

U.S. Environmental Protection Agency

FY 2016 Annual Performance Report FY 2018 Annual Plan

DATA QUALITY RECORDS

This document represents the verification and validation component of EPA's annual *Justification of Appropriation Estimates for the Committee on Appropriations*. It contains the following sections:

- Background information about EPA's performance data quality procedures;
- Data Quality Records (DQRs) for selected performance measures

NOTE ABOUT SUPPORTING ATTACHMENTS NOT INCLUDED IN THIS DOCUMENT: Some individual DQRs reference supporting attachments, indicated at the end of a DQR field under "Attached Documents".

These attachments are not accessible through this PDF, but are available upon request by sending an email to OCFOINFO@epa.gov. The email should indicate the measure number and text associated with the DQR, and the filename shown underneath the icon for the attachment.

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Office of the Administrator (OA) Record(s)

Measure Code: AD4 - Cumulative number of state, tribal, and community partners that have integrated climate change data, models, information, and other decision-support tools developed by EPA for climate change adaptation into their planning processes.

Office of the Administrator (OA)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

1 - Address Climate Change

Sub-Objective Number and Title:

1 - Address Climate Change

Strategic Target Code and Title:

3 - Climate Adaptation - Tools and Models

Managing Office:

Office of Policy

1a. Performance Measure Term Definitions:

EPA will measure the number of partners in states, tribes, and local communities that have used climate change data, models, information and tools developed by EPA in planning processes. The term “partners” refers specifically to (1) state, tribal, and local government officials, department heads, career officials, and practitioners who engage with EPA program and regional offices; (2) community leaders (non-governmental) and neighborhood organizations; and (3) trade associations. The type of “planning process” under consideration will vary by the type of partner. For example, mayors in local communities may be developing a Climate Change Adaptation Plan to ensure they are able to continue to provide key services (e.g., access to safe drinking water) even as the climate changes. EPA assessments of the risks posed by climate change to these services could be employed by the mayors as they develop their Adaptation Plans. Another example would be a water utility manager who is assessing the risks posed by climate change (e.g., flooding due to sea level rise and storm surges) to the performance of a wastewater treatment plant. The utility manager might use EPA’s Climate Resilience Evaluation and Assessment Tool (CREAT) to do such an assessment.

The 2014-2018 EPA Strategic Plan is the driver for this annual measure.

EPA’s adaptation website can be found at: <http://www.epa.gov/climatechange/impacts-adaptation/index.html>

2a. Original Data Source:

Data will be submitted to the Office of Policy (OP) from environmental and research programs across the Agency. The data originate from each of the National Program Offices and Regional Offices; they collect the information from their program contacts.

2b. Source Data Collection:

The data are submitted to the Senior Advisor for Climate Adaptation in the Office of Policy. The data are entered into a spreadsheet. The climate change adaptation advisor will determine whether the result meets the criteria.

2c. Source Data Reporting:

The Program Offices (OAR, OW, OCSPP, OSWER, OITA, OECA, ORD, OARM) and Regional Offices will contact the climate change adaptation advisor to report this information. Tracked in a spreadsheet and maintained by the Office of Policy (OP).

3a. Relevant Information Systems:

Performance data are tracked in a spreadsheet and maintained by the Office of Policy (OP). This is source data from the Program Offices and Regional Offices, and is summed to be entered into PERS. Information system integrity standards don't apply. The Budget Automation System (BAS) is the final step for data entry.

3b. Data Quality Procedures:

The Senior Advisor for Climate Adaptation and his staff (i.e., the Office of Policy Climate Adaptation Staff) verify the information through conversations with members of the Cross-EPA Work Group on Climate Change Adaptation. The Work Group has representatives from every Program and Regional Office. One of his staff then enters the data in BAS.

3c. Data Oversight:

EPA Senior Advisor for Climate Adaptation

3d. Calculation Methodology:

The "partner" measure is calculated by assigning a numeric value of one (1) to any state, tribal, or local government official, department head, career official, practitioner who engages with EPA program or regional offices, community leader (non-governmental) or neighborhood organization, or trade association that uses climate change data, models, information or tools developed by EPA in a planning process. This is an annual, not cumulative measure. A partner may only be counted once.

4a. Oversight and Timing of Final Results Reporting:

EPA Senior Advisor for Climate Adaptation

4b. Data Limitations/Qualifications:

As noted earlier, types of "planning process" under consideration will vary by the types of partners. It is difficult to firmly define when EPA resources have been adequately integrated into a particular planning process. Whether this has adequately been done requires verification by the Senior Advisor on Climate Adaptation. Some planning processes might not be captured by this measure. The final tabulation is a conservative count of the work completed. There is no data lag. A partner may only be counted once.

4c. Third-Party Audits:

Not applicable

Measure Code: AD5 - Cumulative number of state, tribal, and community partners that have incorporated climate change adaptation into the implementation of their environmental programs supported by major EPA financial mechanisms (grants, loans, contracts, and technical assistance agreements).

Office of the Administrator (OA)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

1 - Address Climate Change

Sub-Objective Number and Title:

1 - Address Climate Change

Strategic Target Code and Title:

4 - Climate Adaptation - Finance Mechanism

Managing Office:

Office of Policy

1a. Performance Measure Term Definitions:

EPA will measure the number of partners in states, tribes, and local communities that have used support from an EPA financial mechanism to integrate climate adaptation planning into their environmental programs. The term “partners” refers specifically to state, tribal, and local government officials, department heads, career officials, and practitioners who engage with EPA program and regional offices. The type of “environmental program” under consideration will vary by the type of partner. For example, the Bridgeport Regional Planning Authority is a governmental entity that has used Brownfield clean-up grant funds to assess the risks posed by sea level rise and storm surge to Brownfield clean-up sites, and to prioritize redevelopment activities after clean-up occurs to ensure communities don’t rebuild in high-risk areas.

The 2014-2018 EPA Strategic Plan is the driver for this annual measure.

EPA’s adaptation website can be found at: <http://www.epa.gov/climatechange/impacts-adaptation/index.html>

2a. Original Data Source:

Data will be submitted to the Office of Policy (OP) from environmental and research programs across the Agency. The data originate from each of the National Program Offices and Regional Offices; they collect the information from their program contacts.

2b. Source Data Collection:

The data are submitted to the Senior Advisor for Climate Adaptation in the Office of Policy. The data are entered into a spreadsheet. The climate change adaptation advisor will determine whether the result meets the criteria.

2c. Source Data Reporting:

The Program Offices (OAR, OW, OCSPP, OSWER, OITA, OECA, ORD, OARM) and Regional Offices will contact the climate change adaptation advisor to report this information. Tracked in a spreadsheet and maintained by the Office of Policy (OP).

3a. Relevant Information Systems:

Performance data are tracked in a spreadsheet and maintained by the Office of Policy (OP). This is source data from the Program Offices and Regional Offices, and is summed to be entered into PERS. Information system integrity standards don’t apply. The Budget Automation System (BAS) is the final step for data entry.

3b. Data Quality Procedures:

The Senior Advisor for Climate Adaptation and his staff (i.e., the Office of Policy Climate Adaptation Staff) verify the information through conversations with members of the Cross-EPA Work Group on Climate Change Adaptation. The Work Group has representatives from every Program and Regional Office. One of his staff then enters the data in BAS.

3c. Data Oversight:

EPA Senior Advisor for Climate Adaptation

3d. Calculation Methodology:

The “partner” measure is calculated by assigning a numeric value of one (1) to any state, tribal, or local government official, department head, career official, or practitioner that uses support from an EPA financial mechanism to integrate climate adaptation planning into an environmental program. This is an annual, not cumulative measure. A partner may only be counted once.

4a. Oversight and Timing of Final Results Reporting:

EPA Senior Advisor for Climate Adaptation

4b. Data Limitations/Qualifications:

As noted earlier, the type of “environmental program” under consideration will vary by the type of partner. It is difficult to firmly define when climate adaptation planning has been adequately integrated into an environmental program. Whether this has adequately been done requires verification by the Senior Advisor on Climate Adaptation. Some environmental programs might not be captured by this measure. The final tabulation is a conservative count of the work completed. There is no data lag. A partner may only be counted once.

4c. Third-Party Audits:

Not applicable

Measure Code: AD6 - Cumulative number of EPA-developed training programs that incorporate climate change adaptation planning for EPA staff, state, tribal, and community partners (includes programmatic and cross-programmatic trainings).

Office of the Administrator (OA)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

1 - Address Climate Change

Sub-Objective Number and Title:

1 - Address Climate Change

Strategic Target Code and Title:

5 - Climate Adaptation - New "Partnerships"

Managing Office:

Office of Policy

1a. Performance Measure Term Definitions:

EPA will measure the number of new training modules on climate adaptation that have been developed, or existing training modules that have been updated to incorporate climate adaptation planning. The training modules will be developed for EPA staff, or partners in states, tribes, and communities. The term "partners" refers specifically to (1) state, tribal, and local government officials, department heads, career officials, and practitioners who engage with EPA program and regional offices; (2) community leaders (non-governmental) and neighborhood organizations; and (3) trade associations. For example, EPA could develop a training module to help local public officials, municipal staff, and community leaders prepare for the impacts climate change may have on the services they provide to their communities. It could include examples of effective resilience strategies that have been successfully implemented in several cities and towns across the nation. It could also provide information and resources to help local government officials get started with adaptation planning in their own communities.

The 2014-2018 EPA Strategic Plan is the driver for this annual measure.

EPA's adaptation website can be found at: <http://www.epa.gov/climatechange/impacts-adaptation/index.html>

2a. Original Data Source:

Data will be submitted to the Office of Policy (OP) from environmental and research programs across the Agency. The data originate from each of the National Program Offices and Regional Offices; they collect the information from their program contacts.

2b. Source Data Collection:

The data are submitted to the Senior Advisor for Climate Adaptation in the Office of Policy. The data are entered into a spreadsheet. The climate change adaptation advisor will determine whether the result meets the criteria.

2c. Source Data Reporting:

The Program Offices (OAR, OW, OCSPP, OSWER, OITA, OECA, ORD, OARM) and Regional Offices will contact the climate change adaptation advisor to report this information. Tracked in a spreadsheet and maintained by the Office of Policy (OP).

3a. Relevant Information Systems:

Performance data are tracked in a spreadsheet and maintained by the Office of Policy (OP). This is source data from the Program Offices and Regional Offices, and is summed to be entered into PERS. Information system integrity standards don't apply. The Budget Automation System (BAS) is the final step for data entry.

3b. Data Quality Procedures:

The Senior Advisor for Climate Adaptation and his staff (i.e., the Office of Policy Climate Adaptation Staff) verify the information through conversations with members of the Cross-EPA Work Group on Climate Change Adaptation. The Work Group has representatives from every Program and Regional Office. One of his staff then enters the data in BAS.

3c. Data Oversight:

EPA Senior Advisor for Climate Adaptation

3d. Calculation Methodology:

The "partner" measure is calculated by assigning a numeric value of one (1) to any new training module on climate adaptation that has been developed, or existing training module that has been updated to incorporate climate adaptation planning. This is an annual, not cumulative measure. A training module may only be counted once.

4a. Oversight and Timing of Final Results Reporting:

EPA Senior Advisor for Climate Adaptation

4b. Data Limitations/Qualifications:

It is difficult to firmly define when climate adaptation planning has been adequately integrated into an existing training program. Whether this has adequately been done requires verification by the Senior Advisor on Climate Adaptation. There is no data lag. A partner may only be counted once.

4c. Third-Party Audits:

Not applicable

Office of Air and Radiation (OAR) Record(s)

Measure Code: 001 - Cumulative percentage reduction in tons of toxicity-weighted (for cancer risk) emissions of air toxics from 1993 baseline.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

2 - Reduce Air Toxics

Strategic Target Code and Title:

1 - Through 2018, reduce toxicity-weighted (for cancer) emissions of air toxics

Managing Office:

Office of Air Quality Planning and Standards

1a. Performance Measure Term Definitions:

Toxicity-weighted emissions: Toxicity-weighted emissions are an approach to normalize the mass of the Hazardous Air Pollutants (HAP) release (in tons per year) by a toxicity factor. The toxicity factors are based on either the HAPs cancer potency or noncancer potency. The more toxic the HAP the more “weight” it receives.

Air toxics: Air toxics, also known as hazardous air pollutants, are those pollutants emitted into the air that are known or suspected to cause cancer or other serious health effects, such as reproductive effects or birth defects, or adverse environmental effects. As defined by the Section 112 of the Clean Air Act; the EPA currently regulates 187 air toxics released into the environment

Cancer risk: The probability of contracting cancer over the course of a lifetime (assumed to be 70 years for the purposes of most risk characterization). A risk level of "N" in a million implies a likelihood that up to "N" people, out of one million equally exposed people would contract cancer if exposed continuously (24 hours per day) to the specific concentration over 70 years (an assumed lifetime). This risk would be an excess cancer risk that is in addition to any cancer risk borne by a person not exposed to these air toxics.

2a. Original Data Source:

Emissions inventories are from many primary sources.

The baseline National Toxics Inventory (NTI), for base years 1990 – 1993, is based on data collected during the development of Maximum Achievable Control Technology (MACT) standards, state and local data, Toxics Release Inventory (TRI) data, and emissions estimates using accepted emission inventory methodologies.

The primary source of data in the toxics emissions inventories are state and local air pollution control agencies and Tribes. These data vary in completeness, format, and quality. EPA evaluates these data and supplements them with data gathered while developing Maximum Achievable Control Technology (MACT) and residual risk standards, industry data, and Toxics Release Inventory data.

The health risk data were obtained from various data sources including EPA, the U.S. Agency for Toxic Substances and Disease Registry, California Environmental Protection Agency, and the International Agency for Research on Cancer. The numbers from the health risk database are used for estimating the risk of contracting cancer and the level of hazard associated with adverse health effects other than cancer.

2b. Source Data Collection:

Source Data Collection Methods: Field monitoring; estimation

Date/time Intervals Covered by Source Data: Each inventory year provides an annual emissions sum for that year.

EPA QA requirements/guidance governing collection: The overarching QA requirements and guidance are covered in the OAQPS Quality Assurance Project Plan [<http://www3.epa.gov/ttnamti1/files/ambient/pm25/qa/QA-Handbook-Vol-II.pdf>]

EPA's uniform data standards relevant to the National Emissions Inventory (NEI) for HAPs are the: SIC/NAICS, Latitude/Longitude, Chemical Identification, Facility Identification, Date, Tribal and Contact Data Standards.

More information regarding the quality assurance details for the 2011 NEI can be accessed at <https://www.epa.gov/air-emissions-inventories/2011-national-emissions-inventory-nei-documentation>

Geographical Extent of Source Data: National

Spatial Detail Covered By the Source Data: NEI data—by facility address. Earlier—by county.

Emissions Data: The NEI for HAPs includes emissions from large and small industrial sources inventoried as point sources, smaller stationary area and other sources, such as fires inventoried as non-point sources, and mobile sources.

Prior to the 1999 NEI for HAPs, there was the National Toxics Inventory (NTI). The baseline NTI (for base years 1990 - 1993) includes emissions information for 188 hazardous air pollutants from more than 900 stationary sources and from mobile sources. The baseline NTI contains county level emissions data and cannot be used for modeling because it does not contain facility specific data.

The NEI contains HAP emissions reported by state, local, and tribal agencies as well as data from the TRI and EPA data developed as part of MACT regulation development. The latest publically available version of the NEI is the 2011 NEI Detailed documentation including QA procedures can be found for each inventory at: <https://www.epa.gov/air-emissions-inventories/2011-national-emissions-inventory-nei-documentation>

Information on EPA's Health Criteria Data for Risk Characterization:

<https://www.epa.gov/fera/dose-response-assessment-assessing-health-risks-associated-exposure-hazardous-air-pollutants>

Contents: Tabulated dose response values for long-term (chronic) inhalation and oral exposures; and values for short term (acute) inhalation exposure

EPA's Health Criteria Data for Risk Characterization is a compendium of cancer and noncancer health risk criteria used to develop a risk metric. This compendium includes tabulated values for long-term (chronic) inhalation for many of the 188 hazardous air pollutants.

Audience: Public

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: During the development of the NEI for HAPs, all primary data submitters and reviewers were required to submit their data and revisions to EPA in a standardized format using the Agency's Central Data Exchange (CDX). For more information on CDX, see: <https://cdx.epa.gov/About/AboutRegulation>

This approach was also used for the 2002 and 2005 NEI. Starting with the 2008 NEI, a new CDX-based mechanism was used called the Emissions Inventory System (EIS). <https://www.epa.gov/air-emissions-inventories/emissions-inventory-system-eis-gateway> The data are transmitted automatically through CDX into the EIS data system.

Timing and frequency of reporting: Other [NEI data are calculated every 3 years]

3a. Relevant Information Systems:

The NEI data and documentation are available at the following sites:

Emissions Inventory System (EIS): <https://www.epa.gov/air-emissions-inventories/emissions-inventory-system-eis-gateway>

Available inventories: 2002 NEI, 2005 NEI, 2008 NEI, 2011 NEI

Contents: Detailed raw final inventories

Audience: EPA staff and state/local/tribal reporting agencies

The EIS is the interface for state, local, and tribal agencies to upload their emissions inventory data. It works using the Central Data Exchange (CDX) network to directly transfer data from external agencies to EPA. EIS also allows EPA inventory development staff to upload data to augment inventories, particularly for HAP emissions, which the states are not required to submit to EPA. EIS includes a "Quality Assurance Environment" that allows states to quality assure their data before submitting to EPA. During this phase of use, EIS runs hundreds of quality assurance checks on the data to ensure that the format (e.g., required data fields) and content (e.g., data codes, range checks) of the data are valid. After using the QA environment, states submit using the production environment, which also runs the QA checks. EIS further allows reporting agencies to make changes as needed to correct any data that passed the QA checks but is not correct. EIS allows both data submitters and all EPA staff to view the data. EIS reports facilitate the QA and augmentation of the data by EPA inventory preparation staff. EIS facilitates EPA's automatic compilation of all agency data and EPA data using a hierarchical selection process, but which EPA staff define the order of precedence for using datasets when multiple emissions values exist from more than one group (for example, state data versus EPA estimated data).

-2005 NATA: <https://www.epa.gov/national-air-toxics-assessment/2005-nata-assessment-methods>

-2008 NEI: <https://www.epa.gov/air-emissions-inventories/2008-national-emissions-inventory-nei-documentation-draft>

-2011 NEI: <https://www.epa.gov/air-emissions-inventories/2011-national-emissions-inventory-nei-documentation>

3b. Data Quality Procedures:

Starting with the 2008 NEI, EPA has used the Emissions Inventory System (EIS) for collecting and compiling the National Emissions Inventory (NEI). EIS includes a "Quality Assurance Environment" that allows states to quality assure their data before submitting to EPA. During this phase of use, EIS runs hundreds of quality assurance checks on the data to ensure that the format (e.g., required data fields) and content (e.g., data codes, emissions range checks, duplicate prevention) of the data are valid. After using the QA environment,

states submit using the production environment, which also runs the QA checks. QA checks are fully documented on the EIS gateway at <https://eis.epa.gov/eis-system-web/content/qaCheck/search.html> Data submitters are given feedback reports containing errors for missed requirements and warnings for non-required checks, such as emissions range checks. After data are compiled, EPA inventory preparation staff perform numerous procedures on the data that are not yet automated. In many cases, EPA further consulted with the data external data providers to obtain revised data submissions to correct issues identified. These checks and data improvements included:

- Comparison to past inventories including 2005 NATA to identify missing data (facilities, pollutants), particularly for facilities identified in past efforts as high risk
- Comparison of latitude longitude locations to county boundaries
- Augmentation of HAP emissions data with TRI
- Augmentation of HAP emissions data using emission factor ratios
- Augmentation of HAP emissions with EPA data developed for MACT and RTR standards
- Outlier analysis

Detailed documentation including QA procedures is underdevelopment as of January, 2012.

Prior to 2008, EIS was unavailable and so many of the data techniques used by EIS were done in a more manual fashion. The EPA performed extensive quality assurance/quality control (QA/QC) activities, including checking data provided by other organizations to improve the quality of the emission inventory. Some of these activities include: (1) the use of an automated format QC tool to identify potential errors of data integrity, code values, and range checks; (2) use of geographical information system (GIS) tools to verify facility locations; and (3) automated content analysis by pollutant, source category and facility to identify potential problems with emission estimates such as outliers, duplicate sites, duplicate emissions, coverage of a source category, etc. The content analysis includes a variety of comparative and statistical analyses. The comparative analyses help reviewers prioritize which source categories and pollutants to review in more detail based on comparisons using current inventory data and prior inventories. The statistical analyses help reviewers identify potential outliers by providing the minimum, maximum, average, standard deviation, and selected percentile values based on current data. Documentation on procedures used prior to 2008 is available in the documentation for the 2002 NEI, at <http://www.epa.gov/ttn/chief/net/2002inventory.html>

The NTI database contains data fields that indicate if a field has been augmented and identifies the augmentation method. After performing the content analysis, the EPA contacts data providers to reconcile potential errors. The draft NTI is posted for external review and includes a README file, with instructions on review of data and submission of revisions, state-by-state modeling files with all modeled data fields, and summary files to assist in the review of the data. One of the summary files includes a comparison of point source data submitted by different organizations. During the external review of the data, state and local agencies, Tribes, and industry provide external QA of the inventory. The EPA evaluates proposed revisions from external reviewers and prepares memos for individual reviewers documenting incorporation of revisions and explanations if revisions were not incorporated. All revisions are tracked in the database with the source of original data and sources of subsequent revision.

Each version of the NEI has extensive plans and documentation that detail quality assurance procedures. The 2011 NEI can be accessed at <https://www.epa.gov/air-emissions-inventories/2011-national-emissions-inventory-nei-documentation>

The tables used in the EPA's Health Criteria Data for Risk Characterization are compiled assessments from various sources for many of the 188 substances listed as hazardous air pollutants under the Clean Air Act of 1990. The data are reviewed to make sure they support hazard identification and dose-response assessment for chronic exposures as defined in the National Academy of Sciences (NAS) risk assessment paradigm (<https://www.epa.gov/fera/nrc-risk-assessment-paradigm>). Because the health criteria data were obtained from various sources they are prioritized for use (in developing the performance measure, for example) according to 1) conceptual consistency with EPA risk assessment guidelines and 2) various levels of scientific peer review. The prioritization process is aimed at incorporating the best available scientific data.

3c. Data Oversight:

Source Data: Air Quality Assessment Division, Emissions Inventory Assessment Group

Information Systems: Health & Environmental Impacts Division, Air Toxics Assessment Group

3d. Calculation Methodology:

Explanation of the Calculations: As the NEI is only developed every three years, EPA utilizes an emissions modeling system to project inventories for "off-years" and to project the inventory into the future. This model, the EMS-HAP (Emissions Modeling System for Hazardous Air Pollutants), can project future emissions, by adjusting stationary source emission data to account for growth and emission reductions resulting from emission reduction scenarios such as the implementation of the Maximum Achievable Control Technology (MACT) standards.

Information on the Emissions Modeling System for Hazardous Air Pollutants (EMS-HAP):

<http://www.epa.gov/scram001/userg/other/emshapv3ug.pdf>

Contents: 1996 NTI and 1999 NEI for HAPs Audience: public

Explanation of Assumptions: Once the EMS-HAP process has been performed, the EPA would tox-weight the inventory by "weighting" the emissions for each pollutant with the appropriate health risk criteria. This would be accomplished through a multi-step process. Initially, pollutant by pollutant values would be obtained from the NEI for the current year and the baseline year (1990/93). Conversion of actual tons for each pollutant for the current year and the baseline year to "toxicity-weighted" tons would be accomplished by multiplying the appropriate values from the health criteria database such as the unit risk estimate (URE) or lifetime cancer risk to get the noncancer tons. These toxicity-weighted values act as a surrogate for risk and allow EPA to compare the toxicity-weighted values against a 1990/1993 baseline of toxicity-weighted values to determine the percentage reduction in risk on an annual basis.

Information on EPA's Health Criteria Data for Risk Characterization (Health Criteria Data):

<https://www.epa.gov/fera/dose-response-assessment-assessing-health-risks-associated-exposure-hazardous-air-pollutants>

Contents: Tabulated dose response values for long-term (chronic) inhalation and oral exposures; and values for short-term (acute) inhalation exposure.

Audience: Public

Identification of Unit of Measure and Timeframe: Cumulative percentage reduction in tons of toxicity-weighted emissions as a surrogate for actual risks reduction to the public.

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting: OAQPS will update the actual toxicity-weighted emissions approximately every three years to coincide with updated toxic inventories.

Timing of Results Reporting: Annually. NEI data are calculated every three years; in years when NEI data are not calculated, the annual measure is reported based upon modeled results.

4b. Data Limitations/Qualifications:

While emissions estimating techniques have improved over the years, broad assumptions about the behavior of sources and serious data limitations still exist. The NTI and the NEI for HAPs contain data from other primary references. Because of the different data sources, not all information in the NTI and the NEI for HAPs has been developed using identical methods. Also, for the same reason, there are likely some geographic areas with more detail and accuracy than others.

The 1996 NTI and 1999 NEI for HAPs are a significant improvement over the baseline NTI because of the added facility-level detail (e.g., stack heights, latitude/longitude locations), making it more useful for dispersion model input.

For further discussion of the data limitations and the error estimates in the 1999 NEI for HAPs, please refer to the discussion of Information Quality Guidelines in the documentation at: www.epa.gov/ttn/chief/net/index.html - haps99

The tables used in the EPA's Health Criteria Data for Risk Characterization (found at <https://www.epa.gov/fera/dose-response-assessment-assessing-health-risks-associated-exposure-hazardous-air-pollutants>) are compiled assessments from various sources for many of the 188 substances listed as hazardous air pollutants under the Clean Air Act of 1990. Because different sources developed these assessments at different times for purposes that were similar but not identical, results are not totally consistent. To resolve these discrepancies and ensure the validity of the data, EPA applied a consistent priority scheme consistent with EPA risk assessment guidelines and various levels of scientific peer review. These risk assessment guidelines can be found at <https://www.epa.gov/risk/risk-assessment-guidelines-tab-1>

While the Agency has made every effort to utilize the best available science in selecting appropriate health criteria data for toxicity-weighting calculations, there are inherent limitations and errors (uncertainties) associated with this type of data. Most of the agencies health criteria are derived from response models and laboratory experiments involving animals. The parameter used to convert from exposure to cancer risk (i.e. the Unit Risk Estimate or URE) is based on default science policy processes used routinely in EPA assessments. First, some air toxics are known to be carcinogens in animals but lack data in humans. These have been assumed to be human carcinogens. Second, all the air toxics in this assessment were assumed to have linear relationships between exposure and the probability of cancer (i.e. effects at low exposures were extrapolated from higher, measurable, exposures by a straight line). Third, the URE used for some air toxics compounds represents a maximum likelihood estimate, which might be taken to mean the best scientific estimate. For other air toxics compounds, however, the URE used was an "upper bound" estimate, meaning that it probably leads to an overestimation of risk if it is incorrect. For these upper bound estimates, it is assumed that the URE continues to apply even at low exposures. It is likely, therefore, that this linear model over-predicts the risk at exposures encountered in the environment. The cancer weighting-values for this approach should be considered "upper bound" in the science policy sense.

All of the noncancer risk estimates have a built-in margin of safety. All of the Reference Concentrations (RfCs) used in toxicity-weighting of noncancer are conservative, meaning that they represent exposures which probably do not result in any health effects, with a margin of safety built into the RfC to account for sources of uncertainty and variability. Like the URE used in cancer weighting the values are, therefore, considered “upper bound” in the science policy sense.

4c. Third-Party Audits:

In 2004, the Office of the Inspector General (OIG) released a final evaluation report on “EPA’s Method for Calculating Air Toxics Emissions for Reporting Results Needs Improvement” (report can be found at <https://www.epa.gov/office-inspector-general/report-epas-method-calculating-air-toxics-emissions-reporting-results-needs>) The report stated that although the methods used have improved substantially, unvalidated assumptions and other limitations underlying the NTI continue to impact its use as a GPRA performance measure. As a result of this evaluation and the OIG recommendations for improvement, EPA prepared an action plan and is looking at ways to improve the accuracy and reliability of the data. EPA will meet bi-annually with OIG to report on its progress in completing the activities as outlined in the action plan.

EPA staff, state and local agencies, Tribes, industry and the public review the NTI and the NEI for HAPs. To assist in the review of the 1999 NEI for HAPs, the EPA provided a comparison of data from the three data sources (MACT/residual risk data, TRI, and state, local and Tribal inventories) for each facility. For the 1999 NEI for HAPs, two periods were available for external review - October 2001 - February 2002 and October 2002 - March 2003. The final 1999 NEI was completed and posted on the Agency website in the fall of 2003.

The EMS-HAP has been subjected to the scrutiny of leading scientists throughout the country in a process called “scientific peer review”. This ensures that EPA uses the best available scientific methods and information. In 2001, EPA’s Science Advisory Board (SAB) reviewed the EMS-HAP model as part of the 1996 national-scale assessment. The review was generally supportive of the assessment purpose, methods, and presentation; the committee considers this an important step toward a better understanding of air toxics.

Measure Code: A01 - Annual emissions of sulfur dioxide (SO₂) from electric power generation sources.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

1 - Reduce Criteria Pollutants and Regional Haze

Strategic Target Code and Title:

1 - By 2018, concentrations of ozone (smog) in monitored counties will decrease to .073 ppm

Managing Office:

Office of Atmospheric Programs

1a. Performance Measure Term Definitions:

Emissions of SO₂: Sulfur dioxide (also sulphur dioxide) is the chemical compound with the formula SO₂.

Electric power generation sources: The Acid Rain Program, established under Title IV of the Clean Air Act Amendments of 1990, requires major reductions in sulfur dioxide (SO₂) and nitrogen oxide (NO_x) emissions from the U.S. electric power generation industry. The program implements Title IV by continuing to measure, quality assure, and track emissions for SO₂ and/or NO_x from Continuous Emissions Monitoring Systems (CEMS) or equivalent direct measurement methods at over 3,600 affected electric generation units in the U.S.

2a. Original Data Source:

More than 3,400 fossil fuel-fired utility units affected under the Title IV Acid Rain Program collect hourly measurements of SO₂, NO_x, volumetric flow, CO₂, and other emission-related parameters using certified continuous emission monitoring systems (CEMS) or equivalent continuous monitoring methods.

For a description of EPA's Acid Rain Program, see the program's website at <https://www.epa.gov/acidrain> and the electronic Code of Federal Regulations at <https://www.epa.gov/airmarkets/acid-rain-program-laws-and-regulations> (40 CFR parts 72-78.)

2b. Source Data Collection:

Source Data Collection Methods: Field monitoring using certified continuous emission monitoring systems (CEMS) or equivalent continuous monitoring methods, collected hourly.

EPA QA requirements/guidance governing collection: Promulgated QA/QC requirements dictate performing a series of quality assurance tests of CEMS performance. For these tests, emissions data are collected under highly structured, carefully designed testing conditions, which involve either high quality standard reference materials or multiple instruments performing simultaneous emission measurements. The resulting data are screened and analyzed using a battery of statistical procedures, including one that tests for systematic bias. If a CEM fails the bias test, indicating a potential for systematic underestimation of emissions, the source of the error must be identified and corrected or the data are adjusted to minimize the bias. Each affected plant is required to maintain a written QA plan documenting performance of these procedures and tests.

The ETS provides instant feedback to sources on data reporting problems, format errors, and inconsistencies. The electronic data file QA checks are described at <https://www.epa.gov/airmarkets/business-center>

Geographical Extent of Source Data: National

Spatial Detail Covered by the Source Data: Spatial detail for SO₂ emissions can be obtained at the following website: <https://ampd.epa.gov/ampd/> This website allows access to current and historical emissions at the unit level and the monitoring location level.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: Beginning with the first quarter of 2009, and quarterly thereafter, all industry sources regulated under the Acid Rain and Clean Air Interstate Rule (CAIR) programs are required use the Emissions Collection and Monitoring Plan System (ECMPS) to submit their monitoring plan, QA/cert test, and emissions data to the EPA.

The new XML file format allows the data to be organized based on dates and hours instead of pollutant type.

See also the ECMPS Reporting Instructions Emissions document: <https://www.epa.gov/airmarkets/business-center>

Timing and frequency of reporting: Emissions data are submitted to the ECMPS and represent hourly values for measured parameters, calculated hourly emissions values, instrument calibration data, and aggregated summary data. An emissions file contains one calendar quarter of hourly and aggregate emissions measurements for a specified unit or group of related units, including stacks and pipes.

Each unit that is required to submit emissions data for a particular calendar quarter must be included in one and only one emissions file for that quarter. Each emissions file should contain all relevant operating, daily quality assurance, and emissions data for all units, common stacks, multiple stacks, or common pipes that were in a common monitoring configuration for any part of the quarter.

You must submit an emissions file for each quarter or, for ozone season only reporters, for the second and third calendar quarters of each year.

3a. Relevant Information Systems:

Emissions Tracking System (ETS) /
Emissions Collection and Monitoring Plan System (ECMPS)

Additional information:

EPA's Clean Air Markets Division (CAMD) has undertaken a project to re-engineer the process and data systems associated with emissions, monitoring plan, and certification data. As part of the project, CAMD reviewed how monitoring plan information, certification/ recertification applications, on-going quality assurance data, and emissions data are maintained, quality assured and submitted. CAMD also reviewed the tools available for checking and submitting data on a quarterly and ozone season basis. Once the review was complete, CAMD developed a number of goals for the ECMPS project. They include:

- Creating a single client tool for all users to check and submit data.
- Providing users with the ability to quality assure data prior to submission.
- Providing users with one set of feedback.
- Allowing for seamless updates to the client tool.
- Providing direct access to EPA's database through the client tool.
- Maintaining select data outside of the electronic data report.
- Creating new XML file format.
- Developing new security requirements.

Adding flexibility to the process is one of the main reasons for changing how monitoring and emissions data are quality assured and submitted. There are several changes to the process that will involve adding flexibility:

- Monitoring plans will no longer be required as part of the quarterly file.
- On-going quality assurance test data may be submitted after the tests are performed—users will not have to wait to submit the data as part of a quarterly report.

[Source: <https://www.epa.gov/airmarkets/business-center>

The ECMPS contain source data.

The ECMPS meets relevant EPA standards for information system integrity.

3b. Data Quality Procedures:

EPA analyzes all quarterly reports to detect deficiencies and to identify reports that must be resubmitted to correct problems. EPA also identifies reports that were not submitted by the appropriate reporting deadline. Revised quarterly reports, with corrected deficiencies found during the data review process, must be obtained from sources by a specified deadline. All data are reviewed, and preliminary and final emissions data reports are prepared for public release and compliance determination.

For a review of the ETS data audit process, see: <http://www.epa.gov/airmarkets/>

3c. Data Oversight:

Branch Chief, Emissions Monitoring Branch is responsible for source data reporting.

Branch Chief, Market Operations Branch is responsible for the information systems utilized in producing the performance result.

3d. Calculation Methodology:

Definition of variables: The ECMPS Reporting Instructions Emissions document at

<https://www.epa.gov/airmarkets/clean-air-markets-ecmps-reporting-instructions> dictionary for the ECMPS.

Explanation of Calculations: Promulgated methods are used to aggregate emissions data across all United States' utilities for each pollutant and related source operating parameters such as heat inputs. The ECMPS Reporting Instructions Emissions document at <https://www.epa.gov/airmarkets/clean-air-markets-ecmps-reporting-instructions> provides the methods used to aggregate emissions data across all United States' utilities.

Unit of analysis: Tons of emission

4a. Oversight and Timing of Final Results Reporting:

Branch Chief, Assessment And Communications Branch, oversees final reporting by the National Program Office.

4b. Data Limitations/Qualifications:

None

4c. Third-Party Audits:

In July of 2010, the Quality Staff of the Office of Environmental Information completed a Quality System Assessment (QSA) for the Office of Atmospheric Programs. The results of the assessment were summarized as follows: "Please note that there are no findings requiring corrective action. Review of QA requirements and interviews with management and staff revealed no weaknesses in the overall Quality System management for

OAP. Controls appear to be in place, the QA structure appears effective, there is project-level planning QA documentation (QAPPs, QARFs) in place as well as the appropriate training and records management practices”.

Measure Code: O33 - Cumulative millions of tons of Volatile Organic Compounds (VOCs) reduced since 2000 from mobile sources.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

1 - Reduce Criteria Pollutants and Regional Haze

Strategic Target Code and Title:

0 -

Managing Office:

Office of Air and Radiation; Office of Transportation and Air Quality (OTAQ)

1a. Performance Measure Term Definitions:

Mobile sources: Includes on-road cars/trucks, nonroad engines; such as farm, construction, and lawn/garden equipment, marine engines, locomotives; and aircraft.

Volatile organic carbons (VOC): Combustion product formed from the reaction of fuel (gasoline, diesel, liquefied propane, CNG or other hydrocarbon-based fuel) and oxygen (from the ambient air), as defined by the EPA National Ambient Air Quality Standard for VOC and measurement methods.

2a. Original Data Source:

Estimates for on-road and nonroad mobile source emissions are generated from EPA emission models.

Data for the models are from many sources, including vehicle miles traveled (VMT) estimates by state (Federal Highway Administration, or FHWA), the mix of VMT by type of vehicle (FHWA), temperature, gasoline properties, and the designs of Inspection/Maintenance (I/M) programs. Usage data for nonroad comes largely from sales data and surveys.

2b. Source Data Collection:

Source Data Collection Methods: Emission test results for engines/vehicles come from EPA, other government agencies (including state/local governments), academic institutions and industry. The data come from actual emission tests measuring vehicle/engine HC (Hydrocarbons), CO (Carbon Monoxide), NO_x (Nitrogen Oxides), and PM (Particulate Matter) emissions. VMT information comes from Department of Transportation's (DOT) Highway Performance Monitoring System (HPMS) and are obtained from DOT surveys.

Geographical Extent of Source Data: National and state level data.

Spatial Detail Covered By the Source Data: County level data.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: EPA develops and receives emission data on a g/mile or g/unit work (or unit fuel consumed) basis.

Timing and frequency of reporting: The inputs to MOVES/MOBILE 6 and NONROAD 2008 and other models are reviewed and updated, sometimes on an annual basis for some parameters. Generally, Vehicle Miles Traveled (VMT), the mix of VMT by type of vehicle (Federal Highway Administration (FHWA)-types), temperature, gasoline properties, and the designs of Inspection/Maintenance (I/M) programs are updated each year.

Emission factors for all mobile sources and activity estimates for non-road sources are revised at the time EPA's Office of Transportation and Air Quality provides new information.

Updates to the inputs to the models means the emissions inventories will change.

3a. Relevant Information Systems:

National Emissions Inventory Database. Obtained by modeling runs using MOBILE/MOVES, NONROAD, and other models.

See: <https://www.epa.gov/air-emissions-inventories/national-emissions-inventory-nei> for a summary of national emission inventories and how the numbers are obtained in general.

The emission inventory contains source test data as well as usage information compiled from other sources. Also, for consistency from year to year and to provide a baseline over time, the emission inventories are updated for these performance measure only when it is essential to do so. The source data (emissions and usage) are "transformed" into emission inventories.

The models and input undergo peer review and receive scientific input from a variety of sources including academic institutions and public comments.

3b. Data Quality Procedures:

The emissions inventories are reviewed by both internal and external parties including state and local air agencies and industry. EPA works with all of these parties to review model inputs. EPA also reviews the inventories, comparing them to others derived in earlier years to assure that changes in inputs result in reasonable changes in the inventories actual. The models and their inputs also undergo peer and stakeholder review.

3c. Data Oversight:

EPA emission inventories for the performance measure are reviewed by OTAQ Center Directors in the Assessment and Standards Division. The Center Directors are responsible for vehicle, engine, fuel, and modeling data used in various EPA programs.

3d. Calculation Methodology:

Explanation of the Calculations:

- In a national air quality scenario, the mobile source "fleet", primarily, on-road light-duty vehicles, can be classified and allocated down to the county level on the basis of light- versus heavy-duty operation, on-road versus nonroad, and vehicle versus equipment.
- For the baseline "Year," annual tons of mobile source emissions emitted by pollutant are modelled.
- EPA then predicts annual tons of mobile source emissions reduced for a particular year by modelling vehicle/engine pollutant emission rates, i.e., emission standards, for all the miles/operation which can be attributed to mobile sources in that year. For the annual measure, EPA reports the modeled outputs for each year as a target and result.

The MOVES (Motor Vehicle Emission Simulator) model replacing the earlier MOBILE6 vehicle emission factor model is a software tool for predicting gram per mile emissions of hydrocarbons, carbon monoxide, oxides of nitrogen, carbon dioxide, particulate matter, and toxics from cars, trucks, and motorcycles under various

conditions. Inputs to the model include fleet composition, activity, temporal information, and control program characteristics. See: <https://www.epa.gov/moves> .

The NONROAD 2008 emission inventory model replacing earlier versions of NONROAD is a software tool for predicting emissions of hydrocarbons, carbon monoxide, oxides of nitrogen, particulate matter, and sulfur dioxides from small and large off road vehicles, equipment, and engines. Inputs to the model include fleet composition, activity and temporal information. For more information on the NONROAD model, see: <https://www.epa.gov/moves>

Over the years, improved emission and usage data have led to updated emission inventories more consistent with air quality data.

Additional information:

To keep pace with new analysis needs, new modeling approaches, and new data, EPA is currently working on transitioning to the modeling system termed the Multi-scale Motor Vehicles and Equipment Emission System (MOVES). This new system will estimate emissions for on road and off road sources, cover a broad range of pollutants, and allow multiple scale analysis, from fine scale analysis to national inventory estimation. When fully implemented, MOVES will serve as the replacement for MOBILE6 and NONROAD. The new system will not necessarily be a single piece of software, but instead will encompass the necessary tools, algorithms, underlying data and guidance necessary for use in all analyses associated with regulatory development, compliance with statutory requirements, and national/regional inventory projections.

Unit of analysis: tons of emissions, vehicle miles traveled, and hours (or fuel) used

4a. Oversight and Timing of Final Results Reporting:

The Center Directors and the Associate Director of OTAQ's ASD are responsible for the performance measure by assuring that the emission inventory and reduction numbers used in EPA regulatory and other programs are accurate and appropriate review.

4b. Data Limitations/Qualifications:

The limitations of the inventory estimates for mobile sources come from limitations in the modeled emission factors (based on emission factor testing and models predicting overall fleet emission factors in g/mile) and also in the estimated vehicle miles traveled for each vehicle class (derived from Department of Transportation data).

For nonroad emissions, the estimates come from a model using equipment inventories, emission factors per hour or unit of work, and an estimate of usage. This nonroad emissions model accounts for over 200 types of nonroad equipment. Any limitations in the input data will carry over into limitations in the emission inventory estimates.

Additional information about data integrity for the MOVES/MOBILE6 and NONROAD models is available at <https://www.epa.gov/moves> .

When the method for estimating emissions changes significantly, older estimates of emissions in years prior to the most recent year may be revised to be consistent with the new methodology when possible.

Methods for estimating emission inventories are frequently updated to reflect the most up-to-date inputs and assumptions. Past emission estimates that inform our performance measures frequently do not keep pace with the changing inventories associated with more advanced information.

4c. Third-Party Audits:

All of the inputs for the models, the actual models, and the resultant emission inventories are reviewed as appropriate by academic experts and, also, by state/local governments who may use some of this information for their State Implementation Plans to meet the National Ambient Air Quality Standards.

Measure Code: N35 - Limit the increase of Carbon Monoxide (CO) emissions from mobile sources compared to a 2000 baseline.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

1 - Reduce Criteria Pollutants and Regional Haze

Strategic Target Code and Title:

0 -

Managing Office:

Office of Air and Radiation; Office of Transportation and Air Quality (OTAQ)

1a. Performance Measure Term Definitions:

Mobile sources: includes on-road cars/trucks; nonroad engines, such as farm, construction, and lawn/garden equipment, marine engines, locomotives; and aircraft.

Carbon monoxide: Combustion product formed from the reaction of fuel (gasoline, diesel, liquefied propane, CNG or other hydrocarbon-based fuel) and oxygen (from the ambient air), as defined by the EPA National Ambient Air Quality Standard and measurement methods.

2a. Original Data Source:

Estimates for on-road and nonroad mobile source emissions are generated from EPA emission models.

Data for the models are from many sources, including vehicle miles traveled (VMT) estimates by state (Federal Highway Administration, or FHWA), the mix of VMT by type of vehicle (FHWA), temperature, gasoline properties, and the designs of Inspection/Maintenance (I/M) programs. Usage data for nonroad comes largely from sales data and surveys.

2b. Source Data Collection:

Source Data Collection Methods: Emission test results for engines/vehicles come from EPA, other government agencies (including state/local governments), academic institutions and industry. The data come from actual emission tests measuring vehicle/engine HC (Hydrocarbons), CO (Carbon Monoxide), NOx (Nitrogen Oxides), and PM (Particulate Matter) emissions. VMT information comes from Department of Transportation's (DOT) Highway Performance Monitoring System (HPMS) and are obtained from DOT surveys.

Geographical Extent of Source Data: National and state level data.

Spatial Detail Covered By the Source Data: County level data.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: EPA develops and receives emission data on a g/mile or g/unit work (or unit fuel consumed) basis.

Timing and frequency of reporting: The inputs to MOVES/MOBILE 6 and NONROAD 2008 and other models are reviewed and updated, sometimes on an annual basis for some parameters. Generally, Vehicle Miles Traveled (VMT), the mix of VMT by type of vehicle (Federal Highway Administration (FHWA)-types), temperature, gasoline properties, and the designs of Inspection/Maintenance (I/M) programs are updated each year.

Emission factors for all mobile sources and activity estimates for non-road sources are revised at the time EPA's Office of Transportation and Air Quality provides new information.

Updates to the inputs to the models means the emissions inventories will change.

3a. Relevant Information Systems:

National Emissions Inventory Database. Obtained by modeling runs using MOBILE/MOVES, NONROAD, and other models.

See: <https://www.epa.gov/air-emissions-inventories/air-pollutant-emissions-trends-data> for a summary of national emission inventories and how the numbers are obtained in general.

The emission inventory contains source test data as well as usage information compiled from other sources. Also, for consistency from year to year and to provide a baseline over time, the emission inventories are updated for these performance measure only when it is essential to do so. The source data (emissions and usage) are "transformed" into emission inventories.

The models and input undergo peer review and receive scientific input from a variety of sources including academic institutions and public comments.

3b. Data Quality Procedures:

The emissions inventories are reviewed by both internal and external parties including state and local air agencies and industry. EPA works with all of these parties to review model inputs. EPA also reviews the inventories, comparing them to others derived in earlier years to assure that changes in inputs result in reasonable changes in the inventories actual. The models and their inputs also undergo peer and stakeholder review.

3c. Data Oversight:

EPA emission inventories for the performance measure are reviewed by OTAQ Center Directors in the Assessment and Standards Division. The Center Directors are responsible for vehicle, engine, fuel, and modeling data used in various EPA programs.

3d. Calculation Methodology:

Explanation of the Calculations:

- In a national air quality scenario, the mobile source "fleet", primarily, on-road light-duty vehicles, can be classified and allocated down to the county level on the basis of light- versus heavy-duty operation, on-road versus nonroad, and vehicle versus equipment.
- For the baseline "Year," annual tons of mobile source emissions emitted by pollutant are modelled.
- EPA then predicts annual tons of mobile source emissions reduced for a particular year by modelling vehicle/engine pollutant emission rates, i.e., emission standards, for all the miles/operation which can be attributed to mobile sources in that year. For the annual measure, EPA reports the modeled outputs for each year as a target and result.

The MOVES (Motor Vehicle Emission Simulator) model replacing the earlier MOBILE6 vehicle emission factor model is a software tool for predicting gram per mile emissions of hydrocarbons, carbon monoxide, oxides of nitrogen, carbon dioxide, particulate matter, and toxics from cars, trucks, and motorcycles under various conditions. Inputs to the model include fleet composition, activity, temporal information, and control program characteristics. For more information, see: <https://www.epa.gov/moves>

The NONROAD 2008 emission inventory model replacing earlier versions of NONROAD is a software tool for predicting emissions of hydrocarbons, carbon monoxide, oxides of nitrogen, particulate matter, and sulfur dioxides from small and large off road vehicles, equipment, and engines. Inputs to the model include fleet composition, activity and temporal information. For more information on the NONROAD model, see: <https://www.epa.gov/moves>

Over the years, improved emission and usage data have led to updated emission inventories more consistent with air quality data.

Additional information:

To keep pace with new analysis needs, new modeling approaches, and new data, EPA is currently working on transitioning to the modeling system termed the Multi-scale Motor Vehicles and Equipment Emission System (MOVES). This new system will estimate emissions for on road and off road sources, cover a broad range of pollutants, and allow multiple scale analysis, from fine scale analysis to national inventory estimation. When fully implemented, MOVES will serve as the replacement for MOBILE6 and NONROAD. The new system will not necessarily be a single piece of software, but instead will encompass the necessary tools, algorithms, underlying data and guidance necessary for use in all analyses associated with regulatory development, compliance with statutory requirements, and national/regional inventory projections.

Unit of analysis: tons of emissions, vehicle miles traveled, and hours (or fuel) used

4a. Oversight and Timing of Final Results Reporting:

The Center Directors and the Associate Director of OTAQ's ASD are responsible for the performance measure by assuring that the emission inventory and reduction numbers used in EPA regulatory and other programs are accurate and appropriate review.

4b. Data Limitations/Qualifications:

The limitations of the inventory estimates for mobile sources come from limitations in the modeled emission factors (based on emission factor testing and models predicting overall fleet emission factors in g/mile) and also in the estimated vehicle miles traveled for each vehicle class (derived from Department of Transportation data).

For nonroad emissions, the estimates come from a model using equipment inventories, emission factors per hour or unit of work, and an estimate of usage. This nonroad emissions model accounts for over 200 types of nonroad equipment. Any limitations in the input data will carry over into limitations in the emission inventory estimates.

Additional information about data integrity for the MOVES/MOBILE6 and NONROAD models is available at <https://www.epa.gov/moves>

When the method for estimating emissions changes significantly, older estimates of emissions in years prior to the most recent year may be revised to be consistent with the new methodology when possible.

Methods for estimating emission inventories are frequently updated to reflect the most up-to-date inputs and assumptions. Past emission estimates that inform our performance measures frequently do not keep pace with the changing inventories associated with more advanced information.

4c. Third-Party Audits:

All of the inputs for the models, the actual models, and the resultant emission inventories are reviewed as appropriate by academic experts and, also, by state/local governments who may use some of this information for their State Implementation Plans to meet the National Ambient Air Quality Standards.

Measure Code: M91 - Cumulative percentage reduction in population-weighted ambient concentration of fine particulate matter (PM-2.5) in all monitored counties from 2003 baseline.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

1 - Reduce Criteria Pollutants and Regional Haze

Strategic Target Code and Title:

2 - By 2018, concentrations of inhalable fine particles in monitored counties will decrease to 10.5 µg/m³

Managing Office:

Office of Air Quality Planning and Standards

1a. Performance Measure Term Definitions:

Population-weighted: The ambient concentration multiplied by total county population, using constant population values for all years.

Ambient concentration: The highest reported site-level annual standard design value; i.e., the 3-year average annual mean 24-hour average concentration of PM-2.5.

Fine particulate matter (PM 2.5): Particles with a diameter of 2.5 microns or less.

Monitored counties: The counties in the current time-frame with at least one site meeting completeness criteria that also were present in the base period (i.e., contained at least one complete site in the period 2001-2003).

2a. Original Data Source:

State and local agency data are from State and Local Air Monitoring Stations (SLAMS). Population data are from the Census Bureau/Department of Commerce (2000 Census)

2b. Source Data Collection:

Source Data Collection Methods: Field monitoring; survey (2000 Census)

Date/Time Intervals Covered by Source Data: 2003 to present (for air pollution data). 2000 (for census data)

EPA QA Requirements/Guidance Governing Collection: To ensure quality data, the SLAMS are required to meet the following: 1) each site must meet network design and site criteria; 2) each site must provide adequate QA assessment, control, and corrective action functions according to minimum program requirements; 3) all sampling methods and equipment must meet EPA reference or equivalent requirements; 4) acceptable data validation and record keeping procedures must be followed; and 5) data from SLAMS must be summarized and reported annually to EPA. Finally, there are system audits that regularly review the overall air quality data collection activity for any needed changes or corrections. Further information is available at <https://www3.epa.gov/ttnamti1/files/ambient/pm25/qa/QA-Handbook-Vol-II.pdf> and through United States EPA's Quality Assurance Handbook (EPA-454/R-98-004 Section 15).

Geographical Extent of Source Data: National

Spatial Detail Covered by the Source Data: 437 counties in the 48 continental States plus D.C.

2c. Source Data Reporting:

State, local and tribal air pollution control agencies submit data within 30 days after the end of each calendar quarter. The data can be submitted in one of three different formats, and is submitted using an Exchange Network Node or the Agency's Central Data Exchange web interface. The submitted data are then quality assured and loaded into the AQS database.

3a. Relevant Information Systems:

The Air Quality Subsystem (AQS) stores ambient air quality data used to evaluate an area's air quality levels relative to the National Ambient Air Quality Standards (NAAQS).

AQS has been enhanced to comply with the Agency's data standards (e.g., latitude/longitude, chemical nomenclature).

AQS stores the as-submitted source data and data that are aggregated to the daily, monthly, quarterly and annual values by the system.

3b. Data Quality Procedures:

The AQS QA/QC process also involves participation in the EPA's National Performance Audit Program (NPAP), system audits, and network reviews. See <https://www3.epa.gov/ttnamti1/npaplist.html> for more information. Under NPAP, all agencies required to report gaseous criteria pollutant data from their ambient air monitoring stations to EPA's Air Quality System (AQS) for comparison to the National Ambient Air Quality Standard (NAAQS) are required to participate in EPA's NPAP TTP program. Guidance for participating in this program requires NPAP audits of at least 20% of a Primary Quality Assurance Organization's (PQAO's) sites each year; and all sites in 5 years.

3c. Data Oversight:

National Air Data Group [Outreach and Information Division, OAQPS] oversees operations of the Air Quality System, the database used to store and deliver the source data.

Air Quality Monitoring Group [Air Quality Assessment Division (AQAD), OAQPS] oversees the monitoring and quality assurance of the source data.

Air Quality Analysis Group (AQAG) [AQAD, OAQPS] oversees the transformation and data reporting aspects associated with the calculation of this performance measure.

3d. Calculation Methodology:

Explanation of Calculations: Air quality levels are evaluated relative to the baseline level and the design value. The change in air quality concentrations is then multiplied by the number of people living in the county.

Explanation of Assumptions: Design values are calculated for every county with adequate monitoring data. For PM_{2.5}, the design value is a three-year average of the annual average concentrations, consistent with the national ambient air quality standard. The design value can vary over time due to changes in pollutant emissions and meteorological conditions. The three-year average is used to help mitigate the influence of meteorology which can vary greatly from one year to the next. For more information on design values, including a definition, see <https://www.epa.gov/air-trends/air-quality-design-values> This analysis assumes that the populations of the areas are held constant at 2000 Census levels. Data comparisons over several years allow assessment of the air program's success.

Unit of analysis: Cumulative percent reduction in population-weighted ambient concentration

4a. Oversight and Timing of Final Results Reporting:

Air Quality Analysis Group (AQAG) [AQAD, OAQPS] oversees the transformation and data reporting aspects associated with the Calculation of this performance measure.

4b. Data Limitations/Qualifications:

There is uncertainty in the projections and near term variations in air quality (due to meteorological conditions, for example).

4c. Third-Party Audits:

Information on the National Performance Evaluation Program (NPEP) can be accessed at <https://www3.epa.gov/ttnamti1/npepqa.html> The NPEP is independent assessment that includes: site characterization and network reviews, technical systems audits and performance evaluations. Performance evaluations (PE) are a type of audit in which the quantitative data generated in a measurement system are obtained independently and compared with routinely obtained data to evaluate the proficiency of an analyst or laboratory.

Measure Code: M9 - Cumulative percentage reduction in population-weighted ambient concentration of ozone in monitored counties from 2003 baseline.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

1 - Reduce Criteria Pollutants and Regional Haze

Strategic Target Code and Title:

1 - By 2018, concentrations of ozone (smog) in monitored counties will decrease to .073 ppm

Managing Office:

Office of Air Quality Planning and Standards

1a. Performance Measure Term Definitions:

Population-weighted: Multiply (or weight) these concentrations by the number of people living in the county where the monitor is located. The population estimates are from the U.S. Census Bureau (2000 decennial census).

Ambient concentration: EPA tracks improvements in air quality on an annual basis by measuring the change in ambient air quality concentrations of 8-hour ozone in counties with monitoring data weighted by the number of people living in these counties. This measure makes use of actual, observed changes in ambient ozone levels over time to determine NAAQS program effectiveness. Three year averages of the 4th highest daily maximum ozone values (i.e., design values) are used to help mitigate the influence of meteorology which would otherwise confound measurement of actual program progress.

Ozone: Ozone (O₃) is a gas composed of three oxygen atoms. It is not usually emitted directly into the air, but at ground-level is created by a chemical reaction between oxides of nitrogen (NO_x) and volatile organic compounds (VOC) in the presence of sunlight.

Monitored counties: Calculate 8-hour ozone design values for 2001-2003 for every county with adequate monitoring data. A monitoring site's design value for 8-hour ozone is expressed as the average of the fourth-highest daily maximum 8-hour average ozone concentration for each of three consecutive years. A county's design value is the highest of these site-level design values. The national ozone monitoring network conforms to uniform criteria for monitor siting, instrumentation, and quality assurance.

2a. Original Data Source:

State and local agency data are from State and Local Air Monitoring Stations (SLAMS). Population data are from the Census Bureau/Department of Commerce (2000 Census)

2b. Source Data Collection:

Source Data Collection Methods: Field monitoring; survey (2000 Census)

Date/time intervals covered by source data: 2003 to present (for air pollution data). 2000 (for census data)

EPA QA requirements/guidance governing collection: To ensure quality data, the SLAMS are required to meet the following: 1) each site must meet network design and site criteria; 2) each site must provide adequate QA assessment, control, and corrective action functions according to minimum program requirements; 3) all

sampling methods and equipment must meet EPA reference or equivalent requirements; 4) acceptable data validation and record keeping procedures must be followed; and 5) data from SLAMS must be summarized and reported annually to EPA. Finally, there are system audits that regularly review the overall air quality data collection activity for any needed changes or corrections. Further information is available at <https://www3.epa.gov/ttnamti1/files/ambient/pm25/qa/QA-Handbook-Vol-II.pdf> from United States EPA's Quality Assurance Handbook (EPA-454/R-98-004 Section 15).

Geographical Extent of Source Data: National

Spatial Detail Covered by the Source Data: State, local, and tribal air pollution control agencies

2c. Source Data Reporting:

State, local, and tribal air pollution control agencies submit data within 30 days after the end of each calendar quarter. The data can be submitted in one of three different formats, and is submitted using an Exchange Network Node or the Agency's Central Data Exchange web interface. The submitted data are then quality assured and loaded into the AQS database.

3a. Relevant Information Systems:

The Air Quality Subsystem (AQS) stores ambient air quality data used to evaluate an area's air quality levels relative to the National Ambient Air Quality Standards (NAAQS).

AQS has been enhanced to comply with the Agency's data standards (e.g., latitude/longitude, chemical nomenclature).

AQS stores the as-submitted source data and data that are aggregated to the daily, monthly, quarterly and annual values by the system.

3b. Data Quality Procedures:

AQS: The QA/QC of the national air monitoring program has several major components: the Data Quality Objective (DQO) process, reference and equivalent methods program, EPA's National Performance Audit Program (NPAP), system audits, and network reviews. See www.epa.gov/ttn/amtic/npaplist.html

The AQS QA/QC process also involves participation in the EPA's National Performance Audit Program (NPAP), system audits, and network reviews. Please see www.epa.gov/ttn/amtic/npaplist.html for more information. Under NPAP, all agencies required to report gaseous criteria pollutant data from their ambient air monitoring stations to EPA's Air Quality System (AQS) for comparison to the National Ambient Air Quality Standard (NAAQS) and are required to participate in EPA's NPAP TTP program. Guidance for participating in this program requires NPAP audits of at least 20% of a Primary Quality Assurance Organization's (PQAO's) sites each year; and all sites in 5 years.

3c. Data Oversight:

National Air Data Group [Outreach and Information Division, OAQPS] oversees operations of the Air Quality System, the database used to store and deliver the source data.

Air Quality Monitoring Group [Air Quality Assessment Division (AQAD), OAQPS] oversees the monitoring and quality assurance of the source data.

Air Quality Analysis Group (AQAG) [AQAD, OAQPS] oversees the transformation and data reporting aspects associated with the Calculation of this performance measure.

3d. Calculation Methodology:

Decision Rules for Selecting Data:

All available air quality measurement data is included in the Design Value calculations except as indicated below:

1. Individual measurements that are flagged as being exceedances caused by “Exceptional Events” (as defined in 40 CFR Part 50.14) and that are concurred by the EPA Regional Office are excluded.

Definitions of Variables:

For each AQS monitor, the following variables are calculated:

8-Hour Average: Arithmetic mean of eight consecutive hourly measurements, with the time for the average defined to be the begin hour. (There will be 24 8-hour averages for each day.)

Daily Maximum: The maximum 8-hour average for the calendar day.

Annual 4th Maximum: The fourth highest daily maximum for the year.

Three-Year Design Value: The average of the annual 4th maxima for the three year period.

Explanation of Calculations: Air quality levels are evaluated relative to the baseline level and the design value. The change in air quality concentrations is then multiplied by the number of people living in the county.

Explanation of Assumptions: Design values are calculated for every county with adequate monitoring data. For ozone, the design value is a three-year average of the annual 4th maxima in each year, consistent with the national ambient air quality standard. The design value can vary over time due to changes in pollutant emissions and meteorological conditions. The three-year average is used to help mitigate the influence of meteorology which can vary greatly from one year to the next. For more information on design values, including a definition, see <https://www.epa.gov/air-trends/air-quality-design-values> This analysis assumes that the populations of the areas are held constant at 2000 Census levels. Data comparisons over several years allow assessment of the air program’s success.

Unit of analysis: Cumulative percent reduction in population-weighted ambient concentration

4a. Oversight and Timing of Final Results Reporting:

Director, Central Operations and Resources Staff, OAQPS

4b. Data Limitations/Qualifications:

There is uncertainty in the projections and near term variations in air quality (due to meteorological conditions, for example).

4c. Third-Party Audits:

Information on the National Performance Evaluation Program (NPEP) can be accessed at <http://www3.epa.gov/ttnamti1/npepqa.html> The NPEP is independent assessment that includes: site characterization and network reviews, technical systems audits and performance evaluations. Performance evaluations (PE) are a type of audit in which the quantitative data generated in a measurement system are obtained independently and compared with routinely obtained data to evaluate the proficiency of an analyst or laboratory.

Measure Code: G16 - Million metric tons of carbon equivalent (MMTCO₂E) of greenhouse gas reductions in the industry sector.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

1 - Address Climate Change

Sub-Objective Number and Title:

1 - Address Climate Change

Strategic Target Code and Title:

2 - Additional programs from across EPA will promote practices to help Americans save energy and conserv

Managing Office:

Office of Atmospheric Programs

1a. Performance Measure Term Definitions:

Carbon equivalent of Greenhouse Gas Emissions: Carbon dioxide (CO₂) is the base of the global warming potential (GWP) system and has a GWP of 1. All other greenhouse gases' ability to increase global warming is expressed in terms of CO₂. Starting with 2013 Actual and 2016 Target values, GWPs are based on the Intergovernmental Panel on Climate Change's Fourth Assessment Report instead of Second Assessment Report GWPs. The CO₂e for a gas is derived by multiplying the tons of the gas by that gas's GWP. Commonly expressed as "million metric tons of carbon dioxide equivalents" (MMTCO₂e).

Industry Sector: The sectors captured in this measure are inclusive of energy, agriculture, waste, manufacturing and other industrial sectors. Combined, these sectors generate more than a third of the nation's annual GHG emissions. Source: U.S. Greenhouse Gas Inventory Report: 1990-2014.

<https://www.epa.gov/ghgemissions/us-greenhouse-gas-inventory-report-1990-2014> through EPA's voluntary programs, the industrial sector is making cost-beneficial reductions in GHG emissions. Industrial sector emissions are produced either from a process itself, from the energy consumed during the process, or to produce electricity. For example, raw materials can be chemically or physically transformed from one state to another. This transformation can result in the release of greenhouse gases such as carbon dioxide (CO₂) and methane (CH₄). In addition, greenhouse gases are often used in products or by end-consumers. These gases include industrial sources of man-made compounds such as hydrofluorocarbons (HFCs), perfluorocarbons (PFCs), and sulfur hexafluoride (SF₆).

Industry Sector Performance Measure programs include:

1. ENERGY STAR for Industry which promotes improvement in energy performance across industrial plants.
2. Green Power Partnership (GPP) encourages U.S. organizations to voluntarily purchase green power.
3. Combined Heat and Power Partnership (CHPP) reduces the environmental impact of power generation by encouraging the use of CHP.
4. Natural Gas STAR works with oil and natural gas companies to promote proven, cost-effective technologies and practices that improve operational efficiency and reduce methane emissions.
5. Coalbed Methane Outreach Program (CMOP) is a voluntary program with the goal of reducing methane emissions from coal mining activities.
6. Landfill Methane Outreach Program (LMOP) reduces GHG emissions at landfills by supporting the recovery and beneficial use of landfill gas as a renewable energy resource.

7. AgSTAR encourages the use of methane (biogas) recovery technologies at confined animal feeding operations that manage manure as liquids or slurries.
8. OAP's Stewardship Programs work closely with participating industries to identify voluntary, cost-effective reductions in fluorinated greenhouse gases (FGHG). Throughout the years, partnership programs have existed for HCFC-22 producers, semiconductor manufacturers, electrical transmission and distribution system operators, and magnesium producers and processors. Starting with 2012 actual and 2015 target values, this performance measure reflect only the SF6 Emission Reduction Partnership for Electric Power Systems (SF6 EPS). SF6 EPS partners with electric power transmission and distribution companies to reduce emissions of SF6, which is used as a gaseous dielectric in high-voltage circuit breakers and gas-insulated substations.
9. Voluntary Aluminum Industry Partnership (VAIP) partners with industry to reduce PFCs, tetrafluoromethane, and hexafluoro-ethane where cost-effective technologies and operational practices are technically feasible.
10. Significant New Alternatives Policy Program (SNAP) facilitates smooth transition away from ozone-depleting chemicals in industrial and consumer sectors.
11. Responsible Appliance Disposal Program (RAD) reduces emissions of refrigerant and foam-blowing agents from end-of-life appliances.
12. GreenChill Advanced Refrigeration Partnership (Greenchill) reduces ozone-depleting and GHG refrigerant emissions from supermarkets.
13. New Source Performance Standards and Emission Guidelines for municipal solid waste landfills (Landfill Air Regulations) limits GHG emissions by limiting landfill gas emissions from landfills that are at least 2.5 million megagrams in size. Landfill gas is approximately 50% methane.

Additional Information:

The accomplishments of many of EPA's voluntary programs are documented in the Office of Atmospheric Programs Climate Protection Partnerships Annual Reports. EPA climate

2a. Original Data Source:

Data sources used to support the program-specific methodologies (described in section 3d) include partner reports on facility-specific improvements (e.g. space upgraded, kilowatt-hours (kWh) reduced), national market data from industry and federal sources, and performance measurements for the technology and practices advanced by the program. In 2011, EPA's Greenhouse Gas Reporting Program began providing annual facility level data across multiple sectors.

2b. Source Data Collection:

Source data used in the program-specific methodologies (described in section 3d) is collected from a variety of sources including partner reports and published market and performance data from industry and federal sources. Some data sources are considered confidential business information, while others are publicly available. Where appropriate, programs have information collection requests (ICRs) to support the collection of data to inform the estimation of program benefits.

Several programs have replaced the partnership collected data with data from the Greenhouse Gas Reporting Program (GHGRP) where the respective industries are subject to mandatory reporting through the GHGRP. The 2013 GHGRP data set includes public information from facilities in industry groups that directly emit large quantities of GHGs, as well as suppliers of certain fossil fuels and industrial gases. GHGRP is based on regulatory requirements in the Greenhouse Gas Reporting Rule (40 CFR Part 98).

2c. Source Data Reporting:

For many voluntary programs, source data reporting is part of the program's partnership agreement with participants. Partners report their data into EPA information systems or through alternative electronic or paper formats. Data from other industry and federal sources is not reported to EPA, but instead gathered by EPA or EPA contractors. Regulatory programs report results from their assessments and modeling used in the development of regulations.

3a. Relevant Information Systems:

Information systems have been designed and maintained to support primary data collection and data management specific to the needs of individual programs. Such data is transformed to GHG emissions reductions within spreadsheets or models, according to the methodology described in 3d. Climate Protection Partnerships Division compiles annual greenhouse gas emissions reduction actuals and targets using this transformed data from the programs.

3b. Data Quality Procedures:

The Industry sector includes a variety of programs. Data Quality procedures vary by program as follows:

The soundness of the data used for ENERGY STAR for Industry's energy consumption modeling is ensured through the peer-review process prior to journal publication. The data and calculations employed in the post-model estimation analyses are thoroughly reviewed by EPA staff and outside consultants.

GPP receives annual reports from GPP partners and green power providers, verifying annual green power purchases and/or onsite generation. Internally, EPA, with contractor support, verify data entry into its customer relationship management database which includes dashboards to review data quality.

CHPP receives annual reports from CHPP partners, and the reported data is reviewed for reasonableness, vetted using market research and industry publications, and compared to federally-funded CHP installation database. Any discrepancies are investigated and resolved.

Natural Gas STAR reviews each Annual Report from partners to ensure that all reductions data are accurate and non-regulatory in nature. Any inconsistencies are resolved through direct correspondence with the appropriate partner company. As appropriate, these data are omitted or adjusted prior to their inclusion in the Natural Gas STAR Program annual totals.

CMOP data is reviewed, analyzed, and compared with previous year(s) and across various sources to ensure quality.

LMOP verifies the landfill gas energy project data after the collection process and resolves inconsistencies with the appropriate partner company.

Each AgSTAR submission is reviewed to ensure that the data is reasonable and does not conflict with other publicly-reported data for that facility. Any inconsistencies are resolved through direct correspondence with the facility owner or operator. As appropriate, these data are omitted or adjusted prior to their inclusion in the AgSTAR Program annual totals.

VAIP and Stewardship Programs (SF6 EPS) uses data collected through the GHGRP is based on regulatory requirements in the Greenhouse Gas Reporting Rule (40 CFR Part 98). This regulation has specific Quality Assurance/Quality Control and data quality reporting requirements for the data submitted to EPA. The agency

conducts a thorough verification process for all data received including automated data quality checks using a verification tool and analyses of data, and works directly with reporting facilities to address any issues that arise.

As part of the annual review of the Inventory of U.S. GHG Emissions and Sinks, the inputs and assumptions of SNAP's Vintaging Model are first reviewed by industry and government experts before being submitted to the United Nations Framework Convention on Climate Change, where it undergoes an additional review for data quality.

RAD's reporting form features tabs for quality assurance, including typical reported average quantities across partners. Aggregated totals from all partners are published and provided so that partners can assess the reasonableness of those totals and benchmark their own data.

To ensure quality of data calculations, each GreenChill partner is given a report to double-check their individual corporate-wide emissions rates. Partnership averages are provided so that partners can assess the reasonableness of those averages, benchmark their own emission rates, and set goals to improve.

The two data sources used by the Landfill Rule were compared with one another to assess which source to use and resolve inconsistencies in the dataset. Further, the GHGRP data went through an internal data verification process prior to getting used in this dataset. Several automated data checks were employed to ensure that various model inputs related to one another and that data gaps could be filled based on a practical set of assumptions.

3c. Data Oversight:

Oversight differs by program:

- The ENERGY STAR Commercial and Industrial Branch is responsible for overseeing the data used in the multivariate statistical models used by the ENERGY STAR for Industry program.
- The Non-CO2 Program Branch is responsible for overseeing (1) source data reporting and (2) the information systems utilized in producing the performance result for Methane Programs, Stewardship Programs, HFC-23 Partnerships, and VAIP programs.
- The Energy Supply & Industry Branch is responsible for overseeing (1) source data reporting and (2) the information systems utilized in producing the performance result for the Combined Heat and Power and Green Power Partnership programs.
- The Alternatives and Emissions Reduction Branch is responsible for overseeing (1) source data reporting and (2) the information systems utilized in producing the performance result for the GreenChill Partnership, RAD, and SNAP Programs.
- Fuels and Incineration Group, OAQPS's Sector Policies and Programs Division is responsible for overseeing data input. Risk Benefits Group, OAQPS's Health and Environmental Impacts Division is responsible for regulatory impact analysis used to estimate benefits.

3d. Calculation Methodology:

To present the most realistic estimates of program benefits, OAP employs a common analytical framework across all of the individual voluntary programs. A key aspect of this framework is that benefits represent the results attributable to EPA efforts above pre-existing trends or business-as-usual (BAU) scenarios. Program methods address potential double counting with other federal programs, the efforts of third-party actors, and other program-specific market effects. Annual benefits reflect investments that occurred during the year, as well as those benefits that persist during that year from investments made in previous years.

Approaches specific to program strategy, sector, availability of data, and market characteristics include:

ENERGY STAR for Industry calculates impacts by applying carbon dioxide emissions factors, as applicable, to net annual electricity and fossil fuel savings attributable to the program. For electricity, a national marginal carbon emissions factor is assumed to reflect power plants which will run incrementally less due to energy efficiency. The emissions factors for natural gas, petroleum and coal are based on on-site fuel combustion. To calculate energy savings, EPA uses the data from the U.S. Department of Commerce's Annual Survey of Manufactures as the basis for developing multivariate statistical models that estimate the change in national electricity consumption, and fuel expenditures for 184 manufacturing industries in aggregate as a result of publically-funded energy efficiency programs. The details of this methodology are published in the peer-reviewed, international scientific journal *Energy Efficiency* (Marvin J. Horowitz, "Purchased Energy and Policy Impacts in the U.S. Manufacturing Sector," 2013, DOI 10.1007/s12053-013-9200-3).

GPP calculates impacts by a national, marginal carbon emissions factor to total annual green power purchases reported by program partners. Partners' annual purchases reflect eligible green power generated during the reporting period. Energy savings goals were estimated by applying a steady growth rate to program savings based on an informed examination of the opportunity for emissions reductions from green power.

CHPP calculates GHG emissions reductions by subtracting the estimated emissions from specific CHP systems from the estimated emissions of the conventional electricity and thermal sources (i.e., electric power grid and comparable boilers) displaced by those systems. CHP system emissions are calculated using fuel-specific emissions factors and operational data provided by CHPP partners, who contributed to the development of the system. Emissions from displaced systems are calculated using a national marginal carbon emissions factor for grid-supplied electricity and fuel-specific, emissions factors for boiler-produced thermal energy (i.e., steam or hot water). Each project's CO₂ benefit is calculated individually accounting for its actual start-up date. Each project receives a credit for avoided transmission and distribution (T&D) losses based on a published national loss factor, reduced based on the amount of electricity supplied to the grid by the CHP system. Emission reduction goals were estimated by applying a steady growth rate to program savings based on an informed examination of the opportunity for emissions reductions from CHP.

Natural Gas Star calculates its annual emission reductions achieved based on 100% of the emissions reductions reported to the Program by program partners, who submit methane emission reduction data to EPA annually. Partner companies have the option of using default calculation methodologies or company-specific methodologies, which must be documented on their annual reports. For program goals, Natural Gas Star uses a marginal abatement cost (MAC) curve analysis to estimate program impacts analysis with adjustments made to the MAC model to constrain abatement potential based on GasSTAR market penetration by segment.

CMOP annually measures accomplishments using a metric of emissions reductions achieved from coal mine methane recovery projects in the U.S. The program uses a tiered system applied to total emission reductions from active underground and abandoned mines. Weightings of 90%, 70%, and 40% are applied to each project's reductions, depending on CMOP's level of involvement. For program goals, CMOP uses a MAC curve analysis to estimate program impacts.

LMOP calculates annual direct and indirect emissions reductions from projects for which the program provides assistance, technical information, and/or where there is partner involvement in implementing the project. For operational landfill gas (LFG) energy projects, the database includes the estimated capacity of each electricity project and the estimated amount of LFG utilized by each direct-use project, that are used in the calculations to determine annual emission reductions. For program goals, LMOP uses a MAC curve analysis to estimate only direct program impacts.

AgSTAR calculates annual direct and indirect emission reductions achieved based on 40% of the emissions reductions voluntarily reported to the program by industry members on a quarterly basis. Industry members provide facility-level data and the corresponding emissions reductions are calculated using Intergovernmental Panel on Climate Change methodologies. These data are used to determine Program emission reduction totals and measure the overall effectiveness of the AgSTAR Program. For program goals, AgSTAR uses a MAC curve analysis to estimate only direct program impacts.

VAIP estimates emissions of PFCs based on the smelter-specific correlation between measured PFC emissions and operating parameters, weighted by activity data. VAIP program achievements are calculated as the difference between annual estimated emissions under “Business as Usual” practices (based on emission rates from 1990 and activity data from the current year) and current annual emissions as reported under the program. For program goals, VAIP uses a MAC curve analysis to estimate program impacts.

The SF6 EPS program uses a facility-specific mass-balance methodology which works by tracking and systematically accounting for all company uses of SF6 during the reporting year. This method is provided by the 2006 Intergovernmental Panel on Climate Change Guidelines as the Tier 3 approach for estimating emissions from electrical transmission and distribution facilities. OAP calculates program achievements as the difference between annual estimated emissions under business-as-usual practices and annual reported emissions under the program. For program goals, EPA used a MAC curve analysis to estimate program impacts.

SNAP estimates GHG emissions reductions by using vintage modeling (which is described in Inventory of U.S. GHG Emissions and Sinks). Consumption and emission of ozone depleting substance (ODS) substitutes are modeled by estimating the size of the markets, the uptake of non-ODS substitutes within each end-use, changes in technologies, and emissions factors. To determine emissions reductions, EPA compares two Vintage Model Scenarios: (1) estimates of emissions assuming all requirements under Title VI of CAA; and (2) estimates of emissions assuming the ODS phase out occurs in compliance with the Montreal Protocol on Substances that Deplete the Ozone Layer (developed as a business-as-usual scenario assuming that trends that were in place prior to establishment of SNAP continue).

RAD estimates emission reductions based on partner reports that detail the number of appliances and pounds of chemical reclaimed and destroyed. Results are adjusted to account for the recycling of durable components (metal, plastic, glass) that also occurs under RAD program, using EPA’s Waste Reduction Model (WARM). A weighted average OAP previously only reported emissions reductions to include HFCs. Starting with 2013 actual and 2016 goals, OAP will also include GHG mitigation benefits specific to the reduced emissions of ozone depleting substances.

GreenChill compares average partner emissions to national average for typical U.S. supermarkets. Past emission reductions from the partnership are then taken as the difference of the typical U.S. store and the partnership average store, multiplied by the number of stores represented by the data provided by partners. For program goals, GreenChill assumes that the market share represented by all GreenChill partners increases annually based on the historical growth rate. Starting with 2013 actuals and 2016 targets, EPA includes GHG mitigation benefits specific to the reduced emissions of ODS attributable to the program.

Landfill Rule estimates GHG emissions co-benefits based on a modeling approach also used to support the New Source Performance Standards and Emission Guidelines (NSPS/EG) for municipal solid waste landfills which was first promulgated in 1996. EPA estimates annual methane emissions for each landfill in a landfill database using a first-order decay equation to model the emissions from each landfill over time. Inputs to the model include landfill-specific waste data from the database and emission factors for nonmethane organic compounds (NMOC). Methane reductions resulting from controls installed under NSPS/EG regulations were calculated by determining when the modeled NMOC emissions from each landfill exceeded the emission thresholds specified in the regulation. Currently, the regulations require landfills of at least 2.5 million megagrams (Mg) and 2.5 cubic meters in size with estimated NMOC emissions of at least 50 Mg per year to collect and control LFG. EPA estimated emission reductions in terms of the amount of methane combusted, which was calculated by multiplying the modeled LFG collected amount by a destruction efficiency of 98 percent. Starting with 2013 Actuals and 2015 Targets, mitigation estimates for Landfill Air Regulations are reported in consistent carbon equivalent units.

4a. Oversight and Timing of Final Results Reporting:

Oversight differs by program:

- Branch Chief, ENERGY STAR Commercial and Industrial Branch is responsible for overseeing final reporting for the ENERGY STAR for Industry program.
- Branch Chief, Non-CO2 Program Branch is responsible for overseeing final reporting for Methane Programs, Stewardship Programs, and the Voluntary Aluminum Industry Partnership Program.
- Branch Chief, Energy Supply & Industry Branch is responsible for overseeing final reporting for the Combined Heat and Power and Green Power Partnership programs.
- Branch Chief, Alternatives and Emissions Reduction Branch is responsible for overseeing final reporting for the GreenChill Partnership, the Responsible Appliance Disposal, and SNAP Program.
- Fuels and Incineration Group, OAQPS's Sector Policies and Programs Division is responsible for overseeing final reporting for air regulation GHG co-benefits.

Timing: Actual values are typically available in December of the year following the reporting year.

4b. Data Limitations/Qualifications:

These are indirect measures of GHG emissions (carbon conversion factors and methods to convert material-specific reductions to GHG emissions reductions). Although EPA devotes considerable effort to obtaining the best possible information on which to evaluate emissions reductions from its regulatory and voluntary programs, errors in the performance data could be introduced through uncertainties in carbon conversion factors, engineering analyses, econometric analyses, and the voluntary nature of reporting for some programs. Where uncertainties exist, EPA uses the best available information and practices that yield conservative benefit estimates.

4c. Third-Party Audits:

The Administration regularly evaluates the effectiveness of its climate programs through interagency evaluations, including interagency evaluations led by the White House Council on Environmental Quality to

examine the status of U.S. climate mitigation programs. These reviews include participants from EPA and the Departments of State, Energy, and Agriculture, as well as other agencies. The results are published in the United States' submission to the United Nations Framework Convention on Climate Change (UNFCCC). The first evaluation was published in the U.S. Climate Action Report-1997. EPA's Office of the Inspector General (IG) and the U.S. Government Accountability Office also review programs on an adhoc basis. For example, a 1997 IG audit concluded that the climate programs examined "used good management practices" and "effectively estimated the impact their activities had on reducing risks to health and the environment..."

Measure Code: G06 - Million metric tons of carbon equivalent (MMTCO₂E) of greenhouse gas reductions from EPA's voluntary SmartWay Transport Partnership.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

1 - Address Climate Change

Sub-Objective Number and Title:

1 - Address Climate Change

Strategic Target Code and Title:

2 - Additional programs from across EPA will promote practices to help Americans save energy and conserv

Managing Office:

Office of Transportation and Air Quality

1a. Performance Measure Term Definitions:

Carbon equivalent of Greenhouse Gas Emissions: Carbon dioxide (CO₂) is the base of the global warming potential (GWP) system and has a GWP of 1 Commonly expressed as "million metric tons of carbon dioxide equivalents" (MMTCO₂e). Emissions savings reported for the program represent cumulative emission reductions since the inception of the program.

2a. Original Data Source:

Data on the effects of EPA regulatory programs on baseline transportation emissions are obtained from EPA's Motor Vehicle Emissions Simulator (MOVES) model. Partners provide information annually on freight transportation activity, principally fuel consumed, miles travelled, and tons of freight moved. Data Collection is ongoing, as new partners join and existing partners are retained.

2b. Source Data Collection:

Partners report annually on their transportation activity using spreadsheet-based calculator tools tailored to the different types of partners: carriers, shippers, and logistics providers.

2c. Source Data Reporting:

Data Submission Instrument. Partner data are submitted in spreadsheet-based calculator tools tailored to the different types of partners: carriers, shippers, and logistics providers. The tools were developed in consultation with the partners, and were subjected to scientific peer review. The tools have reasonableness ranges for many of the inputs, enabling year-over-year comparisons to highlight possible erroneous entries. Data Entry Mechanism. Tools are reviewed for reasonableness, converted to XML format, and uploaded to the SmartWay Database.

Frequency of Data Transmission to EPA. SmartWay partners report annually.

Timing of Data Transmissions to EPA. Partner reporting is staggered throughout the calendar year by partner type to enable carrier data, reported first, to populate a carrier data file, which is used to calculate emissions for logistics and shipper partners, who report later.

3a. Relevant Information Systems:

System Description: Partners submit data to SmartWay in a spreadsheet-based reporting tool, and the data are uploaded in XML format to an Oracle database containing all partner source data from the tools, including prior year data.

Source/Transformed Data: The SmartWay Database contains source and modeled data. The source data is activity data provided by the SmartWay Partners including distance driven, fuel consumption, payload, and volume information. The modeled data is emission performance data calculated by the SmartWay Excel-based tools.

