge of the environmental and safety laws and regulations, as well as the operations being assessed. Collectively, the team must have the knowledge and background required to efficiently and effectively conduct all aspects of an EH&S assessment. Minimum qualifications for assessment personnel are found in Attachment 6.

5.7.4 Size and composition of the audit team is based on the size and mission of the facility being evaluated.

5.8 Tier III assessments are performed by off-site personnel via telephone or email using the questionnaire outlined in Attachment 5.

6. Procedures:

6.1 Pre-assessment preparatory activities:

6.1.1 The NECSAS PM shall inform the LECOs on the general timeframe of the assessment schedule in the first quarter of the fiscal year.

6.1.2 The LECO shall notify the affected facility as soon as the preliminary schedule becomes available. The notice should go out during the first quarter of the fiscal year.

6.1.3 The NECSAS PM will provide either a new or previously completed pre-visit questionnaires (PVQ) as shown in Attachment 7 to the LECO for inclusion in the first notification to the scheduled facility for either a Tier I or Tier II assessment to complete or review for any changes. The PVQ is an environmental and health and safety questionnaire that provides pertinent information that helps the assessment team prepare for the site visit. Facility personnel have within 30-days of the initial NECSAS assessment notification to return the completed PVQ to their respective LECO. The LECO will review and send the completed PVQ to the NECSAS PM within 45-days of the initial NECSAS assessment notification. A prompt submittal of the PVQ is requested to ensure the assessment team has sufficient time to research and determine all applicable regulations.

6.1.4 After the first notification, the NECSAS PM shall contact the facility to coordinate the exact on-site assessment date. The NECSAS PM shall send a confirmation notice to the facility and LECO no later than 30 days prior to the scheduled assessment date.

6.2 On-site assessment activities:

6.2.1 On-site activities include an entrance briefing, physical assessment of the facility, records review, programs evaluation, and an exit briefing.

6.2.2 The assessor shall use checklists included in Attachment 8 and Attachment 9 to ensure all aspects of environmental and safety programs are adequately assessed.

6.2.3 The assessor shall follow the guidance outlined in Attachments 10A and 10B to assign the classification of environmental and safety findings respectively. Additionally, the assessor shall follow the guidance outlined in Attachment 10C to assign the root cause for each finding.

6.2.4 The DRO or his designated representative shall receive regular feedback throughout the site visit to monitor problems discovered and initiate immediate corrective actions, if possible or mandated.

6.3 Post-assessment follow-up activities:

6.3.1 Following the site assessment, the assessment team will prepare an assessment report for each finding. These findings shall be in draft form and posted on the NOAA Web-Hosted Assessment Management (WHAM) web site for review and comment by all affected parties (e.g., FEC, SECO, LECO and LO's regional personnel).

6.3.2 The NECSAS PM shall ensure each comment is addressed and resolved prior to finalizing each finding. However, in the event that the facility does not agree with the finding, the facility may appeal the finding with the SECO Director whose decision will be final.

6.3.3 The final assessment report serves as:

6.3.3.1 documentation of findings;

6.3.3.2 a basis for follow-up actions;

6.3.3.3 a rough guideline for determining corrective action costs and financial environmental liabilities; and

6.3.3.4 a justification for future funding requests.

6.3.4 Disclosure: The final assessment report and all associated documents contain sensitive information and may not be released to persons or agencies outside of NOAA without consulting with and securing the permission of NOAA's Office of General Counsel (OGC).

6.4 Corrective Action Plan:

6.4.1 The LO shall post its corrective action plan (CAP) for Safety RAC 1 and RAC 2 and Environmental Class I findings in the NOAA WHAM web site no later than 30 days after all findings become final .

6.4.2 The corrective action plan shall address both immediate corrective action as well as any long term actions to correct the root cause of the finding. It shall outline how the facility will fix non-compliant items, listing those actions already taken and those that require more time or funding to accomplish, and will include project descriptions and project completion schedule.

6.4.3 The LO may use the finding report developed during the assessment process to form the basis for each CAP.

6.4.4 SECO staff shall assist LOs correct assessment findings upon request.

6.4.5 The FEC and/or FSC shall track and document all corrective actions for each finding at their facility on the NOAA WHAM web site. When a finding is ready for closure, the FEC and/or FSC must contact the LECO via email to request a change in the finding status from “Open” or “In-Progress” to “Closed”. The LECO must verify the progress made (e.g., photos, completed documents, or proof of training records, etc.) before closing a finding.

6.4.6 The LO will update the status of each finding in the NOAA WHAM web site to track its progress on closing assessment findings.

6.5 Quarterly Reporting:

6.5.1 SECO will compile quarterly reports on the status of each finding using data extracted from the NOAA WHAM web site and submit them to the NOAA Environmental Compliance and Safety Council.

6.5.2 The quarterly status report shall be brief with most of the information contained in table format to provide a high level summary of the progress being made for each LO (see Attachment 11 for a sample report). The objectives of this report are to:

6.5.2.1 heighten senior management’s awareness of compliance issues;

6.5.2.2 show progress toward closing the findings;

6.5.2.3 highlight any systemic problems;

6.5.2.4 support budget development; and

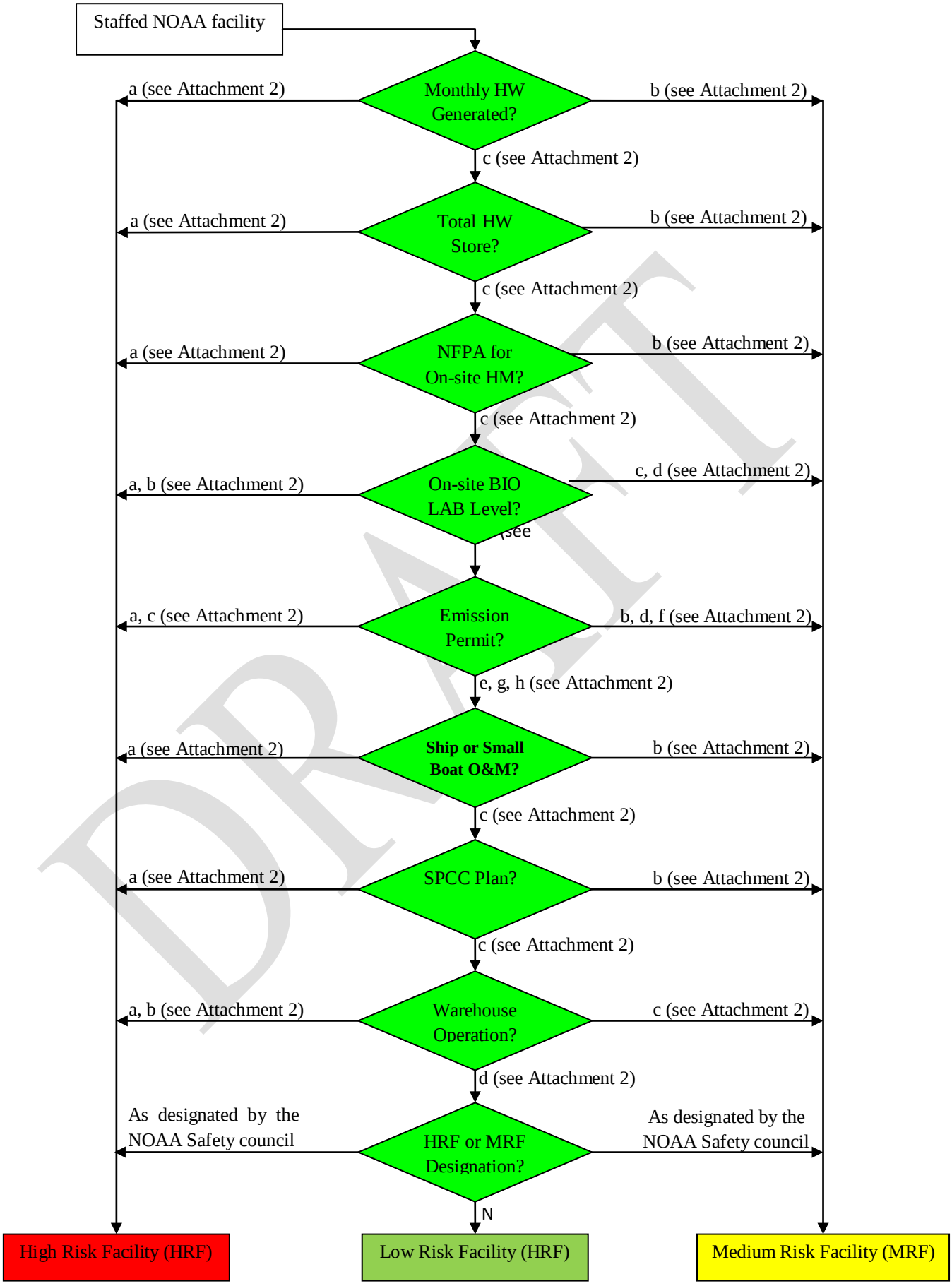
6.5.2.5 measure each LO's environmental and safety program's performance.

6.6 Table 1 summarizes the general timeline and framework for the assessment process.

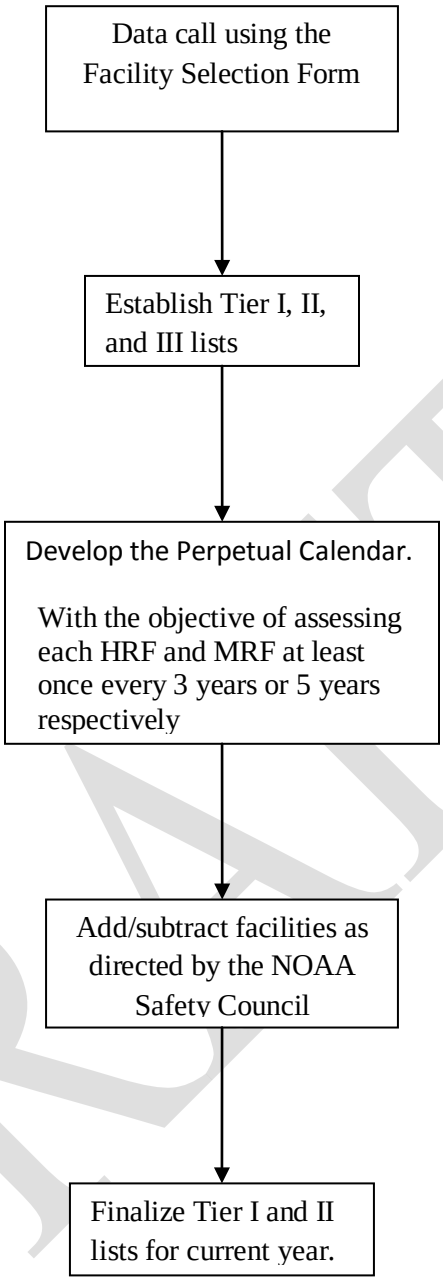
Table 1 – NOAA Assessment Timeline Summary

Phase	Activity	From	To	Tier I	Tier II	Tier III
Pre-Assessment Preparation	General Schedule Notification and Pre-Visit Questionnaires (PVQ)	NECSAS PM	LECO	1st quarter of the fiscal year	1st quarter of the fiscal year	1st quarter of the fiscal year. Notice only and no PVQ.
	General Schedule Notification and Pre-Visit Questionnaires (PVQ)	LECO	Facility	1st quarter of the fiscal year	1st quarter of the fiscal year	1st quarter of the fiscal year. Notice only and no PVQ.
	Completed and Returned PVQ and Tentative Date Selection	Facility	LECO	30-days after general schedule notification	30-days after general schedule notification	N/A
	Completed PVQ and Tentative Date Selection	LECO	NECSAS PM	45-days after general schedule notification	45-days after general schedule notification	N/A
	Firmed Schedule Notification	NECSAS PM	Facility and cc: LECO	30 days prior to assessment	30 days prior to assessment	N/A
	In-brief	Assessment Team	Facility and LECO	Day 1 – 5	Day 1 – 5	N/A
	Data collection, interviews, and walk through	Assessment Team	Facility and LECO	Day 1 – 5	Day 1 – 5	N/A
	Initial quality assurance review of findings	Assessment Team	Facility and LECO	Day 1 – 5	Day 1 – 5	N/A
On-Site Assessment Activities	Out-brief with preliminary dataset (draft findings)	Assessment Team	Facility and LECO	Day 1 – 5	Day 1 – 5	N/A
	Draft dataset	Assessment Team	Facility and LECO	14 days after assessment	30 days after assessment	N/A
	Complete review of draft dataset	Facility and LECO	Assessment Team	14 days after draft posted on WHAM	14 days after posted on WHAM	N/A
	Final dataset	Assessment Team	Facility and LECO	7 days after draft comments completed	14 days after draft comments received	N/A
Post Assessment Follow-up	Development of Corrective Action Plans (CAP) for all findings	Facility and LECO	NECSAS PM	No later than 30 days after the finding becomes final	No later than 30 days after the finding becomes final	N/A

ATTACHMENT 1 - NOAA FACILITY SELECTION PROCESS



ATTACHMENT 1 - NOAA FACILITY SELECTION PROCESS



ATTACHMENT 2 - FACILITY SELECTION CRITERIA

The purpose of the NECSAS program is to preserve NOAA resources by identifying gaps in compliance with Environmental, Safety and Occupational Health Regulations.

NECSAS is a risk control tool which investigates problems at an operational level and documents them so they may be viewed and addressed at every level of management. The criteria for selecting facilities to undergo compliance assessment must be attuned to the concerns of different levels of management, clearly express the concerns and address the controls needed to eliminate them at their root causes. The problems found must be corrected by addressing the root causes of the problem; not just the symptom that appears in the system as the problem.

The criteria are chosen not because they are problems; they were chosen because they are ancillary to potential problem sources and they may indicate an elevated potential to create or exacerbate a problem.

There are 3 assessment tiers and are defined as follows:

a. Tier I – On-site assessment performed by an independent 3rd party
b. Tier II – On-site assessment performed by qualified NOAA personnel external to the facility
c. Tier III – Off-site assessment using pre-established set of questionnaires

#	Question	Justification	Tier			Definition/Guidance
			I	II	III	
1	What is the total hazardous waste generated on-site per month on average for the last twenty four (24) months? a. Equal or greater than 1000 kilograms (or 2200 pounds). b. Between 100 kilograms to 1000 kilograms (or 220 to 2200 pounds). c. Less than 100 kilograms (220 pounds)	If a facility generates enough hazardous waste to require a large or small generator status, they have quantities of hazardous waste which increase their chances of exposing someone to a contaminant or violating RCRA standards. RCRA standards carry fines as well as citations. Conditionally exempt generators have small amounts of hazardous waste and therefore less chance of exposure or violating RCRA.	a	b	c	In general, a hazardous waste requires contractor support for the management, shipping, and disposal. The hazardous waste quantity can be found in the Department of Transportation (DOT) Uniform Hazardous Waste Manifests. How to calculate the average: a. Retrieve all DOT Uniform Hazardous Waste Manifests in the last 24 months. b. Tally the total quantity in pounds; and divide the total quantity by the number of months that spans from the oldest Manifest to the most recent one.

