

**Corrective Action Plan
For
Joint Assessment of
Environmental Permit and Hazardous Waste Management Programs December 2008**

Finding ID #	Finding	Causal Analysis Determination	Corrective Action	Closure Evidence [required for P2]	Person Responsible	Expected Completion Date
<u>FIND P2 - 001:</u>	The accumulation start date was not marked on universal waste labels, in accordance with 40 CFR273 (c) (1).	Lack of effective training led to error.	Add the accumulation start date to the container's label. (IA-2008-82-01)	N/A	J. Williams	12/2/08
			2 - Provide refresher on universal waste handling to hazardous waste staff that includes a review of EMS-08-003-SOP "Universal Waste Management – Crushed Mercury Bulbs". (IA-2008-82-02)	Signature indicating training complete	J. Williams	4/30/09
			3 - Add requirement for universal waste drum inspection to current work instructions. (IA-2008-82-03)	Revised work instructions	J. Williams	8/1/09
<u>FIND P2 - 002:</u>	The last record of submission of chemical inventory for the cooling tower unit does not reflect the current inventory of cooling tower chemicals in use in accordance with DEQ VPDES permit 0089320. The permit requires that the updated inventory be submitted 30 days prior to any intended changes.	The requirement was not clearly communicated in the procedure.	Provide the updated cooling tower chemicals MSDSs to DEQ to ensure latest information is on record. (IA-2008-82-04)	Letter to DEQ	L. Even	1/15/09
			2- Revise ESH Manual Chapter 6730 <i>Water Quality and Conservation Program</i> to clarify the process for evaluating potential changes to either the cooling tower chemicals or the vendor. (IA-2008-82-05)	Revised procedure	L. Even	5/31/09

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			3- Retrain relevant ESH&Q and FM&L staff on the notification requirement in ESH Manual Chapter 6730 <i>Water Quality and Conservation Program</i> and on the Permit VA0089320 requirements. (IA-2008-82-06)	Signature indicating training complete	L. Even	5/31/09
<u>FIND P2 - 003:</u>	Confined space signage has fallen off the water meter pit cover in front of VARC Building. Permit- required confined spaces must be posted per 1910.146 (c) (2) and warrants an extent of condition assessment.	The sign adhesive was not robust enough for continued outdoor use.	Secure confined space signage to the subject water meter pit. (IA-2008-82-07)	N/A	D. Brand	12/10/08
			2 - Perform an extent of conditions of the three applicable water pits to visually inspect to confirm signage and locks in place. (IA-2008-82-08)	N/A	D. Brand	12/10/08
			3 - The confined space program manager to reassess these three unique water pits to ensure signage is present and appropriately affixed. (IA-2008-82-09)	Status update that reassessment was complete.	J. Kelly	8/1/09
			4 - Investigate the adhesive used and determine better adhesive to affix signage for long term use. (IA-2008-82-10)	Complete notice to R. Sprouse that notes selected adhesive.	J. Kelly	8/1/09

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<u>FIND P3 - 001:</u>	The roles and responsibilities described in the EMS and the flow-down documents (ES&H Manual Chapters, Environmental Protection Supplement, Environmental Management Procedures, Standard Operating Procedures, etc.) were hard to differentiate and track. Ongoing revisions to EMS documents and ES&H manual chapters should mitigate this concern.		1 - Revise EMS Plan section 4.4.1 <i>Resources, Roles, Responsibility, and Authority</i> to better describe both distinct and overlapping requirements for program design and execution. (IA-2008-82-11)	Revised EMS Plan	L. Even	6/1/09
			2 - Utilize ongoing revision process related to 450.1A implementation to demonstrate clarified process. (IA-2008-82-12)	Revised procedures per 450.1A IP	L. Even	6/30/09
<u>FIND P3 - 002:</u>	Official training records for Industrial Hygiene staff did not reflect that they had completed required DOT training, despite repeated requests from the IH group to the JLab Training Office to update the records.		Follow up with JLab Training & Performance office to document that DOT training is included on IH staff records. (IA-2008-82-13)	Inspect training records	J. Williams	4/30/09