Information System Integrity Standards: The contractor used standard Life Cycle techniques and EPA Application Deployment Checklist application guidelines when developing the current SmartWay system. The system was designed and developed to meet the recommendations described in NIST SP 800-53, Recommended Security Controls for Federal Information Systems and Organizations. Specifically:

- The contractor applies security patches as they become available from the vendor.
- The contractor changes the internal database passwords every three months.
- Passwords are encrypted using the SHA algorithm, which is specified by National Institute of Standards and Technology (NIST) FIPS-180-2.
- User permissions are defined via user roles. Only users with a role of Administrator can access Administrator functions/pages. Each restricted script/page verifies the user's role before execution.
- Attempts at unauthorized access are recorded in an application audit table in the Oracle database.
- Information that is entered by users is quality assured to prevent both Cross Site Scripting and SQL injection before it is entered into the database system.

The contractor maintains an offsite weekly backup of the Oracle database.

3b. Data Quality Procedures:

For transportation emissions, data is calculated from operation activity (vehicle class, fuel type and use, miles driven, payload weights). Partner activity metrics were developed and peer reviewed according to EPA peer review requirements. Peer-reviewed carbon-conversion factors are used to ensure consistency with generally accepted measures of greenhouse gas (GHG) emissions, and peer-reviewed methodologies are used to calculate GHG reductions from these programs. EPA has instituted a Data Verification Program with periodic visits to selected partners to review data management practices. EPA has also published an industry-reviewed guidance on best practices in data management for SmartWay partners and communicated this information through webinars.

3c. Data Oversight:

Source Data Reporting:

Title/Position (Including Organizational Affiliation) of EPA Oversight Personnel.

Supervisory Environmental Protection Specialist, Transportation and Climate Division (TCD) is program manager, with overall oversight responsibility.

Environmental Scientist, TCD, is responsible for maintaining data results and program goals and results.

Environmental Engineer, TCD, is responsible for maintaining the information systems (partner forms and data base.)

Partner Account Managers, TCD, review tools for reasonableness and resolve any errors flagged by the tools' internal quality checks.

Roles/Responsibilities of EPA Oversight Personnel.

Partner Account Managers perform the initial quality checks on the tools. The Environmental Scientist and Environmental Engineer review partner data for year-over-year trends and outliers, to spot potential errors and to assess the direction and success of the program.

Information Systems:

Title/Position (Including Organizational Affiliation) of EPA Oversight Personnel.

Supervisory EPS, Transportation and Climate Division (TCD) is program manager, with overall oversight responsibility.

Environmental Scientist, TCD, is responsible for maintaining data results and program goals and results.

Environmental Engineer, TCD, is responsible for maintaining the information systems (partner forms and data base.)

The SmartWay Database is maintained by a contractor. The Environmental Engineer manages the work assignment under which the database is maintained, with backup from the Environmental Scientist.

Roles/Responsibilities of EPA Oversight Personnel.

Partner Account Managers perform the initial quality checks on the tools. The Environmental Scientist and Environmental Engineer review partner data for reasonableness, and to assess the direction and success of the program.

3d. Calculation Methodology:

Decisions Rules for Selecting Data.

All data reported by each carrier on fuel consumed, miles traveled, ton-miles traveled, and average payload are used in the calculations.

Definition of Variables.

The reporting tools contain entry fields with labels indicating what data are desired. These fields correspond to fields in the Database to which the data are uploaded after undergoing quality checks.

Explanation of the Calculations.

Emission reductions are calculated as the product of fuel saved and a fuel-specific emission factor (e.g., metric tons carbon equivalent (MMTCE) prevented per gallon of diesel fuel saved).

Total miles, ton-miles, fuel savings and CO2 emissions are calculated from reported partner data by vehicle class. These data are compared to MOVES estimates, for the same year, of the national average fuel consumption and CO2 emissions for each vehicle class assuming the same miles driven, in each class, as in the data reported by SmartWay partners. National average payload data, obtained from R.L. Polk, is used to estimate ton-miles for the national average vehicles.

Explanation of Assumptions. Total miles, ton-miles, fuel savings and CO2 emissions are calculated from reported partner data by vehicle class. These data are compared to MOVES estimates, for the same year, of the national average fuel consumption and CO2 emissions for each vehicle class, and national average payload data, obtained from R.L. Polk, assuming the same miles driven, in each class, as in the data reported by SmartWay partners. Identification of Unit of Measure: Million metric tons of carbon dioxide equivalents (MMTCO2e)

Identification of timeframe of result. Partner activity data are reported for a calendar year. The results are imputed to the fiscal year in which the calendar year ends.

Documentation of Methodology Changes. In 2013, to account for the impact of EPA's Heavy-Duty GHG regulation on the heavy duty truck fleet over time, SmartWay updated its performance-based methodology to include a comparison of SmartWay partners' emission performance with the industry as a whole.

4a. Oversight and Timing of Final Results Reporting:

Program Analyst, Planning & Budget Office, Office of Transportation and Air Quality oversees the reporting process. Program offices report results for the prior fiscal year in the first month of the new fiscal year.

4b. Data Limitations/Qualifications:

SmartWay carrier partners report activity data for an entire calendar year in the first quarter of the following year. Benefits calculated from partner data are counted toward the fiscal year starting on October 1 of the reporting year, since that is the fiscal year in which they are reported.

4c. Third-Party Audits:

An August 30, 2012 report by EPA's Office of Inspector General (OIG) found that while SmartWay "performs some checks of data provided by industry ... there is no direct verification by EPA of data submitted by SmartWay participants." OIG recommended that EPA "protect the integrity of its program by implementing some form of direct verification or other measures to deter companies from submitting data that result in overstated scores." EPA has instituted an annual Data Verification Program where EPA staff visit selected

partners each year and review data management practices. EPA has also published an industry-reviewed guidance on best practices in data management for SmartWay partners.

Measure Code: G02 - Million metric tons of carbon equivalent (MMTCO₂E) of greenhouse gas reductions in the buildings sector.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

1 - Address Climate Change

Sub-Objective Number and Title:

1 - Address Climate Change

Strategic Target Code and Title:

2 - Additional programs from across EPA will promote practices to help Americans save energy and conserv

Managing Office:

Office of Atmospheric Programs

1a. Performance Measure Term Definitions:

Carbon equivalent of Greenhouse Gas Emissions: Carbon equivalent of Greenhouse Gas Emissions: Carbon dioxide (CO₂) is the base of the global warming potential (GWP) system and has a GWP of 1. All other greenhouse gases' ability to increase global warming is expressed in terms of CO₂e. The CO₂e for a gas is derived by multiplying the tons of the gas by that gas's GWP. Commonly expressed as "million metric tons of carbon dioxide equivalents" (MMTCO₂e).

Buildings Sector: Both residential and commercial building sectors are captured in this measure. Combined, activities in these sectors contribute to more than a third of the nation's annual GHG emissions. Through EPA's voluntary programs, the building sector is making cost-beneficial reductions in GHG emissions by saving energy. Energy efficiency measures reduce direct emissions from fuel combustion and/or indirect emissions from offsite electricity generation.

The Buildings Sector includes the following ENERGY STAR partnerships: ENERGY STAR® Certified Products, ENERGY STAR Residential, and the ENERGY STAR for Commercial Buildings programs. The ENERGY STAR is the national symbol for energy efficiency, informing purchasing choices, saving customers money on utility bills, and protecting the environment.

The ENERGY STAR Certified Products program works with product manufacturers, retailers, utilities, and others to help the Americans identify energy efficient products. Today, more than 85% of the American public recognizes the ENERGY STAR label. Certified products—including appliances, heating and cooling equipment, consumer electronics, office equipment, lighting, and more—offer consumers energy savings of as much as 75 percent relative to standard models while providing the features and functionality consumers expect.

In the ENERGY STAR Residential program, EPA focused on the 17 percent of the GHGs emitted in the United States that are attributed to the energy we use to heat, cool, and light our homes, as well as power the appliances and electronics in them. In the new construction marketplace, EPA helps homebuyers identify energy-efficient homes through the ENERGY STAR label. ENERGY STAR certified homes deliver energy savings of up to 30 percent compared to typical new homes.

Through the ENERGY STAR for Commercial Buildings program, EPA is helping the commercial building sector improve energy efficiency in the places where consumers work, play, and learn. EPA's ENERGY STAR Portfolio

Manager is an industry-leading benchmarking tool used by more than 70,000 individual users to measure, track, assess, and report on energy and water consumption of more than 400,000 commercial buildings – nearly 40 percent of the nation’s commercial building space.

Additional Information:

The accomplishments of many of EPA’s voluntary programs are documented in the Office of Atmospheric Programs Climate Protection Partnerships Annual Reports. EPA climate mitigation programs are also reported in the United States’ Climate Action Report and Biennial Report submissions to the UNFCCC.

2a. Original Data Source:

Data sources used to support the program-specific methodologies described in section 3d include partner reports on facility- specific improvements (e.g. space upgraded, kilowatt-hours (kWh) reduced), national market data on shipments of efficient products, and engineering measurements of equipment power levels and usage patterns.

2b. Source Data Collection:

Source data used in the program-specific methodologies (described in section 3d) is collected from a variety of sources including partner reports and published market and performance data from industry and federal sources. Some data sources are considered confidential business information, while others are publicly available. Where appropriate, programs have information collection requests (ICRs) to support the collection of data to inform the estimation of program benefits.

2c. Source Data Reporting:

For many voluntary programs, source data reporting is part of the program’s partnership agreement with participants. Partners report their data into EPA information systems or through alternative electronic format. Data from other industry and federal sources is not reported to EPA, but instead gathered by EPA or EPA contractors.

3a. Relevant Information Systems:

Information systems have been designed and maintained to support primary data collection and data management specific to the needs of individual programs. Such data is transformed to GHG emissions reductions within spreadsheets or models, according to the methodology described in 3d. Climate Protection Partnerships Division compiles annual greenhouse gas emissions reduction actuals and targets using this transformed data from the programs.

3b. Data Quality Procedures:

To partner with ENERGY STAR, product brand owners, builders, and others enter into formal partnership agreements with the government and agree to adhere to the ENERGY STAR Identity Guidelines, which describe how the ENERGY STAR name and mark may be used. EPA continually monitors the use of the brand in trade media, advertisements, and stores and on the Internet.

To ensure that ENERGY STAR remains a trusted symbol for environmental protection through superior efficiency, EPA maintains comprehensive product qualification and verification processes. Before a product can be labeled with the ENERGY STAR, its performance must be certified by an EPA-recognized third party based on testing in an EPA-recognized lab. The ENERGY STAR Certified Products program also conducts periodic onsite store-level assessments of ENERGY STAR certified products on the stores’ shelves to ensure the products are presented properly to consumers. The program’s emphasis on testing and third-party product review ensures that consumers can trust ENERGY STAR certified products to deliver the energy savings promised by the label. EPA collects shipment data annually from ENERGY STAR product brand owner partners to determine the savings associated with the ENERGY STAR Certified Products Program. To ensure this data is

complete and accurate, EPA has a rigorous quality assurance process to review the data and check it against previous years, market data, and expectations for the product category to identify any potential reporting or recording errors.

As a condition of partnership with the ENERGY STAR Residential Program, third-party verifiers (referred to as home energy raters) provide EPA quarterly data on the number of homes they verified to be ENERGY STAR. Performance is independently verified through modeling, on-site testing and inspections by certified third parties. Organizations that verify homes earning the ENERGY STAR must abide by a set of quality assurance practices to ensure data quality. In addition, EPA reviews the submitted data and resolves any data irregularities.

For ENERGY STAR for Commercial Buildings Program, the soundness of the data used for energy consumption modeling is ensured through the peer-review process prior to journal publication. The data and calculations employed in the post-model estimation analyses are thoroughly reviewed by EPA staff and outside consultants.

3c. Data Oversight:

Oversight differs by program:

- The ENERGY STAR Labeling Branch is responsible for overseeing (1) source data reporting and (2) the information systems utilized in producing the performance result for the ENERGY STAR Certified Products program.
- The ENERGY STAR Residential Branch is responsible for overseeing (1) source data reporting and (2) the information systems utilized in producing the performance result for the ENERGY STAR Residential program.
- The ENERGY STAR Commercial & Industrial Branch is responsible for overseeing (1) source data reporting and (2) the information systems utilized in producing the performance result for the ENERGY STAR for Commercial Buildings program.

3d. Calculation Methodology:

To present the most realistic estimates of program benefits, OAP employs a common analytical framework across all of the individual voluntary programs. A key aspect of this framework is that benefits represent the results attributable to EPA efforts above pre-existing trends or business-as-usual (BAU) scenarios. Program methods address potential double counting with other federal programs, the efforts of third-party actors, and other program-specific market effects. Annual benefits reflect investments that occurred during the year, as well as those benefits that persist during that year from investments made in previous years.

EPA calculates GHG emissions benefits across the ENERGY STAR programs by applying CO₂ emissions factors, as applicable, to net annual electricity and fossil fuel savings attributable to the program. For electricity, a national marginal carbon emissions factor is assumed to reflect power plants that will run less due to energy efficiency. Emissions factors applied to fossil fuel savings are based on on-site fuel combustion.

Approaches specific to program strategy, sector, availability of data, and market characteristics include:

ENERGY STAR Certified Products program estimates the annual energy savings for each product type based on the difference in energy use between a standard non-ENERGY STAR product and a product that just meets the ENERGY STAR requirements, even though some products exceed those levels. EPA assumes that standard non-ENERGY STAR products meet minimum efficiency standards, where Federal standards exist. If Federal standards do not exist, EPA assumes the average energy use of available products that would not meet the

ENERGY STAR requirements prior to the introduction of the ENERGY STAR specification. To determine energy savings, ENERGY STAR Certified Products multiplies the energy savings for each product type by the number of ENERGY STAR products shipped that year. EPA then subtracts out the savings associated with products used in ENERGY STAR certified homes to avoid double counting savings from ENERGY STAR Residential. EPA also subtracts out the number of ENERGY STAR products that would naturally occur at that efficiency level without the ENERGY STAR program by taking into account the cost differential, awareness, and any barrier to adoption of the more efficient products.

ENERGY STAR Certified Products program targets are estimated based on market projections for future product sales applied to net annual energy savings for product types in the program. EPA regularly reassesses key factors, such as energy consumption of standard non-ENERGY STAR products, changes in market sales, and new and revised ENERGY STAR product specifications, to confirm continued reasonableness of greenhouse gas emissions savings impact projections from ENERGY STAR Certified Products.

To account for the energy savings resulting from the operation of ENERGY STAR certified homes across a range of climates, sizes, and fuel types, ENERGY STAR Residential Program developed composite estimates by determining the energy consumption of a standard (i.e., code-minimum) home constructed in each of seven climate zones, taking into account regional construction characteristics (e.g., foundation type, typical fuel use profile) and configuring the home to the national model energy code. EPA then applied ENERGY STAR requirements to each modeled home to determine the estimated annual energy savings achieved (for both electricity and natural gas) as compared to the standard home. Total annual energy savings for the ENERGY STAR Residential program is determined by applying the estimated energy savings for the composite home; multiplied by the number of ENERGY STAR certified homes constructed, as reported to the EPA by Home Energy Rating Providers certified by Residential Energy Services Network (RESNET). EPA applies the annualized average growth of ENERGY STAR certified homes in order to project the number of ENERGY STAR certified homes to be constructed in future years.

To calculate energy savings, ENERGY STAR for Commercial Buildings uses the data from the U.S. Energy Information Administration's State Energy Data System as the basis for developing multivariate statistical models that estimate the change in national electricity and natural gas consumption for the 48 contiguous states in aggregate as a result of publically-funded energy efficiency programs. The general details of this methodology, which uses the historical variation in levels of energy efficiency program activity in the 48 states to simulate current year energy consumption in the absence of all public programs, are published in the peer-reviewed, international scientific journal *The Energy Journal* (Marvin J. Horowitz, "Changes in Electricity Demand in the United States from the 1970s to 2003," 2007, Vol. 28, No. 3, pp. 93-119). Energy savings are derived after controlling for the uptake in ENERGY STAR Products in commercial buildings. In addition, ENERGY STAR for Commercial Buildings program accomplishments take into account the reported energy savings impacts from electric and natural gas utility demand side management programs, state and third party public benefits energy efficiency programs, state building codes and appliance standards programs, and U.S. Department of Energy Building Technologies Office programs. Targets are estimated by applying a steady growth rate to program savings based on an informed examination of the opportunity for emissions reductions in the commercial sector.

4a. Oversight and Timing of Final Results Reporting:

Oversight differs by program:

- Branch Chief, ENERGY STAR Labeling Branch is responsible for the ENERGY STAR Certified Products program.
- Branch Chief, ENERGY STAR Residential Branch is responsible for the ENERGY STAR Residential program.
- Branch Chief, ENERGY STAR Commercial & Industrial Branch is responsible for the ENERGY STAR for Commercial Buildings program.

Timing: Actual values are typically available in December of the year following the reporting year.

4b. Data Limitations/Qualifications:

These are indirect measures of GHG emissions (carbon conversion factors and methods to convert material-specific reductions to GHG emissions reductions). Although EPA devotes considerable effort to obtaining the best possible information on which to evaluate emissions reductions from its voluntary programs, errors in the performance data could be introduced through uncertainties in carbon conversion factors, engineering analyses, econometric analyses, and the voluntary nature of the programs. Where uncertainties exist, EPA uses the best available information and practices that yield conservative benefit estimates.

4c. Third-Party Audits:

The Administration regularly evaluates the effectiveness of its climate programs through interagency evaluations, including interagency evaluations led by the White House Council on Environmental Quality to examine the status of U.S. climate mitigation programs. These reviews include participants from EPA and the Departments of State, Energy, and Agriculture, as well as other agencies. The results are published in the United States' submission to the United Nations Framework Convention on Climate Change (UNFCCC). The first evaluation was published in the U.S. Climate Action Report-1997. EPA's Office of the Inspector General (IG) and the U.S. Government Accountability Office also review programs on an adhoc basis. For example, a 1997 IG audit concluded that the climate programs examined "used good management practices" and "effectively estimated the impact their activities had on reducing risks to health and the environment..."

Measure Code: P34 - Cumulative tons of PM-2.5 reduced since 2000 from mobile sources.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

1 - Reduce Criteria Pollutants and Regional Haze

Strategic Target Code and Title:

2 - By 2018, concentrations of inhalable fine particles in monitored counties will decrease to 10.5 µg/m³

Managing Office:

Office of Transportation and Air Quality

1a. Performance Measure Term Definitions:

Mobile sources: Includes on-road cars/trucks; nonroad engines such as farm, construction, and lawn/garden equipment, marine engines, locomotives; and aircraft.

Particulate matter (PM-2.5): Solid material 2.5 microns or smaller as defined by the EPA National Ambient Air Quality Standard and measurement methods.

2a. Original Data Source:

Estimates for on-road and nonroad mobile source emissions are generated from EPA emission models.

Data for the models are from many sources, including vehicle miles traveled (VMT) estimates by state (Federal Highway Administration, or FHWA), the mix of VMT by type of vehicle (FHWA), temperature, gasoline properties, and the designs of Inspection/Maintenance (I/M) programs. Usage data for nonroad comes largely from sales data and surveys.

2b. Source Data Collection:

Source Data Collection Methods: Emission test results for engines/vehicles come from EPA, other government agencies (including state/local governments), academic institutions and industry. The data come from actual emission tests measuring vehicle/engine HC (Hydrocarbons), CO (Carbon Monoxide), NO_x (Nitrogen Oxides), and PM (Particulate Matter) emissions. VMT information comes from Department of Transportation's (DOT) Highway Performance Monitoring System (HPMS) and are obtained from DOT surveys.

Geographical Extent of Source Data: National and state level data.

Spatial Detail Covered By the Source Data: County level data.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: EPA develops and receives emission data on a g/mile or g/unit work (or unit fuel consumed) basis.

Timing and frequency of reporting: The inputs to MOVES/MOBILE 6 and NONROAD 2008 and other models are reviewed and updated, sometimes on an annual basis for some parameters. Generally, Vehicle Miles Traveled (VMT), the mix of VMT by type of vehicle (Federal Highway Administration (FHWA)-types), temperature, gasoline properties, and the designs of Inspection/Maintenance (I/M) programs are updated each year.

Emission factors for all mobile sources and activity estimates for non-road sources are revised at the time EPA's Office of Transportation and Air Quality provides new information.

Updates to the inputs to the models means the emissions inventories will change.

3a. Relevant Information Systems:

National Emissions Inventory Database. Obtained by modeling runs using MOBILE/MOVES, NONROAD, and other models.

See: <https://www.epa.gov/air-emissions-inventories/national-emissions-inventory-nei> for a summary of national emission inventories and how the numbers are obtained in general.

The emission inventory contains source test data as well as usage information compiled from other sources. Also, for consistency from year to year and to provide a baseline over time, the emission inventories are updated for these performance measure only when it is essential to do so. The source data (emissions and usage) are "transformed" into emission inventories.

The models and input undergo peer review and receive scientific input from a variety of sources including academic institutions and public comments.

3b. Data Quality Procedures:

The emissions inventories are reviewed by both internal and external parties including state and local air agencies and industry. EPA works with all of these parties to review model inputs. EPA also reviews the inventories, comparing them to others derived in earlier years to assure that changes in inputs result in reasonable changes in the inventories actual. The models and their inputs also undergo peer and stakeholder review.

3c. Data Oversight:

EPA emission inventories for the performance measure are reviewed by OTAQ Center Directors in the Assessment and Standards Division. The Center Directors are responsible for vehicle, engine, fuel, and modeling data used in various EPA programs.

3d. Calculation Methodology:

Explanation of the Calculations:

- In a national air quality scenario, the mobile source "fleet", primarily, on-road light-duty vehicles, can be classified and allocated down to the county level on the basis of light- versus heavy-duty operation, on-road versus nonroad, and vehicle versus equipment.
- For the baseline "Year," annual tons of mobile source emissions emitted by pollutant are modelled.
- EPA then predicts annual tons of mobile source emissions reduced for a particular year by modelling vehicle/engine pollutant emission rates, i.e., emission standards, for all the miles/operation which can be attributed to mobile sources in that year. For the annual measure, EPA reports the modeled outputs for each year as a target and result.

The MOVES (Motor Vehicle Emission Simulator) model replacing the earlier MOBILE6 vehicle emission factor model is a software tool for predicting gram per mile emissions of hydrocarbons, carbon monoxide, oxides of nitrogen, carbon dioxide, particulate matter, and toxics from cars, trucks, and motorcycles under various conditions. Inputs to the model include fleet composition, activity, temporal information, and control program characteristics. For more information, see: <https://www.epa.gov/moves>

The NONROAD 2008 emission inventory model replacing earlier versions of NONROAD is a software tool for predicting emissions of hydrocarbons, carbon monoxide, oxides of nitrogen, particulate matter, and sulfur dioxides from small and large off road vehicles, equipment, and engines. Inputs to the model include fleet composition, activity and temporal information. For more information on the NONROAD model, see: <https://www.epa.gov/moves>

Over the years, improved emission and usage data have led to updated emission inventories more consistent with air quality data.

Additional information:

To keep pace with new analysis needs, new modeling approaches, and new data, EPA is currently working on transitioning to the modeling system termed the Multi-scale Motor Vehicles and Equipment Emission System (MOVES). This new system will estimate emissions for on road and off road sources, cover a broad range of pollutants, and allow multiple scale analysis, from fine scale analysis to national inventory estimation. When fully implemented, MOVES will serve as the replacement for MOBILE6 and NONROAD. The new system will not necessarily be a single piece of software, but instead will encompass the necessary tools, algorithms, underlying data and guidance necessary for use in all analyses associated with regulatory development, compliance with statutory requirements, and national/regional inventory projections.

Unit of analysis: tons of emissions, vehicle miles traveled, and hours (or fuel) used]

4a. Oversight and Timing of Final Results Reporting:

The Center Directors and the Associate Director of OTAQ's ASD are responsible for the performance measure by assuring that the emission inventory and reduction numbers used in EPA regulatory and other programs are accurate and appropriate review.

4b. Data Limitations/Qualifications:

The limitations of the inventory estimates for mobile sources come from limitations in the modeled emission factors (based on emission factor testing and models predicting overall fleet emission factors in g/mile) and also in the estimated vehicle miles traveled for each vehicle class (derived from Department of Transportation data).

For nonroad emissions, the estimates come from a model using equipment inventories, emission factors per hour or unit of work, and an estimate of usage. This nonroad emissions model accounts for over 200 types of nonroad equipment. Any limitations in the input data will carry over into limitations in the emission inventory estimates.

Additional information about data integrity for the MOVES/MOBILE6 and NONROAD models is available at <https://www.epa.gov/moves> .

When the method for estimating emissions changes significantly, older estimates of emissions in years prior to the most recent year may be revised to be consistent with the new methodology when possible.

Methods for estimating emission inventories are frequently updated to reflect the most up-to-date inputs and assumptions. Past emission estimates that inform our performance measures frequently do not keep pace with the changing inventories associated with more advanced information.

Methods for estimating emission inventories are frequently updated to reflect the most up-to-date inputs and assumptions. Past emission estimates that inform our performance measure frequently do not keep pace with the changing inventories associated with more measures in 2002, making both current and future year projections for on-road and nonroad. The emission estimates have been updated numerous times since then for rulemaking packages and will be updated for these performance measures.

4c. Third-Party Audits:

All of the inputs for the models, the actual models, and the resultant emission inventories are reviewed as appropriate by academic experts and, also, by state/local governments who may use some of this information for their State Implementation Plans to meet the National Ambient Air Quality Standards.

Measure Code: S01 - Remaining US Consumption of hydrochlorofluorocarbons (HCFCs), chemicals that deplete the Earth's protective ozone layer, measured in tons of Ozone Depleting Potential (ODP).

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

3 - Restore and Protect the Ozone Layer

Sub-Objective Number and Title:

1 - Reduce Consumption of Ozone-Depleting Substances

Strategic Target Code and Title:

1 - By 2015, U.S. reduce consumption of hydrochlorofluorocarbons (HCFCs), chemicals

Managing Office:

Office of Atmospheric Programs

1a. Performance Measure Term Definitions:

Remaining: The term "Remaining" is defined as that which remains, especially after something else has been removed.

US consumption: Class II controlled substances are compounds that have an ozone depletion potential (ODP) less than 0.2, and are all hydrochlorofluorocarbons (HCFCs). HCFCs were developed as transitional substitutes for Class I substances and are subject to a later phaseout schedule than Class I substances.

Although there are currently 34 controlled HCFCs, only a few are commonly used. The most widely used have been HCFC-22 (usually a refrigerant), HCFC-141b (a solvent and foam-blowing agent), and HCFC-142b (a foam-blowing agent and component in refrigerant blends).

As a Party to the Montreal Protocol, the U.S. must incrementally decrease HCFC consumption and production, culminating in a complete HCFC phaseout in 2030. The major milestones that are upcoming for developed countries are a reduction in 2010 to at least 75 percent below baseline HCFC levels and a reduction in 2015 to at least 90 percent below baseline.

Section 605 of the Clean Air Act sets the U.S. phaseout targets for Class II substances. In 1993, the EPA established the phaseout framework and the "worst-first" approach that focused first on HCFC-22, HCFC-141b, and HCFC-142b because these three HCFCs have the highest ODPs of all HCFCs. To meet the required 2004 reduction, the EPA phased out HCFC-141b in 2003 and froze the production and consumption of HCFC-22 and HCFC-142b. In 2009, EPA reduced the production and import of virgin HCFC-22 and HCFC-142b and limited the use of those compounds to meet the Montreal Protocol's 2010 milestones.

EPA ensures that HCFC consumption in the U.S. is 75% below the U.S. baseline (as required under the Montreal Protocol) by issuing allowances to producers and importers of HCFCs. The "2010 HCFC Allocation Rule" allocated allowances for each year between 2010 and 2014. To meet the stepdown, the number of allowances for HCFC-22 and HCFC-142b were less than for the 2003-2009 control periods. EPA also issued allowances for HCFC-123, HCFC-124, HCFC-225ca, and HCFC-225cb. The rules also limited the use of virgin HCFC-22 and HCFC-142b to existing refrigeration and air-conditioning equipment. The "Pre-Chartered Appliances Rule" banned the sale or distribution of air-conditioning and refrigeration products containing HCFC-22, HCFC-142b, or blends containing one or both of these substances, beginning January 1, 2010.

The "2010 HCFC Allocation Rule" was challenged in the U.S. Court of Appeals for the D.C. Circuit in *Arkema v EPA*. In August, 2010, the court decided against EPA. EPA interprets the Court's decision as vacating the portion of the rule that establishes company-by-company production and consumption baselines and calendar-year allowances for HCFC-22 and HCFC-142b. All other aspects of the rule are intact. On August 5, 2011, EPA issued an interim final rule that establishes new company-by-company HCFC-22 and HCFC-142b baselines and allocates production and consumption allowances for 2011.

EPA is developing regulations that will issue allowances for the 2012-2014 control periods in response to the court's decision in *Arkema v EPA*.

Hydrochlorofluorocarbon (HCFC): a compound consisting of hydrogen, chlorine, fluorine, and carbon. The HCFCs are one class of chemicals being used to replace the chlorofluorocarbons (CFCs). They contain chlorine and thus deplete stratospheric ozone, but to a much lesser extent than CFCs. HCFCs have ozone depletion potentials (ODPs) ranging from 0.01 to 0.1.

Class II Ozone-Depleting Substance (ODS): a chemical with an ozone-depletion potential of less than 0.2. Currently, all of the HCFCs are class II substances, and the only Class II substances are HCFCs.

Ozone Depletion Potential (ODP): a number that refers to the amount of ozone depletion caused by a substance. The ODP is the ratio of the impact on ozone of a chemical compared to the impact of a similar mass of CFC-11. Thus, the ODP of CFC-11 is defined to be 1.0. Other CFCs and HCFCs have ODPs that range from 0.01 to 1.0.

Tons of Ozone Depleting Potential: metric tons of ODS weighted by their Ozone Depletion Potential (ODP), otherwise referred to as ODP tons.

See <https://www.epa.gov/ozone-layer-protection> for additional information on ODS and the Montreal Protocol. See <http://www.unmfs.org/> for more information about the Multilateral Fund.

2a. Original Data Source:

US Companies Producing, Importing and Exporting ODS. Progress on restricting domestic exempted consumption of Class II HCFCs is tracked by monitoring industry reports of compliance with EPA's phase-out regulations. Data are provided by U.S. companies producing, importing, and exporting ODS. Corporate data are typically submitted as quarterly reports. For specific requirements, as outlined in the Clean Air Act, see <https://www.epa.gov/clean-air-act-overview/clean-air-act-title-vi-stratospheric-ozone-protection>

The International Trade Commission also provides monthly information on US production, imports, and exports.

2b. Source Data Collection:

Source Data Collection Methods: § 82.24 Recordkeeping and reporting requirements for class II controlled substances.

a) Recordkeeping and reporting. Any person who produces, imports, exports, transforms, or destroys class II controlled substances must comply with the following recordkeeping and reporting requirements:

(1) Reports required by this section must be mailed to the Administrator within 30 days of the end of the applicable reporting period, unless otherwise specified.

- (2) Revisions of reports that are required by this section must be mailed to the Administrator within 180 days of the end of the applicable reporting period, unless otherwise specified.
- (3) Records and copies of reports required by this section must be retained for three years.
- (4) Quantities of class II controlled substances must be stated in terms of kilograms in reports required by this section.
- (5) Reports and records required by this section may be used for purposes of compliance determinations. These requirements are not intended as a limitation on the use of other evidence admissible under the Federal Rules of Evidence. Failure to provide the reports, petitions and records required by this section and to certify the accuracy of the information in the reports, petitions and records required by this section, will be considered a violation of this subpart. False statements made in reports, petitions and records will be considered violations of Section 113 of the Clean Air Act and under 18 U.S.C. 1001.
- (b) Producers. Persons (“producers”) who produce class II controlled substances during a control period must comply with the following recordkeeping and reporting requirements:
- (1) Reporting—Producers. For each quarter, each producer of a class II controlled substance must provide the Administrator with a report containing the following information:
- (i) The quantity (in kilograms) of production of each class II controlled substance used in processes resulting in their transformation by the producer and the quantity (in kilograms) intended for transformation by a second party;
 - (ii) The quantity (in kilograms) of production of each class II controlled substance used in processes resulting in their destruction by the producer and the quantity (in kilograms) intended for destruction by a second party;
 - (iii) The expended allowances for each class II controlled substance;
 - (iv) The producer's total of expended and unexpended production allowances, consumption allowances, export production allowances, and Article 5 allowances at the end of that quarter;
 - (v) The quantity (in kilograms) of class II controlled substances sold or transferred during the quarter to a person other than the producer for use in processes resulting in their transformation or eventual destruction;
 - (vi) A list of the quantities and names of class II controlled substances, exported by the producer to a Party to the Protocol, that will be transformed or destroyed and therefore were not produced expending production or consumption allowances;
 - (vii) For transformation in the U.S. or by a person of another Party, one copy of a transformation verification from the transformer for a specific class II controlled substance and a list of additional quantities shipped to that same transformer for the quarter;
 - (viii) For destruction in the U.S. or by a person of another Party, one copy of a destruction verification as required in paragraph (e) of this section for a particular destroyer, destroying the same class II controlled substance, and a list of additional quantities shipped to that same destroyer for the quarter;
 - (ix) In cases where the producer produced class II controlled substances using export production allowances, a list of U.S. entities that purchased those class II controlled substances and exported them to a Party to the Protocol;
 - (x) In cases where the producer produced class II controlled substances using Article 5 allowances, a list of U.S. entities that purchased those class II controlled substances and exported them to Article 5 countries; and
 - (xi) A list of the HCFC 141b-exemption allowance holders from whom orders were received and the quantity (in kilograms) of HCFC-141b requested and produced.
- (2) Recordkeeping—Producers. Every producer of a class II controlled substance during a control period must maintain the following records:
- (i) Dated records of the quantity (in kilograms) of each class II controlled substance produced at each facility;

- (ii) Dated records of the quantity (in kilograms) of class II controlled substances produced for use in processes that result in their transformation or for use in processes that result in their destruction;
- (iii) Dated records of the quantity (in kilograms) of class II controlled substances sold for use in processes that result in their transformation or for use in processes that result in their destruction;
- (iv) Dated records of the quantity (in kilograms) of class II controlled substances produced with export production allowances or Article 5 allowances;
- (v) Copies of invoices or receipts documenting sale of class II controlled substances for use in processes that result in their transformation or for use in processes that result in their destruction;
- (vi) Dated records of the quantity (in kilograms) of each class II controlled substance used at each facility as feedstocks or destroyed in the manufacture of a class II controlled substance or in the manufacture of any other substance, and any class II controlled substance introduced into the production process of the same class II controlled substance at each facility;
- (vii) Dated records of the quantity (in kilograms) of raw materials and feedstock chemicals used at each facility for the production of class II controlled substances;
- (viii) Dated records of the shipments of each class II controlled substance produced at each plant;
- (ix) The quantity (in kilograms) of class II controlled substances, the date received, and names and addresses of the source of used materials containing class II controlled substances which are recycled or reclaimed at each plant;
- (x) Records of the date, the class II controlled substance, and the estimated quantity of any spill or release of a class II controlled substance that equals or exceeds 100 pounds;
- (xi) Transformation verification in the case of transformation, or the destruction verification in the case of destruction as required in paragraph (e) of this section showing that the purchaser or recipient of a class II controlled substance, in the U.S. or in another country that is a Party, certifies the intent to either transform or destroy the class II controlled substance, or sell the class II controlled substance for transformation or destruction in cases when allowances were not expended;
- (xii) Written verifications from a U.S. purchaser that the class II controlled substance was exported to a Party in accordance with the requirements in this section, in cases where export production allowances were expended to produce the class II controlled substance;
- (xiii) Written verifications from a U.S. purchaser that the class II controlled substance was exported to an Article 5 country in cases where Article 5 allowances were expended to produce the class II controlled substance;
- (xiv) Written verifications from a U.S. purchaser that HCFC-141b was manufactured for the express purpose of meeting HCFC-141b exemption needs in accordance with information submitted under §82.16(h), in cases where HCFC-141b exemption allowances were expended to produce the HCFC-141b.

(3) For any person who fails to maintain the records required by this paragraph, or to submit the report required by this paragraph, the Administrator may assume that the person has produced at full capacity during the period for which records were not kept, for purposes of determining whether the person has violated the prohibitions at §82.15.

(c) Importers. Persons (“importers”) who import class II controlled substances during a control period must comply with the following recordkeeping and reporting requirements:

(1) Reporting—Importers. For each quarter, an importer of a class II controlled substance (including importers of used class II controlled substances) must submit to the Administrator a report containing the following information:

(i) Summaries of the records required in paragraphs (c)(2)(i) through (xvi) of this section for the previous quarter;

- (ii) The total quantity (in kilograms) imported of each class II controlled substance for that quarter;
- (iii) The commodity code for the class II controlled substances imported, which must be one of those listed in Appendix K to this subpart;
- (iv) The quantity (in kilograms) of those class II controlled substances imported that are used class II controlled substances;
- (v) The quantity (in kilograms) of class II controlled substances imported for that quarter and totaled by chemical for the control period to date;
- (vi) For substances for which EPA has apportioned baseline production and consumption allowances, the importer's total sum of expended and unexpended consumption allowances by chemical as of the end of that quarter;
- (vii) The quantity (in kilograms) of class II controlled substances imported for use in processes resulting in their transformation or destruction;
- (viii) The quantity (in kilograms) of class II controlled substances sold or transferred during that quarter to each person for use in processes resulting in their transformation or eventual destruction; and
- (ix) Transformation verifications showing that the purchaser or recipient of imported class II controlled substances intends to transform those substances or destruction verifications showing that the purchaser or recipient intends to destroy the class II controlled substances (as provided in paragraph (e) of this section).
- (x) [Reserved]
- (xi) A list of the HCFC 141b-exemption allowance holders from whom orders were received and the quantity (in kilograms) of HCFC-141b requested and imported.

(2) Recordkeeping—Importers. An importer of a class II controlled substance (including used class II controlled substances) must maintain the following records:

- (i) The quantity (in kilograms) of each class II controlled substance imported, either alone or in mixtures, including the percentage of each mixture which consists of a class II controlled substance;
- (ii) The quantity (in kilograms) of those class II controlled substances imported that are used and the information provided with the petition where a petition is required under paragraph (c)(3) of this section;
- (iii) The quantity (in kilograms) of class II controlled substances other than transshipments or used substances imported for use in processes resulting in their transformation or destruction;
- (iv) The quantity (in kilograms) of class II controlled substances other than transshipments or used substances imported and sold for use in processes that result in their destruction or transformation;
- (v) The date on which the class II controlled substances were imported;
- (vi) The port of entry through which the class II controlled substances passed;
- (vii) The country from which the imported class II controlled substances were imported;
- (viii) The commodity code for the class II controlled substances shipped, which must be one of those listed in Appendix K to this subpart;
- (ix) The importer number for the shipment;
- (x) A copy of the bill of lading for the import;
- (xi) The invoice for the import;
- (xii) The quantity (in kilograms) of imports of used class II controlled substances;
- (xiii) The U.S. Customs entry form;
- (xiv) Dated records documenting the sale or transfer of class II controlled substances for use in processes resulting in their transformation or destruction;
- (xv) Copies of transformation verifications or destruction verifications indicating that the class II controlled substances will be transformed or destroyed (as provided in paragraph (e) of this section).

(xvi) Written verifications from a U.S. purchaser that HCFC-141b was imported for the express purpose of meeting HCFC-141b exemption needs in accordance with information submitted under §82.16(h), and that the quantity will not be resold, in cases where HCFC-141b exemption allowances were expended to import the HCFC-141b.

(3) Petition to import used class II controlled substances and transshipment-Importers. For each individual shipment over 5 pounds of a used class II controlled substance as defined in §82.3 for which EPA has apportioned baseline production and consumption allowances, an importer must submit directly to the Administrator, at least 40 working days before the shipment is to leave the foreign port of export, the following information in a petition:

(i) The name and quantity (in kilograms) of the used class II controlled substance to be imported;

(ii) The name and address of the importer, the importer ID number, the contact person, and the phone and fax numbers;

(iii) Name, address, contact person, phone number and fax number of all previous source facilities from which the used class II controlled substance was recovered;

(iv) A detailed description of the previous use of the class II controlled substance at each source facility and a best estimate of when the specific controlled substance was put into the equipment at each source facility, and, when possible, documents indicating the date the material was put into the equipment;

(v) A list of the name, make and model number of the equipment from which the material was recovered at each source facility;

(vi) Name, address, contact person, phone number and fax number of the exporter and of all persons to whom the material was transferred or sold after it was recovered from the source facility;

(vii) The U.S. port of entry for the import, the expected date of shipment and the vessel transporting the chemical. If at the time of submitting a petition the importer does not know the U.S. port of entry, the expected date of shipment and the vessel transporting the chemical, and the importer receives a non-objection notice for the individual shipment in the petition, the importer is required to notify the Administrator of this information prior to the actual U.S. Customs entry of the individual shipment;

(viii) A description of the intended use of the used class II controlled substance, and, when possible, the name, address, contact person, phone number and fax number of the ultimate purchaser in the United States;

(ix) The name, address, contact person, phone number and fax number of the U.S. reclamation facility, where applicable;

(x) If someone at the source facility recovered the class II controlled substance from the equipment, the name and phone and fax numbers of that person;

(xi) If the imported class II controlled substance was reclaimed in a foreign Party, the name, address, contact person, phone number and fax number of any or all foreign reclamation facility(ies) responsible for reclaiming the cited shipment;

(xii) An export license from the appropriate government agency in the country of export and, if recovered in another country, the export license from the appropriate government agency in that country;

(xiii) If the imported used class II controlled substance is intended to be sold as a refrigerant in the U.S., the name and address of the U.S. reclaimer who will bring the material to the standard required under subpart F of this part, if not already reclaimed to those specifications; and

(xiv) A certification of accuracy of the information submitted in the petition.

(4) Review of petition to import used class II controlled substances and transshipments—Importers. Starting on the first working day following receipt by the Administrator of a petition to import a used class II controlled substance, the Administrator will initiate a review of the information submitted under paragraph (c)(3) of this section and take action within 40 working days to issue either an objection-notice or a non-objection notice

for the individual shipment to the person who submitted the petition to import the used class II controlled substance.

(i) The Administrator may issue an objection notice to a petition for the following reasons:

(A) If the Administrator determines that the information is insufficient, that is, if the petition lacks or appears to lack any of the information required under paragraph (c)(3) of this section;

(B) If the Administrator determines that any portion of the petition contains false or misleading information, or the Administrator has information from other U.S. or foreign government agencies indicating that the petition contains false or misleading information;

(C) If the transaction appears to be contrary to provisions of the Vienna Convention on Substances that Deplete the Ozone Layer, the Montreal Protocol and Decisions by the Parties, or the non-compliance procedures outlined and instituted by the Implementation Committee of the Montreal Protocol;

(D) If the appropriate government agency in the exporting country has not agreed to issue an export license for the cited individual shipment of used class II controlled substance;

(E) If reclamation capacity is installed or is being installed for that specific class II controlled substance in the country of recovery or country of export and the capacity is funded in full or in part through the Multilateral Fund.

(ii) Within ten (10) working days after receipt of the objection notice, the importer may re-petition the Administrator, only if the Administrator indicated "insufficient information" as the basis for the objection notice. If no appeal is taken by the tenth working day after the date on the objection notice, the objection shall become final. Only one re-petition will be accepted for any original petition received by EPA.

(iii) Any information contained in the re-petition which is inconsistent with the original petition must be identified and a description of the reason for the inconsistency must accompany the re-petition.

(iv) In cases where the Administrator does not object to the petition based on the criteria listed in paragraph (c)(4)(i) of this section, the Administrator will issue a non-objection notice.

(v) To pass the approved used class II controlled substances through U.S. Customs, the petition and the non-objection notice issued by EPA must accompany the shipment through U.S. Customs.

(vi) If for some reason, following EPA's issuance of a non-objection notice, new information is brought to EPA's attention which shows that the non-objection notice was issued based on false information, then EPA has the right to:

(A) Revoke the non-objection notice;

(B) Pursue all means to ensure that the class II controlled substance is not imported into the U.S.; and

(C) Take appropriate enforcement actions.

(vii) Once the Administrator issues a non-objection notice, the person receiving the non-objection notice is permitted to import the individual shipment of used class II controlled substance only within the same control period as the date stamped on the non-objection notice.

(viii) A person receiving a non-objection notice from the Administrator for a petition to import used class II controlled substances must maintain the following records:

(A) A copy of the petition;

(B) The EPA non-objection notice;

(C) The bill of lading for the import; and

(D) U.S. Customs entry documents for the import that must include one of the commodity codes from Appendix K to this subpart.

(5) Recordkeeping for transshipments—Importers. Any person who tranships a class II controlled substance must maintain records that indicate:

(i) That the class II controlled substance shipment originated in a foreign country;

- (ii) That the class II controlled substance shipment is destined for another foreign country; and
 - (iii) That the class II controlled substance shipment will not enter interstate commerce within the U.S.
- (d) Exporters. Persons (“exporters”) who export class II controlled substances during a control period must comply with the following reporting requirements:
- (1) Reporting—Exporters. For any exports of class II controlled substances not reported under §82.20 (additional consumption allowances), or under paragraph (b)(2) of this section (reporting for producers of class II controlled substances), each exporter who exported a class II controlled substance must submit to the Administrator the following information within 30 days after the end of each quarter in which the unreported exports left the U.S.:
 - (i) The names and addresses of the exporter and the recipient of the exports;
 - (ii) The exporter's Employer Identification Number;
 - (iii) The type and quantity (in kilograms) of each class II controlled substance exported and what percentage, if any of the class II controlled substance is used;
 - (iv) The date on which, and the port from which, the class II controlled substances were exported from the U.S. or its territories;
 - (v) The country to which the class II controlled substances were exported;
 - (vi) The quantity (in kilograms) exported to each Article 5 country;
 - (vii) The commodity code for the class II controlled substances shipped, which must be one of those listed in Appendix K to this subpart;
 - (viii) For persons reporting transformation or destruction, the invoice or sales agreement containing language similar to the transformation verifications that the purchaser or recipient of imported class II controlled substances intends to transform those substances, or destruction verifications showing that the purchaser or recipient intends to destroy the class II controlled substances (as provided in paragraph (e) of this section).
 - (2) Reporting export production allowances—Exporters. In addition to the information required in paragraph (d)(1) of this section, any exporter using export production allowances must also provide the following to the Administrator:
 - (i) The Employer Identification Number on the Shipper's Export Declaration Form or Employer Identification Number of the shipping agent shown on the U.S. Customs Form 7525;
 - (ii) The exporting vessel on which the class II controlled substances were shipped; and
 - (iii) The quantity (in kilograms) exported to each Party.
 - (3) Reporting Article 5 allowances—Exporters. In addition to the information required in paragraph (d)(1) of this section, any exporter using Article 5 allowances must also provide the following to the Administrator:
 - (i) The Employer Identification Number on the Shipper's Export Declaration Form or Employer Identification Number of the shipping agent shown on the U.S. Customs Form 7525; and
 - (ii) The exporting vessel on which the class II controlled substances were shipped.
 - (4) Reporting used class II controlled substances—Exporters. Any exporter of used class II controlled substances must indicate on the bill of lading or invoice that the class II controlled substance is used, as defined in §82.3.
 - (e) Transformation and destruction. Any person who transforms or destroys class II controlled substances must comply with the following recordkeeping and reporting requirements:
 - (1) Recordkeeping—Transformation and destruction. Any person who transforms or destroys class II controlled substances produced or imported by another person must maintain the following:
 - (i) Copies of the invoices or receipts documenting the sale or transfer of the class II controlled substances to the person;
 - (ii) Records identifying the producer or importer of the class II controlled substances received by the person;

- (iii) Dated records of inventories of class II controlled substances at each plant on the first day of each quarter;
 - (iv) Dated records of the quantity (in kilograms) of each class II controlled substance transformed or destroyed;
 - (v) In the case where class II controlled substances were purchased or transferred for transformation purposes, a copy of the person's transformation verification as provided under paragraph (e)(3) of this section.
 - (vi) Dated records of the names, commercial use, and quantities (in kilograms) of the resulting chemical(s) when the class II controlled substances are transformed; and
 - (vii) Dated records of shipments to purchasers of the resulting chemical(s) when the class II controlled substances are transformed.
 - (viii) In the case where class II controlled substances were purchased or transferred for destruction purposes, a copy of the person's destruction verification, as provided under paragraph (e)(5) of this section.
- (2) Reporting—Transformation and destruction. Any person who transforms or destroys class II controlled substances and who has submitted a transformation verification ((paragraph (e)(3) of this section) or a destruction verification (paragraph (e)(5) of this section) to the producer or importer of the class II controlled substances, must report the following:
- (i) The names and quantities (in kilograms) of the class II controlled substances transformed for each control period within 45 days of the end of such control period; and
 - (ii) The names and quantities (in kilograms) of the class II controlled substances destroyed for each control period within 45 days of the end of such control period.
- (3) Reporting—Transformation. Any person who purchases class II controlled substances for purposes of transformation must provide the producer or importer with a transformation verification that the class II controlled substances are to be used in processes that result in their transformation.
- (i) The transformation verification shall include the following:
 - (A) Identity and address of the person intending to transform the class II controlled substances;
 - (B) The quantity (in kilograms) of class II controlled substances intended for transformation;
 - (C) Identity of shipments by purchase order number(s), purchaser account number(s), by location(s), or other means of identification;
 - (D) Period of time over which the person intends to transform the class II controlled substances; and
 - (E) Signature of the verifying person.
 - (ii) [Reserved]
- (4) Reporting—Destruction. Any person who destroys class II controlled substances shall provide EPA with a one-time report containing the following information:
- (i) The destruction unit's destruction efficiency;
 - (ii) The methods used to record the volume destroyed;
 - (iii) The methods used to determine destruction efficiency;
 - (iv) The name of other relevant federal or state regulations that may apply to the destruction process;
 - (v) Any changes to the information in paragraphs (e)(4)(i), (ii), and (iii) of this section must be reflected in a revision to be submitted to EPA within 60 days of the change(s).
- (5) Reporting—Destruction. Any person who purchases or receives and subsequently destroys class II controlled substances that were originally produced without expending allowances shall provide the producer or importer from whom it purchased or received the class II controlled substances with a verification that the class II controlled substances will be used in processes that result in their destruction.
- (i) The destruction verification shall include the following:
 - (A) Identity and address of the person intending to destroy class II controlled substances;

(B) Indication of whether those class II controlled substances will be completely destroyed, as defined in §82.3, or less than completely destroyed, in which case the destruction efficiency at which such substances will be destroyed must be included;

(C) Period of time over which the person intends to destroy class II controlled substances; and

(D) Signature of the verifying person.

(ii) [Reserved]

(f) Heels-Recordkeeping and reporting. Any person who brings into the U.S. a rail car, tank truck, or ISO tank containing a heel, as defined in §82.3, of class II controlled substances, must take the following actions:

(1) Indicate on the bill of lading or invoice that the class II controlled substance in the container is a heel.

(2) Report within 30 days of the end of the control period the quantity (in kilograms) brought into the U.S. and certify:

(i) That the residual quantity (in kilograms) in each shipment is no more than 10 percent of the volume of the container;

(ii) That the residual quantity (in kilograms) in each shipment will either:

(A) Remain in the container and be included in a future shipment;

(B) Be recovered and transformed;

(C) Be recovered and destroyed; or

(D) Be recovered for a non-emissive use.

(3) Report on the final disposition of each shipment within 30 days of the end of the control period.

(g) HCFC 141b exemption allowances—Reporting and recordkeeping. (1) Any person allocated HCFC-141b exemption allowances who confers a quantity of the HCFC-141b exemption allowances to a producer or import and places an order for the production or import of HCFC-141b with a verification that the HCFC-141b will only be used for the exempted purpose and not be resold must submit semi-annual reports, due 30 days after the end of the second and fourth respectively, to the Administrator containing the following information:

(i) Total quantity (in kilograms) HCFC-141b received during the 6 month period; and

(ii) The identity of the supplier of HCFC-141b on a shipment-by-shipment basis during the 6 month period.

(2) Any person allocated HCFC-141b exemption allowances must keep records of letters to producers and importers conferring unexpended HCFC-141b exemption allowances for the specified control period in the notice, orders for the production or import of HCFC-141b under those letters and written verifications that the HCFC-141b was produced or imported for the express purpose of meeting HCFC-141b exemption needs in accordance with information submitted under §82.16(h), and that the quantity will not be resold.

[68 FR 2848, Jan. 21, 2003, as amended at 71 FR 41172, July 20, 2006]

EPA QA requirements/guidance governing collection: Reporting and record-keeping requirements are published in 40 CFR Part 82, Subpart A, Sections 82.9 through 82.13. These sections of the Stratospheric Ozone Protection Rule specify the required data and accompanying documentation that companies must submit or maintain on-site to demonstrate their compliance with the regulations.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: Data can be submitted on paper form or via EPA's Central Data Exchange. Complete information on reporting options/format can be found at:

<https://www.epa.gov/ods-phaseout/ods-recordkeeping-and-reporting>

Timing and frequency of reporting: Quarterly (EPA's regulations specify a quarterly reporting system for U.S. companies) and monthly (for the International Trade Commission).

Quarterly Schedule for US Companies:

Quarter 1: January 1 - March 31

Quarter 2: April 1 - June 30

Quarter 3: July 1 - Sept. 30

Quarter 4: October 1 - Dec. 31

3a. Relevant Information Systems:

The Allowance Tracking System (ATS) database is maintained by the Stratospheric Protection Division (SPD). ATS is used to compile and analyze quarterly information from companies on U.S. production, imports, exports, transformations, and allowance trades of ozone-depleting substances (ODS), as well as monthly information on domestic production, imports, and exports from the International Trade Commission.

The Allowance Tracking System contains transformed data.

The Allowance Tracking System meets relevant EPA standards for information system integrity.

3b. Data Quality Procedures:

The ATS is programmed to ensure consistency of the data elements reported by companies. The tracking system flags inconsistent data for review and resolution by the tracking system manager. This information is then cross-checked with compliance data submitted by reporting companies. SPD maintains a user's manual for the ATS that specifies the standard operating procedures for data entry and data analysis.

The data are subject to an annual quality assurance review, coordinated by Office of Air and Radiation (OAR) staff separate from those on the team normally responsible for data collection and maintenance.

Regional inspectors also perform inspections and audits on-site at the producers', importers', and exporters' facilities. These audits verify the accuracy of compliance data submitted to EPA through examination of company records.

The ATS data are subject to a Quality Assurance Plan (Quality Assurance Plan, USEPA Office of Atmospheric Programs, July 2002).

3c. Data Oversight:

Branch Chief, Stratospheric Program Implementation Program, OAP, OAR

3d. Calculation Methodology:

Explanation of Calculations: Data are aggregated across all U.S. companies for each individual ODS to analyze U.S. total consumption and production.

Unit of analysis: Tons of ODP

4a. Oversight and Timing of Final Results Reporting:

Branch Chief, Stratospheric Program Implementation Program, OAP, OAR

4b. Data Limitations/Qualifications:

None, since companies are required by the Clean Air Act to report data.

4c. Third-Party Audits:

The Government Accounting Office (GAO) completed a review of U.S. participation in five international environmental agreements, and analyzed data submissions from the U.S. under the Montreal Protocol on

Substances that Deplete the Ozone Layer. No deficiencies were identified in their report. See: <http://www.gao.gov/new.items/d02960t.pdf>

Measure Code: R51 - Percentage of all new single-family homes (SFH) in high radon potential areas built with radon reducing features.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

4 - Reduce Exposure to Indoor Air Pollutants

Strategic Target Code and Title:

1 - By 2018, number of future premature lung cancer deaths prevented annually

Managing Office:

Office of Indoor Air and Radiation

1a. Performance Measure Term Definitions:

New: newly constructed

Single-Family Homes: as defined by NAHB

High Radon Potential Areas (Zone 1): county average indoor radon level predicted to be 4pCi/L or greater

Radon Reducing Features: materials and techniques described in various voluntary consensus standards, primarily ASTM E1465 and ANSI-AARST RRNC 2.0

Background: Historically, about 60% of the new homes built with radon-reducing features in the U.S. are built in Zone 1 areas, the highest risk areas (classified as Zone 1 by EPA). In 2010, an estimated 40% of new homes in Zone 1 were built with radon-reducing features. See EPA's radon website for more information:

<https://www.epa.gov/radon>

2a. Original Data Source:

National Association of Homebuilders (NAHB)

2b. Source Data Collection:

Calculation Methodology:

The National Association of Home Builders (NAHB) Research Center conducts an annual survey of home builders in the United States, most of whom are members of the NAHB, to assess a wide range of builder practices. In January of each year, the survey of building practices for the preceding calendar year is typically mailed out to home builders. The NAHB Research Center voluntarily conducts this survey to maintain an awareness of industry trends in order to improve American housing and to be responsive to the needs of the home building industry. The annual survey gathers information such as types of houses built, lot sizes, foundation designs, types of lumber used, types of doors and windows used, etc. The NAHB Research Center Builder Survey also gathers information on the use of radon-resistant design features in new houses, and these questions comprise about two percent of the survey questionnaire.

Quality Procedures:

According to the NAHB Research Center, QA/QC procedures have been established, which includes QA/QC by the vendor that is utilized for key entry of survey data. Each survey is manually reviewed, a process that requires several months to complete. The review includes data quality checks to ensure that the respondents understood the survey questions and answered the questions appropriately. NAHB Research Center also applies checks for open-ended questions to verify the appropriateness of the answers. In some cases, where open-ended questions request numerical information, the data are capped between the upper and lower three percent of the values provided in the survey responses.

NAHB Research Center has been conducting its annual builder practices survey for over a decade, and has developed substantial expertise in the survey's design, implementation, and analysis.

Geographical Extent: Zone 1 areas in the United States.

Spatial Detail: <https://www.epa.gov/radon/find-information-about-local-radon-zones-and-state-contact-information>

2c. Source Data Reporting:

Data Submission Instrument: Results are published by the NAHB Research Center in annual reports of radon-resistant home building practices. The most recent reports are "Builder Practices

Report: Radon-Resistant Construction Practices in New U.S. Homes 2010." Annual reports with similar titles exist for prior years. See http://www.homeinnovation.com/trends_and_reports/featured_reports/radon-resistant_construction. Summary annual data for National and Zone 1 are entered into an internal Radon Benefit-Cost spreadsheet.

Data Entry Mechanism: Summary annual data for National and Zone 1 are entered into an internal Radon Benefit-Cost spreadsheet.

Frequency of Data Transmission: NAHB-RC delivers the contracted annual report to EPA annually.

Timing of Data Transmission to EPA: NAHB-RC annual reports are delivered in September-October.

3a. Relevant Information Systems:

Radon Benefit-Cost Excel-based Spreadsheet

System Description: Excel Spreadsheet

Source/Transformed Data: N/A (not a system)

Information System Integrity Standards: N/A (not a system)

3b. Data Quality Procedures:

EPA reviews NAHB's survey methodology.

EPA's project officer also quality reviews each year's draft report from the NAHB Research Center. Current report is compared to previous report, and spot checks performed on calculations and arithmetic.

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

Environmental Protection Specialist in ORIA's Indoor Environments Program

Source Data Reporting Oversight Responsibilities:

Reviews and QA's draft annual NAHB-RC report with comments and corrections to NAHB.

Information Systems Oversight Personnel:

N/A

Information Systems Oversight Responsibilities:

N/A

3d. Calculation Methodology:

Decision Rules for Selecting Data: N/A (Data presented in the NAHB report)

Definitions of Variables: See the NAHB-Research Center (RC) annual report (hard copy only)

Explanation of Calculations: The survey responses are analyzed, with respect to State market areas and Census Divisions in the United States, to assess the percentage and number of homes built each year that incorporate radon-reducing features. The data are also used to assess the percentage and number of homes built with radon-reducing features in high radon potential areas in the United States (high risk areas).

Explanation of Assumptions: See NAHB annual report

Unit of Measure: Percent of new single-family homes

Timeframe of Result: January-December, annually (for calendar year)

Documentation of Methodological Changes: N/A

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

Environmental Protection Specialist in ORIA's Indoor Environments Program

Final Reporting Oversight Responsibilities:

Oversees staff review and QA of NAHB draft and final reports; approves public use of the data and as an input to the Radon Excel Benefit-Cost (B-C) Spreadsheet.

Final Reporting Timing: Annual in September-October

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: The NAHB statistical estimates are typically reported with a 95 percent confidence interval.

The majority of home builders surveyed are NAHB members, and members construct 80% of the homes built in the United States each year. The NAHB Research Center survey also attempts to capture the activities of

builders that are not members of NAHB. Home builders that are not members of NAHB are typically smaller, sporadic builders that in some cases build homes as a secondary profession. To augment the list of NAHB members in the survey sample, NAHB Research Center sends the survey to home builders identified from mailing lists of builder trade publications, such as Professional Builder magazine. There is some uncertainty as to whether the survey adequately characterizes the practices of builders who are not members of NAHB. The effects on the findings are not known.

For the most-recently completed survey 2010, NAHB Research Center reported mailing the survey to about 20,000 active United States home-building companies, and received about 1,400 responses, which translates to a response rate of about 7 percent. Although an overall response rate of 7 percent could be considered low, it is the response rate for the entire survey, of which the radon-resistant new construction questions are only a very small portion. Builders responding to the survey would not be doing so principally due to their radon activities. Thus, a low response rate does not necessarily indicate a strong potential for a positive bias under the speculation that builders using radon-resistant construction would be more likely to respond to the survey. NAHB Research Center also makes efforts to reduce the potential for positive bias in the way the radon-related survey questions are presented.

Data Lag Length and Explanation: The annual results for any given year are tabulated and delivered to EPA within about 9 months, of the end of the calendar year, i.e., 2010 results were delivered to EPA in October 2011.

Methodological Changes: N/A

4c. Third-Party Audits:

N/A

Measure Code: R50 - Percentage of existing homes with an operating radon mitigation system compared to the estimated number of homes at or above EPA's 4pCi/L action level.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

4 - Reduce Exposure to Indoor Air Pollutants

Strategic Target Code and Title:

1 - By 2018, number of future premature lung cancer deaths prevented annually

Managing Office:

Office of Indoor Air and Radiation

1a. Performance Measure Term Definitions:

Cumulative Number: The estimated number of annual net mitigations are summed; from 1986.

Existing: New and existing homes

Homes: Only individual dwellings are counted to be consistent with the segment of the housing stock delineated in the 1992 EPA Technical Support Document (TSD) for the May 1992 Citizen's Guide to Radon (EPA 400-R-92-011; <https://www.epa.gov/radon/publications-about-radon>). The universe of homes potentially having a radon level of 4pCi/L or more is derived from Census housing data per the TSD criteria.

Operating Mitigation System: Defined as a dwelling with a mitigation system that includes an operating radon vent fan. Radon vent fans are presumed to have an average useful life of 10 years.

EPA's 4pCi/L* Action Level: Established in 1992 pursuant to publication of the 1992 TSD, EPA Science Advisory Board review, and codified in A Citizen's Guide to Radon: The Guide to Protecting Yourself and Your Family from Radon. EPA and the US Surgeon General: (1) strongly recommend that a home be fixed/mitigated when a radon level of 4pCi/L or more is measured; and (2) occupants consider mitigation when the radon level is between 2-4 pCi/l. EPA's estimate of the 21,100 radon-related lung cancer deaths is based on a long-term exposure to 1.25 pCi/L; the average indoor level in US homes.

Background:

This performance measure can include existing and new homes. The bulk of the data are applicable to existing homes. Some new home builders are preemptively including radon vent fans in their mitigation systems at the time of construction (primarily) for homes in Zone 1. Please see EPA's radon website for more information:

<https://www.epa.gov/radon>

2a. Original Data Source:

- Manufacturers of radon venting (vent) fans that are used in mitigation systems.
- US Census Bureau, for data on number of homes

2b. Source Data Collection:

Vent fan manufacturers tabulate and voluntarily provide their annual sales data to EPA. EPA treats the sales data as CBI. All data is rolled up into a single number. That number is adjusted for several assumptions, including a useful life of 10 years, and one fan per dwelling. That adjusted number is then applied to the Radon Benefit-Cost Spreadsheet.

The US Census Bureau is the housing data source from which the number of dwellings that should test for radon is estimated (e.g., 100). That number (100) is adjusted for the Technical Support Document (TSD based assumption that 1 in 15 homes will likely have a radon level of 4 pCi/L or more (e.g., about 7 in every 100 dwellings).

2c. Source Data Reporting:

Data Submission Instrument: Manufacturers voluntarily report data annually to EPA. Manufacturers provide the data once a year, typically in January-February. Data are submitted via an email. After review the data are summed and entered into the Radon Benefit-Cost (B-C) Spreadsheet.

US Census Bureau publishes the American Housing Survey for the United States. See

<http://www.census.gov/programs-surveys/ahs/>

Data Entry Mechanism: Information from the manufacturers are entered into ORIA's Radon Benefit/Cost spreadsheet

Frequency of Data Transmission to EPA-Annually

Timing of Data Transmission to EPA- January-February

3a. Relevant Information Systems:

System Description: Information/Data are maintained on/in an internal OAQ/ORIA/IED excel spreadsheet (.xls);

Source/Transformed Data: Yes-excel information/data

Information System Integrity Standards: n/a (a spreadsheet, not a system)

3b. Data Quality Procedures:

EPA receives the manufacturer sales data as provided and has no way of determining whether its quality is other than that attested to by the provider.

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

Environmental Protection Specialist within ORIA's Center for Radon and Air Toxics

Source Data Reporting Oversight Responsibilities:

Contract execution and management; review and comment/correct draft report and submit to NAHB for final draft.

Information Systems Oversight Personnel:

Director, Center for Radon and Air Toxics

Information Systems Oversight Responsibilities:

Assure acceptable quality of final NAHB report

3d. Calculation Methodology:

Decision Rules for Selecting Data: No single data point; several data points drawn from census American Housing Survey (AHS tabulations to construct the Technical Support Document (TSD) equivalent housing population. See attachment A (Analytical Procedures for radon Risk Reduction and Cost-Effectiveness Estimates, March 2010).

Definitions of Variables: See Attachment A.(Analytical Procedures for Radon Risk Reduction and Cost-Effectiveness Estimates (March 2010, unpublished internal EPA document).

Explanation of Calculations: EPA compares the net number of existing homes in a given year that have been mitigated to the total of homes estimated to require mitigation because they equal or exceed the EPA action level of 4pCi/L. The annual homes mitigated number is added to the previous year's cumulative total.

The calculation of the number of homes across the country at or above EPA's 4pCi/L action level is based on methodology in the 1992 technical support document for radon (internal document available upon request) and current census data.

Explanation of Assumptions: When estimating the number of new radon mitigations annually, the data from fan manufacturers is adjusted based on several assumption: (1) that previously-installed radon mitigation systems will require a fan replacement every ten years; (2) only homes at or above the action level are mitigated; (3) only there is one vent fan is used per dwelling; and (4) all vent fans are used for radon.

Unit of Measure: Existing homes mitigated (<4pCi/L) as a percent of those homes that should mitigate (at/equal to 4 pCi/L)

Timeframe of Result: [January-February]

Documentation of Methodological Changes: N/A

Attached Documents:

Attachment A R50 Radon Cost-Effectiveness Analysis.pdf

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

Environmental Protection Specialist in Center for Radon and Air Toxics
Director, Center for Radon and Air Toxics

Final Reporting Oversight Responsibilities:

Review and accept final report.

Enter selected data points into the Radon Benefit-Cost Excel Spreadsheet

Final Reporting Timing:

Final report I delivered in September-October

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: Reporting by radon fan manufacturers is voluntary and may underestimate the number of radon fans sold. Nevertheless, these are the best available data to determine the number of homes mitigated. There are other methods to mitigate radon including: passive mitigation techniques of sealing holes and cracks in floors and foundation walls, installing sealed covers over sump pits, installing one-way drain valves in un-trapped drains, and installing static venting and ground covers in areas like crawl spaces. Because there are no data on the occurrence of these methods, there is again the possibility that the number of radon mitigated homes has been underestimated.

No radon vent fan manufacturer, vent fan motor maker or distributor is required to report to EPA; they provide data/information voluntarily to EPA. There are only four (4) major radon vent fan manufacturers; one of these accounts for an estimated 70% of the market. Radon vent fans are likely to be rarely used for non-radon applications. However, vent fans typically used for non-radon applications are perhaps being installed as substitutes for radon vent fans in some instances, but this is estimated to be less than 1% of the total market. Ascertaining the actual number of radon vent fans used for other applications, and the number of non-radon fans being substituted in radon applications, would be difficult and expensive at this time relative to the benefit of having such data.

Data Lag Length and Explanation: vent fan manufacturers provide sales data to EPA in Jan-Feb timeframe for previous year.

Methodological Changes: N/A

4c. Third-Party Audits:

There are no third party audits for this measure or its inputs.

Measure Code: R37 - Time to approve site changes affecting waste characterization at DOE waste generator sites to ensure safe disposal of transuranic radioactive waste at WIPP.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

4 - Minimize Exposure to Radiation

Sub-Objective Number and Title:

1 - Prepare for Radiological Emergencies

Strategic Target Code and Title:

1 - Through 2018, EPA will maintain a level of readiness of radiation program personnel

Managing Office:

Office of Indoor Air and Radiation

1a. Performance Measure Term Definitions:

Days to Approve/Disapprove: Elapsed time is measured from EPA receipt of a complete site change request to the date the approval/disapproval is signed.

Site Changes Affecting Waste Characterization: When a DOE site is approved, a tiering table is provided by EPA detailing when and how changes to approved systems will be reported and approved/disapproved by EPA.

DOE Waste Generator Sites: Sites where DOE transuranic waste, eligible for WIPP disposal, is generated (e.g. Hanford, Idaho National Lab, etc.).

Compliant Disposal: Disposal of transuranic waste in compliance with 40 CFR 194 using systems approved by EPA.

Transuranic Radioactive Waste: Waste containing more than 100 nanocuries of alpha-emitting transuranic isotopes per gram of waste with half-lives greater than 20 years. TRU elements are heavier than uranium, have several isotopes, and are typically man-made.

Waste Isolation Pilot Plant (WIPP) site: Located in Carlsbad, New Mexico is a storage site for defense-related transuranic (TRU) nuclear waste.

Background: This measure provides key information about the time required for EPA to approve the Department of Energy's (DOE's) request to dispose of transuranic waste at the WIPP site.

Find out more about the Waste Isolation Pilot Plant at <http://www.wipp.energy.gov/index.htm>

The Department of Energy National TRU Waste Management Plan Quarterly Supplement <http://www.wipp.energy.gov/shipments.htm> contains information on the volumes of waste that are received at the DOE WIPP.

2a. Original Data Source:

Original Data Source: EPA Office of Radiation and Indoor Air

2b. Source Data Collection:

Source Data Collection Methodology and Quality Procedures – Tabulation of records or activities: The FY 2011 example below is excerpted from the excel spreadsheet that is used. The first column lists the activity, the second the complete submission date and the third the signed approval date and the fourth, the number of elapsed days.

The submission date is recorded as soon as the submission is complete. The submission by DOE is considered complete when it meets EPA’s criteria for general submissions and the specific requirements necessary for the type of request being submitted for approval.

Activity	Complete Submission Date	Signed Approval Date	Elapsed Days
NRF -INL RH	8/16/2010	11/1/2010	77
INL TRA Sludge RH	8/4/2010	11/1/2010	89
ANL FEW RH	8/28/2010	11/22/2010	86
INL HFEF 4A RH	1/10/2011	3/23/2011	72
HANFORD SHENC	4/1/2011	5/11/2011	40
Bettis RH BL	2/25/2011	5/23/2011	87
SRS RH Sabotage	4/18/2011	6/7/2011	50
WAGS INL Cd	6/14/2011		

6/27/2011

13

Sandia BL Pro

7/2/2011

9/6/2011

66

Average

64

2c. Source Data Reporting:

Source Data Reporting – Data Submission Instrument: EPA Inspection Team’s Baseline inspection findings.

Source Data Reporting – Data Entry Mechanism: Data (dates) are entered by the inspection team into the Excel spreadsheet on the WIPP share drive. The dates are determined from correspondence and, as necessary, from the date of additional data submission or final issue resolution.

Source Data Reporting – Frequency of Data Transmission to EPA: The frequency of data generation depends on DOE requests for approval or notification and inspections conducted.

Source Data Reporting – Timing of Data Transmission to EPA: The dates are determined from correspondence and, as necessary, from the date of additional data submission or final issue resolution.

3a. Relevant Information Systems:

Relevant Information Systems – System Description: Internal database stored on the share drive in the WIPP/PART directory and used by the inspection team to calculate measure data. The relevant correspondences are docketed in the EPA Air Docket and are public record. The dates are taken directly from that correspondence. The complete submission date is taken from either e-mail of final document/issue resolution or from the date a data disk is received by EPA with the information requested. No additional QA/QC is needed as the result is an Excel-performed mathematical subtraction of those dates and then an average is generated, reported, entered into the Excel spreadsheet and the file is saved and stored in the WIPP/PART directory on the share drive.

Relevant Information Systems – Source/Transformed Data: Data are drawn from DOE/EPA correspondence and from dates of data submission or issue (waste characterization inspection team’s concern and finding) resolution.

Relevant Information Systems – Information System Integrity Standards: Data are backed up regularly by IT staff.

3b. Data Quality Procedures:

Data Quality Procedures: Quality assurance and quality control procedures will follow Agency guidelines and be consistent with EPA Office of Radiation and Indoor Air Quality Management Plan. The relevant correspondences are docketed in the EPA Air Docket and are public record. The dates are taken directly from that correspondence. The complete submission date is taken from either e-mail of final document/issue resolution or from the date a data disk is received by EPA with the information requested. No additional QA/QC is needed as the result is an Excel-performed mathematical subtraction of those dates and then an average is generated and reported.

3c. Data Oversight:

Source Data Reporting of EPA Oversight Personnel: EPA Waste Isolation Pilot Plant (WIPP) Waste Characterization Inspection Team members located in the Office of Radiation and Indoor Air, Radiation Protection Division's Center for Waste Management and Regulation.

Source Data Reporting of EPA Oversight Responsibilities: EPA's WIPP Waste Characterization Inspection Team measures the time between the Department of Energy (DOE) request for approval/notification of change (or the date of the inspection, if applicable) to the date of EPA approval, disapproval, or concurrence of the change. Under the requirements of 40 CFR Part 194.8, EPA's Waste Characterization Inspection Team performs a baseline inspection of each DOE waste generator site. If the Inspection Team determines that all requirements are met, EPA approves the site's waste characterization program and assigns tiers, based on abilities demonstrated during the baseline inspection. The tiering protocol, which applies to waste streams, equipment and procedures, requires DOE to either notify EPA of changes to the waste characterization program (that can affect the quality of the data required by EPA to ensure the disposal regulations are met) prior to implementation of the change (Tier 1) or to notify EPA of the changes upon implementation (Tier 2). For Tier 1 changes, EPA may request additional information or conduct an inspection prior to issuing an approval. Elapsed time is measured from the EPA determination of a complete submission to the date EPA acts on the request.

Information Systems of EPA Oversight Personnel: EPA's WIPP Waste Characterization Inspection Team submits the appropriate documentation to the Director of the Center for Waste Management and Regulations for review, approval and signature or, in some cases, review and concurrence. Once the Center Director formally concurs, the package is delivered to the Deputy Director or the Director of the Radiation Protection Division for review, approval and signature, whichever is appropriate for the continued compliance or baseline inspection letter and report. Upon signature, the transmittal letter is dated and the final letter and inspection report are distributed electronically and mailed via the U.S. postal service. EPA then files the complete documentation in the Agency's Air Docket so it is available for public review.

Information Systems of EPA Oversight Responsibilities: Not Applicable..

3d. Calculation Methodology:

Calculation Methodology – Decision Rules for Selecting Data: Activities used are Tier 1 items submitted by the DOE that are completed within the fiscal year of interest.

Calculation Methodology – Definitions of Variables: Not Applicable.

Calculation Methodology – Explanation of Calculations: EPA will measure the time between the DOE request for approval/notification of change (or the date of the inspection, if applicable) to the date of EPA approval,

disapproval or concurrence of the change. As stated previously, the dates are determined from correspondence and as necessary from the date of additional data submission or final issue resolution.

Calculation Methodology – Explanation of Assumptions: Not Applicable.

Calculation Methodology – Unit of Measure: Time to approve site changes affecting waste characterization at DOE waste generator sites to ensure safe disposal of transuranic radioactive waste at WIPP measured as percentage reduction from the 2004 baseline of 150 days.

Calculation Methodology – Timeframe of Result: Fiscal Year containing the date of EPA approval, disapproval or concurrence.

Calculation Methodology – Documentation of Methodological Changes: Not Applicable.

4a. Oversight and Timing of Final Results Reporting:

Planning Officer, Office of Radiation and Indoor Air

4b. Data Limitations/Qualifications:

Data Limitations/Qualifications: Not Applicable.

Data Lag Length and Explanation: Not Applicable.

Methodological Changes: Not Applicable.

4c. Third-Party Audits:

Third Party Audits: Not Applicable.

Measure Code: R36 - Average time before availability of quality assured ambient radiation air monitoring data during an emergency.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

4 - Minimize Exposure to Radiation

Sub-Objective Number and Title:

1 - Prepare for Radiological Emergencies

Strategic Target Code and Title:

1 - Through 2018, EPA will maintain a level of readiness of radiation program personnel

Managing Office:

Office of Indoor Air and Radiation;Office of Air and Radiation

1a. Performance Measure Term Definitions:

“Average time to availability” is measured as time in days from beginning to end of the data review process.

“Ambient radiation air monitoring data is defined” for this Data Quality Record (DQR) as data sets with gamma radiation levels exceeding a normal range of values for each monitor. Since there is no difference in the gamma data evaluation process under routine conditions or during an emergency, the average time to availability includes normal operations and response to emergencies.

The beginning of the evaluation is defined as the time when evaluation of anomalous gamma data begins by development of a RadNet anomalous gamma form. The evaluation time is defined as the time when the evaluator completes that RadNet anomalous gamma form following review of the data.

2a. Original Data Source:

Data for this performance measure are received from the EPA’s stationary RadNet real-time air monitors, beginning in 2006. The RadNet real-time air monitoring program is administered by the EPA’s National Analytical Radiation Environmental Laboratory (NAREL) under the Office of Radiation and Indoor Air. The data is transferred electronically from EPA’s RadNet real-time fixed air monitors to an EPA ORACLE database at NAREL.

2b. Source Data Collection:

Gamma radiation data are measured continuously for each RadNet fixed air monitor. After every hour of operations, a RadNet air monitor electronically sends gamma radiation data electronically to servers at NAREL. The gamma data are checked by computer against preset levels, and data outside these preset levels are defined as “anomalous.” Anomalous data are flagged for evaluation by EPA.

The evaluation of these flagged readings begins each business day by developing an anomalous gamma form for each anomalous gamma reading. An EPA RadNet Data Evaluator evaluates the data to determine the cause of the anomalous data and completes the anomalous gamma form. Separate EPA Quality Assurance personnel verify the data evaluation separately. This entire data process is defined by NAREL QA/SOP-17, Standard Operating Procedure for the Review, Evaluation, and Verification of Gamma Gross Count Rate Data Reported by RadNet Fixed Monitors.

2c. Source Data Reporting:

The gamma data are submitted to EPA automatically by each RadNet real-time air monitor via electronic communications from the monitor to a server at NAREL, where they are automatically parsed and entered into

an ORACLE database. The computer automatically checks gamma data for anomalies and flags them for further review.

The RadNet Data Reviewer obtains the list of flagged gamma data each business day, then obtains additional gamma data from the monitor. When the RadNet Data Reviewer has obtained all data needed to produce the anomalous gamma forms, the forms (Excel or paper backup) are produced by that person, which begins the evaluation cycle. This time is logged in a database at the NAREL. When the RadNet Data Evaluator has evaluated the data, the anomalous gamma form is completed and signed by that person. The time of signature of anomalous gamma form is recorded in a database at the NAREL for that form.

3a. Relevant Information Systems:

System Description - Each monitor consists of an air sampler, gamma radiation detector, an on-board computer for operating the system and storing the data, and telecommunications systems for sending data to NAREL. The sampler pulls air through a polyester filter on which particulates are collected. The gamma detector continuously analyzes for gamma-emitting radionuclides emitted by particulate collected on the filter. The computer stores the data and sends them to NAREL at the end of each collection period. See Chapters 3 and 5 of the RadNet Conceptual Plan and Implementation Process-Volume 1 Final 2012 at https://cfpub.epa.gov/si/si_public_record_report.cfm?dirEntryID=83045

Source/Transformed Data - An EPA ORACLE database at NAREL contains gamma data sent electronically from the EPA's RadNet real-time fixed air monitors (source data). These data are used to determine when an anomalous gamma form is needed. Information concerning the anomalous gamma form, including the beginning and evaluation times, are stored on servers at NAREL (transformed data).

Information System Integrity Standards - Oracle and Central Data Exchange (CDX). Both follow all EPA policies for Life Cycle Information Security and EPA Quality Assurance.

3b. Data Quality Procedures:

See attached Quality Assurance Project Plan and Standard Operating Procedure.

3c. Data Oversight:

Source Data Reporting Oversight Personnel - RadNet Control Room Supervisor / Physical Scientist, OAR/ORIA/NAREL/CEM.

Source Data Reporting Oversight Responsibilities - Oversee RadNet real-time fixed air monitor operations and maintenance, data evaluation and Quality Assurance processes.

Information Systems Oversight Personnel - Information Systems Security Officer (ISSO), Desktop Support, and System Admin.

Information Systems Oversight Responsibilities - The ISSO oversees all aspects of the computerized information storage systems.

3d. Calculation Methodology:

Decision Rules for Selecting Data - Gamma data are screened by computer against levels that indicate an anomalous reading exists. Data records where gamma data are above the screening level are reviewed by RadNet personnel at NAREL to determine the cause of the anomalous reading.

Definitions of Variables - The variable is gamma count rate which are automatically calculated by each RadNet real-time fixed air monitor. The results of the counts are compared by computer to determine if anomalous results exist.

Explanation of Calculations - The result is determined by averaging the time difference between the anomalous gamma form development and the time of evaluation for each form.

Explanation of Assumptions - There are no assumptions.

Unit of Measure - Minutes (reported as decimal days)

Timeframe of Result: Average evaluation time (reported in hundredths of days) for all anomalous gamma forms for a fiscal year.

Documentation of Methodological Changes - This is a change in the method used to determine average availability of data. Previously, this Measurement Implementation Plan (MIP) was based on an assumption of six hours for availability of anomalous real-time data and 2.5 days for availability of data from the former Environmental Radiation Ambient Monitoring Systems (ERAMS) non-real-time air monitors. Only one ERAMS monitor remains since that legacy program has been phased out over time beginning with implementation of the RadNet real-time monitoring system in 2006. EPA considers efficiency in providing data a critical part of the RadNet program and has implemented processes to improve efficiency of data evaluation. Past results cannot be re-calculated because the beginning times were not recorded.

4a. Oversight and Timing of Final Results Reporting:

Director, NAREL.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications - Only data received by NAREL can be evaluated. On rare occasion, communications issues arise where real-time gamma data cannot be obtained.

Data Lag Length and Explanation - There is no data lag. Exact times of form initiation and form evaluation are captured automatically in a database at NAREL.

Methodological Changes – Beginning with FY 2016 results, EPA will record the beginning and the ending times for each evaluation rather than use standard assumptions. Previously, this Measurement Implementation Plan (MIP) was based on an assumption of six hours for availability of anomalous real-time data and 2.5 days for availability of data from the former Environmental Radiation Ambient Monitoring Systems (ERAMS) non-real-time air monitors. Only one ERAMS monitor remains since that legacy program has been phased out over time beginning with implementation of the RadNet real-time monitoring system in 2006. EPA considers efficiency in providing data a critical part of the RadNet program and has implemented processes to improve efficiency of data evaluation.

4c. Third-Party Audits:

The NAREL RadNet Quality Assurance Officer, NAREL Quality Assurance Officer, or NAREL Director audit the findings of this data and any other RadNet parameter, as needed. The EPA Quality Assurance Officer performs an audit annually on the RadNet process.

Measure Code: R35 - Level of readiness of radiation program personnel and assets to support federal radiological emergency response and recovery operations.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

4 - Minimize Exposure to Radiation

Sub-Objective Number and Title:

1 - Prepare for Radiological Emergencies

Strategic Target Code and Title:

1 - Through 2018, EPA will maintain a level of readiness of radiation program personnel

Managing Office:

Office of Indoor Air and Radiation

1a. Performance Measure Term Definitions:

Level of Readiness: A score indicating the percent (0-100%) of criteria met from a comprehensive list of requirements needed for support of federal radiological emergency response and recovery operations.

Radiation Program: The National Analytical Radiation Environmental Laboratory, the National Center for Radiological Field Operations, and the Radiation Protection Division of the Office of Radiation and Indoor Air, with support from radiation experts located within the ten EPA regions, represented by a lead region for radiation.

Personnel: EPA employees in the thirteen locations listed above who are members of the Radiological Emergency Response Team.