ATTACHMENT 2 - FACILITY SELECTION CRITERIA

#	Question	Justification	Tier			Definition/Guidance
			I	II	III	
2	What is the maximum total hazardous waste stored on-site at any given time in the last twenty four (24) months? a. Greater than 6000 kilograms (13200 pounds). b. Between 1000 to 6000 kilograms (2200 to 13200 pounds). c. Less than 1000 kilograms (2200 pounds).	Same as #1	a	b	c	How to determine to the maximum HW stored on-site at any given time? a. Retrieve all DOT Uniform Hazardous Waste Manifest documents, b. Review all manifests; and c. Select the manifest with the greatest quantity to answer this question.
3	Does the facility use or store chemicals with the following NFPA rating? a. Hazard code "4" in the Health (blue) or Reactive (yellow) section of the NFPA diamond. b. Hazard code "3" in the Health (blue) or Reactive (yellow) section of the NFPA diamond. c. Hazard code less than "3" in the Health (blue) or Reactive (yellow) section of the NFPA diamond.	This criterion separates the toxicity of the materials used. The most toxic materials give the greatest concerns Storage quantities increase or decrease the potential for a release and exposure to a person to occur.	a	b	c	 NFPA rating is created by the National Fire Protection Association. This is commonly known as the NFPA diamond label typically affixed to all chemical packaging or container. This label is divided into 4 distinct categories: The degree of hazard in all categories is rated by NFPA with a scale that goes from 0 to 4. 0 = Minimal 1 = Slight 2 = Moderate 3 = Serious 4 = Extreme

#	Question	Justification	Tier			Definition/Guidance
			I	II	III	
4	Does the facility operate a bio-safety laboratory at the following level? a. Level 4. b. Level 3. c. Level 2. d. Level 1. e. No Bio-safety laboratory.	A facility that operates a lab with a higher bio-safety level will more likely encounter a higher probability of exposure or safety risk to NOAA employees.	a, b	c, d	e	Based on definitions from the Biosafety in Microbiological and Biomedical Laboratories (BMBL) manual by CDC and NIH, 5th edition, 2007. **Bio-safety Level 4** (BSL-4) is required for work with dangerous and exotic agents that pose a high individual risk of life-threatening disease, aerosol transmission, or related agent with unknown risk of transmission. **Bio-safety Level 3** (BSL-3) is applicable to clinical, diagnostic, teaching, research, or production facilities where work is performed with indigenous or exotic agents that may cause serious or potentially lethal disease through inhalation route exposure. **Bio-safety Level 2** (BSL-2) is similar to BSL 1 and is suitable for work involving agents that pose moderate hazards to personnel and the environment. It differs from BSL-1 in that 1) laboratory personnel have specific training in handling pathogenic agents and are supervised by scientists competent in handling infectious agents and associated procedures; 2) access to the laboratory is restricted when work is being conducted; and 3) all procedures in which infectious aerosols or splashes may be created are conducted in biological safety cabinets or other physical containment equipment. **Bio-safety Level 1 (BSL-1)** is suitable for work involving well-characterized agents not known to consistently cause disease in immune competent adult humans, and present minimal potential hazard to laboratory personnel and the environment. The laboratory is not necessarily separated from the general traffic patterns in the building. Work is typically conducted on open bench tops using standard microbiological practices. Special containment equipment or facility design is not required, but may be used as determined by appropriate risk assessment.
5	Does your facility have one of the following permits: a. NPDES permit for a discharge from an area where industrial operations are carried out or have limits for specific	A required emission permit of any media (e.g., soil, water, or air) is indicative of required regulatory oversight. The level of complexity in the permitting process depends on the	a, c	b, d, f	e, g, h	**NPDES -** National Pollutant Discharge Elimination System. **Non-Attainment Zone** is an area designated by EPA that does not meet federal air-quality standards. **TSS** - Total Suspended Solids. TSS is listed as a conventional pollutant in the U.S. Clean Water Act. It is a water quality

#	Question	Justification	Tier			Definition/Guidance
			I	II	III	
	contaminants in the outflow. b. NPDES permit for a discharge from an area where research and development operations are carried out or have TSS as the only contaminant measured. c. Air emission permit that requires sampling of effluent. d. Air emission permit that requires calculation of effluent. e. Air emissions permit because of location in a non attainment zone. f. Other environmental permit for industrial activities (e.g., sandblasting, chipping, welding, and etc) which include measuring of effluent. g. Other environmental permit for non-industrial activities which does not include measuring of effluent. h. None	nature and location of operations/activities. Assessment is performed for certain types of permits to ensure regulatory compliance.				measurement expressed in milligram/liter.

#	Question	Justification	Tier			Definition/Guidance
			I	II	III	
6	Does the facility conduct the following activities? a. Routine overhaul, maintenance, and dockside repair of NOAA ships or NOAA aircraft. b. Routine loading, repair and maintenance of small boat (watercraft under 300 gross tons). c. None of the above.	Dockside activities represent some level of safety risk. The risk level various depending on the nature of the operations and the tools used to complete such tasks.	a	b	c	**Loading is defined as activities that require** the use of derricks, cranes, or block and tackle rigs to move equipment or cargo from the docks. **Repair and maintenance operations are defined as e**ngine work, machining and installation of deck hardware or equipment, or repair of hull, bulkhead or deck structures is routinely performed at these locations by NOAA or contract personnel assigned to the station. **Small boat is defined in NAO 209-125 to include every description of watercraft less than 300 gross tons capable of being used as a means of transportation of person on water. Additionally, the term "Small Boat" includes boats leased, loaned, bare boat chartered (also referred to as demise chartered), or operated under any cooperative agreement with other government agencies, universities, or scientific organizations by or from NOAA, but does not include boats time chartered by NOAA.**
7	Does the facility have a Spill Prevention, Control, and Countermeasure Plan (SPCC) for petroleum products? a. Yes with greater than 10,000 gallons in total storage capacity. b. Yes with storage capacity between 1320 and 10,000 gallons. c. No SPCC plan or has a SPCC BMP	Environmental regulatory requirements various depending on the total quantity of storage capacity for petroleum products and the facility location in relation to navigable water.	a	b	c	**Petroleum products** include gasoline, diesel, heating oil, and lubricants. **SPCC BMP.** The Spill Prevention, Control and Countermeasure Best Management Plan (SPCC BMP) is not required by regulatory agency; however, it is deemed as a good management plan to have it in place to deal with petroleum spill.

#	Question	Justification	Tier			Definition/Guidance
			I	II	III	
8	Does the facility have warehouse operations requiring the use of the following material handling equipment (check all applicable answers)? a. Powered Industrial Trucks b. Overhead cranes c. Pallet jacks d. No warehouse operation or no equipment required	The risk level various depending on the nature of the operations and the tools used to complete such tasks.	a, b	c	d	**Powered industrial truck** (PIT) is a mobile, power-driven vehicle used to carry, push, pull, lift or stack material. The definition for PIT applies to fork trucks, tractors, platform lift trucks, motorized hand trucks, and other specialized industrial trucks powered by electric motors or internal combustion engines. **Overhead crane** means a crane with a movable bridge carrying a movable or fixed hoisting mechanism and traveling on an overhead fixed runway structure. A crane may be installed on a track and moves across the room with the hoist also moves side by side across the room. It may be fixed to the floor and has an arm that moves in a semi-circle with a hoist on it (e.g., Jib Crane). This term includes mobile crane that may be mounted on truck, track-hoe, or rubber wheeled vehicles. **Pallet jack** means a hand-propelled wheeled platform, equipped with a mechanical hydraulic lifting device for moving palletized unit loads

ATTACHMENT 3 - NOAA ENVIRONMENTAL AND SAFETY ASSESSMENT PROTOCOLS

The evaluation methodology used to conduct compliance assistance service(s) through the NECSAS Program incorporates a library of over 50 EH&S media-based protocols compiled in the references, *The Environmental Assessment and Management (TEAM) Guide* and its associated supplements for OSHA and State regulations. These protocols have been specifically developed for Federal agency use by ACOE-CERL which also provides continuous, on-line maintenance and updating of the coded regulatory material in an electronic catalogue format. The following list(s) identify these EH&S protocols along with the established codes (abbreviations in parenthesis).

Environmental assessment protocols:

1 Air Emissions (AE)
2 Cultural Resources Management (CR)
3 Hazardous Materials Management (HM)
4 Hazardous Waste Management (HW)
5 Natural Resources Management (NR)
6 Other Environmental Issues (related to) –
- Federally-funded construction project impacts (O1)
- Noise pollution (O2)
- Site restoration (O3)
- Pollution prevention (O4)
- Program management (O5)
- Environmental Management System (O6)

7 Pesticide Management (PM)
8 Petroleum, Oil and Lubricant Management (PO)
9 Solid Waste Management (SO)
10 Storage Tank Management (ST)
11 Toxic Substances Management (related to) –
- Polychlorinated biphenyls (T1)
- Asbestos (T2)
- Radon (T3)
- Lead-base paint (T4)

12 Wastewater Management (WA)
13 Water Quality Management (WQ)

ATTACHMENT 3 - NOAA ENVIRONMENTAL AND SAFETY ASSESSMENT PROTOCOLS

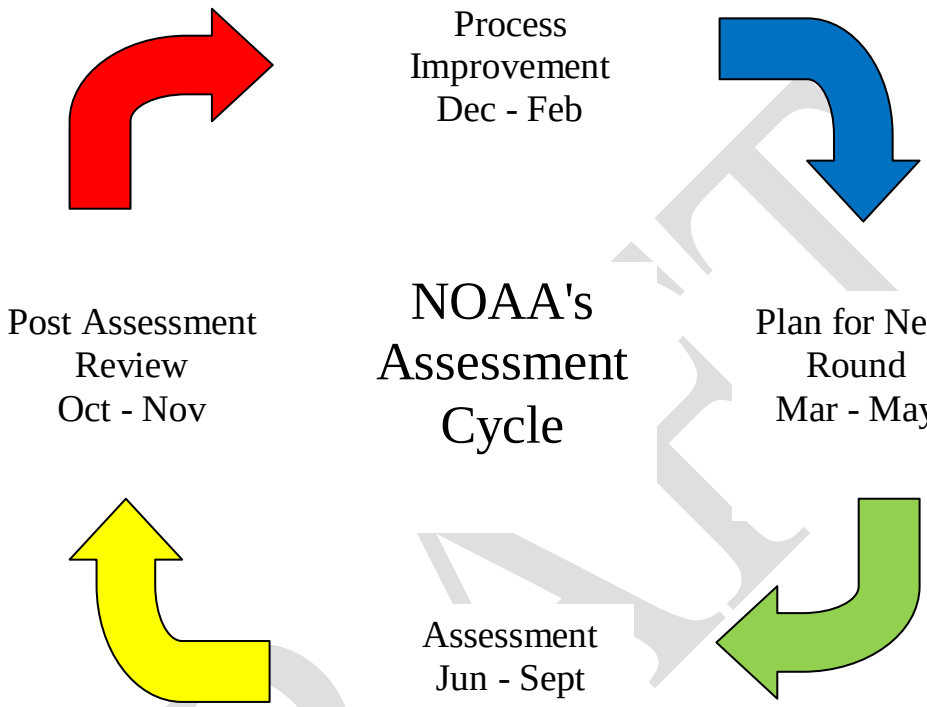
The listing of the media-based occupational health and safety protocols is much larger in comparison

Occupational Health assessment protocols:

1 Basic Program Elements (BE)
2 Exposure/Medical Records (RK)
3 Hazardous Communication (HC)
4 Personal Protective Equipment (PE)
5 Occupational Noise Exposure (NO)
6 Ionizing Radiation (IR)
7 Non-ionizing Radiation (NR)
8 Ventilation (VN)
9 Spray Finishing (SF)
10 Dip Tanks (DT)
11 Air Contaminants (AC)
12 Asbestos (AS)
13 Lead (PB)
14 Cadmium (CD)
15 Benzene (BZ)
16 Ethylene Chloride (MC)
17 Bloodborne Pathogens (BP)
18 Emergency Response (to hazardous substance[s] releases) (ER)
19 Sanitation (SN)
20 Ergonomics (EG)
21 General Construction Concerns (CG)
22 Asbestos (Construction) (CA)
23 Lead (Construction) (CL)

Safety assessment protocols:

1 Basic Program Elements (BA)
2 Illness/Injury Reporting (LG)
3 Personal Protective Equipment (SP)
4 Walking-working Surfaces (WS)
5 Means of Egress (ME)
6 Hazardous Materials (HZ)
7 Accident Prevention Signs and Tags (AP)
8 Permit-required Confined Spaces (PS)
9 Lockout/Tagout (LT)
10 Fire Protection (FP)
11 Materials Handling and Storage (MS)
12 Machinery/Machine Guarding (MG)
13 Hand/Portable Powered Tools and Other Hand-held Equipment (HT)
14 Welding, Cutting and Brazing (WL)
15 Safety-related Work Practices (W


Process Improvement Dec - Feb
Plan for Next Round Mar - May
Assessment Jun - Sept
Post Assessment Review Oct - Nov
NOAA's Assessment Cycle

ATTACHMENT 5 – TIER III QUESTIONNAIRE

Assessor Name: _____ **Date:** _____
Office: _____
POC: _____ **Email:** _____
Phone: _____ **Fax:** _____

Facility Name: _____ **Date:** _____
Address: _____ **City:** _____ **ST:** _____ **Zip:** _____
POC: _____ **Email:** _____
Phone: _____ **Fax:** _____

NOTE: The purpose of this questionnaire is to survey Tier III facilities to ensure compliance with regulatory requirements. Additionally, this survey may be used to determine if any changes in the facility operations or expansion that would warrant a change in the facility status to a Tier I or Tier II assessment level.

Begin the Tier III assessment by reviewing the previously completed Facility Selection Criteria form (Attachment 2) with the facility.