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<u>FIND P3 - 003:</u>	EMS system requires an annual compliance audit but is not linked to other documentation that addresses the monitoring of regulations for changes.		Revise EMS Plan section 4.3.2 <i>Legal and Other Requirements</i> to clarify that EH&S Manual Chapter 2410 <i>Applicable Regulations and Contractual Commitments</i> is implemented to assure that regulations potentially affecting the EMS are monitored for changes. (IA-2008-82-14)	Revise EMS section 4.3.2	L. Even	5/31/09
<u>FIND P3 - 004:</u>	An SOP for handling universal waste was available at the work location and was reviewed. One deviation from the SOP procedure was noted during the observation of fluorescent bulb crushing: technician did not perform negative pressure test for local exhaust control before crushing bulbs.		Re-train personnel responsible for bulb crushing. Document that the procedure is understood. (IA-2008-82-15)	Procedure sign off sheet	J. Williams	4/30/09
<u>FIND P3 - 005:</u>	A pump used as a backup for discharge of groundwater had exposed moving parts that were not adequately shielded. This finding has since been addressed, but may warrant an extent of condition assessment.		Conduct an extent of condition analysis to identify similar equipment and status. (IA-2008-82-16)	CATs entry documenting results of EOC analysis and path forward	D. Brand	5/31/09

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<u>FIND P3 - 006:</u>	Crossover gate valve between a dewatering sump and a condensate sump has no record of inspection. Failure of this gate valve could allow potentially tritiated water to be discharge to surface waters.		1- It was noted that the valve could not be inspected due to its location, so an alternate to solution to identify leakage was sought. Alternate chosen: Complete dye test to evaluate gate valve leakage. (IA-2008-82-17)	CATS entry with results of leak test	G. Dixon	2/20/09
			2- ESH&Q to meet with FM&L to discuss future inspection plan. (IA-2008-82-18)	CATS entry with meeting results	L. Even	5/31/09
<u>FIND P3 - 007:</u>	There is no evidence that the CEBAF Center commercial kitchen interceptor waste hauler has an HRSD indirect wastewater discharge permit, as required by the permit.		Verify that the current grease trap waste hauler has an HRSD indirect discharge permit. (IA-2008-82-19)	CATS entry documenting results	D. Brand	5/1/09
<u>FIND P3 - 008:</u>	Some personnel whose work directly impacts environmental permit compliance were not aware of permit contents and relation to JLab Environmental Management System (EMS), although EMS Awareness training was given.		1- Provide a copy of the applicable HRSD permit to relevant staff. (IA-2008-82-20)	CATS entry confirming action complete	L. Even	1/30/09
			2- Revise EMS Plan section 4.4.3 <i>Communication</i> with guidance to include discussions of organizations' or staffs' role in the EMS with relevant internal communications. (IA-2008-82-21)	Revised EMS Plan section	L. Even	5/31/09

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<u>FIND P3 - 009:</u>	<p>Records of discharges from one of three acid neutralization systems were not retrievable from records from December 2007 to the time of audit, due to failure of computer backup function.</p> <p>NOTE: The missing files could not be retrieved. Backup files saved onto the server could not be found by Computer Services. The files dated from 3/10/07 through 12/08 are permanently missing.</p>		<p>All data from the Building 31 Neutralization System will be downloaded weekly starting 4/3/09, from the Data Card onto the "M" drive. Weekly downloads will continue for a minimum of approximately 2 months, or until confidence is gained that the Data Card is not responsible for the missing files. The files will also be downloaded onto a local hard drive and retained for 6 months. The files will be removed from the local hard drive once the files are confirmed to be located on the "M" drive. (IA-2008-82-22)</p>	CATS entry documenting the effectiveness of this solution and path forward	A. Reilly	6/30/09