Assets: Equipment and vehicles in the three OAR locations listed above which are utilized as part of Radiological Emergency Response Program activities.

Support: Activities performed by EPA as part of the federal response to a radiological emergency.

Federal Radiological Emergency Response and Recovery Operations: Federal activities addressing the inadvertent release of radioactive material, not including terrorism incidents.

Background: Radiological Emergency Response Measurement Implementation Plan: Long-Term Outcome Performance Measure, Readiness.

2a. Original Data Source:

Original Data Source: EPA Office of Radiation and Indoor Air

2b. Source Data Collection:

Source Data Collection Methodology and Quality Procedures: EPA developed standardized criteria for readiness levels as an outcome of the 2014 EPA Office of Radiation and Indoor Air Emergency Response Retreat. In the intervening years, EPA has modified these criteria based on the functional requirements identified in the Response and Recovery Federal Interagency Operational Plans, the Nuclear/Radiological Incident Annex to those plans, and the National Oil and Hazardous Substances Pollution Contingency Plan (NCP).

A 2012 readiness assessment for the Radiological Emergency Response Team of 91.5% was developed as part of the Agency's Core National Approach to Response scoring process, and will serve as a baseline for this measure.

An evaluation panel consisting of four representatives from the Radiological Emergency Response Program, one from each of the three OAR locations and one representing the regional radiation programs, annually perform a critical evaluation of ORIA's Radiological Emergency Response Program's capabilities versus the standardized criteria, resulting in an overall annual percentage score, as well as component percentage scores. This scoring process will be overseen by the Office of Radiation and Indoor Air's Quality Assurance Manager, to ensure that the scoring process is performed impartially, and that the final score is calculated correctly.

2c. Source Data Reporting:

Source Data Reporting – Data Submission Instrument: The original data are reviewed by the evaluation panel for completeness and accuracy before submission to the Office of Radiation and Indoor Air's Quality Assurance Manager (QAM). The ORIA QAM will review the panel's evaluation and the data and documentation provided by each location for completeness and accuracy. Upon approval, the ORIA QAM submits the data package to the management team for review and approval. After the ORIA QAM receives approval from the management team the QAM submits the data and documentation to OAR.

Data Entry Mechanism: The data will be recorded on a spreadsheet with the name dqr_r35_performancemeasure_YYYY.xlsx (where YYYY is the year), and stored in the shared folder G:/Share/Performance Measures/. After the evaluation panel completes the original evaluation, the spreadsheet contents will be locked until review by the Office of Radiation and Indoor Air's Quality Assurance Manager has been completed.

Frequency of Data Transmission to EPA: Readiness is measured annually near the end of the fiscal year.

Timing of Data Transmission to EPA: Scoring criteria are made available by the end of 1st Quarter of the fiscal year. The evaluation panel meeting to determine initial scoring is usually held in August. The final scoring following evaluation by the Office of Radiation and Indoor Air Quality Assurance Manager is available no later than September..

3a. Relevant Information Systems:

Relevant Information Systems – System Description: Not applicable.

Source/Transformed Data: Not applicable.

Information System Integrity Standards: Not applicable.

3b. Data Quality Procedures:

Data Quality Procedures: Results are based on answers provided by subject matter experts in four locations. The subject matter experts preparing the responses are the best qualified individuals within each location to make a judgment as to the nature of their responses.

The original data are reviewed by the evaluation panel for completeness and accuracy before submission to the Office of Radiation and Indoor Air Quality Assurance Manager, who will review it for completeness and accuracy before submission to OAR.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Subject matter experts at the thirteen locations.

Source Data Reporting Oversight Responsibilities: Verifying completeness and accuracy of information submitted to the evaluation panel.

Information Systems Oversight Personnel: Data are maintained in Microsoft Excel documents by the evaluation panel.

Information Systems Oversight Responsibilities: Verifying the completeness and accuracy of the information maintained in those Microsoft excel documents.

3d. Calculation Methodology:

Calculation Methodology – Decision Rules for Selecting Data: All data which have been collected by the Core National Approach to Response representatives are used.

Definitions of Variables: There are seven elements to the score.

For calendar year 2016, it is anticipated that the seven elements will be:

1. Nationwide Monitoring and Assessment
2. Public Information Coordination
3. Analytical Support
4. Field Support
5. Coordination Center Support
6. Advice to Decision-makers
7. Program Management

Explanation of Calculations: There are seven elements to the score and each element is comprised of a number of criteria, each worth a certain number of points depending on the complexity of the criterion. For the final score, the total received number of points is divided by the total possible number of points (100) to calculate a percentage score over all elements. The criteria may be modified from year to year as operational requirements change for emergency response.

Explanation of Assumptions: In the absence of a radiological emergency, this score is considered a good method for assessing emergency response readiness; however, unanticipated factors may affect actual readiness, which are not covered by the score. In the event of a radiological emergency, a comprehensive lessons-learned assessment is conducted and may inform future scoring criteria to account for additional factors that affected readiness.

Identification of Unit of Measure: Percentage readiness score (0-100%).

Identification of Timeframe of Result: Annual.

Documentation of Methodological Changes: Managers at the four locations will determine if annual changes are needed to readiness elements or criteria to reflect changes in operational requirements for emergency response.

4a. Oversight and Timing of Final Results Reporting:

Oversight and Timing of Final Results Reporting – Oversight Personnel: Office of Radiation and Indoor Air Quality Assurance Manager will report the final results to OAR in September of the fiscal year.

Roles/Responsibilities of Oversight Personnel: The Office of Radiation and Indoor Air Quality Assurance Manager will review it for completeness and accuracy before submission to OAR.

Final Reporting Timing: Annual.

4b. Data Limitations/Qualifications:

Data Limitations/Qualifications: Results are based on answers provided by subject matter experts in four locations (one from each of the three OAR locations and one representing the regional radiation programs), and in the case of training and exercise participation, results are pulled from the Emergency Management Portal - Field Readiness by those subject matter experts. It is anticipated that the subject matter experts preparing the responses are the best qualified individuals within each location to make a judgment as to the nature of their responses.

In the absence of a radiological emergency, this score is considered a good method for assessing emergency response readiness; however, unanticipated factors may affect actual readiness, which are not covered by the score. In the event of a radiological emergency, a comprehensive lessons-learned assessment is conducted and may inform future scoring criteria to account for additional factors that affected readiness.

Data Lag Length and Explanation: Not Applicable.

Methodological Changes: In 2014 and 2015, OSWER used the Core National Approach to Response (Core NAR) scoring criteria for the Radiological Emergency Response Team to assess OAR's level of readiness. This provided for a consistent cross-Agency assessment of emergency response preparedness. However, changes enacted in 2015 in the Core NAR scoring criteria for EPA Special Teams, including the Radiological Emergency Response Team, greatly simplified the scoring process, leading to a less thorough assessment of OAR's level of readiness. Seeking to regain the insight provided in previous years, OAR will perform its own assessment based primarily upon scoring criteria from the years prior to 2015. The new results should be roughly comparable to previous results.

4c. Third-Party Audits:

Third Party Audits: Not Applicable.

Measure Code: O34 - Cumulative millions of tons of Nitrogen Oxides (NOx) reduced since 2000 from mobile sources.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

1 - Reduce Criteria Pollutants and Regional Haze

Strategic Target Code and Title:

3 - By 2018, reduce emissions of sulfur dioxide (SO₂)

Managing Office:

Office of Transportation and Air Quality

1a. Performance Measure Term Definitions:

Mobile sources: Includes on-road cars/trucks; nonroad engines such as farm, construction, and lawn/garden equipment, marine engines, locomotives; and aircraft.

Nitrogen oxides or oxides of nitrogen: Combustion products formed from the reaction of nitrogen and oxygen (in ambient air) and fuel (gasoline, diesel, liquefied propane, CNG or other hydrocarbon-based fuel) as defined by the EPA National Ambient Air Quality Standard and measurement methods.

2a. Original Data Source:

Estimates for on-road and nonroad mobile source emissions are generated from EPA emission models.

Data for the models are from many sources, including vehicle miles traveled (VMT) estimates by state (Federal Highway Administration, or FHWA), the mix of VMT by type of vehicle (FHWA), temperature, gasoline properties, and the designs of Inspection/Maintenance (I/M) programs. Usage data for nonroad comes largely from sales data and surveys.

2b. Source Data Collection:

Source Data Collection Methods: Emission test results for engines/vehicles come from EPA, other government agencies (including state/local governments), academic institutions and industry. The data come from actual emission tests measuring vehicle/engine HC (Hydrocarbons), CO (Carbon Monoxide), NO_x (Nitrogen Oxides), and PM (Particulate Matter) emissions. VMT information comes from Department of Transportation's (DOT) Highway Performance Monitoring System (HPMS) and are obtained from DOT surveys.

Geographical Extent of Source Data: National and state level data.

Spatial Detail Covered By the Source Data: County level data.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: EPA develops and receives emission data on a g/mile or g/unit work (or unit fuel consumed) basis.

Timing and frequency of reporting: The inputs to MOVES/MOBILE 6 and NONROAD 2008 and other models are reviewed and updated, sometimes on an annual basis for some parameters. Generally, Vehicle Miles Traveled (VMT), the mix of VMT by type of vehicle (Federal Highway Administration (FHWA)-types), temperature, gasoline properties, and the designs of Inspection/Maintenance (I/M) programs are updated each year.

Emission factors for all mobile sources and activity estimates for non-road sources are revised at the time EPA's Office of Transportation and Air Quality provides new information.

Updates to the inputs to the models means the emissions inventories will change.

3a. Relevant Information Systems:

National Emissions Inventory Database. Obtained by modeling runs using MOBILE/MOVES, NONROAD, and other models.

See: <https://www.epa.gov/air-emissions-inventories/national-emissions-inventory-nei> for a summary of national emission inventories and how the numbers are obtained in general.

The emission inventory contains source test data as well as usage information compiled from other sources. Also, for consistency from year to year and to provide a baseline over time, the emission inventories are updated for these performance measure only when it is essential to do so. The source data (emissions and usage) are "transformed" into emission inventories.

The models and input undergo peer review and receive scientific input from a variety of sources including academic institutions and public comments.

3b. Data Quality Procedures:

The emissions inventories are reviewed by both internal and external parties including state and local air agencies and industry. EPA works with all of these parties to review model inputs. EPA also reviews the inventories, comparing them to others derived in earlier years to assure that changes in inputs result in reasonable changes in the inventories actual. The models and their inputs also undergo peer and stakeholder review.

3c. Data Oversight:

EPA emission inventories for the performance measure are reviewed by OTAQ Center Directors in the Assessment and Standards Division. The Center Directors are responsible for vehicle, engine, fuel, and modeling data used in various EPA programs.

3d. Calculation Methodology:

Explanation of the Calculations:

- In a national air quality scenario, the mobile source "fleet", primarily, on-road light-duty vehicles, can be classified and allocated down to the county level on the basis of light- versus heavy-duty operation, on-road versus nonroad, and vehicle versus equipment.
- For the baseline "Year," annual tons of mobile source emissions emitted by pollutant are modelled.
- EPA then predicts annual tons of mobile source emissions reduced for a particular year by modelling vehicle/engine pollutant emission rates, i.e., emission standards, for all the miles/operation which can be attributed to mobile sources in that year. For the annual measure, EPA reports the modeled outputs for each year as a target and result.

The MOVES (Motor Vehicle Emission Simulator) model replacing the earlier MOBILE6 vehicle emission factor model is a software tool for predicting gram per mile emissions of hydrocarbons, carbon monoxide, oxides of nitrogen, carbon dioxide, particulate matter, and toxics from cars, trucks, and motorcycles under various conditions. Inputs to the model include fleet composition, activity, temporal information, and control program characteristics. For more information, see: <https://www.epa.gov/moves>

The NONROAD 2008 emission inventory model replacing earlier versions of NONROAD is a software tool for predicting emissions of hydrocarbons, carbon monoxide, oxides of nitrogen, particulate matter, and sulfur dioxides from small and large off road vehicles, equipment, and engines. Inputs to the model include fleet composition, activity and temporal information. For more information on the NONROAD model, see: <https://www.epa.gov/moves>

Over the years, improved emission and usage data have led to updated emission inventories more consistent with air quality data.

Additional information:

To keep pace with new analysis needs, new modeling approaches, and new data, EPA is currently working on transitioning to the modeling system termed the Multi-scale Motor Vehicles and Equipment Emission System (MOVES). This new system will estimate emissions for on road and off road sources, cover a broad range of pollutants, and allow multiple scale analysis, from fine scale analysis to national inventory estimation. When fully implemented, MOVES will serve as the replacement for MOBILE6 and NONROAD. The new system will not necessarily be a single piece of software, but instead will encompass the necessary tools, algorithms, underlying data and guidance necessary for use in all analyses associated with regulatory development, compliance with statutory requirements, and national/regional inventory projections.

Unit of analysis: tons of emissions, vehicle miles traveled, and hours (or fuel) used

4a. Oversight and Timing of Final Results Reporting:

The Center Directors and the Associate Director of OTAQ's ASD are responsible for the performance measure by assuring that the emission inventory and reduction numbers used in EPA regulatory and other programs are accurate and appropriate review.

4b. Data Limitations/Qualifications:

The limitations of the inventory estimates for mobile sources come from limitations in the modeled emission factors (based on emission factor testing and models predicting overall fleet emission factors in g/mile) and also in the estimated vehicle miles traveled for each vehicle class (derived from Department of Transportation data).

For nonroad emissions, the estimates come from a model using equipment inventories, emission factors per hour or unit of work, and an estimate of usage. This nonroad emissions model accounts for over 200 types of nonroad equipment. Any limitations in the input data will carry over into limitations in the emission inventory estimates.

Additional information about data integrity for the MOVES/MOBILE6 and NONROAD models is available at <https://www.epa.gov/moves>.

When the method for estimating emissions changes significantly, older estimates of emissions in years prior to the most recent year may be revised to be consistent with the new methodology when possible.

Methods for estimating emission inventories are frequently updated to reflect the most up-to-date inputs and assumptions. Past emission estimates that inform our performance measures frequently do not keep pace with the changing inventories associated with more advanced information.

4c. Third-Party Audits:

All of the inputs for the models, the actual models, and the resultant emission inventories are reviewed as appropriate by academic experts and, also, by state/local governments who may use some of this information for their State Implementation Plans to meet the National Ambient Air Quality Standards.

Measure Code: G18 - Percentage of Annual Greenhouse Gas Emission Reports verified by EPA before publication.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

1 - Address Climate Change

Sub-Objective Number and Title:

1 - Address Climate Change

Strategic Target Code and Title:

0 -

Managing Office:

Office of Atmospheric Programs

1a. Performance Measure Term Definitions:

An Annual Greenhouse Gas (GHG) Emission Report is “verified” when it is absent of any substantive errors identified by EPA’s electronic verification system or after any substantive error has been addressed with a revised report which corrects the error or an acceptable explanation for why it is not an error.

A “substantive error” is an error that impacts the quantity of GHG emissions reported or otherwise prevents the reported data from being validated or verified.

2a. Original Data Source:

EPA’s Greenhouse Gas Reporting Program (GHGRP) collects annual GHG emission reports from over 8,000 reporters including facilities in nine industry groups (across 41 source categories) that directly emit large quantities of GHGs, as well as suppliers of certain fossil fuels and industrial gases including: Power Plants, Petroleum and Natural Gas Systems, Refineries, Chemicals, Waste, Metals, Minerals, Pulp and Paper.

2b. Source Data Collection:

These reports are collected electronically through EPA’s electronic GHG reporting tool (“e-GGRT”) which supports an integrated verification program involving EPA subject matter experts (SMEs) that electronically runs the reports against approximately 4,000 verification checks. These verification checks include range checks, algorithm checks, completeness checks, and statistical checks to ensure that the reports are complete, consistent and accurate. The annual reporting deadline is March 31 and EPA’s performance measure is to verify 95% of the reports by 150 days after the reporting deadline.

Facilities subject to EPA’s GHGRP are required to monitor and report GHG emissions data in accordance with the requirements prescribed under 40 CFR part 98. These include applicability requirements, monitoring and QA/QC requirements, prescribed calculation methodologies and reporting requirements.

Since reporters are conducting the actual sampling and non-direct measurements, EPA relies on the reporter to adhere to the particular standard(s) and calibration procedures required for its industry in 40 CFR part 98. Any technical system assessments and performance audits that are included in the particular standard(s) and calibration procedures must be followed as well. EPA requires reporters to include information about the standard(s) used in their GHG report submission.

2c. Source Data Reporting:

Data Submission Instrument: EPA’s electronic Greenhouse Gas Reporting Tool (e-GGRT)

EPA's electronic Greenhouse Gas Reporting Tool (e-GGRT) supports approximately 8,000 facilities and suppliers across the US in satisfying their annual requirement to electronically report GHG data to EPA under 40 CFR Part 98 (Mandatory Reporting of Greenhouse Gases Rule) which is implemented under EPA's Clean Air Act authorities. Reporting must be done electronically and e-GGRT provides a user-friendly comprehensive web-based platform for thousands of facilities across 41 subparts (industrial source categories) to conveniently, accurately and efficiently submit detailed GHG data to EPA. e-GGRT includes hundreds of real-time data quality checks that provide data quality feedback to reporters before they submit their data to EPA. The URL for e-GGRT can be found at <https://ghgreporting.epa.gov/ghg/login.do>

Data reporting forms can be found at <https://ccdsupport.com/confluence/display/help/Reporting+Form+Instructions>

The XML reporting schema can be found at <https://ccdsupport.com/confluence/display/help/XML+Reporting+Instructions>

Data Entry Mechanism: Users enter data directly into e-GGRT web forms, or, alternatively, upload standardized XLS data reporting forms or upload XML files that conform to the e-GGRT XML reporting schema.

Frequency of Data Transmission to EPA: Reporters report annually via e-GGRT, re-submittals (corrections) can be provided at any time.

Timing of Data Transmission to EPA: Reporters must sign, certify and submit annual GHG data for the prior year to EPA no later than March 31st.

3a. Relevant Information Systems:

e-GGRT, EPA's electronic Greenhouse Gas Reporting Tool at <https://ghgreporting.epa.gov/> is the primary, stand-alone information management system used by EPA to support the collection, verification and publication of GHG data under this measure. It includes front-end reporting and real-time data quality feedback functionality (as described under 2c) as well as back end compliance and verification support. e-GGRT maintains the master data store (Source data). e-GGRT includes two service calls to CDX, the Agency's central data exchange, one for user authentication and the other for CROMERR. These service calls are seamless to the user, i.e. there is no need for the user to log-in to or enter CDX. The entire user experience is handled by e-GGRT. e-GGRT supports EPA's target enterprise architecture, it complies with Agency and federal security regulations; information is validated with XML schemas and business rules prior to the system accepting that information; uses agency standard software such as Java, HTML, Oracle RDBMS, and Tomcat; uses primarily open source development software, is hosted in NCC in their virtual server environment and users only need a Web browser, and appropriate security access rights to interface.

FLIGHT, EPA's Facility Level Information on greenhouse gases Tool at <https://ghgdata.epa.gov/ghgp/main.do> is the primary, stand-alone publication portal (web page) used to visually display data collected and verified under the program. Transformed data (via ETL from master e-GGRT data store).

ENVIROFACTS, EPA's comprehensive agency-wide repository for environmental data at <https://www3.epa.gov/enviro/> includes a copy of the GHG dataset. Transformed data (via ETL from master e-GGRT data store).

3b. Data Quality Procedures:

Data quality procedures are documented in the Quality Assurance Project Plan (QAPP) for the GHG Reporting Program dated March 11, 2013 (see attached).

Attached Documents:

GHGRP QAPP_3-11-2013.docx

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

Chief, GHG Reporting Branch, EPA/OAR/OAP/CCD/GGRB: Oversees day to day management and implementation of entire regulatory program under 40 CFR Part 98 to collect and verify GHG data from regulated entities.

Verification Lead, GHG Reporting Branch, EPA/OAR/OAP/CCD/GGRB: Oversees day to day management and implementation of integrated verification program to support the GHG reporting program, including development and execution of electronic data validation and verification checks to assess data quality and subsequent analysis by source category subject matter experts at EPA.

Compliance Lead, GHG Reporting Branch, EPA/OAR/OAP/CCD/GGRB: Oversees day to day management and implementation of compliance and enforcement of GHG reporting program, including coordination with EPA's Office of Compliance Assistance and Enforcement and compliance tracking process.

Subject Matter Experts, GHG Reporting Branch, EPA/OAR/OAP/CCD/GGRB: Multiple personnel covering 41 industrial source categories. Review source category specific data reporting requirements, support software development and testing, review data verification reports, analyze reported data and follow-up with individual facilities, as needed.

Information Systems Oversight Personnel:

Data Management and Integration Lead, GHG Reporting Branch, EPA/OAR/OAP/CCD/GGRB: Coordinates activities that support development, maintenance and interaction of electronic tools that support GHG data collection, verification and publication.

CBI Lead, GHG Reporting Branch, EPA/OAR/OAP/CCD/GGRB: Maintains and supports enforcement of CBI policies and CBI equipment.

Security Lead/ISO, GHG Reporting Branch, EPA/OAR/OAP/CCD/GGRB: Maintains System Security Plan and related reporting/submissions.

3d. Calculation Methodology:

Decision Rules for Selecting Data: Per 40 CFR part 98 (<https://www.epa.gov/ghgreporting/rulemaking-notices-ghg-reporting>) GHGRP collects complete, consistent and accurate GHG emissions data to inform policy and regulatory development. Part 98 provides specific calculation and reporting methods developed through notice-and-comment rulemaking. To ensure that data can be used to support policy and regulatory development, annual GHG emission reports must be verified (i.e. free of substantive errors).

Definitions of Variables: The variables used to calculate the performance measure are total number of "annual GHG reports received" for a "reporting year", and the number of "verified annual GHG reports". Further, a report is determined to be verified when there are no "substantive errors".

Annual GHG report – each facility subject to the GHGRP is required to electronically submit an annual report fulfilling the reporting requirements described under 40 CFR Part 98. There is only one annual GHG report per facility.

Reporting year – the annual reporting cycle extends from January 1 to December 31 and the emissions data collected over this period must be submitted to EPA by March 31 of the following year. For example, Reporting Year 2012 data were collected from January 1, 2012 to December 31, 2012 and reported to EPA on March 31, 2013.

Verified Annual GHG report – an annual GHG report is determined to be verified when it is free of any substantive errors.

Substantive error - an error that impacts the quantity of GHG emissions reported or otherwise prevents the reported data from being validated or verified.

Explanation of Calculations: The percentage of annual GHG reports which are verified is calculated by dividing the number of reports without any substantive errors by the total number of annual GHG reports and multiplying by 100 for a given reporting year.

Explanation of Assumptions: This measurement assumes that once an annual GHG report does not trigger any verification checks and/or any triggered checks are adequately explained by the reporter, the annual report meets the objectives of the GHGRP.

Unit of Measure: Unit of measure is percent of reports that are verified.

Timeframe of Result: This measurement is assessed 150 days after the reporting deadline for a given reporting year.

Documentation of Methodological Changes: N/A

4a. Oversight and Timing of Final Results Reporting:

Branch Chief, GHG Reporting Program

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: Based on current information, GHGRP has high reporting rates but it is difficult for the Program to ensure that 100 percent of the facilities which are subject to the Rule are reporting under certain source categories (e.g., stationary combustion sources).

The GHGRP relies upon centralized verification to evaluate whether annual GHG emission reports meet the requirements prescribed under 40 CFR part 98. EPA has implemented a very robust electronic verification system to evaluate these reports to identify reporting errors, inconsistencies, etc. We also have the authority to evaluate the field activities prescribed under 40 CFR part 98. However, given the large number of facilities, we have limitations in our ability to physically confirm implementation of measurement and/or monitoring requirements under Part 98.

Data Lag Length and Explanation: Data for a given reporting year is published approximately six months following the reporting deadline. Therefore, there is approximately a 10 month lag between the end of a reporting year and the publication of the respective data.

Methodological Changes: None.

4c. Third-Party Audits:

None

Measure Code: R19 - Cumulative number of programs supporting the delivery, infrastructure, and sustainable financing of environmental asthma interventions at home and school.

Office of Air and Radiation (OAR)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

2 - Improve Air Quality

Sub-Objective Number and Title:

-

Strategic Target Code and Title:

-

Managing Office:

Office of Indoor Air and Radiation

1a. Performance Measure Term Definitions:

Cumulative: The total over the baseline of zero in 2015 (when this measure was adopted).

Programs: Federal, state, regional and local programs addressing asthma and healthy housing, including: community-based asthma programs, asthma coalitions, state and local health and Medicaid departments, state and local environmental departments; public and private health insurers, healthy homes and weatherization programs, state and local housing authorities, and national non-profits with a housing, health, asthma or environment focus. All of these programs have the potential to conduct in home indoor air quality assessments and interventions which prevent exposure to environmental asthma triggers (e.g., mold, pests, second-hand smoke, pet dander and dust mites).

Infrastructure: Includes programs supporting the spread of evidence-based interventions delivered at home and school through capacity-building, training, policy adoption, workforce certification, referral systems, and other forms of EPA approved support provided by grantees.

Sustainable financing: reimbursement by public and private insurance or bundling funding sources to cover cost of the intervention (e.g., pooling healthcare, housing and weatherization dollars).

Environmental interventions: Environmental management is the avoidance of asthma triggers either through source control activities (e.g. smoke-free homes and cars), behavior changes (e.g. weekly washing of bedding to reduce dust mite exposure) or prevention practices (e.g. fixing leaks to prevent mold growth).

Strong evidence indicates that many chronic health conditions like asthma disproportionately affect low income, minority, and tribal communities. Environmental pollutants in homes can cause and exacerbate asthma. Further evidence indicates that investment in home interventions will improve health outcomes and reduce and/or shift health care costs from medical treatment to secondary prevention. Programs addressing asthma at the local, tribal, state, regional, and federal level that support in-home asthma education, assessment and interventions will help low-income, minority, and tribal families and communities reduce their exposure to environmental asthma triggers.

Additional background information: <https://www.epa.gov/asthma>

2a. Original Data Source:

EPA's Indoor Environments Division receives data from four sources:

1. Quarterly progress reports from EPA cooperative agreement recipients. Current grant recipients include the America's Health Insurance Plans, American Lung Association of the Upper Midwest, National Center for Healthy Housing, and Public Health Institute.
2. Members of AsthmaCommunityNetwork.org
3. EPA Regional Offices
4. EPA National Environmental Leadership Award in Asthma Management

2b. Source Data Collection:

All data sources below are self-reported and are considered to be of sufficient quality.

Data sources include:

- Assistance agreement quarterly reports are collected electronically and entered into EPA's electronic IGMS and IED's IAQ Impact system by the EPA Project Officer.
- Analytics from AsthmaCommunityNetwork.org are collected monthly.
- EPA Regional Officers input data into IAQ Impact on a quarterly basis.
- Applications for the National Environmental Leadership Award in Asthma Management are solicited annually and awards are made in May.

Data quality is ensured through:

- Standard terms and conditions in the cooperative agreement award
- Standard reporting template with glossary of terms/definitions
- Quarterly meeting with grant recipients to review progress and harmonize results reporting
- Required grants management training for project officers which includes results reporting
- Agency requirement for baseline monitoring of cooperative agreement results reporting

2c. Source Data Reporting:

Data Submission Instrument: EPA funded partners use a reporting template, or comparable document, to report original data to the EPA project officer. Quarterly data reporting by grant recipients is required as a condition of the funding agreement.

Data Entry Mechanism: EPA Project Officers upload the reports in the Agency's IGMS and enters results report data into the OAR/ORIA/IED tracking database (IAQ Impact).

Frequency of Data Transmission to EPA: Funded partners are required to report quarterly. Data generated as a result of training by EPA staff are reported annually.

Timing of Data Transmission to EPA: Funded partners are required to submit data 30 days after the end of the quarter (e.g., January 30, April 30, June 30, and September 30). Annually, they are required to submit a report summarizing all accomplishments for the previous year; this report is due 60 days after the end of the project period. The majority of OAR/ORIA/IED and regional partner projects follow the fiscal year calendar.

3a. Relevant Information Systems:

System Description: OAR/ORIA/IED uses an online reporting system (IAQ Impact), built on an Access platform, to log results from EPA and funded partner activities. Templates in the system correspond to program work areas and sorting functions are used to generate reports for specific indicators (e.g. in-home assessments conducted).

Source/Transformed Data: Source data only.

Information System Integrity Standards: N/A

3b. Data Quality Procedures:

All data is self-report and is assessed to be of sufficient quality. Project officers review data and project reports, conduct meetings with partners to review progress, and conduct formal project reviews as required grants/contracts management.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: OAR/ORIA/IED project officers and Regional Air Program project officers

Source Data Reporting Oversight Responsibilities: Project officers check grantee reported data against proposed or target results.

Information Systems Oversight Personnel: OAR/ORIA/IED work assignment manager

Information Systems Oversight Responsibilities: manage support contract personnel who maintain IAQ Impact; give technical direction for changes to tracking database (e.g. new data fields to accommodate new project outputs/outcomes).

3d. Calculation Methodology:

Decision Rules for Selecting Data: Data are selected for simple summation based on coded entries in IAQ Impact.

Definitions of Variables: not applicable

Explanation of Calculations: simple sum

Explanation of Assumptions: not applicable

Unit of Measure: program

Timeframe of Result: fiscal year

Documentation of Methodological Changes: N/A

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Division Director

Final Reporting Oversight Responsibilities: Reviews and submits final report to ORIA Program Management Office

Final Reporting Timing: standard annual frequency

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: Data limitations are those inherent with self-reporting.

Data Lag Length and Explanation: N/A

Methodological Changes: N/A

4c. Third-Party Audits:

None

Office of Administration and Resource Management (OARM) Record(s)

Measure Code: 098 - Cumulative percentage reduction in energy consumption.

Office of Administration and Resource Management (OARM)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

1a. Performance Measure Term Definitions:

Energy consumption:

Per guidance issued by DOE and CEQ on the implementation of the Energy Policy Act of 2005, Energy Independence Act of 2007, and EO 13514, energy consumption is defined as the electricity, natural gas, steam, high temperature hot water, chilled water, fuel oil, propane, and other energy used in EPA occupied facilities where EPA pays directly for utilities. This group of “reporting facilities” consists of EPA laboratories – either owned by EPA, leased by EPA, or leased by GSA for EPA. This definition of energy consumption matches that used by all federal agencies in implementing the above referenced legislation and EO. Energy consumption reductions are measured using a BTUs/Gross Square Foot/Year metric that is described in the above referenced guidance and used by all federal agencies.

EPA’s 34 reporting facilities: The EPA facilities at which the Agency controls building operations, pays utility bills directly to the utility company, and reports annual energy and water consumption data to the U.S. Department of Energy in order to demonstrate compliance with federal energy and water reduction requirements.

FY2003 baseline:

EPA’s energy consumption baseline for FY 2003 is 388,190 BTUs/GSF/Year.

Background:

Per statute and EO, EPA must reduce energy use at its “reporting” facilities by 3% annually, for a cumulative reduction of 30% by FY 2015, from a FY 2003 baseline. EPA must reduce its energy use 18% below its FY 2003 baseline by the end of FY 2011, 21% by the end of FY 2012, and 24% by FY 2013. EPA’s energy cumulative energy reduction was 18.1% in FY 2011.

2a. Original Data Source:

EPA Contractor

2b. Source Data Collection:

Source Data Collection Methods:

The Agency’s contractor requests and collects quarterly energy and water reporting forms, utility invoices, and fuel consumption logs from energy reporters at each of EPA’s “reporting” facilities. The reported data are based on metered readings from the laboratory’s utility bills for certain utilities (natural gas, electricity, purchased steam, chilled water, high temperature hot water, and potable water) and from on-site

consumption logs for other utilities (propane and fuel oil). In instances when data are missing and cannot be retrieved, reported data are based on a proxy or historical average. It is relatively rare for EPA to use proxy data, and even more rare for EPA to use proxy data over a significant period of time. In the relatively few cases where a meter breaks, or an advanced metering system loses data, EPA develops proxy data to substitute for the missing data. For example, if a week's worth of data is missing from a particular meter, an average of the previous week's data and the following week's data is used. These adjustments are similar to those used in the private sector and in most Advanced Metering software systems, which typically flag duplicate data or missing data, and use comparable operating period data to fill in any gaps. Again, the use of proxy data is rare, and would alter EPA's reported energy use by +/- 0.25% at most on an annual basis.

Date/Time Intervals Covered by Source Data:

Quarterly; FY2003 to present

EPA QA Requirements/Guidance Governing Collection:

The contractor is responsible for reviewing and quality assuring/quality checking (QA/QCing) the data. Specifically, the contractor performs an exhaustive review of all invoices and fuel logs to verify that reported consumption and cost data are correct. Once the energy data is reviewed and verified, the contractor will review and verify the GHG equivalents data ensuring they are using the current translation factors.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system:

EPA currently relies on a paper based system to collect and report out energy data. A contractor receives hard or PDF copies of all utility bills from reporting locations, assimilates and reports out the data in predetermined quarterly and annual data reports. The standard operating procedures for Energy Reporting include multiple QA/QC practices at each step of the data collection and analysis process.

EPA's contractors use DOE provided conversion factors to convert native fuel units into BTU equivalents. These conversion factors are used by all federal agencies in their mandatory energy reporting. Shortly EPA expects to switch a significant portion of its energy reporting to an advanced metering system (approximately 74% of energy use), but will run the current paper based system for at least a year to ensure quality and continuity of energy data.

Timing and frequency of reporting:

EPA collects and distributes energy data on a quarterly basis. .

3a. Relevant Information Systems:

Energy and Water Database.

The Energy and Water Database is a collection of numerous spreadsheets that track energy consumption and GHG production data supplied by the Agency's contractor.

In addition, beginning on January 31, 2011 and annually thereafter, EPA must enter this data into a Department of Energy Data Portal. This portal gathers energy use data for each federal agency, for the previous fiscal year.

3b. Data Quality Procedures:

EPA's Sustainable Facilities Practices Branch compares reported and verified energy use at each reporting facility against previous years' verified data to see if there are any significant and unexplainable increases or decreases in energy consumption and costs.

3c. Data Oversight:

The Chief, Sustainable Facilities Practices Branch, is responsible for overseeing the energy and water data collection system. This position manages EPA's energy conservation program, including forecasting, project development, and data reporting.

Source Data Reporting Oversight Personnel:

Detailed Standard Operating Procedures have been developed, that includes specific requirements for quality control of energy data collection and reporting, covering areas such as data verification, data entry, and other steps in the energy data reporting process.

Information Systems Oversight Personnel:

While EPA is still developing experience with advanced metering systems, it has procedures in place to insure data accuracy. These include running manual data collection and advanced metering data collection in parallel, typically for at least one year, to confirm accuracy of advanced metered data. We also compare current period information with historic information to identify any variances.

3d. Calculation Methodology:

Timeframe:

Cumulative from FY2003 to end of most recent fiscal year

Generally, any change in energy data reporting procedures involves running the previous method in parallel with the new method for at least a year, prior to standardizing a new methodology. For example, when our Research Triangle Park, North Carolina laboratory installed an advanced metering system, we ran the old and the new data streams for two years in ensure accuracy/continuity of data.

See attached Standard Operating Procedures.

Attached Documents:

EPA Energy Database SOP 1st Q FY 2012.pdf

4a. Oversight and Timing of Final Results Reporting:

The Chief, Sustainable Facilities Practices Branch, is responsible for overseeing the energy and water data collection system. This position manages EPA's energy conservation program, including forecasting, project development, and data reporting. EPA reports energy data internally to facility managers and staff involved in energy management, and annually to DOE and CEQ.

4b. Data Limitations/Qualifications:

EPA does not currently have a formal meter verification program to ensure that an on-site utility meter reading corresponds to the charges included in the utility bill. However, as EPA implements the advance metering requirements of the Energy Policy Act of 2005 and the Energy Independence and Security Act of 2007, which is currently underway, EPA will move to annual calibration of advanced meters.

4c. Third-Party Audits:

EPA reports energy data internally to facility managers and staff involved in energy management, and annually to DOE and CEQ.

Office of Administration and Resource Management (OARM)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

1a. Performance Measure Term Definitions:

Certified acquisition staff (1102): The GS-1102 series includes positions that manage, supervise, perform, or develop policies and procedures for professional work involving the procurement of supplies, services, construction, or research and development using formal advertising or negotiation procedures; the evaluation of contract price proposals; and the administration or termination and close out of contracts. The work requires knowledge of the legislation, regulations, and methods used in contracting; and knowledge of business and industry practices, sources of supply, cost factors, and requirements characteristics. The purpose of the Federal Acquisition Certification in Contracting (FAC-C) program is to establish core requirements for education, training, and experience for contracting professionals in civilian agencies. The federal certification in contracting is not mandatory for all GS-1102s; however, members of the workforce issued new Contracting Officer (CO) warrants on or after January 1, 2007, regardless of GS series, must be certified at an appropriate level to support their warrant obligations, pursuant to agency policy.

Background:

It is essential that the Federal Government have the capacity to carry out robust and thorough management and oversight of its contracts in order to achieve programmatic goals, avoid significant overcharges, and curb wasteful spending. A GAO study last year of 95 major defense acquisitions projects found cost overruns of 26 percent, totaling \$295 billion over the life of the projects. Improved contract oversight could reduce such sums significantly.

Executive Agencies were requested to propose plans to increase the Acquisition Workforce by 5%. OMB provided tools to the Agencies to determine what the appropriate size would be for the acquisition workforce which is how EPA determined that we need 351 1102s by FY2014. We proposed adding new contracting personnel annually, in even increments, through 2014 in order to reach this goal. Since EPA is always working on certifying our contracting personnel, the target certification levels for FY2012 include certifying the personnel that EPA is bringing onboard to satisfy the increase in the acquisition workforce and certifying those already at EPA. Since EPA's proposed plan included bringing on mid- and senior-level 1102s, it is expected that many will already be certified.

Certification and warranting procedures are initiated by the individual seeking the certification/warrant. There may be eligible individuals already in the acquisition workforce who have not yet applied for certification that EPA is unable to track.

For more information, please see:

Presidential Memorandum for the Heads of Executive Departments and Agencies – Subject: Government Contracting, http://www.whitehouse.gov/the_press_office/Memorandum-for-the-Heads-of-Executive-Departments-and-Agencies-Subject-Government/ March 4, 2009

October 27, 2009 OMB Memorandum for Chief Acquisition Officers, Senior Procurement Executives, Chief Financial Officers, Chief Human Capital Officers – Subject: Acquisition Workforce Development Strategic Plan for Civilian Agencies – FY 2010 – 2014.

http://www.whitehouse.gov/sites/default/files/omb/assets/procurement_workforce/AWF_Plan_10272009.pdf

The link is correct as it applies to the Acquisition Workforce Strategic Plan for Civilian Agencies-FY 2010- 2014 relative to increasing the by 5% as stated in the Background summary for EPA.

2a. Original Data Source:

The Agency Acquisition Career Manager (ACM) reviews and approves the final completed package for an applicant's certification. The EPA has a Certification and Warrant Database that is used as the tool for approval and tracking the number of FAC-C and warrants issued in the Agency. This data is reported as the total assigned number of EPA 1102s assigned and the percentage of the total 1102 staff the certified. The baseline is 324 assigned 1102s in FY 09 with 70% of the total 1102s assigned in FY 09 certified.

2b. Source Data Collection:

Source Data Collection Methods:

Before an individual is certified, there are three levels of review and approval of documentation proving certification eligibility. An initial review is performed on every individual's documentation for certification by an EPA Policy Analyst that specializes in FAC-C certification eligibility. The Analyst aids the applicant in preparing a complete package to be reviewed for approval. Once the package is completed, it is provided to the Policy Analyst's Team Leader for review and approval. Once it is determined that the package is ready for final review by the Agency Acquisition Career Manager (ACM) the final completed package is sent forward for review and approval. Once approved, FAC-C level I, II, or III is granted based on the information provided and applied for. The FAC-C certification allows for a warrant to be applied for and issued.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system:

The data in the "Federal Acquisition Certification, Warrants, and BPAs" database is reviewed and inputted by EPA Procurement Analysts who are trained to verify documents submitted by employees for Federal Acquisition Certification in Contracting (FAC-C) certification and approval. The individual uploads his or her documents for review and approval into the email the FAC-C mailbox where the EPA Procurement Analyst can review the uploaded documentation to support the education, experience and training requirements for FAC-C certification. Once this review is completed the Procurement Analyst releases the file to the supervisor of record for approval/disapproval. After the supervisor's approval/disapproval, the system notifies the ACM that the file is ready for review and approval/disapproval. After the ACM approves the application, the FAC-C certificate is then ready for printing and signature by the ACM.

Timing and frequency of reporting:

Once the individual uploads all the documents in their application request for certification, there are system notifications generated that flow in the review and approval to the Procurement Analyst, Supervisor, and ACM. After the FAC-C Level I, II, or III certificate is signed by the ACM, it is scanned and emailed to the applicant in advance of receiving the original in the mail. The 1102 certification data is reported annually consistent with the OMB, OFPP reporting guidance for the Annual Acquisition Human Plan (AHCP).

3a. Relevant Information Systems:

The information for tracking the certification targets is currently maintained in the EPA's "Federal Acquisition Certification, Warrants, and BPAs" database.

The EPA's "Federal Acquisition Certification, Warrants, and BPAs" database Warrants/Certifications is a Lotus Notes Database which contains scanned copies of EPA Warrants. For reporting purposes, information is pulled manually from the scanned Warrant and placed on each record. This information includes Warrant Number, Level, Type, Authority (name and title), Issue Date, Limitation, Start Date, AAShip and Division. Access is closely kept; each record can only be accessed by the FAC/C and warrant holder, the supervisor, and such administrative officers as are listed in the configuration. Contents are reviewed and updated twice yearly by a designated PTOD POC.

As Warrants are added or cancelled, a group of specialists in OCFO and ITSC are notified so as to keep records up to date in other systems. Updates to other systems are manual. The source data exists on the paper documents. There is no transformation i.e., aggregated, modeled, normalized, etc.).

EXAMPLES of system integrity standards include the System Life Cycle Management Policy and the IT security policy. This is a stand-alone reporting system built on the EPA approved Lotus Notes platform. It is in the Operations and Maintenance portion of the System Life Cycle Management. It rests on secured, internal EPA server and does not replicate. Proper access is applied to each document. All reporting is done in the Notes Client in canned reporting views. There is no web access.

3b. Data Quality Procedures:

This is not public data viewable outside of EPA information system. The data in the "Federal Acquisition Certification, Warrants, and BPAs" database is reviewed and inputted by EPA Procurement Analysts who are trained to verify documents submitted by employees for Federal Acquisition Certification in Contracting (FAC-C) certification and approval. Once this review is completed the Procurement Analyst releases the file to the supervisor of record for approval/disapproval. After the supervisor's approval/disapproval, the system notifies the ACM that the file is ready for review and approval/disapproval. After the ACM approves the application, the FAC-C certificate is then ready for printing and signature by the ACM.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: The Agency Senior Procurement Executive (SPE) oversees the final reporting of 1102 certification data consistent with the OMB, OFPP reporting guidance in the Annual Acquisition Human Plan (AHCP). The Agency Acquisition Career Manager (ACM) is responsible for data research, data collection, data validation, and preparation of the Annual AHCP.

Information system Oversight Personnel: The Senior Procurement Executive (SPE) of the Environmental Protection Agency (EPA) is responsible for establishing an effective acquisition management system which ensures that quality goods and services are obtained at reasonable prices, in a timely fashion, and in accordance with the statutory and regulatory requirements and the programmatic needs of the agency. The Agency Senior Procurement Executive (SPE) oversees the final reporting of 1102 certification data consistent with the OMB, OFPP reporting guidance in the Annual Acquisition Human Plan (AHCP). As warrants are added or cancelled in the EPA "Federal Acquisition Certification, Warrants, and BPAs" database, a group of specialists in OCFO and ITSC are notified so as to keep records up to date in other systems. As warrants are added or cancelled, a group of specialists in OCFO and ITSC are notified so as to keep records up to date in other systems.

3d. Calculation Methodology:

This data is reported as the total assigned number of EPA 1102s assigned and the percentage of the total 1102 staff the certified. The baseline is 324 assigned 1102s in FY 09 with 70% of the total 1102s assigned in FY 09 certified. The projected target for 2012 for total assigned 1102s is 335 with a projected 80% of the total assigned staff certified. EPA is continually working on certifying our 1102 acquisition workforce; however, the estimates proposed targets rely upon receiving the additional FTEs for the acquisition workforce.

4a. Oversight and Timing of Final Results Reporting:

The Agency Senior Procurement Executive (SPE) oversees the final reporting of 1102 certification data consistent with the OMB, OFPP reporting guidance in the Annual Acquisition Human Plan (AHCP).

4b. Data Limitations/Qualifications:

An error estimate has not been calculated for this measure. The EPA has a Certification and Warrant Database that is used as the tool for approval and tracking the number of FAC-C and warrants issued in the Agency. The database is a stand-alone reporting system built on the EPA approved Lotus Notes platform. It is in the Operations and Maintenance portion of the System Life Cycle Management. It rests on secured, internal EPA server and does not replicate. Proper access is applied to each document. All reporting is done in the Notes Client in canned reporting views. There is no web access. The source data exist on paper documents. There is no transformation of data (i.e., aggregated, modeled, normalized, etc.).

4c. Third-Party Audits:

There are no independent third party audits of the data flow for this performance measure at this time. However, future audits could be conducted by relevant OIG, GAO, and OMB.

As an internal management control tool, the Senior Procurement Executive (SPE) has established the Balanced Scorecard Performance Measurement and Performance Management Program (Balanced Scorecard- BSC). The purpose of the BSC program establishes an Acquisition System Performance Management Plan framework under which the Office of Acquisition Management (OAM) may ensure that business systems adhere to EPA's mission and vision, and strategy statements follow best business management practices, and comply with applicable statutes, regulations, and contract terms and conditions. Through the utilization of the Balance Scorecard framework, OAM will be able to identify opportunities to strengthen the EPA's Acquisition Workforce Strategic Human Capital Plan, thus allowing EPA to pursue all available authorities and strategies to ensure that the Agency appropriate resources and the best qualified staff to provide mission support. The BSC program operates with performance measures, self-assessment, and peer review/oversight components.

Measure Code: 010 - Cumulative percentage reduction in Greenhouse Gas (GHG) Scopes 1 & 2 emissions.

Office of Administration and Resource Management (OARM)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

1a. Performance Measure Term Definitions:

GreenHouse Gas (GHG) Scope 1 emissions: Scope 1 GHG emissions are emissions associated with fossil fuel burned at EPA facilities or in EPA vehicles and equipment. Sources of Scope 1 GHG emissions include fuel oil and natural gas burned in boilers, gasoline used in vehicles, and diesel fuel used in emergency generators.

GreenHouse Gas (GHG) Scope 2 emissions: Scope 2 GHG emissions are emissions associated with indirect sources of energy such as electricity, chilled water, or purchased steam. For example, the GHG emissions from the coal and natural gas used to generate the electricity supplied to EPA facilities are considered EPA Scope 2 GHG emissions.

Note: This measure reports cumulative percentage reduction in Scope 1 and 2 emissions aggregately.

EPA's 34 reporting facilities: The EPA facilities at which the Agency controls building operations, pays utility bills directly to the utility company, and reports annual energy and water consumption data to the U.S. Department of Energy in order to demonstrate compliance with federal energy and water reduction requirements.

- 1) Research Triangle Park, NC New Main
- 2) Research Triangle Park, NC RTF
- 3) Research Triangle Park, NC National Computer Center
- 4) Research Triangle Park, NC Incinerator
- 5) Research Triangle Park, NC Child Care Center
- 6) Research Triangle Park, NC Page Road
- 7) Chapel Hill, NC
- 8) Cincinnati – AWBERC, OH
- 9) Cincinnati- T and E, OH
- 10) Cincinnati- Center Hill, OH
- 11) Cincinnati – Child Care
- 12) Cincinnati – PUBS, OH
- 13) Ann Arbor, MI
- 14) Fort Meade, MD
- 15) Edison, NJ
- 16) Edison – REAC, NJ

- 17) Duluth, MN
- 18) Las Vegas, NV
- 19) Narragansett, RI
- 20) Richmond, CA
- 21) Corvallis-Main, OR
- 22) Corvallis-WRS, OR
- 23) Houston, TX
- 24) Athens-ORD, GA
- 25) Athens SESD, GA
- 26) Manchester, WA
- 27) Kansas City STC, KS
- 28) Golden, CO
- 29) Chelmsford, MA
- 30) Gulf Breeze, FL
- 31) Newport, OR
- 32) Ada, OK
- 33) Montgomery, AL
- 34) Grosse Ile, MI

FY 2008 baseline: 140,911 metric tons of carbon dioxide equivalent (MTCO₂e). A breakdown of this baseline is available at http://www.epa.gov/oaintrnt/documents/epa_ghg_targets_letter_omb.pdf

Background: This measure tracks EPA's performance in meeting Executive Order 13514 (Federal Leadership in Environmental, Energy, and Economic Performance) and demonstrating leadership in GHG emissions reductions. For more information on Executive Order 13514, please see <http://www.epa.gov/oaintrnt/practices/eo13514.htm> More information on EPA's GHG reduction goals and strategies is available at <http://www.epa.gov/oaintrnt/ghg/strategies.htm> and EPA's letter informing OMB of the Agency's Scope 1 and 2 GHG emissions reduction goal is available at http://www.epa.gov/oaintrnt/documents/epa_ghg_targets_letter_omb.pdf An OIG evaluation of EPA's progress in meeting its GHG reduction goals is available at <http://www.epa.gov/oig/reports/2011/20110412-11-P-0209.pdf>

2a. Original Data Source:

EPA Contractor

2b. Source Data Collection:

Source Data Collection Methods:

Scope 1 emissions. See section on Energy Consumption Goal for detail on Energy and Water Data collection. For other foundation information needed for GHG emissions calculations, EPA relies primarily on federal wide data systems to collect other information necessary to collect foundation data for GHG Scope 1 and 2 emissions. These data systems are used by all federal agencies, with some minor exceptions. For example, EPA utilizes GSA's FAS system to gather fleet fuel use; however EPA keeps a separate parallel system to ensure data quality.

Scope 2 emissions. See section on Energy Consumption Goal for detail on Energy and Water Data collection.

EPA uses the DOE data portal to convert foundation information into GHG emissions equivalents.

Date/Time Intervals Covered by Source Data:

Quarterly; FY2008 to present

While EPA collects energy and water use data quarterly, use of the DOE Data Portal to calculate GHG Scope 1 and 2 emissions is done once each Fiscal Year.

EPA QA Requirements/Guidance Governing Collection:

The contractor is responsible for reviewing and quality assuring/quality checking (QA/QCing) the data. Specifically, the contractor performs an exhaustive review of all invoices and fuel logs to verify that reported consumption and cost data are correct. Once the energy data is reviewed and verified, the contractor will review and verify the GHG equivalents data ensuring they are using the current translation factors.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system:

EPA has abandoned its earlier system of GHG emissions calculations and relies primarily on the DOE Data Portal to calculate its GHG emissions. EPA merely reports out the DOE generated data as it's performance metrics.

Scope 1 emissions. See section on Energy Consumption Goal for detail on Energy and Water Data collection
Scope 2 emissions. See section on Energy Consumption Goal for detail on Energy and Water Data collection.

For other foundation information needed for GHG emissions calculations, EPA relies primarily on federal wide data systems to collect other information necessary to collect foundation data for GHG Scope 1 and 2 emissions. These data systems are used by all federal agencies, with some minor exceptions. For example, EPA utilizes GSA's FAS system to gather fleet fuel use; however EPA keeps a separate parallel system to ensure data quality.

Timing and frequency of reporting:

The contractor provides GHG production information to the Agency quarterly and annually.

3a. Relevant Information Systems:

Energy and Water Database.

The Energy and Water Database is a collection of numerous spreadsheets that track energy consumption and GHG production data supplied by the Agency's contractor.

Beginning on January 31, 2011 and annually thereafter, EPA contractors enter basic energy use and green power purchase information into a new Department of Energy Data Portal. This portal takes the energy use data and green power purchase information for each federal agency, for the previous fiscal year, and calculates Scope 1 and 2 GHG emissions.

3b. Data Quality Procedures:

EPA's Sustainable Facilities Practices Branch compares reported and verified energy use at each reporting facility against previous years' verified data to see if there are any significant and unexplainable increases or decreases in energy consumption and costs.

3c. Data Oversight:

The Chief, Sustainable Facilities Practices Branch, is responsible for overseeing the data entry into the DOE Data Portal. This position manages EPA's energy conservation program, including forecasting, project development, data reporting, and EPA's GHG inventory.

Source Data Reporting Oversight Personnel:

Detailed Standard Operating Procedures have been developed, that includes specific requirements for quality control of energy data collection and reporting, covering areas such as data verification, data entry, and other steps in the energy data reporting process

Information Systems Oversight Personnel:

While EPA is still developing experience with advanced metering systems, it has procedures in place to insure data accuracy. These include running manual data collection and advanced metering data collection in parallel, typically for at least one year, to confirm accuracy of advanced metered data. We also compare current period information with historic information to identify any variances.

Agency feedback to DOE serves as a QA/QC mechanism for formula and conversion factor changes in the DOE Data Portal system..

3d. Calculation Methodology:

Timeframe: Cumulative from FY2008 to end of most recent fiscal year

The Department of Energy, EPA, and GSA in cooperation with CEQ and OMB developed Greenhouse Gas Accounting Guidance for federal government GHG reporting in 2010. DOE developed a data portal for federal GHG reporting in the same year. This Data Portal receives foundation data (i.e. energy use) and converts the data into GHG emissions for each federal agency. In January 2011, EPA entered the various energy, water, transportation, travel, and commuting data for FY 2008 and FY 2010 into the DOE Data Portal. While some calculations or conversion factors change periodically in the Data Portal, each change is vetted by federal government working groups, DOE, CEQ and OMB. EPA is currently in the process of uploading FY 2011 foundation data into the DOE Data Portal, and will complete this by no later than January 31, 2012.

4a. Oversight and Timing of Final Results Reporting:

The Chief, Sustainable Facilities Practices Branch, is responsible for overseeing the data entry into the DOE Data Portal. This position manages EPA's energy conservation program, including forecasting, project development, data reporting, and EPA's GHG inventory.

4b. Data Limitations/Qualifications:

EPA does not currently have a formal meter verification program to ensure that an on-site utility meter reading corresponds to the charges included in the utility bill. However, as EPA implements the advance metering requirements of the Energy Policy Act of 2005 and the Energy Independence and Security Act of 2007, which is currently underway, EPA will move to annual calibration of advanced meters.

4c. Third-Party Audits:

Currently, EPA relies on DOE to maintain the appropriate conversion formulas to calculate GHG emissions.

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

0 -

Managing Office:

Office of Pollution Prevention and Toxic

1a. Performance Measure Term Definitions:

Cumulative number: Number of firms certified since October 1, 2009 that continue to be in certified status as of the measure reporting date.

Certified Renovation Repair and Painting firms: "Renovation, Repair and Painting" is generally defined as any activity that disturbs paint in housing and child-occupied facilities built before 1978, including remodeling, repair, maintenance, electrical work, plumbing, painting, carpentry and window replacement. Most minor repair and maintenance activities of less than six square feet per interior room or 20 square feet on the exterior of a home or building are exempt from the work practice requirements. However, this exemption does not apply to window replacements, demolitions or the use of prohibited practices.

Active: An active certified firm is a firm that is in certified status as of the measure reporting date. The term encompasses both newly certified firms and firms that have been recertified upon expiration of their original certification.

Background:

On March 31, 2008, EPA issued a new rule (Renovation, Repair, and Painting Program Rule or RRP rule) aimed at protecting children from lead-based paint hazards. In October 2009, firms began to apply to EPA for certification to conduct renovations. As of April 2010, renovations in target (pre-1978) housing and child-occupied facilities must be conducted by certified Renovation, Repair and Painting firms, using renovators who have completed an accredited training course, and following the work practice requirements of the rule. Firm certifications are valid for five years.

2a. Original Data Source:

In states where EPA administers the RRP program, the agency tracks the number of active certified firms through its Federal Lead-Based Paint Program (FLPP) database. Data are entered into the FLPP database either by an individual submitting an application via CDX or by a contractor who manually data enter information submitted via a paper application. In states that have received authorization from EPA to administer the program in lieu of the Federal program, state grantees collect data on the number of state certified Renovation, Repair and Painting firms.

2b. Source Data Collection:

In states where EPA administers the RRP program, the agency tracks the number of active certified firms through its Federal Lead-Based Paint Program (FLPP) database. Data is entered into the FLPP database either by an individual submitting an application via CDX or by a contractor who manually data enter information submitted via a paper application. In states that have received authorization from EPA to administer the program in lieu of the Federal program, state grantees collect data on the number of state certified Renovation, Repair and Painting firms.

In authorized states, EPA collects data on the numbers of firms certified in each state through quarterly reports from grantees as part of the Agency's oversight of authorized programs. Since the performance result is based on a simple count of active certified firms by EPA and authorized states, there are no applicable quality assurance plans or procedures other than those described under section 3b below.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: Firms seeking RRP certification submit applications in hard copy directly to EPA or electronically through the Agency's Central Data Exchange (CDX). Original hard copies are retained to augment the electronic records. Authorized states report data to EPA Regional Offices on the number of certified firms in the state.

Timing and frequency of reporting: Application data are entered into the FLPP database continuously as applications to the Federal Program are received.

3a. Relevant Information Systems:

The Federal Lead-Based Paint Program (FLPP) database provides a record of all applications for the certification of Renovation Repair and Painting firms where EPA directly implements the program, the actions taken on those applications including final decisions, and the multiple steps in the process used for measurement. Thus, the number of active certified firms can be obtained directly from the database. Documentation for the FLPP database is maintained internally at EPA and is available upon request. The database contains only source data as there is no need for data transformation in order to derive the performance result for this measure.

The FLPP database has recently been upgraded to increase processing efficiency. The FLPP database was Certified and Accredited under the National Institute of Standards and Technology (NIST) Special Publication 800-53 Revision 3 requirements issued under the Federal Information Security Management Act (FISMA) in June 2013. The Certification and Accreditation stays in effect until June 2016 with continuous monitoring and performance testing of one third of FLPPs' security controls each year. FLPP is tracked in the Agency's XACTA database system for tracking IT security compliance with FISMA and is a reportable database system to the Office of Management and Budget (OMB).

3b. Data Quality Procedures:

The database is interactive, and operational usage in processing applications by Headquarters and the Regional offices provides ongoing internal quality reviews. Further, EPA periodically checks contractors' data entry quality.

OPPT has in place a signed Quality Management Plan ("Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances", November 2008). Like the 2003 QMP, it will ensure the standards and procedures are applied to this effort. In addition, NPCD has an approved Quality Management Plan in place, dated July 2008. Applications and instructions for applying for certification and accreditation are documented and available at the Web site <http://www2.epa.gov/lead/epa-lead-safe-certification-program> Documentation for the FLPP database is maintained internally at EPA and is available upon request.

3c. Data Oversight:

Chief, Planning and Assessment Branch, Environmental Assistance Division, OPPT

3d. Calculation Methodology:

Since the measure simply tracks the number of firms currently certified to perform Lead RRP work, there is no need to transform the original data by any mathematical methods.

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

Data are obtained by totaling the number of active firm certifications issued either directly by EPA or through EPA-authorized State programs and reported to EPA Regional offices.

There is little or no sampling error in this performance measure because it is based on an evaluation of all applicable records for the Federal program. Data on firms currently certified in each authorized state are collected through quarterly reports from grantees as part of the Agency's oversight of authorized programs.

4c. Third-Party Audits:

Not applicable.

Measure Code: 012 - Percent reduction of children's exposure to rodenticides.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

6 - By 2018, reduce rodenticide exposure incidents by 75 percent in children ages 1-6.

Managing Office:

Office of Pesticide Programs

1a. Performance Measure Term Definitions:

Reduce: The American Association of Poison Control Centers (AAPCC) maintains a national database of exposure incidents called the National Poison Data System (NPDS), which is a compilation of data collected by AAPCC's national network of 61 poison controls centers (PCCs). The incident data maintained in AAPCC's NPDS includes pesticide-related exposure incidents that may occur throughout the U.S. population, including all age groups and exposures occurring in both residential and occupational settings. Summary data on pesticide-related incident data is reported on an annual basis in AAPCC's Annual Report, including the number of incidents by age, reason for exposure, level of medical treatment, and medical severity.

The performance measure is based on the annual number of rodenticide exposure incidents involving children less than six-years old, based on aggregated data reported in AAPCC's Annual Report. The baseline for the performance measure will be based on AAPCC's 2008 Annual Report.

Exposure Incidents: Calls to Poison Control Centers are managed primarily by AAPCC-certified Specialists in Poison Information (SPIs). SPIs are required to complete detailed electronic medical records for both exposure and informational calls. Standardized definitions have been established to ensure database uniformity.

For EPA's performance measure, all exposure incidents, regardless of medical severity, will be included in the performance measure calculation.

Rodenticide insecticides: AAPCC's Annual Report reports the number of annual incidents stratified by chemical category. Particular rodenticide categories that will be used to identify incidents include:

- "ANTU (1-naphthalenylthiourea)"
- "Bromethalin Rodenticides"
- "Cholecalciferol Rodenticides"
- "Cyanide Rodenticides"
- "Long-Acting Anticoagulant Rodenticides"
- "Other Types of Rodenticide"
- "PNU (n-3-pyridylmethyln1-p-nitrophenyl urea)"
- "Strychnine Rodenticides"
- "Unknown Types of Rodenticide"

- “Warfarin Type Anticoagulant Rodenticides”
- “Zinc Phosphide Rodenticides”

Children: The performance measure will focus on exposure incidents reported to AAPCC than involved children less than six-years old. This age category is standardized by AAPCC and included as a data field in AAPCC’s annual report.

Background:

- The reduction in rodenticide incidents is expected to result from EPA’s risk mitigation decision that requires consumer use rodenticides be used in protective bait stations that limit direct contact by young children. As part of this risk mitigation decision, EPA is taking action to cancel and remove from the consumer market 12 D-Con brand mouse and rat poison products. These products fail to comply with safety measures and are commonly reported to U.S. poison control centers. Further information on EPA’s risk mitigation is available at:<https://www.epa.gov/rodenticides/canceling-some-d-con-mouse-and-rat-control-products> .

2a. Original Data Source:

NPDS is a comprehensive source of surveillance data on poisonings in the United States. NPDS is a uniform database of 61 PCCs, which are members of the American Association of Poison Control Centers (AAPCC), and are distributed throughout the United States. The database was established in 1985 and now includes information on more than 36 million exposure cases. In 2006, 61 PCCs received more than 4 million cases, including more than 2.4 million human exposure cases and 1.4 million informational calls. NPDS is a valuable public health resource and has been utilized to identify hazards, develop education priorities, guide clinical research, and identify chemical and bioterrorism incidents. As a result, NPDS has helped prompt product reformulations, recalls, and bans, support regulatory actions, and provide post-marketing surveillance of new drugs.

2b. Source Data Collection:

Individual PCC provides 24-hour emergency medical information on the diagnosis and treatment of poisonings. Calls are routed from a single, nationally-available phone number to the PCC generally in closest proximity to the caller. Since the service is provided on a national scale, even though PCCs may not be located in every state, aggregate PCC data is generally considered to be national in scope. The calls are managed primarily by AAPCC-certified Specialists in Poison Information (SPIs), who are typically pharmacists and nurses. SPIs are required to complete detailed electronic medical records for both exposure and informational calls. The electronic medical records include general demographic information, including age, gender, location of exposure, and more detailed information if an exposure may have occurred, including suspected substance, reason for exposure, route of exposure, management site, symptoms, and medical outcome. To assist SPIs and ensure database uniformity, many of the fields included in the electronic medical records use categories that have been defined by the AAPCC. For example, SPIs characterize the medical severity of possible exposures using the medical outcome field, which includes the AAPCC-defined categories “None,” “Minor,” “Moderate,” “Major,” or “Death.” Additionally, the records may also contain several open fields, which allow SPIs to record additional information that may be relevant to the treatment and diagnosis of each case

2c. Source Data Reporting:

AAPCC produces the NPDS Annual Report giving statistics and information on all the poisonings in a calendar year. The NPDS Annual Report has three basic sections of information: general charts and statistics, a section of individual fatality listings, and a section listing demographic profile of single-substance exposure cases by generic category. The report is available to the general public to be downloaded for free and is usually made public the December following the close of a calendar year. This means the 2010 NPDS Annual Report was released around December of 2011. The report is typically published in the peer-reviewed journal Clinical Toxicology and is also publically available through AAPCC's website at: <http://www.aapcc.org/annual-reports>

3a. Relevant Information Systems:

EPA does not require specialized information systems for the purposes of collecting, calculating, and/or reporting the results for this measure. Rather, AAPCC maintains standardized reporting procedures and is responsible for aggregating the summary data that is available in AAPCC's annual report and utilized in the performance measure. Following the publication of AAPCC's annual report, EPA uses MS-Excel to further summarize aggregated data on moderate to severe exposure incidents associated with organophosphate and carbamate insecticides

System Description: Not Applicable

Source/Transformed Data: Not Applicable

Information System Integrity Standards: Not Applicable

3b. Data Quality Procedures:

AAPCC's annual report reflects only those cases that are not duplicates and classified by the regional PC as CLOSED. A case is closed when the PC has determined that no further follow-up/recommendations are required or no further information is available. Exposure cases are followed to obtain the most precise medical outcome possible. Depending on the case specifics, most calls are "closed" within the first hours of the initial call. Some calls regarding complex hospitalized patients or cases resulting in death may remain open for weeks or months while data continues to be collected. Follow-up calls provide a proven mechanism for monitoring the appropriateness of management recommendations, augmenting patient guidelines, and providing poison prevention education, enabling continual updates of case information as well as obtaining final/known medical outcome status to make the data collected as accurate and complete as possible.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Not applicable.

Source Data Reporting Oversight Responsibilities: Not applicable.

Information Systems Oversight Personnel: Appointed Measures Representative(s) for Health Effects Division, in conjunction with the Division Director and Associate Division Director

Information Systems Oversight Responsibilities: To review and analyze data and report it to the OPP measures representative for reporting

3d. Calculation Methodology:

Decision Rules for Selecting Data: The performance measure uses summary data from AAPCC's Annual Report. Specific incident data that will be selected will involve children less than six-years old and involve the following AAPCC-defined rodenticide categories:

- "ANTU (1-naphthalenylthiourea)"
- "Bromethalin Rodenticides"
- "Cholecalciferol Rodenticides"
- "Cyanide Rodenticides"
- "Long-Acting Anticoagulant Rodenticides"
- "Other Types of Rodenticide"
- "PNU (n-3-pyridylmethyl-1-p-nitrophenyl urea)"
- "Strychnine Rodenticides"
- "Unknown Types of Rodenticide"
- "Warfarin Type Anticoagulant Rodenticides"
- "Zinc Phosphide Rodenticides"

Explanation of Calculations:

Annual performance will be evaluated using the equation below:

Where:

Baselinecount = Total number of exposure incidents that meet the case definition during the baseline period.

Performancecount = Total number of exposure incidents that meet the case definition during performance period.

Explanation of Assumptions: The performance measure is based on summary data published in AAPCC's Annual Report. The data is used without making any additional transformations, so no assumption will be made to transform the data.

Unit of Measure: Incident Count

Timeframe of Result: AAPCC's Annual Report is usually made public the December following the close of a calendar year. This means the 2010 NPDS Annual Report was released around December of 2011. Each report provides a summary of the total number of exposure incidents during the complete calendar year. Units:

4a. Oversight and Timing of Final Results Reporting:

Branch Chief, Financial Management and Planning Branch.

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications:

- EPA has issued its risk mitigation decision and issued a Notice of Intent to Cancel in order to cancel the registration of 12 non-compliant rodenticide products. The registrant Reckitt Benckiser, however, has requested an administrative hearing to challenge EPA's decision to cancel the registrations of 12 D-Con mouse and rat poison products. Until the hearing before an EPA Administrative Law Judge is completed, the registrant may continue to market the 12 non-complying products. As such, there is uncertainty in how the upcoming administrative law hearing will impact EPA's efforts to reduce rodenticide exposure incidents involving young children.

- In general, PCC's provide medical management services through their response hotline and do not perform active surveillance of pesticide exposure incidents as part of NPDS. Due to this limitation, NPDS may be subject to reporting bias because of underreporting and differences in utilization rates among different segments of the U.S. population.

- Because the incidents are self-reported, there is a potential bias in the data. However, there is no reason to believe that the bias will change from year to year.

Data Lag Length and Explanation: AAPCC's Annual Report is published December of every year and made publicly available. For example, 2010 Annual Report was available to EPA in December 2011 and the 2011 Annual Report is expected to be available to EPA in December 2012.

Methodological Changes: Not Applicable

4c. Third-Party Audits:

AAPCC is an independent organization and not subject to third-party audits by the U.S. Government. AAPCC's Annual Report is publicly available (<http://www.aapcc.org/annual-reports/>) and published in the peer-reviewed journal Clinical Toxicology.

Measure Code: 091 - Percent of decisions completed on time (on or before PRIA or negotiated due date).

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

0 -

Managing Office:

Office of Pesticide Programs

1a. Performance Measure Term Definitions:

Decisions: Each action is assigned a decision number when it is received and with time, actions and decisions have come to mean about the same. A decision may be an application to register a new pesticide product, to amend a registered product's label, to review a protocol, to establish a tolerance or to make a decision on a request to waive a study requirement.

Completed: An action or decision is completed when OPP makes a decision on the application, i.e. the product is registered, a label is stamped, protocol reviewed, or the action is denied, the label not approved, etc. A decision memorandum is issued describing the decision made and the date that the delegated official signs the memo is the date that the decision is completed. In the case of a label, the date that the label is stamped as approved is the date that the application to register or amend a label is completed.

PRIA: The Pesticide Registration Improvement Act (PRIA) of 2003 established pesticide registration service fees for registration actions. The Pesticide Registration Improvement Renewal Act (PRIA 2), effective October 1, 2007, reauthorized the PRIA for five more years until 2012. The PRIA 2 legislation increased the number of actions covered by fees, modified the payment process and application in-processing. The category of action, the amount of pesticide registration service fee, and the corresponding decision review periods by year are prescribed in these statutes. Their goal is to create a more predictable evaluation process for affected pesticide decisions, and couple the collection of individual fees with specific decision review periods. They also promote shorter decision review periods for reduced-risk applications.

On time (on or before PRIA or negotiated due date): Each PRIA 2 fee category has an associated period of time in which the Agency must make a determination, which has been called a decision review period or PRIA 2 timeframe, or "PRIA due date." The PRIA 2 due date may be extended by a mutual agreement between the applicant and the Agency. The new due date is called a negotiated due date. Negotiated due dates occur predominately as a result of missing information or data or data deficiencies identified during an in-depth review of the application. The due date then is extended to allow the applicant the time to submit the data or information and for the Agency to review the data and make a determination.

Background:

This measure is a program output which represents the program's statutory requirements to ensure that pesticides entering the marketplace are safe for human health and the environment, and when used in accordance with the packaging label present a reasonable certainty of no harm. In addition, under PRIA and

PRIA 2, there are specific timelines, based on the type of registration action, by which the Agency must make a decision. These laws do allow the decision due date under PRIA to be negotiated to a later date, after consultation with and agreement by the submitter of the application. The timeliness measure represents the Agency's effectiveness in meeting these PRIA timelines.

For more information, see

- <https://www.epa.gov/pria-fees>
- FIFRA Sec 3(c)(5)
- FDCA Sec 408(a)(2).

2a. Original Data Source:

EPA senior managers.

2b. Source Data Collection:

Source Data Collection Methods: EPA senior managers review justifications and make final decisions to extend or negotiate a PRIA due date and whether or not to issue a "PRIA Determination to Not Grant" a registration. The Agency employs continuous monitoring of the status of PRIA decisions. Numerous internal Agency meetings continue to monitor workload and compliance with PRIA due dates. Throughout the pesticide registration program, weekly meetings are held to review the status of pending decisions, due date extensions, and refunds; to identify potential issues and target their resolution; to resolve fee category questions; and to coordinate schedules with science support organizations.

EPA QA requirements/guidance governing collection: All risk assessments are subject to public and scientific peer review. All registration actions must employ sound science and meet the Food Quality Protection Act (FQPA) safety standards. The office adheres to its Quality Management Plan (Nov. 2006) in ensuring data quality and that procedures are properly applied.

2c. Source Data Reporting:

All registration actions received under the PRIA and PRIA 2 are entered and tracked in the Pesticide Registration Information System (PRISM). Reports developed in Business Objects (using PRISM as the data source) allow senior management to more effectively track the workload (e.g., pending actions with upcoming PRIA due dates, actions for which the PRIA date appears to have passed etc.) and ensure that PRIA or negotiated due dates are met.

OPP uses several internal controls within the OPPIN/PRISM system. First of all, users must be FIFRA CBI cleared in order to access the system. Within the system, security measures are taken to allow only authorized users to perform certain operations, which are managed by our Data Base Administrator (DBA). For example, only Branch Chiefs can enter a negotiated due date in the Registration Division. The DBA must receive an Access Form from users wanting to use the system and their supervisor must sign the Access Form.

Applications are pin punched upon receipt by a NOWCC in ISB/ITRMD/OPP and the pin punch date is entered into OPPIN by another NOWCC in ISB. The pin punch date is the receipt date in OPPIN. The EPA team leader performs periodic/random checks of their work. Experts from the three registering divisions review each application and place it in a PRIA fee category generally on the date of receipt.

PRIA 2 requires that certification of payment be submitted together with the application. . Beginning January 2, 2008, ISB started to hold any application that did not contain certification of payment. ISB contacts the

submitter to request certification of payment. When the certification is received, ISB generates an acknowledgement and sends it to the submitter. If no certification of payment is received within 14 days, ISB prepares a rejection letter for the Deputy Office Director's signature. After the rejection letter is signed, ISB posts the rejection to OPPIN, and invoices the submitter for 25% of the appropriate PRIA fee.

Any issues related to assigning a fee category are discussed with divisional management and may be elevated. If a full fee is being paid, the date that begins the PRIA timeframe or start date is the latest of 21 days after receipt of the application or the day payment is received by the Washington Finance Center/ OCFO. Staff in OCFO enter the amount and date of receipt of the payment into IFMS. OPP downloads IFMS and electronically transfers the data into OPPIN.

Once the IFMS data is transferred to OPPIN, OPPIN automatically calculates due dates from the start date using the time frames in the FR Notice on the fee schedule. Due dates can be extended through negotiations with the registrant or applicant. Negotiated due dates are manually entered and the rights to enter a negotiated due date belong to only branch chiefs, the Division Directors and other individuals designated such rights by a Division Director. In BPPD, negotiated PRIA due dates are entered in OPPIN by the branch chiefs, branch team leaders, or its Administrative Specialist while in RD, only a branch chief enters the date. According to OPP's procedures, a negotiated due date cannot be entered into the system until the Deputy Office Director or Office Director approves the negotiated date by signing the negotiated due date form. A copy of the negotiated due date form and documentation of the applicant's agreement with the due date are filed. Beginning July 2011, OPP transition to using Webforms for processing negotiated due date forms. Forms are routed, approved, and retained electronically.

The date that an action is completed is entered by staff in RD, AD, and BPPD according to their internal procedures. Documentation of the date of completion is filed in the product's file. Once data is entered into OPPIN, start dates and due dates cannot be changed by staff in the regulatory divisions. Changes are made by staff programming OPPIN in ITRMD. "Data fixes" must be requested by generating a SCR (Systems Change Request). These requests are reviewed by ITRMD staff and management and representatives of the regulatory divisions. Questions and issues are elevated to the PRIA Senior Advisor and if needed to OPP management. OPP management holds a Bi-weekly PRIA meeting in which these issues are discussed and resolved. The OPP Immediate Office uses a number of monitoring reports to identify actions that are past their due date or appear to have been logged out past their due date. An issue is then resolved with the appropriate division and generally involves an action that needs to be logged out as completed or a negotiated due date that needs to be entered. OPPIN software issues have also been identified through this oversight effort and an SCR is developed to make the necessary programming corrections.

PRIA data is an internally generated tracking data base with data entries being made during normal business hours.

Annually, the Office of the Inspector General conducts an audit that includes verifying the accurate entry of the date an action is received, extended and completed.

3a. Relevant Information Systems:

All registration actions received under the PRIA and PRIA 2 are entered and tracked in the Pesticide Registration Information System (PRISM).

The Office of Pesticide Programs (OPP) has migrated all of its major data systems including regulatory and scientific data, workflow tracking and electronic document management into one integrated system, the Pesticide Registration Information System (PRISM). PRISM provides a centralized source of information on all registered pesticide products, including chemical composition, toxicity, name and address of registrant, brand names, registration actions, and related data. It is maintained by the EPA and tracks regulatory data submissions and studies, organized by scientific discipline, which are submitted by the registrant in support of a pesticide's registration. All registration actions received under the PRIA and PRIA 2 are entered and tracked in PRISM.

PRISM is the successor to the Office of Pesticide Programs Information System Network (OPPIN). Data has been migrated from the following databases: Chemical Vocabulary (CV), Company Name and Address (CNAD), Pesticide Document Management System (PDMS), Pesticide Product Information System (PPIS), Chemical Review Management System (CRMS), FIFRA CBI Access (FAS), Jackets, Product Data Call-In (PDCI), Phones, Pesticide Regulatory Action Tracking (PRAT), Reference System (REFS), Tolerance Indexes (TIS and TOTS). Sources of the input are paper copy and electronic data. EPA's Central Data Exchange (CDX), scheduled as EPA 097, is the gateway for electronic submissions. It consolidates information stored on the mainframe, the OPP LAN, on stand-alone computers and in paper copy. PRISM (Pesticide Registration Information System) consolidates various pesticides program databases.

EPA recently constructed a module in PRISM tracking major Registration Review milestones. This module enhances tracking capabilities and is an important management tool.

For information on disposition of records in this database, please see EPA Records Schedule 329, <http://www.epa.gov/records/policy/schedule/sched/329.htm>

OPP adheres to its Quality Management Plan (Nov. 2006) in ensuring data quality and that procedures are properly applied.

PRISM was developed between 1997 and 2003 and has been operational since June 2, 2003. PRISM provides e-government capabilities to share pesticide information with OPP stakeholders. PRISM supports OPP's responsibilities under a variety of regulatory requirements including FIFRA, FQPA, PRIA, PRIA II, Pesticide Registration Review and for the Endocrine Disrupter Screening Program and will standardize the structure of a chemical case where appropriate to define the key tasks and documents used in a number of pesticide review processes. EDSP components are used to order, monitor, track and manage scientific tests associated with pesticide chemicals. Pesticide Registration Improvement Renewal Act (PRIA II).

PRISM was developed in response to the requirements of the following laws and regulations:

- The Title III of the E-Government Act of 2002 - Federal Information Security Management Act (FISMA) – Public Law 107-347: A security plan must be developed and practiced throughout all life cycles of the agency's information systems.
- Office of Management and Budget (OMB) Circular A-130, Management of Federal Information Resources: A System Security Plan (SSP) is to be developed and documented for each GSS and Major Application (MA) consistent with guidance issued by the National Institute of Standards and Technology (NIST).
- Federal Information Processing Standards (FIPS) Publication 199, Standards for Security Categorization of Federal Information and Information Systems: This document defines standards for the security

categorization of information and information systems. System security categorization must be included in SSPs.

- FIPS Publication 200, Minimum Security Requirements for Federal Information and Information Systems: This document contains information regarding specifications for minimum security control requirements for federal information and information systems. Minimum security controls must be documented in SSPs.
- NIST Special Publication (SP) 800-18 Revision 1, Guide for Developing Security Plans for Federal Information Systems: The minimum standards for an SSP are provided in this NIST document.
- NIST SP 800-53, Revision 3, Recommended Security Controls for Federal Information Systems and Organizations: This document contains a list of security controls that are to be implemented into federal information systems based on their FIPS 199 categorization. This document is used in conjunction with FIPS 200 to define minimum security controls, which must be documented in SSPs.
- EPA Information Security Planning Policy. A system security plan shall be developed for each system cited on the EPA Inventory of Major Information Systems, including major applications and general support systems

Most, if not all, of PRISM data should be considered "source" data. This means that these data originate from primary data providers, particularly pesticide product registrants, submitting information sent to EPA directly in response to FIFRA regulatory requirements.

PRISM contains source data and from this source data, certain dates, such as the date due are calculated automatically.

3b. Data Quality Procedures:

OPP adheres to its Quality Management Plan (Nov. 2006) in ensuring data quality and that procedures are properly applied.

3c. Data Oversight:

Peter Caulkins, PRIA Coordinator and Special Assistant to the Deputy Office Director, Office of Pesticide Programs. Handles all aspects of data collection and verification.

3d. Calculation Methodology:

Unit of analysis: Percent

The percent completed on time is calculated by taking the total number of decisions or actions completed and withdrawn on or before their due date and dividing by the total number decisions or actions completed and withdrawn within the date range specified.

Total PRIA actions completed for the FY less PRIA actions completed late for the FY divided by total PRIA actions completed for the FY equals the percent of PRIA actions completed on time for the FY, where total PRIA actions completed includes actions completed, actions withdrawn, and actions rejected.

4a. Oversight and Timing of Final Results Reporting:

Vickie Richardson, Branch Chief Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

No Data Limitations.

4c. Third-Party Audits:

Not applicable.

Measure Code: 164 - Number of pesticide registration review dockets opened.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

2 - Protect Ecosystems from Chemical Risks

Strategic Target Code and Title:

0 -

Managing Office:

Office of Pesticide Programs

1a. Performance Measure Term Definitions:

Registration Review dockets: EPA initiates a registration review by establishing a docket for a pesticide registration review case and opening the docket for public review and comment. Each docket contains a Summary Document that explains what information EPA has on the pesticide and the anticipated path forward. The Summary Document includes:

- A Preliminary Work Plan highlighting anticipated risk assessment and data needs, providing an anticipated timeline for completing the pesticide's review, and identifying the types of information that would be especially useful to the Agency in conducting the review;
- A fact sheet providing general background information and summarizing the current status of the pesticide;
- Ecological risk assessment problem formulation and human health scoping sections describing the data and scientific analyses expected to be necessary to complete the pesticide's registration review.

Opened: EPA initiates a registration review by establishing a docket for a pesticide registration review case and opening the docket for public review and comment. The Agency publishes a Federal Register notice that announces the availability of the docket and provides a comment period of at least 60 days. See <https://www.epa.gov/pesticide-reevaluation/registration-review-process> for more information.

Background:

The Food Quality Protection Act of 1996 directed EPA to establish a Registration Review program with the goal of reviewing all registered pesticides, AIs and products, on a 15-year cycle to ensure that they continue to meet the standards of registration. EPA issued the final rule in 2006 and began implementing the program in 2007. Under the rule, EPA posts registration review schedules and these will provide a baseline for expected AI case dockets that will be opened for the next three year cycle and for decisions expected over the next several years. The first step of Registration Review is to open a public docket for each pesticide case entering the process to show the public what the Agency knows about the AI and seek comment. When comments are evaluated and data needs are finalized, OPP posts a Final Work Plan (FWP) for each AI case. Although the docket openings and the FWPs are tracked, both steps require notable resources to complete.

All registrations must be based on sound science and meet the Food Quality Protection Act (FQPA) safety standard. All risk assessments are subject to public and scientific peer review. In addition, OPP management reviews and signs new documents before being placed in the docket or posted on EPA's website.

For more information, see:

<https://www.epa.gov/pesticide-reevaluation>

2a. Original Data Source:

OPP staff, working collaboratively across the program, develop the draft preliminary work plan taking into account existing policies, data requirements, and standard operating procedures.

2b. Source Data Collection:

Each preliminary work plan is approved by Director of the appropriate OPP division (Antimicrobial Division, Biopesticides and Pollution Prevention Division, and Pesticide Re-evaluation Division). All preliminary work plans are included in the docket for that registration review case and are available via the pesticide program website at <http://www.epa.gov/pesticides>

Data collected are for national actions taken on an annual basis. There is no spatial component.

EPA QA requirements/guidance governing collection: The office adheres to its Quality Management Plan (Nov. 2006) in ensuring data quality and that procedures are properly applied.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: As described in 2b, all preliminary work plans are posted to the docket for that registration review case and are available via the pesticide program website. Counts for preliminary work plans completed are tracked and tabulated in a master spreadsheet maintained by the Pesticide Re-evaluation Division.

Timing and frequency of reporting: Preliminary work plans are developed on a quarterly basis. Counts of actions completed are available at the end of each quarter.

EPA QA requirements/guidance governing collection: The office adheres to its Quality Management Plan (Nov. 2006) in ensuring data quality and that procedures are properly applied.

3a. Relevant Information Systems:

The Office of Pesticide Programs (OPP) has migrated all of its major data systems including regulatory and scientific data, workflow tracking and electronic document management into one integrated system, the Pesticide Registration Information System (PRISM). PRISM provides a centralized source of information on all registered pesticide products, including chemical composition, toxicity, name and address of registrant, brand names, registration actions, and related data. It is maintained by the EPA and tracks regulatory data submissions and studies, organized by scientific discipline, which are submitted by the registrant in support of a pesticide's registration. All registration actions received under the PRIA and PRIA 2 are entered and tracked in PRISM.