QUESTION	Y	N	NA	Comment
1. GENERAL				
1.1. During the review of the previously completed Facility Selection Criteria form (Attachment 2), are there any changes made in the facility's response that would require a change in status to a Tier I or II level?				
1.2. Is NOAA the primary tenant at this location?				
1.3. Who is responsible for the operation, maintenance, and repairs of this facility?				
2. SAFETY & HEALTH PROGRAM				
2.1. Does the facility use hazardous chemicals (e.g., solvents, paints, cleaning supplies, and etc.)?				
2.1a. If yes, does the facility have a Hazard Communication Plan?				
2.2. Does the facility have an Occupant Emergency Plan?				
2.2a. If yes, has the facility conducted an evacuation and shelter in-place drills within the past year (DOC requirement)?				
2.3. For facility with 10 or more individuals, does the facility have a safety bulletin board? If yes, does the facility post the following information:				
2.3a. The OSHA 3165 "Job Safety and Health: It's the Law!" poster?				
2.3b. Report of Unsafe or Unhealthful Working Conditions forms (CD351).				
2.3c. The "Occupational Safety and Health Protection for NOAA Department of Commerce Employees" poster.				
2.4. For facility with 10 or more individuals, does the facility maintain OSHA 300 program records (i.e., log of work related injuries and illnesses)?				
2.5. Has the facility been conducting the monthly supervisor safety inspections?				
2.5a. If yes, were there any issues and have they been resolved?				
2.6. Has the facility been conducting the annual safety procedures review and/or safety inspections?				
2.6a. If yes, were there any issues?				
2.6b. Have the issues been resolved?				
3. ENVIRONMENTAL COMPLIANCE PROGRAM				
3.1. Does the facility manage used oil? If yes, how? (provide details in the comment column)				
3.2. Does the facility manage spent batteries? If yes, how? (provide details in the comment column)				
3.3. Does the facility manage spent fluorescent light bulbs? If yes, how? (provide details in the comment column)				
3.4. Does the facility manage its used electronic components (e.g., computers, monitors, IC boards, printers, and etc.)? If yes, how? (provide details in the comment column)				

Submit a completed copy to the NECSAS PM within 10 working days after completion.

The assessment team will consist of a team leader, assessors, and technicians, with the number of team members and composition of the team dependent on the size and complexity of the facility to be audited. In addition to the qualifications for individual team members listed below, the overall team must have experience in all media areas relevant to the facility being audited.

Team leader qualifications: A minimum of 10 years experience in environmental compliance or occupational health and safety, with at least 5 years experience in conducting EH&S assessments. At least a 4-year degree in a scientific discipline (e.g., general science/engineering, geology, chemistry, biology, or industrial hygiene). Courses or certified professional training in EH&S assessments may substitute for up to 2 years of the assessment experience requirement. Demonstrated project management experience, to include team coordination, scheduling, and budgeting. Demonstrated knowledge of Federal, state and local regulations relevant to the facility. Familiarity with the EPA and OSHA audit protocol.

Assessor qualifications: A minimum of 5 years experience in environmental compliance or occupational health and safety, with at least 2 years experience in conducting EH&S assessments. At least a 4-year degree in a scientific discipline (e.g., general science/engineering, geology, chemistry, biology, or industrial hygiene). Courses or certified professional training in EH&S assessments may substitute for up to 1 years of the assessment experience requirement. Demonstrated knowledge of Federal, state and local regulations relevant to the facility. Familiarity with the EPA and OSHA audit protocol.

Technician qualifications: A minimum of 2-years experience in environmental compliance or occupational health and safety. At least a 2-year degree in a scientific discipline (e.g., general science/engineering, geology, chemistry, biology, or industrial hygiene). Courses or certified professional training in EH&S assessments may substitute for up to 1 year of the assessment experience requirement.

All assessors must complete a 8-hour training course on the NECSAS program or have completed a NOAA assessment within the last 2 years. The NECSAS training course shall cover the following topics:

Day 1 - Morning

- **NOAAs Environmental Compliance and Safety Assessment System (NECSAS) Overview**
- **NECSAS Statistics**
- **NECSAS Process**
- **Regulatory Overview**

Day 1 - Afternoon

- **Root Cause Analysis**
- **Determining a Risk Assessment Code (RAC)**
- **Assessment Manager Overview**
- **Assessment Manager Functionality**
- **Practical Exercises**

ATTACHMENT 7

NOAA PRE-VISIT QUESTIONNAIRE: ENVIRONMENTAL PROGRAM

Facility Name: _____ **Date:** _____

Address: _____ **City:** _____ **ST:** _____ **Zip:** _____

POC: _____ **Email:** _____

Phone: _____ **Fax:** _____

NOTE: This questionnaire is to be filled out by the facility POC. The purpose of this questionnaire is to identify environmental issues and areas of focus for the environmental assessment.

PROTOCOL	Y	N	NA
GENERAL			
Does the facility have any environmental permits? If yes, what are they for? _____			
AIR EMISSIONS			
Does the facility have any incinerators? If yes, how many and what size? _____			
Does the facility have any diesel generators? If yes, how many and what size?_____			
Does the facility conduct any photographic processing?			
Is open burning conducted at the facility? If yes, what is burned? _____			
Does the facility have any painting operations? If yes, what kind of paint is used? _____			
Does the facility have any boilers? If yes, how many and what size? _____			
Does the facility maintain its own refrigeration/air conditioning systems, including vehicle air conditioners?			
Does the facility use any other fuel burning equipment (e.g., natural gas, heating oil, wood heaters, coal heaters, or used oil burners)? If yes, what type of equipment?_____			
Does the facility have any fuel dispensing pumps? If yes, what types of fuel are being dispensed?_____			
Does the facility have any other fueling operations? If yes, list other types_____			
Does the facility perform any activities that may cause fugitive emissions (e.g., odors, particulates, vapors)? If yes, what type?_____ _____			
Does the facility use any parts cleaners? If yes, what types and how many? _____			
Does the facility have any perchloroethylene dry cleaning operations?			
CULTURAL RESOURCES			
Does the facility have any buildings that are at least 45 years old? If yes, list the buildings and ages? _____			
Does the facility have any displays of historic memorabilia?			
Has the facility ever found/encountered any artifacts/grave sites/ etc?			

PROTOCOL	Y	N	NA
HAZARDOUS MATERIALS			
Is gasoline stored at the facility? If yes, what is the total quantity (tanks and other containers)? _____			
Is diesel stored at the facility? If yes, what is the total quantity (tanks and other containers)? _____			
Does the facility store hazardous materials outdoors? If yes, what is the total quantity and where are they stored? _____			
Are there any hazardous materials containers in poor condition? If yes, how many and where are they located? _____			
Does the facility store any solvents? If yes, what is the total quantity (tanks and other containers)? _____			
Does the facility notify the local fire department regarding hazardous materials stored on site?			
Does the facility have an up-to-date hazardous materials inventory?			
Does the facility have up-to-date Tier I/II Forms?			
HAZARDOUS WASTE			
Does the facility have a hazardous waste generator I.D. number? If yes, what is the number? _____			
What is the normal amount of hazardous waste generated in one month?_____			
Did the facility generate more than 100 kg (approx. 220 lbs.) of hazardous waste in one month in the past year? If yes how much?_____			
Did the facility generate more than 1000 kg (approx. 2200 lbs.) of hazardous waste in one month in the past year? If yes how much?_____			
What hazardous wastes are generated at the facility (e.g., shop rags, waste antifreeze, solvents, batteries, fuel, oil filters, other)? _____ _____ _____			
Are hazardous waste manifests kept at the facility for 3 years?			
Are any wastes managed as universal waste? If yes, which wastes? _____ _____ _____ _____			
NATURAL RESOURCES			
Does the facility have any erosion control problems?			
Does the facility have any wetlands			
Is the facility located in a coastal zone?			
Is the facility located on a floodplain?			
Does the facility have any endangered species on site? If yes, what? _____			

PROTOCOL	Y	N	NA
OTHER ENVIRONMENTAL ISSUES: NEPA			
Are there any current or proposed construction activities at the facility? If yes, what?_____			
OTHER ENVIRONMENTAL ISSUES: ENVIRONMENTAL NOISE			
Has the facility ever received a complaint about noise generating activities at the facility?			
OTHER ENVIRONMENTAL ISSUES: PROGRAM MANAGEMENT			
Does the facility have any unresolved consent orders, compliance agreements, notice of violations, or interagency agreements?			
PESTICIDES MANAGEMENT			
Does the facility have an Integrated Pesticide Management Program?			
Does anyone at the facility apply pesticides? If yes, list the pesticides? _____			
Does anyone at the facility apply restricted use pesticides? If yes, what? _____			
Is anyone at the facility a certified pesticide applicator?			
Does the facility have any contracts for pesticide application?			
Does anyone at the facility store, mix, or dispose of pesticides?			
PETROLEUM, OIL , LUBRICANT (POL) MANAGEMENT			
What is the capacity of the largest POL aboveground storage tank (AST) at the facility (including mobile tanks)? _____			
What is the total capacity for POL stored underground? _____			
What is the total capacity of POL storage aboveground (ASTs, container storage and/or mobile tanks)? _____			
How many POL storage areas, other than tanks, are at the facility and where are they located? _____			
Does the facility have a Spill Prevention, Control, and Countermeasures (SPCC) Plan? If yes is it current and accurate? _____			
Does the facility have a POL spill response team? If not, who responds to POL spills? _____			
Have there been any spills in the past or present? If yes, where and how much? _____			
How is used oil disposed of at the facility? _____			
Are spill kits available on site?			
Does the facility conduct spill response training?			
Does the facility use oil for dust suppression on roads?			
SOLID WASTE MANAGEMENT			
Does the facility dispose of solid waste through contracted pickup?			
Does the facility dispose of any solid waste onsite? If yes, what? _____			
Does the facility conduct any of the following regarding solid waste on site? • Collection			

PROTOCOL	Y	N	NA
• Transportation • Treatment • Processing • Waste tire collection Transfer • Composting • Recycling			
Does the facility have any old or closed landfills?			
Does the facility have any old or closed landfarms?			
Does the facility currently operate a landfill, landfarm and/or dump?			
STORAGE TANKE MANAGEMENT			
Does the facility have any underground storage tanks (USTs)? *(Do not include heating oil USTs in this list)* If yes, how many, what is their individual capacity and contents? Registration # Capacity Contents Location Installation Date _____ _____			
Does the facility have any aboveground storage tanks (ASTs)? If yes, how many, what is their individual capacity and contents? Registration # Capacity Contents Location Installation Date _____ _____			
Does the facility maintain monitoring and testing records for ASTs and USTs?			
Have any USTs been closed at the facility? If yes, where are the closure records located? _____			
Does the facility have any heating oil tanks? If yes are they ASTs or USTs and what is their capacity? _____			
TOXIC SUBSTANCES: PCBs			
Does the facility have any PCB transformers? If yes, how many and where are they located?_____			
Does the facility have any PCB capacitors? If yes, how many and where are they located?_____			
Does the facility have any PCB ballasts? If yes, how many and where are they located?_____			
Does the facility store or dispose of PCBs? If yes, where are the records maintained? _____			
TOXIC SUBSTANCES: ASBESTOS			
Does the facility have the results of any asbestos surveys conducted onsite?			
Has there been any asbestos remediation effort at the facility? If yes, when and where?_____ _____			

PROTOCOL	Y	N	NA
Has there been any disposal of Asbestos Containing Material (ACM)?			
Is there any ACM remaining at the facility?			
TOXIC SUBSTANCES: RADON			
Has a radon survey been conducted at the facility? If not, circle any one of the following that are located at the facility: • Day Care • Hospitals • Schools • Living Quarters			
TOXIC SUBSTANCES: LEAD BASED PAINT (LBP)			
If housing (pre-1978 for residential use) or child occupying facility is present, has a LBP survey been done?			
WASTEWATER MANAGEMENT			
Does the facility have any oil/water separators? If yes, how many and where are they located? _____ Are they operational? _____			
Does the facility have any wash racks? If yes, how many and where are they located?_____ Are they operational? _____			
Does the facility discharge wastewater to a wetland?			
Does the facility discharge to a septic field?			
Does the facility have a storm water discharge permit?			
Does the facility have a Storm Water Pollution Prevention Plan?			
Does the facility discharge to a local publicly owned treatment works (POTW)?			
Are there pretreatment/permit standards imposed upon the facility?			
Does the facility have any sumps? If yes, where do they discharge? _____			
Does the facility have a photographic lab? If yes, where does it discharge? _____			
Does the facility have a kitchen grease trap? If yes, where does it discharge? _____			
Does the facility have any monitoring/underground injection wells? If yes, where? _____			
Does the facility have any marine/aquatic facilities (e.g., dams, wharfs, and docks)?			
Does the facility conduct sludge disposal (including land application)?			
WATER QUALITY			
Does the facility get its drinking water from the local community?			
Does the facility own or operate a public drinking water supply system, which draws water from a source other than a well?			
Does the facility have an active drinking water supply well?			
Does the facility have an inactive drinking water supply well?			

ATTACHMENT 7
NOAA PRE-VISIT QUESTIONNAIRE: ENVIRONMENTAL PROGRAM

PROTOCOL	**Y**	**N**	**NA**
Does the facility have any groundwater monitoring wells? If yes, how many and where are they located? _____ Is monitoring data available at the facility?			
LOCAL REQUIREMENTS			
Are facility personnel aware of any more stringent local requirements applicable to any of the above topics? If yes, what are they_____			

ATTACHMENT 7

PREVISIT QUESTIONNAIRE: HEALTH & SAFETY PROGRAM

Facility Name: _____ **Date:** _____

Address: _____ **City:** _____ **ST:** _____ **Zip:** _____

POC: _____ **Email:** _____

Phone: _____ **Fax:** _____

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
INSPECTIONS CONDUCTED					
Are any internal inspections conducted (i.e. general work areas, equipment, fire extinguishers, etc.)?	LIST TYPES OF INSPECTIONS				
INSPECTIONS, CITATIONS, AND PROPOSED PENALTIES: (29 CFR 1903)					
Has the facility received any regulatory inspections, citations, or proposed penalties?					
OSHA 300 LOG/MEDICAL RECORDS: (29 CFR 1904)					
Are occupational injuries and illnesses recorded on a log?	Incident that results in a fatality or the hospitalization of three or more employees.				
Are employees medical and exposure records maintained or managed?	General industry, maritime, and construction employers				
WALKING/WORKING SURFACES AND GUARDING: (29 CFR 1922 AND 23)					
Are walking/working surfaces adequately managed *(i.e. floor loading marked, open pits, tanks, vats, and ditches provided with covers, safe clearances allowed where mechanical handling equipment is used, etc,.)?*	All permanent places of employment.				
Are all floor and wall openings guarded?	All permanent places of employment.				
LADDERS/ELEVATED PLATFORMS: (29 CFR 1910.24-28)					
Are there any fixed industrial stairs in the facility?	Includes interior and exterior stairs around machinery, tanks, and other equipment, and stairs leading to or from floors, platforms, or pits. This section does not apply to stairs used for fire exit purposes, to construction operations to private residences, or to articulated stairs, such as may be installed on floating roof tanks or on dock facilities, the angle of which changes with the rise and fall of the base support				
Are there any portable wood ladders used at the facility?	Applies to common types of portable wood ladders. Fruit picker's ladders, combination step and extension				

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
	ladders, stockroom step ladders, aisle-way step ladders, shelf ladders, and library ladders are not specifically covered by regulation.				
Are there any portable metal ladders used at the facility?					
Are there any fixed ladders in the facility?	"Fixed ladder." A fixed ladder is a ladder permanently attached to a structure, building, or equipment. . This does not apply to stairs used for fire exit purposes, to construction operations to private residences, or to articulated stairs, such as may be installed on floating roof tanks or on dock facilities, the angle of which changes with the rise and fall of the base support				
Is scaffolding used at the facility?					
MANUALLY PROPELLED MOBILE LADDERS AND SCAFFOLDS (TOWERS): (29 CFR 1910.29)					
Are manually propelled mobile ladder stands or scaffolds used at the facility?	Mobile work platforms (including ladder stands but not including aerial ladders) and rolling (mobile) scaffolds (towers) Manually propelled mobile scaffold - A portable rolling scaffold supported by casters				
Are other working surfaces located in or used at the facility?	Portable and powered dock boards (bridge plates), forging machines, aisles used by employees for bringing and removing materials, steam vats.				
MEANS OF EGRESS/EMERGENCY PLANS: (29 CFR 1910.36-38)					
Have exits been designated as "emergency exits"?	Applicable to all facilities				
Are all designated emergency exits labeled and accessible?					
Are employee emergency and fire prevention plans in place?					
VEHICLE-MOUNTED WORK PLATFORMS (AERIALS): (29 CFR 1910.67)					
Are vehicle-mounted elevating and rotating work platforms used at the facility? *(i.e. aerial lifts)*	"Aerial device." Any vehicle-mounted device, telescoping or articulating, or both, which is used to position personnel.				
NOISE EXPOSURE: (29 CFR 1910.95)					
Is an occupational noise exposure program in place? *A common area that triggers this requirement is a generator and/or compressor room.*	Whenever employee noise exposures equal or exceed an 8-hour time-weighted average sound level (TWA) of 85 decibels measured.				
Has noise monitoring been conducted anywhere in the facility?					

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
Are there any areas in the facility where personnel need to raise their voices to talk over noise in the area?					
Do employees voluntarily wear hearing protection, or is hearing protection required for any areas in the facility?					
COMPRESSED GAS/FLAMMABLE LIQUIDS/HIGHLY HAZARDOUS CHEMICALS: (29 CFR 1910.101, 106, 107, 119)					
Are compressed gases used/stored at the facility?					
Are flammable/combustible liquids stored/used at the facility?					
Are spray-finishing operations that use flammable/combustible materials conducted at the facility? (i.e. paint booths)					
Are highly hazardous chemicals used at the facility?					
HAZARDOUS WASTE/EMERGENCY RESPONSE (HAZWOPER): (29 CFR 1910.120)					
Are employees involved in hazardous waste operations?	Employees who engage in any of the following: Hazardous waste operations under the Comprehensive Environmental Response Compensation and Liability Act, including any initial investigations of the site prior to identification of exposures. Corrective actions involving cleanup conducted under Resource Conservation and Recovery Act. Operations at State or local government designated hazardous waste sites Operations involving hazardous waste storage, treatment, and disposal facilities regulated by 40 CFR 264 and 265 pursuant to the Resource Conservation and Recovery Act. Emergency response operations at any workplace when there has been a release or a substantial threat of a release of hazardous substances				
PERSONAL PROTECTIVE EQUIPMENT (PPE): (29 CFR 1910.132-138)					
Is PPE worn by employees?	Protective equipment, including personal protective equipment for eyes, face, head, and extremities, protective clothing, respiratory devices, and protective shields and barriers				
Is respiratory protection worn by employees, either by policy or voluntarily?					
Is head protection (i.e. hard hats) used by	Employees that works in areas where				

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
employees?	there is a potential for injury to the head from falling objects or electrical contact.				
Do employees wear protective footwear (i.e. safety shoes/boots)?					
SANITATION: (29 1910.141)					
Are efforts taken to ensure the workplace is well-kept and good housekeeping is maintained (i.e. trash emptied regularly, storage rooms kept orderly, offices and workplaces free of clutter, etc.)?	Permanent places of employment All places of employment shall be kept clean to the extent that the nature of the work allows To facilitate cleaning, every floor, working place, and passageway shall be kept free from protruding nails, splinters, loose boards, and unnecessary holes and openings				
PHYSICAL HAZARD WARNINGS/SIGNS: (29 CFR 1910.144, 145)					
Are physical hazards color coded?	Physical hazards include flammable storage cans, stop bars, buttons, switches, and tripping, slipping, and falling hazards.				
Are accident prevention signs and tags utilized in the facility where there are hazards or potential hazards to employees?					
CONFINED SPACES: (29 CFR 1910.146)					
Are there any confined spaces in the facility?	"Confined space" means a space that: Is large enough and so configured that an employee can bodily enter and perform assigned work; and Has limited or restricted means for entry or exit (for example, tanks, vessels, silos, storage bins, hoppers, vaults, and pits are spaces that may have limited means of entry.); and Is not designed for continuous employee occupancy				
Are there any permit-required confined spaces in the facility?	Permit-required confined space (permit space)":A confined space that has one or more of the following characteristics Contains or has a potential to contain a hazardous atmosphere Contains a material that has the potential for engulfing an entrant Has an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor which slopes downward and tapers to a smaller cross-section; or				

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
	Contains any other recognized serious safety or health hazard				
LOCKOUT/TAGOUT: (29 CFR 1910.147)					
Is there a program for the control of hazardous energy?	Servicing and maintenance of machines and equipment in which the **unexpected** energization or start up of the machines or equipment, or release of stored energy could cause injury to employees (**Energy source.** Any source of electrical, mechanical, hydraulic, pneumatic, chemical, thermal, or other energy)				
FIRST AID/EMERGENCY RESPONSE (includes emergency shower/eyewash requirements): (29 1910.151)					
Is there first aid available for employees either in-house, or by outside emergency medical responders?	In the absence of an infirmary, clinic, or hospital in near proximity to the workplace which is used for the treatment of all injured employees, a person or persons shall be adequately trained to render first aid. Adequate first aid supplies shall be readily available. Where the eyes or body of any person may be exposed to injurious corrosive materials, suitable facilities for quick drenching or flushing of the eyes and body shall be provided within the work area for immediate emergency use.				
FIRE PROTECTION/EMPLOYEE ALARM SYSTEM: (29 CFR 1910.157-159, 164, 165)					
Are portable fire extinguishers available in the workplace?					
Are employees trained/designated/expected to use fire extinguishers during a fire?	Exemption: Where the employer has established and implemented a written fire safety policy which requires the immediate and total evacuation of employees from the workplace upon the sounding of a fire alarm signal and which includes an emergency action plan and a fire prevention plan which meet the requirements of 29 CFR 1910.38 and 29 CFR 1910.39 respectively, and when extinguishers are not available in the workplace				
Is the facility equipped with standpipe and hose systems?	Applies to all small hose, Class II, and Class III standpipe systems installed to meet the requirements of a particular OSHA standard. Exception. This section does not apply to Class I standpipe systems				
Is the facility equipped with an automatic sprinkler system?	All automatic sprinkler systems installed to meet a particular OSHA standard.				

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
Is the facility equipped with a fire detection system?	All fire detection systems installed to meet a particular OSHA standard				
Is the facility equipped with an employee alarm system (if no, review checklist for applicability determination)	Applies to all emergency employee alarms installed to meet a particular OSHA standard. This requirement does not apply to those discharge or supervisory alarms required on various fixed extinguishing systems or to supervisory alarms on fire suppression, alarm or detection systems unless they are intended to be employee alarm systems				
COMPRESSED AIR: (29 CFR 1910.169)					
Is compressed air used in the facility?					
MATERIALS HANDLING: (29 CFR 1910.176)					
Materials handling and storage	Where mechanical handling equipment is used Material storage and storage areas				
FORKTRUCKS/CRANES: (29 CFR 1910.178, 179, 184)					
Are powered industrial trucks (forklifts) used at the facility?					
Are employees trained on forktruck operations?					
Are there any overhead or gantry cranes at the facility?					
Are slings used at the facility?	Applies to slings used in conjunction with other material handling equipment for the movement of material by hoisting				
MACHINE GUARDING: (29 CFR 1910.212, 215, 217, 219, 242, 243, 244)					
Are any machines used at the facility that pose hazards to employees such as those created by point of operation, nip points, rotating parts, and flying chips and sparks?	All machinery that poses a hazard to employees.				
Is any of the following equipment used at the facility? - Abrasive wheel machinery - Mechanical power presses - Mechanical power transmissions - Hand or portable powered tools and equipment - Abrasive blast cleaning nozzles					
WELDING: (29 CFR 1910.252, 253)					
Are welding (including oxygen-gas, arc and resistance), cutting, or other hot work operations conducted at the facility?					
ELECTRICAL: (29 CFR 1910.303, 304, 305, 307, 332, 334)					
Is any of the following electrical equipment or					

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
locations used or present at the facility? - spliced wiring - electrical equipment that ordinarily produces arcs, sparks flames, or molten metal - any areas where electrical equipment that operates at 50 volts or greater - over-current devices Circuit breakers - electrical pull boxes and junction boxes - extension/temporary electrical cords or cables					
Do employees conduct electrical work (i.e. repairs, wiring, etc)?	The training requirements apply to employees who face a risk of electric shock that is not reduced to a safe level by electrical installation requirements.				
AIR CONTAMINANTS/ASBESTOS: (29 CFR 1910.1000, 1001)					
Have hazardous air contaminants been monitored for in the workplace?					
Does the facility contain asbestos-containing materials?					
BLOODBORNE PATHOGENS: (29 CFR 1910.1030)					
Are any employees exposed (occupational exposure) to blood or other potentially infectious materials?	**Occupational Exposure** means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties				
HAZARD COMMUNICATION/RIGHT TO KNOW: (29 CFR 1910.1200)					
Are hazardous chemicals used in the workplace?	Applies to any chemical which is known to be present in the workplace in such a manner that employees may be exposed under normal conditions of use or in a foreseeable emergency				
Are Material Safety Data Sheets (MSDSs) maintained for all hazardous chemicals?					
Is there a written Hazard Communication Program (HAZCOM) at the facility?					
RADIATION: IONIZING (10 CFR 20); NONIONIZING (29 CFR 1910.97)					
Are sources of ionizing or non-ionizing radiation located in the facility?					
ABRASIVE BLAST OPERATIONS AND VENTILATION: (29 CFR 1910.94)					
Is abrasive-blast operation conducted at the facility equipped with ventilation systems?					
DIP TANKS: (29 CFR 1910.108)					
Are dip tanks used at the facility?	Examples of covered operations are				

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
	paint dipping, electroplating, pickling, quenching, tanning, degreasing, stripping, cleaning, roll coating, flow coating, and curtain coating.				
TOXIC AND HAZARDOUS SUBSTANCES:					
Are there any sources of lead, cadmium, or benzene in the facility?	Not applicable to fuels				
FALL PROTECTION: (29 CFR 1926.502)					
Do employees work in or required to climb to elevated areas?					
Is there a fall protection program in place?					
TRAINING:					
Is training conducted for employees?	*LIST TYPES OF TRAINING*:				

Facility Name: _____ **Date:** _____
Address: _____ **City:** _____ **ST:** _____ **Zip:** _____
POC: _____ **Email:** _____
Phone: _____ **Fax:** _____ **Team Letter:** _____

PROTOCOL	Y	N	NA
ABOVEGROUND STORAGE TANK			
Do all bulk aboveground storage tanks (capacity of 600 gallons or greater) have secondary means of containment for the entire contents of the largest single tank plus sufficient freeboard to allow for precipitation? (ST.5.1.TEAM)			
Are diked areas impervious enough to contain spilled POL? (ST.5.1.TEAM)			
Is the secondary containment area free of cracks, erosion, animal burrows, and vegetation growth? (ST.5.1.TEAM)			
Are valves kept closed when not in use? (ST.5.1.TEAM)			
Are periodic leak tests conducted? (ST.5.4.TEAM)			
Is a written log kept of the leak testing? (ST.5.4.TEAM)			
ENVIRONMENTAL DOCUMENTATION. Does the facility maintain any of the following environmental documents?			
SPCC Plan (PO.5.2.TEAM; See SPCC Plan questionnaire for requirements)			
Hazardous materials inventory? (HM.30.1.TEAM, HM.30.2.TEAM)			
Does the facility have records of pesticides being applied at their facility? (state callout)			
If facility personnel are performing the application, is there a copy of the applicator certification for review? (state callout, PM.5.1.TEAM)			
Does the facility have any air emissions permits (A.1.2.TEAM)? Date(s) of permit(s)? Is there any special permit monitoring requirements? Do monitoring records indicate compliance?			
If asbestos is present, does the facility have an Asbestos Operation and Maintenance Plan? (check state callouts)			
If lead-based paint (LBP) is present, does the facility have a LBP Management Plan? (check state callouts and T4.10.1 and .2.TEAM)			
UST and AST permits (See state specific regulations and Storage Tank questionnaire for requirements)			
NPDES and wastewater discharge permits (WA.10.1.TEAM and WA.10.2.TEAM)			
If the facility treats its own drinking water, are there monitoring records? Do monitoring records indicate compliance? (check state/local callouts and WQ.15.1 through .3.TEAM)			
Hazardous waste USEPA identification number (HW.20.2.TEAM and HW.55.2.TEAM)			
Hazardous waste manifests (HW.20.4.TEAM and HW.55.5.TEAM; See Hazardous Waste questionnaire for requirements)			
Installation environmental SOPs/correspondence?			
Other local, state, or Federal environmental regulations?			