PRISM is the successor to the Office of Pesticide Programs Information System Network (OPPINS). Data have been migrated from the following databases: Chemical Vocabulary (CV), Company Name and Address (CNAD), Pesticide Document Management System (PDMS), Pesticide Product Information System (PPIS), Chemical Review Management System (CRMS), FIFRA CBI Access (FAS), Jackets, Product Data Call-In (PDCI), Phones, Pesticide Regulatory Action Tracking (PRAT), Reference System (REFS), Tolerance Indexes (TIS and TOTS). Sources of the input are paper copy and electronic data. EPA's Central Data Exchange (CDX), scheduled as EPA 097, is the gateway for electronic submissions. It consolidates information stored on the mainframe, the OPP LAN, on stand-alone computers and in paper copy. PRISM (Pesticide Registration Information System) consolidates various pesticides program databases.

EPA recently constructed a module in PRISM tracking major Registration Review milestones. This module enhances tracking capabilities and is an important management tool.

For information on disposition of records in this database, please see EPA Records Schedule 329, <http://www.epa.gov/records/policy/schedule/sched/329.htm>

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- Federal Information Processing Standards (FIPS) Publication 199, Standards for Security Categorization of Federal Information and Information Systems: This document defines standards for the security categorization of information and information systems. System security categorization must be included in SSPs.
- FIPS Publication 200, Minimum Security Requirements for Federal Information and Information Systems: This document contains information regarding specifications for minimum security control requirements for federal information and information systems. Minimum security controls must be documented in SSPs.
- NIST Special Publication (SP) 800-18 Revision 1, Guide for Developing Security Plans for Federal Information Systems: The minimum standards for an SSP are provided in this NIST document.
- NIST SP 800-53, Revision 3, Recommended Security Controls for Federal Information Systems and Organizations: This document contains a list of security controls that are to be implemented into federal information systems based on their FIPS 199 categorization. This document is used in conjunction with FIPS 200 to define minimum security controls, which must be documented in SSPs.
- EPA Information Security Planning Policy. A system security plan shall be developed for each system cited on the EPA Inventory of Major Information Systems, including major applications and general support systems

Most, if not all, of PRISM data should be considered "source" data. This means that these data originate from primary data providers, particularly pesticide product registrants, submitting information sent to EPA directly in response to FIFRA regulatory requirements.

3b. Data Quality Procedures:

OPP adheres to its Quality Management Plan (Nov. 2006) in ensuring data quality and that procedures are properly applied. The Quality Management Plan is updated periodically, with the most recent plan approved on April 26, 2012.

3c. Data Oversight:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

Rick Keigwin (Director, Pesticide Re-evaluation Division, OPP), Keith Matthew (Director, Biospesticides and Pollution Prevention Division, OPP), and Joan Harrigan-Farrelly (Director, Antimicrobials Division, OPP)-

3d. Calculation Methodology:

Identification of Unit of Measure and Timeframe: Timeframe is the fiscal year. Unit of measure is the number of preliminary work plans completed each year. The Agency develops a preliminary workplan for each pesticide subject to the registration review program. To be counted under this measure, each preliminary workplan must be signed by the appropriate division director and a docket is established to allow for public comment on the preliminary workplan. Workplans are only counted when signed by the division director. There are no other variables or assumptions. Calculations are conducted by summing the number or preliminary workplans issued each fiscal year.

4a. Oversight and Timing of Final Results Reporting:

Vickie Richardson, Branch Chief, Financial Management and Planning Branch

Reporting is done twice a year

4b. Data Limitations/Qualifications:

No data limitations.

4c. Third-Party Audits:

Not applicable.

Measure Code: 276 - Percent of registration review chemicals with identified endangered species concerns, for which EPA obtains any mitigation of risk prior to consultation with DOC and DOI.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

2 - Protect Ecosystems from Chemical Risks

Strategic Target Code and Title:

0 -

Managing Office:

Office of Pesticide Programs

1a. Performance Measure Term Definitions:

Registration Review Chemicals – are defined as those chemicals for which an interim or final registration review decision was made to determine whether the pesticide continues to meet the statutory standard of no unreasonable adverse effects for human health and the environment.

Mitigation of risk – is achieved when a change is made to the registration of a pesticide product that eliminates or reduces the risk to a listed species of concern. Such mitigation of risk may be accomplished when a registrant agrees to a change in the registration of a pesticide or EPA compels such a change under FIFRA. Risk mitigation is typically achieved by reducing pesticide exposure via changes to pesticide product labels including but not limited to the following: reductions in application rate and/or frequency of application, spray drift buffers, and geographically-specific use restrictions via Bulletins Live Two!

(<http://www2.epa.gov/endangered-species/endangered-species-protection-bulletins>)

Listed species of concern – are those federally listed threatened or endangered species identified in ecological risk assessments and effects determinations as potentially at risk from use of the pesticide being assessed.

Consultation – is defined as a process between the U.S. Fish and Wildlife Service (FWS), under the Department of the Interior (DOI), and National Marine Fisheries Service (NMFS), under the Department of Commerce (DOC), together, the Services, and a Federal agency. Consultation is initiated by the Federal agency, via a letter to the Service(s), when they determine that a Federal action is likely to adversely affect the continued existence of a listed species or destroy or adversely modify designated critical habitat.

2a. Original Data Source:

The data necessary to track progress towards the targets for this measure are collected by OPP using internal tracking numbers. The sources from which this information is obtained are ecological risk assessments and effects determinations prepared by EFED to support a registration review case, and the interim and final registration review decisions prepared by PRD.

2b. Source Data Collection:

Both the ecological risk assessments and the interim or final decisions can be found in the docket established for each chemical in the registration review process. Additional information regarding the mitigation decisions can also be found in the Federal Register Notice (FRN) announcing the availability of the interim or final decisions. The office adheres to its Quality Management Plan in ensuring data quality and that procedures are properly followed.

2c. Source Data Reporting:

As described above, data are entered and tracked via internal OPP procedures. In addition, both the ecological risk assessments and the interim or final decisions can be found in the docket established for each

chemical in the registration review process. Data on this measure are collected and reported out annually. The baseline is 0% for each reporting year as the percentages are not cumulative.

3a. Relevant Information Systems:

As described above, data are entered and tracked via internal OPP procedures.

Source/Transformed Data: All data are source data and not transformed.

Information System Integrity Standards: As described above, OPP adheres to its Quality Management Plan in ensuring data quality and procedures are properly followed.

3b. Data Quality Procedures:

The ecological risk assessments and interim/final decisions from which the numbers are derived are peer reviewed internally and vetted through the registration review process which includes public comment on both the proposed ecological risk assessments and interim decisions. These reviews include a review of the data quality by OPP staff and management. The office adheres to its Quality Management Plan in ensuring data quality and procedures are properly followed.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Marietta Echeverria (Associate Director, Environmental Fate and Effects Division (EFED), Office of Pesticide Programs (OPP)) and Don Brady (Director EFED, OPP)

3d. Calculation Methodology:

(The number of registration review chemicals for which the ecological risk assessment and/or effects determination identifies endangered species concerns and for which mitigation of risk is obtained prior to consultation with the Services within a given reporting year) / (The total number of registration review chemicals for which the ecological risk assessment and/or effects determination identifies endangered species concerns within the same reporting year) x 100

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Branch Chief, Financial Management and Planning Branch, OPP – accountable for oversight of data gathering, confirmation of data accuracy and final reporting of measure results.

4b. Data Limitations/Qualifications:

No data limitations

4c. Third-Party Audits:

Not applicable

Measure Code: -

Measure Code: 247 - Percent of new chemicals or organisms introduced into commerce that do not pose unreasonable risks to workers, consumers, or the environment.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

0 -

Managing Office:

Office of Pollution Prevention and Toxics

1a. Performance Measure Term Definitions:

New chemicals or organisms: The term “new chemical substance” (which includes microorganisms) means any chemical substance which is not included in the chemical substance list compiled and published under TSCA section 8(b) (i.e., the TSCA Inventory).

Introduced (or “distributed”)into commerce: The terms “distribute in commerce” and “distribution in commerce” when used to describe an action taken with respect to a chemical substance or mixture or article containing a substance or mixture mean to sell, or the sale of, the substance, mixture, or article in commerce; to introduce or deliver for introduction into commerce, or the introduction or delivery for introduction into commerce of, the substance, mixture, or article; or to hold, or the holding of, the substance, mixture, or article after its introduction into commerce.

Unreasonable risk: The term "unreasonable risk" is not defined in TSCA. The legislative history, however, indicates that unreasonable risk involves the balancing of the probability that harm will occur and the magnitude and severity of that harm against the effect of a proposed regulatory action on the availability to society of the expected benefits of the chemical substance. In the context of the New Chemicals Program, EPA's determination that manufacture, processing, use, distribution in commerce, or disposal of an individual substance which has been the subject of a notice under section 5 of the TSCA may present an unreasonable risk of injury to human health or the environment is based on consideration of (i) the size of the risks identified by EPA; (ii) limitations on risk that would result from specific safeguards (generally, exposure and release controls) sought based on Agency review and (iii) the benefits to industry and the public expected to be provided by new chemical substances intended to be manufactured after Agency review. In considering risk, EPA considers factors including environmental effects, distribution, and fate of the chemical substance in the environment, disposal methods, waste water treatment, use of protective equipment and engineering controls, use patterns, and market potential of the chemical substance.

2a. Original Data Source:

The original data source is EPA. The agency maintains records of all TSCA Section 5 PMN submissions and Section 8(e) submissions. The Section 5 and Section 8(e) submissions are provided to EPA by external parties, typically chemical manufacturers in the case of PMN submissions and chemical manufacturers, processors and distributors in the case of Section 8(e) notices.

2b. Source Data Collection:

The agency tabulates data submitted under TSCA Section 5 and Section 8(e) on a daily basis and maintains the data in the various databases described in subsection 3(a) below. The individual submitting notices to EPA under TSCA Section 5 must certify by signature that "All information provided in the notice is complete and truthful as of the date of submission." Please see subsection 3(b) for information on the data quality procedures followed by the agency.

2c. Source Data Reporting:

Not applicable. Since the original data source is EPA, the source data are not transmitted to the agency by any independent entity. As noted above, TSCA Section 5 and Section 8(e) submissions are provided to EPA by external parties, typically chemical manufacturers in the case of PMN submissions and chemical manufacturers, processors and distributors in the case of Section 8(e) notices.

3a. Relevant Information Systems:

Implementation of this measure requires the use of several EPA databases: Chemical Information System (CIS), the legacy Management Information Tracking System (MITS), Pre-manufacture Notice (PMN) Lotus Notes, PMN CBI Local Area Network (LAN), 8(e) ISIS database for new chemicals, and the Focus database.

The following information from these databases is used collectively in applying this measure:

- CIS: Tracking information on ePMNs received;
- MITS: Legacy database that contains NCP regulatory dispositions for section 5 cases since 1979 and which stopped being an active database in 2013.
- PMN Lotus Notes: Records PMN review and decision, assessment reports on chemicals submitted for review. New workflow system for new chemicals submitted since August 2008.
- PMN CBI LAN: Records documenting PMN review and decision, assessment reports on chemicals submitted for review before August 2008. In addition, the information developed for each PMN is kept in hard copy in the Confidential Business Information Center (CBIC);
- 8(e) ISIS Database: Data submitted by industry under the Toxic Substances Control Act (TSCA) Section 8(e). TSCA 8(e) requires that chemical manufacturers, processors, and distributors notify EPA immediately of new (e.g. not already reported), unpublished chemical information that reasonably supports a conclusion of substantial risk. TSCA 8(e) substantial risk information notices most often contain toxicity data but may also contain information on exposure, environmental persistence, or actions being taken to reduce human health and environmental risks. It is an important information-gathering tool that serves as an early warning mechanism;
- Focus Database: Rationale for decisions emerging from Focus meeting, including decisions on whether or not to drop chemicals from further review.

3b. Data Quality Procedures:

OPPT has in place a signed Quality Management Plan ("Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances," November 2008). Like the 2003 QMP, it ensures the standards and procedures are applied to this effort.

3c. Data Oversight:

Source data reporting oversight: Not applicable for reasons set out above.

Information systems oversight: Primary responsibility resides with the Director of OPPT's Information Management Division for most databases. Responsibility for the 8(e) ISIS Database resides with the Director of OPPT's Risk Assessment Division.

3d. Calculation Methodology:

EPA's methods for implementing this measure involve determining whether EPA's current PMN review practices would have failed to prevent the introduction of chemicals or microorganisms into commerce that pose an unreasonable risk to workers, consumers or the environment, based on comparisons of 8(e) and previously-submitted new chemical review data. The "unreasonable risk" determination is based on consideration of (1) the magnitude of risks identified by EPA, (2) limitations on risk that result from specific safeguards applied, and (3) the benefits to industry and the public expected to be provided by the new chemical substance. In considering risk, EPA looks at anticipated environmental effects, distribution and fate of the chemical substance in the environment, patterns of use, expected degree of exposure, the use of protective equipment and engineering controls, and other factors that affect or mitigate risk. The following are the steps OPPT will follow in comparing the 8(e) data with the previously-submitted new chemical review data:

1. Match all 8(e) submissions in the 8(e) database with associated TSCA Section 5 notices. TSCA Section 5 requires manufacturers to give EPA a 90-day advance notice (via a pre-manufacture notice or PMN) of their intent to manufacture and/or import a new chemical. The PMN includes information such as specific chemistry identity, use, anticipated production volume, exposure and release information, and existing available test data. The information is reviewed through the New Chemicals Program to determine whether action is needed to prohibit or limit manufacturing, processing, or use of a chemical.
2. Characterize the resulting 8(e) submissions based on the PMN review phase. For example, were the 8(e) submissions received: a) before the PMN notice was received by EPA, b) during the PMN review process, or c) after the PMN review was completed?
3. Review 8(e) data focusing on 8(e)s received after the PMN review period was completed.
4. Compare hazard evaluation developed during PMN review with the associated 8(e) submission.
5. Report on the accuracy of the initial hazard determination.
6. Revise risk assessment to determine if there was an unreasonable risk based on established risk assessment and risk management guidelines and whether current PMN Review practices would have detected and prevented that risk.
7. Measurement results are calculated on a fiscal-year basis and draw on relevant information received over the 12-month fiscal year

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting annually at end-of-year.

4b. Data Limitations/Qualifications:

There are some limitations of EPA's review which result from differences in the quality and completeness of 8(e) data provided by industry; for example, OPPT cannot evaluate submissions that do not contain adequate information on chemical identity. The review is also affected in some cases by a lack of available electronic information. In particular the pre-1996 PMN cases are only retrievable in hard copy and may have to be requested from the Federal Document Storage Center. This may introduce some delays to the review process.

4c. Third-Party Audits:

None.

Measure Code: 230 - Number of pesticide registration review final work plans completed.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

2 - Protect Ecosystems from Chemical Risks

Strategic Target Code and Title:

0 -

Managing Office:

Office of Pesticide Programs

1a. Performance Measure Term Definitions:

Registration Review dockets: EPA initiates a registration review by establishing a docket for a pesticide registration review case and opening the docket for public review and comment. Each docket contains a Summary Document that explains what information EPA has on the pesticide and the anticipated path forward. The Summary Document includes:

- A Preliminary Work Plan highlighting anticipated risk assessment and data needs, providing an anticipated timeline for completing the pesticide's review, and identifying the types of information that would be especially useful to the Agency in conducting the review;
- A fact sheet providing general background information and summarizing the current status of the pesticide;
- Ecological risk assessment problem formulation and human health scoping sections describing the data and scientific analyses expected to be necessary to complete the pesticide's registration review.

Completed: After the closure of the public comment period for the preliminary work plan, EPA reviews those comments and revises (as necessary) the work plan, resulting in the issuance of a final work plan. See <https://www.epa.gov/pesticide-reevaluation/registration-review-process> for more information.

Background:

The Food Quality Protection Act of 1996 directed EPA to establish a Registration Review program with the goal of reviewing all registered pesticides, AIs and products, on a 15-year cycle to ensure that they continue to meet the standards of registration. EPA issued the final rule in 2006 and began implementing the program in 2007. Under the rule, EPA posts registration review schedules and these will provide a baseline for expected AI case dockets that will be opened for the next three year cycle and for decisions expected over the next several years. The first step of Registration Review is to open a public docket for each pesticide case entering the process to show the public what the Agency knows about the AI and seek comment. When comments are evaluated and data needs are finalized, OPP posts a Final Work Plan (FWP) for each AI case. Although the docket openings and the FWPs are tracked, both steps require notable resources to complete.

All registrations must be based on sound science and meet the Food Quality Protection Act (FQPA) safety standard. All risk assessments are subject to public and scientific peer review. In addition, OPP management reviews and signs new documents before being placed in the docket or posted on EPA's website.

For more information, see:

<https://www.epa.gov/pesticide-reevaluation>

2a. Original Data Source:

OPP staff, working collaboratively across the program, review the public comments and develop the draft final work plan taking into account existing policies, data requirements, and standard operating procedures.

2b. Source Data Collection:

Each final work plan is approved by Director of the appropriate OPP division (Antimicrobial Division, Biopesticides and Pollution Prevention Division, and Pesticide Re-evaluation Division). All final work plans are included in the docket for that registration review case and are available via the pesticide program website at <http://www.epa.gov/pesticides>

Data collected are for national actions taken on an annual basis. There is no spatial component.

EPA QA requirements/guidance governing collection: The office adheres to its Quality Management Plan (Nov. 2006) in ensuring data quality and that procedures are properly applied.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: As described in 2b, all final work plans are posted to the docket for that registration review case and are available via the pesticide program website. Counts for final work plans completed are tracked and tabulated in a master spreadsheet maintained by the Pesticide Re-evaluation Division.

Timing and frequency of reporting: Final work plans are developed on a quarterly basis. Counts of actions completed are available at the end of each quarter.

EPA QA requirements/guidance governing collection: The office adheres to its quality Management Plan (Nov. 2006) in ensuring data quality and that procedures are properly applied.

3a. Relevant Information Systems:

The Office of Pesticide Programs (OPP) has migrated all of its major data systems including regulatory and scientific data, workflow tracking and electronic document management into one integrated system, the Pesticide Registration Information System (PRISM). PRISM provides a centralized source of information on all registered pesticide products, including chemical composition, toxicity, name and address of registrant, brand names, registration actions, and related data. It is maintained by the EPA and tracks regulatory data submissions and studies, organized by scientific discipline, which are submitted by the registrant in support of a pesticide's registration. All registration actions received under the PRIA and PRIA 2 are entered and tracked in PRISM.

PRISM is the successor to the Office of Pesticide Programs Information System Network (OPPIN). Data has been migrated from the following databases: Chemical Vocabulary (CV), Company Name and Address (CNAD), Pesticide Document Management System (PDMS), Pesticide Product Information System (PPIS), Chemical Review Management System (CRMS), FIFRA CBI Access (FAS), Jackets, Product Data Call-In (PDCI), Phones, Pesticide Regulatory Action Tracking (PRAT), Reference System (REFS), Tolerance Indexes (TIS and TOTS). Sources of the input are paper copy and electronic data. EPA's Central Data Exchange (CDX), scheduled as EPA 097, is the gateway for electronic submissions. It consolidates information stored on the mainframe, the OPP LAN, on stand-alone computers and in paper copy. PRISM (Pesticide Registration Information System) consolidates various pesticides program databases.

EPA recently constructed a module in PRISM tracking major Registration Review milestones. This module enhances tracking capabilities and is an important management tool.

For information on disposition of records in this database, please see EPA Records Schedule 329, <http://www.epa.gov/records/policy/schedule/sched/329.htm>

PRISM was developed between 1997 and 2003 and has been operational since June 2, 2003. PRISM provides e-government capabilities to share pesticide information with OPP stakeholders. PRISM supports OPP's responsibilities under a variety of regulatory requirements including FIFRA, FQPA, PRIA, PRIA II, Pesticide Registration Review and for the Endocrine Disrupter Screening Program and will standardize the structure of a chemical case where appropriate to define the key tasks and documents used in a number of pesticide review processes. EDSP components are used to order, monitor, track and manage scientific tests associated with pesticide chemicals. Pesticide Registration Improvement Renewal Act (PRIA II).

PRISM was developed in response to the requirements of the following laws and regulations:

- The Title III of the E-Government Act of 2002 - Federal Information Security Management Act (FISMA) – Public Law 107-347: A security plan must be developed and practiced throughout all life cycles of the agency's information systems.
- Office of Management and Budget (OMB) Circular A-130, Management of Federal Information Resources: A System Security Plan (SSP) is to be developed and documented for each GSS and Major Application (MA) consistent with guidance issued by the National Institute of Standards and Technology (NIST).
- Federal Information Processing Standards (FIPS) Publication 199, Standards for Security Categorization of Federal Information and Information Systems: This document defines standards for the security categorization of information and information systems. System security categorization must be included in SSPs.
- FIPS Publication 200, Minimum Security Requirements for Federal Information and Information Systems: This document contains information regarding specifications for minimum security control requirements for federal information and information systems. Minimum security controls must be documented in SSPs.
- NIST Special Publication (SP) 800-18 Revision 1, Guide for Developing Security Plans for Federal Information Systems: The minimum standards for an SSP are provided in this NIST document.
- NIST SP 800-53, Revision 3, Recommended Security Controls for Federal Information Systems and Organizations: This document contains a list of security controls that are to be implemented into federal information systems based on their FIPS 199 categorization. This document is used in conjunction with FIPS 200 to define minimum security controls, which must be documented in SSPs.
- EPA Information Security Planning Policy. A system security plan shall be developed for each system cited on the EPA Inventory of Major Information Systems, including major applications and general support systems

Most, if not all, of PRISM data should be considered "source" data. This means that these data originate from primary data providers, particularly pesticide product registrants, submitting information sent to EPA directly in response to FIFRA regulatory requirements.

3b. Data Quality Procedures:

OPP adheres to its Quality Management Plan (Nov. 2006) in ensuring data quality and that procedures are properly applied. The Quality Management Plan is updated periodically, with the most recent plan approved on April 26, 2012.

3c. Data Oversight:

Rick Keigwin (director, Pesticide Re-evaluation Division, OPP), Keith Matthews (Director, Biopesticides and Pollution Prevention Division, OPP), and Joan Harrigan-Farrelly (Director, Antimicrobials Division, OPP)

3d. Calculation Methodology:

Timeframe is the fiscal year. Unit of measure is the number of final work plans completed each year. The Agency develops a final workplan for each pesticide subject to the registration review program. To be counted under this measure, each final workplan must be signed by the appropriate division director and placed in the docket established for that pesticide. Workplans are only counted when signed by the division director. There are no other variables or assumptions. Calculations are conducted by summing the number of final workplans issued each fiscal year.

4a. Oversight and Timing of Final Results Reporting:

Branch Chief, Financial Management and Planning Branch, OPP - accountable for oversight of data gathering, confirmation of data accuracy and final reporting of measure results. Results are reported twice a year.

4b. Data Limitations/Qualifications:

No data limitations.

4c. Third-Party Audits:

Not applicable.

Measure Code: 240 - Maintain timeliness of Section 18 Emergency Exemption Decisions

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

2 - Protect Ecosystems from Chemical Risks

Strategic Target Code and Title:

0 -

Managing Office:

Office of Pesticide Programs

1a. Performance Measure Term Definitions:

Timeliness: EPA initiates internal review of submitted emergency exemptions within 1-2 business days of receipt to maximize time available for science review (2-3 weeks) and subsequent mitigation of use directions and use pattern and management decision (1-2 weeks). Thus, the goal of 45 days to reach a decision may be achieved.

Section 18 Emergency Exemption: Section 18 of the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA) authorizes the EPA to allow an unregistered use of a pesticide for a limited time if we determine that an emergency condition exists. The regulations governing Section 18 of FIFRA (found at Title 40 of the Code of Federal Regulations, part 166), define the term "Emergency Condition" as an urgent, non-routine situation that requires the use of a pesticide(s). Emergency exemptions can be requested by a state or federal agencies when a serious pest problem jeopardizes production of agricultural goods or public health but no pesticides are currently registered for that situation.

2a. Original Data Source:

Data for review is submitted by the State or Federal Agency requesting the emergency exemption. Additional review of available public literature or databases may be necessary to supplement the submitted request

2b. Source Data Collection:

Section 18 Emergency Exemption requests (data) are submitted by the State or Federal Agency, electronically to the Team Leader and designated Section 18 Mailbox followed by a hard copy submitted through the Front End Processing center. States and Federal Agencies who are granted the Section 18 request are also required to submit a final report to the Agency within 6 months after the emergency exemption has expired, or before the request of a "repeat" emergency exemption request.

Because there are no rigid standards for Section 18 emergency exemption requests, and each emergency is unique, EPA may need to consult extensively with State Lead Agents and extension specialists through the review process. Although the quality of data varies among submissions, EPA ensures that the criteria and standards as stipulated in FIFRA Section 18 are met before approval of exemptions.

EPA emergency exemption decisions are approved by Registration Division Director or OPP Director, depending on the nature of the emergency.

EPA QA requirements/guidance collection: the office adheres to its Quality Management Plan in ensuring data quality and that procedures are properly applied.

2c. Source Data Reporting:

As described in 2b, data is submitted by the State or Federal Agency, electronically to the Team Leader and designated Section 18 Mailbox followed by a hard copy submitted through the Front End Processing center.

All approved or denied emergency exemptions are published in the FR on a regular basis, and are posted on the web in a searchable Section 18 database(<https://iaspub.epa.gov/apex/pesticides/f?p=118:2> on a regular basis. Section 18 emergency exemptions are reported annually.

3a. Relevant Information Systems:

System Description: Section 18 submissions are housed on a share drive, as well as paper files, and are tracked in a stand alone Access database that has communication ability to Office of Pesticide Programs Information System (OPPINS). However, as not all Section 18s require formal science review, submissions may not be logged into OPPINS, so only the Section 18 Access database is the complete source of section 18 actions. For information on disposition of records in this database, and paper files, please see EPA Records Schedule 329, <http://www.epa.gov/records/policy/schedule/sched/329/htm>

Source/Transformed Data: N/A

Information System Integrity Standards: OPP adheres to its Quality Management Plan in ensuring data quality and procedures are properly followed

3b. Data Quality Procedures:

OPP adheres to its Quality Management Plan (Nov. 2006) in ensuring data quality and that procedures are properly applied. The Quality Management Plan is updated periodically, with the most recent plan approved on April 26, 2012.

3c. Data Oversight:

Jack Housenger (Director, OPP), Susan Lewis (Director, Registration Division), Danial Rosenblatt (Deputy Director, Registration Division), Marion Johnson (Chief, Minor Use Emergency Response Branch)

Chain of approval and oversight of emergency exemption requests.

The emergency response team enters and oversees the receipt, tracking and storage of submissions and agency reviews of the emergency exemption requests]

3d. Calculation Methodology:

Timeframe is the fiscal year. Unit of measure is the average number of days taken, from receipt of a complete package to Agency decision, of all Section 18 emergency exemption approvals and denials. If a receipt is withdrawn by the submitting state or administratively withdrawn, the Section 18 emergency exemption request is not factored into this average completion time.

4a. Oversight and Timing of Final Results Reporting:

Branch Chief, Financial Management and Planning Branch, OPP - accountable for oversight of data gathering, confirmation of data accuracy and final reporting of measure results. Results are reported twice a year]

4b. Data Limitations/Qualifications:

No limitations

4c. Third-Party Audits:

N/A

Measure Code: 269 - Percent of agricultural watersheds that do not exceed EPA aquatic life benchmarks for two key pesticides of concern (azinphos-methyl and chlorpyrifos).

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

2 - Protect Ecosystems from Chemical Risks

Strategic Target Code and Title:

1 - By 2018, no watersheds will exceed aquatic life benchmarks for targeted pesticides

Managing Office:

Office of Pesticide Programs

1a. Performance Measure Term Definitions:

Agricultural watersheds: Agricultural Site is a site that has less than or equal to 5 percent urban land and greater than 50 percent agricultural area. Watershed : is the portion of the surface of the Earth that contributes water to a stream through overland run-off, including tributaries and impoundments.

EPA aquatic life benchmarks: The aquatic life benchmarks (for freshwater species) are based on toxicity values reviewed by EPA and used in the Agency's most recent risk assessments developed as part of the decision-making process for pesticide registration. The Office of Pesticide Programs (OPP) in EPA relies on studies required under the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA), as specified at 40 CFR Part 158, as well as a wide range of environmental laboratory and field studies available in the public scientific literature to assess environmental risk. Each Aquatic Life Benchmark is based on the most sensitive, scientifically acceptable toxicity endpoint available to EPA for a given taxon (for example, freshwater fish) of all scientifically acceptable toxicity data available to EPA. For more information, please see information from OPP at <https://www.epa.gov/pesticide-science-and-assessing-pesticide-risks/aquatic-life-benchmarks-pesticide-registration> .

Key pesticides of concern: Azinphos-methyl and chlorpyrifos were selected for this measure because EPA anticipates ongoing registration activity will have a direct effect on reducing exceedences of aquatic life benchmarks. Where ongoing registration activity may be mitigation to labels, a phase out of a chemical registration etc.

Background:

- Water quality is a critical endpoint for measuring exposure and risk to the environment. It is a high-level measure of our ability to reduce exposure from key pesticides of concern. This measure evaluates the reduction in water concentrations of pesticides as a means to protect aquatic life. Reduced water column concentration is a major indicator of the efficacy of risk assessment, risk management, risk mitigation and risk communication actions. It will illuminate program progress in meeting the Agency's strategic pesticide and water quality goals. The goal is to develop long-term consistent and comparable information on the amount of pesticides in streams, ground water, and aquatic ecosystems to support sound management and policy decisions. USGS-NAWQA data, used for this measure, can help inform EPA of the long-term results of its risk management decisions based on trends in pesticide concentrations.
- EPA will request that USGS add additional insecticides to their sampling protocols to establish base line information for newer products (e.g., the synthetic pyrethroids) that have been replacing the

organophosphates. Although the USGS has performed a reconnaissance of pyrethroids occurrence in bed sediment, there is not currently a comprehensive monitoring strategy.

2a. Original Data Source:

USGS National Water-Quality Assessment program.

Since 1991, the USGS NAWQA program has been collecting and analyzing data and information in major river basins and aquifers across the Nation.

2b. Source Data Collection:

Collection Methodology:

Monitoring plans call for yearly monitoring in 8 agricultural watersheds; biennial sampling in 3 agricultural dominated watersheds; and sampling every four years in a second set of 25 agricultural watersheds.

The sampling frequency for these sites will range from approximately 13 to 26 samples per year depending on the size of the watershed and the extent of pesticide use period. Sampling frequency is seasonally weighted so more samples are collected when pesticide use is expected to be highest.

The USGS database provides estimates of analytical methods and associated variability estimates

(<http://water.usgs.gov/nawqa/pnsp/pubs/circ1291/appendix8/8a.html>)

Quality Procedures:

The data that will be used for the outcome measure are subject to well-established QA-QC procedures in the USGS-NAWQA program (<http://water.usgs.gov/nawqa/pnsp/pubs/qcsummary.html>) and <http://water.usgs.gov/owq/FieldManual/index.html>

Geographical Extent: NAWQA Study-Units cover a variety of hydrologic and ecological resources; critical sources of contaminants, including agricultural, urban, and natural sources; and a high percentage of population served by municipal water supply and irrigated agriculture. Study Unit boundaries frequently cross State boundaries and usually encompass more than 10,000 square kilometers (about 3,900 square miles).

(http://water.usgs.gov/nawqa/studies/study_units.html)

Spatial Detail: The Study-Unit design uses a rotational sampling scheme; therefore, sampling intensity varies year to year at the different sites. In general, about one-third of the Study Units are intensively investigated at any given time for 3-4 years, followed by low-intensity monitoring. Trends are assessed about every 10 years. During the first decade, 20 investigations began in 1991; 16 in 1994; and 15 in 1997.

During the second decade (2001-2012), monitoring continues in 42 of the 51 Study Units completed in the first decade, following a rotational scheme of 14 investigations beginning in 2001, 2004, and 2007. Findings will help to establish trends at selected surface-water and ground-water sites that have been consistently monitored and characterize water-quality conditions. (http://water.usgs.gov/nawqa/studies/study_units.html)

Dates Covered by Source Data: Baseline data are derived from the USGS National Water-Quality Assessment (NAWQA) program's 2006 report: Pesticides in the Nation's Streams and Ground Water, 1992-2001. USGS is currently developing the report on its second cycle (cycle II) from 2002-2012. Data are available to the public on the USGS-NAWQA website from the (<http://water.usgs.gov/nawqa/>) USGS is currently developing sampling plans for 2013 – 2022. Future data will be available from USGS as it is made available on public websites.

2c. Source Data Reporting:

Data Submission Instrument: Baseline data are derived from the USGS National Water-Quality Assessment (NAWQA) program's 2006 report: Pesticides in the Nation's Streams and Ground Water, 1992-2001. USGS is

currently developing the report on its second cycle (cycle II) from 2002-2012. Data are available to the public on the USGS-NAWQA website from the (<http://water.usgs.gov/nawqa/> USGS is currently developing sampling plans for 2013 – 2022. Future data will be available from USGS as it is made available on public websites.

EPA does not rely on the production of the new report to receive the data. The report is when the data is available to the public. However, since this measure is reported every other year and requires two years worth of data, the USGS NAWQA program collects and analyzes data and information in major river basins and aquifers across the Nation every year, taking samples multiple times throughout the year. Then, two years' worth of data are sent to EPA biennially and entered into the EPA information system.

Frequency of Data Transmission to EPA: New results are available biennially.

Timing of Data Transmission to EPA: Data is provided to EPA from USGA NAQWA biennially. The data for the previous two years are received the reporting year for analysis and submission.

Data Entry Mechanism: All data are received in an excel spreadsheet from USGS-NAQWA. The data are analyzed within the spreadsheet and reported to the OPP measures representative. The data are then tabulated in a master spreadsheet for all OPP measures.

3a. Relevant Information Systems:

All data are received in an excel spreadsheet from USGS-NAQWA. The data are analyzed within the spreadsheet and reported to the OPP measures representative. The data are then tabulated in a master spreadsheet for OPP measures

Source/Transformed Data: There is one excel spreadsheet kept by EFED for each reporting cycle and for either agricultural or urban watershed. The spreadsheet has a tab containing source data, and a tab containing the analysis of the data along with the reported results.

Information System Integrity Standards: Standard not applicable.

3b. Data Quality Procedures:

EPA adheres to its approved Quality Management Plan in ensuring the quality of the data obtained from USGS. The data that will be used for the outcome measure are subject to well-established QA-QC procedures in the USGS-NAWQA program (http://water.usgs.gov/nawqa/pnsp/data/analytical_strategy.html and <http://water.usgs.gov/owq/FieldManual/index.html>

Since 1991, the USGS NAWQA program has been collecting and analyzing data and information in major river basins and aquifers across the Nation. The program has undergone periodic external peer-review (<http://dels.nas.edu/Report/Opportunities-Improve-USGS-National/10267>

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Not applicable.

Source Data Reporting Oversight Responsibilities: Not applicable.

Information Systems Oversight Personnel: Appointed Measures Representative(s) for Environmental Fate and Effects Division, in conjunction with the Division Director and Associate Division director(s).

Information Systems Oversight Responsibilities: To look over the source data, analyze the data, and report it to the OPP measures representative for reporting. The information systems oversight personnel keep a copy of all data spreadsheets.

3d. Calculation Methodology:

Decision Rules for Selecting Data: The data selected are completely provided by USGS and was determined by the 2006 USGS National Water-Quality Assessment (NAWQA) program's report. This report was used to determine the baseline for this measure and as a result, determined where data will be obtained. Moreover, all data provided to EPA from USGS are used in determining the analysis of the measure.

Definitions of Variables: Definitions of variables for the source data can be found in the documentation for the Pesticide National Synthesis Project <http://water.usgs.gov/nawqa/pnsp/data/> The variables used during calculating the measure is represented as a percentile (the percent of watersheds that had an exceedance when compared to the watersheds sampled without exceedances). Please see the explanation of calculations for how the calculations are performed.

Explanation of Calculations: For each site within the two-year reporting timeframe provided by USGS, the monitoring data are compared to aquatic life benchmarks for each pesticide of concern. Acute aquatic life benchmarks are compared to each measured concentration for the representative year for each site. Chronic benchmarks for invertebrates and fish are compared to 21-day and 60-day moving averages, respectively. Moving average concentrations for 21- and 60-day periods are computed for each day of the year for each stream site from hourly concentration estimates determined by straight-line interpolation between samples.

Explanation of Assumptions: Not applicable.

Unit of Measure: Percentage of watersheds

Timeframe of Result: Source data is received biennially and contains two years' worth of data. The data is then evaluated the reporting year. From receipt of source data until reporting data results to the OPP measures representative is about one month.

Documentation of Methodological Changes: Not applicable at this time.

4a. Oversight and Timing of Final Results Reporting:

The Environmental Fate and Effects Division Director, Don Brady, will oversee the final reporting from the appointed measures representative. The EFED measures representative then reports to the central measures representative, Vickie Richardson - Branch Chief, Financial Management and Planning Branch, for all of OPP who reports all measures

Final Reporting Oversight Responsibilities: The EFED Division Director and measures representative meet to discuss the results in order to be able to explain any deviations, positive or negative, in reporting goals. This is done to also see if goals should be updated, are the chemicals being looked at still applicable (are they even being found, discontinued, etc.). Once this meeting occurs, the final results with explanations are sent to the OPP measures representative who maintains a log of all of the OPP measures for reporting

Final Reporting Timing: This measure is reported on a biennial basis.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications:

These data continue to be evaluated and data limitations will be characterized during developmental stages of the measure and a complete evaluation will be provided in the NAWQA "Cycle II" Study Report. EPA has requested that USGS add additional insecticides to their sampling protocols to establish base line information for newer products that have been replacing the organophosphates (e.g., the synthetic pyrethroids). Although the USGS has performed a reconnaissance of pyrethroids occurrence in bed sediment, there is not currently a comprehensive monitoring strategy.

References: USGS National Water-Quality Assessment (NAWQA) program's 2006 report: Pesticides in the Nation's Streams and Ground Water, 1992-2001.

The NAWQA 2011 "Cycle II" Study Report is still being completed , thus there is no citation at this time.

The USGS database provides estimates of analytical methods and associated variability estimates

(<http://water.usgs.gov/nawqa/pnsp/pubs/circ1291/appendix8/8a.html>)

Data Lag Length and Explanation: Source data covers a two-year period (example: 2010-2011), this data is then received in 2012 once USGS has compiled the data for EPA into either agricultural or urban watershed data. This data are usually received by September of the reporting year (i.e. 2012 for this example), and then analyzed and reported by end of Septemeber (i.e. 2012). As a result, from the date the data collection is completed, there is a lag of 9 months until EPA receives the data, and 1 month from receipt until the data are reported.

Methodological Changes: Not applicable at this time. How the measure is calculated and data are collected remains the same at this time.

4c. Third-Party Audits:

The USGS NAWQA program has undergone periodic external peer review. For information on evaluation conducted by the National Research Council please see: http://www.nap.edu/catalog.php?record_id=10267 and <http://water.usgs.gov/nawqa/opportunities.html>

Measure Code: 008 - Percent of children (aged 1-5 years) with blood lead levels (>5 ug/dl).

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

2 - By 2018, ensure the percentage of children with blood lead levels above 5ug/dl does not rise above 1.

Managing Office:

Office of Pollution Prevention and Toxics; National Program Chemicals Division.

1a. Performance Measure Term Definitions:

Blood lead level: Blood lead level measures the amount of lead in the blood expressed in micrograms per deciliter ($\mu\text{g}/\text{dL}$). Until recently, the Centers for Disease Control and Prevention (CDC) identified children as having a blood lead level of concern if the test result was 10 or more micrograms of lead in a deciliter of blood. CDC experts now use a new level based on the U.S. population of children ages 1-5 years who are in the top 2.5% (the 97.5th percentile) of children tested for lead in their blood. According to CDC, the 97.5th percentile of the NHANES-generated blood lead level distribution in children 1-5 years old is 5 $\mu\text{g}/\text{dL}$.

http://www.cdc.gov/nceh/lead/ACCLPP/blood_lead_levels.htm

$\mu\text{g}/\text{dL}$: Micrograms of lead per deciliter of blood.

Background: This performance measure supports EPA's long-term goal of eliminating childhood lead poisoning as a public health concern and continuing to maintain the elimination of childhood lead poisoning over time. EPA's Lead Risk Reduction program contributes to the goal of eliminating childhood lead poisoning by: (1) establishing standards governing lead hazard identification and abatement practices and maintaining a national pool of professionals trained and certified to implement those standards; (2) providing information to housing occupants so they can make informed decisions and take actions about lead hazards in their homes; and (3) establishing a national pool of certified firms and individuals who are trained to carry out renovation and repair and painting projects while adhering to the lead-safe work practice standards and to minimize lead dust hazards created in the course of such projects.

Recent data show significant progress in the continuing effort to eliminate childhood lead poisoning as a public health concern. However, results of recent studies indicate adverse health effects to children at low blood levels, below 10 $\mu\text{g}/\text{dL}$. In response to this new information and the fact that approximately three-quarters of the nation's housing stock built before 1978 still contains some lead-based paint, the EPA is now targeting reductions in the number of children with blood lead levels of 5 $\mu\text{g}/\text{dL}$ or higher, as reflected in this performance measure.

http://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf

http://www.cdc.gov/nceh/lead/acclpp/cdc_response_lead_exposure_recs.pdf

2a. Original Data Source:

The original data source is the CDC's National Health and Nutrition Examination Survey (NHANES), which is recognized as the primary database in the United States for national blood lead statistics,

http://www.cdc.gov/nchs/nhanes/about_nhanes.htm NHANES is a probability sample of the non-institutionalized population of the United States. The survey examines a nationally representative sample of approximately 5,000 men, women, and children each year located across the U.S.

2b. Source Data Collection:

Methods of data collection (by original data source): Data are obtained by analysis of blood and urine samples collected from survey participants. Health status is assessed by physical examination. Demographic and other survey data regarding health status, nutrition, and health-related behaviors are collected by personal interview, either by self-reporting or, for children under 16 and some others, as reported by an informant. Detailed interview questions cover areas related to demographic, socio-economic, dietary, and health-related questions. The survey also includes an extensive medical and dental examination of participants, physiological measurements, and laboratory tests. NHANES is unique in that it links laboratory-derived biological markers (e.g. blood, urine etc.) to questionnaire responses and results of physical exams.

Quality procedures followed (by original data source): According to the CDC, the process of preparing NHANES data sets for release is as rigorous as other aspects of the survey. After a CDC contractor performs basic data cleanup, the CDC NHANES staff ensure that the data are edited and cleaned prior to release. NHANES staff devotes at least a full year after the completion of data collection to careful data preparation. Additionally, NHANES data are published in a wide array of peer-reviewed professional journals.

Background documentation is available at the NHANES Web site at: <http://www.cdc.gov/nchs/nhanes.htm>

The analytical guidelines are available at the Web site:

http://www.cdc.gov/nchs/about/major/nhanes/nhanes2003-2004/analytical_guidelines.htm

Geographical extent of source data, if relevant: Data are collected to be representative of the U.S. population. The population data are extrapolated from sample data by the application of standard statistical procedures.

Spatial detail of source data, if relevant: NHANES sampling procedures provide nationally representative data.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: EPA monitors the periodic issuance of NHANES reports and other data releases to obtain the data relevant to this measure.

Timing and frequency of reporting: NHANES is a continuous survey and examines a nationally representative sample of about 5,000 persons each year. These persons are located in counties across the country, 15 of which are visited each year.

Files of raw data, containing measured blood lead levels in NHANES participants, are currently released to the public in two-year sets. CDC also periodically publishes reports containing summary statistics for lead and more than 200 other chemicals measured in NHANES, at www.cdc.gov/exposurereport

3a. Relevant Information Systems:

There are no EPA systems utilized in collecting data for this measure as the Agency is able to secure the necessary data directly from NHANES reports and data releases.

3b. Data Quality Procedures:

EPA does not have any procedures for quality assurance of the underlying data as this function is performed by the CDC itself. CDC has periodically reviewed and confirmed EPA's calculation of NHANES summary

statistics from the raw data files. The Agency determines the performance result for this measure either directly from the NHANES data or by performing simple arithmetical calculations on the data.

3c. Data Oversight:

Chief, Planning and Assessment Branch, Environmental Assistance Division, Office of Pollution Prevention and Toxics

3d. Calculation Methodology:

Decision rules for selecting data: EPA uses the blood lead level values generated by the NHANES surveys. EPA however, limits the age of the child to under six, based on the most sensitive receptor age group noted in Section 401 of TSCA.

Definitions of variables: Key terms are defined in 1(a) above.

Explanation of the calculations: Not applicable. Performance results obtained from NHANES.

Explanation of assumptions: Not applicable for the same reason as above.

Identification of unit of measure: Micrograms per deciliter ($\mu\text{g}/\text{dL}$)

Identification of timeframe of result: The performance result is computed from data released by the CDC in sets covering the particular time period over which sampling occurs. Thus, the timeframe that applies to the measured result is the same period for which the NHANES data are released. It is not a simple snapshot at a specific moment in time.

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year, but subject to a data lag due to the periodic nature of NHANES reporting.

4b. Data Limitations/Qualifications:

NHANES is a voluntary survey and selected persons may refuse to participate. In addition, the NHANES survey uses two steps, a questionnaire and a physical exam. There are sometimes different numbers of subjects in the interview and examinations because some participants only complete one step of the survey. Participants may answer the questionnaire but not provide the more invasive blood sample. Special weighting techniques are used to adjust for non-response. NHANES is not designed to provide detailed estimates for populations that are highly exposed to lead.

4c. Third-Party Audits:

Report of the NHANES Review Panel to the NCHS Board of Scientific Counselors.

Cover letter can be accessed at: <http://www.cdc.gov/nchs/data/bsc/bscletterjune8.pdf>

Report can be accessed at: <http://www.cdc.gov/nchs/data/bsc/NHANESReviewPanelReportrapril09.pdf>

Measure Code: 297 - Metric Tons of Carbon Dioxide Equivalent (MTCO₂Eq) reduced or offset through pollution prevention.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

2 - Promote Pollution Prevention

Sub-Objective Number and Title:

1 - Promote Pollution Prevention

Strategic Target Code and Title:

2 - By 2018, reduce 45 million MT of carbon dioxide equivalent (MMTCO₂Eq.) cumulatively through pollution prevention

Managing Office:

Office of Pollution Prevention and Toxics

1a. Performance Measure Term Definitions:

Carbon Dioxide Equivalent: A measure of reductions in the generation of greenhouse gases by P2 Program participants. The measurement unit is "million metric tons of carbon dioxide equivalents (MMTCO₂Eq), which is equal to (million metric tons of a gas) multiplied by the global warming potential of the chemical gas.

Offset: Emission savings or storage that cancel out emissions that would otherwise have occurred. For example, electricity produced from burning landfill gas replaces electricity from the grid. This creates a carbon offset because landfill gas production and combustion produces fewer GHG emissions than fossil-fuel grid electricity does. <https://www.epa.gov/climatechange/glossary-climate-change-terms>

P2 Programs related to this measure include:

Environmentally Preferable Purchasing (EPP) uses the federal government's buying power to stimulate market demand for and supply of greener products and services. The Electronic Product Environmental Assessment Tool (EPEAT) facilitates identification and procurement of greener electronic products by institutional purchasers around the globe.

Green Suppliers Network (GSN) and Economy, Energy, and the Environment (E3) are related programs:

- Green Suppliers Network is a coordinated effort of two federal agencies to help large manufacturers engage their small and medium-sized suppliers in undergoing low-cost technical reviews to improve their processes and minimize their wastes.
- Economy, Energy, and the Environment is a coordinated federal and local technical assistance initiative to help manufacturers become more sustainable. More federal agencies contribute to E3 technical assessments than to GSN assessments. The agencies provide technical production-process assessments and training to help manufacturers increase the energy efficiency and sustainability of their manufacturing processes, and reduce their environmental wastes, carbon emissions, and business costs.

Green Chemistry (GC): The Green Chemistry Program promotes the research, development, and implementation of technologies that reduce or eliminate the use or generation of hazardous substances. Through annual recognition, the Presidential Green Chemistry Challenge (PGCC) awards demonstrates the human health and environmental benefits and market competitiveness that green chemistry technologies offer.

Technical Assistance – The P2 Program conducts general P2 technical assistance mostly through grants and some through direct Regional work. The two grant programs are P2 Grants to States and Tribes and Source Reduction Assistance Grants. States and Tribes are eligible for both kinds; localities, non-profits, universities and community groups are eligible only for Source Reduction Assistance Grants. The grants help small and medium businesses adopt sustainable P2 technologies and practices. Grantees provide technical assistance and implement award programs to achieve results. In direct work, Regions are also providing P2 technical assistance to help entities achieve results.

2a. Original Data Source:

EPP: The entities providing the data that EPA uses for performance reporting are the Green Electronics Council and the Information Technology Industry Council (ITI). ITI provides data on the number of EPEAT registered products shipped globally during the reporting period to the Green Electronics Council. The Green Electronics Council then provides this data to EPA. The data provided is tabulated by product category, by sales in each country, and by purchases made by the U.S. Federal Government.

GSN/E3: The entities providing the data that EPA uses are US Department of Commerce (DOC) for aggregated industrial process data, and industrial facilities for facility-level utility and materials-management data, and the US Department of Energy (DOE) Industrial Assessment Center (IAC) database for energy efficiency data.

Green Chemistry (GC): Participants in the PGCC awards self-nominate and are the original data source. The awards are public, confidential business information for nominated technologies is not accepted.

Technical Assistance: The entities providing the data that EPA uses are facilities that received technical assistance from grantees or Regions directly and facilities that applied to a grantee-State to receive a P2 environmental award. Facilities provide the grantees or the Region directly with data taken from their facility utility bills and their facility materials-management records.

2b. Source Data Collection:

EPP: The Information Technology Industry Council (ITI) collects the source data from their member companies. ITI tabulates manufacturer records to compile annual worldwide sales. Manufacturers of EPEAT-registered products sign a Memorandum of Understanding with the Green Electronics Council in which they warrant the accuracy of the data they provide. The data provided is tabulated by product category, by sales in each country, and by purchases made by the U.S. Federal Government.

GSN/E3: DOC grantees, DOE grantees, and EPA grantees collect the source data. Manufacturing Extension Partnership Centers (MEPs) are grantees of DOC's National Institute for Standards and Technology (NIST), and they collect environmental savings and energy-performance data on products and practices they recommend to businesses. MEPs record potential environmental and energy savings associated with each set of MEP E3 business-review recommendations, plus any utility-based data in facilities responses to voluntary MEP questionnaires on implemented E3 projects, and then DOC aggregates all data before sharing data with EPA. The Industrial Assessment Centers are grantees of DOE, and provide data to DOE via the Industrial Assessment Center database housed at Rutgers University. DOE grantees and EPA grantees likewise collect utility and any materials-management data on energy savings from facilities that implemented their respective grantees' E3 recommendations. DOC, DOE, and EPA grantees all send data to their grantor agencies, and the agencies input the data into their respective databases. All grantees follow their respective agencies' QA/QC requirements. Federal agencies participating in E3 have developed a second complementary database for their collective use, which is maintained by an EPA contractor.

Green Chemistry: PGCC awards nominations are provided to EPA. EPA prescreens the nominations, and then provides those that meet scope and other “yes/no” criteria (as opposed to the ranking criteria) to an external peer review expert panel organized by the American Chemical Society for judging. Suggested winners are returned to EPA for final verification and validation. Information about the prescreen and judging criteria is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: EPA grantees (or Regions if they have supplied direct technical assistance) collect the utility bill data and relevant materials-management records from facilities who have completed project implementation or who have applied for State environmental awards. EPA guidelines, including those on itemizing facility-level implementation steps and results, and QAPP requirements as appropriate are applicable in collecting data. Grantees sometimes transform utility and materials-management records into the appropriate environmental metric; sometimes the EPA P2 Regional Coordinator needs to transform the data. Grantees transforming the data must identify the methodological tool they used to make the transformation. The P2 Program provides grantees P2 Calculators for their voluntary use, the same tools the P2 Regional Coordinators use, and they are available at <http://www.epa.gov/p2/pubs/resources/measurement.html>

2c. Source Data Reporting:

Data Submission Instrument

EPP: The Information Technology Industry council (ITI) submits data to the non-profit Green Electronics Council, which then submits the data to EPA. The reporting data provided is from the previous year of sale.

GSN/E3: NIST/DOC submits data to EPA in a database that is maintained by an EPA contractor. DOE IAC data is also inputted into this database. State grantees submit data electronically or by mail to EPA in grant reports.

GC: PGCC awards nominations are provided to EPA as an electronic report. Information about the PGCC nomination submission format is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: Grantees submit facility-level data (or aggregated data and extenuating circumstances for doing so) to EPA electronically or by mail in grant reports. Regions keep track of their own direct results for entry into the system described below.

Data Entry Mechanism

EPP: ITI sends the data to the Green Electronics Council, which then sends it to EPA. EPA program staff enters the data into EPA’s Electronics Environmental Benefits Calculator (EEBC) to transform them into environmental and economic benefits achieved as the result of the procurement of these products.

GSN/E3: NIST and EPA program staff input data into a Salesforce database maintained by the EPA. DOE State grantees submit data to DOE in the IAC database, and this data is populated into the EPA Salesforce database. Similarly, EPA grantees submit data to the EPA Grants Plus database, which is then populated in the EPA Salesforce database.

GC: Benefits data in PGCC awards nominations provided to EPA are entered into an internal spreadsheet.

Technical Assistance: Regions enter grantee-reported facility-level data (or aggregated data under extenuating circumstances) and facility-level Regional direct data into P2 GrantsPlus, the reporting database for Regional P2 programs. P2 GrantsPlus, is the P2 program database for reporting results from Regional offices. Regions also enter measurement methodology data and any rationales for reporting aggregated data into P2 GrantsPlus.

Frequency of Data Transmission to EPA

EPP: annually.

GSN/E3: quarterly

GC: annually

Technical Assistance: semi-annually.

Timing of Data Transmission to EPA

EPP: The Green Electronics Council must submit data for the prior fiscal year to EPA by September 30th.

GSN/E3: quarterly

GC: End of Fiscal Year

Technical Assistance: Grantees must submit data if possible by the close of the fiscal year, and any amendments for the prior fiscal year by March 31st.

3a. Relevant Information Systems:

EPP: National program staff uses EPA's expert reviewed Electronics Environmental Benefits Calculator (EEBC) as its data transformation system. The EEBC calculates environmental benefits (savings or reductions) of an EPEAT registered product, compared to a conventional baseline product. The EEBC only calculates environmental benefits for performance criteria in standards included in the EPEAT system, for product categories covered by EPEAT. All assumptions underlying calculation methods in the EEBC were reviewed by experts in the field, and are re-reviewed for each version upgrade. Information on the EEBC can be found at <http://www2.epa.gov/fec/publications-and-resources-calculator> The link to the EEBC is found at http://www2.epa.gov/sites/production/files/2013-06/eebc_v3_1.xlsm

GSN/E3: Federal agencies participating in E3 have developed an E3 Salesforce database for their collective use, which is maintained by an EPA contractor. Regional project officers issuing E3 grants use P2 GrantsPlus as their information system; see the description of that system under Technical Assistance below. EPA's Information System Integrity Standards are not applicable to DOC and DOE databases. EPA's P2 GrantsPlus and E3 Salesforce database meets EPA's IT security policy.

GC: PGCC Internal spreadsheet that holds information on nominations, winners, and environmental benefits.

Technical Assistance: Regional project officers use P2 GrantsPlus as the information system to store source data. This system contains grant-specific and direct-project data that have not been normalized. The system requires entries of facility-level data, any rationales for aggregated data and measurement methodology data, and automatically generates date-stamp records of every entry in the system. It also allows users to maintain a log of comments associated with data entries and to generate reports. P2 GrantsPlus satisfies EPA's IT security policy. An extensive description of the system will be available online before Spring 2015.

3b. Data Quality Procedures:

OPPT: All OPPT programs operate under the Information Quality Guidelines as found at <https://www.epa.gov/quality/epa-information-quality-guidelines> as well as under the Pollution Prevention and Toxics Quality Management Plan (QMP) (“Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances,” November 2008), and the programs will ensure that those standards and procedures are applied to this effort. The Quality Management Plan is for internal use only.

EPP: EPEAT manufacturers sign a Memorandum of Understanding with the Green Electronics Council (GEC) in which they warrant accuracy of the data they provide. EPA/EPEAT Program Managers review the data and engage with GEC to verify accuracy before entering the data into the EEBC.

GC: The GC program operates under the Information Quality Guidelines found at <https://www.epa.gov/quality/epa-information-quality-guidelines> as well as under the Pollution Prevention and Toxics Quality Management Plan (QMP) (“Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances,” November 2008), and the program will ensure that those standards and procedures are applied to this effort. The Quality Management Plan is for internal use only.

Quality assurance and control is conducted by the review of the nominations for the PGCC program, ensuring that award winners have fully met all required selection criteria and accurately reported environmental benefit results. EPA may follow up with nominees, as necessary, to obtain any additional data in support of verification that may be needed by EPA or the external American Chemical Society-organized expert peer review panel. Information about selection criteria is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: Regional project officers determine whether a grantee is generating source data and, if so, require a Quality Assurance Project Plan; otherwise they provide other data quality procedures. Grant Requests for Proposals notify applicants of the requirement to submit facility-level records or to explain why they cannot. Regional P2 Coordinators’ Measurement Guidance provides extensive data quality guidance for grant and direct work. The P2 GrantsPlus reporting database requires staged entries regarding measurement methodology, facility-level reporting, and actual quantified results to build records highly amenable to data quality review. Regional and national program staff before March 31 (after the preceding September 30 End-of-Year reporting). Finally, regional and national program staff periodically updates the Regional P2 Measurement Guidance as well (last update, beginning of FY 2013). The Measurement Guidance will be posted on our P2 Program website in coordination with the FY 2016/2017 National Program Managers Guidance.

3c. Data Oversight:

The Branch Chief of the Planning and Assessment Branch (PAB) in OPPT oversees source data reporting and information systems through periodic updates and discussions with the national program staff members and managers who monitor their own source data reporting. This oversight is also accomplished through written protocols developed by PAB and national program managers.

3d. Calculation Methodology:

EPP: The calculation methodology for EPEAT is in the national program’s Electronics Environmental Benefits Calculator (EEBC). EPA has changed the system to ease reporting. EPA is now reporting all life-cycle benefits of the product in the year of sale. All assumptions underlying calculation methods in the EEBC were reviewed by

experts in the field, and are re-reviewed for each version upgrade. Information on the EEBC can be found at <http://www2.epa.gov/fec/publications-and-resources-calculator> The link to the EEBC is found at http://www2.epa.gov/sites/production/files/2013-06/eebc_v3_1.xlsm

GSN/E3: The national program uses project-completed facility data as the basis for reporting results. This data is generated by E3 grantees, who collect the actual environmental benefits results from utility and other data sources, highlighted in the Source Data Collection section of this document. EPA staff utilizes the E3 database to aggregate the actual environmental benefits data for external reporting purposes.

GC: When available, the Green Chemistry program sums the realized or actual quantitative environmental benefits reported from valid PGCC award nominations received. If necessary, the Green Chemistry program will convert units using the P2 Program calculators to the standardized metrics used for GPRA reporting purposes, for example, converting BTUs avoided into Metric Tons of CO₂ Equivalent avoided.

Technical Assistance: Regional project officers use the national program's P2 Calculators as their calculation methodology. The P2 Calculators are updated as needed with new information, the latest updates are posted on the Calculator website at <http://www.epa.gov/p2/pubs/resources/measurement.html> Assumptions as well as justifications as to data sources are transparent and clearly identified in the tools. End users such as grantees, regions, states, academia, businesses and others have completed extensive training on the suite of P2 tools. Live webinar training is held twice a year, and training materials/tools can be downloaded at: <http://www.p2.org/general-resources/p2-data-calculators/>

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

EPP: EPEAT relies on:

- Manufacturers of EPEAT-registered products to submit data to the Information Industry Technology Council (ITI).
- ITI to aggregate data submitted to them by the individual EPEAT manufacturers.
- The Green Electronics Council to provide the data that ITI has submitted to them.

EPA does not have control of the timing of submission of this data. EPA is reporting the data from the previous year of sale. The results of the EEBC calculator are based on an average baseline product and on an average EPEAT registered product. This provides a conservative calculation methodology for performance results.

GSN/E3: To a degree, EPA assumes that partner facilities report actual data accurately to NIST Manufacturing Extension Partnership (NIST MEP) headquarters, that MEP and State technical assistance providers make accurate estimates of potential P2 results if projects are implemented, and that NIST MEP headquarters accurately aggregates the data before sharing them with EPA.

The program assumes that many partner facilities will choose not to submit actual P2 outcome data to maintain confidentiality and that facility partners will not accept NIST MEP headquarters sharing any non-aggregated potential or actual P2 data with EPA.

Facilities reviewed by NIST MEP and State technical assistance providers are often reluctant to have their individual facility opportunity assessments shared with EPA or to share proprietary information on quantitative benefits with NIST or EPA. MEP programs can also vary in the level of detail they report from the facility-level opportunity assessments (potential results) to MEP Headquarters, where data are aggregated and then sent to EPA. To address these limitations, EPA has strengthened the Request for Proposals requirements for the grantee MEP centers eligible to perform GSN and E3 reviews.

GC: Because the PGCC awards are public, companies cannot submit confidential business information. As such, data provided can be qualitative rather than quantitative; qualitative data is not counted towards measures, so the data that is reported is conservative. Additionally, the PGCC award is not limited to those technologies in which significant environmental benefits have been actualized or realized, but benefits from those award winners with only potential or projected results are not counted to ensure that the program does not overestimate the benefits. Further, the PGCC results and benefits for a technology are only reported in the year of the award, capturing of environmental benefits results from the future implementation or expansion of the award winning technology is not conducted because of quality assurance and other limitations.

Technical Assistance: Regional grant results come in the year of reporting not the year of award, results that are reported by the P2 Program will include several years of results from grants.

4c. Third-Party Audits:

EPP: The Electronics Environmental Benefits Calculator (EEBC) underwent internal and external review during its development phases. It is also reviewed and beta-tested by external experts during each new phase of development.

GC: PGCC award nominations are reviewed by an external peer review expert panel organized by the American Chemical Society.

Technical Assistance: The P2 Calculators have been reviewed by third-parties.

Measure Code: 268 - Percent of urban watersheds that do not exceed EPA aquatic life benchmarks for three key pesticides of concern (diazinon, chlorpyrifos and carbaryl).

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

2 - Protect Ecosystems from Chemical Risks

Strategic Target Code and Title:

1 - By 2018, no watersheds will exceed aquatic life benchmarks for targeted pesticides

Managing Office:

Office of Pesticide Programs

1a. Performance Measure Term Definitions:

Urban watersheds (as per USGS NAWQA glossary): Urban Site is a site that has greater than 25 percent urbanized and less than or equal to 25 percent agricultural area. Watershed : is the portion of the surface of the Earth that contributes water to a stream through overland run-off, including tributaries and impoundments.

EPA aquatic life benchmarks: The aquatic life benchmarks (for freshwater species) are based on toxicity values reviewed by EPA and used in the Agency's most recent risk assessments developed as part of the decision-making process for pesticide registration. The Office of Pesticide Programs (OPP) in EPA relies on studies required under the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA), as specified at 40 CFR Part 158, as well as a wide range of environmental laboratory and field studies available in the public scientific literature to assess environmental risk. Each Aquatic Life Benchmark is based on the most sensitive, scientifically acceptable toxicity endpoint available to EPA for a given taxon (for example, freshwater fish) of all scientifically acceptable toxicity data available to EPA. For more information, please see information from OPP at <https://www.epa.gov/pesticide-science-and-assessing-pesticide-risks/aquatic-life-benchmarks-pesticide-registration>

Key pesticides of concern: The pesticides diazinon, chlorpyrifos, and carbaryl were selected for measurement because of recent registration activity that is expected to reduce exceedences of aquatic life benchmarks. Where ongoing registration activity may be mitigation to labels, a phase out of a chemical registration etc.

Background:

- Water quality is a critical endpoint for measuring exposure and risk to the environment. It is a high-level measure of our ability to reduce exposure from key pesticides of concern. This measure evaluates the reduction in water concentrations of pesticides as a means to protect aquatic life. Reduced water column concentration is a major indicator of the efficacy of risk assessment, risk management, risk mitigation and risk communication actions. It will illuminate program progress in meeting the Agency's strategic pesticide and water quality goals. The goal is to develop long-term consistent and comparable information on the amount of pesticides in streams, ground water, and aquatic ecosystems to support sound management and policy decisions. USGS-NAWQA data, used for this measure, can help inform EPA of the long-term results of its risk management decisions based on trends in pesticide concentrations.
- EPA will request that USGS add additional insecticides to their sampling protocols to establish base line information for newer products (e.g., the synthetic pyrethroids) that have been replacing the

organophosphates. Although the USGS has performed a reconnaissance of pyrethroids occurrence in bed sediment, there is not currently a comprehensive monitoring strategy.

2a. Original Data Source:

Since 1991, the USGS NAWQA program has been collecting and analyzing data and information in major river basins and aquifers across the Nation.

2b. Source Data Collection:

Collection Methodology:

Monitoring plans call for biennial sampling in 8 urban watersheds; and sampling every four years in a second set of 9 urban watersheds.

The sampling frequency for these sites will range from approximately 13 to 26 samples per year depending on the size of the watershed and the extent of pesticide use period. Sampling frequency is seasonally weighted so more samples are collected when pesticide use is expected to be highest.

The USGS database provides estimates of analytical methods and associated variability estimates

<http://water.usgs.gov/nawqa/pnsp/pubs/circ1291/appendix8/8a.html>

Quality Procedures:

The data that will be used for the outcome measure are subject to well-established QA-QC procedures in the USGS-NAWQA program (<http://water.usgs.gov/nawqa/pnsp/pubs/qcsummary.html> and <http://water.usgs.gov/owq/FieldManual/index.html>)

Geographical Extent: NAWQA Study-Units cover a variety of hydrologic and ecological resources; critical sources of contaminants, including agricultural, urban, and natural sources; and a high percentage of population served by municipal water supply and irrigated agriculture. Study Unit boundaries frequently cross State boundaries and usually encompasses more than 10,000 square kilometers (about 3,900 square miles).

(http://water.usgs.gov/nawqa/studies/study_units.html)

Spatial Detail: The Study-Unit design uses a rotational sampling scheme; therefore, sampling intensity varies year to year at the different sites. In general, about one-third of the Study Units are intensively investigated at any given time for 3-4 years, followed by low-intensity monitoring. Trends are assessed about every 10 years. During the first decade, 20 investigations began in 1991; 16 in 1994; and 15 in 1997.

During the second decade (2001-2012), monitoring continues in 42 of the 51 Study Units completed in the first decade, following a rotational scheme of 14 investigations beginning in 2001, 2004, and 2007. Findings will help to establish trends at selected surface-water and ground-water sites that have been consistently monitored and characterize water-quality conditions. (http://water.usgs.gov/nawqa/studies/study_units.html)

Dates Covered by Source Data: Baseline data are derived from the USGS National Water-Quality Assessment (NAWQA) program's 2006 report: Pesticides in the Nation's Streams and Ground Water, 1992-2001. USGS is currently developing the report on its second cycle (cycle II) from 2002-2012. Data are available to the public on the USGS-NAWQA website from the (<http://water.usgs.gov/nawqa/>) USGS is currently developing sampling plans for 2013 – 2022. Future data will be available from USGS as it is made available on public websites.

2c. Source Data Reporting:

Data Submission Instrument: Baseline data are derived from the USGS National Water-Quality Assessment (NAWQA) program's 2006 report: Pesticides in the Nation's Streams and Ground Water, 1992-2001. USGS is currently developing the report on its second cycle (cycle II) from 2002-2012. Data are available to the public

on the USGS-NAWQA website from the (<http://water.usgs.gov/nawqa/> USGS is currently developing sampling plans for 2013 – 2022. Future data will be available from USGS as it is made available on public websites.

EPA does not rely on the production of the new report to receive the data. The report is when the data is available to the public. However, since this measure is reported every other year and requires two years worth of data, the USGS NAWQA program collects and analyzes data and information in major river basins and aquifers across the Nation every year, taking samples multiple times throughout the year. Then, two years worth of data are sent to EPA biennially and entered into the EPA information system.

Frequency of Data Transmission to EPA: New results are available biennially.

Timing of Data Transmission to EPA: Data is provided to EPA from USGA NAQWA biennially. The data for the previous two years are received the reporting year for analysis and submission.

Data Entry Mechanism: All data is received in an excel spreadsheet from USGS-NAQWA. The data is analyzed within the spreadsheet and reported to the OPP measures representative. The data is then tabulated in a master spreadsheet for all OPP measures.

3a. Relevant Information Systems:

System Description: All data is received in an excel spreadsheet from USGS-NAQWA. The data is analyzed within the spreadsheet and reported to the OPP measures representative. The data is then tabulated in a master spreadsheet for all OPP measures.

Source/Transformed Data: There is one excel spreadsheet kept by EFED for each reporting cycle and for either agricultural or urban watershed. The spreadsheet has a tab containing source data and a tab containing the analysis of the data along with the reported results.

Information System Integrity Standards: Standard not applicable.

3b. Data Quality Procedures:

EPA adheres to its approved Quality Management Plan in ensuring the quality of the data obtained from USGS. The data that will be used for the outcome measure is based on well-established QA-QC procedures in the USGS-NAWQA program (https://water.usgs.gov/nawqa/pnsp/data/analytical_strategy.html and <http://water.usgs.gov/owq/FieldManual/index.html>

Since 1991, the USGS NAWQA program has been collecting and analyzing data and information in major river basins and aquifers across the Nation. The program has undergone periodic external peer-review (<http://dels.nas.edu/Report/Opportunities-Improve-USGS-National/10267>

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Not applicable.

Source Data Reporting Oversight Responsibilities: Not applicable.

Information Systems Oversight Personnel: Appointed Measures Representative(s) for Environmental Fate and Effects Division, in conjunction with the Division Director and Associate Division director(s).

Information Systems Oversight Responsibilities: To look over the source data, analyze the data, and report it to the OPP measures representative for reporting. The information systems oversight personnel keep a copy of all data spreadsheets.

3d. Calculation Methodology:

Decision Rules for Selecting Data: The data selected are completely provided by USGS and was determined by the 2006 USGS National Water-Quality Assessment (NAWQA) program's report. This report was used to determine the baseline for this measure and as a result, determined where data will be obtained. Moreover, all data provided to EPA from USGS are used in determining the analysis of the measure.

Definitions of Variables: Definitions of variables for the source data can be found in the documentation for the Pesticide National Synthesis Project <http://water.usgs.gov/nawqa/pnsp/data/> The variables used during calculating the measure is represented as a percentile (the percent of watersheds that had an exceedance when compared to the watersheds sampled without exceedances). Please see the explanation of calculations for how the calculations are performed.

Explanation of Calculations: For each site within the two-year reporting timeframe provided by USGS, the monitoring data is compared to aquatic life benchmarks for each pesticide of concern. Acute aquatic life benchmarks are compared to each measured concentration for the representative year for each site. Chronic benchmarks for invertebrates and fish are compared to 21-day and 60-day moving averages, respectively. Moving average concentrations for 21- and 60-day periods are computed for each day of the year for each stream site from hourly concentration estimates determined by straight-line interpolation between samples.

Explanation of Assumptions: Not applicable.

Unit of Measure: Percentage of watersheds

Timeframe of Result: Source data is received biennially and contains two years worth of data. The data is then evaluated the reporting year. From receipt of source data until reporting data results to the OPP measures representative is about one month.

Documentation of Methodological Changes: Not applicable at this time.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: The Environmental Fate and Effects Division Director, Don Brady will oversee the final reporting from the appointed measures representative. The EFED measures representative then reports to a central measures representative, Vickie Richardson - Branch Chief, Financial Management and Planning Branch, for all of OPP who reports all measures.

Final Reporting Oversight Responsibilities: The EFED Division Director and measures representative meet to discuss the results in order to be able to explain any deviations, positive or negative, in reporting goals. This is done to also see if goals should be updated, are the chemicals being looked at still applicable (are they even being found, discontinued, etc.). Once this meeting occurs, the final results with explanations are sent to the OPP measures representative who maintains a log of all of the OPP measures for reporting.

Final Reporting Timing: This measure is reported on a biennial basis.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications:

These data continue to be evaluated and data limitations will be characterized during developmental stages of the measure and a complete evaluation will be provided in the NAWQA "Cycle II" Study Report. EPA has requested that USGS add additional insecticides to their sampling protocols to establish base line information for newer products that have been replacing the organophosphates (e.g., the synthetic pyrethroids). Although the USGS has performed a reconnaissance of pyrethroids occurrence in bed sediment, there is not currently a comprehensive monitoring strategy.

References: USGS National Water-Quality Assessment (NAWQA) program's 2006 report: Pesticides in the Nation's Streams and Ground Water, 1992-2001.

The NAWQA 2011 "Cycle II" Study Report is still being completed , thus there is no citation at this time.

The USGS database provides estimates of analytical methods and associated variability estimates

(<http://water.usgs.gov/nawqa/pnsp/pubs/circ1291/appendix8/8a.html>)

Data Lag Length and Explanation: Source data covers a two-year period (example: 2010-2011), this data is then received in 2012 once USGS has compiled the data for EPA into either agricultural or urban watershed data. This data is usually received by September of the reporting year (i.e. 2012 for this example), and then analyzed and reported by end of Septemeber (i.e. 2012). As a result, from the date the data collection is completed, there is a lag of 9 months until EPA receives the data, and 1 month from receipt until the data is reported.

Methodological Changes: Not applicable at this time. How the measure is calculated and data is collected remains the same at this time.

4c. Third-Party Audits:

The USGS NAWQA program has undergone periodic external peer-review. For information on evaluation conducted by the National Research Council please see: http://www.nap.edu/catalog.php?record_id=10267 and <http://water.usgs.gov/nawqa/opportunities.html>

Measure Code: 266 - Reduction in concentration of targeted pesticide analytes in the general population.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

3 - By 2014, reduce concentration of targeted chemicals in the general population

Managing Office:

Office of Pesticide Programs

1a. Performance Measure Term Definitions:

Reduction: Each fiscal year, EPA compares the most recent biomonitoring data available on the analytes of targeted organophosphate pesticides in urine samples from the general public that have been analyzed by the Centers for Disease Control and Prevention (CDC) to the baseline concentrations. The baseline years (corresponding to the NHANES sampling period) chosen for this measure are 2001-2002. The percent for which the population's 95th percentile concentration changed between the baseline year and the latest measurements will be calculated. The result of these calculations is then compared to the target set for the year in which performance is being measured.

Concentration: 95th percentile concentration measured in the micrograms per liter (ug/L), at standard detection limits.

Targeted pesticide analytes: The pesticides targeted by this measure are organophosphate pesticides. The measure is based on levels of the following metabolites that CDC measures in urine samples: six non-specific organophosphate dialkyl phosphate metabolites – and the chlorpyrifos-specific metabolite 3,5,6-Trichloro-2-pyridinol. The dialkyl phosphate and 3,5,6-Trichloro-2-pyridinol metabolites can be present in urine after low level exposures to organophosphorus insecticides that do not cause clinical symptoms or inhibition of cholinesterase activity, and measurement of these metabolites reflects recent exposure, predominantly in the previous few days. The metabolites may also occur in the environment as a result of degradation of organophosphorus insecticides, and therefore, the presence in a person's urine may reflect exposure to the metabolite itself.

General population: the non-institutionalized population of the United States. This measure focuses on all age groups included in NHANES.

Background:

NHANES is a major program of the National Center for Health Statistics (NCHS). NCHS is part of the Centers for Disease Control and Prevention (CDC), U.S. Public Health Service, and has the responsibility for producing vital and health statistics for the Nation. NCHS is one of the Federal statistical agencies belonging to the Interagency Council on Statistical Policy (ICSP). The ICSP, which is led by the Office of Management and Budget (OMB), is composed of the heads of the Nation's 10 principal statistical agencies plus the heads of the statistical units of four non-statistical agencies. The ICSP coordinates statistical work across organizations,

enabling the exchange of information about organization programs and activities, and provides advice and counsel to OMB on statistical activities. The statistical activities of these agencies are predominantly the collection, compilation, processing or analysis of information for statistical purposes. Within this framework, NCHS functions as the Federal agency responsible for the collection and dissemination of the Nation's vital and health statistics. Its mission is to provide statistical information that will guide actions and policies to improve the health of the American people.

- To carry out its mission, NCHS conducts a wide range of annual, periodic, and longitudinal sample surveys and administers the national vital statistics systems.
- As the Nation's principal health statistics agency, NCHS leads the way with accurate, relevant, and timely data. To assure the accuracy, relevance, and timeliness of its statistical products, NCHS assumes responsibility for determining sources of data, measurement methods, methods of data collection and processing while minimizing respondent burden; employing appropriate methods of analysis, and ensuring the public availability of the data and documentation of the methods used to obtain the data. Within the constraints of resource availability, NCHS continually works to improve its data systems to provide information necessary for the formulation of sound public policy. As appropriate, NCHS seeks advice on its statistical program as a whole, including the setting of statistical priorities and on the statistical methodologies it uses. NCHS strives to meet the needs for access to its data while maintaining appropriate safeguards for the confidentiality of individual responses.
- The Centers for Disease and Prevention's (CDC) National Health and Nutrition Examination Survey (NHANES) program is a survey designed to assess the health and nutritional status of adults and children in the U.S. NHANES was selected as the performance database because it is an ongoing program that is statistically designed to be nationally representative of the U.S. civilian, non-institutionalized population.
- Baseline for this measure was established using existing NHANES biomonitoring data. During each fiscal year, performance will then be evaluated by comparing subsequent NHANES biomonitoring data with the established baseline.
- This measure supports the long-term goal of reducing the risk and ensuring the safety of chemicals and preventing pollution at the source by enabling EPA to better assess progress in reducing exposure to targeted chemicals, as reflected in concentration levels among the general population and key subpopulations.
- Analytes for organophosphate pesticides were selected for this measure because EPA anticipates recent registration activity will have a direct effect on reducing exposure in the general population. For more information on the pesticides, visit <http://www.epa.gov/pesticides/about/types.htm>

2a. Original Data Source:

NHANES: CDC's NHANES survey program began in the early 1960s as a periodic study and continues as an annual survey (<http://www.cdc.gov/nchs/NHANES.htm>) The survey examines a nationally representative sample of approximately 5,000 men, women, and children each year located across the U.S. CDC's National Center for Health Statistics (NCHS) is responsible for the conduct of the survey and the release of the data to the public through their website at: http://www.cdc.gov/nchs/nhanes/nhanes_questionnaires.htm NHANES is designed to collect data on the health and nutritional status of the U.S. population. NHANES collects information about a wide range of health-related behaviors, performs physical examinations, and collects samples for laboratory tests. NHANES is unique in its ability to examine public health issues in the U.S. population, such as risk factors for cardiovascular disease. Beginning in 1999, NHANES became a continuous survey, sampling the U.S. population annually and releasing the data in 2-year cycles.

2b. Source Data Collection:

Collection Methods: The sampling plan follows a complex, stratified, multistage, probability-cluster design to select a representative sample of the civilian, noninstitutionalized population in the United States based on

age, gender, and race/ethnicity. The NHANES survey contains detailed interview questions covering areas related to demographic, socio-economic, dietary, and health-related subjects. It also includes an extensive medical and dental examination of participants, physiological measurements, and laboratory tests. NHANES is unique in that it links laboratory-derived biological markers (e.g. blood, urine etc.) to questionnaire responses and results of physical exams. Analytical guidelines issued by NCHS provide guidance on how many years of data should be combined for an analysis. NHANES measures blood levels in the same units (i.e., ug/dL) and at standard detection limits.

Environmental chemicals are measured in blood, serum, or urine specimens collected as part of the examination component of NHANES. The participant ages for which a chemical was measured varied by chemical group. Most of the environmental chemicals were measured in randomly selected subsamples within specific age groups. Randomization of subsample selection is built into the NHANES design before sample collection begins. Different random subsamples include different participants. This subsampling was needed to ensure an adequate quantity of sample for analysis and to accommodate the throughput of the mass spectrometry analytical methods.

Geographical Extent: NHANES is designed to be a representative sample of the civilian, noninstitutionalized population in the United States based on age, gender, and race/ethnicity.

Quality Procedures: NCHS assures the security of its statistical and analytic information products through the enforcement of rigorous controls that protect against unauthorized access to the data, revision or corruption of the data, or unauthorized use of the data. Some of the major controls used at NCHS include access control, user authentication, encryption, access monitoring, provision of unalterable electronic content, and audit trails. All NCHS statistical and analytic information products undergo a formal clearance process before dissemination. Publications and reports, whether in electronic or paper form, are reviewed by a designated official within the author's office or division and by the NCHS Associate Director for Science (ADS). These reviews cover the clarity of descriptive text, the appropriateness of the methodology, the soundness of the analysis, the adherence to confidentiality and disclosure avoidance restrictions, the readability of tabular and graphic presentations of data, etc. Finally, all products undergo editorial review (e.g., formatting, proofreading, spell checks, proper punctuation, etc.). In addition, all public-use tapes are reviewed for accuracy and appropriate confidentiality protections. Oral presentations are subject to appropriate supervisory review.

NCHS statistical and analytic information products are derived using generally acceptable statistical practices and methodologies, which are well documented and available to the public. These procedures enable responsible statisticians and analysts outside of NCHS to replicate the NCHS statistical methods and obtain results consistent with those obtained by NCHS.

References:

CDC (2009a). National Health and Nutrition Examination Survey, 2007-2008 Overview. Available at: http://www.cdc.gov/nchs/data/nhanes/nhanes_07_08/overviewbrochure_0708.pdf

CDC (2009b) Fourth National Report on Human Exposure to Environmental Chemicals. Available at: <http://www.cdc.gov/exposurereport/pdf/FourthReport.pdf>

CDC (2009c). NCHS Guidelines for Ensuring the Quality of Information Disseminated to the Public. Available at: < <http://www.cdc.gov/nchs/about/policy/quality.htm>>

2c. Source Data Reporting:

Data Submission Instrument: CDC's National Center for Health Statistics (NCHS) is responsible for the release of the data to the public through their website at: http://www.cdc.gov/nchs/nhanes/nhanes_questionnaires.htm

The data utilized for the performance measure is released as part of the NHANES laboratory files. The naming convention and organization of the laboratory data files may change between survey cycles, so NHANES laboratory documentation should be reviewed to identify the correct data fields for analysis. In 2001-2002, the SAS Transport File containing the targeted pesticide data ("I26PP_B.xpt") can be identified through the "2001-2002 Laboratory Variable List" at: http://www.cdc.gov/nchs/nhanes/nhanes2001-2002/varlab_b.htm

In recent years, CDC has published a national exposure report based on the data from the NHANES. CDC has scheduled release of data, and scheduled release of national exposure reports through NHANES. The most current update of the National Report on Human Exposure to Environmental Chemicals was released February 2012 and is available at the Web site <http://www.cdc.gov/exposurereport/> Performance results will be updated as new peer reviewed NHANES data are published either in the official CDC report on human exposure to environmental chemicals or other journal articles as the data becomes available.

3a. Relevant Information Systems:

CDC is responsible for all NHANES data collection and reporting. As such, no EPA information systems are involved in the process of collecting, calculating and/or reporting the results for this measure. In order to calculate the results for the performance measure, EPA accesses and downloads the NHANES data files that are publically available through CDC/NCSH at: http://www.cdc.gov/nchs/nhanes/nhanes_questionnaires.htm The NHANES data files are downloaded as SAS Transport files and uploaded into SAS for statistical analysis.

System Description: Not Applicable

Source/Transformed Data: Not Applicable

Information System Integrity Standards: Not Applicable

3b. Data Quality Procedures:

NCHS assures the security of its statistical and analytic information products through the enforcement of rigorous controls that protect against unauthorized access to the data, revision or corruption of the data, or unauthorized use of the data. Some of the major controls used at NCHS include access control, user authentication, encryption, access monitoring, provision of unalterable electronic content, and audit trails.

All NCHS statistical and analytic information products undergo a formal clearance process before dissemination. Publications and reports, whether in electronic or paper form, are reviewed by a designated official within the author's office or division and by the NCHS Associate Director for Science (ADS). These reviews cover the clarity of descriptive text, the appropriateness of the methodology, the soundness of the analysis, the adherence to confidentiality and disclosure avoidance restrictions, the readability of tabular and graphic presentations of data, etc. NCHS statistical and analytic information products are derived using generally acceptable statistical practices and methodologies, which are well documented and available to the public. These procedures enable responsible statisticians and analysts outside of NCHS to replicate the NCHS statistical methods and obtain results consistent with those obtained by NCHS.