PROTOCOL	Y	N	NA
HAZARDOUS WASTE MANAGEMENT			
GENERAL			
Does the facility have any ongoing or unresolved consent orders, compliance agreements, notices of violation, interagency agreements, or equivalent enforcement actions pertaining to hazardous waste management? (HW.1.1.TEAM)			
Does the facility determine if generated wastes, including the following, are hazardous and handle them accordingly? (HW.10.1.TEAM) • Oily Rags ……... • Rags contaminated with solvents……... • Waste solvents/tank filters……. • Fluorescent light bulbs……...…… • Antifreeze……... • Paint-related waste……. • Oil filters (terne coating)…… • Fuel filters…….. • Solvent tank filters……. • Lead acid batteries……. • Alkaline batteries……... • Cadmium, NiCd, lithium, or magnesium batteries…… • Mixed waste fuels…….. • Waste oil…… • Aerosol cans…….. • Oil/water separator sludge……. • Contaminated/Used floor dry/absorbent…….…….. • Photo lab waste…….. • Excess hazardous materials when declared a waste……...			
Does the facility have a designated individual responsible for the hazardous waste storage area and is he/she aware of his/her responsibilities? (HW.1.2.TEAM)			
Do facilities transporting hazardous waste meet the following requirements? (HW.100.1.TEAM through HW.100.5.TEAM) • USEPA transporter identification number • Transport hazardous waste to an USEPA approved facility • Personnel trained to transport hazardous waste • Have established procedures for transporting hazardous waste and maintaining required records			
Does the facility have a permit to operate as a TSDF and does it operate within the permit requirements? (HW.105.1.TEAM)			
CONDITIONALLY EXEMPT SMALL QUANTITY GENRATOR			
Facility produces less than 100 kilograms (220 pounds) of hazardous waste or 1 kilogram (2.2 pounds) or less of acutely hazardous waste per month. (HW.15.1.TEAM)			

PROTOCOL	Y	N	NA
Do facility personnel have training in hazardous waste handling and management with annual update? (HW.10.2.)			
Does the facility maintain up to date hazardous waste management records, including the following? • Training records (retain for 3 years) (HW.15.3.TEAM) • Installation environmental SOPs/correspondence			
Does the facility handle containers previously holding hazardous waste as hazardous waste until they are RCRA empty? (HW.15.4.TEAM)			
Does the facility have a designated hazardous waste storage area (HW.15.6.TEAM) and is it properly managed, including the following? • Adequate isle spacing (30 in.) (HW.15.5.TEAM) • Stacking not exceeding 2 drums in height (HW.15.5.TEAM)			
Does the facility offer hazardous waste to transporters or TSDFs not having an USEPA identification number? (HW.15.1.TEAM)			
SMALL QUANTITY GENERATOR			
Facility produces between 1,000 kilograms (2205 pounds) and 100 kilograms (220 pounds) of hazardous waste or 1 kilogram (2.2 pounds) or less of acutely hazardous waste per month. (HW.20.1.TEAM)			
Do facility personnel have training in hazardous waste handling and management with annual update? (HW.25.1.TEAM)			
Does the facility maintain up to date hazardous waste management records, including the following? • Training records (retain for 3 years) (HW.25.2.TEAM) • Manifests (retain for 3 years) (HW.20.4.TEAM) • Emergency/Contingency plan (HW.20.5.TEAM) • Inspection logs (HW.40.3) • Installation environmental SOPs/correspondence			
Does the facility have an USEPA identification number? (HW.20.2.TEAM)			
Is the onsite accumulation time of hazardous waste less than 180 days (or 270 days if waste is transported greater than 200 miles to a TSDF)? (HW.20.1.TEAM)			
Does the facility accumulate greater than 6,000 kilograms (13,227.73 pounds) of waste on site? (HW.20.1.TEAM)			
Does the facility have an emergency response plan and coordinator, with the following information posted adjacent to the telephone? (HW.20.5.TEAM) • Name and telephone number of emergency coordinator • Location of fire extinguishers and spill control materials • Location of fire alarms (if present) • Telephone number of the fire department			
Does the facility handle containers previously holding hazardous waste as hazardous waste until they are RCRA empty? (HW.30.1.TEAM)			
Does the facility maintain satellite accumulation points meeting the			

PROTOCOL	Y	N	NA
following requirements? • Up to 55 gallons of hazardous waste or 1 quart of acutely hazardous waste (HW.35.1.TEAM) • At or near the point of generation (HW.35.1.TEAM) • Containers are in good condition and closed when not adding or removing waste (HW.35.1.TEAM) • Containers are labeled as HAZARDOUS WASTE or with other words identifying the contents (HW.35.1.TEAM) • Containers securely closed (HW.30.4.TEAM)			
Does the hazardous waste storage area meet the following requirements? • Containers in good condition and not leaking (HW.30.2.TEAM) • Containers properly labeled (HW.20.1.TEAM) • Containers securely closed (HW.30.4.TEAM) • Adequate isle spacing (HW.40.2.TEAM) • Stacking not exceeding 2 drums in height (HW.30.6.TEAM) • Internal communication or alarm system (HW.40.2.TEAM) • Telephone or two-way radio (HW.40.2.TEAM) • Fire extinguisher and special extinguishing equipment (HW.40.2.TEAM) • Spill control equipment (HW.40.2.TEAM) • Decontamination equipment (HW.40.2.TEAM) • Fire hydrants or other sources of water of adequate volume and pressure, foam producing equipment, automatic sprinklers or water spray systems (HW.40.2.TEAM).			
Does the facility conduct weekly inspections of the container storage area and maintain verification records? (HW.40.3.TEAM)			
Does the facility keep records of hazardous waste activity for 3 years, including the following? (HW.20.4.TEAM) • Manifests • Exception reports • Test results, waste analysis, and determination			
Does the facility offer hazardous waste to transporters or TSDFs not having an USEPA identification number? (HW.20.3.TEAM)			
Does the facility utilize manifests containing the following information? (HW.20.4.TEAM) • Generator mailing address, phone number, and USEPA identification number • Transporter name and USEPA identification number • TSDF site address and USEPA identification number • Signed and dated by generator, transporter, and TSDF • Quantity and type of hazardous waste transported • Returned copy • Land ban form			

PROTOCOL	Y	N	NA
LARGE QUANTITY GENERATOR			
Facility produces 1,000 kilograms (2205 pounds) or greater of hazardous waste or 1 kilogram (2.2 pounds) or greater of acutely hazardous waste per month. (HW.55.1.TEAM)			
Do facility personnel have training in hazardous waste handling and management with annual update? (HW.60.1.TEAM)			
Does the facility maintain up to date hazardous waste management records, including the following? • Training records (retain for 3 years) (HW.60.2.TEAM for LQGs) • Manifests (retain for 3 years) (HW.55.5.TEAM\) • Emergency/Contingency plan (\ HW.65.1.TEAM\) • Inspection logs (HW.80.3.TEAM for LQGs) • Installation environmental SOPs/correspondence			
Does the facility have an USEPA identification number? (HW.55.2.TEAM)			
Is the onsite accumulation time of hazardous waste less than 90? (HW.55.1.TEAM)			
Does the facility submit a biennial report to the regional administrator by March 1of even numbered years? And are copies retained for 3 years? (HW.55.4.TEAM)			
Does the facility have a contingency plan and emergency coordinator? (HW.65.1.TEAM and HW.65.2.TEAM)			
Does the facility handle containers previously holding hazardous waste as hazardous waste until they are RCRA empty? (HW.70.1.TEAM)			
Does the facility maintain satellite accumulation points meeting the following requirements? (HW.75.1.TEAM) • Up to 55 gallons of hazardous waste or 1 quart of acutely hazardous waste (HW.75.1.TEAM) • At or near the point of generation (HW.75.1.TEAM) • Containers are in good condition and closed when not adding or removing waste (HW.75.1.TEAM) • Containers in good condition and not leaking (HW.70.2.TEAM) • Wastes compatibly stored (HW.70.5.TEAM) • Containers are labeled as HAZARDOUS WASTE or with other words identifying the contents (HW.75.1.TEAM)			
Does the hazardous waste storage area meet the following requirements? • Containers in good condition and not leaking (HW.70.2.TEAM) • Containers properly labeled (HW.55.1.TEAM) • Containers securely closed (HW.70.4.TEAM) • Wastes compatibly stored (HW.70.5.TEAM) • Adequate isle spacing (HW.80.4.TEAM) • Stacking not exceeding 2 drums in height (HW.70.6.TEAM) • Internal communication or alarm system (HW.80.4.TEAM) • Telephone or two-way radio (HW.80.4.TEAM)			

PROTOCOL	Y	N	NA
• Fire extinguisher and special extinguishing equipment (HW.80.4.TEAM) • Spill control equipment (HW.80.4.TEAM) • Decontamination equipment (HW.80.4.TEAM) • Fire hydrants or other sources of water of adequate volume and pressure, foam producing equipment, automatic sprinklers or water spray systems (HW.80.4.TEAM)			
Does the facility have a written plan and schedule for container inspection and monitoring requirements? (HW.70.10.TEAM)			
Does the facility conduct weekly inspections of the container storage area and maintain verification records? (HW.80.3.TEAM)			
Does the facility keep records of hazardous waste activity for 3 years, including the following? (HW.55.5.TEAM and HW.55.6.TEAM) • Manifests • Exception reports • Test results, waste analysis, and determination			
Does the facility offer hazardous waste to transporters or TSDFs not having an USEPA identification number? (HW.55.3.TEAM)			
Does the facility utilize manifests containing the following information? (HW.55.5.TEAM) • Generator mailing address, phone number, and USEPA identification number • Transporter name and USEPA identification number • TSDF site address and USEPA identification number • Signed and dated by generator, transporter, and TSDF • Quantity and type of hazardous waste transported • Returned copy • Land ban form			
SPILL PREVENTION CONTROL AND COUNTERMEASURES (SPCC) PLAN			
Does the facility store, transport, or dispense petroleum (POL) products? If yes, do the quantities and/or capacities (including mobile storage tanks) of POL exceed: A. 42,000 gallons of underground buried storage capacity? B. 1,320 gallons of total aboveground storage capacity? C. A release can reasonably expected to reach US navigable water? If yes to "A and C" or "B and C", a Federally required SPCC Plan is necessary. (PO.5.1.TEAM). Otherwise, an SPCC plan is not required.			
Does the Federally required SPCC Plan meet the following? • It is present at the facility (or at the nearest manned facility if personnel are not on site for 8 hours per day)? (PO.5.6.TEAM) • Is the SPCC Plan amended within 6 months of any material change in the facility design, construction, operations, or maintenance that alters the			

PROTOCOL	Y	N	NA
potential for an oil spill? (PO.5.4.TEAM) • It is reviewed at least once every five years or when there is a significant discharge of oil (PO.5.3.TEAM and PO.5.4.TEAM) • The SPCC Plan is certified? (PO.5.5.TEAM) • It contains general information about the facility, including: (PO.5.2.TEAM) – Name, type of function, location of drainage patterns, location maps; – Name and title of designated coordinator; – Inventory of all storage, handling, and transfer facilities that could produce a significant spill, including predictions of direction and rate of flow and total quantities of POL that could be spilled as a result of a major failure. • It has the Designated Responsible Official (DRO) approval (including a signature page for review and concurrence when a change in DRO takes place); (PO.5.2.TEAM) • It contains specific information on: (PO.5.2.TEAM) – Spill reporting procedures; – Pre-spill planning for major potential spill areas; – Spill containment and cleanup equipment/facilities (including locations); – Training procedures; – Spill response exercises; – Plan review and update procedures; – Security measures; – Inspection procedures; – Tank integrity testing procedures.			
UNIVERSAL WASTE			
Does the facility handle universal waste (batteries, pesticides, and other state designated wastes)?			
Does the facility dispose of universal waste on site? (HW.280.1.TEAM)			
Is universal waste accumulated for more than one year from the date the waste is generated or received from another generator? (HW.280.2.TEAM)			
Are accumulation start dates documented? (HW.280.2.TEAM)			
Are batteries that show evidence of leakage, spillage, or damage that could cause leakage contained in a container? (HW.290.1.TEAM)			
Are the containers of universal waste closed, compatible with their contents, and generally in good condition? (HW.290.1.TEAM, HW.290.3.TEAM, HW.290.4.TEAM)			
Are containers of universal waste adequately labeled? (HW.310.1.TEAM)			
Have employees been trained in the proper handling and emergency response procedures? (HW.300.1.TEAM)			
Does the facility send or take universal waste to anyplace other than another universal waste handler or a destination facility? (HW.330.1.TEAM)			
Has the universal waste being offered for offsite shipment been characterized to			

PROTOCOL	Y	N	NA
determine if it is a hazardous waste? (HW.10.1.TEAM)			
UNDERGROUND STORAGE TANK			
For USTs installed after December 22, 1998:			
Does the UST have leak detection that: (ST.60.1.TEAM) • Can detect a leak from any portion of the tank or its piping that routinely contains petroleum? • Is installed, calibrated, operated, and maintained in accordance with the manufacturer's instructions?			
Is monthly monitoring conducted using one of the following methods: (ST.65.1.TEAM) • Interstitial monitoring? • Automatic tank gauging? • Monitoring for vapors in the soil? • Monitoring for liquids on the groundwater? • Statistical inventory reconciliation? • Other methods approved by the regulatory authority?			
Is the temporary method of inventory control (i.e. daily measurements of tank contents and recording deliveries and amount pumped) combined with tank tightness testing (conducted every five years) being used? (ST.65.1.TEAM)			
For USTs with a capacity of 1,000 gallons or less, is manual tank gauging used as a leak detection method? (ST.65.1.TEAM)			
For USTs with a capacity of between 2,000-1,001 gallons, is manual tank gauging used in conjunction with tank tightness testing as a leak detection method? (ST.65.1.TEAM)			
Does the UST receive more than 25 gallons of liquid at a time? If yes, does the UST have a catchment basin/spill protection? (ST.35.1.TEAM)			
Does the UST have overfill protection consisting of one of the following: (ST.35.1.TEAM) • An automatic shutoff device? • An overfill alarm? • A ball float valve?			
Does the UST match one of the following: (ST.35.3.TEAM) • Tank and piping completely made of non-corrodible material, such as fiberglass? • Tank and piping made of steel having a corrosion-resistant coating and having cathodic protection? • Tank made of steel clad with a thick layer of non-corrodible material?			
If the tank contains a non-POL substance, does the UST have secondary containment consisting of one of the following: (ST.70.2.TEAM) • Double-walled tanks? • A concrete vault surrounding the UST? • A liner around the UST liner that cannot be penetrated by the hazardous substance?			