References:

CDC (2009c). NCHS Guidelines for Ensuring the Quality of Information Disseminated to the Public. Available at: <<http://www.cdc.gov/nchs/about/policy/quality.htm>>

3c. Data Oversight:

Appointed measures representative(s) for the Health Effects Division, in conjunction with the Division Director and Associate Division Director, to look over, review, analyze the data and report it to the OPP measures representative for reporting.

3d. Calculation Methodology:

Decision Rules for Selecting Data: The performance measure uses NHANES pesticide biomonitoring data published by CDC/NCHS. No pesticide biomonitoring data will be excluded from the performance measure calculations.

Definitions of Variables: Key data fields related to the NHANES survey design and targeted pesticide analytes are defined below:

- WTSP2YR Pesticides Subsample 2 year Mec Weight
- SEQN Respondent sequence number
- URXCPM 3,5,6-trichloropyridinol (ug/L) result
- URXOP1 Dimethylphosphate (ug/L) result
- URXOP2 Diethylphosphate (ug/L) result
- URXOP3 Dimethylthiophosphate (ug/L) result
- URXOP4 Diethylthiophosphate (ug/L) result
- URXOP5 Dimethyldithiophosphate (ug/L) result
- URXOP6 Diethyldithiophosphate (ug/L) result

Explanation of the Calculations:

Annual performance will be evaluated using the equation below:

Where:

Baseline95th = 95th percentile urinary concentration during the baseline period.

Performance95th = 95th percentile urinary concentration during performance period.

Explanation of Assumptions: The performance measure is based on NHANES pesticide biomonitoring data published by CDC/NCHS. The data is used without making any additional transformations, so no assumption will be made to transform the data.

Timeframe of Result: NHANES is a continuous survey, sampling the U.S. population annually and releasing the data in 2-year cycles. As such, the span of time represented by the results represents a 2-year timeframe.

Unit of Measure: micrograms per liter (ug/L), at standard detection limits

Documentation of Methodological Changes: Not applicable.

4a. Oversight and Timing of Final Results Reporting:

Branch Chief, Financial Management and Planning Branch.

Measure is reported on a biennially

4b. Data Limitations/Qualifications:

NHANES provides the most comprehensive biomonitoring data on the U.S. population. While it provides most comprehensive data for evaluating national-level trends, there are some limitations that should be considered when evaluating the biomonitoring results. With regard to the general interpretation of biomonitoring data, CDC highlights that there are a number of factors that can influence the concentration of chemicals in urine. Some examples described by CDC include :

- Chemical half-life (i.e., persistence of chemical in blood or urine);
- Route of exposure;
- Genetic susceptibility;
- Demographic characteristics (e.g., age or gender);
- Health status and nutrition (e.g., reduced kidney function, iron deficiency);
- Lifestyle or behavioral factors (e.g., smoker versus non-smoker, or occupation); and
- Geography (e.g., proximity to environmental chemical sources, or climate).

In addition to these interpretive considerations, an important design limitation of the NHANES survey is that data is not publically available to evaluate seasonal and geographic trends. While this seasonal and geographic data is not available, EPA believes the data are suitable for the performance measure because EPA is interested in evaluating national-level trends between years.

References:

CDC (2010). Important Analytic Considerations and Limitations Regarding Environmental Chemical Data Analyses. Available at: <http://www.cdc.gov/nchs/tutorials/environmental/critical_issues/limitations/index.htm>

DATA LAG: Data lags may prevent performance results from being determined for every reporting year. Performance results will be updated as NHANES data are published either in the official CDC report on human exposure to environmental chemicals or other journal articles or as the data becomes available. There can be a substantial lag between CDC sampling and publication of data. For instance, in 2012, the most recently available data were from the sampling period of 2007-2008.

Methodological Changes: Not Applicable

4c. Third-Party Audits:

In 2009, the Board of Scientific Counselors (BSC) of NCHS commissioned a panel to review the NHANES as part of an ongoing program review process and to report its findings to the BSC (Available at: www.cdc.gov/nchs/data/bsc/NHANESReviewPanelReportrapril09.pdf) The Panel concluded that NHANES simply must continue, and in a form that will fully sustain its historical importance as a key source of health information. With regard to the biomonitoring data that is the focus of EPA's performance measure, BSC did not make any specific recommendations that should impact the the methodology(ies), model(s), data, and

information system(s) used to measure/collect/report performance. BSC emphasized the importance of the biomonitoring component of NHANES, stating:

Environmental monitoring is another major responsibility folded into the on-going NHANES. The survey's biomonitoring component documents exposure to environmental toxicants by direct measure of chemicals in blood or other biological specimens from individuals. The collection of blood and urine specimens in NHANES provides a unique opportunity for monitoring environmental exposure in the U.S. population....

Measure Code: 264 - Pounds of hazardous materials reduced through pollution prevention.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

2 - Promote Pollution Prevention

Sub-Objective Number and Title:

1 - Promote Pollution Prevention

Strategic Target Code and Title:

1 - By 2018, reduce 17 billion pounds of hazardous materials cumulatively through pollution prevention

Managing Office:

Office of Pollution Prevention and Toxics

1a. Performance Measure Term Definitions:

Pounds of Hazardous Materials reduced: A measure or reductions in the generation of hazardous releases to air, water and land and reductions in the use or inefficient use of hazardous materials by P2 Program participants.

P2 Programs related to this measure include:

Environmentally Preferable Purchasing (EPP) uses the federal government's buying power to stimulate market demand for and supply of greener products and services. The Electronic Product Environmental Assessment Tool (EPEAT) facilitates identification and procurement of greener electronic products by institutional purchasers around the globe.

Green Suppliers Network (GSN) and Economy, Energy, and the Environment (E3) are related programs:

- Green Suppliers Network is a coordinated effort of two federal agencies to help large manufacturers engage their small and medium-sized suppliers in undergoing low-cost technical reviews to improve their processes and minimize their wastes.
- Economy, Energy, and the Environment is a coordinated federal and local technical assistance initiative to help manufacturers become more sustainable. More federal agencies contribute to E3 technical assessments than to GSN assessments. The agencies provide technical production-process assessments and training to help manufacturers increase the energy efficiency and sustainability of their manufacturing processes, and reduce their environmental wastes, carbon emissions, and business costs.

Green Chemistry (GC): The Green Chemistry Program promotes the research, development, and implementation of technologies that reduce or eliminate the use or generation of hazardous substances. Through annual recognition, the Presidential Green Chemistry Challenge (PGCC) awards demonstrates the human health and environmental benefits and market competitiveness that green chemistry technologies offer.

Technical Assistance – The P2 Program conducts general P2 technical assistance mostly through grants and some through direct Regional work. The two grant programs are P2 Grants to States and Tribes and Source Reduction Assistance Grants. States and Tribes are eligible for both kinds; localities, non-profits, universities and community groups are eligible only for Source Reduction Assistance Grants. The grants help small and medium businesses adopt sustainable P2 technologies and practices. Grantees provide technical assistance

and implement award programs to achieve results. In direct work, Regions are also providing P2 technical assistance to help entities achieve results.

2a. Original Data Source:

EPP: The entities providing the data that EPA uses for performance reporting are the Green Electronics Council and the Information Technology Industry Council (ITI). ITI provides data on the number of EPEAT registered products shipped globally during the reporting period to the Green Electronics Council. The Green Electronics Council then provides this data to EPA. The data provided is tabulated by product category, by sales in each country, and by purchases made by the U.S. Federal Government.

GSN/E3: The entities providing the data that EPA uses are US Department of Commerce (DOC) for aggregated industrial process data, and industrial facilities for facility-level utility and materials-management data, and the US Department of Energy (DOE) Industrial Assessment Center (IAC) database for energy efficiency data.

Green Chemistry (GC): Participants in the PGCC awards self-nominate and are the original data source. The awards are public, confidential business information for nominated technologies is not accepted.

Technical Assistance: The entities providing the data that EPA uses are facilities that received technical assistance from grantees or Regions directly and facilities that applied to a grantee-State to receive a P2 environmental award. Facilities provide the grantees or the Region directly with data taken from their facility utility bills and their facility materials-management records.

2b. Source Data Collection:

EPP: The Information Technology Industry Council (ITI) collects the source data from their member companies. ITI tabulates manufacturer records to compile annual worldwide sales. Manufacturers of EPEAT-registered products sign a Memorandum of Understanding with the Green Electronics Council in which they warrant the accuracy of the data they provide. The data provided is tabulated by product category, by sales in each country, and by purchases made by the U.S. Federal Government.

GSN/E3: DOC grantees, DOE grantees, and EPA grantees collect the source data. Manufacturing Extension Partnership Centers (MEPs) are grantees of DOC's National Institute for Standards and Technology (NIST), and they collect environmental savings and energy-performance data on products and practices they recommend to businesses. MEPs record potential environmental and energy savings associated with each set of MEP E3 business-review recommendations, plus any utility-based data in facilities responses to voluntary MEP questionnaires on implemented E3 projects, and then DOC aggregates all data before sharing data with EPA. The Industrial Assessment Centers are grantees of DOE, and provide data to DOE via the Industrial Assessment Center database housed at Rutgers University. DOE grantees and EPA grantees likewise collect utility and any materials-management data on energy savings from facilities that implemented their respective grantees' E3 recommendations. DOC, DOE, and EPA grantees all send data to their grantor agencies, and the agencies input the data into their respective databases. All grantees follow their respective agencies' QA/QC requirements. Federal agencies participating in E3 have developed a second complementary database for their collective use, which is maintained by an EPA contractor.

Green Chemistry: PGCC awards nominations are provided to EPA. EPA prescreens the nominations, and then provides those that meet scope and other "yes/no" criteria (as opposed to the ranking criteria) to an external peer review expert panel organized by the American Chemical Society for judging. Suggested winners are

returned to EPA for final verification and validation. Information about the prescreen and judging criteria is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: EPA grantees (or Regions if they have supplied direct technical assistance) collect the utility bill data and relevant materials-management records from facilities who have completed project implementation or who have applied for State environmental awards. EPA guidelines, including those on itemizing facility-level implementation steps and results, and QAPP requirements as appropriate are applicable in collecting data. Grantees sometimes transform utility and materials-management records into the appropriate environmental metric; sometimes the EPA P2 Regional Coordinator needs to transform the data. Grantees transforming the data must identify the methodological tool they used to make the transformation. The P2 Program provides grantees P2 Calculators for their voluntary use, the same tools the P2 Regional Coordinators use, and they are available at <http://www.epa.gov/p2/pubs/resources/measurement.html>

2c. Source Data Reporting:

Data Submission Instrument

EPP: The Information Technology Industry council (ITI) submits data to the non-profit Green Electronics Council, which then submits the data to EPA. The reporting data provided is from the previous year of sale.

GSN/E3: NIST/DOC submits data to EPA in a database that is maintained by an EPA contractor. DOE IAC data is also inputted into this database. State grantees submit data electronically or by mail to EPA in grant reports.

GC: PGCC awards nominations are provided to EPA as an electronic report. Information about the PGCC nomination submission format is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: Grantees submit facility-level data (or aggregated data and extenuating circumstances for doing so) to EPA electronically or by mail in grant reports. Regions keep track of their own direct results for entry into the system described below.

Data Entry Mechanism

EPP: ITI sends the data to the Green Electronics Council, which then sends it to EPA. EPA program staff enters the data into EPA's Electronics Environmental Benefits Calculator (EEBC) to transform them into environmental and economic benefits achieved as the result of the procurement of these products.

GSN/E3: NIST and EPA program staff input data into a Salesforce database maintained by the EPA. DOE State grantees submit data to DOE in the IAC database, and this data is populated into the EPA Salesforce database. Similarly, EPA grantees submit data to the EPA Grants Plus database, which is then populated in the EPA Salesforce database.

GC: Benefits data in PGCC awards nominations provided to EPA are entered into an internal spreadsheet.

Technical Assistance: Regions enter grantee-reported facility-level data (or aggregated data under extenuating circumstances) and facility-level Regional direct data into P2 GrantsPlus, the reporting database for Regional P2 programs. P2 GrantsPlus, is the P2 program database for reporting results from Regional offices. Regions

also enter measurement methodology data and any rationales for reporting aggregated data into P2 GrantsPlus.

Frequency of Data Transmission to EPA

EPP: annually.

GSN/E3: quarterly

GC: annually

Technical Assistance: semi-annually.

Timing of Data Transmission to EPA

EPP: The Green Electronics Council must submit data for the prior fiscal year to EPA by September 30th.

GSN/E3: quarterly

GC: End of Fiscal Year

Technical Assistance: Grantees must submit data if possible by the close of the fiscal year, and any amendments for the prior fiscal year by March 31st.

3a. Relevant Information Systems:

EPP: National program staff uses EPA's expert reviewed Electronics Environmental Benefits Calculator (EEBC) as its data transformation system. The EEBC calculates environmental benefits (savings or reductions) of an EPEAT registered product, compared to a conventional baseline product. The EEBC only calculates environmental benefits for performance criteria in standards included in the EPEAT system, for product categories covered by EPEAT. All assumptions underlying calculation methods in the EEBC were reviewed by experts in the field, and are re-reviewed for each version upgrade. Information on the EEBC can be found at <http://www2.epa.gov/fec/publications-and-resources-calculator>. The link to the EEBC is found at http://www2.epa.gov/sites/production/files/2013-06/eebc_v3_1.xlsm

GSN/E3: Federal agencies participating in E3 have developed an E3 Salesforce database for their collective use, which is maintained by an EPA contractor. Regional project officers issuing E3 grants use P2 GrantsPlus as their information system; see the description of that system under Technical Assistance below. EPA's Information System Integrity Standards are not applicable to DOC and DOE databases. EPA's P2 GrantsPlus and E3 Salesforce database meets EPA's IT security policy.

GC: PGCC Internal spreadsheet that holds information on nominations, winners, and environmental benefits.

Technical Assistance: Regional project officers use P2 GrantsPlus as the information system to store source data. This system contains grant-specific and direct-project data that have not been normalized. The system requires entries of facility-level data, any rationales for aggregated data and measurement methodology data, and automatically generates date-stamp records of every entry in the system. It also allows users to maintain a log of comments associated with data entries and to generate reports. P2 GrantsPlus satisfies EPA's IT security policy. An extensive description of the system will be available online before Spring 2015.

3b. Data Quality Procedures:

OPPT: All OPPT programs operate under the Information Quality Guidelines as found at <https://www.epa.gov/quality/epa-information-quality-guidelines> as well as under the Pollution Prevention and Toxics Quality Management Plan (QMP) ("Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances," November 2008), and the programs will ensure

that those standards and procedures are applied to this effort. The Quality Management Plan is for internal use only.

EPP: EPEAT manufacturers sign a Memorandum of Understanding with the Green Electronics Council (GEC) in which they warrant accuracy of the data they provide. EPA/EPEAT Program Managers review the data and engage with GEC to verify accuracy before entering the data into the EEBC.

GC: The GC program operates under the Information Quality Guidelines found at <https://www.epa.gov/quality/epa-information-quality-guidelines> as well as under the Pollution Prevention and Toxics Quality Management Plan (QMP) (“Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances,” November 2008), and the program will ensure that those standards and procedures are applied to this effort. The Quality Management Plan is for internal use only.

Quality assurance and control is conducted by the review of the nominations for the PGCC program, ensuring that award winners have fully met all required selection criteria and accurately reported environmental benefit results. EPA may follow up with nominees, as necessary, to obtain any additional data in support of verification that may be needed by EPA or the external American Chemical Society-organized expert peer review panel. Information about selection criteria is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: Regional project officers determine whether a grantee is generating source data and, if so, require a Quality Assurance Project Plan; otherwise they provide other data quality procedures. Grant Requests for Proposals notify applicants of the requirement to submit facility-level records or to explain why they cannot. Regional P2 Coordinators’ Measurement Guidance provides extensive data quality guidance for grant and direct work. The P2 GrantsPlus reporting database requires staged entries regarding measurement methodology, facility-level reporting, and actual quantified results to build records highly amenable to data quality review. Regional and national program staff before March 31 (after the preceding September 30 End-of-Year reporting). Finally, regional and national program staff periodically updates the Regional P2 Measurement Guidance as well (last update, beginning of FY 2013). The Measurement Guidance will be posted on our P2 Program website in coordination with the FY 2016/2017 National Program Managers Guidance.

3c. Data Oversight:

The Branch Chief of the Planning and Assessment Branch (PAB) in OPPT oversees source data reporting and information systems through periodic updates and discussions with the national program staff members and managers who monitor their own source data reporting. This oversight is also accomplished through written protocols developed by PAB and national program managers.

3d. Calculation Methodology:

EPP: The calculation methodology for EPEAT is in the national program’s Electronics Environmental Benefits Calculator (EEBC). EPA has changed the system to ease reporting. EPA is now reporting all life-cycle benefits of the product in the year of sale. All assumptions underlying calculation methods in the EEBC were reviewed by experts in the field, and are re-reviewed for each version upgrade. Information on the EEBC can be found at <http://www2.epa.gov/fec/publications-and-resources - calculator> The link to the EEBC is found at http://www2.epa.gov/sites/production/files/2013-06/eebc_v3_1.xlsm

GSN/E3: The national program uses project-completed facility data as the basis for reporting results. This data is generated by E3 grantees, who collect the actual environmental benefits results from utility and other data sources, highlighted in the Source Data Collection section of this document. EPA staff utilizes the E3 database to aggregate the actual environmental benefits data for external reporting purposes.

GC: When available, the Green Chemistry program sums the realized or actual quantitative environmental benefits reported from valid PGCC award nominations received. If necessary, the Green Chemistry program will convert units using the P2 Program calculators to the standardized metrics used for GPRA reporting purposes, for example, converting BTUs avoided into Metric Tons of CO₂ Equivalent avoided.

Technical Assistance: Regional project officers use the national program's P2 Calculators as their calculation methodology. The P2 Calculators are updated as needed with new information, the latest updates are posted on the Calculator website at <http://www.epa.gov/p2/pubs/resources/measurement.html>. Assumptions as well as justifications as to data sources are transparent and clearly identified in the tools. End users such as grantees, regions, states, academia, businesses and others have completed extensive training on the suite of P2 tools. Live webinar training is held twice a year, and training materials/tools can be downloaded at: <http://www.p2.org/general-resources/p2-data-calculators/>

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

EPP: EPEAT relies on:

- Manufacturers of EPEAT-registered products to submit data to the Information Industry Technology Council (ITI).
- ITI to aggregate data submitted to them by the individual EPEAT manufacturers.
- The Green Electronics Council to provide the data that ITI has submitted to them.

EPA does not have control of the timing of submission of this data. EPA is reporting the data from the previous year of sale. The results of the EEBC calculator are based on an average baseline product and on an average EPEAT registered product. This provides a conservative calculation methodology for performance results.

GSN/E3: To a degree, EPA assumes that partner facilities report actual data accurately to NIST Manufacturing Extension Partnership (NIST MEP) headquarters, that MEP and State technical assistance providers make accurate estimates of potential P2 results if projects are implemented, and that NIST MEP headquarters accurately aggregates the data before sharing them with EPA.

The program assumes that many partner facilities will choose not to submit actual P2 outcome data to maintain confidentiality and that facility partners will not accept NIST MEP headquarters sharing any non-aggregated potential or actual P2 data with EPA.

Facilities reviewed by NIST MEP and State technical assistance providers are often reluctant to have their individual facility opportunity assessments shared with EPA or to share proprietary information on quantitative benefits with NIST or EPA. MEP programs can also vary in the level of detail they report from the facility-level opportunity assessments (potential results) to MEP Headquarters, where data are aggregated and

then sent to EPA. To address these limitations, EPA has strengthened the Request for Proposals requirements for the grantee MEP centers eligible to perform GSN and E3 reviews.

GC: Because the PGCC awards are public, companies cannot submit confidential business information. As such, data provided can be qualitative rather than quantitative; qualitative data is not counted towards measures, so the data that is reported is conservative. Additionally, the PGCC award is not limited to those technologies in which significant environmental benefits have been actualized or realized, but benefits from those award winners with only potential or projected results are not counted to ensure that the program does not overestimate the benefits. Further, the PGCC results and benefits for a technology are only reported in the year of the award, capturing of environmental benefits results from the future implementation or expansion of the award winning technology is not conducted because of quality assurance and other limitations.

Technical Assistance: Regional grant results come in the year of reporting not the year of award, results that are reported by the P2 Program will include several years of results from grants.

4c. Third-Party Audits:

EPP: The Electronics Environmental Benefits Calculator (EEBC) underwent internal and external review during its development phases. It is also reviewed and beta-tested by external experts during each new phase of development.

GC: PGCC award nominations are reviewed by an external peer review expert panel organized by the American Chemical Society.

Technical Assistance: The P2 Calculators have been reviewed by third-parties.

Measure Code: 263 - Business, institutional and government costs reduced through pollution prevention.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

2 - Promote Pollution Prevention

Sub-Objective Number and Title:

1 - Promote Pollution Prevention

Strategic Target Code and Title:

4 - By 2018, save \$10 billion through pollution prevention improvements

Managing Office:

Office of Pollution Prevention and Toxics

1a. Performance Measure Term Definitions:

Dollars Saved: A measure of dollar savings achieved by P2 Program participants from implementing P2 practices that resulted in reductions of GHG, hazardous and water impacts.

P2 Programs related to this measure include:

Environmentally Preferable Purchasing (EPP) uses the federal government's buying power to stimulate market demand for and supply of greener products and services. The Electronic Product Environmental Assessment Tool (EPEAT) facilitates identification and procurement of greener electronic products by institutional purchasers around the globe.

Green Suppliers Network (GSN) and Economy, Energy, and the Environment (E3) are related programs:

- Green Suppliers Network is a coordinated effort of two federal agencies to help large manufacturers engage their small and medium-sized suppliers in undergoing low-cost technical reviews to improve their processes and minimize their wastes.
- Economy, Energy, and the Environment is a coordinated federal and local technical assistance initiative to help manufacturers become more sustainable. More federal agencies contribute to E3 technical assessments than to GSN assessments. The agencies provide technical production-process assessments and training to help manufacturers increase the energy efficiency and sustainability of their manufacturing processes, and reduce their environmental wastes, carbon emissions, and business costs.

Green Chemistry (GC): The Green Chemistry Program promotes the research, development, and implementation of technologies that reduce or eliminate the use or generation of hazardous substances. Through annual recognition, the Presidential Green Chemistry Challenge (PGCC) awards demonstrates the human health and environmental benefits and market competitiveness that green chemistry technologies offer.

Technical Assistance – The P2 Program conducts general P2 technical assistance mostly through grants and some through direct Regional work. The two grant programs are P2 Grants to States and Tribes and Source Reduction Assistance Grants. States and Tribes are eligible for both kinds; localities, non-profits, universities and community groups are eligible only for Source Reduction Assistance Grants. The grants help small and medium businesses adopt sustainable P2 technologies and practices. Grantees provide technical assistance

and implement award programs to achieve results. In direct work, Regions are also providing P2 technical assistance to help entities achieve results.

2a. Original Data Source:

EPP: The entities providing the data that EPA uses for performance reporting are the Green Electronics Council and the Information Technology Industry Council (ITI). ITI provides data on the number of EPEAT registered products shipped globally during the reporting period to the Green Electronics Council. The Green Electronics Council then provides this data to EPA. The data provided is tabulated by product category, by sales in each country, and by purchases made by the U.S. Federal Government.

GSN/E3: The entities providing the data that EPA uses are US Department of Commerce (DOC) for aggregated industrial process data, and industrial facilities for facility-level utility and materials-management data, and the US Department of Energy (DOE) Industrial Assessment Center (IAC) database for energy efficiency data.

Green Chemistry (GC): Participants in the PGCC awards self-nominate and are the original data source. The awards are public, confidential business information for nominated technologies is not accepted.

Technical Assistance: The entities providing the data that EPA uses are facilities that received technical assistance from grantees or Regions directly and facilities that applied to a grantee-State to receive a P2 environmental award. Facilities provide the grantees or the Region directly with data taken from their facility utility bills and their facility materials-management records.

2b. Source Data Collection:

EPP: The Information Technology Industry Council (ITI) collects the source data from their member companies. ITI tabulates manufacturer records to compile annual worldwide sales. Manufacturers of EPEAT-registered products sign a Memorandum of Understanding with the Green Electronics Council in which they warrant the accuracy of the data they provide. The data provided is tabulated by product category, by sales in each country, and by purchases made by the U.S. Federal Government.

GSN/E3: DOC grantees, DOE grantees, and EPA grantees collect the source data. Manufacturing Extension Partnership Centers (MEPs) are grantees of DOC's National Institute for Standards and Technology (NIST), and they collect environmental savings and energy-performance data on products and practices they recommend to businesses. MEPs record potential environmental and energy savings associated with each set of MEP E3 business-review recommendations, plus any utility-based data in facilities responses to voluntary MEP questionnaires on implemented E3 projects, and then DOC aggregates all data before sharing data with EPA. The Industrial Assessment Centers are grantees of DOE, and provide data to DOE via the Industrial Assessment Center database housed at Rutgers University. DOE grantees and EPA grantees likewise collect utility and any materials-management data on energy savings from facilities that implemented their respective grantees' E3 recommendations. DOC, DOE, and EPA grantees all send data to their grantor agencies, and the agencies input the data into their respective databases. All grantees follow their respective agencies' QA/QC requirements. Federal agencies participating in E3 have developed a second complementary database for their collective use, which is maintained by an EPA contractor.

Green Chemistry: PGCC awards nominations are provided to EPA. EPA prescreens the nominations, and then provides those that meet scope and other "yes/no" criteria (as opposed to the ranking criteria) to an external peer review expert panel organized by the American Chemical Society for judging. Suggested winners are

returned to EPA for final verification and validation. Information about the prescreen and judging criteria is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: EPA grantees (or Regions if they have supplied direct technical assistance) collect the utility bill data and relevant materials-management records from facilities who have completed project implementation or who have applied for State environmental awards. EPA guidelines, including those on itemizing facility-level implementation steps and results, and QAPP requirements as appropriate are applicable in collecting data. Grantees sometimes transform utility and materials-management records into the appropriate environmental metric; sometimes the EPA P2 Regional Coordinator needs to transform the data. Grantees transforming the data must identify the methodological tool they used to make the transformation. The P2 Program provides grantees P2 Calculators for their voluntary use, the same tools the P2 Regional Coordinators use, and they are available at <http://www.epa.gov/p2/pubs/resources/measurement.html>

2c. Source Data Reporting:

Data Submission Instrument

EPP: The Information Technology Industry council (ITI) submits data to the non-profit Green Electronics Council, which then submits the data to EPA. The reporting data provided is from the previous year of sale.

GSN/E3: NIST/DOC submits data to EPA in a database that is maintained by an EPA contractor. DOE IAC data is also inputted into this database. State grantees submit data electronically or by mail to EPA in grant reports.

GC: PGCC awards nominations are provided to EPA as an electronic report. Information about the PGCC nomination submission format is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: Grantees submit facility-level data (or aggregated data and extenuating circumstances for doing so) to EPA electronically or by mail in grant reports. Regions keep track of their own direct results for entry into the system described below.

Data Entry Mechanism

EPP: ITI sends the data to the Green Electronics Council, which then sends it to EPA. EPA program staff enters the data into EPA's Electronics Environmental Benefits Calculator (EEBC) to transform them into environmental and economic benefits achieved as the result of the procurement of these products.

GSN/E3: NIST and EPA program staff input data into a Salesforce database maintained by the EPA. DOE State grantees submit data to DOE in the IAC database, and this data is populated into the EPA Salesforce database. Similarly, EPA grantees submit data to the EPA Grants Plus database, which is then populated in the EPA Salesforce database.

GC: Benefits data in PGCC awards nominations provided to EPA are entered into an internal spreadsheet.

Technical Assistance: Regions enter grantee-reported facility-level data (or aggregated data under extenuating circumstances) and facility-level Regional direct data into P2 GrantsPlus, the reporting database for Regional P2 programs. P2 GrantsPlus, is the P2 program database for reporting results from Regional offices. Regions

also enter measurement methodology data and any rationales for reporting aggregated data into P2 GrantsPlus.

Frequency of Data Transmission to EPA

EPP: annually.

GSN/E3: quarterly

GC: annually

Technical Assistance: semi-annually.

Timing of Data Transmission to EPA

EPP: The Green Electronics Council must submit data for the prior fiscal year to EPA by September 30th.

GSN/E3: quarterly

GC: End of Fiscal Year

Technical Assistance: Grantees must submit data if possible by the close of the fiscal year, and any amendments for the prior fiscal year by March 31st.

3a. Relevant Information Systems:

EPP: National program staff uses EPA's expert reviewed Electronics Environmental Benefits Calculator (EEBC) as its data transformation system. The EEBC calculates environmental benefits (savings or reductions) of an EPEAT registered product, compared to a conventional baseline product. The EEBC only calculates environmental benefits for performance criteria in standards included in the EPEAT system, for product categories covered by EPEAT. All assumptions underlying calculation methods in the EEBC were reviewed by experts in the field, and are re-reviewed for each version upgrade. Information on the EEBC can be found at <http://www2.epa.gov/fec/publications-and-resources-calculator>. The link to the EEBC is found at http://www2.epa.gov/sites/production/files/2013-06/eebc_v3_1.xlsm

GSN/E3: Federal agencies participating in E3 have developed an E3 Salesforce database for their collective use, which is maintained by an EPA contractor. Regional project officers issuing E3 grants use P2 GrantsPlus as their information system; see the description of that system under Technical Assistance below. EPA's Information System Integrity Standards are not applicable to DOC and DOE databases. EPA's P2 GrantsPlus and E3 Salesforce database meets EPA's IT security policy.

GC: PGCC Internal spreadsheet that holds information on nominations, winners, and environmental benefits.

Technical Assistance: Regional project officers use P2 GrantsPlus as the information system to store source data. This system contains grant-specific and direct-project data that have not been normalized. The system requires entries of facility-level data, any rationales for aggregated data and measurement methodology data, and automatically generates date-stamp records of every entry in the system. It also allows users to maintain a log of comments associated with data entries and to generate reports. P2 GrantsPlus satisfies EPA's IT security policy. An extensive description of the system will be available online before Spring 2015.

3b. Data Quality Procedures:

OPPT: All OPPT programs operate under the Information Quality Guidelines as found at <https://www.epa.gov/quality/epa-information-quality-guidelines> as well as under the Pollution Prevention and Toxics Quality Management Plan (QMP) ("Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances," November 2008), and the programs will ensure

that those standards and procedures are applied to this effort. The Quality Management Plan is for internal use only.

EPP: EPEAT manufacturers sign a Memorandum of Understanding with the Green Electronics Council (GEC) in which they warrant accuracy of the data they provide. EPA/EPEAT Program Managers review the data and engage with GEC to verify accuracy before entering the data into the EEBC.

GC: The GC program operates under the Information Quality Guidelines found at <https://www.epa.gov/quality/epa-information-quality-guidelines> as well as under the Pollution Prevention and Toxics Quality Management Plan (QMP) (“Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances,” November 2008), and the program will ensure that those standards and procedures are applied to this effort. The Quality Management Plan is for internal use only.

Quality assurance and control is conducted by the review of the nominations for the PGCC program, ensuring that award winners have fully met all required selection criteria and accurately reported environmental benefit results. EPA may follow up with nominees, as necessary, to obtain any additional data in support of verification that may be needed by EPA or the external American Chemical Society-organized expert peer review panel. Information about selection criteria is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: Regional project officers determine whether a grantee is generating source data and, if so, require a Quality Assurance Project Plan; otherwise they provide other data quality procedures. Grant Requests for Proposals notify applicants of the requirement to submit facility-level records or to explain why they cannot. Regional P2 Coordinators’ Measurement Guidance provides extensive data quality guidance for grant and direct work. The P2 GrantsPlus reporting database requires staged entries regarding measurement methodology, facility-level reporting, and actual quantified results to build records highly amenable to data quality review. Regional and national program staff before March 31 (after the preceding September 30 End-of-Year reporting). Finally, regional and national program staff periodically updates the Regional P2 Measurement Guidance as well (last update, beginning of FY 2013). The Measurement Guidance will be posted on our P2 Program website in coordination with the FY 2016/2017 National Program Mangers Guidance.

3c. Data Oversight:

The Branch Chief of the Planning and Assessment Branch (PAB) in OPPT oversees source data reporting and information systems through periodic updates and discussions with the national program staff members and managers who monitor their own source data reporting. This oversight is also accomplished through written protocols developed by PAB and national program managers.

3d. Calculation Methodology:

EPP: The calculation methodology for EPEAT is in the national program’s Electronics Environmental Benefits Calculator (EEBC). EPA has changed the system to ease reporting. EPA is now reporting all life-cycle benefits of the product in the year of sale. All assumptions underlying calculation methods in the EEBC were reviewed by experts in the field, and are re-reviewed for each version upgrade. Information on the EEBC can be found at <http://www2.epa.gov/fec/publications-and-resources - calculator> The link to the EEBC is found at http://www2.epa.gov/sites/production/files/2013-06/eebc_v3_1.xlsm

GSN/E3: The national program uses project-completed facility data as the basis for reporting results. This data is generated by E3 grantees, who collect the actual environmental benefits results from utility and other data sources, highlighted in the Source Data Collection section of this document. EPA staff utilizes the E3 database to aggregate the actual environmental benefits data for external reporting purposes.

GC: When available, the Green Chemistry program sums the realized or actual quantitative environmental benefits reported from valid PGCC award nominations received. If necessary, the Green Chemistry program will convert units using the P2 Program calculators to the standardized metrics used for GPRA reporting purposes, for example, converting BTUs avoided into Metric Tons of CO₂ Equivalent avoided.

Technical Assistance: Regional project officers use the national program's P2 Calculators as their calculation methodology. The P2 Calculators are updated as needed with new information, the latest updates are posted on the Calculator website at <http://www.epa.gov/p2/pubs/resources/measurement.html>. Assumptions as well as justifications as to data sources are transparent and clearly identified in the tools. End users such as grantees, regions, states, academia, businesses and others have completed extensive training on the suite of P2 tools. Live webinar training is held twice a year, and training materials/tools can be downloaded at: <http://www.p2.org/general-resources/p2-data-calculators/>

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

EPP: EPEAT relies on:

- Manufacturers of EPEAT-registered products to submit data to the Information Industry Technology Council (ITI).
- ITI to aggregate data submitted to them by the individual EPEAT manufacturers.
- The Green Electronics Council to provide the data that ITI has submitted to them.

EPA does not have control of the timing of submission of this data. EPA is reporting the data from the previous year of sale. The results of the EEBC calculator are based on an average baseline product and on an average EPEAT registered product. This provides a conservative calculation methodology for performance results.

GSN/E3: To a degree, EPA assumes that partner facilities report actual data accurately to NIST Manufacturing Extension Partnership (NIST MEP) headquarters, that MEP and State technical assistance providers make accurate estimates of potential P2 results if projects are implemented, and that NIST MEP headquarters accurately aggregates the data before sharing them with EPA.

The program assumes that many partner facilities will choose not to submit actual P2 outcome data to maintain confidentiality and that facility partners will not accept NIST MEP headquarters sharing any non-aggregated potential or actual P2 data with EPA.

Facilities reviewed by NIST MEP and State technical assistance providers are often reluctant to have their individual facility opportunity assessments shared with EPA or to share proprietary information on quantitative benefits with NIST or EPA. MEP programs can also vary in the level of detail they report from the facility-level opportunity assessments (potential results) to MEP Headquarters, where data are aggregated and

then sent to EPA. To address these limitations, EPA has strengthened the Request for Proposals requirements for the grantee MEP centers eligible to perform GSN and E3 reviews.

GC: Because the PGCC awards are public, companies cannot submit confidential business information. As such, data provided can be qualitative rather than quantitative; qualitative data is not counted towards measures, so the data that is reported is conservative. Additionally, the PGCC award is not limited to those technologies in which significant environmental benefits have been actualized or realized, but benefits from those award winners with only potential or projected results are not counted to ensure that the program does not overestimate the benefits. Further, the PGCC results and benefits for a technology are only reported in the year of the award, capturing of environmental benefits results from the future implementation or expansion of the award winning technology is not conducted because of quality assurance and other limitations.

Technical Assistance: Regional grant results come in the year of reporting not the year of award, results that are reported by the P2 Program will include several years of results from grants.

4c. Third-Party Audits:

EPP: The Electronics Environmental Benefits Calculator (EEBC) underwent internal and external review during its development phases. It is also reviewed and beta-tested by external experts during each new phase of development.

GC: PGCC award nominations are reviewed by an external peer review expert panel organized by the American Chemical Society.

Technical Assistance: The P2 Calculators have been reviewed by third-parties.

Measure Code: 262 - Gallons of water reduced through pollution prevention.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

2 - Promote Pollution Prevention

Sub-Objective Number and Title:

1 - Promote Pollution Prevention

Strategic Target Code and Title:

3 - By 2018, reduce water use by an 297 billion gallons cumulatively through pollution prevention

Managing Office:

Office of Pollution Prevention and Toxics

1a. Performance Measure Term Definitions:

Gallons of Water Conserved: A measure of water conserved by P2 program participants.

P2 Programs related to this measure include:

Environmentally Preferable Purchasing (EPP) uses the federal government's buying power to stimulate market demand for and supply of greener products and services. The Electronic Product Environmental Assessment Tool (EPEAT) facilitates identification and procurement of greener electronic products by institutional purchasers around the globe.

Green Suppliers Network (GSN) and Economy, Energy, and the Environment (E3) are related programs:

- Green Suppliers Network is a coordinated effort of two federal agencies to help large manufacturers engage their small and medium-sized suppliers in undergoing low-cost technical reviews to improve their processes and minimize their wastes.
- Economy, Energy, and the Environment is a coordinated federal and local technical assistance initiative to help manufacturers become more sustainable. More federal agencies contribute to E3 technical assessments than to GSN assessments. The agencies provide technical production-process assessments and training to help manufacturers increase the energy efficiency and sustainability of their manufacturing processes, and reduce their environmental wastes, carbon emissions, and business costs.

Green Chemistry (GC): The Green Chemistry Program promotes the research, development, and implementation of technologies that reduce or eliminate the use or generation of hazardous substances. Through annual recognition, the Presidential Green Chemistry Challenge (PGCC) awards demonstrates the human health and environmental benefits and market competitiveness that green chemistry technologies offer.

Technical Assistance – The P2 Program conducts general P2 technical assistance mostly through grants and some through direct Regional work. The two grant programs are P2 Grants to States and Tribes and Source Reduction Assistance Grants. States and Tribes are eligible for both kinds; localities, non-profits, universities and community groups are eligible only for Source Reduction Assistance Grants. The grants help small and medium businesses adopt sustainable P2 technologies and practices. Grantees provide technical assistance and implement award programs to achieve results. In direct work, Regions are also providing P2 technical assistance to help entities achieve results.

2a. Original Data Source:

EPP: The entities providing the data that EPA uses for performance reporting are the Green Electronics Council and the Information Technology Industry Council (ITI). ITI provides data on the number of EPEAT registered products shipped globally during the reporting period to the Green Electronics Council. The Green Electronics Council then provides this data to EPA. The data provided is tabulated by product category, by sales in each country, and by purchases made by the U.S. Federal Government.

GSN/E3: The entities providing the data that EPA uses are US Department of Commerce (DOC) for aggregated industrial process data, and industrial facilities for facility-level utility and materials-management data, and the US Department of Energy (DOE) Industrial Assessment Center (IAC) database for energy efficiency data.

Green Chemistry (GC): Participants in the PGCC awards self-nominate and are the original data source. The awards are public, confidential business information for nominated technologies is not accepted.

Technical Assistance: The entities providing the data that EPA uses are facilities that received technical assistance from grantees or Regions directly and facilities that applied to a grantee-State to receive a P2 environmental award. Facilities provide the grantees or the Region directly with data taken from their facility utility bills and their facility materials-management records.

2b. Source Data Collection:

EPP: The Information Technology Industry Council (ITI) collects the source data from their member companies. ITI tabulates manufacturer records to compile annual worldwide sales. Manufacturers of EPEAT-registered products sign a Memorandum of Understanding with the Green Electronics Council in which they warrant the accuracy of the data they provide. The data provided is tabulated by product category, by sales in each country, and by purchases made by the U.S. Federal Government.

GSN/E3: DOC grantees, DOE grantees, and EPA grantees collect the source data. Manufacturing Extension Partnership Centers (MEPs) are grantees of DOC's National Institute for Standards and Technology (NIST), and they collect environmental savings and energy-performance data on products and practices they recommend to businesses. MEPs record potential environmental and energy savings associated with each set of MEP E3 business-review recommendations, plus any utility-based data in facilities responses to voluntary MEP questionnaires on implemented E3 projects, and then DOC aggregates all data before sharing data with EPA. The Industrial Assessment Centers are grantees of DOE, and provide data to DOE via the Industrial Assessment Center database housed at Rutgers University. DOE grantees and EPA grantees likewise collect utility and any materials-management data on energy savings from facilities that implemented their respective grantees' E3 recommendations. DOC, DOE, and EPA grantees all send data to their grantor agencies, and the agencies input the data into their respective databases. All grantees follow their respective agencies' QA/QC requirements. Federal agencies participating in E3 have developed a second complementary database for their collective use, which is maintained by an EPA contractor.

Green Chemistry: PGCC awards nominations are provided to EPA. EPA prescreens the nominations, and then provides those that meet scope and other "yes/no" criteria (as opposed to the ranking criteria) to an external peer review expert panel organized by the American Chemical Society for judging. Suggested winners are returned to EPA for final verification and validation. Information about the prescreen and judging criteria is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: EPA grantees (or Regions if they have supplied direct technical assistance) collect the utility bill data and relevant materials-management records from facilities who have completed project implementation or who have applied for State environmental awards. EPA guidelines, including those on itemizing facility-level implementation steps and results, and QAPP requirements as appropriate are applicable in collecting data. Grantees sometimes transform utility and materials-management records into the appropriate environmental metric; sometimes the EPA P2 Regional Coordinator needs to transform the data. Grantees transforming the data must identify the methodological tool they used to make the transformation. The P2 Program provides grantees P2 Calculators for their voluntary use, the same tools the P2 Regional Coordinators use, and they are available at <http://www.epa.gov/p2/pubs/resources/measurement.html>

2c. Source Data Reporting:

Data Data Submission Instrument

EPP: The Information Technology Industry council (ITI) submits data to the non-profit Green Electronics Council, which then submits the data to EPA. The reporting data provided is from the previous year of sale.

GSN/E3: NIST/DOC submits data to EPA in a database that is maintained by an EPA contractor. DOE IAC data is also inputted into this database. State grantees submit data electronically or by mail to EPA in grant reports.

GC: PGCC awards nominations are provided to EPA as an electronic report. Information about the PGCC nomination submission format is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: Grantees submit facility-level data (or aggregated data and extenuating circumstances for doing so) to EPA electronically or by mail in grant reports. Regions keep track of their own direct results for entry into the system described below.

Data Entry Mechanism

EPP: ITI sends the data to the Green Electronics Council, which then sends it to EPA. EPA program staff enters the data into EPA's Electronics Environmental Benefits Calculator (EEBC) to transform them into environmental and economic benefits achieved as the result of the procurement of these products.

GSN/E3: NIST and EPA program staff input data into a Salesforce database maintained by the EPA. DOE State grantees submit data to DOE in the IAC database, and this data is populated into the EPA Salesforce database. Similarly, EPA grantees submit data to the EPA Grants Plus database, which is then populated in the EPA Salesforce database.

GC: Benefits data in PGCC awards nominations provided to EPA are entered into an internal spreadsheet.

Technical Assistance: Regions enter grantee-reported facility-level data (or aggregated data under extenuating circumstances) and facility-level Regional direct data into P2 GrantsPlus, the reporting database for Regional P2 programs. P2 GrantsPlus, is the P2 program database for reporting results from Regional offices. Regions also enter measurement methodology data and any rationales for reporting aggregated data into P2 GrantsPlus.

Frequency of Data Transmission to EPA

EPP: annually.

GSN/E3: quarterly

GC: annually

Technical Assistance: semi-annually.

Timing of Data Transmission to EPA

EPP: The Green Electronics Council must submit data for the prior fiscal year to EPA by September 30th.

GSN/E3: quarterly

GC: End of Fiscal Year

Technical Assistance: Grantees must submit data if possible by the close of the fiscal year, and any amendments for the prior fiscal year by March 31st.

3a. Relevant Information Systems:

EPP: National program staff uses EPA's expert reviewed Electronics Environmental Benefits Calculator (EEBC) as its data transformation system. The EEBC calculates environmental benefits (savings or reductions) of an EPEAT registered product, compared to a conventional baseline product. The EEBC only calculates environmental benefits for performance criteria in standards included in the EPEAT system, for product categories covered by EPEAT. All assumptions underlying calculation methods in the EEBC were reviewed by experts in the field, and are re-reviewed for each version upgrade. Information on the EEBC can be found at <http://www2.epa.gov/fec/publications-and-resources-calculator> The link to the EEBC is found at http://www2.epa.gov/sites/production/files/2013-06/eebc_v3_1.xlsm

GSN/E3: Federal agencies participating in E3 have developed an E3 Salesforce database for their collective use, which is maintained by an EPA contractor. Regional project officers issuing E3 grants use P2 GrantsPlus as their information system; see the description of that system under Technical Assistance below. EPA's Information System Integrity Standards are not applicable to DOC and DOE databases. EPA's P2 GrantsPlus and E3 Salesforce database meets EPA's IT security policy.

GC: PGCC Internal spreadsheet that holds information on nominations, winners, and environmental benefits.

Technical Assistance: Regional project officers use P2 GrantsPlus as the information system to store source data. This system contains grant-specific and direct-project data that have not been normalized. The system requires entries of facility-level data, any rationales for aggregated data and measurement methodology data, and automatically generates date-stamp records of every entry in the system. It also allows users to maintain a log of comments associated with data entries and to generate reports. P2 GrantsPlus satisfies EPA's IT security policy. An extensive description of the system will be available online before Spring 2015

3b. Data Quality Procedures:

OPPT: All OPPT programs operate under the Information Quality Guidelines as found at <https://www.epa.gov/quality/epa-information-quality-guidelines> as well as under the Pollution Prevention and Toxics Quality Management Plan (QMP) ("Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances," November 2008), and the programs will ensure that those standards and procedures are applied to this effort. The Quality Management Plan is for internal use only.

EPP: EPEAT manufacturers sign a Memorandum of Understanding with the Green Electronics Council (GEC) in which they warrant accuracy of the data they provide. EPA/EPEAT Program Managers review the data and engage with GEC to verify accuracy before entering the data into the EEBC.

GC: The GC program operates under the Information Quality Guidelines found at <https://www.epa.gov/quality/epa-information-quality-guidelines> as well as under the Pollution Prevention and Toxics Quality Management Plan (QMP) (“Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances,” November 2008), and the program will ensure that those standards and procedures are applied to this effort. The Quality Management Plan is for internal use only.

Quality assurance and control is conducted by the review of the nominations for the PGCC program, ensuring that award winners have fully met all required selection criteria and accurately reported environmental benefit results. EPA may follow up with nominees, as necessary, to obtain any additional data in support of verification that may be needed by EPA or the external American Chemical Society-organized expert peer review panel. Information about selection criteria is available at <http://www2.epa.gov/green-chemistry/information-about-presidential-green-chemistry-challenge>

Technical Assistance: Regional project officers determine whether a grantee is generating source data and, if so, require a Quality Assurance Project Plan; otherwise they provide other data quality procedures. Grant Requests for Proposals notify applicants of the requirement to submit facility-level records or to explain why they cannot. Regional P2 Coordinators’ Measurement Guidance provides extensive data quality guidance for grant and direct work. The P2 GrantsPlus reporting database requires staged entries regarding measurement methodology, facility-level reporting, and actual quantified results to build records highly amenable to data quality review. Regional and national program staff before March 31 (after the preceding September 30 End-of-Year reporting). Finally, regional and national program staff periodically updates the Regional P2 Measurement Guidance as well (last update, beginning of FY 2013). The Measurement Guidance will be posted on our P2 Program website in coordination with the FY 2016/2017 National Program Managers Guidance.

3c. Data Oversight:

The Branch Chief of the Planning and Assessment Branch (PAB) in OPPT oversees source data reporting and information systems through periodic updates and discussions with the national program staff members and managers who monitor their own source data reporting. This oversight is also accomplished through written protocols developed by PAB and national program managers.

3d. Calculation Methodology:

EPP: The calculation methodology for EPEAT is in the national program’s Electronics Environmental Benefits Calculator (EEBC). EPA has changed the system to ease reporting. EPA is now reporting all life-cycle benefits of the product in the year of sale. All assumptions underlying calculation methods in the EEBC were reviewed by experts in the field, and are re-reviewed for each version upgrade. Information on the EEBC can be found at <http://www2.epa.gov/fec/publications-and-resources-calculator> The link to the EEBC is found at http://www2.epa.gov/sites/production/files/2013-06/eebc_v3_1.xlsm

GSN/E3: The national program uses project-completed facility data as the basis for reporting results. This data is generated by E3 grantees, who collect the actual environmental benefits results from utility and other data

sources, highlighted in the Source Data Collection section of this document. EPA staff utilizes the E3 database to aggregate the actual environmental benefits data for external reporting purposes.

GC: When available, the Green Chemistry program sums the realized or actual quantitative environmental benefits reported from valid PGCC award nominations received. If necessary, the Green Chemistry program will convert units using the P2 Program calculators to the standardized metrics used for GPRA reporting purposes, for example, converting BTUs avoided into Metric Tons of CO₂ Equivalent avoided.

Technical Assistance: Regional project officers use the national program's P2 Calculators as their calculation methodology. The P2 Calculators are updated as needed with new information, the latest updates are posted on the Calculator website at <http://www.epa.gov/p2/pubs/resources/measurement.html>. Assumptions as well as justifications as to data sources are transparent and clearly identified in the tools. End users such as grantees, regions, states, academia, businesses and others have completed extensive training on the suite of P2 tools. Live webinar training is held twice a year, and training materials/tools can be downloaded at: <http://www.p2.org/general-resources/p2-data-calculators/>

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

EPP: EPEAT relies on:

- Manufacturers of EPEAT-registered products to submit data to the Information Industry Technology Council (ITI).
- ITI to aggregate data submitted to them by the individual EPEAT manufacturers.
- The Green Electronics Council to provide the data that ITI has submitted to them.

EPA does not have control of the timing of submission of this data. EPA is reporting the data from the previous year of sale. The results of the EEBC calculator are based on an average baseline product and on an average EPEAT registered product. This provides a conservative calculation methodology for performance results.

GSN/E3: To a degree, EPA assumes that partner facilities report actual data accurately to NIST Manufacturing Extension Partnership (NIST MEP) headquarters, that MEP and State technical assistance providers make accurate estimates of potential P2 results if projects are implemented, and that NIST MEP headquarters accurately aggregates the data before sharing them with EPA.

The program assumes that many partner facilities will choose not to submit actual P2 outcome data to maintain confidentiality and that facility partners will not accept NIST MEP headquarters sharing any non-aggregated potential or actual P2 data with EPA.

Facilities reviewed by NIST MEP and State technical assistance providers are often reluctant to have their individual facility opportunity assessments shared with EPA or to share proprietary information on quantitative benefits with NIST or EPA. MEP programs can also vary in the level of detail they report from the facility-level opportunity assessments (potential results) to MEP Headquarters, where data are aggregated and then sent to EPA. To address these limitations, EPA has strengthened the Request for Proposals requirements for the grantee MEP centers eligible to perform GSN and E3 reviews.

GC: Because the PGCC awards are public, companies cannot submit confidential business information. As such, data provided can be qualitative rather than quantitative; qualitative data is not counted towards measures, so the data that is reported is conservative. Additionally, the PGCC award is not limited to those technologies in which significant environmental benefits have been actualized or realized, but benefits from those award winners with only potential or projected results are not counted to ensure that the program does not overestimate the benefits. Further, the PGCC results and benefits for a technology are only reported in the year of the award, capturing of environmental benefits results from the future implementation or expansion of the award winning technology is not conducted because of quality assurance and other limitations.

Technical Assistance: Regional grant results come in the year of reporting not the year of award, results that are reported by the P2 Program will include several years of results from grants.

4c. Third-Party Audits:

EPP: The Electronics Environmental Benefits Calculator (EEBC) underwent internal and external review during its development phases. It is also reviewed and beta-tested by external experts during each new phase of development.

GC: PGCC award nominations are reviewed by an external peer review expert panel organized by the American Chemical Society.

Technical Assistance: The P2 Calculators have been reviewed by third-parties.

Measure Code: 10D - Percent difference in the geometric mean blood level in low-income children 1-5 years old as compared to the geometric mean for non-low income children 1-5 years old.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

3 - By 2018, reduce the disparity of concentration of chemicals in low income populations

Managing Office:

Office of Pollution Prevention and Toxics; National Program Chemicals Division

1a. Performance Measure Term Definitions:

Geometric mean blood lead level: This term refers to a type of average which indicates the central tendency or typical value of a set of numbers. As used in this measure, it represents the central tendency of reported blood lead levels (micrograms of lead per deciliter of blood, or $\mu\text{g}/\text{dL}$) of children ages 1-5.

Low-income children: As used in this measure, this term means children whose families are below the poverty income ratio (PIR) of 1.0. The poverty income ratio is a measure of income to the poverty threshold.

Non-low-income children: Children whose families have a PIR above 1.0

Background: This performance measure examines the disparities of blood lead levels in low-income children as compared to non-low-income children so that EPA can track progress toward its long-term goal of eliminating childhood lead poisoning in harder to reach vulnerable populations. EPA's Lead Risk Reduction program contributes to the goal of eliminating childhood lead poisoning by: (1) establishing standards governing lead hazard identification and abatement practices and maintaining a national pool of professionals trained and certified to implement those standards; (2) providing information to housing occupants so they can make informed decisions and take actions about lead hazards in their homes; and (3) establishing a national pool of certified firms and individuals who are trained to carry out renovation and repair and painting projects while adhering to the lead-safe work practice standards and to minimize lead dust hazards created in the course of such projects.

Recent data show significant progress in the continuing effort to eliminate childhood lead poisoning as a public health concern. However, results of recent studies indicate adverse health effects to children at low blood levels, below $10 \mu\text{g}/\text{dL}$. In response to this new information and the fact that approximately three-quarters of the nation's housing stock built before 1978 still contains some lead-based paint, the EPA is now targeting reductions in the number of children with blood lead levels of $5 \mu\text{g}/\text{dL}$ or higher, as reflected in this performance measure.

http://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf

http://www.cdc.gov/nceh/lead/acclpp/cdc_response_lead_exposure_recs.pdf

2a. Original Data Source:

The original data source is the Centers for Disease Control and Prevention's (CDC) National Health and Nutrition Examination Survey (NHANES), which is recognized as the primary database in the United States for

national blood lead statistics, http://www.cdc.gov/nchs/nhanes/about_nhanes.htm NHANES is a probability sample of the non-institutionalized population of the United States. The survey examines a nationally representative sample of approximately 5,000 men, women, and children each year located across the U.S.

2b. Source Data Collection:

Methods of data collection (by original data source): Data are obtained by analysis of blood and urine samples collected from survey participants. Health status is assessed by physical examination. Demographic and other survey data regarding health status, nutrition, and health-related behaviors are collected by personal interview, either by self-reporting or, for children under 16 and some others, as reported by an informant. Detailed interview questions cover areas related to demographic, socio-economic, dietary, and health-related questions. The survey also includes an extensive medical and dental examination of participants, physiological measurements, and laboratory tests. NHANES is unique in that it links laboratory-derived biological markers (e.g. blood, urine etc.) to questionnaire responses and results of physical exams.

Quality procedures followed (by original data source): According to the CDC, the process of preparing NHANES data sets for release is as rigorous as other aspects of the survey. After a CDC contractor performs basic data cleanup, the CDC NHANES staff ensure that the data are edited and cleaned prior to release. NHANES staff devotes at least a full year after the completion of data collection to careful data preparation. Additionally, NHANES data are published in a wide array of peer-reviewed professional journals.

Background documentation is available at the NHANES Web site at: <http://www.cdc.gov/nchs/nhanes.htm>

The analytical guidelines are available at the Web site:

http://www.cdc.gov/nchs/about/major/nhanes/nhanes2003-2004/analytical_guidelines.htm

Geographical extent of source data, if relevant: Data are collected to be representative of the U.S. population. The population data are extrapolated from sample data by the application of standard statistical procedures.

Spatial detail of source data, if relevant: NHANES sampling procedures provide nationally representative data.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: EPA monitors the periodic issuance of NHANES reports and other data releases to obtain the data relevant to this measure.

Timing and frequency of reporting: NHANES is a continuous survey and examines a nationally representative sample of about 5,000 persons each year. These persons are located in counties across the country, 15 of which are visited each year.

Files of raw data, containing measured blood lead levels in NHANES participants, are currently released to the public in two-year sets. CDC also periodically publishes reports containing summary statistics for lead and more than 200 other chemicals measured in NHANES, at www.cdc.gov/exposurereport

3a. Relevant Information Systems:

There are no EPA systems utilized in collecting data for this measure as the Agency is able to secure the necessary data directly from NHANES reports and data releases.

3b. Data Quality Procedures:

EPA does not have any procedures for quality assurance of the underlying data as this function is performed by the CDC itself. CDC has periodically reviewed and confirmed EPA's calculation of NHANES summary statistics from the raw data files. The Agency determines the performance result for this measure by performing standard mathematical operations on reported NHANES data to derive geometric mean blood lead levels by income group and to estimate the disparity in those levels between low-income and non-low-income children.

3c. Data Oversight:

Chief, Planning and Assessment Branch, Environmental Assistance Division, Office of Pollution Prevention and Toxics

3d. Calculation Methodology:

Decision rules for selecting data: Not applicable. EPA simply uses the geometric mean blood lead level values for low-income and non-low-income children that are generated from NHANES survey data, as described below. EPA however, limits the age of the child to under six, based on the most sensitive receptor age group noted in Section 401 of TSCA.

Definitions of variables: Key terms are defined in 1(a) above.

Explanation of the calculations: EPA performs standard mathematical operations on the published NHANES survey data. After calculating geometric mean blood lead levels by income group from the public use data files, EPA (1) determines the absolute disparity in blood lead level values between the two groups of children by subtracting the lower value from the higher; (2) averages the values for the two groups; and (3) divides the absolute disparity (i.e., the result of calculation (1)) by the average of the values (i.e., the result of calculation (2)), to express the disparity as a percent difference between the blood lead levels of the two groups.

Explanation of assumptions: Not applicable.

Identification of unit of measure: Percent difference in blood lead levels as determined by the methods described under "Explanation of the calculations" above.

Identification of timeframe of result: The performance result is computed from data released by the CDC in sets covering the particular time period over which sampling occurs. Thus, the timeframe that applies to the measured result is the same period for which the NHANES data are released. It is not a simple snapshot at a specific moment in time.

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year, but subject to a data lag due to the periodic nature of NHANES reporting.

4b. Data Limitations/Qualifications:

NHANES is a voluntary survey and selected persons may refuse to participate. In addition, the NHANES survey uses two steps, a questionnaire and a physical exam. There sometimes are different numbers of subjects in

the interview and examinations because some participants only complete one step of the survey. Participants may answer the questionnaire but not provide the more invasive blood sample. Special weighting techniques are used to adjust for non-response. NHANES is not designed to provide detailed estimates for populations that are highly exposed to lead.

4c. Third-Party Audits:

Report of the NHANES Review Panel to the NCHS Board of Scientific Counselors.

Cover letter can be accessed at: <http://www.cdc.gov/nchs/data/bsc/bscletterjune8.pdf>

Report can be accessed at: <http://www.cdc.gov/nchs/data/bsc/NHANESReviewPanelReportrapril09.pdf>

Measure Code: J11 - Reduction in moderate to severe exposure incidents associated with organophosphates and carbamate insecticides in the general population.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

1 - By 2018, reduce percent of moderate to severe incidents affecting workers exposed to insecticides

Managing Office:

Office of Pesticide Programs

1a. Performance Measure Term Definitions:

Reduce: The American Association of Poison Control Centers (AAPCC) maintains a national database of exposure incidents called the National Poison Data System (NPDS), which is a compilation of data collected by AAPCC's national network of 61 poison controls centers (PCCs). The incident data maintained in AAPCC's NPDS includes pesticide-related exposure incidents that may occur throughout the U.S. population, including all age groups and exposures occurring in both residential and occupational settings. Summary data on pesticide-related incident data is reported on an annual basis in AAPCC's Annual Report, including the number of incidents by age, reason for exposure, level of medical treatment, and medical severity.

The performance measure is based on the annual number of moderate to severe organophosphate and carbamate exposure incidents, based on aggregated data reported in AAPCC's Annual Report. The baseline for the performance measure will be based on AAPCC's 2008 Annual Report.

Moderate to severe exposure incidents: Calls to Poison Control Centers are managed primarily by AAPCC-certified Specialists in Poison Information (SPIs). SPIs are required to complete detailed electronic medical records for both exposure and informational calls. Standardized definitions have been established to ensure database uniformity.

For EPA's performance measure, the determination of medical outcome will be used as an exclusion category for selecting incidents. All organophosphate and carbamate incidents designated as "Moderate" or "Major" will be included in the performance measure calculations.

Organophosphate and carbamate insecticides: AAPCC's Annual Report reports the number of annual incidents stratified by chemical category. Particular organophosphate and carbamate categories that will be used to identify incidents include:

- "Organophosphate/ Carbamate/Chlorinated Hydrocarbon (Fixed- Combo)"
- "Carbamate Insecticides Alone"
- "Carbamate Insecticides in Combination with Other Insecticides"
- "Organophosphate Insecticides Alone"
- "Organophosphate Insecticides in Combination with Carbamate Insecticides"
- "Organophosphate Insecticides in Combination with Non-Carbamate Insecticides"

General population: The general population means that the performance measure will focus on all exposure incidents reported to AAPCC, regardless of age.

Background:

The reduction in poisoning incidents (i.e., moderate to severe exposure incidents) is expected to result from mitigation measures made during reregistration, from increased availability of lower risk alternative products resulting from the Agency's reduced risk registration process, and from the continued implementation of worker protection enforcement and training. Carbamates and organophosphates were selected for measurement because EPA anticipates recent registration activity will have a direct effect on reducing exposure in the general population. <http://www.epa.gov/pesticides/about/types.htm>

2a. Original Data Source:

NPDS is a comprehensive source of surveillance data on poisonings in the United States. NPDS is a uniform database of 61 PCCs, which are members of the American Association of Poison Control Centers (AAPCC), and are distributed throughout the United States. The database was established in 1985 and now includes information on more than 36 million exposure cases. In 2006, 61 PCCs received more than 4 million cases, including more than 2.4 million human exposure cases and 1.4 million informational calls. NPDS is a valuable public health resource and has been utilized to identify hazards, develop education priorities, guide clinical research, and identify chemical and bioterrorism incidents. As a result, NPDS has helped prompt product reformulations, recalls, and bans, support regulatory actions, and provide post-marketing surveillance of new drugs.

2b. Source Data Collection:

Individual PCC provides 24-hour emergency medical information on the diagnosis and treatment of poisonings. Calls are routed from a single, nationally-available phone number to the PCC generally in closest proximity to the caller. Since the service is provided on a national scale, even though PCCs may not be located in every state, aggregate PCC data is generally considered to be national in scope. The calls are managed primarily by AAPCC-certified Specialists in Poison Information (SPIs), who are typically pharmacists and nurses. SPIs are required to complete detailed electronic medical records for both exposure and informational calls. The electronic medical records include general demographic information, including age, gender, location of exposure, and more detailed information if an exposure may have occurred, including suspected substance, reason for exposure, route of exposure, management site, symptoms, and medical outcome. To assist SPIs and ensure database uniformity, many of the fields included in the electronic medical records use categories that have been defined by the AAPCC. For example, SPIs characterize the medical severity of possible exposures using the medical outcome field, which includes the AAPCC-defined categories "None," "Minor," "Moderate," "Major," or "Death." Additionally, the records may also contain several open fields, which allow SPIs to record additional information that may be relevant to the treatment and diagnosis of each case

2c. Source Data Reporting:

AAPCC produces the NPDS Annual Report giving statistics and information on all the poisonings in a calendar year. The NPDS Annual Report has three basic sections of information: general charts and statistics, a section of individual fatality listings, and a section listing demographic profile of single-substance exposure cases by generic category. The report is available to the general public to be downloaded for free and is usually made public the December following the close of a calendar year. This means the 2010 NPDS Annual Report was released around December of 2011. The report is typically published in the peer-reviewed journal Clinical Toxicology and is also publically available through AAPCC's website at: <http://www.aapcc.org/annual-reports/>.

3a. Relevant Information Systems:

EPA does not require specialized information systems for the purposes of collecting, calculating, and/or reporting the results for this measure. Rather, AAPCC maintains standardized reporting procedures and is responsible for aggregating the summary data that is available in AAPCC's annual report and utilized in the performance measure. Following the publication of AAPCC's annual report, EPA uses MS-Excel to further summarize aggregated data on moderate to severe exposure incidents associated with organophosphate and carbamate insecticides

System Description: Not Applicable

Source/Transformed Data: Not Applicable

Information System Integrity Standards: Not Applicable

3b. Data Quality Procedures:

AAPCC's annual report reflects only those cases that are not duplicates and classified by the regional PC as CLOSED. A case is closed when the PC has determined that no further follow-up/recommendations are required or no further information is available. Exposure cases are followed to obtain the most precise medical outcome possible. Depending on the case specifics, most calls are "closed" within the first hours of the initial call. Some calls regarding complex hospitalized patients or cases resulting in death may remain open for weeks or months while data continues to be collected. Follow-up calls provide a proven mechanism for monitoring the appropriateness of management recommendations, augmenting patient guidelines, and providing poison prevention education, enabling continual updates of case information as well as obtaining final/known medical outcome status to make the data collected as accurate and complete as possible.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Not applicable.

Source Data Reporting Oversight Responsibilities: Not applicable.

Information Systems Oversight Personnel: Appointed Measures Representative(s) for Health Effects Division, in conjunction with the Division Director and Associate Division Director

Information Systems Oversight Responsibilities: To review and analyze data and report it to the OPP measures representative for reporting .

3d. Calculation Methodology:

Decision Rules for Selecting Data: The performance measure uses summary data from AAPCC's Annual Report. Specific incident data that will be selected for the performance measure "Moderate" and "Major" medical outcome incidents that involved the following AAPCC-defined chemical include:

- "Organophosphate/ Carbamate/Chlorinated Hydrocarbon (Fixed- Combo)"
- "Carbamate Insecticides Alone"
- "Carbamate Insecticides in Combination with Other Insecticides"
- "Organophosphate Insecticides Alone"
- "Organophosphate Insecticides in Combination with Carbamate Insecticides"
- "Organophosphate Insecticides in Combination with Non-Carbamate Insecticides"

Definitions of Variables: For EPA's performance measure, the determination of medical outcome will be used as an exclusion category for selecting incidents. All organophosphate and carbamate incidents designated as "Moderate" or "Major" will be included in the performance measure calculations. The AAPCC definitions for these medical outcome categories are defined below:

- Moderate effect: The patient exhibited signs or symptoms as a result of the exposure that were more pronounced, more prolonged, or more systemic in nature than minor symptoms. Usually, some form of treatment is indicated. Symptoms were not life-threatening, and the patient had no residual disability or disfigurement (e.g., corneal abrasion, acid-base disturbance, high fever, disorientation, hypotension that is rapidly responsive to treatment, and isolated brief seizures that respond readily to treatment).
- Major effect: The patient exhibited signs or symptoms as a result of the exposure that were life-threatening or resulted in significant residual disability or disfigurement (e.g., repeated seizures or status epilepticus, respiratory compromise requiring intubation, ventricular tachycardia with hypotension, cardiac or respiratory arrest, esophageal stricture, and disseminated intravascular coagulation).

Explanation of Calculations:

Annual performance will be evaluated using the equation below:

Where:

Baselinecount = Total number of exposure incidents that meet the case definition during the baseline period.

Performancecount = Total number of exposure incidents that meet the case definition during performance period.

Explanation of Assumptions: The performance measure is based on summary data published in AAPCC's Annual Report. The data is used without making any additional transformations, so no assumption will be made to transform the data.

Unit of Measure: Incident Count

Timeframe of Result: AAPCC's Annual Report is usually made public the December following the close of a calendar year. This means the 2010 NPDS Annual Report was released around December of 2011. Each report provides a summary of the total number of exposure incidents during the complete calendar year.

Documentation of Methodological Changes: Not Applicable

4a. Oversight and Timing of Final Results Reporting:

Branch Chief, Financial Management and Planning Branch

Measure is reported on a biennial basis

4b. Data Limitations/Qualifications:

General Limitations/Qualifications:

- In general, PCC's provide medical management services through their response hotline and do not perform active surveillance of pesticide exposure incidents as part of NPDS. Due to this limitation, NPDS may be subject to reporting bias because of underreporting and differences in utilization rates among difference segments of the U.S. population.
- Because the incidents are self-reported, there is a potential bias in the data. However, there is no reason to believe that the bias will change from year to year.

Data Lag Length and Explanation: AAPCC's Annual Report is published December of every year and made publicly available. For example, 2010 Annual Report was available to EPA in December 2011 and the 2011 Annual Report is expected to be available to EPA in December 2012.

Methodological Changes: Not Applicable

4c. Third-Party Audits:

AAPCC is an independent organization and not subject to third-party audits by the U.S. Government. AAPCC'S Annual Report is publically available (<http://www.aapcc.org/annual-reports/>) and published in the peer-reviewed journal Clinical Toxicology.

Measure Code: E01 - Number of chemicals for which Endocrine Disruptor Screening Program (EDSP) decisions have been completed

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

5 - By 2018, complete Endocrine Disruptor Screening Program (EDSP) decisions for 100 percent of chemical

Managing Office:

Office of Science Coordination and Policy (OSC)

1a. Performance Measure Term Definitions:

Chemicals: By 2018, complete the screening of tens of thousands of pesticidal and non-pesticidal chemicals for estrogen or androgen bioactivity and exposure potential in humans or wildlife, primarily using HTS, QSAR, and computational models.

E01 EDSP Decisions

Endocrine Disruptor Screening Program Decisions: EPA will measure the number of chemicals for which Endocrine Disruptor Screening Program decisions have been completed. EDSP chemical decisions span a broad range, including determining potential bioactivity in the estrogen, androgen, or thyroid hormone pathways to determining whether endocrine-related testing is necessary. These decisions take into consideration Tier 1 screening battery data reviews, other scientifically-relevant information and/or the regulatory status of a chemical, as applicable. In addition, cancellations of all chemical manufacture or all pesticide chemical registered uses will be counted as regulatory decisions, as long as the cancellation is directly related to the EDSP decisions to prioritize tens of thousands of chemicals potentially relevant to the EDSP and FFDCA or SDWA. The inclusion of these types of decisions for this measure will be counted irrespective of whether it is aligned with the formal listing (e.g., list 1, 2, etc.) of that chemical for EDSP screening and the temporal decision of cancellation or cease of all manufacturing decision(s).

This measure is a count of completed decisions that include:

There are several regulatory actions that can remove a chemical from further consideration for endocrine-related (EDSP) testing. These include, but are not limited to, cancellation of pesticide registrations, ceased sales of the chemical for use in pesticide products, and discontinued manufacture and import of the chemical. These actions may be voluntary on the part of a Tier 1 test order recipient or the result of an EPA regulatory determination. In either case, when such regulatory decisions have been completed for a chemical that decision will be counted for this measure.

Chemicals are also counted for this measure when EPA makes a regulatory determination to remove or exempt a chemical from further consideration for endocrine-related (EDSP) testing. The decision to exempt a biologic substance or other substance under FFDCA Section 408 (p), section 4 from EDSP screening will be determined on a case-by-case basis, dependent on the weight of evidence supporting "...the determination that the substance is anticipated not to produce any effect in humans similar to an effect produced by a naturally-occurring estrogen."

Prioritizing tens of thousands of chemicals potentially relevant to the EDSP under FFDCA or SDWA.

Of the approximately 10,000 EDSP chemicals, including chemicals covered under the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA) and chemicals found in source of drinking water, covered under the Safe Drinking Water Act (SDWA), only 67 List 1 and 107 List 2 chemicals have been identified for screening to date.

Background:

EPA anticipates that an increasing proportion of the resources allocated to the EDSP will be used to develop innovative approaches for determining estrogen and androgen bioactivity based on a series of computational models integrating data from ToxCast high throughput screening (HTS) assays. As a result, a measure based on the number of chemicals for which EDSP decisions have been completed captures an important shift in resource utilization for the program.

In general, it is anticipated that the EDSP decisions will vary from chemical to chemical with respect to scientific complexity and timing. Therefore, careful analysis is needed to set performance targets each year. It is anticipated that annual performance targets will be established by considering, to the extent practicable, the number of chemicals for which EDSP test orders have been issued; the identity of the chemicals; the number of test order recipients; volume and type of available chemical-specific information; and available EPA resources to complete the extensive and rigorous data evaluations. Using computational tools to screen the EDSP universe allows for rapid identification of chemicals with the greatest potential for endocrine bioactivity and allows EPA to move away from lists of a few chemicals with relatively low or no potential endocrine activity. EPA aims to use these tools for prioritizing chemicals in the EDSP universe; potentially contributing to future weight of evidence screening levels; determining a chemical's potential bioactivity in estrogen receptor pathway; and substituting for specific endpoints in the EDSP Tier 1 screening battery.

2a. Original Data Source:

EPA staff, including scientists and regulatory managers from relevant program offices, make and document the decisions, as described in the Comprehensive Management Plan

(https://www.epa.gov/sites/production/files/2015-08/documents/edsp_comprehensive_management_plan_021414_f.pdf)

2b. Source Data Collection:

Source Data Collection Methods: The decisions take into consideration Tier 1 screening battery data, other scientifically-relevant information (OSRI), and/or the regulatory status of a chemical, as applicable.

EPA has developed guidance on how to conduct the Weight of Evidence (WoE) analysis leading to decisions about whether chemicals have the potential to interact with E, A, or T and whether further testing is required (For details, go to: <https://www.regulations.gov/document?D=EPA-HQ-OPPT-2010-0877-0021>)

EPA also developed and issued the agency's Endocrine Disruptor Screening Program Comprehensive Management Plan in June 2012 (<https://www.epa.gov/sites/production/files/2015-08/documents/edsp-comprehensive-management-plan-2012.pdf>) that describes the strategic guidance for how the agency planned/implemented the program over the past five years and includes key activities described and captured in the performance measures. The current Comprehensive Management Plan dated February 14, 2014 is available

at: https://www.epa.gov/sites/production/files/2015-08/documents/edsp_comprehensive_management_plan_021414_f.pdf

Date/time intervals covered by source data: FY 2013 to Present

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: EPA has created and is maintaining an online report for tracking the status of chemicals screened in the EDSP (For details, go to:

<https://www.epa.gov/endocrine-disruption/status-endocrine-disruptor-screening-program-tier-1-test-orders-list-1> The report includes for each chemical: the date a test order was issued; to whom the test order was issued; the due date for completing and submitting the data; the recipient's response to the order; and regulatory status (e.g., pesticide registration cancelled), as appropriate. In addition, the report will include information on EDSP decisions. Decisions will be counted once EPA announces them via updates to the EDSP website (<https://www.epa.gov/endocrine-disruption/status-endocrine-disruptor-screening-program-other-scientifically-relevant>)

Timing and frequency of reporting: Annual

3a. Relevant Information Systems:

EPA has created and is maintaining an on-line report for tracking the status of chemicals screened in the EDSP (For details, go to: <https://www.epa.gov/endocrine-disruption/status-endocrine-disruptor-screening-program-tier-1-test-orders-list-1>) The report includes for each chemical: the date a test order was issued, to whom the test order was issued, the due date for completing and submitting the data, the recipient's response to the order, and regulatory status (e.g., pesticide registration cancelled), as appropriate. In addition, the report will include information on EDSP decisions. EPA anticipates expanding this report to include chemicals other than pesticides.

Additional information:

Since the data will correspond to the on-line reporting on the status of chemicals in the EDSP, the public and other interested parties will be able to easily determine the accuracy of the reported results.

3b. Data Quality Procedures:

Data on the number of decisions generated for this measure will be reviewed for accuracy before submitting.

The number of chemicals for which EDSP Tier 1 decisions have been completed can be checked against supporting records documenting the decisions.

3c. Data Oversight:

Deputy Director, Office of Science Coordination and Policy

3d. Calculation Methodology:

Unit of analysis: Number of chemicals for which Endocrine Disruptor Screening Program (EDSP) Tier 1 decisions have been completed.

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

Decisions are based on EPA regulatory actions and data review once data are received, thus minimal error is anticipated with this estimate.

4c. Third-Party Audits:

1. Scientific Advisory Panel peer reviews; 2. Stakeholder input and public comment; 3. Society of Toxicologists; Society of Environmental Toxicology and Chemistry; 4. Endocrine Society; and the 5. Society for the Study of Reproduction, Assessing Chemical Risk: Societies Offer Expertise. Science, March 3, 2011 DOI: 10.1126/science.331.6021.1136-a (or go to: <http://www.sciencemag.org/content/331/6021/1136.1>)

Measure Code: C19 - Percentage of CBI claims for chemical identity in health and safety studies reviewed and challenged, as appropriate, as they are submitted.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

0 -

Managing Office:

Office of Pollution Prevention and Toxics

1a. Performance Measure Term Definitions:

CBI claims: Summarized, under TSCA, companies may claim that information they submit to EPA should be treated as “confidential business information” (CBI) and not be disclosed to the public except as authorized under the law. This performance measure addresses EPA’s review of “new” CBI claims for chemical name in health and safety studies. Such claims are sometimes made in TSCA section 5 and TSCA section 8 filings.

Health and safety studies: EPA has initiated a general practice of reviewing confidentiality claims for chemical identities in health and safety studies, and health and safety data from health and safety studies, submitted pursuant to the Toxic Substances Control Act (TSCA). The term “Health and safety study or study” is defined in various regulatory provisions promulgated under TSCA. For example, in 40 C.F.R. 720.3(k), health and safety study is defined as “any study of any effect of a chemical substance or mixture on health or the environment or on both, including underlying data and epidemiological studies, studies of occupational exposure to a chemical substance or mixture, toxicological, clinical, and ecological, or other studies of a chemical substance or mixture, and any test performed under the Act. Chemical identity is always part of a health and safety study.”

CBI cases: Each filing submitted to EPA under TSCA is assigned a case number by EPA which indicates the type of filing, the fiscal year in which the submission was made, and a numeric identifier. Any subsequent submissions received relating to the original submission are assigned the same case number. For purposes of the Performance Measure, the term “CBI cases” refers to all documents submitted that have been assigned a unique case number identifying the original filing containing a CBI claim for the chemical identity of the chemical substance or mixture addressed in that filing.

Reviewed and, as appropriate, challenged: To achieve this measure, EPA must complete the following actions for all new and historical submissions by the end of 2015: 1) determine if a challenge to the CBI claim is warranted; 2) execute the challenge if warranted; and 3) where legally authorized, declassify the information claimed as CBI. Section 14(b) of TSCA does not extend confidential treatment to health and safety studies, or data from health and safety studies, which, if made public, would not disclose processes used in the manufacturing or processing of a chemical substance or mixture or, in the case of a mixture, would not disclose the portion of the mixture comprised by any of the chemical substances in the mixture. Where a chemical identity does not explicitly contain process information or reveal portions of a mixture, EPA expects to find that the information would clearly not be entitled to confidential treatment. Where EPA determines that the information is not eligible for confidential treatment, the Agency will notify companies, and in those

instances where the company will not voluntarily relinquish the claims, EPA may initiate administrative action consistent with Section 14 of TSCA and applicable regulations.

Background:

This performance measure supports EPA's strategic measure through 2015 to make all health and safety studies available to the public for chemicals in commerce, to the extent allowed by law. A similar strategic measure appeared in EPA's Strategic Plan for FY 2011-2015. For pesticides, EPA will continue to make risk assessments and supporting information available through its long standing Public Participation Process.

The effort has involved the renewed focus on companies' practices in submitting CBI claims, first announced on January 21, 2010, when EPA said it planned to reject CBI claims for chemicals submitted to EPA accompanied by studies that show a substantial risk to people's health and the environment, where the subject chemicals were previously disclosed on the TSCA Chemical Inventory. In a follow-up communication of May 27, 2010, EPA said it planned to generally deny confidentiality claims for the identity of chemicals in health and safety studies filed under TSCA, except in specified circumstances.

For more information, please see:

- (1) <http://www.epa.gov/oppt/tscas8e/pubs/confidentialbusinessinformation.html>
- (2) <http://www.asse.org/epa-seeks-improved-transparency-on-chemical-risks/>
- (3) <http://www.regulations.gov/-!documentDetail;D=EPA-HQ-OPPT-2010-0446-0001>

2a. Original Data Source:

Data are provided by EPA Headquarters Staff.

2b. Source Data Collection:

The Agency relies on existing databases that track TSCA filings and identify data elements for each document, including CBI claims. These databases are used for a wide variety of purposes relating to TSCA implementation. Quality controls include standard operating procedures related to data processing. This process is enhanced, in the CBI review context, by reviews of the actual data to ensure that what is tracked is consistent with the submitted filings.

2c. Source Data Reporting:

EPA receives information by paper or electronic submission under the authority of TSCA. CBI reviews are initiated under specific regulatory authority (e.g. 40 CFR part 2 etc). TSCA submitters (e.g., companies that manufacture industrial chemicals) transmit various types of information required under TSCA electronically or by mail to the TSCA Confidential Business Information Center (CBIC) at EPA Headquarters. These filings are submitted according to the various provisions of TSCA and applicable regulations. There are no specific reporting requirements directly related to the CBI review initiatives nor is there a regular reporting period with beginning and ending dates as EPA receives materials pursuant to TSCA on a daily basis throughout the year.

3a. Relevant Information Systems:

Information about TSCA submissions is entered into the Chemical Information System (CIS) by Agency staff and contractors. For purposes of the performance measure, OPPT retrieves information from CIS regarding cases that meet relevant criteria for review. A listing of cases identified for review is provided to various divisions within OPPT to complete particular elements of the case reviews. The results of these reviews are entered into various data repositories, including Excel spreadsheets and Access databases. The material from these sources is compiled into two separate Access databases from which various reports are generated. The data stored in these databases include the records identified for review, date of receipt, review status, claim

validation, letter or call sent, 2.204(d)(2) Action, and declassification status. For chemicals in 8(e) filings the database will also track if the chemical name has process or portion of mixture information and if it is claimed as research and development (R&D) or as a pesticide. Data elements used to track the cases for which CBI claims are reviewed consist of: (1) new process-specific elements entered by reviewers and (2) elements associated with health and safety studies and previously entered into OPPT databases. The databases are limited to tracking filings, CBI review status and other data element consistent with internal management of the program. The databases do not contain any transformed data.

Given the nature of the information processes used for this measure, there are no formal Information System Lifecycle Management policies or other Information System Integrity Standards that apply.

3b. Data Quality Procedures:

EPA reviews all subject filings with CBI claims to ensure that such claims are consistent with provisions of statute and Agency policy. Participants in the review include legal and technical staff persons who rely on advice from EPA's Office of General Counsel.

3c. Data Oversight:

Chief, Planning and Assessment Branch, Environmental Assistance Division, OPPT

3d. Calculation Methodology:

EPA's experience in recent years has been that hundreds of CBI cases potentially containing TSCA health and safety information are submitted annually. The agency identifies all filings and cases subject to review and places them in an internal tracking database. As filings and cases are reviewed and appropriate actions undertaken, the database is updated to capture the new status. Thus, the number of CBI cases that are reviewed and, as appropriate, challenged can be readily obtained from the database and expressed as a percentage of all existing CBI health and safety study cases.

The unit of measure in which the performance result is expressed is CBI cases and the timeframe represented in the performance result extends from the first day through the last day of the relevant fiscal year. Variables used in this measure are defined in Section 1a above.

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

Data limitations include:

- Some submissions may be redundant due to overlap in processing.
- The number of errors that could have been made during data entry is not known.

4c. Third-Party Audits:

OIG published a report in 2010 finding that CBI claims were excessive, and encouraging EPA to increase public access to information filed under TSCA. For more information, see

<http://www.epa.gov/oig/reports/2010/20100217-10-P-0066.pdf>

Measure Code: D6A - Reduction in concentration of PFOA in serum in the general population.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

4 - By 2018, reduce concentration of targeted chemicals in the general population

Managing Office:

1a. Performance Measure Term Definitions:

PFOA: Perfluorooctanoic Acid

Reduction in serum concentration: The percent reduction in the blood serum concentration of PFOA among the U.S. general population from the baseline year to a subsequent reporting year, as estimated from sample data obtained from the periodic National Health and Nutrition Examination Surveys (NHANES) administered by the Centers for Disease Control and Prevention (CDC).

General population: The population of all adults and children ages 12 years and older living in the United States, excluding those who are institutionalized.

Background: Perfluorooctanoic acid (PFOA) is a synthetic chemical that does not occur naturally in the environment. Companies use PFOA to make fluoropolymers, substances with special properties that have hundreds of important manufacturing and industrial applications. They are used to provide non-stick surfaces on cookware and waterproof, breathable membranes for clothing, and are used in many industry segments, including the aerospace, automotive, building/construction, chemical processing, electronics, semiconductors and textile industries. PFOA can also be produced by the breakdown of some fluorinated telomers, substances that are used in surface treatment products to impart soil, stain, grease and water resistance. The EPA began investigating PFOA in the 1990s, following an investigation of perfluorooctyl sulfonates (PFOS), a similar group of chemicals found to present concerns for persistence, bioaccumulation and toxicity. The research concluded that PFOA, too, is very persistent in the environment, is found at very low levels in the environment and in the blood of the general U.S. population, and causes developmental and other adverse effects in laboratory animals. In response to these findings, the agency is pursuing several complementary approaches to encourage reduction in PFOA use. For instance, an action plan to address Long-Chain Perfluorinated Chemicals (LCPFCs), including PFOA, is being implemented and a number of potential chemical substitutes are being explored.

This performance measure tracks the extent to which reductions in the serum concentration of PFOA among U.S. residents are actually being achieved. Progress is measured as the percent reduction from the 2005-2006 baseline serum concentration as estimated through NHANES.

2a. Original Data Source:

The original data source is the Centers for Disease Control and Prevention's (CDC) National Health and Nutrition Examination Survey (NHANES), which is recognized as the primary database in the United States for national biomonitoring statistics on blood and urine concentrations of potentially harmful chemicals such as PFOA, http://www.cdc.gov/nchs/nhanes/about_nhanes.htm NHANES is a probability sample of the non-

institutionalized population of the United States. The survey examines a nationally representative sample of approximately 5,000 men, women, and children each year located across the U.S.

2b. Source Data Collection:

Methods of data collection (by original data source): Data are obtained by analysis of blood and urine samples collected from survey participants. Health status is assessed by physical examination. Demographic and other survey data regarding health status, nutrition, and health-related behaviors are collected by personal interview, either by self-reporting or, for children under 16 and some others, as reported by an informant. Detailed interview questions cover areas related to demographic, socio-economic, dietary, and health-related questions. The survey also includes an extensive medical and dental examination of participants, physiological measurements, and laboratory tests. NHANES is unique in that it links laboratory-derived biological markers (e.g. blood, urine etc.) to questionnaire responses and results of physical exams.

Quality procedures followed (by original data source): According to the CDC, the process of preparing NHANES data sets for release is as rigorous as other aspects of the survey. After a CDC contractor performs basic data cleanup, the CDC NHANES staff ensure that the data are edited and cleaned prior to release. NHANES staff devotes at least a full year after the completion of data collection to careful data preparation. Additionally, NHANES data are published in a wide array of peer-reviewed professional journals.

Background documentation is available at the NHANES Web site at <http://www.cdc.gov/nchs/nhanes.htm> The analytical guidelines are available at the Web site http://www.cdc.gov/nchs/about/major/nhanes/nhanes2003-2004/analytical_guidelines.htm

Geographical extent of source data, if relevant: Data are collected to be representative of the U.S. population. The population data are extrapolated from sample data by the application of standard statistical procedures.

Spatial detail of source data, if relevant: NHANES sampling procedures provide nationally representative data.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: EPA monitors the periodic issuance of NHANES reports and other data releases to obtain the data relevant to this measure.

Timing and frequency of reporting: NHANES is a continuous survey and examines a nationally representative sample of about 5,000 persons each year. These persons are located in counties across the country, 15 of which are visited each year.

Files of raw data, containing measured serum concentrations of PFOA among NHANES participants, are currently released to the public in two-year sets. CDC also periodically publishes reports containing summary statistics for PFOA and more than 200 other chemicals measured in NHANES, at www.cdc.gov/exposurereport

3a. Relevant Information Systems:

There are no EPA systems utilized in collecting data for this measure as the Agency is able to secure the necessary data directly from NHANES reports and data releases.

3b. Data Quality Procedures:

EPA does not have any procedures for quality assurance of the underlying data as this function is performed by the CDC itself. CDC has periodically reviewed and confirmed EPA's calculation of NHANES summary statistics from the raw data files. The Agency determines the performance result for this measure either directly from the NHANES data or by performing simple arithmetical calculations on the data.

3c. Data Oversight:

Chief, Planning and Assessment Branch, Environmental Assistance Division, Office of Pollution Prevention and Toxics

3d. Calculation Methodology:

Decision rules for selecting data: EPA uses the blood serum concentration values for PFOA that are generated by the NHANES surveys. Values from all NHANES participants with serum PFOA measurements in a two-year NHANES cycle are used (along with the appropriate NHANES sample weights) in calculating the geometric mean concentrations.

Definitions of variables: Key terms are defined in 1(a) above.

Explanation of the calculations: Not applicable. Performance results obtained from NHANES.

Explanation of assumptions: Not applicable for the same reason as above.

Identification of unit of measure: Geometric mean serum concentration (in ug/L)

Identification of timeframe of result: The performance result is computed from data released by the CDC in sets covering the particular time period over which sampling occurs. Thus, the timeframe that applies to the measured result is the same period for which the NHANES data are released. It is not a simple snapshot at a specific moment in time.

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year, but subject to a data lag due to the periodic nature of NHANES reporting.

4b. Data Limitations/Qualifications:

NHANES is a voluntary survey and selected persons may refuse to participate. In addition, the NHANES survey uses two steps, a questionnaire and a physical exam. There are sometimes different numbers of subjects in the interview and examinations because some participants only complete one step of the survey. Participants may answer the questionnaire but not provide the more invasive blood sample. Special weighting techniques are used to adjust for non-response. NHANES is not designed to provide detailed estimates for populations that are highly exposed to PFOA.

4c. Third-Party Audits:

Report of the NHANES Review Panel to the NCHS Board of Scientific Counselors.

Cover letter can be accessed at: <http://www.cdc.gov/nchs/data/bsc/bscletterjune8.pdf>

Report can be accessed at: <http://www.cdc.gov/nchs/data/bsc/NHANESReviewPanelReportrapril09.pdf>

Measure Code: 10A - Annual percentage of lead-based paint certification and refund applications that require less than 20 days of EPA effort to process.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

0 -

Managing Office:

Office of Pollution Prevention and Toxics

1a. Performance Measure Term Definitions:

Lead-based Paint Certification and Refund Applications: Applicants interested in receiving certification and/or accreditation must submit a complete application package to EPA and pay the required fees. In some instances, applicants for certification or accreditation either submit payment in excess of what is required or they decide to withdraw their application. In those cases, the Agency prepares a refund to return those funds to the applicant.

20 Days of EPA Effort: Because the Agency relies in part on contract employees to perform data entry of applications, this measure only counts the portion of the application approval process that is handled by EPA Regional and Headquarters staff. EPA Regional Offices are measured on the number and percentage of individual certification applications processed in less than 20 calendar days. This measure is calculated by using two timeframes. Timeframe 1 is the number of days elapsed from the "Sent to Regional Office" date (when the Contractor sends the application to the Regional Office) to the "Regional Office Review" date (when the Regional Office enters its recommendation to approve/disapprove.) Timeframe 2 is the number of days from the "Approval or Disapproval Letter Generated" date entered by the Regional Office to the "Final Package Sent" date entered by the Regional Office.

Timeframes 1 and 2 are added together to give the total processing time. These two timeframes do not include time from any other Federal Lead-based Paint Program (FLPP) process and specifically exclude any time associated with fee confirmation. All of the dates discussed are only valid if recorded in FLPP, and the date recorded in FLPP is the date that these activities are checked off in the database.

2a. Original Data Source:

The original data source is EPA Headquarters and Regional offices. Applications are submitted by external entities but the agency itself generates the data on number of applications and processing time. The original data source is EPA Headquarters and Regional offices. Applications are submitted by external entities but the agency itself generates the data on number of applications and processing time.

2b. Source Data Collection:

Data are entered initially into the FLPP database either by an individual submitting an application via CDX or by a contractor who performs manual entry of information submitted via a paper application. When a paper application is submitted, the contractor is required to contact the applicant if any information is missing or unclear on the application. The CDX system is designed so that all fields must be completed before the application will be accepted.

2c. Source Data Reporting:

Since the original data source is the agency itself, EPA does not rely on source data reporting by any external entity. The original certification and refund applications – from which the number of applications and average processing time are determined – are submitted by outside parties as noted above.

3a. Relevant Information Systems:

The National Program Chemicals Division (NPCD) in the Office of Pollution Prevention and Toxics (OPPT) maintains the Federal Lead-Based Paint Program (FLPP) database.

The FLPP electronic database contains applications for certification by individuals and firms and applications for accreditation by training providers in states and tribal lands administered by the Federal lead abatement program. The database provides a record of all applications the actions on those applications including final decisions and the multiple steps in the process used for measurement. Thus, the database contains only source data. The database is augmented by hard copy records of the original applications. EPA uses an Oracle Discoverer application to query the database to collect measurable performance data.

The FLPP database is available internally to EPA Headquarters, the federal program contractors and Regional lead program staff who process the applications or oversee the processing. The database is maintained on EPA servers at the National Computer Center (NCC) located in Research Triangle Park (RTP), North Carolina. Access to the database is granted by the Lead, Heavy Metals, and Inorganics Branch (LHMIB) in NPCD. Retention and disposal of records in accordance with the EPA Records Schedule 089 and the National Archives and Records Administration General Records Schedule 23/8. Application records maintained in the system are deleted/destroyed two years after the date of the last entry.

In FY 2013, NPCD had the FLPP database certified and accredited under the National Institute of Standards and Technology's (NIST's) Special Publication (SP) 800-53 Revision 3 requirements issued under the Federal Information Security Management Act (FISMA). The certification and accreditation stays in effect until June 2016 with continuous monitoring and performance testing of one third of FLPP's security controls each year. FLPP's Risk Assessment impact values for confidentiality, integrity, and Availability -- the overall security categorization (severity of impact) -- was determined to be moderate for confidentiality, integrity, and Availability. Of the 205 security controls examined and tested there were no high weaknesses for the system; nine medium weaknesses; and 37 low weaknesses. Under the Office of Management and Budget (OMB) guidance on implementing FISMA requirements, these 46 material weaknesses have been documented in FLPP's Plan of Action and Milestones (POA&M) and entered into the Agency XACTA database for tracking. In FY 2014, NPCD will incorporate the NIST SP 800-53 Revision 4 standards for identifying information security controls. Also, NPCD will review and test one-third of FLPP's security controls and perform continuous monitoring of the database.

3b. Data Quality Procedures:

The FLPP database is an internal EPA database, maintained for the purpose of processing and tracking applications. The database is interactive, and operational usage in processing applications by Headquarters and the Regional offices provides ongoing internal quality reviews. The contractors perform quality review of data entered into the database and update incorrect data. Further, EPA periodically checks contractors' data entry quality when performing HQ reviews.

OPPT has in place a signed Quality Management Plan ("Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances," November 2008). Like the 2003

QMP, it will ensure the standards and procedures are applied to this effort. In addition, NPCD has an approved Quality Management Plan in place, dated July 2008. Applications and instructions for applying for certification and accreditation are documented and available at the Web site <http://www.epa.gov/lead/pubs/traincert.htm>. Documentation for the FLPP database is maintained internally at EPA and is available upon request.

3c. Data Oversight:

Chief, Planning and Assessment Branch, Environmental Assistance Division, OPPT

3d. Calculation Methodology:

Each complete application for certification is processed (approximately 3000 per year). Certification is issued if all criteria are met. Some applications may be returned to the applicant or withdrawn by the applicant. For the applications that are fully processed, the length of time for EPA processing can be determined from data fields in the FLPP database. Accordingly, a census of all the fully processed applications for certification is conducted monthly, and the percentage of applications that took more than the prescribed number of days (e.g., 20) of EPA effort to process is computed based on this census. The data used to estimate this performance measure directly reflect all information that has been recorded pertaining to certification applications and are the most acceptable for this requirement.

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

The agency is not aware of any significant data limitations for this measure.

4c. Third-Party Audits:

None.

Measure Code: RA1 - Annual number of chemicals for which risk assessments are finalized through EPA's TSCA Existing Chemicals Program.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

1 - Protect Human Health from Chemical Risks

Strategic Target Code and Title:

0 -

Managing Office:

OPPT

1a. Performance Measure Term Definitions:

Risk Assessment: As EPA uses the term, "risk" is the chance of harmful effects to human health or to ecological systems resulting from exposure to an environmental stressor such as a toxic chemical. The objective of a "risk assessment" is to characterize the nature and magnitude of risks to human health and/or ecological receptors from chemical substances and other stressors that may be present in the environment. Risk managers can use the information gained from risk assessment to help them decide how to protect humans and the environment from such stressors (e.g., chemicals).

<http://www.epa.gov/riskassessment/basicinformation.htm> - arisk

Finalized: For purposes of this measure, a risk assessment is considered to have been finalized if the risk assessment has been issued in final form following completion of peer review.

Through EPA's TSCA Existing Chemicals Program: For purposes of this measure, a risk assessment is considered to have been finalized "through EPA's TSCA Existing Chemicals Program" if the chemical for which the finalized risk assessment was conducted is on the list of TSCA Work Plan chemicals released by EPA on March 1, 2012, as updated periodically; or, for other chemicals, if the finalized risk assessment was publicly issued after FY 2012 by EPA's TSCA Existing Chemicals Program.

Background: Under TSCA, the EPA has significant responsibilities for ensuring that commercial chemicals do not present unreasonable risk to human health or the environment. The TSCA Existing Chemicals Program focuses on assessing and managing the potential risks of chemicals that entered commerce before TSCA took effect (i.e., "existing chemicals"). For selected chemicals identified by EPA for priority review, the Agency is considering data collection, risk assessment and risk management actions as may be needed.

In March 2012, EPA identified a work plan of 83 chemicals for further risk assessment, beginning with seven to be assessed in FY 2012. The initial list of Work Plan Chemicals may be updated periodically as new information becomes available. EPA intends to use this list to focus and direct the activities of the Existing Chemicals Program over the next several years. From time to time, EPA may also conduct risk assessments of other existing chemicals pursuant to TSCA.

2a. Original Data Source:

Since all risk assessments tracked through this measure are performed by EPA, the original data source is the Agency itself. All such risk assessments are managed by EPA Headquarters so there is no need for EPA Regions or states to report accomplishments toward the target.

2b. Source Data Collection:

Process managers in OPPT responsible for developing the risk assessments obtain status information from developers of specific components of the assessments and provide periodic progress reports to the Office Director.

2c. Source Data Reporting:

Process managers in OPPT responsible for developing the risk assessments obtain status information from developers of specific components of the assessments and provide periodic progress reports to the Office Director.

Form/mechanism for receiving data and entering into EPA system: Not applicable since there is no data source outside EPA that submits data to the Agency. As noted above, the process of conducting risk assessments is managed by EPA.

Timing and frequency of reporting: Not applicable for the reasons given above.

3a. Relevant Information Systems:

Not applicable due to small number of deliverables.

3b. Data Quality Procedures:

OPPT complies with established EPA or Office guidance, protocols and standard operating procedures for developing chemical risk assessments.

3c. Data Oversight:

Process managers in OPPT responsible for developing the risk assessments obtain status information from developers of specific components of the assessments and provide periodic progress reports to the Office Director.

3d. Calculation Methodology:

Since the measure simply counts the number of chemicals for which risk assessments are completed, there is no need to transform the original data by any mathematical methods. Data are not selected by any formal decision rules except insofar as risk assessments are identified as being subject to the performance measure based on the definitional criteria set out in 1a above.

For definitions of variables and key terms, please see section 1a above. The unit of measure is simply the number of risk assessments completed, and the timeframe of the performance result extends from the first day of the fiscal year through the last day. Explanations of calculations and assumptions are not applicable to this measure as this is a simple output measure involving counting activity completions.

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

Since all risk assessments tracked under this measure are conducted by EPA Headquarters (OPPT), there is little chance of incomplete reporting or significant data inconsistencies. There is no sampling error because

statistical sampling is not employed. The measure is not subject to a data lag. As the measure is new, there have not been any methodological changes over the life of the measure.

4c. Third-Party Audits:

Not applicable.

Measure Code: E07 - Annual number of EDSP Tier 1 screening assays for which validated alternatives have been developed, based on high throughput assays and computational models.

Office of Chemical Strategies and Pollution Prevention (OCSPP)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

-

Strategic Target Code and Title:

-

Managing Office:

Office of Science Coordination and Policy (OSCP)

1a. Performance Measure Term Definitions:

Endocrine disruptors are bioactive chemicals that pose harm to humans and wildlife. These chemicals have the potential to interact with the estrogen, androgen, steroidogenesis and/or thyroid systems. Concerns regarding endocrine disruptors are cited at <https://www.epa.gov/endocrine-disruption/what-endocrine-disruption-concerns>

The Endocrine Disruptor Screening Program (EDSP) was established to carry out the mandate of the Federal Food, Drug and Cosmetic Act (FFDCA), which directed EPA to develop a screening program to determine whether certain substances have endocrine bioactivity that are harmful to humans and wildlife. An EDSP overview is cited at <https://www.epa.gov/endocrine-disruption/endocrine-disruptor-screening-program-edsp-overview>. Details concerning EDSP statutory authority are cited at <https://www.regulations.gov/document?D=EPA-HQ-OPPT-2007-1080-0029>

The EDSP has a “Universe of Chemicals” of approximately 10,000 chemicals that is described

<https://www.epa.gov/endocrine-disruption/endocrine-disruptor-screening-program-edsp-universe-chemicals>

The EDSP has been implemented as a two-tier system. EDSP Tier 1 screening determines whether a chemical has the potential to interact with the endocrine system and requires more thorough testing. EDSP Tier 2 testing data identifies any adverse endocrine-related effects caused by the substance, and establish a quantitative relationship between the dose and that adverse effect. The results of Tier 2 testing will be combined with other hazard information and exposure assessment on a given chemical resulting in the risk assessment. Risk assessments are used to inform risk mitigation measures, as necessary, and regulatory decisions concerning chemicals. Details regarding EDSP Tier 1 screening and further Tier 2 testing are cited at <https://www.epa.gov/endocrine-disruption/endocrine-disruptor-screening-program-edsp-overview-tab-2>

High throughput screening (HTS) and computational toxicology (CompTox) tools for Estrogen Receptor (ER) are now available as alternatives for 3 of the 11 EDSP Tier 1 assays. Use of High Throughput Assays and Computational Tools is described at <https://www.epa.gov/endocrine-disruption/use-high-throughput-assays-and-computational-tools-endocrine-disruptor>

EDSP in the 21st Century is cited at <https://www.epa.gov/endocrine-disruption/endocrine-disruptor-screening-program-edsp-21st-century>. The use of high-throughput and computational methods dramatically increases EPA’s ability to rapidly screen chemicals for endocrine bioactivity and provides alternatives to animal-based EDSP Tier 1 ER binding and uterotrophic assays.

2a. Original Data Source:

EDSP website at <https://www.epa.gov/endocrine-disruption>

2b. Source Data Collection:

Source Data Collection Methods: The annual number of EDSP Tier 1 screening assays for which validated alternatives are based on high throughput assays and computational models evaluated through:

1. Performance based criteria and reviewed internally
2. Published peer review articles/reports in scientific literature
3. Review by EPA's FIFRA Scientific Advisory Panel (FIFRA SAP).

The FIFRA SAP is a Federal Advisory Committee Act committee providing independent scientific peer review (validation) for the EDSP and is an open, transparent public process. Information on the FIFRA SAP can be found here: <https://www.epa.gov/sap>

EPA has also developed and issued the Agency's Endocrine Disruptor Screening Program Comprehensive Management Plan (<https://www.epa.gov/endocrine-disruption/endocrine-disruptor-screening-program-edsp-comprehensive-management-plans>) that describes the strategic guidance for how the Agency planned/implemented the program over the past five years and how the program will move forward in the future. The EDSP Comprehensive Management Plan also includes key activities described and captured in the performance measures. Current Comprehensive Management Plan, dated February 2014.

2c. Source Data Reporting:

EPA created an online table for tracking the status of assay validation efforts. This table will be adapted (or replaced) to track the status of high throughput assays and computational tools in the EDSP (check at <http://www.epa.gov/endo>)

The EDSP21 Dashboard will also provide information on EDSP data and validation status of HTS assays and computational models. The EDSP21 Dashboard can be found here: <https://actor.epa.gov/edsp21/>

3a. Relevant Information Systems:

System Description: The online table EPA created for tracking the status of assay validation efforts has historically captured the various steps in validating lower throughput EDSP Tier 1 screening assays and Tier 2 test systems. This table will be replaced with a new version focused on high throughput and computation tools and following the various milestones toward validation including evaluating performance with reference compounds, comparisons to previously-established test methods covering multiple endpoints along an Adverse Outcome Pathway, as available, and scientific peer reviews (check at <http://www.epa.gov/endo>)

The EDSP21 Dashboard will also provide information on EDSP data and validation status of HTS assays and computational models. The EDSP21 Dashboard can be found here: <https://actor.epa.gov/edsp21/>

Source/Transformed Data: Sources for transformed data can be found on the EDSP 21 Dashboard.

Information System Integrity Standards: Since the data will correspond to the online reporting on the status of high throughput and computational tools, the public and other interested parties can easily determine the accuracy of the reports results. Performance criteria for validation are also found in peer review publication sources cited above and supplemental materials.

3b. Data Quality Procedures:

Validation decisions consider curated scientific literature, EDSP Tier 1 screening battery data, if available, and other information relevant to the performance of assays and models with respect to reference compounds and previously established methods covering multiple endpoints along Adverse Outcome Pathway.

The number of EDSP Tier 1 Battery assays for which validated High Throughput (Screening HTS) assays and computational models are available are reviewed for accuracy before submitting and can be checked against supporting documents such as peer review reports and supplemental data files.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Deputy Director, Office of Science Coordination and Policy (OSCP)

Source Data Reporting Oversight Responsibilities: Collaborate with Division Director, Exposure Assessment and Coordination and Policy, and Office Director, Office of Science Coordination and Policy

Information Systems Oversight Personnel: [Please provide information.]

Information Systems Oversight Responsibilities: [Please provide information.]

3d. Calculation Methodology:

Unit of Analysis: Annual number of EDSP Tier 1 screening assays for which validated alternatives have been developed, based on high throughput assays and computational models. The total number of possible alternatives over the lifetime of this performance measure will be 11, which corresponds to the number of assays in the current EDSP Tier 1 battery.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management and Operations, Office of Chemical Safety and Pollution Prevention

Final Reporting Oversight Responsibilities: [Please provide information.]

Final Reporting Timing: End-of-year

4b. Data Limitations/Qualifications:

Validation decisions are contingent on the completion of several steps culminating in scientific peer review; therefore, EPA anticipates minimal error with this estimate.

4c. Third-Party Audits:

EPA FIFRA Scientific Advisory Panel peer reviews; stakeholder input and public comment.

Office of Enforcement and Compliance Assurance (OECA) Record(s)

Measure Code: 078 - Percentage of all Superfund statute of limitations cases addressed at sites with unaddressed past Superfund costs equal to or greater than \$500,000.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

1 - Maintain Enforcement Presence

Strategic Target Code and Title:

5 - Through 2018, support clean ups and save federal dollars for sites where there are no alternatives

Managing Office:

Office of Site Remediation Enforcement

1a. Performance Measure Term Definitions:

Comprehensive Environmental Response, Compensation and Liability Act (CERCLA): the federal program for cleaning up the nation's uncontrolled hazardous waste sites. Under CERCLA, EPA finds the companies or people responsible for contamination at a site, and negotiates with them to clean up the site themselves or to pay for another party to do the cleanup.

The statute of limitations represents a defined period of time within which EPA must file a claim to obtain past costs spent at a site. If EPA fails to file its cost recovery case within the statutory time period that CERCLA provides, the case can be dismissed and EPA will not recover its costs.

Costs incurred include all Superfund dollars spent at a site by EPA that are associated with performing removal or remedial action. This measure covers cases where EPA has incurred Superfund costs greater than or equal to \$500,000 and has not pursued or taken action to collect those monies spent at the site. Cost recovery action can be addressed or taken in four ways: by use of administrative and judicial cost recovery settlement; by referral to DOJ to pursue litigation on behalf of EPA; by filing a claim in bankruptcy proceedings; or when appropriate, by preparing a decision document or 10-point settlement analysis document not to pursue cost recovery.

The most current SPIM can be found at:

<http://epa.gov/superfund/policy/guidance.htm>

2a. Original Data Source:

Original data source varies among EPA regional staff, and multiple data sources can be used for each site. Typical data sources include Remedial Project Managers (RPMs), On Scene Coordinators (OSCs), Office of Regional Council (ORC), Enforcement Case Teams or Information Management Coordinators (IMCs] who are responsible for entering detailed site-specific information into the Superfund Enterprise Management System (SEMS), e.g., the status of cleanups, target and measure accomplishments, and resource planning and use information. Other data sources may include Facility Personnel and Facility Contractors. Documentary data source include case settlements, unilateral administrative orders (UAOs), consent decrees, an administrative order on consent (AOC) or related legal document.

2b. Source Data Collection:

Step 1. Original data sources provide information on their activities by entering the appropriate data into SEMS.

Step 2. Headquarters' OSRE staff review and compares the data from SEMS Reports against data which has been entered into SEMS. This task is done manually.

Step 3. If discrepancies are identified, follow up calls are made to the regions to resolve the problems.

2c. Source Data Reporting:

According to the Superfund Program Implementation Manual (SPIM) a key component of Superfund verification/validation procedures is the Data Entry Internal Control Plans (hereafter Control Plans). The primary objective of every Control Plan is to provide a consistent plan for entering and maintaining current, complete, consistent and accurate data in Superfund systems. In FY2014, the Superfund program officially deployed the Superfund Enterprise Management System (SEMS), which integrates several legacy information systems. Previously, data quality guidance pertained to data in the Comprehensive Environmental Response, Compensation and Liability Information System (CERCLIS), it now applies to the new data elements, processes and administration of SEMS.

Information entered into SEMS by the Regions is simultaneously available for use by EPA Headquarters. Therefore, ensuring the quality of the data entered into SEMS is critical to accurate reporting of information associated with hazardous waste sites. SEMS is EPA's primary database to store and report data for NPL sites and non-NPL Superfund sites. EPA has modified SEMS to track budget accounting codes related to Recovery Act data elements, including fund account coding and program priority flags. The Superfund Comprehensive Accomplishment Plan (SCAP) reports in SEMS also reflect new account coding. In addition, SEMS data are used to populate eFacts reports, reports from OSWER's Performance Assessment Tool (PAT), or ReportLink reports specifically designed to track sites and projects receiving Recovery Act funds. Note that SEMS financial information is used for management purposes only and is not an official representation of Superfund incurred costs. COMPASS is the Agency's official accounting system and is the source for financial costs incurred by the Agency.

(For more information about SEMS, see Appendix E of the most recent SPIM, which is updated each fiscal year, and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here: <http://epa.gov/superfund/policy/guidance.htm>.)

3a. Relevant Information Systems:

The Superfund Enterprise Management System (SEMS) is an automated, fully modernized EPA system that is used to capture and report on all essential program and enforcement performance information. SEMS is the Superfund program's primary repository of program, enforcement planning, and accomplishment data. SEMS contains national removal, site assessment, remedial, Federal facility, and enforcement program data for hazardous waste sites.

Source/Transformed Data: [[Please provide information.]]

Information System Integrity Standards: [[Please provide information.]]

3b. Data Quality Procedures:

Regional Data Entry Control Plans. Regions have established and published Data Entry Control Plans, which are a key component of SEMS' verification/validation procedures. The control plans include: (1) regional policies and procedures for entering data into SEMS, (2) a review process to ensure that all Superfund accomplishments are supported by source documentation, (3) delegation of authorities for approval of data input into SEMS, and (4) procedures to ensure that reported accomplishments meet accomplishment definitions. In addition, regions should document in their control plans the roles and responsibilities of key regional employees responsible for SEMS data (e.g., regional project manager, information management coordinator, supervisor, etc.), and the processes to assure that SEMS data are current, complete, consistent, and accurate. Regions may undertake centralized or decentralized approaches to data management. These plans are collected annually for review by the Office of Superfund Remediation and Technology Innovation (OSRTI)/Information Management Branch (IMB). Current and past year plans are available by contacting Jennifer Hovis, Chief, IMB, OSRTI.

Regions are expected to annually prepare Data Entry Control Plans consistent with the Superfund Program Implementation Manual (SPIM) and the Headquarters guidance: "2014/2015 SEMS Data Entry Control Plan Guidance," May 2014.

SEMS QA/QC Procedures:. To ensure data accuracy and control, various administrative controls have been established within the Superfund Program Implementation Manual (SPIM). The SPIM is a planning document that supports program management priorities, procedures, and practices for the Superfund Program. These are provided by:

1. Report Specifications contained in SEMS reports indicating how reported data are pulled and displayed;
2. A Coding Guide contains technical instructions for data users such as Regional Information Management Coordinators (IMCs), program personnel, data owners, and data input personnel;
3. Quick Reference Guides (QRG) are available in the SEMS Documents Database and provide detailed data entry instructions for most SEMS modules;
4. Superfund Comprehensive Accomplishment (SCAP) and Enforcement reports are used to track, budget, plan, and evaluate progress towards meeting Superfund targets and measures; and
5. A historical lockout feature is provided in SEMS to ensure that any changes to past fiscal year data can only be made by approved personnel and are recorded within a Change Log report. These controls are contained in the most recent SPIM. The most current SPIM can be found at:

<http://epa.gov/superfund/policy/guidance.htm>

SEMS operation and development is supported by the following administrative control and quality assurance procedures:

1. Office of Environmental Information Interim Agency Life Cycle Management Policy Agency Directive 2100.5, (<https://www.epa.gov/irmpoli8/policy-procedures-and-guidance-system-life-cycle-management-slcm>);
2. The Office of Superfund Remediation and Technology Innovation Quality Management Plan, (<https://www.epa.gov/quality/agency-wide-quality-system-documents>);
3. Agency platform, software, and hardware standards, (<http://basin.rtpnc.epa.gov/ntsd/itroadmap.nsf>);
4. Quality Assurance Requirements in all contract vehicles under which SEMS is being developed and maintained, (<https://www.epa.gov/quality/guidelines-ensuring-and-maximizing-quality-objectivity-utility-and-integrity-information>); and
5. Agency security procedures, (<http://basin.rtpnc.epa.gov/ntsd/ITRoadMap.nsf/Security?OpenView>

In addition to the above, specific controls are in place for system design, data conversion, data capture, and SEMS outputs.

Attached Documents:

2014-2015 CERCLIS DECP guidance (2).pdf

OSRE QMP 2013 - Final.docx

3c. Data Oversight:

Source Data Reporting Oversight Personnel: HQ – Director, Office of Site Remediation Enforcement
Region 1 – Chief, Information & Budget Management Branch or Director, Office of Site Remediation and Restoration

Region 2 – Regional Data Specialist

Region 3 – Data Quality Coordinator

Region 4 – Enforcement Data Management Specialist

Region 5 – Enforcement Coordinator.

Region 6 – Compliance Assurance and Enforcement Division Director

Region 7 – SEMS Information Management Coordinator

Region 8 – RCRA/CERCLA Technical Enforcement Program Director

Region 9 – SEMS Information Management Coordinator & Program Specialist

Region 10 – SEMS Information Management Coordinator

Source Data Reporting Oversight Responsibilities: [[Please provide information.]]

Information Systems Oversight Personnel:HQ – SEMS System Administrator

Regions 1 – 10 SEMS Information Management Coordinators

Information Systems Oversight Responsibilities: The Information Management Coordinator (IMC) is a senior level position which serves as the regional lead for all Superfund program and SEMS data systems management activities. The following lead responsibilities for regional program planning and management rest with the IMC:

- Coordinate program planning, budget development, and reporting activities;
- Ensure regional planning and accomplishments are complete, current, consistent, and accurately reflected in SEMS by working with data sponsors and owners;
- Provide liaison to HQ on SCAP process and program evaluation issues;
- Coordinate regional evaluations by HQ;
- Ensure that the quality of SEMS data are such that accomplishments and planning data can be accurately retrieved from the system; and,
- Ensure there is "objective" evidence to support accomplishment data entered in SEMS. (Objective Evidence Rule: "All transactions must be supported by objective evidence, that is, documentation a third party could examine would arrive at the same conclusion.")

3d. Calculation Methodology:

Divide the numerator (i.e., the number of SOL targets addressed in the FY) by the denominator (i.e., the number of SOL targeted cases in the FY) to arrive at the Government Performance and Results Act (GPRA) percentage of SOL cases addressed.

e.g., 90/98 = 92%

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Oversight of Final Reporting: In addition to OSRE's general data quality procedures applicable to Superfund enforcement data, OSRE implements several QA procedures specific to Superfund program measures that are derived from SEMS data. OSRE defines each measure in the Superfund Program Implementation Manual (see section 4.1.1), reconciles SEMS data and participates in the GPRA data certification process for OSRE's GPRA goals. The GPRA data certification process takes place at the end of each fiscal year. OSRE subject matter experts and management participate, with the regions, in a review process in which the annual figures for GPRA goals are confirmed and finalized. The Regional Administrator or Deputy Regional Administrator for each region is required to certify at the end of the fiscal year that the SEMS data used to track Superfund enforcement GPRA measures has been reviewed by regional management and is correct. Dissemination takes place in several ways, most notably by inclusion in the Enforcement and Compliance Assurance Accomplishments Report issued by OECA.

The Regional Administrators or Deputy Regional Administrators, and Director of the Office of Site Remediation Enforcement Director all must sign the attached certification form

Final Reporting Oversight Responsibilities: [[Please provide information.]]

Final Reporting Timing: [[Please provide information on timing and, if other than annual, frequency.]]

4b. Data Limitations/Qualifications:

The Superfund Enterprise Management System (SEMS) has replaced the Comprehensive Environmental Response, Compensation, and Liability Information System (CERCLIS) and as such is too new to have been evaluated for data limitations and qualifications. Regarding general CERCLIS Data Limitations/Qualifications: CERCLIS Data Quality. The OIG audit, Information Technology – Comprehensive Environmental Response, Compensation, and Liability Information System (CERCLIS) Data Quality (Report No. 2002-P-00016), dated September 30, 2002 identified some weaknesses. (see <https://www.epa.gov/office-inspector-general/report-comprehensive-environmental-response-compensation-and-liability>) The Agency disagreed with the study design and report conclusions: however, the report provided 11 recommendations on improving data quality with which EPA concurred and implemented. The development and implementation of a quality assurance process for CERCLIS data continued. This process includes delineating data quality objectives for GPRA targets, program measures, and regional data. The Agency began reporting compliance data with current data quality objectives. The data quality indicators are complete, accurate, current, and consistent – which are defined in the CERCLIS QAPP.

4c. Third-Party Audits:

The IG annually reviews the end-of-year SEMS data, in an informal process, to verify the data supporting the performance measure. Typically, there are no published results

Measure Code: 285 - Percentage of Superfund sites having viable, liable responsible parties other than the federal government where EPA reaches a settlement or takes an enforcement action before starting a remedial action.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

1 - Maintain Enforcement Presence

Strategic Target Code and Title:

5 - Through 2018, support clean ups and save federal dollars for sites where there are no alternatives

Managing Office:

Office of Site Remediation Enforcement

1a. Performance Measure Term Definitions:

The object of this measure is to ensure an enforcement action has occurred prior to the start of a fund-financed remedial action at non-federal Superfund sites that have known, viable, liable parties. This measure supports the goal of maximizing PRP participation at Superfund sites, thus promoting "Enforcement First".

Responsible party (RP): An individual or company (e.g., an owner, operator, transporter, or generator of hazardous waste) that is responsible for the contamination problems at a Superfund site. Whenever possible, EPA requires RPs to clean up hazardous waste sites they have contaminated.

Enforcement Action or Settlement: CERCLA authorizes the use of various enforcement tools to achieve cleanup of hazardous waste sites. Consistent with EPA's "enforcement first" strategy, EPA encourages use of consensual agreements with responsible parties. PRPs who are able and willing to perform cleanup activities. If negotiations are not successful, under the authority of CERCLA § 106(a), EPA can issue a Unilateral Administrative Order (UAO) to all appropriate PRPs to perform cleanup activities or seek an injunction in federal court.¹⁹⁸ EPA may also opt to perform the cleanup under CERCLA § 104(a) using Superfund money and seek cost recovery from PRPs afterwards using CERCLA § 107, but it is EPA's preference to have PRPs perform the remedy and/or pay for the remedy directly, thereby conserving Fund resources, reducing transaction costs, and expediting the cleanup. :

For purposes of this measure, the enforcement action taken can be a Unilateral Administrative Order, Voluntary Cost Recovery Action, or Litigation Referral to DOJ. A settlement can be a Consent Decree, Administrative Order on Consent, or a Consent Agreement

Remedial actions are long-term response actions which seek to permanently and significantly reduce the risks associated with releases or threat of release of hazardous substances, pollutants, or contaminants. Remedial actions are generally larger more expensive actions than removal actions and may include such measures as preventing the migration of pollutants/containment, or removing and/or treating toxic substances. Usually there are multiple Remedial actions at a Superfund site. These actions can be conducted with federal funding only at sites listed on the NPL. Remedial actions by responsible parties under consent decrees or unilateral

administrative orders with EPA oversight may be performed at both NPL and non-NPL sites, commonly called Superfund Alternative Sites.

2a. Original Data Source:

Original data source varies among EPA regional staff, and multiple data sources can be used for each site. Typical data sources include Remedial Project Managers (RPMs), On Scene Coordinators (OSCs), Office of Regional Council (ORC), Enforcement Case Teams or Information Management Coordinators (IMCs] who are responsible for entering detailed site-specific information into SEMS, e.g., the status of cleanups, target and measure accomplishments, and resource planning and use information. Other data sources may include Facility Personnel and Facility Contractors. Documentary data source include case settlements, unilateral administrative orders (UAOs), consent decrees, an administrative order on consent (AOC) or related legal document

2b. Source Data Collection:

Step 1. Original data sources provide information on their activities by entering the appropriate data into SEMS

Step 2. Headquarters' OSRE staff review and compares the data from SEMS Reports against data which has been entered into SEMS. This task is done manually

Step 3. If discrepancies are identified, follow up calls are made to the regions to resolve the problems.

2c. Source Data Reporting:

According to the Superfund Program Implementation Manual (SPIM) a key component of Superfund verification/validation procedures is the Data Entry Internal Control Plans (hereafter Control Plans). The primary objective of every Control Plan is to provide a consistent plan for entering and maintaining current, complete, consistent and accurate data in Superfund systems. In FY2014, the Superfund program officially deployed the Superfund Enterprise Management System (SEMS), which integrates several legacy information systems. While previously data quality guidance pertained to data in the Comprehensive Environmental Response, Compensation and Liability Information System (CERCLIS), it now applies to the new data elements, processes and administration of SEMS.

Information entered into SEMS by the Regions is available for use by EPA Headquarters simultaneously. Therefore, ensuring the quality of the data entered into SEMS is critical to accurate reporting of information associated with hazardous waste sites. SEMS is EPA's primary database to store and report data for NPL sites and non-NPL Superfund sites EPA has modified SEMS to track budget accounting codes related to Recovery Act data elements, including fund account coding and program priority flags. The Superfund Comprehensive Accomplishment Plan (SCAP) reports in SEMS also reflect new account coding. In addition, SEMS data are used to populate eFacts reports, reports from OSWER's Performance Assessment Tool (PAT), or ReportLink reports specifically designed to track sites and projects receiving Recovery Act funds. Note that SEMS financial information is used for management purposes only and is not an official representation of Superfund incurred costs. COMPASS is the Agency's official source of financial costs incurred by the Agency.

(For more information about SEMS, see Appendix E of the most recent SPIM, which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here: <http://epa.gov/superfund/policy/guidance.htm>.

3a. Relevant Information Systems:

System Description: System Description: The Superfund Enterprise Management System (SEMS) is an automated, fully modernized EPA system that is used to capture and report on all essential program and enforcement performance information. SEMS is the Superfund program's primary repository of program, enforcement planning, and accomplishment data. SEMS contains national removal, site assessment, remedial, Federal facility, and enforcement program data for hazardous waste sites

Source/Transformed Data: [[Please provide information.]]

Information System Integrity Standards: [[Please provide information.]]

3b. Data Quality Procedures:

: Regional Data Entry Control Plans. Regions have established and published Data Entry Control Plans, which are a key component of SEMS verification/validation procedures. The control plans include: (1) regional policies and procedures for entering data into SEMS, (2) a review process to ensure that all Superfund accomplishments are supported by source documentation, (3) delegation of authorities for approval of data input into SEMS, and (4) procedures to ensure that reported accomplishments meet accomplishment definitions. In addition, regions document in their control plans the roles and responsibilities of key regional employees responsible for SEMS data (e.g., regional project manager, information management coordinator, supervisor, etc.), and the processes to assure that SEMS data are current, complete, consistent, and accurate. Regions may undertake centralized or decentralized approaches to data management. These plans are collected annually for review by OSRTI/IMB. Current and past year plans are available by contacting Jennifer Hovis, Chief, Information Management Branch, Office of Superfund Remediation and Technology Innovation.

Regions are expected to annually prepare Data Entry Control Plans consistent with the Superfund Program Implementation Manual (SPIM) and the Headquarters guidance: "2014/2015 SEMS Data Entry Control Plan Guidance," May 2014

SEMS QA/QC Procedures: To ensure data accuracy and control, various administrative controls have been established within the Superfund Program Implementation Manual (SPIM). The SPIM is a planning document that support program management priorities, procedures, and practices for the Superfund Program. These are provided by :

1. Report Specifications contained in SEMS reports indicating how reported data are pulled and displayed;
2. A Coding Guide contains technical instructions for data users such as Regional Information Management Coordinators (IMCs), program personnel, data owners, and data input personnel;
3. Quick Reference Guides (QRG) are available in the SEMS Documents Database and provide detailed data entry instructions for most SEMS modules;
4. Superfund Comprehensive Accomplishment (SCAP) and Enforcement reports are used to track, budget, plan, and evaluate progress towards meeting Superfund targets and measures; and
5. A historical lockout

feature is provided in SEMS to ensure that any changes to past fiscal year data can only be made by approved personnel and are recorded within a Change Log report. These controls are contained in the Superfund Program Implementation Manual (SPIM) Fiscal Year 2015 (<https://www.epa.gov/superfund/superfund-program-implementation-manual>)

SEMS operation and development is supported by the following administrative control and quality assurance procedures:

1. Office of Environmental Information Interim Agency Life Cycle Management Policy Agency Directive 2100.5, (<http://www.epa.gov/irmpoli8/ciopolicy/2100.5.pdf>);
2. The Office of Superfund Remediation and Technology Innovation Quality Management Plan, (http://www.epa.gov/swerffrr/pdf/oswer_qmp.pdf)
3. Agency platform, software, and hardware standards, (<http://basin.rtpnc.epa.gov/ntsd/itroadmap.nsf>);
4. Quality Assurance Requirements in all contract vehicles under which SEMS is being developed and maintained, (<http://www.epa.gov/quality/informationguidelines>); and
5. Agency security procedures, (<http://basin.rtpnc.epa.gov/ntsd/ITRoadMap.nsf/Security?OpenView>)

In addition to the above, specific controls are in place for system design, data conversion, data capture, and SEMS outputs.

Attached Documents:

2014-2015 CERCLIS DECP guidance (2).pdf

OSRE QMP 2013 - Final.docx

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Source Data Reporting Oversight Personnel

HQ - Director, Policy and Program Evaluation Division

Region 1 – Chief, Information & Budget Management Branch or Director, Office of Site Remediation and Restoration

Region 2 Regional Data Specialist

Region 3 – Data Quality Coordinator

Region 4 – Enforcement Data Management Specialist

Region 5 – Enforcement Coordinator.

Region 6 - Compliance Assurance and Enforcement Division Director

Region 7 - SEMS Information Management Coordinator

Region 8 - RCRA/CERCLA Technical Enforcement Program Director

Region 9 - SEMS Information Management Coordinator & Program Specialist

Region 10 - SEMS Information Management Coordinator

Source Data Reporting Oversight Responsibilities: [[Please provide information.]]

Information Systems Oversight Personnel: Information Systems Oversight Personnel

HQ - SEMS System Administrator

Regions 1 – 10 SEMS Information Management Coordinators

Information Systems Oversight Responsibilities: Information Systems Oversight Responsibilities:

The Information Management Coordinator (IMC) is a senior position which serves as regional lead for all Superfund program and SEMS data systems management activities. The following lead responsibilities for regional program planning and

management rest with the IMC:

- Coordinate program planning, budget development, and reporting activities;
- Ensure regional planning and accomplishments are complete, current, and consistent, and accurately reflected in SEMS by working with data sponsors and data owners;
- Provide liaison to HQ on SCAP process and program evaluation issues;
- Coordinate regional evaluations by HQ;
- Ensure that the quality of SEMS data are such that accomplishments and planning data can be accurately retrieved from the system; and,
- Ensure there is "objective" evidence to support accomplishment data entered in SEMS. (Objective Evidence Rule: "All transactions must be supported by objective evidence, that is, documentation that a third party could examine and arrive at the same conclusion.")

3d. Calculation Methodology:

The accomplishment is the percentage resulting from the division of the numerator by the denominator as follows:

- Numerator = The number of PRP-financed RA starts (in the FY) + the number of Fund-financed RA starts (in the FY) with enforcement actions prior to the RA start.
- Denominator = The number of PRP-financed RA starts (in the FY) + Fund financed RA starts (in the FY) with prior enforcement actions at the site + Fund financed RA starts (in the FY) with viable, liable PRPs, at the site, but no enforcement actions prior to the RA start.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Oversight of Final Reporting: In addition to OSRE's general data quality procedures applicable to Superfund enforcement data, OSRE implements several QA procedures specific to Superfund program measures that are derived from SEMS data. OSRE defines each measure in the Superfund Program Implementation Manual (see section 4.1.1), reconciles SEMS data and participates in the GPRA data certification process for OSRE's GPRA goals. The GPRA data certification process takes place at the end of each fiscal year. OSRE subject matter experts and management participate, with the regions, in a review process in which the annual figures for GPRA goals are confirmed and finalized. The Regional Administrator or Deputy Regional Administrator for each region is required to certify at the end of the fiscal year that the SEMS data used to track Superfund enforcement GPRA measures has been reviewed by regional management and is correct. Dissemination takes place in several ways, most notably by inclusion in the Enforcement and Compliance Assurance Accomplishments Report issued by OECA.

The Regional Administrators or Deputy Regional Administrators, and Director of the Office of Site Remediation Enforcement Director all must sign the attached certification form

Final Reporting Oversight Responsibilities: [[Please provide information.]]

Final Reporting Timing: [[Please provide information on timing and, if other than annual, frequency.]]

4b. Data Limitations/Qualifications:

The Superfund Enterprise Management System (SEMS) has replaced the Comprehensive Environmental Response, Compensation, and Liability Information System (CERCLIS) and as such is too new to have been evaluated for data limitations and qualifications. Regarding general CERCLIS Data Limitations/Qualifications: CERCLIS Data Quality. The OIG audit, Information Technology – Comprehensive Environmental Response, Compensation, and Liability Information System (CERCLIS) Data Quality (Report No. 2002-P-00016), dated September 30, 2002 identified some weaknesses. (see <https://www.epa.gov/office-inspector-general/report-comprehensive-environmental-response-compensation-and-liability>) The Agency disagreed with the study design and report conclusions: however, the report provided 11 recommendations on improving data quality with which EPA concurred and implemented. The development and implementation of a quality assurance process for CERCLIS data continued. This process includes delineating data quality objectives for GPRA targets, program measures, and regional data. The Agency began reporting compliance data with current data quality objectives. The data quality indicators are complete, accurate, current, and consistent – which are defined in the CERCLIS QAPP.

4c. Third-Party Audits:

The IG annually reviews the end-of-year SEMS data, in an informal process, to verify the data supporting the performance measure. Typically, there are no published results.

Measure Code: 400 - Millions of pounds of air pollutants reduced, treated, or eliminated through concluded enforcement actions.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

2 - Support Addressing Climate Change and Improving Air Quality

Strategic Target Code and Title:

1 - By 2018, reduce, treat, or eliminate 1360 million estimated pounds of air pollutants

Managing Office:

Office of Compliance

1a. Performance Measure Term Definitions:

Air pollutants:

The Clean Air Act lists the pollutants and sources of pollutants that are to be regulated by EPA. Pollutants include hazardous air pollutants, criteria pollutants, and chemicals that destroy stratospheric ozone. Sources of pollutants include stationary sources (e.g., chemical plants, gas stations, and power plants) and mobile sources (e.g., cars, trucks, and planes).

For more information, see: <https://www.epa.gov/environmental-topics/more-air-topics - common>

Reduced, Treated or Eliminated: Reduced, treated, or eliminated is the quantity of pollutant(s) that will no longer be released to the environment as a result of a non-complying facility returning to its allowable permit limits through the successful completion of an enforcement settlement. Facilities may further reduce, treat or eliminate pollutants by carrying out voluntary Supplemental Environmental Projects.

Concluded enforcement actions: For purposes of this measure, there are two categories of concluded enforcement actions counted.

The first are administrative enforcement actions which are undertaken by EPA through authority granted to it under various federal environmental statutes, such as CERCLA, RCRA, CAA, CWA, TSCA, and others. Administrative enforcement actions can take several forms, including EPA issuing an administrative order requiring a facility to implement specific corrective measures to filing an administrative complaint commencing a formal administrative adjudication. An administrative action is concluded when a written agreement between the defendant/respondent and EPA resolving the complaint is documented, signed by the Regional Administrator or designee, and is filed with the regional hearing clerk.

The second type of enforcement action is known as a civil judicial action which is a formal lawsuit, filed in court, against a person who has either failed to comply with a statutory or regulatory requirement or an administrative order. Civil judicial actions are prosecuted by attorneys from the U.S. Department of Justice for EPA. A concluded action occurs when a consent decree is signed by all parties to the action and filed in the appropriate court and signed by a judge or a written ruling or decision is made by a judge after a full trial.

2a. Original Data Source:

EPA Regional Enforcement Organizations
EPA Regional Program Organizations
EPA Headquarters Enforcement Organizations
Facility Personnel and Facility Contractors
DOJ

2b. Source Data Collection:

EPA calculates the estimated pollutant reductions after case settlement or during discussions with the facility personnel over specific plans for compliance. The final enforcement documents often spell out the terms and methodologies the facility must follow to mitigate and prevent the future release of pollutants. These documents serve as the starting point for EPA's calculations.

Example of consent decree document containing pollutant mitigation instructions to the facility:

<https://www.epa.gov/enforcement/consent-decree-essroc-cement-corporation>

2c. Source Data Reporting:

When a formal administrative or judicial enforcement case is “concluded” enforcement staff enters information into ICIS to document the environmental benefits achieved by the concluded enforcement case. Original source documents may include facility permits, legal documents such as consent decrees and administrative orders, inspection reports, case engineer reports and facility reports. For civil judicial cases, the information is reported when a consent decree or court order, or judgment is entered (not lodged). For administrative cases, information is reported when an administrative order or final agreement is signed.

Environmental benefits should be reported in the year the case is settled, regardless of when the benefits will occur. Reductions are calculated after the judicial consent decree is lodged or entered, or when the administrative compliance order is signed by the region designee and filed with the regional hearing clerk.

Attached Documents:

FY2012 CCDS.docx

3a. Relevant Information Systems:

The ICIS FE&C data system meets Office of Environmental Information (OEI) Lifecycle Management Guidance, which includes data validation processes, internal screen audit checks and verification, system and user documents, data quality audit reports, third party testing reports, and detailed report specifications data calculation methodology. Reference: Quality Assurance and Quality Control procedures: Data Quality: Life Cycle Management Policy, (EPA CIO2121, April 7, 2006)

The Integrated Compliance Information System (ICIS) is a three phase multi-year modernization project that improves the ability of EPA and the states to ensure compliance with the nation's environmental laws with the collection of comprehensive enforcement and compliance information. Phase I, implemented in FY02, replaced several legacy systems, and created an integrated system to support federal enforcement and compliance tracking, targeting and reporting, including GPRA reporting. Phase II, also called Permit

Compliance System (PCS) Modernization, expands ICIS to include the National Pollutant Discharge Elimination System (NPDES) program and enables improved management of the complete program (e.g., stormwater) as well as replacing the legacy PCS. PCS is currently identified as an Agency Federal Managers' Financial Integrity Act (FMFIA) weakness, and the modernization of the system is critical to address the weakness. Phase II was first implemented in FY06 for 21 states and 11 tribes/territories that use ICIS to directly manage their NPDES programs. In FY08, seven more states moved to ICIS from the legacy PCS and began electronically flowing their Discharge Monitoring Report (DMR) data from their states systems via the Exchange Network and CDX to ICIS. In FY09, Phase II continued with implementation of the National Installation of NetDMR allowing NPDES permittees to electronically submit DMR data from permitted facility systems via the Exchange Network to ICIS and migrated three additional states. In FY11 OECA implemented Full-Batch Release 1 of Phase II allowing Batch Flows of permits and facility data from states. FY12 will include Full-Batch Release 2 enabling batch flow will allow Batch Flows of inspection data from states. Inspection information and was implemented early in FY12. The final part of Phase II which will add the remaining NPDES Batch Flows and migrate and all remaining states is projected to be completed in FY13. Phase III will modernize the Air Facility System (AFS) into ICIS. AFS is used by EPA and States to track Clean Air Act enforcement and compliance activities. Integration of AFS into ICIS will modernize and replace a legacy system that does not meet current business needs. Implementation of this phase is projected for FY14.

ICIS contains both source data and transformed data.

OECA's Data System Quality Assurance Plan

Attached Documents:

Data System Quality Assurance Plan (ICIS).doc

3b. Data Quality Procedures:

Annual Data Certification Process - OECA has instituted a semi-annual data certification process for the collection and reporting of enforcement and compliance information. The certification process was set up to ensure all reporting entities are aware of the reporting deadlines, receive the most up-to-date reporting instructions for select measures, follow best data management practices to assure reporting accuracy, and have access to the recent methodologies for calculating pounds of pollutants reduced. The air pounds of pollutants reduced measure is covered by the annual data certification process.

As part of the annual data certification process, regions are provided a checklist to assist them in their data quality procedures.

Quality Management Plan - September 2011

Attached Documents:

FY11 Data Quality Check List.pdf

Data System Quality Assurance Plan (ICIS).doc

OC QMP Concurrence Signatures.pdf

OC QMP 2011 Final.docx

3c. Data Oversight:

Source Data Reporting Oversight

HQ - Director, Enforcement Targeting and Data Division

Region 1 - Division Director, Office of Environmental Stewardship

Region 2 - Director, Office of Enforcement and Compliance Assistance

Region 3 - Director, Office of Enforcement, Compliance and Environmental Justice

Region 4 - Regional Counsel and Director, Office of Environmental Accountability

Region 5 - Director, Office of Enforcement and Compliance Assurance

Region 6 - Compliance Assurance and Enforcement Division Director

Region 7 - Enforcement Coordinator

Region 8 - Director, Policy, Information Management and Environmental Justice

Region 9 - Enforcement Coordinator

Region 10 - Director, Office of Compliance and Enforcement

Information Systems Oversight Personnel

HQ - ICIS System Administrator

Region 1 - ICIS Steward and Data Systems Administrator

Region 2 - ICIS System Administrator

Region 3 - ICIS Data Steward and System Administrator

Region 4 - ICIS System Administrator, Regional Compliance and Enforcement Data Steward

Region 5 - ICIS Data Steward and Systems Administrator

Region 6 - ICIS Data Steward

Region 7 - ICIS Data Steward and Systems Administrator

Region 8 - ICIS System Administrator

Region 9 - ICIS System Administrator

Region 10 - ICIS System Administrator and Data Steward

3d. Calculation Methodology:

The Case Conclusion Data Sheet (CCDS) is a manual data collection tool HQ implemented in FY 1996, updated in FY 2012, to collect information on concluded federal enforcement cases including the case name and identification number, injunctive relief, environmental benefits (including environmental benefits from Supplemental Environmental Projects [SEPs]), and assessed penalties. The CCDS data are entered into the Integrated Information and Compliance System (ICIS). OECA uses data obtained from the CCDS via ICIS to assess the environmental outcomes of its enforcement program.

The CCDS guidance provides detailed calculation methodologies for estimating the environmental benefits on a variety of environmental statutes including air, water, waste, toxics and pesticides. Additionally, the CCDS provides specific instruction on how to enter the environmental benefits information into ICIS.

To view the the CCDS guidance in its entirety go to:

Attached Documents:

CCDS.xps

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting:

The Deputy Regional Administrators, the Office of Civil Enforcement Director, and the Monitoring, Assistance and Program Division Director all must sign the attached certification form.

Timing of Results Reporting: Semiannually

Attached Documents:

Data Certification Form.pdf

4b. Data Limitations/Qualifications:

Pollutant reductions or eliminations reported in ICIS project an estimate of pollutants to be reduced or eliminated if the defendant carries out the requirements of the settlement. The estimates use information available at the time a case settles or an order is issued. In some instances, EPA develops and enters this information on pollutant reduction estimates after the settlement or during continued discussions over specific plans for compliance. Due to the time required for EPA to negotiate a settlement agreement with a defendant, there may be a delay in completing the CCDS. Additionally, because of unknowns at the time of settlement, different levels of technical proficiency, or the nature of a case, OECA's expectation is that the overall amount of pollutants reduced or eliminated is prudently underestimated based on CCDS information. EPA also bases the pollutant estimates on the expectation that the defendant/respondent implements the negotiated settlement agreement.

4c. Third-Party Audits:

Inspector General Report on Pounds of Pollutants Reduced Estimates:

Attached Documents:

Projected Lbs of Pollutants Reduced.pdf

Measure Code: 402 - Millions of pounds of water pollutants reduced, treated, or eliminated through concluded enforcement actions.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

3 - Support Protecting America's Waters

Strategic Target Code and Title:

1 - By 2018, reduce, treat, or eliminate 1,100 million estimated pounds of water pollutants

Managing Office:

Office of Compliance

1a. Performance Measure Term Definitions:

Water pollutants:

EPA divides water pollution sources into two categories: point and non-point. Point sources of water pollution are stationary locations such as sewage treatment plants, factories and ships. Non-point sources are more diffuse and include agricultural runoff, mining activities and paved roads. Under the Clean Water Act, the National Pollutant Discharge Elimination System (NPDES) permit program controls water pollution by regulating point sources that discharge pollutants into waters of the United States. EPA works with state and local authorities to monitor pollution levels in the nation's water and provide status and trend information on a representative variety of ecosystems.

The Clean Water Act (CWA) establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating quality standards for surface waters. The basis of the CWA was enacted in 1948 and was called the Federal Water Pollution Control Act, but the Act was significantly reorganized and expanded in 1972. "Clean Water Act" became the Act's common name with amendments in 1977.

Under the CWA, EPA has implemented pollution control programs such as setting wastewater standards for industry. We have also set water quality standards for all contaminants in surface waters.

The CWA made it unlawful to discharge any pollutant from a point source into navigable waters, unless a permit was obtained. EPA's National Pollutant Discharge Elimination System (NPDES) permit program controls discharges. Point sources are discrete conveyances such as pipes or man-made ditches. Individual homes that are connected to a municipal system, use a septic system, or do not have a surface discharge do not need an NPDES permit; however, industrial, municipal, and other facilities must obtain permits if their discharges go directly to surface waters.

Nonpoint source (NPS) pollution, or polluted runoff, is the major source and cause of water quality impairment for waters on the state water quality limited segment lists required under CWA 303(d). Polluted runoff occurs when rain, snowmelt, irrigation water, and other water sources move across and through land, picking up pollutants and carrying them into lakes, rivers, wetlands, coastal waters and underground sources of drinking water. Taking a watershed approach to environmental issues provides an excellent opportunity for communities and agencies to work together to achieve water quality improvements.

Reduced, Treated or Eliminated: Reduced, treated, or eliminated is the quantity of pollutant(s) that will no longer be released to the environment as a result of a non-complying facility returning to its allowable permit limits through the successful completion of an enforcement settlement. Facilities may further reduce, treat or eliminate pollutants by carrying out voluntary Supplemental Environmental Projects.

Concluded enforcement actions: For purposes of this measure, there are two categories of concluded enforcement actions counted.

The first are administrative enforcement actions which are undertaken by EPA through authority granted to it under various federal environmental statutes, such as CERCLA, RCRA, CAA, CWA, TSCA, and others. Administrative enforcement actions can take several forms, including EPA issuing an administrative order requiring a facility to implement specific corrective measures to filing an administrative complaint commencing a formal administrative adjudication. An administrative action is concluded when a written agreement between the defendant/respondent and EPA resolving the complaint is documented, is signed by the Regional Administrator or designee, and is filed with the regional hearing clerk.

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2a. Original Data Source:

EPA Regional Enforcement Organizations
EPA Regional Program Organizations
EPA Headquarters Enforcement Organizations
Facility Personnel and Facility Contractors
DOJ

2b. Source Data Collection:

EPA calculates the estimated pollutant reductions after case settlement or during discussions with the facility personnel over specific plans for compliance. The final enforcement documents often spell out the terms and methodologies the facility must follow to mitigate and prevent the future release of pollutants. These documents serve as the starting point for EPA's calculations.

Example of consent decree document containing pollutant mitigation instructions to the facility:

<https://www.epa.gov/enforcement/consent-decree-essroc-cement-corporation>

2c. Source Data Reporting:

When a formal administrative or judicial enforcement case is “concluded” enforcement staff enters information into ICIS to document the environmental benefits achieved by the concluded enforcement case. Original source documents may include facility permits, legal documents such as consent decrees and administrative orders, inspection reports, case engineer reports and facility reports. For civil judicial cases, the

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Attached Documents:

FY2012 CCDS.docx

3a. Relevant Information Systems:

The ICIS FE&C data system meets Office of Environmental Information (OEI) Lifecycle Management Guidance, which includes data validation processes, internal screen audit checks and verification, system and user documents, data quality audit reports, third party testing reports, and detailed report specifications data calculation methodology. Reference: Quality Assurance and Quality Control procedures: Data Quality: Life Cycle Management Policy, (EPA CIO2121, April 7, 2006)

The Integrated Compliance Information System (ICIS) is a three phase multi-year modernization project that improves the ability of EPA and the states to ensure compliance with the nation's environmental laws with the collection of comprehensive enforcement and compliance information. Phase I, implemented in FY02, replaced several legacy systems, and created an integrated system to support federal enforcement and compliance tracking, targeting and reporting, including GPRR reporting. Phase II, also called Permit Compliance System (PCS) Modernization, expands ICIS to include the National Pollutant Discharge Elimination System (NPDES) program and enables improved management of the complete program (e.g., stormwater) as well as replacing the legacy PCS. PCS is currently identified as an Agency Federal Managers' Financial Integrity Act (FMFIA) weakness, and the modernization of the system is critical to address the weakness. Phase II was first implemented in FY06 for 21 states and 11 tribes/territories that use ICIS to directly manage their NPDES programs. In FY08, seven more states moved to ICIS from the legacy PCS and began electronically flowing their Discharge Monitoring Report (DMR) data from their states systems via the Exchange Network and CDX to ICIS. In FY09, Phase II continued with implementation of the National Installation of NetDMR allowing NPDES permittees to electronically submit DMR data from permitted facility systems via the Exchange Network to ICIS and migrated three additional states. In FY11 OECA implemented Full-Batch Release 1 of Phase II allowing Batch Flows of permits and facility data from states. FY12 will include Full-Batch Release 2 enabling batch flow will allow Batch Flows of inspection data from states. Inspection information and was implemented early in FY12. The final part of Phase II which will add the remaining NPDES Batch Flows and migrate and all remaining states is projected to be completed in FY13. Phase III will modernize the Air Facility System (AFS) into ICIS. AFS is used by EPA and States to track Clean Air Act enforcement and compliance activities. Integration of AFS into ICIS will modernize and replace a legacy system that does not meet current business needs. Implementation of this phase is projected for FY14.

ICIS contains both source data and transformed data.

OECA's Data System Quality Assurance Plan

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Data System Quality Assurance Plan (ICIS).doc

3b. Data Quality Procedures:

Annual Data Certification Process - OECA has instituted a semi-annual data certification process for the collection and reporting of enforcement and compliance information. The certification process was set up to ensure all reporting entities are aware of the reporting deadlines, receive the most up-to-date reporting instructions for select measures, follow best data management practices to assure reporting accuracy, and have access to the recent methodologies for calculating pounds of pollutants reduced. The air pounds of pollutants reduced measure is covered by the annual data certification process.

As part of the annual data certification process, regions are provided a checklist to assist them in their data quality procedures.

OECA's Quality Management Plan - September 2011

Attached Documents:

FY11 Data Quality Check List.pdf

OC QMP Concurrence Signatures.pdf

OC QMP 2011 Final.docx

3c. Data Oversight:

Source Data Reporting Oversight

HQ - Director, Enforcement Targeting and Data Division

Region 1 - Division Director, Office of Environmental Stewardship

Region 2 - Director, Office of Enforcement and Compliance Assistance

Region 3 - Director, Office of Enforcement, Compliance and Environmental Justice

Region 4 - Regional Counsel and Director, Office of Environmental Accountability

Region 5 - Director, Office of Enforcement and Compliance Assurance

Region 6 - Compliance Assurance and Enforcement Division Director

Region 7 - Enforcement Coordinator

Region 8 - Assistant Regional Administrator for Enforcement, Compliance and Environmental Justice

Region 9 - Enforcement Coordinator

Region 10 - Director, Office of Compliance and Enforcement

Information Systems Oversight Personnel

HQ - ICIS System Administrator

Region 1 - ICIS Steward and Data Systems Administrator

Region 2 - ICIS System Administrator

Region 3 - ICIS Data Steward and System Administrator

Region 4 - ICIS System Administrator, Regional Compliance and Enforcement Data Steward

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Region 8 - ICIS System Administrator
Region 9 - ICIS System Administrator
Region 10 - ICIS System Administrator and Data Steward

3d. Calculation Methodology:

The Case Conclusion Data Sheet (CCDS) is a manual data collection tool HQ implemented in FY 1996, updated in FY 2012, to collect information on concluded federal enforcement cases including the case name and identification number, injunctive relief, environmental benefits (including environmental benefits from Supplemental Environmental Projects [SEPs]), and assessed penalties. The CCDS data are entered into the Integrated Information and Compliance System (ICIS). OECA uses data obtained from the CCDS via ICIS to assess the environmental outcomes of its enforcement program.

The CCDS guidance provides detailed calculation methodologies for estimating the environmental benefits on a variety of environmental statutes including air, water, waste, toxics and pesticides. Additionally, the CCDS provides specific instruction on how to enter the environmental benefits information into ICIS.

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Attached Documents:

CCDS.xps

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting:

The Deputy Regional Administrators, the Office of Civil Enforcement Director, and the Monitoring, Assistance and Program Division Director all must sign the attached certification form.

Timing of Results Reporting: Semiannually

Attached Documents:

Data Certification Form.pdf

4b. Data Limitations/Qualifications:

Pollutant reductions or eliminations reported in ICIS project an estimate of pollutants to be reduced or eliminated if the defendant carries out the requirements of the settlement. (Information on expected outcomes of state enforcement is not available.) The estimates use information available at the time a case settles or an order is issued. In some instances, EPA develops and enters this information on pollutant reduction estimates after the settlement or during continued discussions over specific plans for compliance. Due to the time required for EPA to negotiate a settlement agreement with a defendant, there may be a delay in completing the CCDS. Additionally, because of unknowns at the time of settlement, different levels of technical proficiency, or the nature of a case, OECA's expectation is that the overall amount of pollutants reduced or eliminated is prudently underestimated based on CCDS information. EPA also bases the pollutant estimates on the expectation that the defendant/respondent implements the negotiated settlement agreement.

4c. Third-Party Audits:

Inspector General Report on Pounds of Pollutants Reduced:

Attached Documents:

Projected Lbs of Pollutants Reduced.pdf

Measure Code: 404 - Millions of pounds of toxic and pesticide pollutants reduced, treated, or eliminated through concluded enforcement actions.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

5 - Support Ensuring the Safety of Chemicals and Preventing Pollution

Strategic Target Code and Title:

1 - By 2018, reduce, treat, or eliminate 11 million estimated pounds of toxic and pesticide pollutants

Managing Office:

Office of Compliance

1a. Performance Measure Term Definitions:

Toxic and pesticide pollutants:

The Toxic Substances Control Act of 1976 provides EPA with authority to require reporting, record-keeping and testing requirements; and restrictions relating to chemical substances and/or mixtures; and the production, importation, use, and disposal of specific chemicals, including lead-based paint, polychlorinated biphenyls (PCBs), and asbestos. Lead-based paint is particularly dangerous to children: exposure may cause reduced intelligence, learning disabilities, behavior problems and slowed physical development. Because LBP is found in pre-1978 buildings, it is more common in communities predominated by older housing, which usually are low-income, minority and EJ communities. Asbestos in schools, if not properly managed, can expose children, teachers and other school staff to harm that may not manifest for years. PCBs bioaccumulate and thus cause a variety of adverse health effects. Asbestos and PCBs are also generally found in older buildings. Additionally, PCBs are generally found in older transformers, capacitors and some hydraulic equipment and more recently in recycled and used oil. Inappropriate abatement and disposal of asbestos and PCBs can be dangerous. For more information on the Toxics program go to: <http://www.epa.gov/laws-regulations/summary-toxic-substances-control-act>

The Federal Insecticide, Fungicide and Rodenticide Act (FIFRA) provides EPA the authority to regulate pesticides to prevent unreasonable adverse affects on the environment. The term "unreasonable adverse effects on the environment" means: "(1) any unreasonable risk to man or the environment, taking into account the economic, social, and environmental costs and benefits of the use of any pesticide, or (2) a human dietary risk from residues that result from a use of a pesticide in or on any food inconsistent with the standard under section 408 of the Federal Food, Drug, and Cosmetic Act." The term pesticide includes many kinds of ingredients in products, such as insect repellants, weed killers, disinfectants, and swimming pool chemicals which are designed to prevent, destroy, repel or reduce pests of any sort. Pesticides are found in nearly every home, business, farm, school, hospital and park in the United States. EPA must evaluate pesticides thoroughly before they can be marketed and used in the United States to ensure that they will meet federal safety standards to protect human health and the environment. Pesticides that meet the requirements are granted a license or "registration" which permits their distribution, sale, and use according to specific use directions and requirements identified on the label. For more information on the pesticide program go to:

<https://www.epa.gov/pesticides>

Reduced, Treated or Eliminated: Reduced, treated, or eliminated is the quantity of pollutant(s) that will no longer be released to the environment as a result of a non-complying facility returning to its allowable permit limits through the successful completion of an enforcement settlement. Facilities may further reduce, treat or eliminate pollutants by carrying out voluntary Supplemental Environmental Projects.

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2a. Original Data Source:

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EPA Headquarters Enforcement Organizations
Facility Personnel and Facility Contractors
DOJ

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3a. Relevant Information Systems:

The ICIS FE&C data system meets Office of Environmental Information (OEI) Lifecycle Management Guidance, which includes data validation processes, internal screen audit checks and verification, system and user documents, data quality audit reports, third party testing reports, and detailed report specifications data calculation methodology. Reference: Quality Assurance and Quality Control procedures: Data Quality: Life Cycle Management Policy, (EPA CIO2121, April 7, 2006)

The Integrated Compliance Information System (ICIS) is a three phase multi-year modernization project that improves the ability of EPA and the states to ensure compliance with the nation's environmental laws with the collection of comprehensive enforcement and compliance information. Phase I, implemented in FY02, replaced several legacy systems, and created an integrated system to support federal enforcement and compliance tracking, targeting and reporting, including GPRR reporting. Phase II, also called Permit Compliance System (PCS) Modernization, expands ICIS to include the National Pollutant Discharge Elimination System (NPDES) program and enables improved management of the complete program (e.g., stormwater) as well as replacing the legacy PCS. PCS is currently identified as an Agency Federal Managers' Financial Integrity Act (FMFIA) weakness, and the modernization of the system is critical to address the weakness. Phase II was first implemented in FY06 for 21 states and 11 tribes/territories that use ICIS to directly manage their NPDES programs. In FY08, seven more states moved to ICIS from the legacy PCS and began electronically flowing their Discharge Monitoring Report (DMR) data from their states systems via the Exchange Network and CDX to ICIS. In FY09, Phase II continued with implementation of the National Installation of NetDMR allowing NPDES permittees to electronically submit DMR data from permitted facility systems via the Exchange Network to ICIS and migrated three additional states. In FY11 OECA implemented Full-Batch Release 1 of Phase II allowing Batch Flows of permits and facility data from states. FY12 will include Full-Batch Release 2 enabling batch flow will allow Batch Flows of inspection data from states. Inspection information and was implemented early in FY12. The final part of Phase II which will add the remaining NPDES Batch Flows and migrate and all remaining states is projected to be completed in FY13. Phase III will modernize the Air Facility System (AFS) into ICIS. AFS is used by EPA and States to track Clean Air Act enforcement and compliance activities. Integration of AFS into ICIS will modernize and replace a legacy system that does not meet current business needs. Implementation of this phase is projected for FY14.

ICIS contains both source data and transformed data.

OECA's Data System Quality Assurance Plan

Attached Documents:

Data System Quality Assurance Plan (ICIS).doc

3b. Data Quality Procedures:

Annual Data Certification Process - OECA has instituted a semi-annual data certification process for the collection and reporting of enforcement and compliance information. The certification process was set up to ensure all reporting entities are aware of the reporting deadlines, receive the most up-to-date reporting instructions for select measures, follow best data management practices to assure reporting accuracy, and have access to the recent methodologies for calculating pounds of pollutants reduced. The toxics and pesticides pounds of pollutants reduced measure is covered by the annual data certification process.

As part of the annual data certification process, regions are provided a checklist to assist them in their data quality procedures.

OECA's QMP - September 2011

Attached Documents:

FY11 Data Quality Check List.pdf

OC QMP Concurrence Signatures.pdf

OC QMP 2011 Final.docx

3c. Data Oversight:

Source Data Reporting Oversight:

HQ - Director, Enforcement Targeting and Data Division

Region 1 - Division Director, Office of Environmental Stewardship

Region 2 - Director, Office of Enforcement and Compliance Assistance

Region 3 - Director, Office of Enforcement, Compliance and Environmental Justice

Region 4 - Regional Counsel and Director, Office of Environmental Accountability

Region 5 - Director, Office of Enforcement and Compliance Assurance

Region 6 - Compliance Assurance and Enforcement Division Director

Region 7 - Enforcement Coordinator

Region 8 - Director, Policy, Information Management and Environmental Justice

Region 9 - Enforcement Coordinator

Region 10 - Director, Office of Compliance and Enforcement

Information Systems Oversight Personnel

HQ - ICIS System Administrator

Region 1 - ICIS Steward and Data Systems Administrator

Region 2 - ICIS System Administrator

Region 3 - ICIS Data Steward and System Administrator

Region 4 - ICIS System Administrator, Regional Compliance and Enforcement Data Steward

Region 5 - ICIS Data Steward and Systems Administrator

Region 6 - ICIS Data Steward

Region 7 - ICIS Data Steward and Systems Administrator

Region 8 - ICIS System Administrator

Region 9 - ICIS System Administrator

3d. Calculation Methodology:

The Case Conclusion Data Sheet (CCDS) is a manual data collection tool HQ implemented in FY 1996, updated in FY 2012, to collect information on concluded federal enforcement cases including the case name and identification number, injunctive relief, environmental benefits (including environmental benefits from Supplemental Environmental Projects [SEPs]), and assessed penalties. The CCDS data are entered into the Integrated Information and Compliance System (ICIS). OECA uses data obtained from the CCDS via ICIS to assess the environmental outcomes of its enforcement program.

The CCDS guidance provides detailed calculation methodologies for estimating the environmental benefits on a variety of environmental statutes including air, water, waste, toxics and pesticides. Additionally, the CCDS provides specific instruction on how to enter the environmental benefits information into ICIS.

To view the the CCDS guidance in its entirety go to:

Attached Documents:

CCDS.xps

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting: The Deputy Regional Administrators, the Office of Civil Enforcement Director, and the Monitoring, Assistance and Program Division Director all must sign the attached certification form.

Timing of Results Reporting: Semiannually

Attached Documents:

Data Certification Form.pdf

4b. Data Limitations/Qualifications:

Pollutant reductions or eliminations reported in ICIS project an estimate of pollutants to be reduced or eliminated if the defendant carries out the requirements of the settlement. (Information on expected outcomes of state enforcement is not available.) The estimates use information available at the time a case settles or an order is issued. In some instances, EPA develops and enters this information on pollutant reduction estimates after the settlement or during continued discussions over specific plans for compliance. Due to the time required for EPA to negotiate a settlement agreement with a defendant, there may be a delay in completing the CCDS. Additionally, because of unknowns at the time of settlement, different levels of technical proficiency, or the nature of a case, OECA's expectation is that the overall amount of pollutants reduced or eliminated is prudently underestimated based on CCDS information. EPA also bases the pollutant estimates on the expectation that the defendant/respondent implements the negotiated settlement agreement.

4c. Third-Party Audits:

Inspector General Report on Pounds of Pollution Reduced Estimates:

Attached Documents:

Projected Lbs of Pollutants Reduced.pdf

Measure Code: 405 - Millions of pounds of hazardous waste reduced, treated, or eliminated through concluded enforcement actions.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

4 - Support Cleaning Up Communities and Advancing Sustainable Development

Strategic Target Code and Title:

1 - By 2018, treat, minimize, or properly dispose of 9,200 million estimated pounds of hazardous waste

Managing Office:

Office of Compliance

1a. Performance Measure Term Definitions:

Hazardous waste: Hazardous waste is defined as liquid, solid, contained gas, or sludge wastes that contain properties that are dangerous or potentially harmful to human health or the environment.

Hazardous wastes are generally regulated by the Resource Conservation and Recovery Act (RCRA) and cleaned up under the RCRA Corrective Action Program or CERCLA (Comprehensive Environmental Response, Compensation, and Liability Act; also known as Superfund). RCRA is comprised of three major programs: Subtitle C (the hazardous waste management program), Subtitle D (the solid waste program), and Subtitle I (the UST program). Under Subtitle C, EPA has developed a comprehensive program to ensure that all hazardous waste is safely managed from the time it is generated to its final disposition at a Treatment, Storage, or Disposal (TSD) facility. The objective of the “cradle-to-grave” management system is to ensure that hazardous waste is handled in a manner that protects human health and the environment. To this end, there are Subtitle C regulations for the generation, transportation, and treatment, storage, or disposal of hazardous wastes.

Through the RCRA Corrective Action Program, EPA requires the investigation and cleanup, or in-situ or ex-situ treatment of hazardous releases at RCRA facilities. The corrective action program is structured around elements common to most cleanups under other EPA programs: an initial site assessment, characterization of the contamination, and the evaluation and implementation of cleanup alternatives, both immediate and long-term. Components of a cleanup action can impact all media types, including releases to the air, surface or groundwater, and cleanup of contaminated soil.

For more information on the different types of hazardous waste go to: <https://www.epa.gov/hw>

Reduced, Treated or Eliminated: Reduced, treated, or eliminated is the quantity of pollutant(s) that will no longer be released to the environment as a result of a non-complying facility returning to its allowable permit limits through the successful completion of an enforcement settlement. Facilities may further reduce, treat or eliminate pollutants by carrying out voluntary Supplemental Environmental Projects.

Concluded enforcement actions: For purposes of this measure, there are two categories of concluded enforcement actions counted.

The first are administrative enforcement actions which are undertaken by EPA through authority granted to it under various federal environmental statutes, such as CERCLA, RCRA, CAA, CWA, TSCA, and others. Administrative enforcement actions can take several forms, including EPA issuing an administrative order requiring a facility to implement specific corrective measures to filing an administrative complaint commencing a formal administrative adjudication. An administrative action is concluded when a written agreement between the defendant/respondent and EPA resolving the complaint is documented, signed by the Regional Administrator or designee, and is filed with the regional hearing clerk.

The second type of enforcement action is known as a civil judicial action which is a formal lawsuit, filed in court, against a person who has either failed to comply with a statutory or regulatory requirement or an administrative order. Civil judicial actions attorneys from the U.S. Department of Justice prosecute civil cases for EPA. A concluded action occurs when a consent decree is signed by all parties to the action and filed in the appropriate court and signed by a judge or a written ruling or decision is made by a judge after a full trial.

2a. Original Data Source:

- EPA Regional Enforcement Organizations
- EPA Regional Program Organizations
- EPA Headquarters Enforcement Organizations
- Facility Personnel and Facility Contractors
- DOJ

2b. Source Data Collection:

EPA calculates the estimated pollutant reductions after case settlement or during discussions with the facility personnel over specific plans for compliance. The final enforcement documents often spell out the terms and methodologies the facility must follow to mitigate and prevent the future release of pollutants. These documents serve as the starting point for EPA's calculations.

Example of consent decree document containing pollutant mitigation instructions to the facility:

<https://www.epa.gov/enforcement/consent-decree-essroc-cement-corporation>

2c. Source Data Reporting:

When a formal administrative or judicial enforcement case is “concluded” enforcement staff enters information into ICIS to document the environmental benefits achieved by the concluded enforcement case. Original source documents may include facility permits, legal documents such as consent decrees and administrative orders, inspection reports, case engineer reports and facility reports. For civil judicial cases, the information is reported when a consent decree or court order, or judgment is entered (not lodged). For administrative cases, information is reported when an administrative order or final agreement is signed.

Environmental benefits should be reported in the year the case is settled, regardless of when the benefits will occur. Reductions are calculated after the judicial consent decree is lodged or entered, or when the administrative compliance order is signed by the region designee and filed with the regional hearing clerk.

Attached Documents:
FY2012 CCDS.docx

3a. Relevant Information Systems:

The ICIS FE&C data system meets Office of Environmental Information (OEI) Lifecycle Management Guidance, which includes data validation processes, internal screen audit checks and verification, system and user documents, data quality audit reports, third party testing reports, and detailed report specifications data calculation methodology. Reference: Quality Assurance and Quality Control procedures: Data Quality: Life Cycle Management Policy, (EPA CIO2121, April 7, 2006)

The Integrated Compliance Information System (ICIS) is a three phase multi-year modernization project that improves the ability of EPA and the states to ensure compliance with the nation's environmental laws with the collection of comprehensive enforcement and compliance information. Phase I, implemented in FY02, replaced several legacy systems, and created an integrated system to support federal enforcement and compliance tracking, targeting and reporting, including GPRA reporting. Phase II, also called Permit Compliance System (PCS) Modernization, expands ICIS to include the National Pollutant Discharge Elimination System (NPDES) program and enables improved management of the complete program (e.g., stormwater) as well as replacing the legacy PCS. PCS is currently identified as an Agency Federal Managers' Financial Integrity Act (FMFIA) weakness, and the modernization of the system is critical to address the weakness. Phase II was first implemented in FY06 for 21 states and 11 tribes/territories that use ICIS to directly manage their NPDES programs. In FY08, seven more states moved to ICIS from the legacy PCS and began electronically flowing their Discharge Monitoring Report (DMR) data from their states systems via the Exchange Network and CDX to ICIS. In FY09, Phase II continued with implementation of the National Installation of NetDMR allowing NPDES permittees to electronically submit DMR data from permitted facility systems via the Exchange Network to ICIS and migrated three additional states. In FY11 OECA implemented Full-Batch Release 1 of Phase II allowing Batch Flows of permits and facility data from states. FY12 will include Full-Batch Release 2 enabling batch flow will allow Batch Flows of inspection data from states. Inspection information and was implemented early in FY12. The final part of Phase II which will add the remaining NPDES Batch Flows and migrate and all remaining states is projected to be completed in FY13. Phase III will modernize the Air Facility System (AFS) into ICIS. AFS is used by EPA and States to track Clean Air Act enforcement and compliance activities. Integration of AFS into ICIS will modernize and replace a legacy system that does not meet current business needs. Implementation of this phase is projected for FY14.

ICIS contains both source data and transformed data.

OECA's Data System Quality Assurance Plan

Attached Documents:

Data System Quality Assurance Plan (ICIS).doc

3b. Data Quality Procedures:

Annual Data Certification Process - OECA has instituted a semi-annual data certification process for the collection and reporting of enforcement and compliance information. The certification process was set up to ensure all reporting entities are aware of the reporting deadlines, receive the most up-to-date reporting instructions for select measures, follow best data management practices to assure reporting accuracy, and have access to the recent methodologies for calculating pounds of pollutants reduced. The hazardous waste pounds of pollutants reduced measure is covered by the annual data certification process.

As part of the annual data certification process, regions are provided a checklist to assist them in their data quality procedures.