PROTOCOL	Y	N	NA
If the tank contains a non-POL substance, does the UST have interstitial monitoring able to indicate the presence of a leak in the confined space between the first and second wall of the UST system? (ST.70.2.TEAM)			
Does the UST have pressurized piping? If yes, does the piping have devices that automatically shut off or restrict flow or have an alarm that indicates a leak? (ST.70.1.TEAM)			
Is either annual tightness testing of the piping conducted or is one of the following monthly methods used: (ST.65.1.TEAM) • Interstitial monitoring? • Vapor monitoring? • Groundwater monitoring? • Statistical inventory reconciliation? • Other approved methods?			
For USTs installed before December 22, 1988			
Does the UST have leak detection that: (ST.60.1.TEAM) • Can detect a leak from any portion of the tank or its piping that routinely contains petroleum? • Is installed, calibrated, operated, and maintained in accordance with the manufacturer's instructions?			
Is monthly monitoring conducted using one of the following methods: (ST.65.1.TEAM) • Interstitial monitoring? • Automatic tank gauging? • Monitoring for vapors in the soil? • Monitoring for liquids on the groundwater? • Statistical inventory reconciliation? • Other methods approved by the regulatory authority?			
Is the temporary method of inventory control (i.e. daily measurements of tank contents and recording deliveries and amount pumped) combined with tank tightness testing (conducted every five years) being used? (ST.65.1.TEAM) Has it been used for longer than 10 years after the tank was upgraded? (ST.65.1.TEAM)			
If the tank has not been upgraded, is manual tank gauging and annual tank tightness testing used as a leak detection method? (ST.65.1.TEAM)			
Will the UST be upgraded with spill and overfill protection by December 1998? (ST.25.1.TEAM)			
Will the UST have corrosion protection by December 1998? (ST.25.1.TEAM)			
Are tank filling procedures followed that prevent spills? (ST.45.1.TEAM)			
If the UST contains a non-POL substance does the UST meet leak detection requirements by: (ST.25.1.TEAM) • Utilizing any of the leak detection methods described above for existing tanks?			

PROTOCOL	Y	N	NA
• Meeting secondary containment and interstitial monitoring requirement?			
Is the piping steel? If yes, does it have cathodic protection? (ST.25.1.TEAM)			
Releases From USTs			
Has there been a suspected release?			
Were steps taken to confirm if the suspected release was an actual leak? (ST.80.2.TEAM)			
Has there been a confirmed release?			
Was immediate action taken to stop and contain the release? (ST.80.3.TEAM)			
Was the release of a reportable quantity reported to the regulatory agency within 24 hours? (ST.80.1.TEAM)			
If the release was a hazardous substance release, was it reported to the National Response Center?			
Was it determined how far the petroleum has moved and recovery of the leaked petroleum begun? (ST.80.4.TEAM) Was any information collected and progress reported to the regulatory authority within 20 days after confirming the release? (ST.80.4.TEAM)			
Was the extent of the contamination determined and reported to the regulatory authority? (ST.80.7.TEAM)			
Was a plan to clean up the site submitted? (see state callouts)			
If requested by the regulatory authority, was a Corrective Action Plan developed and submitted? (see state callouts)			
Were the approved steps implemented? (see state callouts)			
UST Repairs			
Has the UST been repaired?			
Was the UST inspected internally or tightness tested within 30 days of the repairs? (ST.50.2.TEAM) Or was one of the monthly leak detection monitoring methods implemented within 30 days? (ST.50.2.TEAM)			
Was the cathodic protection tested with six months of repair? (ST.50.2.TEAM)			
Closing USTs			
Have the UST been temporarily closed for longer than 12 months? (ST.95.1.TEAM)			
Has the leak detection and corrosion protection systems been maintained and monitored during the temporary closure? (ST.95.1.TEAM)			
If the UST has been temporarily closed for more than three months, are the vent lines open and all other lines, pumps, man-ways, and ancillary equipment capped and secured? (ST.95.1.TEAM)			
Was it determined if contamination from the UST was present in the surrounding environment? (ST.95.3.TEAM)			
Was the tank emptied and cleaned? (ST.95.3.TEAM)			
Was the regulatory authority notified 30 days prior to permanently closing the			

PROTOCOL	Y	N	NA
UST? (ST.95.2.TEAM)			
UST Recordkeeping			
Are the following records available • Record of leak detection performance and maintenance including monitoring results, the most recent tightness test, performance claims provided by leak detection manufacturers, and records of recent maintenance, repair, and calibration of on-site leak detection equipment? (ST.90.2.TEAM) • Records showing required inspections and tests of the corrosion protection system? (ST.90.2.TEAM) • Records of repairs and upgrades? (ST.90.2.TEAM) • Site assessment results after closing a UST, kept for three years? (ST.95.7.TEAM)			
WASTE WATER MANAGEMENT			
Does the facility have any ongoing or unresolved consent orders, compliance agreements, notices of violation, interagency agreements, or equivalent enforcement actions pertaining to wastewater management? (WA.1.1.TEAM)			
Does the facility have a state or Federal NPDES permit? If yes for discharges, is the facility meeting the permit requirements? (WA.10.1.TEAM, WA.10.2.TEAM and applicable state requirements)			
Does the facility have a storm water discharge permit? If yes, is the facility meeting the permit requirements? (WA.10.3.TEAM)			
Do facility personnel perform industrial or construction activities that result in the discharge of wastewater or contaminated storm water without a permit? (WA.10.4.TEAM)			
Does the facility own or operate any of the following? • Underground injection wells • Monitoring wells • Wash racks • Oil/water separators • Grease traps • Photographic labs • Septic systems (active or inactive) •			
Does the facility have any unpermitted wastewater discharges, including the following sources? (WA.10.3.TEAM, and WA.85.1.TEAM) • Underground injection wells • Wash racks • Oil/water separators • Grease traps • Photographic labs • Septic systems • Floor drains			

PROTOCOL	Y	N	NA
Does the facility discharge to a POTW/FOTW? If yes, are the following requirements met? (WA.25.1.TEAM through WA.25.9.TEAM) • No discharge of pollutants that could cause pass through or interference of the POTW/FOTW • Discharges meet POTW/FOTW pretreatment standards • Facility meets POTW/FOTW reporting requirements • Immediate notification of any discharge that could cause a problem to the POTW/FOTW			
Does the facility own or operate a wastewater treatment plant? If yes, are the following requirements met? (state requirements) • Personnel operating the plant are trained and certified • Staff are trained in safety and occupational health • Operation logs and records are maintained			
Do facility personnel perform sludge disposal including land application? (WA.105. through WA.135. of the TEAM Guide)			
Does the facility discharge wastewater to wetlands? (WA.10.1.TEAM and applicable state requirements)			

ATTACHMENT 9 – NOAA SAFETY ASSESSMENT CHECKLIST
Version 2 – August 2002

Facility Name: _____ **Date:** _____
Address: _____ **City:** _____ **ST:** _____ **Zip:** _____
POC: _____ **Email:** _____
Phone: _____ **Fax:** _____ **Team Letter:** _____

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
INSPECTIONS CONDUCTED					
Are any internal inspections conducted (i.e. general work areas, equipment, fire extinguishers, etc.)?	LIST TYPES OF INSPECTIONS • Fire extinguishers, safety shower eyewashes, lab inspections.				
INSPECTIONS, CITATIONS, AND PROPOSED PENALTIES: (29 CFR 1903)					
Has the facility received any regulatory inspections, citations, or proposed penalties?					
OSHA 300 LOG/MEDICAL RECORDS: (29 CFR 1904)					
Are occupational injuries and illnesses recorded on a log?	• Incident that results in a fatality or the hospitalization of three or more employees.				
Are employees medical and exposure records maintained or managed?	• General industry, maritime, and construction employers				
WALKING/WORKING SURFACES AND GUARDING: (29 CFR 1910.22 AND 23)					
Are walking/working surfaces adequately managed *(i.e. floor loading marked, open pits, tanks, vats, and ditches provided with covers, safe clearances allowed where mechanical handling equipment is used, etc,.)?*	• All permanent places of employment.				
Are all floor and wall openings guarded?	• All permanent places of employment.				
LADDERS/ELEVATED PLATFORMS: (29 CFR 1910.24-28)					
Are there any fixed industrial stairs in the facility?	• Includes interior and exterior stairs around machinery, tanks, and other equipment, and stairs leading to or from floors, platforms, or pits. This section does not apply to stairs used for fire exit purposes, to construction operations to private residences, or to articulated stairs, such as may be installed on floating roof tanks or on dock facilities, the angle of which changes with the rise and fall of the base support				
Are there any portable wood ladders used at the facility?	• Applies to common types of portable wood ladders. Fruitpicker's ladders, combination step and extension ladders, stockroom step ladders, aisle-way step ladders, shelf ladders, and library ladders are not specifically covered by regulation.				
Are there any portable metal ladders					

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
used at the facility?					
Are there any fixed ladders in the facility?	• "Fixed ladder." A fixed ladder is a ladder permanently attached to a structure, building, or equipment. . This does not apply to stairs used for fire exit purposes, to construction operations to private residences, or to articulated stairs, such as may be installed on floating roof tanks or on dock facilities, the angle of which changes with the rise and fall of the base support				
Is scaffolding used at the facility?					
MANUALLY PROPELLED MOBILE LADDERS AND SCAFFOLDS (TOWERS): (29 CFR 1910.29)					
Are manually propelled mobile ladder stands or scaffolds used at the facility?	• Mobile work platforms (including ladder stands but not including aerial ladders) and rolling (mobile) scaffolds (towers) • Manually propelled mobile scaffold - A portable rolling scaffold supported by casters				
Are other working surfaces located in or used at the facility?	• Portable and powered dock boards (bridge plates), forging machines, aisles used by employees for bringing and removing materials, steam vats.				
MEANS OF EGRESS/EMERGENCY PLANS: (29 CFR 1910.36-38)					
Have exits been designated as "emergency exits"?	• Applicable to all facilities				
Are all designated emergency exits labeled and accessible?					
Are employee emergency and fire prevention plans in place?					
VEHICLE-MOUNTED WORK PLATFORMS (AERIALS): (29 CFR 1910.67)					
Are vehicle-mounted elevating and rotating work platforms used at the facility? *(i.e. aerial lifts)*	• "Aerial device." Any vehicle-mounted device, telescoping or articulating, or both, which is used to position personnel.				
NOISE EXPOSURE: (29 CFR 1910.95)					
Is an occupational noise exposure program in place? *A common area that triggers this requirement is a generator and/or compressor room.*	• Whenever employee noise exposures equal or exceed an 8-hour time-weighted average sound level (TWA) of 85 decibels measured.				
Has noise monitoring been conducted anywhere in the facility?					
Are there any areas in the facility where personnel need to raise their voices to talk over noise in the area?					
Do employees voluntarily wear hearing protection, or is hearing protection required for any areas in the facility?					
COMPRESSED GAS/FLAMMABLE LIQUIDS/HIGHLY HAZARDOUS CHEMICALS: (29 CFR 1910.101, 106, 107, 119)					
Are compressed gases used/stored at the					

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
facility?					
Are flammable/combustible liquids stored/used at the facility?					
Are spray-finishing operations that use flammable/combustible materials conducted at the facility? (i.e. paint booths)					
Are highly hazardous chemicals used at the facility?					
HAZARDOUS WASTE/EMERGENCY RESPONSE (HAZWOPER): (29 CFR 1910.120)					
Are employees involved in hazardous waste operations?	• Employees who engage in any of the following: • Hazardous waste operations under the Comprehensive Environmental Response Compensation and Liability Act, including any initial investigations of the site prior to identification of exposures. • Corrective actions involving cleanup conducted under Resource Conservation and Recovery Act. • Operations at State or local government designated hazardous waste sites • Operations involving hazardous waste storage, treatment, and disposal facilities regulated by 40 CFR 264 and 265 pursuant to the Resource Conservation and Recovery Act. • Emergency response operations at any workplace when there has been a release or a substantial threat of a release of hazardous substances				
PERSONAL PROTECTIVE EQUIPMENT (PPE): (29 CFR 1910.132-138)					
Is PPE worn by employees?	• Protective equipment, including personal protective equipment for eyes, face, head, and extremities, protective clothing, respiratory devices, and protective shields and barriers				
Is respiratory protection worn by employees, either by policy or voluntarily?					
Is head protection (i.e. hard hats) used by employees?	• Employees that works in areas where there is a potential for injury to the head from falling objects or electrical contact.				
Do employees wear protective footwear (i.e. safety shoes/boots)?					
SANITATION: (29 1910.141)					
Are efforts taken to ensure the workplace is well-kept and good housekeeping is maintained (i.e. trash emptied regularly, storage rooms kept	• Permanent places of employment • All places of employment shall be kept clean to the extent that the nature of the work allows • To facilitate cleaning, every floor, working place, and passageway shall be kept free from				

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
orderly, offices and workplaces free of clutter, etc.)?	protruding nails, splinters, loose boards, and unnecessary holes and openings				
PHYSICAL HAZARD WARNINGS/SIGNS: (29 CFR 1910.144, 145)					
Are physical hazards color coded?	• Physical hazards include flammable storage cans, stop bars, buttons, switches, and tripping, slipping, and falling hazards.				
Are accident prevention signs and tags utilized in the facility where there are hazards or potential hazards to employees?					
CONFINED SPACES: (29 CFR 1910.146)					
Are there any confined spaces in the facility?	• "Confined space" means a space that: • Is large enough and so configured that an employee can bodily enter and perform assigned work; and • Has limited or restricted means for entry or exit (for example, tanks, vessels, silos, storage bins, hoppers, vaults, and pits are spaces that may have limited means of entry.); and • Is not designed for continuous employee occupancy.				
Are there any permit-required confined spaces in the facility?	• Permit-required confined space (permit space)":A confined space that has one or more of the following characteristics • Contains or has a potential to contain a hazardous atmosphere • Contains a material that has the potential for engulfing an entrant • Has an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor which slopes downward and tapers to a smaller cross-section; or • Contains any other recognized serious safety or health hazard				
LOCKOUT/TAGOUT: (29 CFR 1910.147)					
Is there a program for the control of hazardous energy?	• Servicing and maintenance of machines and equipment in which the unexpected energization or start up of the machines or equipment, or release of stored energy could cause injury to employees • (Energy source. Any source of electrical, mechanical, hydraulic, pneumatic, chemical, thermal, or other energy)				
FIRST AID/EMERGENCY RESPONSE (includes emergency shower/eyewash requirements): (29 1910.151)					
Is there first aid available for employees either in-house, or by outside emergency medical responders?	• In the absence of an infirmary, clinic, or hospital in near proximity to the workplace which is used for the treatment of all injured employees, a person or persons shall be adequately trained to render first aid. Adequate				