OECA's Quality Management Plan - September 2011

Attached Documents:

FY11 Data Quality Check List.pdf

OC QMP Concurrence Signatures.pdf

OC QMP 2011 Final.docx

3c. Data Oversight:

Source Data Reporting Oversight

HQ - Director, Enforcement Targeting and Data Division

Region 1 - Division Director, Office of Environmental Stewardship

Region 2 - Director, Office of Enforcement and Compliance Assistance

Region 3 - Director, Office of Enforcement, Compliance and Environmental Justice

Region 4 - Regional Counsel and Director, Office of Environmental Accountability

Region 5 - Director, Office of Enforcement and Compliance Assurance

Region 6 - Compliance Assurance and Enforcement Division Director

Region 7 - Enforcement Coordinator

Region 8 - Assistant Regional Administrator for Enforcement, Compliance and Environmental Justice

Region 9 - Enforcement Coordinator

Region 10 - Director, Office of Compliance and Enforcement

Information Systems Oversight Personnel

HQ - ICIS System Administrator

Region 1 - ICIS Steward and Data Systems Administrator

Region 2 - ICIS System Administrator

Region 3 - ICIS Data Steward and System Administrator

Region 4 - ICIS System Administrator, Regional Compliance and Enforcement Data Steward

Region 5 - ICIS Data Steward and Systems Administrator

Region 6 - ICIS Data Steward

Region 7 - ICIS Data Steward and Systems Administrator

Region 8 - ICIS System Administrator

Region 9 - ICIS System Administrator

Region 10 - ICIS System Administrator and Data Steward

3d. Calculation Methodology:

The Case Conclusion Data Sheet (CCDS) is a manual data collection tool HQ implemented in FY 1996, updated in FY 2012, to collect information on concluded federal enforcement cases including the case name and identification number, injunctive relief, environmental benefits (including environmental benefits from Supplemental Environmental Projects [SEPs]), and assessed penalties. The CCDS data are entered into the Integrated Information and Compliance System (ICIS). OECA uses data obtained from the CCDS via ICIS to assess the environmental outcomes of its enforcement program.

The CCDS guidance provides detailed calculation methodologies for estimating the environmental benefits on a variety of environmental statutes including air, water, waste, toxics and pesticides. Additionally, the CCDS provides specific instruction on how to enter the environmental benefits information into ICIS.

To view the the CCDS guidance in its entirety go to:

Attached Documents:

CCDS.xps

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting: The Deputy Regional Administrators, the Office of Civil Enforcement Director, and the Monitoring, Assistance and Program Division Director all must sign the attached certification form.

Timing of Results Reporting: Semiannually

Attached Documents:

Data Certification Form.pdf

4b. Data Limitations/Qualifications:

Pollutant reductions or eliminations reported in ICIS project an estimate of pollutants to be reduced or eliminated if the defendant carries out the requirements of the settlement. (Information on expected outcomes of state enforcement is not available.) The estimates use information available at the time a case settles or an order is issued. In some instances, EPA develops and enters this information on pollutant reduction estimates after the settlement or during continued discussions over specific plans for compliance. Due to the time required for EPA to negotiate a settlement agreement with a defendant, there may be a delay in completing the CCDS. Additionally, because of unknowns at the time of settlement, different levels of technical proficiency, or the nature of a case, OECA's expectation is that the overall amount of pollutants reduced or eliminated is prudently underestimated based on CCDS information. EPA also bases the pollutant estimates on the expectation that the defendant/respondent implements the negotiated settlement agreement.

4c. Third-Party Audits:

Inspector General Report on Pounds of Pollutants Reduced estimates:

Attached Documents:

Projected Lbs of Pollutants Reduced.pdf

Measure Code: 409 - Number of federal inspections and evaluations.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

1 - Maintain Enforcement Presence

Strategic Target Code and Title:

1 - By 2018, conduct 70,000 federal inspections and evaluations

Managing Office:

1a. Performance Measure Term Definitions:

Conduct: Performance of activities involving observation of facility operations and collection of data for the purpose of determining compliance status.

Federal: Activities authorized by, and conducted on behalf of, EPA.

Inspections: On-site activities conducted for the purpose of establishing the compliance status of facilities or sites with applicable laws, standards, regulations, permits, and/or of supporting appropriate enforcement action (administrative, civil judicial or criminal) including:

- (1) Observation of pollution abatement equipment, facility operations, maintenance practices, self monitoring practices, records, and laboratory equipment;
- (2) Collection of evidence, including but not limited to emission monitoring measurements, other analytical field procedures such as sampling, the associated quality assurance procedures, and in-depth engineering evaluations.

Evaluations: Clean Air Act Evaluations can be either a Full Compliance Evaluation (FCE) or a Partial Compliance Evaluation (PCE). A Full Compliance Evaluation (FCE) is a comprehensive evaluation of the compliance status of the facility. An FCE includes: 1) a review of all required reports and the underlying records; 2) an assessment of air pollution control devices and operating conditions; 3) observing visible emissions; 4) a review of facility records and operating logs; 5) an assessment of process parameters, such as feed rates, raw material compositions, and process rates; and 6) a stack test if there is no other way to determine compliance with the emission limits.

A Partial Compliance Evaluation (PCE) is a documented compliance assessment focusing on a subset of regulated pollutants, regulatory requirements, or emission units at a given facility.

2a. Original Data Source:

- EPA Regional Enforcement Organizations
- EPA Regional Program Organizations
- EPA Headquarters Enforcement Organizations
- Facility Personnel and Facility Contractors
- EPA designated State or Tribal Government Personnel

2b. Source Data Collection:

Collection Methodology: The source data for this measure is found in the inspector's report and documented on the Inspection Conclusion Data Sheet (ICDS). The ICDS reporting instructions may be found at: <http://intranet.epa.gov/oeca/oc/resources/etdd/reporting/fy2012/reportingplanfy12neiguide.pdf>

Quality Procedures: As part of the annual data certification process, regions are provided a checklist to assist them in their data quality procedures. The checklist is found at:

<http://intranet.epa.gov/oeca/oc/resources/etdd/reporting/fy2012/reportingplanfy12-attachment7-fy2012bestpractices.pdf>

Geographical Extent: Site or facility specific data are reported by the EPA Regional offices and aggregated at the national level.

Spatial Detail: Site specific data identified by street address, city, state and zip code are reported by EPA Regional offices and aggregated at the national level.

2c. Source Data Reporting:

Data Submission and Data Entry: The Inspection Conclusion Data Sheet (ICDS) is used to record key activities and outcomes at facilities during on-site inspections and evaluations. Inspectors use the ICDS form while performing inspections or investigation to collect information on on-site complying actions taken by facilities, deficiencies observed, and compliance assistance provided. The information from the completed ICDS form is entered into ICIS or reported manually.

Frequency and Timing of Data Transmission: Enforcement staff report data on a semiannual fiscal year basis. Data must be submitted no later than April 15th (mid-year) and October 15th (end-of-year) for activity conducted in the preceding fiscal year.

3a. Relevant Information Systems:

The Integrated Compliance Information System Federal Enforcement & Compliance (ICIS FE&C) database tracks a portion of EPA's federal inspections. PCS and ICIS-NPDES track federal CWA/NPDES inspections. The Airs Facility Subsystem (AFS) tracks CAA stationary sources inspections and evaluations. The RCRAInfo database tracks RCRA Subtitle C inspections. UIC inspections are reported to the OW UIC database and can be reported manually to ICIS-FE&C by EPA regional staff.

ICIS. The Integrated Compliance Information System (ICIS) is a three phase multi-year modernization project that improves the ability of EPA and the states to ensure compliance with the nation's environmental laws with the collection of comprehensive enforcement and compliance information. Phase I, implemented in FY02, replaced several legacy systems, and created an integrated system to support federal enforcement and compliance tracking, targeting and reporting, including GPRAs reporting. Phase II, also called Permit Compliance System (PCS) Modernization, expands ICIS to include the National Pollutant Discharge Elimination System (NPDES) program and enables improved management of the complete program (e.g., stormwater) as well as replacing the legacy PCS. PCS is currently identified as an Agency Federal Managers' Financial Integrity Act (FMFIA) weakness, and the modernization of the system is critical to address the weakness. Phase II was first implemented in FY06 for 21 states and 11 tribes/territories that use ICIS to directly manage their NPDES programs. In FY08, seven more states moved to ICIS from the legacy PCS and began electronically flowing their Discharge Monitoring Report (DMR) data from their states systems via the Exchange Network and CDX to ICIS.

In FY09, Phase II continued with implementation of the National Installation of NetDMR allowing NPDES permittees to electronically submit DMR data from permitted facility systems via the Exchange Network to ICIS and migrated three additional states. In FY11 OECA implemented Full-Batch Release 1 of Phase II allowing Batch Flows of permits and facility data from states. FY12 will include Full-Batch Release 2 enabling batch flow will allow Batch Flows of inspection data from states. Inspection information and was implemented early in FY12. The final part of Phase II which will add the remaining NPDES Batch Flows and migrate and all remaining states is projected to be completed in FY13. Phase III will modernize the Air Facility System (AFS) into ICIS. AFS is used by EPA and States to track Clean Air Act enforcement and compliance activities. Integration of AFS into ICIS will modernize and replace a legacy system that does not meet current business needs. Implementation of this phase is projected for FY14.

ICIS contains both source data and transformed data.

The ICIS FE&C data system meets Office of Environmental Information (OEI) Lifecycle Management Guidance, which includes data validation processes, internal screen audit checks and verification, system and user documents, data quality audit reports, third party testing reports, and detailed report specifications data calculation methodology. Reference: Quality Assurance and Quality Control procedures: Data Quality: Life Cycle Management Policy, (EPA CIO2121, April 7, 2006)

To support the Government Performance and Results Act (GPRA), the Agency's information quality guidelines, and other significant enforcement and compliance policies on performance measurement, OECA instituted a semiannual certification of the overall accuracy of ICIS information.

ICIS contains both source data and transformed data.

Attached Documents:

Data System Quality Assurance Plan (ICIS).doc

3b. Data Quality Procedures:

Annual Data Certification Process - OECA has instituted a semi-annual data certification process for the collection and reporting of enforcement and compliance information. The certification process was set up to ensure all reporting entities are aware of the reporting deadlines, receive the most up-to-date reporting instructions for select measures, follow best data management practices to assure reporting accuracy, and have access to the recent methodologies for calculating pounds of pollutants reduced. The air pounds of pollutants reduced measure is covered by the annual data certification process. Each office within the Office of Enforcement and Compliance Assurance (OECA) prepares Quality Management Plans (QMPs) every five years. As part of the annual data certification process, regions are provided a checklist to assist them in their data quality procedures (attached).

Attached Documents:

OC QMP Concurrence Signatures.pdf

FY12 Data Quality Check List.pdf

OC QMP 2011 Final.docx

3c. Data Oversight:

Source Data Reporting Oversight

HQ - Director, Enforcement Targeting and Data Division
Region 1 - Division Director, Office of Environmental Stewardship
Region 2 - Director, Office of Enforcement and Compliance Assistance
Region 3 - Director, Office of Enforcement, Compliance and Environmental Justice
Region 4 - Regional Counsel and Director, Office of Environmental Accountability
Region 5 - Director, Office of Enforcement and Compliance Assurance
Region 6 - Compliance Assurance and Enforcement Division Director
Region 7 - Enforcement Coordinator
Region 8 - Director, Policy, Information Management and Environmental Justice
Region 9 - Enforcement Coordinator
Region 10 - Director, Office of Compliance and Enforcement

Information Systems Oversight Personnel

HQ - ICIS System Administrator
Region 1 - ICIS Steward and Data Systems Administrator
Region 2 - ICIS System Administrator
Region 3 - ICIS Data Steward and System Administrator
Region 4 - ICIS System Administrator, Regional Compliance and Enforcement Data Steward
Region 5 - ICIS Data Steward and Systems Administrator
Region 6 - ICIS Data Steward
Region 7 - ICIS Data Steward and Systems Administrator
Region 8 - ICIS System Administrator
Region 9 - ICIS System Administrator
Region 10 - ICIS System Administrator and Data Steward

3d. Calculation Methodology:

Decision Rules for Selecting Data: The following federal program area inspection and evaluation types are counted:

CAA: CAA Stationary Source FCEs, CAA Stationary Source PCEs, CAA CFC only PCEs, CAA Mobile Sources, CAA CFC only FCEs, CAA 112r, Asbestos D & R, Wood Heater Evaluation

CWA: NPDES Minors, NPDES Majors, Pretreatment IUs, Pretreatment POTWs, CWA-311(FRP), CWA-311(SPCC), CWA-404 (Wetlands)

EPCRA: EPCRA 313 Data Quality, EPCRA 313 Non Data Quality (Non-Reporters), EPCRA non-313

FIFRA: FIFRA, FIFRA GLP

MPRSA: MPRSA

RCRA: RCRA-HW, RCRA-UST, RCRA 4005 Subtitle D

SDWA: SDWA-PWSS, SDWA-UIC

TCSA: TSCA GLP, TSCA Core, TSCA PCBs, TSCA Asbestos/ AHERA, TSCA Lead-based Paint

Definitions of Variables: "Not applicable."

Explanation of Calculations: "Not applicable."

Explanation of Assumptions: "Not applicable."

Unit of Measure: Numerical

Timeframe of Result: Annually by fiscal year.

Documentation of Methodological Changes: "Not applicable."

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

Oversight of Final Reporting:

The Deputy Regional Administrators, the Office of Civil Enforcement Director, and the Monitoring, Assistance and Program Division Director all must sign the attached certification form.

Frequency and Timing of Results Reporting: Semiannually.

Attached Documents:

OC QMP Concurrence Signatures.pdf

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: No error estimate is available.

Data Lag Length and Explanation: From the October 31 end-of-year date, approximately 10-12 weeks to allow for QA/QC of the data.

Methodological Changes: "Not Applicable."

4c. Third-Party Audits:

Not Applicable

Measure Code: 421 - Percentage of conviction rate for criminal defendants.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

6 - Enhance Strategic Deterrence through Criminal Enforcement

Strategic Target Code and Title:

4 - By 2018, maintain an 85 percent conviction rate for criminal defendants

Managing Office:

Office of Criminal Enforcement;Forensics and Training

1a. Performance Measure Term Definitions:

Criminal Cases: A criminal case exists when EPA’s criminal enforcement program, specifically special agents in the Criminal Investigation Division (CID), investigate allegations of criminal violations of environmental law. The EPA active (“open”) criminal case docket consists of cases in all stages of the legal process – from initial investigations to charged cases to convicted cases that are awaiting sentencing or are on appeal.

A criminal case with charges filed is one in which, based upon an investigation by the EPA criminal enforcement program, the U.S. Department of Justice formally files charges against one or more defendants (either a person, company or both) alleging a criminal violation of one or more of the environmental statutes and/or associated violations of the U.S. Criminal Code in U.S. District Court.

Conviction: A defendant (either a person or company) who has been previously charged with committing one or more environmental crimes is found legally “guilty” of at least one of those crimes. Legal guilt (conviction) occurs either when the defendant pleads guilty or is convicted following a trial.

For more information about EPA's Criminal Enforcement Program, visit <http://www.epa.gov/compliance/criminal/>

2a. Original Data Source:

As part of the investigative process, the Criminal Investigation Division (CID) special agent assigned completes an Investigation Activity Report (IAR). The IAR is the primary means used to document all investigative activity, operational activities, judicial activities, or responses to investigative tasking or leads. Investigative activities include interviews, surveillance, electronic monitoring, arrests, searches, evidence handling and disposition, and document reviews. Operational activities include undercover reports, and consensual monitoring. Judicial activities include indictments, criminal informations, criminal complaints, guilty pleas, trials, convictions, and sentencing hearings and results. Investigative tasking relates to collateral requests from CID headquarters and other offices, as well as memorializing activity conducted in furtherance of lead inquiries. All relevant data is entered into the Criminal Case Reporting System (CCRS, cf section 3a), which tracks a criminal investigation from the time it is first opened through all stages of the legal process to a conclusion (e.g., when the case is indicted, when a defendant is convicted, sentenced or acquitted).CCRS is used to create the IAR

The data used to compile the measure is based upon the legal documents filed in the U.S. District Court where the defendant is prosecuted. Charges can be dismissed after exculpatory evidence in their favor was entered into the record or the legal process can result in either a conviction or an acquittal. A conviction is also

reaffirmed at the subsequent sentencing of a convicted defendant, when the judge imposes the sentence through a legal document known as the Judgment and Commitment Notice. (J&C).

2b. Source Data Collection:

Source Data Collection Methods:

The measure is based upon enforcement and legal documents which memorialize the status of a criminal prosecution. As noted above, the data for the measure are formally compiled through the IARs and DOJ legal documents entered into CCRS. In addition, all public legal documents relating to a charged case, including the conviction, are also entered into and are publicly available through Public Access to Court Electronic Records (PACER), an electronic public access service that allows users to obtain case and docket information from federal appellate, district and bankruptcy courts

(<http://www.pacer.gov/>)

Date/Time Intervals Covered by Source Data:

Ongoing.

Geographical Extent of Source Data:

National.

2c. Source Data Reporting:

The status of the case is updated as the legal process proceeds. The case agents update and enter into CCRS or submit to their superior IARs which highlight changes in the case and all subsequent stages of the criminal enforcement process (e.g., a case is dismissed or the defendants are either acquitted or convicted and sentenced)

Timing and frequency of reporting: The status of the case is updated as the legal process proceeds

3a. Relevant Information Systems:

The Criminal Case Reporting System (CCRS) stores criminal enforcement data in an enforcement sensitive database which contains historical data on all criminal enforcement prosecutions as well as information about the pollutants involved and the impact on the public and the environment. CCRS maintains information pertaining to individuals and companies associated with the Criminal Investigation Division's criminal leads and cases, as well as other information related to the conduct of criminal investigations.

The data is used to document the progress and results of criminal investigations. The data used for all criminal enforcement performance measures are in the CCRS database.

The status of the case is updated on CCRS as the legal process proceeds. All legal documents relating to a prosecution are entered into the system.

3b. Data Quality Procedures:

The Criminal Investigations Division (CID) has a process for document control and records management and has Quality Management Plans in place. The information on defendant dismissals, convictions or acquittals that is entered into CCRS goes through several layers of review. Initial verification of the quality and accuracy of case information is the responsibility of the Special Agent-in-Charge (SAC) of the office that is managing the case. HQ responsibility for QA/QC is conducted by the System Administrator of CCRS.

3c. Data Oversight:

Initial oversight, review and quality assurance at the field level is the responsibility of the Special Agent-in-Charge (SAC) and Assistant Special Agent-in-Charge (ASAC) of the criminal enforcement office managing the case. That information is further reviewed by OCEFT HQ through semi-annual case management reviews conducted by the Assistant Director of Investigations, CID, and quarterly reports by the System Administrator of CCRS. The System Administrator, who creates all statistical and management reports based on information

in CCRS, conducts regular oversight of the data entered by the criminal enforcement field offices to ensure that all data entered into CCRS is complete and accurate.

3d. Calculation Methodology:

The methodology for the criminal enforcement measure "Conviction rate for criminal defendants" employed a five year analysis (FY2006-2010) to develop the baseline and targets. The decision rules reflect the legal status of the defendants. The data files relevant to this analysis include defendant names and type (individual or company), date of charges filed and the results (convicted, acquitted, or charges dismissed) of the prosecution regarding each of the charges on which the defendant was found guilty or not guilty (either or both environmental law or general U.S. Criminal Code). A defendant is defined as having been "convicted" if he is guilty of at least one of the criminal counts of which he has been charged.

There are no "assumptions" or "quantifiers" used in calculating the measure. The measure is based upon the legal status of cases, i.e., whether the defendant has been convicted, acquitted or had the charges dismissed after exculpatory evidence in their favor was entered into the record. The measure is calculated by dividing the total number of defendants who have been convicted during the current Fiscal Year (numerator) by the total number of defendants with a legal result of their case in the current Fiscal Year (denominator). The "legal result" denominator includes all defendants whose charges were dismissed, who were acquitted or had their charges overturned on appeal following conviction.

Semiannual reporting.

Unit of analysis: Percent.

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting: The System Administrator of the OCEFT CCRS has the responsibility for compiling and verifying the accuracy of the report on the percentage of convicted defendants. Once compiled, data goes through a second level of verification through the Assistant Director of Investigations, CID. While data is verified on an on-going basis, final verification is conducted at the end of the year.

Timing of Results Reporting:

Semiannually.

4b. Data Limitations/Qualifications:

The only data limitations that result (although infrequently) occur when a defendant who has been initially convicted of one or more environmental crimes has all of his charges overturned by the U.S. Appellate Court on appeal in a subsequent fiscal year than the one in which the measure is being reported. The conviction rate for charged defendants has historically been in the 90% range, and is not materially affected by post-conviction appeals, so the low incidence of defendants having their convictions eventually overturned does not limit the suitability of the performance measure.

4c. Third-Party Audits:

N/A

Measure Code: 420 - Percentage of criminal cases with charges filed.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

6 - Enhance Strategic Deterrence through Criminal Enforcement

Strategic Target Code and Title:

3 - By 2018, increase the percentage of criminal cases with charges filed to 45 percent

Managing Office:

Office of Criminal Enforcement;Forensics and Training

1a. Performance Measure Term Definitions:

Criminal Cases: A criminal case exists when EPA's criminal enforcement program, specifically special agents in the Criminal Investigation Division (CID), investigate allegations of criminal violations of environmental law. The EPA active ("open") criminal case docket consists of cases in all stages of the legal process – from initial investigations to charged cases to convicted cases that are awaiting sentencing or are on appeal.

Charges Filed: A criminal case with charges filed is one in which, based upon an investigation by the EPA criminal enforcement program, the U.S. Department of Justice formally files charges against one or more defendants (either a person, company or both) alleging a criminal violation of one or more of the environmental statutes and/or associated violations of the U.S. Criminal Code in U.S. District Court.

For more information about EPA's Criminal Enforcement Program, visit

<https://www.epa.gov/enforcement/criminal-enforcement>

2a. Original Data Source:

As part of the investigative process, the Criminal Investigation Division (CID) special agent assigned to the case completes an Investigation Activity Report (IAR). The IAR is the primary means used to document all investigative activity, operational activities, judicial activities, or responses to investigative tasking or leads. Investigative activities include interviews, surveillance, electronic monitoring, arrests, searches, evidence handling and disposition, and document reviews. Operational activities include undercover reports, and consensual monitoring. Judicial activities include indictments, criminal informations, criminal complaints, guilty pleas, trials, convictions, and sentencing hearings and results. Investigative tasking relates to collateral requests from CID headquarters and other offices, as well as memorializing activity conducted in furtherance of lead inquiries.

All relevant data is entered into the Criminal Case Reporting System (CCRS, cf section 3a), which tracks a criminal investigation from the time it is first opened through all stages of the legal process to a conclusion (e.g., when the case is indicted, when a defendant is found guilty, sentenced or acquitted.) CCRS is used to create the IAR.

Once the defendants are charged, the data used to compile the measure is based upon the legal documents outlining the criminal charges (which can either take the form of a criminal information or criminal indictment) that is filed by either the Office of the U.S. Attorney or the Environmental Crimes Section at DOJ HQ and filed

in the U.S. District Court in which the alleged criminal violations occurred. The charges are part of the case file.

2b. Source Data Collection:

Source Data Collection Methods: The measure is based upon enforcement and legal documents which memorialize the status of a criminal prosecution. As noted above, the data for the measure are formally compiled through the IARs and DOJ legal documents entered into CCRS. In addition, all public legal documents relating to a charged case (e.g., the indictment or criminal information), including the names of all defendants, is also entered into and are publicly available through Public Access to Court Electronic Records (PACER), an electronic public access service that allows users to obtain case and docket information from federal appellate, district and bankruptcy courts (<http://www.pacer.gov/>)

Date/time Intervals Covered by Source Data:

Ongoing.

EPA QA Requirements/Guidance Governing Collection:

All criminal enforcement special agents receive training on the accurate completion of IAR reports and the entry of criminal case data into the CCRS.

Geographical Extent of Source Data:

National.

2c. Source Data Reporting:

After DOJ formally charges the defendants, the information is entered into CCRS (e.g., all the violations alleged, all of the defendants charged, as well as forensic information about the pollutants involved and the impact on the public and the environment.) The status of the case is updated as the legal process proceeds. The case agents update and enter into CCRS or submit to their superior IARs which highlight changes in the case and all subsequent stages of the criminal enforcement process (e.g., a case is dismissed or the defendants are either acquitted or convicted and sentenced.)

Timing and frequency of reporting: The status of the case is updated as the legal process proceeds

3a. Relevant Information Systems:

The Criminal Case Reporting System (CCRS) stores criminal enforcement information and data in an enforcement sensitive database which contains historical data on all criminal enforcement prosecutions as well as information about the pollutants involved and the impact on the public and the environment. CCRS maintains information pertaining to individuals and companies associated with the Criminal Investigation Division's criminal leads and cases, as well as other information related to the conduct of criminal investigations.

. The data is used to document the progress and results of criminal investigations. The data used for all criminal enforcement performance measures are in the CCRS database.

The status of the case is updated on CCRS as the legal process proceeds. All legal documents relating to a prosecution are entered into the system

3b. Data Quality Procedures:

The Criminal Investigations Division (CID) has a process for document control and records and has Quality Management Plans in place. The information on charged cases that is entered into CCRS goes through several layers of review. Initial verification of the quality and accuracy of case information is the responsibility of the

Special Agent-in-Charge (SAC) of the office that is managing the case. HQ responsibility for QA/QC is conducted by the System Administrator of CCRS

3c. Data Oversight:

Initial oversight at the field level is the responsibility of the Assistant Special Agent-in-Charge (ASAC) and Special Agent-in-Charge (SAC) of the criminal enforcement office managing the case. That information is further reviewed by OCEFT HQ through semi-annual case management reviews conducted by the Assistant Director of Investigations, CID, and quarterly reports by the System Administrator of CCRS. The System Administrator, who creates all statistical and management reports based on information in CCRS, conducts regular oversight of the data entered by the criminal enforcement field offices to ensure that all data entered into CCRS is complete and accurate.

3d. Calculation Methodology:

The methodology for the criminal enforcement measure "Percent of criminal cases with charges filed" employed a five year analysis (FY2006-2010) to develop the baseline and targets. The decision rules reflect the legal status of the defendants charged. The data files relevant to this analysis include defendant names and type (individual or company), date of charges filed and the actual statutes (either or both environmental or U.S. Criminal Code) listed in the criminal indictment or criminal information.

There are no "assumptions" or "quantifiers" used in calculating the measure. The measure is based upon the legal status of cases, i.e., whether the case has been closed without prosecution or is being prosecuted. The measure is calculated by dividing the number of cases that have been charged (i.e., with an indictment or criminal information) during the current Fiscal Year (numerator) by the total number of criminal cases that were closed during the current Fiscal Year (denominator).

Time frame: Semiannual reporting.

Unit of analysis: Percent.

4a. Oversight and Timing of Final Results Reporting:

The System Administrator of the OCEFT CCRS has the responsibility for compiling and verifying the accuracy of the report on charged defendants. Once compiled, data goes through a second level of verification through the Assistant Director of Investigations, CID. While data is verified on an on-going basis, final verification is conducted at the end of the fiscal year.

Timing of Results Reporting:

Semiannually.

4b. Data Limitations/Qualifications:

N/A since the measure is based upon the legal status of charged cases

4c. Third-Party Audits:

N/A

Measure Code: 419 - Percentage of criminal cases with individual defendants.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

6 - Enhance Strategic Deterrence through Criminal Enforcement

Strategic Target Code and Title:

4 - By 2018, maintain an 85 percent conviction rate for criminal defendants

Managing Office:

Office of Criminal Enforcement;Forensics and Training

1a. Performance Measure Term Definitions:

Criminal Cases: A criminal case exists when EPA's criminal enforcement program, specifically special agents in the Criminal Investigation Division (CID), investigate allegations of criminal violations of environmental law. The EPA active ("open") criminal case docket consists of cases in all stages of the legal process – from initial investigations to charged cases to convicted cases that are awaiting sentencing or are on appeal.

A criminal case with charges filed is one in which, based upon an investigation by the EPA criminal enforcement program, the U.S. Department of Justice formally files charges against one or more defendants (either a person, company or both) alleging a criminal violation of one or more of the environmental statutes and/or associated violations of the U.S. Criminal Code in U.S. District Court.

Individual Defendants: An individual defendant is a person, as opposed to a company. Criminal enforcement can be employed against persons and companies. Individuals, unlike companies, can be sentenced to prison, as well as paying a monetary fine, for breaking the criminal law. It is the possibility of incarceration that most distinguishes criminal law from civil law and, therefore, enables criminal law to provide the most deterrence.

For more information about EPA's Criminal Enforcement Program, visit

<https://www.epa.gov/enforcement/criminal-enforcement/>

2a. Original Data Source:

As part of the investigative process, the Criminal Investigation Division (CID) special agent assigned creates an Investigative Activity Report (IAR). The IAR is the primary means used to document all investigative activity, operational activities, judicial activities, or responses to investigative tasking or leads. Investigative activities include interviews, surveillance, electronic monitoring, arrests, searches, evidence handling and disposition, and document reviews. Operational activities include undercover reports, and consensual monitoring. Judicial activities include indictments, criminal informations, criminal complaints, guilty pleas, trials, convictions, and sentencing hearings and results. Investigative tasking relates to collateral requests from CID headquarters and other offices, as well as memorializing activity conducted in furtherance of lead inquiries.

All relevant data is entered into the Criminal Case Reporting System (CCRS, cf section 3a), which tracks a criminal investigation from the time it is first opened through all stages of the legal process to a conclusion (e.g., when the case is indicted, when a defendant is found guilty, sentenced or acquitted.) CCRS is used to create the IAR.

Once the defendants are charged, the data used to compile the measure is based upon the legal documents outlining the criminal charges (which can either take the form of a criminal information or criminal indictment) that is filed by either the Office of the U.S. Attorney or the Environmental Crimes Section at DOJ HQ and filed in the U.S. District Court in which the alleged criminal violations occurred. The charges are part of the case file.

2b. Source Data Collection:

Source Data Collection Methods: The measure is based upon enforcement and legal documents which memorialize the status of a criminal prosecution. As noted above, the data for the measure are formally compiled through the IARs and DOJ legal documents entered into CCRS. In addition, all public legal documents relating to a charged case (e.g., the indictment or criminal information), including the names of all defendants, is also entered into and are publicly available through Public Access to Court Electronic Records (PACER), an electronic public access service that allows users to obtain case and docket information from federal appellate, district and bankruptcy courts <http://www.pacer.gov/>

Date/Time Intervals Covered by Source Data:

Ongoing.

EPA QA Requirements/Guidance Governing collection:

All criminal enforcement special agents receive training on the accurate completion of IAR reports and the entry of criminal case data into the CCRS.

Geographical Extent of Source Data:

National.

2c. Source Data Reporting:

After DOJ formally charges the defendants, the information is entered into CCRS (e.g., all the violations alleged, all of the defendants charged, as well as forensic information about the pollutants involved and the impact on the public and the environment.) The status of the case is updated as the legal process proceeds. The case agents update and enter into CCRS or submit to their superior IARs which highlight changes in the case and all subsequent stages of the criminal enforcement process (e.g., a case is dismissed or the defendants are either acquitted or convicted and sentenced.)

Timing and frequency of reporting: The status of the case is updated as the legal process proceeds.

3a. Relevant Information Systems:

The Criminal Case Reporting System (CCRS) stores criminal enforcement information and data in an enforcement sensitive database which contains historical data on all criminal enforcement prosecutions as well as information about the pollutants involved and the impact on the public and the environment. CCRS maintains information pertaining to individuals and companies associated with the Criminal Investigation Division's criminal leads and cases, as well as other information related to the conduct of criminal investigations.

The data is used to document the progress and results of criminal investigations. The data used for all criminal enforcement performance measures are in the CCRS database.

The status of the case is updated on CCRS as the legal process proceeds. All legal documents relating to a prosecution are entered into the system

3b. Data Quality Procedures:

The Criminal Investigations Division (CID) has a process for document control and records and has Quality Management Plans in place. The information on charged cases that is entered into CCRS goes through several

layers of review. Initial verification of the quality and accuracy of case information is the responsibility of the Special Agent-in-Charge (SAC) of the office that is managing the case. HQ responsibility for QA/QC is conducted by the System Administrator of CCRS.

3c. Data Oversight:

Initial oversight at the field level is the responsibility of the Assistant Special Agent-in-Charge (ASAC) and Special Agent-in-Charge (SAC) of the criminal enforcement office managing the case. That information is further reviewed by OCEFT HQ through semi-annual case management reviews conducted by the Assistant Director of Investigations, CID and quarterly reports by the System Administrator of CCRS. The System Administrator, who creates all statistical and management reports based on information in CCRS, conducts regular oversight of the data entered by the criminal enforcement field offices to ensure that all data entered into CCRS is complete and accurate.

3d. Calculation Methodology:

The methodology for the criminal enforcement measure “Percent of criminal cases with individual defendants” employed a three year analysis (FY2008-2010) to develop the baseline and targets.

The decision rules reflect the legal status of the individuals who are named as charged defendants. The data files relevant to this analysis include defendant names and type (individual or company), date of charges filed and the actual statutes (either or both environmental or U.S. Criminal Code) listed in the criminal indictment or criminal information.

There are no assumptions or “quantifiers” used in calculating the measure. The measure is based upon the legal status of cases, i.e., whether the case has at least one individual person charged as a defendant that is being prosecuted. The measure is calculated by dividing the number of charged cases that have at least one individual defendant during the current Fiscal Year (numerator) by the total number of charged criminal cases during the current Fiscal Year (denominator).

Timeframe: Fiscal Year (October – September) Semiannual reporting.

Unit of analysis: Percent.

4a. Oversight and Timing of Final Results Reporting:

The System Administrator of the CCRS has the responsibility for compiling and verifying the accuracy of the report on charged defendants. Once compiled, data goes through a second level of verification through the Assistant Director of Investigations, CID. While data is verified on an on-going basis, final verification is conducted at the end of the fiscal year.

Timing of Results Reporting:

Semiannually.

4b. Data Limitations/Qualifications:

N/A, since the measure is based on the legal status of prosecuted individual defendants

4c. Third-Party Audits:

N/A

Measure Code: 418 - Percentage of criminal cases having the most significant health, environmental, and deterrence impacts.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

6 - Enhance Strategic Deterrence through Criminal Enforcement

Strategic Target Code and Title:

1 - By 2018, increase criminal cases having significant health, environmental and deterrence impacts

Managing Office:

Office of Criminal Enforcement

1a. Performance Measure Term Definitions:

Criminal Case Docket: A criminal case exists when EPA's criminal enforcement program, specifically special agents in the Criminal Investigation Division (CID), investigate allegations of criminal violations of environmental law. The EPA active ("open") criminal case docket consists of cases in all stages of the legal process – from initial investigations to charged cases to convicted cases that are awaiting sentencing or are on appeal.

Most Significant Health, Environmental, and Deterrence Impacts: The most significant cases are defined by the categories of health effects (e.g., death, serious injury, or exposure, etc.), pollutant release and discharge characteristics (e.g., documented exposure, need for remediation, etc.) and defendant profiles (e.g., size of business, compliance history, etc.) The cases with the most significant health, environmental and deterrent impacts fall into Tier 1 and Tier 2 of four possible categories of tiers (as calculated by the tiering methodology (cf section 3d). The tier designation is used throughout the investigative process including case selection and prosecution.

For more information about EPA's Criminal Enforcement Program, visit <http://www.epa.gov/compliance/criminal/>

2a. Original Data Source:

All data used to calculate and classify the "most significant cases" result from evidence collected during the investigative process. The Criminal Investigation Division (CID) special agent assigned to the case creates an Investigative Activity Report (IAR, cf 419,420, 421). The IAR is the primary means used to document all investigative activity operational activities, judicial activities, or responses to investigative tasking or leads. Investigative activities include interviews, surveillance, electronic monitoring, arrests, searches, evidence handling and disposition, and document reviews. Operational activities include undercover reports, and consensual monitoring. Judicial activities include legal documents such as indictments, criminal informations, criminal complaints, guilty pleas, trials, convictions, and sentencing hearings and results. Investigative tasking relates to collateral requests from CID headquarters and other offices, as well as memorializing activity conducted in furtherance of lead inquiries.

2b. Source Data Collection:

Source Data Collection Methods:

Tabulation of records or activities. Information used for the case tiering methodology (cf section 3d) comes from the evidence collected during the course of the investigation. Forensic evidence gathering (e.g.,

environmental sampling and analysis) is conducted by the National Enforcement Investigations Center (NEIC) or other EPA laboratories or programs in conformity with their established protocols.

The data for case tiering is compiled through the IARs and legal documents which are collected and entered into the Criminal Case Reporting System (CCRS, cf section 3a). OCEFT collects data on a variety of case attributes to describe the range, complexity, and quality of the national docket. Data for selected attributes are being used to categorize the cases into four tiers based on the severity of the crime associated with the alleged violation.

Date/Time Intervals Covered by Source Data:

Ongoing.

EPA QA requirements/guidance governing collection:

All criminal enforcement special agents receive training on the accurate completion of IAR reports and the entry of criminal case data into the CCRS.

Geographical Extent of Source Data:

National.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system:

After a criminal case is opened, all major data and information is entered into CCRS and is tracked through all subsequent stages of the criminal enforcement process. All case information and data that will be used for the case tiering methodology is entered into CCRS, including information about the pollutants involved and the impact on the public and the environment that result from forensic sampling and analysis undertaken as a routine part of the investigation of the alleged violations.

Timing and frequency of reporting: The status of the case is updated as the legal process proceeds.

3a. Relevant Information Systems:

CCRS stores criminal enforcement data in an enforcement sensitive database which contains historical data on all criminal enforcement prosecutions as well as information about the pollutants involved and the impact on the public and the environment. CCRS contains a drop down menu for entering all data used to assign a case to a specific tier. When all required fields are populated, the system automatically determines the tier for the case. Designating a tier is mandatory for all open criminal cases.

CCRS is an internal EPA database; All public legal documents relating to prosecuted criminal cases (e.g., the indictments, guilty pleas, trial verdicts and judge's sentencing decisions) are publicly available through Public Access to Court Electronic Records (PACER), an electronic public access service that allows users to obtain case and docket information from federal appellate, district and bankruptcy courts (<http://www.pacer.gov/>)

3b. Data Quality Procedures:

Environmental and forensic data used to conduct case tiering is supplied from EPA's National Enforcement Investigations Center (NEIC), national databases, and other EPA programs. This data has been QA/QCd following the protocols established by those programs. It should be noted that the data will often serve as evidence in criminal judicial enforcement proceedings, so the quality and sufficiency of the data is carefully reviewed.

3c. Data Oversight:

Initial oversight at the field level is the responsibility of the Special Agent-in-Charge and Assistant Special Agent-in-Charge of the criminal office managing the case. That information is further reviewed by OCEFT HQ through semi-annual case management reviews conducted by the Assistant Director for Investigations, CID.

3d. Calculation Methodology:

The methodology for the measure “percent of criminal cases with the most significant health, environmental and deterrence impact” used the FY 2010 criminal enforcement docket to develop the baseline and targets for FY 2011-15.. The cases are analyzed and scored on a variety of case attributes describing the range, complexity and quality of the criminal enforcement docket. Cases are then entered into one of four categories (“tiers”) depending upon factors such as the human health (e.g., death, serious injury) and environmental impacts, the nature of the pollutant and its release into the environment, and violator characteristics (e.g., repeat violator, size and location(s) of the regulated entity)

Many of the data elements used in the tier method are directly linked to the Federal Sentencing Guidelines:

<http://www.uscourts.gov/guidelines/archive/2010-federal-sentencing-guidelines-manual>

See the two attachments for graphic representations of the criminal case tier methodology and the explanations of the categories. They indicate the process used to assign a case to one of the four tiers.

Tiering is based upon these decision rules:

Tier 1 (1st or highest): any case involving death or actual serious injury; otherwise a case that possesses specified attributes in at least three of four established categories.

Tier 2 (second): two categories out of four

Tier 3 (third): one category out of four

Tier 4 (fourth): no category

Tier 1 and Tier 2 cases added together and divided by the total number of open cases in the criminal case docket is how the “most significant cases” cases measure, that also serves as the Key Performance indicator for the criminal enforcement program, is calculated. The measure only reflects the percentage of cases in the upper two tiers.

Time frame: Updated throughout the fiscal year as the case docket changes. Fiscal Year (October – September)
Semiannual reporting.

Unit of analysis: Percent.

Attached Documents:

tiering.pptx

tieringmethodology2012.ppt

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting:: Once initial case tiering has been conducted by the case agent, initial oversight, review and quality assurance at the field level is the responsibility of the Special Agent-in-Charge and Assistant Special Agent-in-Charge of the criminal enforcement office managing the case. It receives a second round of review in HQ by CID’s Assistant Director for Investigations, who also conducts a semi-annual review of all cases in the criminal case docket . The review includes discussions of any new evidence or information that would potentially affect or change the tier in which a case had been assigned. Any decision to categorize a case as being a Tier 4 (lowest level) case must be approved by both the SAC and the Assistant Director for Investigations. Data is verified on an on-going basis.

Timing of Results Reporting: Semiannually.

4b. Data Limitations/Qualifications:

A case's tier classification may change as cases are investigated and additional information uncovered. Potential data limitations include inaccurate environmental sampling or mistakes in evidence gathering that can result in improper classification or "tiering" of an individual case. Determining data for some characteristics used in tiering may be based upon ranges or estimates (e.g., the extent of documented human population exposure to a toxic pollutant may be based upon a consensus or "best estimate" of the geographic area surrounding the release rather than a detailed examination of all people potentially exposed).

4c. Third-Party Audits:

N/A

Measure Code: 417 - Millions of cubic yards of contaminated soil and groundwater media EPA has obtained commitments to clean up as a result of concluded CERCLA and RCRA corrective action enforcement actions.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

4 - Support Cleaning Up Communities and Advancing Sustainable Development

Strategic Target Code and Title:

2 - By 2018, obtain commitments to clean up 1,025 million cubic yards of contaminated soil and groundwater media as a result of concluded CERCLA and RCRA corrective action enforcement actions.

Managing Office:

Office of Compliance and Office of Site Remediation and Enforcement.

1a. Performance Measure Term Definitions:

Commitments: The amount of contaminated soil and groundwater media that parties have agreed to clean up under CERCLA and RCRA Corrective Action concluded enforcement actions.

Volume of Contaminated Media Addressed (VCMA): VCMA refers to the volume of environmental media that is subject to the Superfund Response Action or RCRA Corrective Action, such that, at the conclusion of the action, human health and the environment are protected in accordance with the statutory mandate for Superfund and RCRA Corrective Action.

Contaminated Soil: The volume of soil and contaminated debris subject to removal or treatment.

Contaminated Groundwater media: The volume of physical aquifer (not only the water fraction) that will be addressed by the response or corrective action.

Comprehensive Environmental Response, Compensation and Liability Act (CERCLA): The federal program for cleaning up the nation's uncontrolled hazardous waste sites. Under CERCLA, EPA finds the companies or people responsible for contamination at a site, and negotiates with them to clean up the site themselves or to pay for another party to do the cleanup.

Resource, Conservation and Recovery Act (RCRA) Corrective Action: Hazardous wastes are generally regulated by RCRA and cleaned up under the RCRA Corrective Action Program or CERCLA. RCRA Corrective Action requires investigation and cleanup at RCRA facilities. The Corrective Action program is structured around elements common to most cleanups under other EPA programs: an initial site assessment, characterization of the contamination, and the evaluation and implementation of cleanup measures, both immediate and long-term.

Concluded Enforcement Actions for CERCLA Program: For purposes of this measure, there are four categories of concluded enforcement actions for the CERCLA program:

Administrative Orders on Consent: Administrative Orders on Consent (AOCs) are legal documents that formalize an agreement between EPA and one or more PRPs to address some or all of the parties' responsibility for a site or facility. EPA uses AOCs for:

- removal activity (short-term cleanup),
- investigation, and
- remedy design work.

EPA also uses AOCs for cost recovery when the payments are made as part of an agreement for work and for de minimis cashout payments. (Administrative orders on consent do not require approval by a court).

Judicial Consent Decrees: Consent Decrees (CDs) are legal agreements entered into by the United States (through EPA and the Department of Justice) and PRPs and lodged with a court.

Consent decrees are the only settlement type that EPA can use for the final cleanup phase (remedial action) at a Superfund site. EPA also uses CDs to recover cleanup costs in cost recovery and cashout settlements and on rare occasions to perform removal work or remedial investigations/feasibility studies. (A CD is final when it is approved and "entered" by a U.S. district court).

Unilateral Administrative Orders: An order issued by EPA, authorized by CERCLA section 106, requiring potentially responsible parties to undertake a response action. It describes the actions to be taken and can be enforced in court.

Judgments: A decision by a court directing an individual, a business, or other entity to undertake or pay for a response action.

Concluded Enforcement Actions for RCRA Corrective Action Program: For purposes of this measure, there are two general categories of concluded enforcement actions for the RCRA Corrective Action program:

EPA undertakes Administrative enforcement actions through authority granted to it under the RCRA federal environmental statute. Administrative enforcement actions can take several forms, including EPA issuing an administrative order requiring a facility to implement specific corrective measures or filing an administrative complaint commencing a formal administrative adjudication. An administrative action concludes when the defendant/respondent and EPA resolve the complaint by written agreement. The Regional Administrator or designee signs the written agreement and, files it with the regional hearing clerk of the court.

Civil judicial actions are formal lawsuits filed in court for failure to comply with a statutory or regulatory requirement, or an administrative order or in order for EPA to seek appropriate relief from a court in the event of a release of hazardous waste. Attorneys with the U.S. Department of Justice prosecute civil cases on behalf of EPA. A concluded action occurs when a consent decree is: signed by all parties to the action, filed in the appropriate court, and either signed by a judge, or a written ruling or decision is made by a judge after a full trial.

2a. Original Data Source:

EPA Regional Enforcement Organizations
EPA Regional Program Organizations
EPA Headquarters Enforcement Organizations
Facility Personnel and Facility Contractors
DOJ

2b. Source Data Collection:

Superfund

- Remedial actions. Data is available from the remedial investigation, feasibility study, and/or record of decision (or any other relevant data).
- Non-time critical removal actions. Data is available from the engineering evaluation/cost analysis, and/or the action memorandum (or any other relevant data).
- Time-critical removal actions. Data is available from the action memorandum (or any other relevant data). Sometimes few data are available for such cases at the time of the action memorandum. If insufficient data exist for an estimate at the time of the action memorandum, the value for the measure should be entered at the soonest practical time after the settlement as data are available to calculate the measure; with the caveat that the best available value for the measure should always be entered in the same fiscal year in which the enforcement document is finalized.

For RCRA Corrective Action, data available from Statement of Basis/Response to Comments (SB/RTC).

2c. Source Data Reporting:

VCMA data is reported on the Case Conclusion Data Sheet (CCDS).

EPA implemented the CCDS in 1996, with the most recent update implemented in 2014, to capture relevant information on the results and environmental benefits of concluded enforcement cases. The CCDS data include specifics of the case such as: the facility involved; information on how the case concluded; actions parties are required to comply with; the costs involved; information on and any Supplemental Environmental Project(s) to be undertaken as part of the settlement; the amount and type of any penalties assessed; any costs recovered through the action, if applicable; and any environmental benefits including VCMA.

In the CERCLA and RCRA Corrective Action programs, when a formal administrative or judicial enforcement case is “concluded”, enforcement staff enter information into ICIS to document the environmental benefits achieved by the concluded enforcement case. Original source documents may include: facility permits; legal documents such as consent decrees and administrative orders; inspection reports; case engineer reports; and facility reports. For civil judicial cases, VCMA should be entered into the Integrated Compliance Information System (ICIS) and reported in the fiscal year the consent decree, court order, or judgment is entered (not lodged). For administrative cases, VCMA should be entered into ICIS and reported in the fiscal year the administrative order or final agreement is signed.

For those sites, where a ROD has not been issued, and it is not possible to obtain a reasonable estimate of VCMA at the time of the final order or consent decree, the regions may enter VCMA in ICIS as a Post-Final Order activity when they have the necessary information to make the estimate. Directions for entering this information in ICIS may be found on page 2, section 2 of the document entitled: “Entering Post Final Order Activities”. Please refer to section 9 on page 20 for further information:

<http://intranet.epa.gov/oeca/oc/resources/etdd/reporting/fy2008/reportingfy08-attach5-reportinginstructions.pdf>

To view the CCDS guidance in its entirety, please go to: <http://intranet.epa.gov/oeca/oc/resources/pmod/ccds-fy14.pdf>

3a. Relevant Information Systems:

VCMA is maintained in the ICIS FE&C database which tracks EPA administrative and judicial civil enforcement actions. The ICIS FE&C data system conforms with the Office of Environmental Information's (OEI) "Lifecycle Management Guidance", which includes data validation processes, internal screen audit checks and verification, system and user documents, data quality audit reports, third party testing reports, detailed report specifications, and data calculation methodology. (Reference: Quality Assurance and Quality Control Procedures & Data Quality: Life Cycle Management Policy, (EPA CIO2121, April 7, 2006))

The Integrated Compliance Information System (ICIS) is being reviewed under OECA's Modernization efforts. The system is made up of components which support critical business areas for OECA. Additional areas are planned for the future. ICIS enables individuals from the states and EPA to access multi-media enforcement and compliance and NPDES permit and other data from any computer connected to the Internet. EPA's ability to target the most critical environmental problems is increasing as the system integrates data from additional media programs. Information can be submitted to ICIS either directly through an internet browser or electronically through transactions from other systems formatted using XML (eXtensible Markup Language). Office of Compliance (OC) provides customer support, training, plus a number of tools that give customers information about each component of the system. The major components of ICIS are described below.

- ICIS FE&C. Supports the reporting of Federal Enforcement and Compliance activities for all media for EPA at Headquarters and in the Regional offices.
- ICIS-NPDES. Supports the programmatic requirements of the National Pollutant Discharge Elimination System (NPDES) program under the Clean Water Act.
- NetDMR. Provides the capability for regulated entities to directly enter NPDES Discharge Monitoring Report (DMR) data into ICIS.
- NPDES e-Reporting Tool (NeT). Provides the capability for entities to submit Notices of Intent to be regulated under certain general permits.
- ICIS-Air. This module supports all Enforcement and Compliance activities for Clean Air Act stationary sources.

Attached Documents:

Attached Documents:

Data System Quality Assurance Plan (ICIS).doc

3b. Data Quality Procedures:

Annual Data Certification Process - OECA has instituted a semi-annual data certification process for the collection and reporting of enforcement and compliance information. The certification process was set up to ensure all reporting entities are aware of the reporting deadlines, receive the most up-to-date reporting instructions for select measures, follow best data management practices to assure reporting accuracy, and have access to the most recent methodologies for calculating cubic yards of contaminated soil and water. The volume of contaminated soil and water measure is covered by the annual data certification process.

As part of the annual data certification process, regions are provided a checklist to assist them in their data quality procedures.

Attached Documents:

OECA's Quality Management Plan - December 2011

Attached Documents:

OC QMP 2011 Final.docx

OC QMP Concurrence Signatures.pdf

FY14 Certification Checklist.pdf

3c. Data Oversight:

Source Data Reporting Oversight:

HQ - Director, Enforcement Targeting and Data Division

Region 1 - Division Director, Office of Environmental Stewardship

Region 2 - Director, Office of Enforcement and Compliance Assistance

Region 3 - Director, Office of Enforcement, Compliance and Environmental Justice

Region 4 - Regional Counsel and Director, Office of Environmental Accountability

Region 5 - Director, Office of Enforcement and Compliance Assurance

Region 6 - Compliance Assurance and Enforcement Division Director

Region 7 - Enforcement Coordinator

Region 8 - Assistant Regional Administrator for Enforcement, Compliance and Environmental Justice

Region 9 - Enforcement Coordinator

Region 10 - Director, Office of Compliance and Enforcement

Information Systems Oversight Personnel:

HQ - OSRE ICIS and SEMS data entry contacts

HQ - ICIS System Administrator

Region 1 - ICIS Steward and Data Systems Administrator

Region 2 - ICIS System Administrator

Region 3 - ICIS Data Steward and System Administrator

Region 4 - ICIS System Administrator, Regional Compliance and Enforcement Data Steward

Region 5 - ICIS Data Steward and Systems Administrator

Region 6 - ICIS Data Steward

Region 7 - ICIS Data Steward and Systems Administrator

Region 8 - ICIS System Administrator

Region 9 - ICIS System Administrator

Region 10 - ICIS System Administrator and Data Steward

3d. Calculation Methodology:

The Case Conclusion Data Sheet (CCDS) is a manual data collection tool HQ implemented in FY 1996, with the most recent update implemented in FY2014, to collect information on concluded federal enforcement cases including VCMA. The CCDS data are entered into the Integrated Information and Compliance System (ICIS). OECA uses data obtained from the CCDS via ICIS to assess the environmental outcomes of its enforcement program.

The CCDS guidance provides detailed calculation methodologies for estimating the contaminated soil and water to be addressed pursuant to the environmental statutes of CERCLA and RCRA Corrective Action. Additionally, the CCDS provides specific instructions on how to enter the VCMA information into ICIS.

HQ conducts a review of the calculation methodology each year. As part of the methodology review process, regional case enforcement staff must provide HQ with detailed formulae and calculations used when the case conclusion benefit amount is estimated at five million cubic yards or more. HQ staff and if necessary contractor review the calculation to determine that the appropriate mathematical equation has been used, the mathematical computation and unit of measure are correct, and the appropriate remedy reporting category has been identified for entry in ICIS.

To view the CCDS guidance in its entirety, please go to: <http://intranet.epa.gov/oeca/oc/resources/pmod/ccds-fy14.pdf>

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting. The Deputy Regional Administrators; Director, the Office of Civil Enforcement; and Division Director, Monitoring, Assistance and Media Programs; must sign the online certification form.

Timing of Results Reporting: Semiannually

To view the online certification form, please go to:

<http://intranet.epa.gov/oeca/oc/etdd/reporting/fy2014/eoycertification.html>

4b. Data Limitations/Qualifications:

VCMA reported in ICIS project an estimate of the volume of contaminated soil or groundwater media to be addressed if the parties carry out the requirements of the settlement or order. EPA bases the VCMA estimates on the expectation that the responsible party implements the negotiated settlement agreement. The estimates use information available at the time a case settles or an order is issued. In some instances, EPA develops and enters this information after the settlement. Due to the time required for EPA to negotiate a settlement agreement with a party, there may be a delay in completing the CCDS. Additionally, because of unknowns at the time of settlement, different levels of technical proficiency, or the nature of a case, OECA's expectation is that the overall volume of contaminated soil or water is conservatively estimated based on CCDS information.

4c. Third-Party Audits:

None.

Measure Code: 412 - Percentage of open consent decrees reviewed for overall compliance status.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

1 - Maintain Enforcement Presence

Strategic Target Code and Title:

4 - By 2018, maintain review of the overall compliance status of 100 percent of the open consent decrees

Managing Office:

1a. Performance Measure Term Definitions:

Review Overall Compliance Status: For each open judicial non-Superfund, non-bankruptcy judicial consent decree, the EPA Regions will track up to four milestones, depending on the content of the consent decrees and the length of their compliance schedules. Three of the milestones address specific, one-time events to be tracked in ICIS as Compliance Schedule Events: 1) Pay Required Penalty Amount in Full; 2) Complete Required Supplemental Environmental Project (SEP); 3) Achieve Final Compliance With All Obligations Under This Order. The fourth milestone addresses overall consent decree compliance status.

Open Consent Decrees: The consent decree tracking measures apply to open, non-Superfund, non-bankruptcy, judicial consent decrees, coded in ICIS with the Enforcement Action Types "Civil Judicial Actions," "Pre-Referral Negotiations," and "Collection Actions," entered by the courts in FY 2007 and later. Consent decrees that have been open for fewer than three years are excluded from the 4th measure, since Regions are expected to review the overall compliance status of such consent decrees beginning no later than on the first 3-year anniversary of their entry dates and repeat the reviews at least once every three years from the dates of the most recent reviews until the consent decrees are closed. ICIS tracking for review of open Consent Decrees every three years continues until the CD is closed.

The data collected and reported on consists of three specific, one-time event critical milestones, and one overall consent decree critical milestone. The milestones are:

- number and percentage of open consent decrees in ICIS with a completed Federal Penalty Required field, but no corresponding Schedule Event or, the Schedule Date has passed with no Actual Date entered;
- number and percentage of open consent decrees in ICIS with a SEP entered in the SEP screen, but no corresponding Schedule Event or, the Schedule Date has passed with no Actual Date entered;
- number and percentage of all open consent decrees in ICIS without an Achieve Final Compliance With All Obligations Under This Order or, the corresponding Schedule Date has passed with no Actual Date entered.
- number and percentage of open consent decrees, more than 3 years old for which a timely overall consent decree compliance status review has not been conducted.

The following new ICIS consent decree milestone reports have been created and are available in the Public folder under Federal Enforcement and Compliance (FE&C) – National Standards Reports:

- Consent Decree Tracking Measures 1 – 3 (Penalty, SEP, Final Compliance)
- Consent Decree Tracking Measure 4 (Overall Compliance Review)

These reports provide both cross-tab results for the new measures and detailed listings of the cases that underlie the cross-tab numbers. Both reports (as revised) will be used at end-of-year processing for populating the related table in the Certification Workbook.

Background: For more information on EPA's tracking of consent decrees, see Consent Decree Tracking Guidance (attached).

2a. Original Data Source:

EPA HQ and Regional enforcement staff

2b. Source Data Collection:

Collection Methodology: Data on Consent Decree tracking is collected by the regions (and for some cases HQ) from the Consent Decrees. These are the date of entry of the CD, the date a penalty is due, the date a SEP is to be completed, and the date all activities required under the CD are to be completed. This information is entered into ICIS by regional and HQ enforcement personnel. The same is true, later, for entry to ICIS of the actual dates when CD compliance was actually tracked, when the payment of the penalty actually occurred (or did not occur), when the SEP was completed, and when the activities required under the CD had all been completed.

Quality Procedures: Quality procedures are implemented by each EPA regional office and thru the Office of Compliance data certification process that requires review of enforcement data and certification by the Regional DRAs that the enforcement data has been reviewed and determined to be accurate.

2c. Source Data Reporting:

Data Submission: The EPA regions and OECA offices enter the CD tracking data (see above) to ICIS at the time all of the other enforcement case conclusion data is entered into ICIS. As described above, the data comes from the Consent Decree.

Frequency and Timing of Data Transmission: As described above, the data comes from the Consent Decree and is entered within 10 business days of conclusion of the case. The data is available in ICIS as it is entered into the system.

3a. Relevant Information Systems:

ICIS FE&C. Data for this measure is housed in the Integrated Compliance Information System (ICIS), in the FE&C subsystem. The Integrated Compliance Information System Federal Enforcement & Compliance (ICIS FE&C) database tracks EPA judicial and administrative civil enforcement actions. For more information, see: <http://www.epa.gov/compliance/data/systems/icis/index.html> The ICIS FE&C data system meets Office of Environmental Information (OEI) Lifecycle Management Guidance, which includes data validation processes, internal screen audit checks and verification, system and user documents, data quality audit reports, third party testing reports, and detailed report specifications data calculation methodology. Reference: Quality Assurance and Quality Control procedures: Data Quality: Life Cycle Management Policy, (EPA CIO2121, April 7, 2006)

To support the Government Performance and Results Act (GPRA), the Agency's information quality guidelines, and other significant enforcement and compliance policies on performance measurement, OECA instituted a semiannual certification of the overall accuracy of ICIS information.

ICIS contains both source data and transformed data.

Attached Documents:

Data System Quality Assurance Plan (ICIS).doc

3b. Data Quality Procedures:

Annual Data Certification Process - OECA has instituted a semi-annual data certification process for the collection and reporting of enforcement and compliance information. The certification process was set up to ensure all reporting entities are aware of the reporting deadlines, receive the most up-to-date reporting instructions for select measures, follow best data management practices to assure reporting accuracy, and have access to the recent methodologies for calculating pounds of pollutants reduced. The Consent Decree Tracking measures are covered by this data certification process.

Each office within the Office of Enforcement and Compliance Assurance (OECA) prepares Quality Management Plans (QMPs) every five years. As part of the annual data certification process, regions are provided a checklist to assist them in their data quality procedures (attached).

Quality Management Plan - September 2011

Attached Documents:

FY12 Data Quality Check List.pdf

OC QMP Concurrence Signatures.pdf

OC QMP 2011 Final.docx

3c. Data Oversight:

Source Data Reporting Oversight

HQ - Director, Enforcement Targeting and Data Division

Region 1 - Division Director, Office of Environmental Stewardship

Region 2 - Director, Office of Enforcement and Compliance Assistance

Region 3 - Director, Office of Enforcement, Compliance and Environmental Justice

Region 4 - Regional Counsel and Director, Office of Environmental Accountability

Region 5 - Director, Office of Enforcement and Compliance Assurance

Region 6 - Compliance Assurance and Enforcement Division Director

Region 7 - Enforcement Coordinator

Region 8 - Director, Policy, Information Management and Environmental Justice

Region 9 - Enforcement Coordinator

Region 10 - Director, Office of Compliance and Enforcement

Information Systems Oversight Personnel

HQ - ICIS System Administrator

Region 1 - ICIS Steward and Data Systems Administrator

Region 2 - ICIS System Administrator

Region 3 - ICIS Data Steward and System Administrator

Region 4 - ICIS System Administrator, Regional Compliance and Enforcement Data Steward

Region 5 - ICIS Data Steward and Systems Administrator

Region 6 - ICIS Data Steward

- Region 7 - ICIS Data Steward and Systems Administrator
- Region 8 - ICIS System Administrator
- Region 9 - ICIS System Administrator
- Region 10 - ICIS System Administrator and Data Steward

3d. Calculation Methodology:

DeciDecision Rules for Selecting Data: Below is select logic for extracting Consent Decree Tracking data from ICIS

Measure 1:

of CDs in denominator that either (1) lack a “Pay Required Civil Penalty Amount in Full” milestone - or - (2) have the milestone but the “Schedule Date” has passed with no “Actual Date” entered _____
of open CDs that have a penalty entered in the Federal Penalty required” filed in the Penalty Screen

Measure 2:

of CDs in denominator that either (1) lack a “Complete Required SEP” milestone - or – (2) have the milestone but the “Schedule Date” has passed with no “Actual Date” entered _____
of open CDs that have a SEP entered in the “SEP” screen

Measure 3:

of CDs in denominator that either (1) lack an “Achieve Final Compliance...” milestone - or – (2) have the milestone but the “Schedule Date” has passed with no “Actual Date” entered _____
of all open CDs

Measure 4:

of CDs in denominator, for which (1) 12 or fewer Quarters have transpired from the consent decree’s date of entry – or – (2) an appropriate Final Order status designations for the most recently applicable FY and Quarter has been entered into ICIS and designated in the ICIS Final Order Basic Information screen as: (1) Overall CD Compliance Status Reviewed/Defendant in General Compliance with all critical milestones – or – (2) Overall CD Compliance Status Reviewed/Defendant in Not General Compliance with all critical milestones/appropriate response Initiated – or – (3) Overall CD Compliance Status Cannot be Determined/Appropriate Response Initiated _____
of all open CDs in 13th Quarter or beyond

Definitions of Variables: See Consent Decree Tracking guidance (attached).

Explanation of Calculations: Each of the four CD tracking measures are calculated based on this equation: Number of open non-Superfund, non-bankruptcy consent decrees NOT tracked divided by the full number of open non-Superfund, non-bankruptcy consent decrees times 100.

Explanation of Assumptions: N/A

Unit of Measure: Percent

Timeframe of Result: Snapshot in time of open consent decree tracking status at mid-year and at end-of-year.

Documentation of Methodological Changes: N/A

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

Oversight of Final Reporting:

The Deputy Regional Administrators, the Office of Civil Enforcement Director, and the Monitoring, Assistance and Program Division Director all must sign the attached certification form at MY and EOY certifying that their enforcement data is accurate, reliable and complete.

Frequency and Timing of Results Reporting: Semiannually, at mid-year and end-of-year..

Attached Documents:

OC QMP Concurrence Signatures.pdf

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: No error estimate is available.

Data Lag Length and Explanation: From the October 31 end-of-year date, approximately 10-12 weeks to allow for QA/QC of the data.

Methodological Changes: "Not Applicable."

4c. Third-Party Audits:

Beginning in FY2010, the Integrated Compliance Information System (ICIS) produced data to report on the four ICIS consent decree tracking measures. This data supports OECA's response in fulfilling its commitment to the Office of Inspector General (OIG) Audit Report No. 2001-P-00006, Compliance With Enforcement Instruments.

www.epa.gov/oig/reports/2001/enforce.pdf

Measure Code: 411 - Number of civil judicial and administrative enforcement cases concluded.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

1 - Maintain Enforcement Presence

Strategic Target Code and Title:

3 - By 2018, conclude 10,000 civil judicial and administrative enforcement cases

Managing Office:

Office of Compliance

1a. Performance Measure Term Definitions:

Civil Judicial Enforcement Cases: a civil judicial enforcement case is a formal lawsuit, filed in court, against a person who has either failed to comply with a statutory or regulatory requirement, administrative order, or against a person who has contributed to a release. Civil judicial actions are often employed in situations that present repeated or significant violations or where there are serious environmental concerns. Attorneys from the U.S. Department of Justice prosecute civil judicial enforcement cases for the Agency.

Civil Administrative Enforcement Cases: A civil administrative enforcement case is an enforcement action taken by EPA under its own authority. Administrative enforcement cases can take several forms, including EPA issuing an administrative order requiring a facility to implement specific corrective measures to filing an administrative complaint commencing a formal administrative adjudication. Administrative actions tend to be resolved quickly and can often be quite effective in bringing the facility into compliance with the regulations or in remedying a potential threat to human health of the environment.

Concluded: For purposes of this measure, there are two types of concluded enforcement actions counted.

The first are administrative enforcement actions which are undertaken by EPA through authority granted to it under various federal environmental statutes, such as CERCLA, RCRA, CAA, CWA, TSCA, and others. An administrative action is concluded when a written agreement between the defendant/respondent and EPA resolving the complaint is documented in a Consent Agreement/Final Order (CA/FOs), is signed by the Regional Administrator or designee, and is filed with the regional hearing clerk.

The second type of enforcement action is known as a civil judicial action. Civil judicial actions attorneys from the U.S. Department of Justice prosecute civil cases for EPA. A concluded action occurs when a consent decree is signed by all parties to the action and filed in the appropriate court and signed by a judge or a written ruling or decision is made by a judge after a full trial.

2a. Original Data Source:

EPA attorneys

EPA regional hearing clerks

DOJ attorneys

Federal and state courts

2b. Source Data Collection:

The source data for this measure is found on completed enforcement documents. For example, the attached final consent agreement and final order (CAFO) contains the final date stamp affixed by the regional hearing clerk. An enforcement record is created in ICIS with the CAFO's final date indicating the case has been concluded.

Example of a concluded enforcement case document:

Attached Documents:

CAFO.pdf

2c. Source Data Reporting:

Administrative Penalty Orders

Administrative Penalty Orders on Consent

Consent Decrees

Notice of Determination

Unilateral Administrative Orders

3a. Relevant Information Systems:

The ICIS FE&C data system meets Office of Environmental Information (OEI) Lifecycle Management Guidance, which includes data validation processes, internal screen audit checks and verification, system and user documents, data quality audit reports, third party testing reports, and detailed report specifications data calculation methodology. Reference: Quality Assurance and Quality Control procedures: Data Quality: Life Cycle Management Policy, (EPA CIO2121, April 7, 2006)

The Integrated Compliance Information System (ICIS) is a three phase multi-year modernization project that improves the ability of EPA and the states to ensure compliance with the nation's environmental laws with the collection of comprehensive enforcement and compliance information. Phase I, implemented in FY02, replaced several legacy systems, and created an integrated system to support federal enforcement and compliance tracking, targeting and reporting, including GPRRA reporting. Phase II, also called Permit Compliance System (PCS) Modernization, expands ICIS to include the National Pollutant Discharge Elimination System (NPDES) program and enables improved management of the complete program (e.g., stormwater) as well as replacing the legacy PCS. PCS is currently identified as an Agency Federal Managers' Financial Integrity Act (FMFIA) weakness, and the modernization of the system is critical to address the weakness. Phase II was first implemented in FY06 for 21 states and 11 tribes/territories that use ICIS to directly manage their NPDES programs. In FY08, seven more states moved to ICIS from the legacy PCS and began electronically flowing their Discharge Monitoring Report (DMR) data from their states systems via the Exchange Network and CDX to ICIS. In FY09, Phase II continued with implementation of the National Installation of NetDMR allowing NPDES permittees to electronically submit DMR data from permitted facility systems via the Exchange Network to ICIS and migrated three additional states. In FY11 OECA implemented Full-Batch Release 1 of Phase II allowing Batch Flows of permits and facility data from states. FY12 will include Full-Batch Release 2 enabling batch flow will allow Batch Flows of inspection data from states. Inspection information and was implemented early in FY12. The final part of Phase II which will add the remaining NPDES Batch Flows and migrate and all remaining states is projected to be completed in FY13. Phase III will modernize the Air Facility System (AFS) into ICIS. AFS is used by EPA and States to track Clean Air Act enforcement and compliance activities. Integration of AFS into ICIS will modernize and replace a legacy system that does not meet current business needs. Implementation of this phase is projected for FY14.

ICIS contains both source data and transformed data.

Data System Quality Assurance Plan

Attached Documents:

Data System Quality Assurance Plan (ICIS).doc

3b. Data Quality Procedures:

Annual Data Certification Process - OECA has instituted a semi-annual data certification process for the collection and reporting of enforcement and compliance information. The certification process was set up to ensure all reporting entities are aware of the reporting deadlines, receive the most up-to-date reporting instructions for select measures, follow best data management practices to assure reporting accuracy, and have access to the recent methodologies for calculating pounds of pollutants reduced. The cases concluded measure is covered by the annual data certification process.

As part of the annual data certification process, regions are provided a checklist to assist them in their data quality procedures.

OECA's Quality Management Plan - September 2011

Attached Documents:

FY11 Data Quality Check List.pdf

OC QMP Concurrence Signatures.pdf

OC QMP 2011 Final.docx

3c. Data Oversight:

Source Data Reporting Oversight:

HQ - Director, Enforcement Targeting and Data Division

Region 1 - Division Director, Office of Environmental Stewardship

Region 2 - Director, Office of Enforcement and Compliance Assistance

Region 3 - Director, Office of Enforcement, Compliance and Environmental Justice

Region 4 - Regional Counsel and Director, Office of Environmental Accountability

Region 5 - Director, Office of Enforcement and Compliance Assurance

Region 6 - Compliance Assurance and Enforcement Division Director

Region 7 - Enforcement Coordinator

Region 8 - Director, Policy, Information Management and Environmental Justice

Region 9 - Enforcement Coordinator

Region 10 - Director, Office of Compliance and Enforcement

Information Systems Oversight Personnel

HQ - ICIS System Administrator

Region 1 - ICIS Steward and Data Systems Administrator
Region 2 - ICIS System Administrator
Region 3 - ICIS Data Steward and System Administrator
Region 4 - ICIS System Administrator, Regional Compliance and Enforcement Data Steward
Region 5 - ICIS Data Steward and Systems Administrator
Region 6 - ICIS Data Steward
Region 7 - ICIS Data Steward and Systems Administrator
Region 8 - ICIS System Administrator
Region 9 - ICIS System Administrator
Region 10 - ICIS System Administrator and Data Steward

3d. Calculation Methodology:

A civil or judicial case is counted as concluded when one instance of the following occurs:

An administrative action is concluded when a written agreement between the defendant/respondent and EPA resolving the complaint is documented in a Consent Agreement/Final Order (CA/FOs), is signed by the Regional Administrator or designee, and is filed with the regional hearing clerk.

A civil judicial action is concluded when a consent decree is signed by all parties to the action and filed in the appropriate court and signed by a judge or a written ruling or decision is made by a judge after a full trial.

4a. Oversight and Timing of Final Results Reporting:

The Deputy Regional Administrators, the Office of Civil Enforcement Director, and the Monitoring, Assistance and Program Division Director all must sign the attached certification form.

Attached Documents:

Data Certification Form.pdf

4b. Data Limitations/Qualifications:

The potential always exists that there are facilities, not yet identified as part of the regulated universe, subject to an EPA enforcement action.

4c. Third-Party Audits:

None to-date.

Measure Code: 410 - Number of civil judicial and administrative enforcement cases initiated.

Office of Enforcement and Compliance Assurance (OECA)

Goal Number and Title:

5 - Protecting Human Health and the Environment by Enforcing Laws and Assuring Compliance

Objective Number and Title:

1 - Enforce Environmental Laws to Achieve Compliance

Sub-Objective Number and Title:

1 - Maintain Enforcement Presence

Strategic Target Code and Title:

2 - By 2018, initiate 11,600 civil judicial and administrative enforcement cases

Managing Office:

Office of Compliance

1a. Performance Measure Term Definitions:

Civil Judicial Enforcement Cases: a civil judicial enforcement case is a formal lawsuit, filed in court, against a person who has either failed to comply with a statutory or regulatory requirement, administrative order, or against a person who has contributed to a release. Civil judicial actions are often employed in situations that present repeated or significant violations or where there are serious environmental concerns. Attorneys from the U.S. Department of Justice prosecute civil judicial enforcement cases for the Agency.

Civil Administrative Enforcement Cases: A civil administrative enforcement case is an enforcement action taken by EPA under its own authority. Administrative enforcement cases can take several forms, including EPA issuing an administrative order requiring a facility to implement specific corrective measures to filing an administrative complaint commencing a formal administrative adjudication. Administrative actions tend to be resolved quickly and can often be quite effective in bringing the facility into compliance with the regulations or in remedying a potential threat to human health of the environment.

Initiated: A civil judicial enforcement case is considered initiated when it has been referred to DOJ. A referral is a formal written request to another agency or unit of government to proceed with judicial enforcement relating to the violation(s) in question.

Civil administrative enforcement cases are considered initiated when an administrative order or an administrative penalty order on consent has been issued by a Regional Administrator or designee.

2a. Original Data Source:

EPA attorneys

EPA regional hearing clerks

DOJ attorneys

Federal and state courts

2b. Source Data Collection:

The source data for this measure is found on initiated enforcement documents. For example, the attached initiated administrative order was issued by the Region 4 Assistant Administrator. An enforcement record is created in ICIS with the regional administrator's signature date which indicates the case has been initiated.

Example of an initiated case document:

Attached Documents:

Admin Order.pdf

2c. Source Data Reporting:

Referral Letters

Administrative Penalty Orders

Administrative Compliance Orders

Unilateral Administrative Orders

3a. Relevant Information Systems:

The ICIS FE&C data system meets Office of Environmental Information (OEI) Lifecycle Management Guidance, which includes data validation processes, internal screen audit checks and verification, system and user documents, data quality audit reports, third party testing reports, and detailed report specifications data calculation methodology. Reference: Quality Assurance and Quality Control procedures: Data Quality: Life Cycle Management Policy, (EPA CIO2121, April 7, 2006)

The Integrated Compliance Information System (ICIS) is a three phase multi-year modernization project that improves the ability of EPA and the states to ensure compliance with the nation's environmental laws with the collection of comprehensive enforcement and compliance information. Phase I, implemented in FY02, replaced several legacy systems, and created an integrated system to support federal enforcement and compliance tracking, targeting and reporting, including GPRA reporting. Phase II, also called Permit Compliance System (PCS) Modernization, expands ICIS to include the National Pollutant Discharge Elimination System (NPDES) program and enables improved management of the complete program (e.g., stormwater) as well as replacing the legacy PCS. PCS is currently identified as an Agency Federal Managers' Financial Integrity Act (FMFIA) weakness, and the modernization of the system is critical to address the weakness. Phase II was first implemented in FY06 for 21 states and 11 tribes/territories that use ICIS to directly manage their NPDES programs. In FY08, seven more states moved to ICIS from the legacy PCS and began electronically flowing their Discharge Monitoring Report (DMR) data from their states systems via the Exchange Network and CDX to ICIS. In FY09, Phase II continued with implementation of the National Installation of NetDMR allowing NPDES permittees to electronically submit DMR data from permitted facility systems via the Exchange Network to ICIS and migrated three additional states. In FY11 OECA implemented Full-Batch Release 1 of Phase II allowing Batch Flows of permits and facility data from states. FY12 will include Full-Batch Release 2 enabling batch flow will allow Batch Flows of inspection data from states. Inspection information and was implemented early in FY12. The final part of Phase II which will add the remaining NPDES Batch Flows and migrate and all remaining states is projected to be completed in FY13. Phase III will modernize the Air Facility System (AFS) into ICIS. AFS is used by EPA and States to track Clean Air Act enforcement and compliance activities. Integration of AFS into ICIS will modernize and replace a legacy system that does not meet current business needs. Implementation of this phase is projected for FY14.

ICIS contains both source data and transformed data.

OECA's Data System Quality Assurance Plan

Attached Documents:

Data System Quality Assurance Plan (ICIS).doc

3b. Data Quality Procedures:

Annual Data Certification Process - OECA has instituted a semi-annual data certification process for the collection and reporting of enforcement and compliance information. The certification process was set up to ensure all reporting entities are aware of the reporting deadlines, receive the most up-to-date reporting instructions for select measures, follow best data management practices to assure reporting accuracy, and have access to the recent methodologies for calculating pounds of pollutants reduced. The cases initiated measure is covered by the annual data certification process.

As part of the annual data certification process, regions are provided a checklist to assist them in their data quality procedures.

OECA's Quality Management Plan - September 2011

Attached Documents:

FY11 Data Quality Check List.pdf

OC QMP Concurrence Signatures.pdf

OC QMP 2011 Final.docx

3c. Data Oversight:

Source Data Reporting Oversight

HQ - Director, Enforcement Targeting and Data Division

Region 1 - Division Director, Office of Environmental Stewardship

Region 2 - Director, Office of Enforcement and Compliance Assistance

Region 3 - Director, Office of Enforcement, Compliance and Environmental Justice

Region 4 - Regional Counsel and Director, Office of Environmental Accountability

Region 5 - Director, Office of Enforcement and Compliance Assurance

Region 6 - Compliance Assurance and Enforcement Division Director

Region 7 - Enforcement Coordinator

Region 8 - Director, Policy, Information Management and Environmental Justice

Region 9 - Enforcement Coordinator

Region 10 - Director, Office of Compliance and Enforcement

Information Systems Oversight Personnel

HQ - ICIS System Administrator

Region 1 - ICIS Steward and Data Systems Administrator

Region 2 - ICIS System Administrator

Region 3 - ICIS Data Steward and System Administrator

Region 4 - ICIS System Administrator, Regional Compliance and Enforcement Data Steward

Region 5 - ICIS Data Steward and Systems Administrator

Region 6 - ICIS Data Steward

Region 7 - ICIS Data Steward and Systems Administrator

Region 8 - ICIS System Administrator

Region 9 - ICIS System Administrator

Region 10 - ICIS System Administrator and Data Steward

3d. Calculation Methodology:

A civil or judicial case is counted as initiated when one instance of the following occurs:

Civil judicial enforcement cases are considered initiated when a referral has been made to DOJ.

Civil administrative enforcement cases are considered initiated when an administrative order or an administrative penalty order on consent has been issued by a Regional Administrator or designee.

4a. Oversight and Timing of Final Results Reporting:

The Deputy Regional Administrators, the Office of Civil Enforcement Director, and the Monitoring, Assistance and Program Division Director all must sign the attached certification form.

Attached Documents:

Data Certification Form.pdf

4b. Data Limitations/Qualifications:

The potential always exists that there are facilities, not yet identified as part of the regulated universe, subject to an EPA enforcement action.

4c. Third-Party Audits:

None to-date.

Office of Environmental Information (OEI) Record(s)

Measure Code: 052 - Number of major EPA environmental systems that use the CDX electronic requirements enabling faster receipt, processing, and quality checking of data.

Office of Environmental Information (OEI)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Information Collection

1a. Performance Measure Term Definitions:

Major EPA Environmental Systems: Major environmental systems are those that use CDX services to support the electronic reporting or exchange of information among trading partners or from the regulated entities to EPA.

Enabling Faster Receipt, Processing, and Quality Checking of Data: This terminology means the services used to ensure quality data entering the data and that they are submitted in a much faster way than the previous legacy methods, e.g., electronic and Internet-based as opposed to a paper or other method that involves mailing to the Agency.

CDX: Central Data Exchange. CDX is the point of entry on the Environmental Information Exchange Network (Exchange Network) for environmental data submissions to the Agency.

CDX assembles the registration/submission requirements of many different data exchanges with EPA and the States, Tribes, local governments and the regulated community into a centralized environment. This system improves performance tracking of external customers and overall management by making those processes more consistent and comprehensive. The creation of a centralized registration system, coupled with the use of web forms and web-based approaches to submitting the data, invite opportunities to introduce additional automated quality assurance procedures for the system and reduce human error. For more information, visit: <http://www.epa.gov/cdx/index.htm>

2a. Original Data Source:

Users of CDX from the Private sector, State, local, and Tribal government; entered into the CDX Customer Registration Subsystem

CDX Users at EPA program offices include the:

- Office of Air and Radiation (OAR)
- Office of Enforcement and Compliance Assurance (OECA)
- Office of Environmental Information (OEI)
- Office of Prevention, Pesticides and Toxic Substances (OPPTS)
- Office of Solid Waste and Emergency Response (OSWER)
- Office of Water (OW)

2b. Source Data Collection:

Source Data Collection Methods:

Reports are routinely generated from log files on CDX servers that support user registration and identity management.

EPA QA Requirements/Guidance Governing Collection:

QA/QC is performed in accordance with a CDX Quality Assurance Plan ["Quality Assurance Project Plan for the Central Data Exchange," 10/8/2004] and the CDX Design Document v.3, Appendix K registration procedures [Central Data Exchange Electronic Reporting Prototype System Requirements: Version 3; Document number: EP005S3; December 2000]. Specifically, data are reviewed for authenticity and integrity. Automated edit checking routines are performed in accordance with program specifications and the CDX Quality Assurance Plan. EPA currently has a draft plan developed in August 2007. In FY 2011, CDX will develop robust quality criteria, which will include performance metric results and align with the schedule for the upcoming CDX contract recompetes.

Spatial Detail Covered By the Source Data: This is not applicable other than a user's address.

2c. Source Data Reporting:

Form/Mechanism for Receiving data and entering into EPA System:

CDX manages the collection of data and documents in a secure way either by users entering data onto web forms or via a batch file transfer, both of which are completed using the CDX environment. These data are then transported to the appropriate EPA system.

Timing and Frequency of Reporting: Annual

3a. Relevant Information Systems:

CDX Customer Registration Subsystem. This subsystem is used to register external users for reporting or exchanging data with EPA via CDX.

CDX completed its last independent security risk assessment in June 2011, and all vulnerabilities are being reviewed or addressed.

Additional Information:

In addition, environmental data collected by CDX is delivered to National data systems in the Agency. Upon receipt, the National systems often conduct a more thorough data quality assurance procedure based on more intensive rules that can be continuously changing based on program requirements. As a result, CDX and these National systems appropriately share the responsibility for ensuring environmental data quality

3b. Data Quality Procedures:

The CDX system collects, reports, and tracks performance measures on data quality and customer service. While its automated routines are sufficient to screen systemic problems/issues, a more detailed assessment of data errors/problems generally requires a secondary level of analysis that takes time and human resources.

CDX incorporates a number of features to reduce errors in registration data and that contribute greatly to the quality of environmental data entering the Agency. These features include pre-populating data either from CDX or National systems, conducting web-form edit checks, implementing XML schemas for basic edit checking and providing extended quality assurance checks for selected Exchange Network Data flows using Schematron.

3c. Data Oversight:

Although not officially termed, CDX is a general support application that provides centralized services to a multitude of program offices in the Agency and data trading partners on the Exchange Network. The general answer is that EPA Program Office System Managers and their management chains are responsible for oversight of the data quality. The closest individual responsible for “data integrity purposes” is the Chief of the Information Technology Branch.

3d. Calculation Methodology:

Unit of analysis: Systems

No data transformations occur.

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting: Reports on CDX quality and performance are conducted on an annual basis. The reports consist of both quantitative measures from system logs and qualitative measures from user and program office surveys.

Timing of Results Reporting:

Annually

4b. Data Limitations/Qualifications:

The potential error in registration data, under CDX responsibility has been assessed to be less than 1%. This is accomplished through a combination of automated edit checks in web form fields and processes in place to confirm the identity of individuals prior to approving access to CDX data flows.

4c. Third-Party Audits:

Third party security risk assessments are conducted every three years in accordance with FISMA requirements. Alternatives analysis reviews are also conducted in accordance with OMB CPIC requirements. Lastly, adhoc third party requirements are conducted internally.

Measure Code: 053 - States, tribes and territories will be able to exchange data with CDX through nodes in real time, using standards and automated data-quality checking.

Office of Environmental Information (OEI)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Information Collection

1a. Performance Measure Term Definitions:

Able to exchange data: A trading partner has the programmatic and technical infrastructure in place to exchange data across the Exchange Network.

Nodes: Nodes are points of presence on the Internet which are used to support the secure transport of data to trusted trading partners.

Real-time: When the data is generated and approved, it is automatically transported to the destination of another trading partner.

CDX: Central Data Exchange. CDX is the point of entry on the Environmental Information Exchange Network (Exchange Network) for environmental data submissions to the Agency.