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
	first aid supplies shall be readily available. • Where the eyes or body of any person may be exposed to injurious corrosive materials, suitable facilities for quick drenching or flushing of the eyes and body shall be provided within the work area for immediate emergency use.				
FIRE PROTECTION/EMPLOYEE ALARM SYSTEM: (29 CFR 1910.157-159, 164, 165)					
Are portable fire extinguishers available in the workplace?					
Are employees trained/designated/expected to use fire extinguishers during a fire?	• Exemption: Where the employer has established and implemented a written fire safety policy which requires the immediate and total evacuation of employees from the workplace upon the sounding of a fire alarm signal and which includes an emergency action plan and a fire prevention plan which meet the requirements of 29 CFR 1910.38 and 29 CFR 1910.39 respectively, and when extinguishers are not available in the workplace				
Is the facility equipped with standpipe and hose systems?	• Applies to all small hose, Class II, and Class III standpipe systems installed to meet the requirements of a particular OSHA standard. Exception. This section does not apply to Class I standpipe systems				
Is the facility equipped with an automatic sprinkler system?	• All automatic sprinkler systems installed to meet a particular OSHA standard.				
Is the facility equipped with a fire detection system?	• All fire detection systems installed to meet a particular OSHA standard				
Is the facility equipped with an employee alarm system (if no, review checklist for applicability determination)	• Applies to all emergency employee alarms installed to meet a particular OSHA standard. This requirement does not apply to those discharge or supervisory alarms required on various fixed extinguishing systems or to supervisory alarms on fire suppression, alarm or detection systems unless they are intended to be employee alarm systems				
COMPRESSED AIR: (29 CFR 1910.169)					
Is compressed air used in the facility?					
MATERIALS HANDLING: (29 CFR 1910.176)					
Materials handling and storage	• Where mechanical handling equipment is used • Material storage and storage areas				
FORKTRUCKS/CRANES: (29 CFR 1910.178, 179, 184)					
Are powered industrial trucks (forklifts) used at the facility?					
Are employees trained on fork truck operations?					
Are there any overhead or gantry cranes at the facility?					

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
Are slings used at the facility?	• Applies to slings used in conjunction with other material handling equipment for the movement of material by hoisting				
MACHINE GUARDING: (29 CFR 1910.212, 215, 217, 219, 242, 243, 244)					
Are any machines used at the facility that pose hazards to employees such as those created by point of operation, nip points, rotating parts, and flying chips and sparks?	• All machinery that poses a hazard to employees.				
Is any of the following equipment used at the facility? - Abrasive wheel machinery - Mechanical power presses - Mechanical power transmissions - Hand or portable powered tools and equipment - Abrasive blast cleaning nozzles					
WELDING: (29 CFR 1910.252, 253)					
Are welding (including oxygen-gas, arc and resistance), cutting, or other hot work operations conducted at the facility?					
ELECTRICAL: (29 CFR 1910.303, 304, 305, 307, 332, 334)					
Is any of the following electrical equipment or locations used or present at the facility? - spliced wiring - electrical equipment that ordinarily produces arcs, sparks, flames, or molten metal - Any areas where electrical equipment that operates at 50 volts or greater - Over-current devices - Circuit breakers - Electrical pull boxes and junction boxes - Extension/temporary electrical cords or cables					
Do employees conduct electrical work (i.e. repairs, wiring, etc)?	• The training requirements apply to employees who face a risk of electric shock that is not reduced to a safe level by electrical installation requirements.				
AIR CONTAMINANTS/ASBESTOS: (29 CFR 1910.1000, 1001)					
Have hazardous air contaminants been					

PROTOCOL	APPLICABILITY	Y	N	NA	Unsure
monitored for in the workplace?					
Does the facility contain asbestos-containing materials?					
BLOODBORNE PATHOGENS: (29 CFR 1910.1030)					
Are any employees exposed (occupational exposure) to blood or other potentially infectious materials?	• Occupational Exposure means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties				
HAZARD COMMUNICATION/RIGHT TO KNOW: (29 CFR 1910.1200)					
Are hazardous chemicals used in the workplace?	• Applies to any chemical which is known to be present in the workplace in such a manner that employees may be exposed under normal conditions of use or in a foreseeable emergency				
Are Material Safety Data Sheets (MSDSs) maintained for all hazardous chemicals?					
Is there a written Hazard Communication Program (HAZCOM) at the facility?					
RADIATION: IONIZING (10 CFR 20); NONIONIZING (29 CFR 1910.97)					
Are sources of ionizing or non-ionizing radiation located in the facility?					
ABRASIVE BLAST OPERATIONS AND VENTILATION: (29 CFR 1910.94)					
Is abrasive-blast operation conducted at the facility equipped with ventilation systems?					
DIP TANKS: (29 CFR 1910.108)					
Are dip tanks used at the facility?	• Examples of covered operations are paint dipping, electroplating, pickling, quenching, tanning, degreasing, stripping, cleaning, roll coating, flow coating, and curtain coating.				
TOXIC AND HAZARDOUS SUBSTANCES:					
Are there any sources of lead, cadmium, or benzene in the facility?	• Not applicable to fuels				
FALL PROTECTION: (29 CFR 1926.502)					
Do employees work in or required to climb to elevated areas?					
Is there a fall protection program in place?					
• **TRAINING:**					
Is training conducted for employees?	• LIST TYPES OF TRAINING: • CHP, HAZCOM, SAFETY ORIENTATION, AED, RAD SAFETY, FIRE DRILLS/EMERGENCY EVAC, CRANES, LOTO, ETC.				

ATTACHMENT 10A – ENVIRONMETNAL FINDING CLASSIFICATION

All environmental findings during facility and site visits should be categorized as follows:

Class I Finding is an observed noncompliant condition with federal, state, or local regulations that has a potential for adverse impacts to human health or the environment. Class I environmental findings are divided into High, Moderate, or Low risk.

High risk – The most extreme degree of environmental endangerment and liability assigned to a noncompliant condition that requires a timely corrective action requiring immediate attention. Such a condition poses, or has likelihood of posing an imminent, a direct threat to the environment or mission at the time of discovery.

Moderate – A serious degree of environmental endangerment and liability assigned to a noncompliant condition that requires a timely corrective action, but not necessarily immediate. Such a condition poses a threat to the environment or mission at the time of discovery.

Low- A minimal degree of environmental endangerment and liability assigned to a noncompliant condition that requires resolution, but not of an urgent nature. Such a condition poses a potential but very small threat to the environment or mission at the time of discovery. This type of Class I environmental findings may be related to administrative or recordkeeping requirements if punitive penalties are not associated with its noncompliance.

Class II Finding is an observed future noncompliant condition with federal, state, or local regulations that has a potential for future adverse impacts to human health or the environment. Class II environmental findings are divided into Moderate and Low risk subcategories.

Moderate - A serious degree of environmental endangerment and liability assigned to a noncompliant condition that requires a corrective action within one year. Such a condition will be expected to pose a threat to the environment or mission at some future date if not addressed.

Low- A minimal degree of environmental endangerment and liability assigned to a future noncompliant condition that requires resolution, but not of an urgent nature. Such a condition poses a potential but very small threat to the environment or mission within one year's time. This type of Class II environmental finding may be related to administrative or recordkeeping requirements if punitive penalties are not associated with its noncompliance.

Class III findings involve noncompliance with internal NOAA/Line Office policies, procedures, or directives. Class III findings are subdivided into two categories, Moderate and Low risk.

Moderate – A violation of an internal policy or standard, which could adversely affect environmental compliance. Examples of moderate risk classifications include failure to conduct an internal inspection, which is more frequent than a regulatory required inspection (e.g., weekly versus monthly inspections).

Low – This category is a violation of an internal requirement to go beyond regulatory standards.

ATTACHMENT 10B – SAFETY & HEALTH FINDING CLASSIFICATION

All Safety and Health findings during facility and site visits should be categorized as follows:

The assessor must download and install a copy of the NOAA Assessment Manager (NAM) application from the NOAA WHAM web site before following the procedural steps outlined below.

An analysis of all findings (i.e., hazards) will be made to determine the degree of risk. The procedures below will be followed in the analyses of the safety and health findings during formal NOAA Environmental Compliance and Safety and Health Assessments.

STEP 1: Assign a Class I, Class II or Class III hazard classification based on definitions provided in Table 1 of Attachment 10B;

STEP 2: Enter the assigned classification into NAM database by using the pull-down menu under 'Finding Category'.

STEP3: Under the 'Details and Previous' tab, click on the 'Risk Classification Button', located at the bottom of the finding text entry field, to enter information described in the next steps.

STEP 4: Risk-assess the hazard in terms of "Hazard Severity" by selecting a hazard severity category in the first column in Table 3 of Attachment 10B. Use the pull-down menu to select the appropriate Hazard Severity. Justify your selection using the text box next to the pull-down menu. *(NOTE: Do not assess the severity quantitatively unless specifically requested by the NECSAS PM.)*

STEP 5: Risk-assess the hazard in terms of the "Accident Probability" by selecting an accident probability level in the second column in Table 3 of Attachment 10B. Use the pull-down menu to select the appropriate Accident Probability. Justify your selection using the text box next to the pull-down menu. *(NOTE: Do not assess the probability quantitatively unless specifically requested by the NECSAS PM.)*

STEP 6: Risk Assessment Code (RAC): A RAC will automatically be assigned to the finding based on your choices in Steps 4 and 5. Verify the RAC choice by reviewing the definitions in Table 5.

STEP 7: ROOT CAUSE: Use the root cause flowchart (Attachment 10C) to determine the root cause for the finding. Select the appropriate root cause by reviewing the root cause definitions. Under the 'Root Cause' tab, double click on the selected root cause. Provide a detailed root cause justification in the text box at the bottom of the screen.

Table 1

Table 1 - NECSAS Classifications

CLASS I	**SERIOUS H/S FINDING**
Substantial probability that death or serious physical harm could result, and management knew or should have known of the hazard. *Categorized in terms of Risk Assessment Code (RAC) 1 or 2*	
CLASS II	**OTHER-THAN-SERIOUS H/S FINDING**
Moderate to low probability of resulting in an injury or illness. *Categorized in terms of Risk Assessment Code (RAC) 3, 4 or 5*	
CLASS III	**REGULATORY OR REPEAT H/S FINDINGS**
Programmatic, written or other administrative defects with minor probability of occurrence. Involve one or more of the following examples: • no formal posting of injury and illness reporting and/or record-keeping requirements, • no formal written standard operating procedures for hazardous operations, • no formal program documentation (i.e., fire evacuation plans, permitted confined space entry). *Categorized in terms of any Risk Assessment Code (RAC) 1 through 5; however, administrative in nature.*	

Table 2 - Assessment Manager Classifications

NECSAS Classification	**Assessment Manager Classification**
Serious H/S Finding	Health & Safety Class I - Serious
Other-than-serious H/S Finding	Health & Safety Class II - Moderate
Regulatory or Repeat H/S Finding	Health & Safety Class III - Minor

Table 3 - Hazard Severity and Accident Probability

HAZARD SEVERITY	ACCIDENT PROBABILITY	RAC
Category: I *(Catastrophic)* Death or permanent total disability, system loss, major property damage (>$500,000), and/or major environmental degradation.	Level: A (Frequent) Individual item or activity: Likely to occur frequently in life of system, item, facility, or operation, etc. Fleet or inventory: Continuously experienced.	RAC 1
	Level: B (Probable) Individual item or activity: Will occur several times in life of system, item, facility or operation, etc. Fleet or inventory: Will occur frequently	RAC 1
	Level: C (Occasional) Individual item: Likely to occur sometime in life of system, item, facility or operation, etc. Fleet or inventory: Will occur several times.	RAC 2
	Level: D (Remote) Individual item: Unlikely, but possible to occur in life of system, item, facility or operation, etc. Fleet or inventory: Unlikely, but can reasonably be expected to occur.	RAC 3
Category: II *(Critical)* Permanent partial disability or temporary total disability in excess of 3 months, major system damage, significant property damage (>$100,000), and/or significant environmental degradation.	Level: A (Frequent) Individual item or activity: Likely to occur frequently in life of system, item, facility, or operation, etc. Fleet or inventory: Continuously experienced.	RAC 1
	Level: B (Probable) Individual item or activity: Will occur several times in life of system, item, facility or operation, etc. Fleet or inventory: Will occur frequently	RAC 2
	Level: C (Occasional) Individual item: Likely to occur sometime in life of system, item, facility or operation, etc. Fleet or inventory: Will occur several times.	RAC 3
	Level: D (Remote) Individual item: Unlikely, but possible to occur in life of system, item, facility or operation, etc. Fleet or inventory: Unlikely, but can reasonably be expected to occur.	RAC 4
Category: III *(Marginal)* Minor injury, lost workday accident, or compensable injury or illness, minor system damage, minor property damage (>$10,000), and/or minor environmental damage.	Level: A (Frequent) Individual item or activity: Likely to occur frequently in life of system, item, facility, or operation, etc. Fleet or inventory: Continuously experienced.	RAC 2
	Level: B (Probable) Individual item or activity: Will occur several times in life of system, item, facility or operation, etc. Fleet or inventory: Will occur frequently	RAC 3
	Level: C (Occasional) Individual item: Likely to occur sometime in life of system, item, facility or operation, etc. Fleet or inventory: Will occur several times.	RAC 4
	Level: D (Remote) Individual item: Unlikely, but possible to occur in life of system, item, facility or operation, etc. Fleet or inventory: Unlikely, but can reasonably be expected to occur.	RAC 5
Category: IV First aid or minor supportive medical treatment, minor system impairment, and/or minor environmental incident.	Level: A (Frequent) Individual item or activity: Likely to occur frequently in life of system, item, facility, or operation, etc. Fleet or inventory: Continuously experienced.	RAC 3
	Level: B (Probable) Individual item or activity: Will occur several times in life of system, item, facility or operation, etc. Fleet or inventory: Will occur frequently	RAC 4
	Level: C (Occasional) Individual item: Likely to occur sometime in life of system, item, facility or operation, etc. Fleet or inventory: Will occur several times.	RAC 5
	Level: D (Remote) Individual item: Unlikely, but possible to occur in life of system, item, facility or operation, etc. Fleet or inventory: Unlikely, but can reasonably be expected to occur.	RAC 5

ROOT CAUSE ANALYSIS

Root Cause Analysis involves identifying not only what has or is happening, but also why. In other words, once a deficiency has been identified, a determination needs to be made as to why the deficiency exists. Properly defining the cause of the problem is 90% of the solution. Additionally, once the true "why" has been identified, the chance of a repeat finding during a future assessment is greatly reduced. The assessor may have to extract the true root cause from several layers of misleading data including incorrect or incomplete information provided by facility personnel during an assessment. In order to determine an accurate root cause, the assessor must interview facility personnel and line office management, conduct a records review, and initiate follow-up interviews (if necessary).

Once a deficiency has been identified, the assessor needs to review the root cause flowchart within this Attachment 10C. This chart will help identify the root cause by having the assessor answer certain questions that help zero in on the root cause code to be used. Once the assessor gets to a level in the flowchart where the answer is 'no' to a question, various root cause codes are available to choose from. At this point, the assessor still needs to have additional information in order to choose the correct code to use.

ROOT CAUSE CODES:

Each specific root cause code is identified in the Root Cause section of the guidance manual; however, they are broken down into four main categories; Management, Resources, Training, and External Activity.

Each category is defined as follows:

Management:

i. Focuses on management level support (or lack of) on a day-to-day basis.

ii. Helps management understand how regulatory deficiencies can contribute to financial instability through fines, violations, corrective actions, and potential environmental clean-up cost.

iii. Focuses on communication, management priority, personnel accountability, and formal policy establishment.

iv. Evaluates the roles and responsibilities for those in charge of managing regulatory programs.

Resources:

i. Relates to the support a facility receives for maintaining regulatory programs and solving or correcting regulatory problems (i.e. funding for conducting asbestos surveys)

ii. Consist of personnel and financial support.

iii. Evaluates existing plans and procedures or identifies the need for program management plans to be developed.

Training:

i. Should be well documented and evaluated periodically for effectiveness.

External Activity:

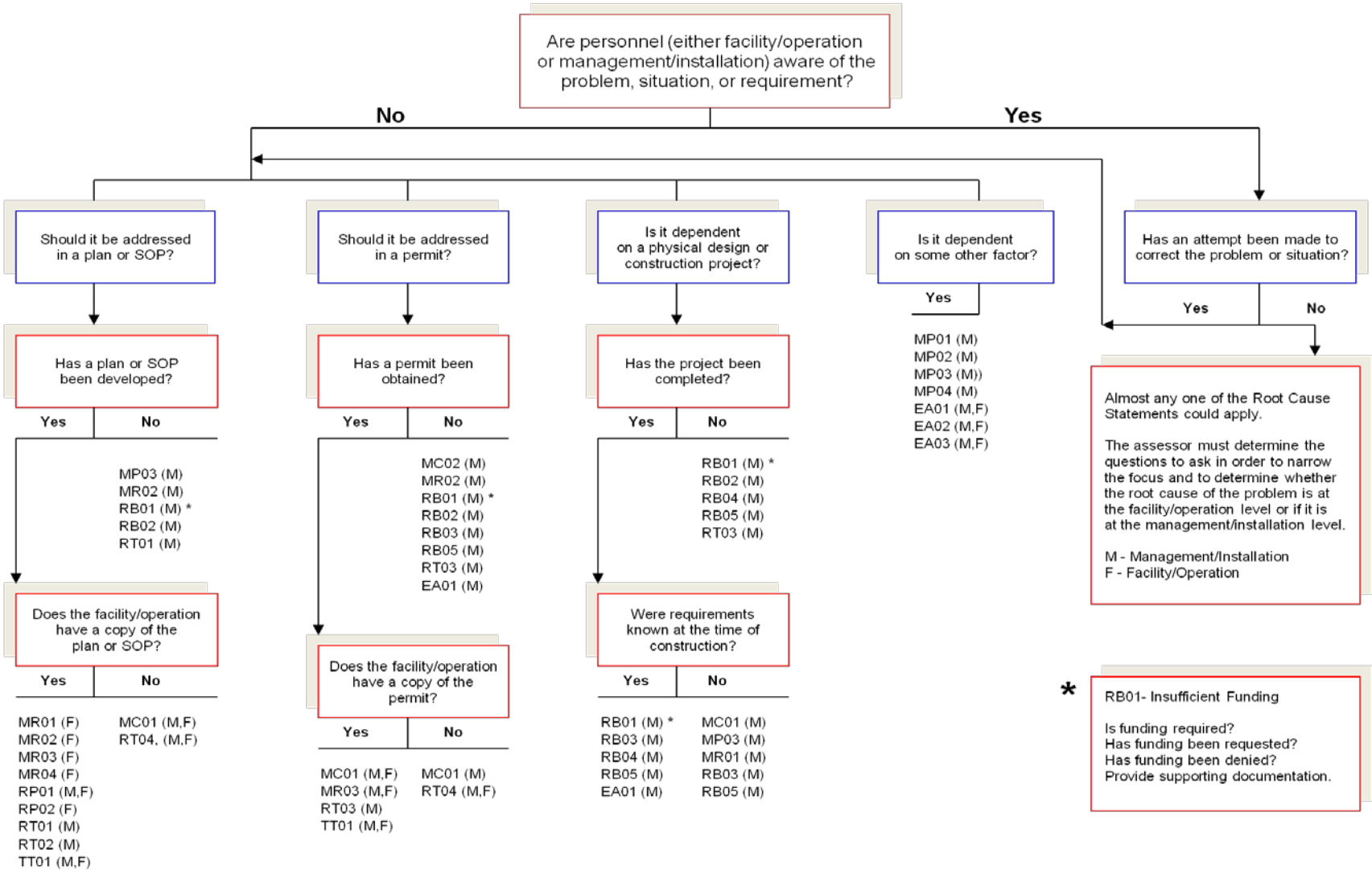
i. Covers uncontrollable effects of external phenomena on regulatory compliance.

ii. Relates to deficiencies caused by extreme weather or ambient conditions, power failure, fire or explosion, theft, tampering, sabotage, criminal trespass, or vandalism.

iii. External Activity has the lowest likelihood of occurring.

The first step in the flowchart is determining if facility personnel are aware of the problem, situation, or requirement. Making this determination guides the assessor as to which path it taken in the flowchart. Not all situations fit exactly into the flowchart scheme and at times the assessor must make a judgment call based on the facts obtained at the site; however, if the root cause used does not correlate to the flow chart, the assessor must provide detailed information as to why the particular root cause was chosen.

Corrective actions should be based on the root cause chosen. If the corrective action does not correlate with the root cause, then the determination needs to be made as to whether the root cause or the corrective action(s) is correct.


Are personnel (either facility/operation or management/installation) aware of the problem, situation, or requirement?
No
Yes
Should it be addressed in a plan or SOP?
Has a plan or SOP been developed?
Yes
No
MP03 (M)
MR02 (M)
RB01 (M) *
RB02 (M)
RT01 (M)
Does the facility/operation have a copy of the plan or SOP?
Yes
No
MR01 (F)
MR02 (F)
MR03 (F)
MR04 (F)
RP01 (M,F)
RP02 (F)
RT01 (M)
RT02 (M)
TT01 (M,F)
MC01 (M,F)
RT04, (M,F)
Should it be addressed in a permit?
Has a permit been obtained?
Yes
No
MC02 (M)
MR02 (M)
RB01 (M) *
RB02 (M)
RB03 (M)
RB05 (M)
RT03 (M)
EA01 (M)
Does the facility/operation have a copy of the permit?
Yes
No
MC01 (M,F)
MR03 (M,F)
RT03 (M)
TT01 (M,F)
MC01 (M)
RT04 (M,F)
Is it dependent on a physical design or construction project?
Has the project been completed?
Yes
No
RB01 (M) *
RB02 (M)
RB04 (M)
RB05 (M)
RT03 (M)
Were requirements known at the time of construction?
Yes
No
RB01 (M) *
RB03 (M)
RB04 (M)
RB05 (M)
EA01 (M)
MC01 (M)
MP03 (M)
MR01 (M)
RB03 (M)
RB05 (M)
Is it dependent on some other factor?
Yes
MP01 (M)
MP02 (M)
MP03 (M))
MP04 (M)
EA01 (M,F)
EA02 (M,F)
EA03 (M,F)
Has an attempt been made to correct the problem or situation?
Yes
No
Almost any one of the Root Cause Statements could apply.
The assessor must determine the questions to ask in order to narrow the focus and to determine whether the root cause of the problem is at the facility/operation level or if it is at the management/installation level.
M - Management/Installation
F - Facility/Operation
*
RB01- Insufficient Funding
Is funding required?
Has funding been requested?
Has funding been denied?
Provide supporting documentation.

Root Cause Code Definitions - Management Emphasis, Resources, and Training (MERT)	
Management Emphasis (M)	
Management Policy and Organization (MP)	
MP01	Management lacks sufficient organizational stature, independence, and authority.
MP02	Management functions within the organizational structure are not afforded appropriate priority to support the mission or program.
MP03	Regulatory requirements are not adequately considered in the development of strategic plans, formal policies, and/or integrated into the accomplishment of operational requirements.
MP04	Formal policies are not issued from an appropriate level of authority.
Communication (MC)	
MC01	Communication or working relationship within the organization is missing or ineffective.
MC02	Communication or working relationship with external or tenant agencies is missing or ineffective.
Roles and Responsibilities (MR)	
MR01	Established policies or procedures are not being followed.
MR02	Personnel are not held accountable for program performance.
MR03	Programmatic responsibilities are not clearly defined in position descriptions or performance standards or are not understood by personnel.
MR04	Line management does not show commitment and/or responsibility for minimizing programmatic impacts within the operation.
Resources (R)	
Programming, Budgeting, and Deliverables (RB)	
RB01	Funds for program-related activities are not sufficient.
RB02	Staffing levels are not sufficient to manage all program-related activities or requirements.
RB03	Resources for controlling or improving daily operations including the procurement of materials, equipment, or services are absent or inadequate.
RB04	Inadequate design or failure in equipment, material, system, or facility selection.
RB05	Supplies/contract deliverables are not properly identified or have not been received.
Plans and Procedures (RP)	
RP01	Program management plans or procedures are not in place or are inadequate.
RP02	Program management plans or procedures are not properly implemented.
Regulatory Tracking and Recordkeeping (RT)	
RT01	Program to review or update permits, plans, procedures, or systems for compliance with requirements is not established or is not adequately implemented.
RT02	System is not in place to identify new or changing regulations or regulatory compliance deadlines and/or incorporate the new requirements into plans or procedures.
RT03	Regulations are misinterpreted or unknown.
RT04	Control, retention, or tracking of records or documents is absent or is inadequate.
RT05	A system is not in place to identify, investigate, report, correct, track, or monitor complaints, problems, or incidents.
RT06	Review and follow-up of assessment and/or inspection programs are not conducted or are inadequate.
Training (T)	
Training Programs (TT)	
TT01	Training is not conducted, is inadequate, and/or is not documented.
TT02	Periodic evaluation of training programs is not conducted and/or is not documented.
External (E)	
External Agency (EA)	
EA01	Compliance is dependent upon external entity action (e.g., agency guidance, permit issuance).
EA02	Weather, ambient conditions, or acts of God caused the deficiency.
EA03	Theft, tampering, sabotage, criminal trespass, vandalism, or fire caused the deficiency.
Best Management Practice	
NA01	Root cause analysis does not apply to positive or best management practice issues.

MEMORANDUM FOR: Deputy Assistant Administrators

FROM: OCAO

SUBJECT: FY07 Incident Rates/Goals and NECSAS Report

To increase your Environmental Health and Safety (EHS) awareness this report summarizes FY07 statistics. These statistics will be included in NOAA's FY07 EHS Annual Report.

Total Recordable Incident Rates: (Orange w/in 5% of goal, Red >5% above goal, Green = achieving goal)

Line Office	FY07 Goal	1st Qtr Actual	2FY07 Actual	3FY07 Actual	4FY07 Actual
NWS	**0.73**	0.72	**0.79**	0.74	0.77
NMFS	**1.97**	0.98	1.80	1.88	**2.12**
NMAO	**2.96**	**5.55**	**4.97**	**4.37**	**4.49**
CORP	**0.99**	0.55	0.30	0.37	0.27
NOS	**1.07**	0.42	0.44	0.40	0.49
OAR	**0.64**	0.00	0.00	0.00	0.13
NESDIS	**0.14**	**1.19**	**2.78**	**1.89**	**1.64**
NOAA	**1.23**	1.15	**1.40**	**1.30**	**1.37**

Highlights:
- Several associated incidents experienced by NESDIS employees in the beginning of FY07 caused an unfortunate recordable incident rate spike. However, timely research into the causes eliminated the potential risk at other locations.
- Operations aboard ships continue to present safety challenges; however, improved reporting efforts are providing a better estimate of accidents and causes.

NOAA Environmental Compliance Safety Assessment System:

Line Office	1st Qtr FY07			2nd Qtr FY07			3rd Qtr FY07			4th Qtr FY07		
	Open	In Progress	Closed	Open	In Progress	Closed	Open	In Progress	Closed	Open	In Progress	Closed
NWS	131	103	383	77	75	465	45	76	503	6	56	563
NMFS	37	70	212	28	42	249	21	29	269	67	44	275
NMAO	0	0	6	0	0	6	0	0	6	0	0	6
CORP	0	1	65	0	0	66	0	0	66	0	0	66
NOS	3	17	210	0	20	210	0	19	211	0	19	211
OAR	0	29	151	0	28	152	1	23	162	1	17	176
NESDIS	0	2	38	0	1	39	0	1	39	0	1	39
NOAA	171	222	1065	105	166	1187	67	148	1256	74	137	1336

Highlights:
– NOAA increased our number of closed findings (corrected with no further action required) throughout FY07. Additionally our percentage of closed to total findings went from 73% in the 1st qtr FY07 to 86% at the close of FY07. This improvement in our environmental and safety compliance posture is significant; particularly considering our ongoing efforts of hiring third party professional EHS auditors to help us uncover any compliance issue before it becomes a regulatory citation continually uncovers areas for improvement.