CDX assembles the registration/submission requirements of many different data exchanges with EPA and the States, Tribes, local governments and the regulated community into a centralized environment. This system improves performance tracking of external customers and overall management by making those processes more consistent and comprehensive. The creation of a centralized registration system, coupled with the use of web forms and web-based approaches to submitting the data, invite opportunities to introduce additional automated quality assurance procedures for the system and reduce human error. For more information, visit: <http://www.epa.gov/cdx/index.htm>

2a. Original Data Source:

Users of CDX from the Private sector, State, local, and Tribal government; entered into the CDX Customer Registration Subsystem

CDX Users at EPA program offices include the:

- Office of Air and Radiation (OAR)
- Office of Enforcement and Compliance Assurance (OECA)
- Office of Environmental Information (OEI)
- Office of Prevention, Pesticides and Toxic Substances (OPPTS)
- Office of Solid Waste and Emergency Response (OSWER)
- Office of Water (OW)

2b. Source Data Collection:

Source Data Collection Methods:

Reports are routinely generated from log files on CDX servers that support user registration and identity management.

Tabulation of records. Collection is ongoing.

EPA QA Requirements/Guidance Governing Collection:

QA/QC is performed in accordance with a CDX Quality Assurance Plan ["Quality Assurance Project Plan for the Central Data Exchange," 10/8/2004] and the CDX Design Document v.3, Appendix K registration procedures[Central Data Exchange Electronic Reporting Prototype System Requirements: Version 3; Document number: EP005S3; December 2000]. Specifically, data are reviewed for authenticity and integrity. Automated edit checking routines are performed in accordance with program specifications and the CDX Quality Assurance Plan. EPA currently has a draft plan developed in August 2007. In FY 2011, CDX will develop robust quality criteria, which will include performance metric results and align with the schedule for the upcoming CDX contract re-compete.

Spatial Detail Covered By the Source Data: This is not applicable other than a user's address.

2c. Source Data Reporting:

Form/Mechanism for Receiving Data and Entering into EPA System:

CDX manages the collection of data and documents in a secure way either by users entering data onto web forms or via a batch file transfer, both of which are completed using the CDX environment. These data are then transported to the appropriate EPA system.

Timing and Frequency of Reporting: Annual

3a. Relevant Information Systems:

CDX Customer Registration Subsystem. This subsystem is used to register external users for reporting or exchanging data with EPA via CDX.

CDX completed its last independent security risk assessment in June 2011, and all vulnerabilities are being reviewed or addressed.

Additional Information:

In addition, environmental data collected by CDX is delivered to National data systems in the Agency. Upon receipt, the National systems often conduct a more thorough data quality assurance procedure based on more intensive rules that can be continuously changing based on program requirements. As a result, CDX and these National systems appropriately share the responsibility for ensuring environmental data quality

3b. Data Quality Procedures:

The CDX system collects, reports, and tracks performance measures on data quality and customer service. While its automated routines are sufficient to screen systemic problems/issues, a more detailed assessment of data errors/problems generally requires a secondary level of analysis that takes time and human resources.

CDX incorporates a number of features to reduce errors in registration data and that contribute greatly to the quality of environmental data entering the Agency. These features include pre-populating data either from CDX or National systems, conducting web-form edit checks, implementing XML schemas for basic edit

checking and providing extended quality assurance checks for selected Exchange Network Data flows using Schematron.

3c. Data Oversight:

Although not officially termed, CDX is a general support application that provides centralized services to a multitude of program offices in the Agency and data trading partners on the Exchange Network. The general answer is that EPA Program Office System Managers and their management chains are responsible for oversight of the data quality. The closest individual responsible for “data integrity purposes” is the Chief of the Information Technology Branch.

3d. Calculation Methodology:

Unit of analysis: Users

No data transformations occur.

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting: Reports on CDX quality and performance are conducted on an annual basis. The reports consist of both quantitative measures from system logs and qualitative measures from user and program office surveys.

Timing of Results Reporting:

Annually

4b. Data Limitations/Qualifications:

The potential error in registration data, under CDX responsibility has been assessed to be less than 1%. This is accomplished through a combination of automated edit checks in web form fields and processes in place to confirm the identity of individuals prior to approving access to CDX data flows.

4c. Third-Party Audits:

Third party security risk assessments are conducted every three years in accordance with FISMA requirements. Alternatives analysis reviews are also conducted in accordance with OMB CPIC requirements. Lastly, adhoc third party requirements are conducted internally

Measure Code: 999 - Total number of active unique users from states, tribes, laboratories, regulated facilities and other entities that electronically report environmental data to EPA through CDX.

Office of Environmental Information (OEI)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Information Collection

1a. Performance Measure Term Definitions:

Active unique users: Active accounts include those who have logged in within the last two years in which the statistic is generated. In addition, users who have multiple accounts are only counted as one account (unique). Active unique users include: States, Tribes, laboratories, and regulated facilities.

CDX: Central Data Exchange. CDX is the point of entry on the Environmental Information Exchange Network (Exchange Network) for environmental data submissions to the Agency.

CDX assembles the registration/submission requirements of many different data exchanges with EPA and the States, Tribes, local governments and the regulated community into a centralized environment. This system improves performance tracking of external customers and overall management by making those processes more consistent and comprehensive. The creation of a centralized registration system, coupled with the use of web forms and web-based approaches to submitting the data, invite opportunities to introduce additional automated quality assurance procedures for the system and reduce human error. For more information, visit:

<http://www.epa.gov/cdx/index.htm>

2a. Original Data Source:

Users of CDX from the Private sector, State, local, and Tribal government; entered into the CDX Customer Registration Subsystem

CDX Users at EPA program offices include the:

- Office of Air and Radiation (OAR)
- Office of Enforcement and Compliance Assurance (OECA)
- Office of Environmental Information (OEI)
- Office of Prevention, Pesticides and Toxic Substances (OPPTS)
- Office of Solid Waste and Emergency Response (OSWER)
- Office of Water (OW)

2b. Source Data Collection:

Source Data Collection Methods: Reports are routinely generated from log files on CDX servers that support user registration and identity management.

Tabulation of records: The records of registration provide an up-to-date, accurate count of users.

Date/Time Intervals Covered by Source Data: Ongoing

EPA QA Requirements/Guidance Governing Collection: QA/QC is performed in accordance with a CDX Quality Assurance Plan ["Quality Assurance Project Plan for the Central Data Exchange," 10/8/2004] and the CDX Design Document v.3, Appendix K registration procedures[Central Data Exchange Electronic Reporting Prototype System Requirements: Version 3; Document number: EP005S3; December 2000]. Specifically, data are reviewed for authenticity and integrity. Automated edit checking routines are performed in accordance with program specifications and the CDX Quality Assurance Plan. EPA currently has a draft plan developed in August 2007. In FY 2012, CDX will develop robust quality criteria, which will include performance metric results and align with the schedule for the upcoming CDX contract recompetete.

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: CDX manages the collection of data and documents in a secure way either by users entering data onto web forms or via a batch file transfer, both of which are completed using the CDX environment. These data are then transported to the appropriate EPA system.

Timing and frequency of reporting: Ongoing

3a. Relevant Information Systems:

CDX Customer Registration Subsystem. Users identify themselves with several descriptors and use a number of CDX security mechanisms for ensuring the integrity of individuals' identities

CDX completed its last independent security risk assessment in June 2011, and all vulnerabilities are being reviewed or addressed. CDX users register themselves via web forms on CDX to obtain access to data flows in which they receive privileges. This user information comes directly from the user and is not transformed.

Additional information:

In addition, environmental data collected by CDX is delivered to National data systems in the Agency. Upon receipt, the National systems often conduct a more thorough data quality assurance procedure based on more intensive rules that can be continuously changing based on program requirements. As a result, CDX and these National systems appropriately share the responsibility for ensuring environmental data quality.

3b. Data Quality Procedures:

The CDX system collects, reports, and tracks performance measures on data quality and customer service. While its automated routines are sufficient to screen systemic problems/issues, a more detailed assessment of data errors/problems generally requires a secondary level of analysis that takes time and human resources.

CDX incorporates a number of features to reduce errors in registration data and that contribute greatly to the quality of environmental data entering the Agency. These features include pre-populating data either from CDX or National systems, conducting web-form edit checks, implementing XML schemas for basic edit checking and providing extended quality assurance checks for selected Exchange Network Data flows using Schematron.

3c. Data Oversight:

Although not officially termed, CDX is a general support application that provides centralized services to a multitude of program offices in the Agency and data trading partners on the Exchange Network. The general answer is that EPA Program Office System Managers and their management chains are responsible for

oversight of the data quality. The closest individual responsible for “data integrity purposes” is the Chief of the Information Technology Branch.

3d. Calculation Methodology:

Unit of Analysis: Users

EPA counts users based on the above definition in 1a.

4a. Oversight and Timing of Final Results Reporting:

Oversight of Final Reporting: Reports on CDX quality and performance are conducted on an annual basis. The reports consist of both quantitative measures from system logs and qualitative measures from user and program office surveys.

Timing of Results Reporting: Annually

4b. Data Limitations/Qualifications:

The potential error in registration data, under CDX responsibility has been assessed to be less than 1%. This is accomplished through a combination of automated edit checks in web form fields and processes in place to confirm the identity of individuals prior to approving access to CDX data flows.

4c. Third-Party Audits:

Third party security risk assessments are conducted every three years in accordance with FISMA requirements. Alternatives analysis reviews are also conducted in accordance with OMB CPIC requirements. Lastly, adhoc third party requirements are conducted internally.

Measure Code: 998 - EPA's TRI program will work with partners to conduct data quality checks to enhance accuracy and reliability of environmental data.

Office of Environmental Information (OEI)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Information Analysis and Access

1a. Performance Measure Term Definitions:

TRI Program: Number of Data Quality Checks - the Regions and HQ will identify possible data quality issues and follow up with approximately 500 facilities annually to ensure accuracy of TRI data on HQ-generated lists of facilities.

2a. Original Data Source:

EPA receives this data from companies or entities required to report annually under EPCRA (see 2b.) The data quality checks are performed by EPA HQ and regional offices on the facility data submitted.

2b. Source Data Collection:

All covered facilities are required to annually submit toxic chemical release and other waste management quantities and facility-specific information for the previous calendar year on or before July 1 to EPA and the States if reporting threshold requirements [40 CFR Part 372] are exceeded. EPA makes the collected data available to the public through EPA's TRI National Analysis and various online tools (e.g., Envirofacts TRI Explorer, TRI.NET, and my RTK).

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA's system: More than 97 percent of covered facilities use EPA's web-based electronic reporting tool - TRI-MEweb - to report their releases and other waste management information on the TRI program. Timing and frequency of reporting: covered facilities are required to submit release and waste management information for previous calendar year on or before July 1 if they meet reporting requirements.

3a. Relevant Information Systems:

TRI-MEweb and TRIPS databases

3b. Data Quality Procedures:

- EPA provides guidance documents (general, chemical-specific and sector-specific), training modules and TRI hotline assistance.
- EPA performs multiple quality control and quality assurance checks during reporting (TRI-MEweb DQ checks) and at the end of the reporting period (in-house DQ checks). Here are few examples:
- Facilities that reported large changes in release, disposal or waste management practices on sector-level for certain chemicals (e.g., PBT chemicals);
- Facilities that submit invalid Chemical Abstract Service (CAS) numbers that do not match the chemical name;
- Facilities that report invalid North American Industry Classification System (NAICs) codes;
- Facilities that report invalid/incorrect RCRA facility IDs when they send wastes to offsite locations for management;

- Facilities that did not report for the current reporting year but reported for the previous reporting year; and
 - Facilities that reported incorrect quantities on Form R Schedule 1 for dioxin and dioxin-like compounds;
- The TRI Program generates a list of facilities with potential data quality issues and sends the list to the 10 TRI Regional coordinators. The TRI Program HQ staff and Regional coordinators contact the facilities and discuss data quality issues. The facilities may revise their reports where errors are identified. Certain facilities may be referred to enforcement for further examination. For each annual TRI collection received on or before July 1, headquarters and regional personnel will identify potential data quality issues and work with the Regions to contact facility reporters and resolve the issues during the following fall and spring.

3c. Data Oversight:

EPA performs several data quality analyses to support the TRI National Analysis. For this measure, the Regions and the HQ staff annually identify potential data quality issues and contact approximately 500 facilities for follow up.

3d. Calculation Methodology:

Unit of Analysis: Number of facilities contacted

4a. Oversight and Timing of Final Results Reporting:

For TRI reports (due to EPA and the states annually on July 1), the TRI program will identify potential data quality issues and work with the Regions to contact facility reporters and resolve the issues during the following fall and spring.

4b. Data Limitations/Qualifications:

Over 97% of all TRI reporting facilities use TRI-MEweb.

4c. Third-Party Audits:

This program does not conduct third-party audits of the data quality data.

Office of the Inspector General (OIG) Record(s)

Measure Code: 35A - Environmental and business actions taken for improved performance or risk reduction.

Office of the Inspector General (OIG)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Chief of Staff in the Immediate Office of the Inspector General

1a. Performance Measure Term Definitions:

Number of environmental and business actions taken for improvements made or risks reduced in response to or influenced by OIG recommendations.

OIG performance results are a chain of linked events, starting with OIG outputs (e.g., recommendations, reports of best practices, and identification of risks). The subsequent actions taken by EPA or its stakeholders/partners, as a result of OIG's outputs, to improve operational efficiency and environmental program delivery are reported as intermediate outcomes. The resulting improvements in operational efficiency, risks reduced/eliminated, and conditions of environmental and human health are reported as outcomes. By using common categories of performance measures, quantitative results can be summed and reported. Each outcome is also qualitatively described, supported, and linked to an OIG product or output. The OIG can only control its outputs and has no authority, beyond its influence, to implement its recommendations that lead to environmental and management outcomes.

Environmental/Health Improvements: Identifiable and documented environmental or human health improvements resulting from, or influenced by, any OIG work. Measured by the number and types of improvements. Narrative should describe the type of improvement and results in better environmental or human health conditions. The significance in improvements or impacts can be described in terms of physical characteristics, numbers of people affected, health and behavioral changes, and compliance with standards, including a percent change in a recognized environmental/health performance measure or indicator. Example: Faster cleanup of toxic waste dumps resulted from a process improvement that was recommended by the OIG and implemented by EPA reducing cases of illness.

Best Practices Implemented: Environmental program or business/operational best practices that were disseminated through OIG work and implemented by Agency offices, States, or other government agencies. Describe each best practice implemented and its implication for efficiency, effectiveness or economy. Example 1: An OIG audit finds that one Region has improved its grants process through a best practice using a data control check system, resulting in better data accuracy and tracking of grant funds. OIG auditors recommend that another Region use the same system, and the best practice is successfully implemented to improve the Region's grants program. Example 2: An audit report describes a successful new method,

developed by one EPA Region, to track and pursue fines for violators of waste manifest regulations. As a result of the report, several other EPA Regions decide to use the new method.

Risks Reduced or Eliminated: Environmental or business risks reduced or eliminated as a result of any OIG work. Measured in terms of the number of types (not occurrences) of risks reduced or eliminated. Narrative should describe the risk by type of environmental or human health exposure, incidence, financial, integrity or security or threat. Agency actions, which were influenced by OIG recommendations or advice, taken to resolve management challenges, Agency level or material weaknesses. Describe FMFIA weakness or management challenge addressed, and the action taken and implications. Example: Indictment/conviction regarding illegal dumping, or closure of fraudulent asbestos removal company, reduces the risk of exposure to harmful pollutants.

Additional Information:

U.S. EPA, Office of Inspector General, Audits, Evaluations, and Other Publications;
on the Internet at www.epa.gov/oig , last updated August 2011.

Available

Federal Government Inspector General Quality Standards.

Except for justified exceptions, OIG adheres to the following standards, which apply across the federal government:

- Overall Governance: Quality Standards for Federal Offices of Inspector General. (President's Council on Integrity and Efficiency (PCIE) and Executive Council on Integrity and Efficiency (ECIE), October 2003). (<http://www.ignet.gov/pande/standards/igstds.pdf> This document contains quality standards for the management, operation and conduct of the Federal Offices of Inspector General (OIG). This document specifies that each federal OIG shall conduct, supervise, and coordinate its audits, investigations, inspections, and evaluations in compliance with the applicable professional standards listed below:
- For Investigations: Quality Standards for Investigations. (President's Council on Integrity and Efficiency (PCIE) and Executive Council on Integrity and Efficiency (ECIE), December 2003). <http://www.ignet.gov/pande/standards/invstds.pdf> Consistent with appropriate Department of Justice Directives.
- For Inspections and Evaluations: Quality Standards for Inspections. (President's Council on Integrity and Efficiency (PCIE) and Executive Council on Integrity and Efficiency (ECIE), January 2005). <http://www.ignet.gov/pande/standards/oeistds.pdf>
- For Audits: Government Auditing Standards, issued by the US General Accounting Office (GAO). The professional standards and guidance in the Yellow Book are commonly referred to as generally accepted government auditing standards (GAGAS). These standards and guidance provide a framework for conducting high quality government audits and attestation engagements with competence, integrity, objectivity, and independence. The current version of the Yellow Book (July 2007) can be located in its entirety at the following Website: www.gao.gov/govaud/d07162g.pdf

EPA OIG-Specific Operating Standards. The Project Management Handbook is the Office of Inspector General (OIG) policy document for conducting audit, program evaluation, public liaison, follow-up, and related projects. The Handbook describes the processes and standards the OIG uses to conduct the various phases of its work and helps ensure the quality, consistency, and timeliness of its products. Each OIG office may issue, upon approval by the Inspector General, supplemental guidance over assignments for which that office has responsibility.... This Handbook describes the audit, evaluation, public liaison, and follow-up processes and

phases; it does not address OIG investigative processes although it does apply to audits/evaluations performed by the Office of Investigations (OI) [within EPA OIG]....OIG audit, program evaluation, public liaison, and follow-up reviews are normally conducted in accordance with appropriate Government Auditing Standards, as issued by the Comptroller General of the United States, commonly known as the Yellow Book.

Staff may use GAGAS in conjunction with other sets of professional standards. OIG reports may cite the use of other standards as appropriate. Teams should use GAGAS as the prevailing standard for conducting a review and reporting results should inconsistencies exist between GAGAS and other professional standards.

For some projects, adherence to all of the GAGAS may not be feasible or necessary. For these projects, the Product Line Director (PLD) will provide a rationale, the applicable standards not followed, and the impact on project results. The PLD's decision should be made during the design meeting, documented in the working papers, and described in the Scope and Methodology section of the report. [Source: Project Management Handbook].

Product Line Directors. Product Line Directors oversee one or more particular work areas and multiple project teams. The OIG product lines are as follows: Air/Research and Development; Water; Superfund/Land; Cross Media; Public Liaison and Special Reviews; Assistance Agreements; Contracts; Forensic Audits; Financial Management; Risk Assessment and Program Performance; Information Resources Management; Investigations; US Chemical Safety and Hazard Investigation Board; Legal Reviews; Briefings; OIG Enabling Support Programs; and Other Activities.

For more information on the PLD responsibilities, see Chapter 5 of the OIG Project Management Handbook, attached to this record.

2a. Original Data Source:

Data track EPA programs' environmental and business actions taken or improvements made and risks reduced or avoided as a result of OIG performance evaluations, audits, inspections and investigations. OIG collects such data from EPA programs and from EPA's contractors, partners and stakeholders.

2b. Source Data Collection:

Collection mode of information supporting this measure can vary.

OIG must determine whether the Agency's/auditee's corrective actions have adequately addressed and corrected the problems identified in the report. (Additional information on OIG's follow-up process can be found at

at <http://oigintra.epa.gov/policy/policies/documents/OIG-04Follow-upPolicy.pdf>

Project Managers (PMs) may make and document periodic inquiries concerning the Agency's/auditee's progress in implementing corrective actions resulting from OIG work. As part of this process, OIG may also request documentation supporting the progress or completion of actions taken to implement the Agency's corrective actions plan. OIG may also request the Agency's views and concurrence on the actual benefits resulting from the report. When a report is closed upon issuance, the transmittal memorandum should state that OIG will make periodic inquiries of the Agency's/auditee's progress in implementing corrective actions resulting from OIG work.

EPA Manual 2750 provides policy and direction for program managers to report and coordinate their corrective action plans with the OIG. (EPA's Audit Management Process, 2750 Change 2, December 3, 1988,

Website: http://intranet.epa.gov/rmpolicy/ads/manuals/2750_2_t.pdf. This document requires OIG, as part of an effective system of internal controls, to evaluate the adequacy of such efforts before the recommendations can be closed out in the Agency's follow-up database. Evaluation of the corrective actions taken will allow the OIG to measure performance and accountability against OIG's performance targets and strategic goals. On an annual basis, a portion of OIG resources will be devoted to conducting follow-up reviews on specific significant reports. Each Assistant Inspector General (AIG), in consultation with his or her Product Line Director (PLD), will identify such work during the annual planning process.

2c. Source Data Reporting:

Data comes from OIG audit, evaluations and investigations that are performed under strict compliance with professional standard of the US Government Accountability Office and the US Department of Justice and subject to independent peer review. Data in the form of activities, output, and outcomes is entered by designated staff into the Inspector General Enterprise Management System. All original data is quality controlled for compliance with professional standard and data entered is quality reviewed for accuracy, completeness, timeliness and adequately supported.

3a. Relevant Information Systems:

OIG Performance Measurement and Results System (PMRS). PMRS captures and aggregates information on an array of OIG measures in a logic model format, linking immediate outputs with long-term intermediate outcomes and results. (The logic model can be found in OIG's Annual Performance Report at <http://www.epa.gov/oig/planning.htm>. PMRS is the OIG official system for collecting performance results data, in relation to its strategic and annual goals. All outputs (recommendations, best practices, risks identified) and outcome results (actions taken, changes in policies, procedures, practices, regulations, legislation, risks reduced, certifications for decisions, environmental improvements) influenced by OIG's current or prior work, and recognized during FY 2010 and beyond, should be entered into PMRS.

PMRS was developed as a prototype in FY 2001. Since then, there have been system improvements for ease of use. For example, during FY 2009 the PMRS was converted to a relational database directly linked to the new Inspector General Enterprise Management System (IGEMS).

IGEMS is an OIG employee time-tracking and project cost-tracking database that generates management reports. IGEMS is used to generate a project tracking number and a work product number. This system also tracks project progress and stores all related cost information.

AutoAudit and Teammate. These are repositories for all project working papers.

3b. Data Quality Procedures:

Data quality assurance and control are performed as an extension of OIG products and services, subject to rigorous compliance with the Government Auditing Standards of the Comptroller General, and are regularly reviewed by OIG management, an independent OIG Management Assessment Review Team, and external independent peer reviews (e.g., by accountancies qualified to evaluate OIG procedures against Government Auditing Standards). Each Assistant Inspector General certifies the completeness and accuracy of performance data.

All data reported are audited internally for accuracy and consistency.

OIG processes, including data processes, are governed by the quality standards described in "Additional Information" under the Performance Term Definition field. Notably, the Project Management Handbook

(which governs audits) provides a QA checklist (see Appendix 4, of the 2008 Project Management Handbook, attached to this record). The Project Manager (PM) is responsible for completing the Quality Assurance (QA) checklist throughout the project. The PM prepares the checklist and submits it to the Product Line Director (PLD) upon completion of the Post Reporting Phase of the Project. The Checklist should be completed for all projects, recognizing that some steps in the checklist may not be applicable to all projects. The QA Checklist asks teams to ensure the integrity of data that resides in all of the OIG data systems. [Source: Project Management Handbook].

During FY 2008, OIG implemented an Audit Follow-up Policy to independently verify the status of Agency actions on OIG recommendations, which serve as the basis for OIG intermediate outcome results reported in the OIG PMRS.

(Additional information on the OIG's follow-up process can be found at <http://oigintra.epa.gov/policy/policies/documents/OIG-04Follow-upPolicy.pdf>)

Attached Documents:

Policy101.PMH.Final.05.08.08.pdf

3c. Data Oversight:

There are three levels of PMRS access: View Only, Edit and Administrator. Everyone with IGEMS access has view only privileges. Individuals tasked with adding or editing PMRS entries must be granted PMRS Edit privileges. Contact a PMRS administrator to request Edit privileges.

Each Product Line Director (PLD), each of whom oversees one or more OIG work areas (e.g., Superfund, Contracts, etc.) and multiple project management teams, is responsible for ensuring that teams maintain proper integrity, accessibility, and retrievability of working papers in accordance with OIG policies. Likewise, they must ensure that information in OIG's automated systems is updated regularly by the team. (See field 2i, Additional Information, for more information about PLDs.)

3d. Calculation Methodology:

Database measures include numbers of: 1) recommendations for environmental and management improvement; 2) legislative, regulatory policy, directive, or process changes; 3) environmental, program management, security and resource integrity risks identified, reduced, or eliminated; 4) best practices identified and implemented; 5) examples of environmental and management actions taken and improvements made; 6) monetary value of funds questioned, saved, fined, or recovered; 7) criminal, civil, and administrative actions taken, 8) public or congressional inquiries resolved; and 9) certifications, allegations disproved, and cost corrections.

Because intermediate and long-term results may not be realized over a period of several years, only verifiable results are reported in the year completed.

Unit of measurement: Individual outcomes/actions

4a. Oversight and Timing of Final Results Reporting:

Data comes from OIG audit, evaluations and investigations that are performed under strict compliance with professional standard of the US Government Accountability Office and the US Department of Justice and subject to independent peer review. Data in the form of activities, output, and outcomes is entered by designated staff into the Inspector General Enterprise Management System. All original data is quality controlled for compliance with professional standard and data entered is quality reviewed for accuracy, completeness, timeliness and adequately supported. All data entered is carefully reviewed several times a years as it is entered and subsequently reported on a quarterly baThe OIG Assistant Inspectors General oversee the quality of the data used to generate reports of performance. The Office of the Chief of Staff oversee the data quality and the IG reviews the documents and date use for external consumption. Data is audited and quality test on a continuous basis through several steps from origin to final use.

4b. Data Limitations/Qualifications:

Because intermediate and long-term results may not be realized over a period of several years, only verifiable results are reported in the year completed.

Although all OIG staff are responsible for data accuracy in their products and services, there is a possibility of incomplete, miscoded, or missing data in the system due to human error or time lags. Data supporting achievement of results are often from indirect or external sources, with their own methods or standards for data verification/validation. Such data are reviewed according to the appropriate OIG quality standards (see "Additional Information"), and any questions about the quality of such data are documented in OIG reports and/or the PMRS.

The error rate for outputs is estimated at +/-2%, while the error rate for reported long-term outcomes is presumably greater because of the longer period needed for tracking results and difficulty in verifying a nexus between our work and subsequent actions and impacts beyond OIG's control. (The OIG logic model in the Annual Performance Report clarifies the kinds of measures that are output-oriented, like risks identified, versus outcome-oriented, like risks reduced.) Errors tend to be those of omission. Some errors may result from duplication as well.

4c. Third-Party Audits:

There have not been any previous audit findings or reports by external groups on data or database weaknesses in PMRS.

A December 2008 independent audit

(www.epa.gov/oig/reports/2009/QualityReviewofEPAOIG-20081216.pdf) found the following with regard to general OIG processes:

"We determined that the EPA OIG audits methodology, policies and procedures adequately complied with the Government Auditing Standards. The EPA OIG quality control system adequately documented compliance with professional and auditing standards for : Independence; Professional Judgment; Competence; Audit Planning; Supervision; Evidence and Audit Documentation; Reports on Performance Audits; Nonaudit Services; and the Quality Control Process. The auditors documented, before the audit report was issued, evidence of supervisory review of the work performed that supports findings, conclusions, and recommendations contained in the audit report.

“We determined that EPA OIG adequately followed the quality control policies established in the EPA OIG Project Management Handbook for conducting audit, program evaluation, and related projects. The audit documentation adequately includes evidence of work performed in the major three phases: Preliminary Research, Field Work and Reporting.

"We determined that EPA OIG adequately followed the standards and principles set forth in the PCIE and Executive Council on Integrity and Efficiency Quality Standards for Investigations, as applicable. The investigation adequately documented compliance with the guidelines applicable to the investigation efforts of criminal investigators working for the EPA OIG.”

The audit also identified two minor conditions, related working paper review/approval and completion/update status. OIG agreed with the auditor recommendations related to the conditions and adapted its Project Management Handbook to address the concerns.

A June 2010 internal OIG review of OIG report quality (which included a review of reporting procedures) found no substantial issues (see <http://www.epa.gov/oig/reports/2010/20100602-10-N-0134.pdf>)

Measure Code: 35B - Environmental and business recommendations or risks identified for corrective action.

Office of the Inspector General (OIG)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Chief of Staff in the Immediate Office of the Inspector General

1a. Performance Measure Term Definitions:

This is a measure of the number of OIG recommendations or risks identified for action, correction or improvement.

OIG performance results are a chain of linked events, starting with OIG outputs (e.g., recommendations, reports of best practices, and identification of risks). The subsequent actions taken by EPA or its stakeholders/partners, as a result of OIG's outputs, to improve operational efficiency and environmental program delivery are reported as intermediate outcomes. The resulting improvements in operational efficiency, risks reduced/eliminated, and conditions of environmental and human health are reported as outcomes. By using common categories of performance measures, quantitative results can be summed and reported. Each outcome is also qualitatively described, supported, and linked to an OIG product or output. The OIG can only control its outputs and has no authority, beyond its influence, to implement its recommendations that lead to environmental and management outcomes.

Recommendations for Improvement: Number of recommendations for action in OIG reports, formal presentations or analyses. When the final product is issued, the number of report recommendations should be recorded in PMRS whether or not the Agency has concurred with or implemented the recommendations. (Do not count observations, suggestions, or editorial comments.) Describe each recommendation and its implications for environmental or management action and improvement.

Best Practices Identified: Best practices identified by OIG work for environmental or management program implementation to resolve a problem or risk, or improve a condition, process or result (from any source: EPA, State, other agency, etc.). Results are measured by the number of best practices identified. Narrative should explain the significance by describing the potential environmental or management change, action or impact. Example 1: In reviewing several States' partnership roles for an audit issue, we found that one State had developed very efficient and cost-effective water quality measures that could be applicable to other States or nationwide. Example 2: An audit determines that a Region has improved its management of a grant program because of a workgroup the Region set up to coordinate grant and cooperative agreement functions.

Environmental or Business/ Operational/ Control Risks Identified (including noncompliance): Actual or potential environmental, health or operational risks identified by any OIG work. Measured in terms of the number of risks by type including the number of FMFIA disclosed program assurance issues, EPA management

challenges and specific risks or internal control weaknesses. Includes issues presented in EPA financial statement audits and internal OIG reviews. Narrative should describe the risks and potential/actual environmental, health, and safety vulnerabilities, behaviors or conditions, risk of financial or resource loss or internal control weakness and their implications. Example 1: An OIG report on hog farm waste identifies environmental risks for drinking water contamination in nearby wells. Example 2: An OIG report identified that grants were given to grantees without specific performance objectives or verification that the grantees had acceptable financial accountability systems or controls.

Additional Information:

U.S. EPA, Office of Inspector General, Audits, Evaluations, and Other Publications;
on the Internet at www.epa.gov/oig , last updated August 2011.

Available

Federal Government Inspector General Quality Standards.

Except for justified exceptions, OIG adheres to the following standards, which apply across the federal government:

- Overall Governance: Quality Standards for Federal Offices of Inspector General. (President's Council on Integrity and Efficiency (PCIE) and Executive Council on Integrity and Efficiency (ECIE), October 2003).
(<http://www.ignet.gov/pande/standards/igstds.pdf>) This document contains quality standards for the management, operation and conduct of the Federal Offices of Inspector General (OIG). This document specifies that each federal OIG shall conduct, supervise, and coordinate its audits, investigations, inspections, and evaluations in compliance with the applicable professional standards listed below:
- For Investigations: Quality Standards for Investigations. (President's Council on Integrity and Efficiency (PCIE) and Executive Council on Integrity and Efficiency (ECIE), December 2003).
<http://www.ignet.gov/pande/standards/invstds.pdf> Consistent with appropriate Department of Justice Directives.
- For Inspections and Evaluations: Quality Standards for Inspections. (President's Council on Integrity and Efficiency (PCIE) and Executive Council on Integrity and Efficiency (ECIE), January 2005).
<http://www.ignet.gov/pande/standards/oeistds.pdf>
- For Audits: Government Auditing Standards, issued by the US General Accounting Office (GAO). The professional standards and guidance in the Yellow Book are commonly referred to as generally accepted government auditing standards (GAGAS). These standards and guidance provide a framework for conducting high quality government audits and attestation engagements with competence, integrity, objectivity, and independence. The current version of the Yellow Book (July 2007) can be located in its entirety at the following Website: www.gao.gov/govaud/d07162g.pdf

EPA OIG-Specific Operating Standards. The Project Management Handbook is the Office of Inspector General (OIG) policy document for conducting audit, program evaluation, public liaison, follow-up, and related projects. The Handbook describes the processes and standards the OIG uses to conduct the various phases of its work and helps ensure the quality, consistency, and timeliness of its products. Each OIG office may issue, upon approval by the Inspector General, supplemental guidance over assignments for which that office has responsibility.... This Handbook describes the audit, evaluation, public liaison, and follow-up processes and phases; it does not address OIG investigative processes although it does apply to audits/evaluations performed by the Office of Investigations (OI) [within EPA OIG]....OIG audit, program evaluation, public liaison, and follow-up reviews are normally conducted in accordance with appropriate Government Auditing Standards, as issued by the Comptroller General of the United States, commonly known as the Yellow Book.

Staff may use GAGAS in conjunction with other sets of professional standards. OIG reports may cite the use of other standards as appropriate. Teams should use GAGAS as the prevailing standard for conducting a review and reporting results should inconsistencies exist between GAGAS and other professional standards.

For some projects, adherence to all of the GAGAS may not be feasible or necessary. For these projects, the Product Line Director (PLD) will provide a rationale, the applicable standards not followed, and the impact on project results. The PLD's decision should be made during the design meeting, documented in the working papers, and described in the Scope and Methodology section of the report. [Source: Project Management Handbook].

Product Line Directors. Product Line Directors oversee one or more particular work areas and multiple project teams. The OIG product lines are as follows: Air/Research and Development; Water; Superfund/Land; Cross Media; Public Liaison and Special Reviews; Assistance Agreements; Contracts; Forensic Audits; Financial Management; Risk Assessment and Program Performance; Information Resources Management; Investigations; US Chemical Safety and Hazard Investigation Board; Legal Reviews; Briefings; OIG Enabling Support Programs; and Other Activities.

For more information on the PLD responsibilities, see Chapter 5 of the OIG Project Management Handbook, attached to this record.

2a. Original Data Source:

Data track environmental and business recommendations or risks identified for corrective action as a result of OIG performance evaluations, audits, inspections and investigations. OIG collects such data from EPA programs and from EPA's contractors, partners and stakeholders.

2b. Source Data Collection:

Collection mode of information supporting this measure can vary.

OIG must determine whether the Agency's/auditee's corrective actions have adequately addressed and corrected the problems identified in the report. (Additional information on OIG's follow-up process can be found at

at <http://oig.intra.epa.gov/policy/policies/documents/OIG-04Follow-upPolicy.pdf>

Project Managers (PMs) may make and document periodic inquiries concerning the Agency's/auditee's progress in implementing corrective actions resulting from OIG work. As part of this process, OIG may also request documentation supporting the progress or completion of actions taken to implement the Agency's corrective actions plan. OIG may also request the Agency's views and concurrence on the actual benefits resulting from the report. When a report is closed upon issuance, the transmittal memorandum should state that OIG will make periodic inquiries of the Agency's/auditee's progress in implementing corrective actions resulting from OIG work.

EPA Manual 2750 provides policy and direction for program managers to report and coordinate their corrective action plans with the OIG. (EPA's Audit Management Process, 2750 Change 2, December 3, 1988, Website: http://intranet.epa.gov/rmpolicy/ads/manuals/2750_2_t.pdf. This document requires OIG, as part of an effective system of internal controls, to evaluate the adequacy of such efforts before the recommendations can be closed out in the Agency's follow-up database. Evaluation of the corrective actions taken will allow the OIG to measure performance and accountability against OIG's performance targets and strategic goals. On an

annual basis, a portion of OIG resources will be devoted to conducting follow-up reviews on specific significant reports. Each Assistant Inspector General (AIG), in consultation with his or her Product Line Director (PLD), will identify such work during the annual planning process.

2c. Source Data Reporting:

Data comes from OIG audit, evaluations and investigations that are performed under strict compliance with professional standard of the US Government Accountability Office and the US Department of Justice and subject to independent peer review. Data in the form of activities, output, and outcomes is entered by designated staff into the Inspector General Enterprise Management System. All original data is quality controlled for compliance with professional standard and data entered is quality reviewed for accuracy, completeness, timeliness and adequately supported.

3a. Relevant Information Systems:

OIG Performance Measurement and Results System (PMRS). PMRS captures and aggregates information on an array of OIG measures in a logic model format, linking immediate outputs with long-term intermediate outcomes and results. (The logic model can be found in OIG's Annual Performance Report at <http://www.epa.gov/oig/planning.htm>. PMRS is the OIG official system for collecting performance results data, in relation to its strategic and annual goals. All outputs (recommendations, best practices, risks identified) and outcome results (actions taken, changes in policies, procedures, practices, regulations, legislation, risks reduced, certifications for decisions, environmental improvements) influenced by OIG's current or prior work, and recognized during FY 2010 and beyond, should be entered into PMRS.

PMRS was developed as a prototype in FY 2001. Since then, there have been system improvements for ease of use. For example, during FY 2009 the PMRS was converted to a relational database directly linked to the new Inspector General Enterprise Management System (IGEMS).

IGEMS is an OIG employee time-tracking and project cost-tracking database that generates management reports. IGEMS is used to generate a project tracking number and a work product number. This system also tracks project progress and stores all related cost information.

AutoAudit and Teammate. These are repositories for all project working papers.

3b. Data Quality Procedures:

Data quality assurance and control are performed as an extension of OIG products and services, subject to rigorous compliance with the Government Auditing Standards of the Comptroller General, and are regularly reviewed by OIG management, an independent OIG Management Assessment Review Team, and external independent peer reviews (e.g., by accountancies qualified to evaluate OIG procedures against Government Auditing Standards). Each Assistant Inspector General certifies the completeness and accuracy of performance data.

All data reported are audited internally for accuracy and consistency.

OIG processes, including data processes, are governed by the quality standards described in "Additional Information" under the Performance Term Definition field. Notably, the Project Management Handbook (which governs audits) provides a QA checklist (see Appendix 4, of the 2008 Project Management Handbook, attached to this record). The Project Manager (PM) is responsible for completing the Quality Assurance (QA) checklist throughout the project. The PM prepares the checklist and submits it to the Product Line Director (PLD) upon completion of the Post Reporting Phase of the Project. The Checklist should be completed for all

projects, recognizing that some steps in the checklist may not be applicable to all projects. The QA Checklist asks teams to ensure the integrity of data that resides in all of the OIG data systems. [Source: Project Management Handbook].

During FY 2008, OIG implemented an Audit Follow-up Policy to independently verify the status of Agency actions on OIG recommendations, which serve as the basis for OIG intermediate outcome results reported in the OIG PMRS.

(Additional information on the OIG's follow-up process can be found at <http://oigintra.epa.gov/policy/policies/documents/OIG-04Follow-upPolicy.pdf>)

Attached Documents:

Policy101.PMH.Final.05.08.08.pdf

3c. Data Oversight:

There are three levels of PMRS access: View Only, Edit and Administrator. Everyone with IGEMS access has view only privileges. Individuals tasked with adding or editing PMRS entries must be granted PMRS Edit privileges. Contact a PMRS administrator to request Edit privileges.

Each Product Line Director (PLD), each of whom oversees one or more OIG work areas (e.g., Superfund, Contracts, etc.) and multiple project management teams, is responsible for ensuring that teams maintain proper integrity, accessibility, and retrievability of working papers in accordance with OIG policies. Likewise, they must ensure that information in OIG's automated systems is updated regularly by the team. (See field 2i, Additional Information, for more information about PLDs.)

3d. Calculation Methodology:

Database measures include numbers of: 1) recommendations for environmental and management improvement; 2) legislative, regulatory policy, directive, or process changes; 3) environmental, program management, security and resource integrity risks identified, reduced, or eliminated; 4) best practices identified and implemented; 5) examples of environmental and management actions taken and improvements made; 6) monetary value of funds questioned, saved, fined, or recovered; 7) criminal, civil, and administrative actions taken, 8) public or congressional inquiries resolved; and 9) certifications, allegations disproved, and cost corrections.

Because intermediate and long-term results may not be realized over a period of several years, only verifiable results are reported in the year completed.

Unit of measurement: Individual recommendations/risks

4a. Oversight and Timing of Final Results Reporting:

The OIG Assistant Inspectors General oversee the quality of the data used to generate reports of performance. The Office of the Chief of Staff oversee the data quality and the IG reviews the documents and date use for

external consumption. Data is audited and quality test on a continuous basis through several steps from origin to final use.

4b. Data Limitations/Qualifications:

Because intermediate and long-term results may not be realized over a period of several years, only verifiable results are reported in the year completed.

Although all OIG staff are responsible for data accuracy in their products and services, there is a possibility of incomplete, miscoded, or missing data in the system due to human error or time lags. Data supporting achievement of results are often from indirect or external sources, with their own methods or standards for data verification/validation. Such data are reviewed according to the appropriate OIG quality standards (see "Additional Information"), and any questions about the quality of such data are documented in OIG reports and/or the PMRS.

The error rate for outputs is estimated at +/-2%, while the error rate for reported long-term outcomes is presumably greater because of the longer period needed for tracking results and difficulty in verifying a nexus between our work and subsequent actions and impacts beyond OIG's control. (The OIG logic model in the Annual Performance Report clarifies the kinds of measures that are output-oriented, like risks identified, versus outcome-oriented, like risks reduced.) Errors tend to be those of omission. Some errors may result from duplication as well.

4c. Third-Party Audits:

There have not been any previous audit findings or reports by external groups on data or database weaknesses in PMRS.

A December 2008 independent audit

(www.epa.gov/oig/reports/2009/QualityReviewofEPAOIG-20081216.pdf) found the following with regard to general OIG processes:

"We determined that the EPA OIG audits methodology, policies and procedures adequately complied with the Government Auditing Standards. The EPA OIG quality control system adequately documented compliance with professional and auditing standards for : Independence; Professional Judgment; Competence; Audit Planning; Supervision; Evidence and Audit Documentation; Reports on Performance Audits; Nonaudit Services; and the Quality Control Process. The auditors documented, before the audit report was issued, evidence of supervisory review of the work performed that supports findings, conclusions, and recommendations contained in the audit report.

"We determined that EPA OIG adequately followed the quality control policies established in the EPA OIG Project Management Handbook for conducting audit, program evaluation, and related projects. The audit documentation adequately includes evidence of work performed in the major three phases: Preliminary Research, Field Work and Reporting.

"We determined that EPA OIG adequately followed the standards and principles set forth in the PCIE and Executive Council on Integrity and Efficiency Quality Standards for Investigations, as applicable. The investigation adequately documented compliance with the guidelines applicable to the investigation efforts of criminal investigators working for the EPA OIG."

The audit also identified two minor conditions, related working paper review/approval and completion/update status. OIG agreed with the auditor recommendations related to the conditions and adapted its Project Management Handbook to address the concerns.

A June 2010 internal OIG review of OIG report quality (which included a review of reporting procedures) found no substantial issues (see <http://www.epa.gov/oig/reports/2010/20100602-10-N-0134.pdf>)

Measure Code: 35C - Return on the annual dollar investment, as a percentage of the OIG budget, from audits and investigations.

Office of the Inspector General (OIG)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Chief of Staff in the Immediate Office of the Inspector General

1a. Performance Measure Term Definitions:

This is a measure of the total dollar amount of questioned costs, cost efficiencies, civil settlements, fines and recoveries from OIG audits and investigations compared to annual budget investments in the OIG.

OIG performance results are a chain of linked events, starting with OIG outputs (e.g., recommendations, reports of best practices, and identification of risks). The subsequent actions taken by EPA or its stakeholders/partners, as a result of OIG's outputs, to improve operational efficiency and environmental program delivery are reported as intermediate outcomes. The resulting improvements in operational efficiency, risks reduced/eliminated, and conditions of environmental and human health are reported as outcomes. By using common categories of performance measures, quantitative results can be summed and reported. Each outcome is also qualitatively described, supported, and linked to an OIG product or output. The OIG can only control its outputs and has no authority, beyond its influence, to implement its recommendations that lead to environmental and management outcomes.

\$s Questioned Costs Sustained: Dollar amount of questioned costs accepted or agreed to by the Agency or other action official. Describe the EPA total amount questioned and its nature.

\$s Efficiencies or Adjustments Sustained: Dollar amount of efficiencies or cost adjustments, accepted or agreed to by the Agency or other action official. Describe the total amount identified as an efficiency/adjustment and its nature.

Actual Costs Recovered: Questioned costs or cost efficiencies that are recovered.

\$ Questioned Costs: (actual dollars) The dollar value of questioned costs as defined by the IG Act. Describe nature of costs questioned. The IG Act defines a questioned cost as "a cost that is questioned by the Office because of 1) an alleged violation or provision of law, regulation, contract, grant, or cooperative agreement, or other agreement or document governing the expenditure of funds; 2) a finding that at the time of the audit, such cost is not supported by adequate documentation; or 3) a finding that the expenditure of funds for the intended purpose is unnecessary or unreasonable."

It is the amounts paid by EPA for which the OIG recommends EPA pursue recovery, including Government property, services or benefits provided to ineligible recipients; recommended collections of money

inadvertently or erroneously paid out; and recommended collections or offsets for overcharges or ineligible claims.

For contract/grant reports, it is contractor or grantee costs the “auditor” recommends be disallowed by the contracting officer, grant official, or other management official on an EPA portion of a contract or grant. Costs normally result from a finding that expenditures were not made in accordance with applicable laws, regulations, contracts, grants, or other agreements; or a finding that the expenditure of funds for the intended purpose was unnecessary or unreasonable.

§ Recommended Efficiencies, Costs Saved or Avoided: (monetized results) The immediate and near future monetary benefit of savings or funds put to better use on an EPA project as a result of OIG work:

- 1) Savings from eliminating work products or office functions, which were no longer of use or too costly; and
- 2) The savings from new or streamlined processes or work products, instituted to save time and/or money.

Describe the nature of the savings including monetary value of time saved.

For cost efficiencies, the IG Act defines a recommendation that funds be put to better use as “a recommendation by the Office that funds could be used more efficiently if management of an establishment took actions to implement and complete the recommendation, including: 1) Reductions in outlays; 2) Deobligations of funds from programs or operations; 3) Withdrawal of interest subsidy costs on loans or loan guarantees, insurance, or bonds; 4) Costs not incurred by implementing recommended improvements related to the operations of the establishment, a contractor, or grantee; 5) Avoidance of unnecessary expenditures noted in preaward reviews of contract or grants; or 6) Other savings which are specifically identified.

Cost efficiencies, funds put to better use, represent a quantity of funds that could be used more efficiently if management took actions to complete recommendations pertaining to deobligation of funds, costs not incurred by implementing recommended improvements, and other savings identified.

§ Cost Adjustments (Savings, Questioned) Made During the Audit, But Not Reported for Resolution: During the conduct of an audit or evaluation, costs may be questioned or opportunities for savings and adjustments may be identified which are acknowledged and acted upon/resolved prior to the report being issued. These costs may not be reported to the Agency since they are resolved prior to issuance and therefore do not go into the Agency Audit Resolution Process. These \$ costs/savings or adjustments should be reported in PMRS as Valued Added results by the OIG or its surrogates as long as they can be substantiated. Also, report adjustments known as “Cost Realism”, where a contract is adjusted to reflect accurate costs that may change a decision, or impact future funding of a contract or project. Describe the action taken and anticipated or actual impact.

§ Fines, Recoveries, Restitutions, Collections: Dollar value of investigative recoveries, meaning: 1) Recoveries during the course of an investigation before any criminal or civil prosecution; 2) criminal or civil court-ordered fines, penalties, and restitutions; 3) out-of-court settlements, including non-court settlements resulting from administrative actions. Describe nature of amounts and reason.

Additional Information:

U.S. EPA, Office of Inspector General, Audits, Evaluations, and Other Publications;
on the Internet at www.epa.gov/oig , last updated August 2011.

Available

Federal Government Inspector General Quality Standards.

Except for justified exceptions, OIG adheres to the following standards, which apply across the federal government:

- Overall Governance: Quality Standards for Federal Offices of Inspector General. (President's Council on Integrity and Efficiency (PCIE) and Executive Council on Integrity and Efficiency (ECIE), October 2003). (<http://www.ignet.gov/pande/standards/igstds.pdf>) This document contains quality standards for the management, operation and conduct of the Federal Offices of Inspector General (OIG). This document specifies that each federal OIG shall conduct, supervise, and coordinate its audits, investigations, inspections, and evaluations in compliance with the applicable professional standards listed below:
- For Investigations: Quality Standards for Investigations. (President's Council on Integrity and Efficiency (PCIE) and Executive Council on Integrity and Efficiency (ECIE), December 2003). (<http://www.ignet.gov/pande/standards/invstds.pdf>) Consistent with appropriate Department of Justice Directives.
- For Inspections and Evaluations: Quality Standards for Inspections. (President's Council on Integrity and Efficiency (PCIE) and Executive Council on Integrity and Efficiency (ECIE), January 2005). (<http://www.ignet.gov/pande/standards/oeistds.pdf>)
- For Audits: Government Auditing Standards, issued by the US General Accounting Office (GAO). The professional standards and guidance in the Yellow Book are commonly referred to as generally accepted government auditing standards (GAGAS). These standards and guidance provide a framework for conducting high quality government audits and attestation engagements with competence, integrity, objectivity, and independence. The current version of the Yellow Book (July 2007) can be located in its entirety at the following Website: www.gao.gov/govaud/d07162g.pdf

EPA OIG-Specific Operating Standards. The Project Management Handbook is the Office of Inspector General (OIG) policy document for conducting audit, program evaluation, public liaison, follow-up, and related projects. The Handbook describes the processes and standards the OIG uses to conduct the various phases of its work and helps ensure the quality, consistency, and timeliness of its products. Each OIG office may issue, upon approval by the Inspector General, supplemental guidance over assignments for which that office has responsibility.... This Handbook describes the audit, evaluation, public liaison, and follow-up processes and phases; it does not address OIG investigative processes although it does apply to audits/evaluations performed by the Office of Investigations (OI) [within EPA OIG]....OIG audit, program evaluation, public liaison, and follow-up reviews are normally conducted in accordance with appropriate Government Auditing Standards, as issued by the Comptroller General of the United States, commonly known as the Yellow Book.

Staff may use GAGAS in conjunction with other sets of professional standards. OIG reports may cite the use of other standards as appropriate. Teams should use GAGAS as the prevailing standard for conducting a review and reporting results should inconsistencies exist between GAGAS and other professional standards.

For some projects, adherence to all of the GAGAS may not be feasible or necessary. For these projects, the Product Line Director (PLD) will provide a rationale, the applicable standards not followed, and the impact on project results. The PLD's decision should be made during the design meeting, documented in the working papers, and described in the Scope and Methodology section of the report. [Source: Project Management Handbook].

Product Line Directors. Product Line Directors oversee one or more particular work areas and multiple project teams. The OIG product lines are as follows: Air/Research and Development; Water; Superfund/Land;

Cross Media; Public Liaison and Special Reviews; Assistance Agreements; Contracts; Forensic Audits; Financial Management; Risk Assessment and Program Performance; Information Resources Management; Investigations; US Chemical Safety and Hazard Investigation Board; Legal Reviews; Briefings; OIG Enabling Support Programs; and Other Activities.

For more information on the PLD responsibilities, see Chapter 5 of the OIG Project Management Handbook, attached to this record.

2a. Original Data Source:

Data is collected and reported by designated OIG staff members in OIG Performance Measurement Databases as a result of OIG performance evaluations, audits, inspections and investigations and other analysis of proposed and existing Agency Policies, regulations and laws. OIG collects such data from the activities, outputs, intermediate outcomes and long-term outcome results of OIG operations. OIG collects such data from EPA programs and from court and other public data sources.

2b. Source Data Collection:

Performance information is entered by designated staff into the Inspector General Enterprise Management System from OIG audits, evaluations and investigations performed under strict compliance with applicable professional standards. All OIG products go through a rigorous quality assurance process and are subject to independent peer review.

2c. Source Data Reporting:

Data is derived from the results of audits, evaluations, investigations and special analysis that are performed in accordance with Professional Standards of the US Government Accountability Office or the US Department of Justice. All OIG products are quality controlled and subject to independent peer review for compliance with all professional standards. Data is entered, in compliance with EPA and OIG data quality standards into the Inspector General Enterprise Management System and which is further reviewed for quality and consistency by the OIG performance quality staff members.

3a. Relevant Information Systems:

OIG Performance Measurement and Results System (PMRS). PMRS captures and aggregates information on an array of OIG measures in a logic model format, linking immediate outputs with long-term intermediate outcomes and results. (The logic model can be found in OIG's Annual Performance Report at <http://www.epa.gov/oig/planning.htm>. PMRS is the OIG official system for collecting performance results data, in relation to its strategic and annual goals. All outputs (recommendations, best practices, risks identified) and outcome results (actions taken, changes in policies, procedures, practices, regulations, legislation, risks reduced, certifications for decisions, environmental improvements) influenced by OIG's current or prior work, and recognized during FY 2010 and beyond, should be entered into PMRS.

PMRS was developed as a prototype in FY 2001. Since then, there have been system improvements for ease of use. For example, during FY 2009 the PMRS was converted to a relational database directly linked to the new Inspector General Enterprise Management System (IGEMS).

IGEMS is an OIG employee time-tracking and project cost-tracking database that generates management reports. IGEMS is used to generate a project tracking number and a work product number. This system also tracks project progress and stores all related cost information.

AutoAudit and Teammate. These are repositories for all project working papers.

3b. Data Quality Procedures:

Data quality assurance and control are performed as an extension of OIG products and services, subject to rigorous compliance with the Government Auditing Standards of the Comptroller General, and are regularly reviewed by OIG management, an independent OIG Management Assessment Review Team, and external independent peer reviews (e.g., by accountancies qualified to evaluate OIG procedures against Government Auditing Standards). Each Assistant Inspector General certifies the completeness and accuracy of performance data.

All data reported are audited internally for accuracy and consistency.

OIG processes, including data processes, are governed by the quality standards described in "Additional Information" under the Performance Term Definition field. Notably, the Project Management Handbook (which governs audits) provides a QA checklist (see Appendix 4, of the 2008 Project Management Handbook, attached to this record). The Project Manager (PM) is responsible for completing the Quality Assurance (QA) checklist throughout the project. The PM prepares the checklist and submits it to the Product Line Director (PLD) upon completion of the Post Reporting Phase of the Project. The Checklist should be completed for all projects, recognizing that some steps in the checklist may not be applicable to all projects. The QA Checklist asks teams to ensure the integrity of data that resides in all of the OIG data systems. [Source: Project Management Handbook].

During FY 2008, OIG implemented an Audit Follow-up Policy to independently verify the status of Agency actions on OIG recommendations, which serve as the basis for OIG intermediate outcome results reported in the OIG PMRS.

(Additional information on the OIG's follow-up process can be found at <http://oigintra.epa.gov/policy/policies/documents/OIG-04Follow-upPolicy.pdf>)

Attached Documents:

Policy101.PMH.Final.05.08.08.pdf

3c. Data Oversight:

There are three levels of PMRS access: View Only, Edit and Administrator. Everyone with IGEMS access has view only privileges. Individuals tasked with adding or editing PMRS entries must be granted PMRS Edit privileges. Contact a PMRS administrator to request Edit privileges.

Each Product Line Director (PLD), each of whom oversees one or more OIG work areas (e.g., Superfund, Contracts, etc.) and multiple project management teams, is responsible for ensuring that teams maintain proper integrity, accessibility, and retrievability of working papers in accordance with OIG policies. Likewise, they must ensure that information in OIG's automated systems is updated regularly by the team. (See field 2i, Additional Information, for more information about PLDs.)

3d. Calculation Methodology:

Database measures include numbers of: 1) recommendations for environmental and management improvement; 2) legislative, regulatory policy, directive, or process changes; 3) environmental, program management, security and resource integrity risks identified, reduced, or eliminated; 4) best practices identified and implemented; 5) examples of environmental and management actions taken and improvements made; 6) monetary value of funds questioned, saved, fined, or recovered; 7) criminal, civil, and administrative actions taken, 8) public or congressional inquiries resolved; and 9) certifications, allegations disproved, and cost corrections.

Because intermediate and long-term results may not be realized over a period of several years, only verifiable results are reported in the year completed.

Unit of measurement: Individual outcomes/actions

Unit of Measurement: Percentage (of the OIG budget)

4a. Oversight and Timing of Final Results Reporting:

Data comes from OIG audit, evaluations and investigations that are performed under strict compliance with professional standard of the US Government Accountability Office and the US Department of Justice and subject to independent peer review. Data in the form of activities, output, and outcomes is entered by designated staff into the Inspector General Enterprise Management System. All original data is quality controlled for compliance with professional standard and data entered is quality reviewed for accuracy, completeness, timeliness and adequately supported. All data entered is carefully reviewed several times a years as it is entered and subsequently reported on a quarterly basis. The OIG Assistant Inspectors General oversee the quality of the data used to generate reports of performance. The Office of the Chief of Staff oversee the data quality and the IG reviews the documents and date use for external consumption. Data is audited and quality test on a continuous basis through several steps from origin to final public consumption

4b. Data Limitations/Qualifications:

Because intermediate and long-term results may not be realized over a period of several years, only verifiable results are reported in the year completed.

Although all OIG staff are responsible for data accuracy in their products and services, there is a possibility of incomplete, miscoded, or missing data in the system due to human error or time lags. Data supporting achievement of results are often from indirect or external sources, with their own methods or standards for data verification/validation. Such data are reviewed according to the appropriate OIG quality standards (see "Additional Information"), and any questions about the quality of such data are documented in OIG reports and/or the PMRS.

The error rate for outputs is estimated at +/-2%, while the error rate for reported long-term outcomes is presumably greater because of the longer period needed for tracking results and difficulty in verifying a nexus between our work and subsequent actions and impacts beyond OIG's control. (The OIG logic model in the Annual Performance Report clarifies the kinds of measures that are output-oriented, like risks identified, versus outcome-oriented, like risks reduced.) Errors tend to be those of omission. Some errors may result from duplication as well.

4c. Third-Party Audits:

There have not been any previous audit findings or reports by external groups on data or database weaknesses in PMRS.

A December 2008 independent audit

(www.epa.gov/oig/reports/2009/QualityReviewofEPAOIG-20081216.pdf) found the following with regard to general OIG processes:

“We determined that the EPA OIG audits methodology, policies and procedures adequately complied with the Government Auditing Standards. The EPA OIG quality control system adequately documented compliance with professional and auditing standards for : Independence; Professional Judgment; Competence; Audit Planning; Supervision; Evidence and Audit Documentation; Reports on Performance Audits; Nonaudit Services; and the Quality Control Process. The auditors documented, before the audit report was issued, evidence of supervisory review of the work performed that supports findings, conclusions, and recommendations contained in the audit report.

“We determined that EPA OIG adequately followed the quality control policies established in the EPA OIG Project Management Handbook for conducting audit, program evaluation, and related projects. The audit documentation adequately includes evidence of work performed in the major three phases: Preliminary Research, Field Work and Reporting.

"We determined that EPA OIG adequately followed the standards and principles set forth in the PCIE and Executive Council on Integrity and Efficiency Quality Standards for Investigations, as applicable. The investigation adequately documented compliance with the guidelines applicable to the investigation efforts of criminal investigators working for the EPA OIG.”

The audit also identified two minor conditions, related working paper review/approval and completion/update status. OIG agreed with the auditor recommendations related to the conditions and adapted its Project Management Handbook to address the concerns.

A June 2010 internal OIG review of OIG report quality (which included a review of reporting procedures) found no substantial issues (see <http://www.epa.gov/oig/reports/2010/20100602-10-N-0134.pdf>)

Measure Code: 35D - Criminal, civil, administrative, and fraud prevention actions.

Office of the Inspector General (OIG)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Chief of Staff in the Immediate Office of the Inspector General

1a. Performance Measure Term Definitions:

This is a measure of the total number of convictions, indictments, civil and administrative actions from OIG investigations.

OIG performance results are a chain of linked events, starting with OIG outputs (e.g., recommendations, reports of best practices, and identification of risks). The subsequent actions taken by EPA or its stakeholders/partners, as a result of OIG's outputs, to improve operational efficiency and environmental program delivery are reported as intermediate outcomes. The resulting improvements in operational efficiency, risks reduced/eliminated, and conditions of environmental and human health are reported as outcomes. By using common categories of performance measures, quantitative results can be summed and reported. Each outcome is also qualitatively described, supported, and linked to an OIG product or output. The OIG can only control its outputs and has no authority, beyond its influence, to implement its recommendations that lead to environmental and management outcomes.

Criminal/Civil/Administrative Actions: Measured by the number of: 1) Indictments or informations where there is preliminary evidence of a violation of law; 2) convictions, guilty pleas, pre-trial diversion agreements, and based on the proof of evidence as decided by a judicial body affecting EPA operations and environmental programs; 3) Civil actions arising from OIG work. Civil actions include civil judgments and civil settlements from law suits for recovery; and 4) Administrative actions as a result of OIG work, which include: a) Personnel actions, such as reprimands, suspensions, demotions, or terminations of Federal, State, and local employees (including Federal contractor/grantee employees); b) Contractor or grantee (individual and entity) suspensions and/or debarments from doing business with the Federal government; and c) Compliance agreements.

Additional Information:

U.S. EPA, Office of Inspector General, Audits, Evaluations, and Other Publications;
on the Internet at www.epa.gov/oig , last updated August 2011.

Available

Federal Government Inspector General Quality Standards.

Except for justified exceptions, OIG adheres to the following standards, which apply across the federal government:

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 - For Inspections and Evaluations: Quality Standards for Inspections. (President's Council on Integrity and Efficiency (PCIE) and Executive Council on Integrity and Efficiency (ECIE), January 2005). <http://www.ignet.gov/pande/standards/oeistds.pdf>
 - For Audits: Government Auditing Standards, issued by the US General Accounting Office (GAO). The professional standards and guidance in the Yellow Book are commonly referred to as generally accepted government auditing standards (GAGAS). These standards and guidance provide a framework for conducting high quality government audits and attestation engagements with competence, integrity, objectivity, and independence. The current version of the Yellow Book (July 2007) can be located in its entirety at the following Website: www.gao.gov/govaud/d07162g.pdf

EPA OIG-Specific Operating Standards. The Project Management Handbook is the Office of Inspector General (OIG) policy document for conducting audit, program evaluation, public liaison, follow-up, and related projects. The Handbook describes the processes and standards the OIG uses to conduct the various phases of its work and helps ensure the quality, consistency, and timeliness of its products. Each OIG office may issue, upon approval by the Inspector General, supplemental guidance over assignments for which that office has responsibility.... This Handbook describes the audit, evaluation, public liaison, and follow-up processes and phases; it does not address OIG investigative processes although it does apply to audits/evaluations performed by the Office of Investigations (OI) [within EPA OIG]....OIG audit, program evaluation, public liaison, and follow-up reviews are normally conducted in accordance with appropriate Government Auditing Standards, as issued by the Comptroller General of the United States, commonly known as the Yellow Book.

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For some projects, adherence to all of the GAGAS may not be feasible or necessary. For these projects, the Product Line Director (PLD) will provide a rationale, the applicable standards not followed, and the impact on project results. The PLD's decision should be made during the design meeting, documented in the working papers, and described in the Scope and Methodology section of the report. [Source: Project Management Handbook].

Product Line Directors. Product Line Directors oversee one or more particular work areas and multiple project teams. The OIG product lines are as follows: Air/Research and Development; Water; Superfund/Land; Cross Media; Public Liaison and Special Reviews; Assistance Agreements; Contracts; Forensic Audits; Financial Management; Risk Assessment and Program Performance; Information Resources Management;

Investigations; US Chemical Safety and Hazard Investigation Board; Legal Reviews; Briefings; OIG Enabling Support Programs; and Other Activities.

For more information on the PLD responsibilities, see Chapter 5 of the OIG Project Management Handbook, attached to this record.

2a. Original Data Source:

Data is collected and reported by designated OIG staff members in OIG Performance Measurement Databases as a result of OIG performance evaluations, audits, inspections and investigations and other analysis of proposed and existing Agency Policies, regulations and laws. OIG collects such data from the activities, outputs, intermediate outcomes and long-term outcome results of OIG operations.

2b. Source Data Collection:

Performance information is entered by designated staff into the Inspector General Enterprise Management System from OIG audits, evaluations and investigations performed under strict compliance with applicable professional standards. All OIG products go through a rigorous quality assurance process and are subject to independent peer review.

2c. Source Data Reporting:

Data is derived from the results of audits, evaluations, investigations and special analysis that are performed in accordance with Professional Standards of the US Government Accountability Office or the US Department of Justice. All OIG products are quality controlled and subject to independent peer review for compliance with all professional standards. Data is entered, in compliance with EPA and OIG data quality standards into the Inspector General Enterprise Management System and which is further reviewed for quality and consistency by the OIG performance quality staff members.

3a. Relevant Information Systems:

OIG Performance Measurement and Results System (PMRS). PMRS captures and aggregates information on an array of OIG measures in a logic model format, linking immediate outputs with long-term intermediate outcomes and results. (The logic model can be found in OIG's Annual Performance Report at <http://www.epa.gov/oig/planning.htm>. PMRS is the OIG official system for collecting performance results data, in relation to its strategic and annual goals. All outputs (recommendations, best practices, risks identified) and outcome results (actions taken, changes in policies, procedures, practices, regulations, legislation, risks reduced, certifications for decisions, environmental improvements) influenced by OIG's current or prior work, and recognized during FY 2010 and beyond, should be entered into PMRS.

PMRS was developed as a prototype in FY 2001. Since then, there have been system improvements for ease of use. For example, during FY 2009 the PMRS was converted to a relational database directly linked to the new Inspector General Enterprise Management System (IGEMS).

IGEMS is an OIG employee time-tracking and project cost-tracking database that generates management reports. IGEMS is used to generate a project tracking number and a work product number. This system also tracks project progress and stores all related cost information.

AutoAudit and Teammate. These are repositories for all project working papers.

3b. Data Quality Procedures:

Data quality assurance and control are performed as an extension of OIG products and services, subject to rigorous compliance with the Government Auditing Standards of the Comptroller General, and are regularly reviewed by OIG management, an independent OIG Management Assessment Review Team, and external independent peer reviews (e.g., by accountancies qualified to evaluate OIG procedures against Government Auditing Standards). Each Assistant Inspector General certifies the completeness and accuracy of performance data.

All data reported are audited internally for accuracy and consistency.

OIG processes, including data processes, are governed by the quality standards described in "Additional Information" under the Performance Term Definition field. Notably, the Project Management Handbook (which governs audits) provides a QA checklist (see Appendix 4, of the 2008 Project Management Handbook, attached to this record). The Project Manager (PM) is responsible for completing the Quality Assurance (QA) checklist throughout the project. The PM prepares the checklist and submits it to the Product Line Director (PLD) upon completion of the Post Reporting Phase of the Project. The Checklist should be completed for all projects, recognizing that some steps in the checklist may not be applicable to all projects. The QA Checklist asks teams to ensure the integrity of data that resides in all of the OIG data systems. [Source: Project Management Handbook].

During FY 2008, OIG implemented an Audit Follow-up Policy to independently verify the status of Agency actions on OIG recommendations, which serve as the basis for OIG intermediate outcome results reported in the OIG PMRS.

(Additional information on the OIG's follow-up process can be found at <http://oigintra.epa.gov/policy/policies/documents/OIG-04Follow-upPolicy.pdf>)

Attached Documents:

Policy101.PMH.Final.05.08.08.pdf

3c. Data Oversight:

There are three levels of PMRS access: View Only, Edit and Administrator. Everyone with IGEMS access has view only privileges. Individuals tasked with adding or editing PMRS entries must be granted PMRS Edit privileges. Contact a PMRS administrator to request Edit privileges.

Each Product Line Director (PLD), each of whom oversees one or more OIG work areas (e.g., Superfund, Contracts, etc.) and multiple project management teams, is responsible for ensuring that teams maintain proper integrity, accessibility, and retrievability of working papers in accordance with OIG policies. Likewise, they must ensure that information in OIG's automated systems is updated regularly by the team. (See field 2i, Additional Information, for more information about PLDs.)

3d. Calculation Methodology:

Database measures include numbers of: 1) recommendations for environmental and management improvement; 2) legislative, regulatory policy, directive, or process changes; 3) environmental, program

management, security and resource integrity risks identified, reduced, or eliminated; 4) best practices identified and implemented; 5) examples of environmental and management actions taken and improvements made; 6) monetary value of funds questioned, saved, fined, or recovered; 7) criminal, civil, and administrative actions taken, 8) public or congressional inquiries resolved; and 9) certifications, allegations disproved, and cost corrections.

Because intermediate and long-term results may not be realized over a period of several years, only verifiable results are reported in the year completed.

Unit of measurement: Individual actions

4a. Oversight and Timing of Final Results Reporting:

Data comes from OIG audit, evaluations and investigations that are performed under strict compliance with professional standard of the US Government Accountability Office and the US Department of Justice and subject to independent peer review. Data in the form of activities, output, and outcomes is entered by designated staff into the Inspector General Enterprise Management System. All original data is quality controlled for compliance with professional standard and data entered is quality reviewed for accuracy, completeness, timeliness and adequately supported. All data entered is carefully reviewed several times a year as it is entered and subsequently reported on a quarterly basis. The OIG Assistant Inspectors General oversee the quality of the data used to generate reports of performance. The Office of the Chief of Staff oversees the data quality and the IG reviews the documents and data use for external consumption. Data is audited and quality tested on a continuous basis through several steps from origin to final use.

4b. Data Limitations/Qualifications:

Because intermediate and long-term results may not be realized over a period of several years, only verifiable results are reported in the year completed.

Although all OIG staff are responsible for data accuracy in their products and services, there is a possibility of incomplete, miscoded, or missing data in the system due to human error or time lags. Data supporting achievement of results are often from indirect or external sources, with their own methods or standards for data verification/validation. Such data are reviewed according to the appropriate OIG quality standards (see "Additional Information"), and any questions about the quality of such data are documented in OIG reports and/or the PMRS.

The error rate for outputs is estimated at +/-2%, while the error rate for reported long-term outcomes is presumably greater because of the longer period needed for tracking results and difficulty in verifying a nexus between our work and subsequent actions and impacts beyond OIG's control. (The OIG logic model in the Annual Performance Report clarifies the kinds of measures that are output-oriented, like risks identified, versus outcome-oriented, like risks reduced.) Errors tend to be those of omission. Some errors may result from duplication as well.

4c. Third-Party Audits:

There have not been any previous audit findings or reports by external groups on data or database weaknesses in PMRS.

A December 2008 independent audit

(www.epa.gov/oig/reports/2009/QualityReviewofEPAOIG-20081216.pdf) found the following with regard to general OIG processes:

“We determined that the EPA OIG audits methodology, policies and procedures adequately complied with the Government Auditing Standards. The EPA OIG quality control system adequately documented compliance with professional and auditing standards for : Independence; Professional Judgment; Competence; Audit Planning; Supervision; Evidence and Audit Documentation; Reports on Performance Audits; Nonaudit Services; and the Quality Control Process. The auditors documented, before the audit report was issued, evidence of supervisory review of the work performed that supports findings, conclusions, and recommendations contained in the audit report.

“We determined that EPA OIG adequately followed the quality control policies established in the EPA OIG Project Management Handbook for conducting audit, program evaluation, and related projects. The audit documentation adequately includes evidence of work performed in the major three phases: Preliminary Research, Field Work and Reporting.

“We determined that EPA OIG adequately followed the standards and principles set forth in the PCIE and Executive Council on Integrity and Efficiency Quality Standards for Investigations, as applicable. The investigation adequately documented compliance with the guidelines applicable to the investigation efforts of criminal investigators working for the EPA OIG.”

The audit also identified two minor conditions, related working paper review/approval and completion/update status. OIG agreed with the auditor recommendations related to the conditions and adapted its Project Management Handbook to address the concerns.

A June 2010 internal OIG review of OIG report quality (which included a review of reporting procedures) found no substantial issues (see <http://www.epa.gov/oig/reports/2010/20100602-10-N-0134.pdf>)

Office of Indian and Tribal Affairs (OITA) Record(s)

Measure Code: 5PR - Percent of Tribes conducting EPA approved environmental monitoring and assessment activities in Indian country (cumulative.)

Office of Indian and Tribal Affairs (OITA)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

4 - Strengthen Human Health and Environmental Protection in Indian Country

Sub-Objective Number and Title:

1 - Improve Human Health and the Environment in Indian Country

Strategic Target Code and Title:

2 - By 2015, increase the percent of tribes conducting EPA-approved environmental monitoring

Managing Office:

AIEO

1a. Performance Measure Term Definitions:

A tribe is a governmental entity that is recognized by the federal government and eligible to receive federal funding.

The performance measure reports the number of active Quality Assurance Project Plans (QAPPs) for monitoring activities that have been approved by Regional Quality Assurance Officers. All ongoing environmental monitoring programs are required to have active QAPPs, which are used as a surrogate for the monitoring activities that occur in Indian country.

However, tribes often have more than one QAPP, so the count of total QAPPs is always higher than the number of tribes that have QAPPs as reported for this measure.

Environmental monitoring and assessment activities are those that measure biological, chemical, or physical measurements.

EPA-approved indicates a required QAPP for the activity has been approved by Regional Quality Assurance Officers.

Active QAPPs are those that have not expired.

This measure represents progression toward the goal of improving human health and the environment in Indian country by helping tribes plan, develop and establish environmental protection programs.

2a. Original Data Source:

Regional Quality Assurance Officers

2b. Source Data Collection:

Regional tribal program liaisons obtain information from Regional Quality Assurance Officers.

Spatial Detail: Base unit is a tribe. Geographic coverage is national.

2c. Source Data Reporting:

Reports are in the form of tables with measures in the columns and years in the rows. The years can be compared. Data are input manually by regional Tribal Program Management System (TPMS) team members. The data are reported by the Regions into TPMS at the end of the year.

3a. Relevant Information Systems:

The Tribal Program Management System (TPMS) is a secure database that holds the performance information

<http://www.epa.gov/tribalportal/>

The information is entered into standard query fields in the data system. Thus, there is no allowance for differences in reporting across EPA's Regional offices, and national reports can be assembled in a common framework. The assumption is that the authorized person who enters the data is knowledgeable about the performance status of the tribe and understands data definitions.

Quality Management Plan (QMP) is being drafted by contractor

3b. Data Quality Procedures:

Standard Operating Procedures are detailed in the Data Definitions document. Each Regional Administrator, who has tribal activity in his regional area, is the EPA official who certifies information in TPMS prior to submission to EPA Headquarters American Indian Office (AIEO.) However, in some cases the Regional Administrator may wish to delegate the signatory authority to another official such as the Regional Indian Coordinator. This procedure generally follows guidance provided in EPA Information Quality Guidelines. (See <http://www.epa.gov/quality/informationguidelines/> for more information.)

Additionally, the data in TPMS are extracted by the regional TPMS team twice a year, and delivered by spreadsheet to the Regional TPMS Project Officers for review and verification.

Attached Documents:

TPMS Data Definitions.doc

3c. Data Oversight:

Regional Indian Coordinators

3d. Calculation Methodology:

Each row in the report is a fiscal year. Calculation methodology is: Count number of tribes with at least one active QAPP in a fiscal year. A tribe is counted once even if they have more than one QAPP.

Calculation of Percentages: 572 is the number that is used to calculate percentage, and reflects tribal bands that are independent entities and are eligible for EPA funding.

Attached Documents:

TPMS Data Definitions.doc

4a. Oversight and Timing of Final Results Reporting:

The procedures for collecting and reporting on the Goal 4 Objective 3 performance measures require that Regional program managers certify the accuracy of the data submitted by the regions to AIEO. This certification procedure is consistent with EPA Information Quality Guidelines and verified by AIEO personnel

4b. Data Limitations/Qualifications:

Because data are input by EPA's Regional Project Officers on an ongoing basis, there may be a time lag between when a tribal program status has been achieved and when the data are entered into the TPMS.

For the TPMS, errors could occur by mis-entering data or neglecting to enter data. However, the data from each region will be certified as accurate at the end of each reporting cycle; error is estimated to be low, about 1-2 percent.

4c. Third-Party Audits:

Not applicable

Measure Code: 5PQ - Percent of Tribes implementing federal regulatory environmental programs in Indian country (cumulative).

Office of Indian and Tribal Affairs (OITA)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

4 - Strengthen Human Health and Environmental Protection in Indian Country

Sub-Objective Number and Title:

1 - Improve Human Health and the Environment in Indian Country

Strategic Target Code and Title:

1 - By 2015, increase the percent of tribes implementing federal regulatory environmental programs

Managing Office:

AIEO

1a. Performance Measure Term Definitions:

The performance measure tracks the number of “Treatment in a manner similar to a State” (TAS) program approvals or primacies and execution of “Direct Implementation Tribal Cooperative Agreements (DITCAs).”

TAS status grants a tribe eligibility to implement and administer the environmental statutes for a program within the tribe’s boundaries comparable to the way States implement and administer the statutes outside of Indian country.

DITCAs are agreements negotiated between EPA and federally-recognized tribes and eligible intertribal consortia that enable the tribes to conduct agreed-upon activities and to help EPA implement federal environmental programs in Indian country in the absence of an acceptable tribal program.

The measure is based on a count of tribes, and a given tribe may have more than one TAS program, and may have DITCAs as well. Because of the tribes with multiple qualifying programs, the total number of TAS designations plus DITCAs in Indian country is higher than the number of tribes with regulatory environmental programs as reported for this measure.

This measure represents progression toward the goal of improving human health and the environment in Indian country by helping tribes plan, develop and establish environmental protection programs.

2a. Original Data Source:

Regions and Tribes

2b. Source Data Collection:

Data for the TPMS are input on an ongoing basis by Regional tribal programs and EPA headquarters.

2c. Source Data Reporting:

Reports are in the form of tables with measures in the columns and years in the rows. The years can be compared. Data are input manually by regional tribal Tribal Program Management System (TPMS) team members. The data are reported by the Regions into TPMS and at the end of the year.

3a. Relevant Information Systems:

The Tribal Program Management System (TPMS) is a secure database that holds the performance information

<http://www.epa.gov/tribalportal/>

The information is entered into standard query fields in the data system. Thus, there is no allowance for differences in reporting across EPA's Regional offices, and national reports can be assembled in a common framework. The assumption is that the authorized person who enters the data is knowledgeable about the performance status of the tribe and understands data definitions.

Quality Management Plan (QMP) is being drafted by contractor

3b. Data Quality Procedures:

Standard Operating Procedures are detailed in the Data Definitions document. Each Regional Administrator, who has tribal activity in his regional area, is the EPA official who certifies information in TPMS prior to submission to EPA Headquarters American Indian Office (AIEO.) However, in some cases the Regional Administrator may wish to delegate the signatory authority to another official such as the Regional Indian Coordinator. This procedure generally follows guidance provided in EPA Information Quality Guidelines. (See <http://www.epa.gov/quality/informationguidelines/> for more information.)

Additionally, the data in TPMS are extracted by the regional TPMS team twice a year, and delivered by spreadsheet to the Regional TPMS Project Officers for review and verification.

Attached Documents:

TPMS Data Definitions.doc

3c. Data Oversight:

Regional Indian Coordinators certify data and submit to AIEO

3d. Calculation Methodology:

Calculation methodology is: Count the number of active tribes with DITCA and TAS in a fiscal year. TAS do not have expiration dates and are cumulative.

Calculation of Percentages: 572 is the number that is used to calculate percentage, and reflects tribal bands that are independent entities and are eligible for EPA funding.

Because of the tribes with multiple qualifying programs, the total number of TAS designations plus DITCAs in Indian country is higher than the number of tribes with regulatory environmental programs as reported for this measure.

Percent of Tribes implementing federal regulatory environmental programs in Indian country:

Attached Documents:

TPMS Data Definitions.doc

4a. Oversight and Timing of Final Results Reporting:

The procedures for collecting and reporting on the Goal 4 Objective 3 performance measures require that Regional program managers certify the accuracy of the data submitted by the regions to AIEO. This certification procedure is consistent with EPA Information Quality Guidelines and is verified by AIEO personnel

4b. Data Limitations/Qualifications:

Because data are input by EPA's Regional Project Officers on an ongoing basis, there may be a time lag between when a tribal program status has been achieved and when the data are entered into the TPMS.

For the TPMS, errors could occur by mis-entering data or neglecting to enter data. However, the data from each region will be certified as accurate at the end of each reporting cycle; error is estimated to be low, about 1-2 percent.

4c. Third-Party Audits:

Not Applicable

Office of Land and Emergency Management (OLEM) Record(s)

Measure Code: 113 - Number of LUST cleanups completed that meet risk-based standards for human exposure and groundwater migration in Indian country.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

2 - Clean Up Contaminated Land

Strategic Target Code and Title:

7 - Through 2018, reduce the backlog of LUST cleanups in Indian Country

Managing Office:

Office of Underground Storage Tanks (OUST)

1a. Performance Measure Term Definitions:

Cleanups Completed –The number of cleanups completed is the cumulative number of confirmed releases where cleanup has been initiated and where EPA has determined that no further actions are currently necessary to protect human health and the environment. This number includes sites with post-closure monitoring as long as site-specific (e.g., risk-based) cleanup goals have been met. Site characterization, monitoring plans, and site-specific cleanup goals must be established and cleanup goals must be attained for sites being remediated by natural attenuation to be counted in this category. Clarification: “Cleanups Completed” is a cumulative category—sites should never be deleted from this category. A “no further action” determination made by the Region that satisfies the “cleanups initiated” measure above, also satisfies this “cleanups completed” measure. This determination will allow a confirmed release that does not require further action to meet the definition of both an initiated and completed cleanup.

For complete definition see EPA OUST's UST And LUST Performance Measures Definitions. January 18, 2008.

<https://www.epa.gov/ust/ust-performance-measures>

Risk-based standards for human exposure and groundwater migration.

Reference: UST Performance Measures <https://www.epa.gov/ust/ust-performance-measures>

2a. Original Data Source:

The original data source is EPA which is responsible for the implementation of the UST Program in Indian country.

For more information:

1. For complete definitions see UST Performance Measures Definitions, January 18, 2008 -

<https://www.epa.gov/ust/ust-performance-measures>

2b. Source Data Collection:

Determination of cleanup completion requires consideration of environmental data, such as field sampling, which can vary by project. The overall measure requires tabulation of the number LUST clean-ups completed.

Spatial Coverage: National

For contracts: EPA Regions determine which quality requirements are applicable. Contracts must be current and specify: QA roles and responsibilities for EPA and national LUST contractors; and quality requirements

including responsibilities for final review and approval. Default quality requirements include: organization-level QA documentation (i.e. QMP) for the primary contractors; and project-level QAPPs for each Tribal LUST remedial Work Assignment. Sample EPA contract language: "the Contractor shall comply with the higher-level quality standard selected below: Specifications and Guidelines for Quality Systems for Environmental Data Collection and Environmental Technology Programs (ANSI/ASQC E4, 1994). As authorized by FAR 52.246-11, the higher-level quality standard ANSI/ASQC E4 is tailored as follows: The solicitation and contract require the offerors/contractor to demonstrate conformance to ANSI/ASQC E4 by submitting the quality documentation described below. The Contractor shall not commence actual field work until the Government has approved the quality documentation (i.e., QAPP)."

Note: Regions keep copies of individual QAPPs associated with contracts.

2c. Source Data Reporting:

States, Washington, DC and territories submit data directly into LUST4.

3a. Relevant Information Systems:

LUST4. This database is the master database of all LUST program-related data. EPA reports data for activity and measures directly into LUST4. LUST4 includes both source data and transformed data (e.g., data aggregated into Regional totals).

The program's Oracle web-based system-- LUST4-- accessed through EPA's portal.

OSWER Performance Assessment Tool (PAT). This tool serves as the primary external servicing resource for organizing and reporting OSWER's performance data. PAT collects information from OSWER program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from LUST4; replicates business logic used by LUST4 for calculating measures; can deliver that data to EPA staff and managers via a business intelligence dashboard interface for analytic and reporting use; enables LUST point of contact to document status and provide explanation for each measure; and transmits data to the Budget Automation System.

Budget Automation System (BAS). BAS is the final repository of the performance values.

3b. Data Quality Procedures:

.EPA's regional program managers provide first-level data quality reviews and oversight of their program performance measure results.

OUST uses a combination of automated validation along with manual QA/QC review.

QA/QC REVIEW BY REGIONS. EPA/OUST oversees the use of the QA/QC checklist, which is incorporated into the LUST4 oracle web-based system. Regions complete the QA/QC checklist, sign it electronically and submit it to EPA/OUST for review, comment and approval of each record.

NOTE: This QA/QC checklist was last updated 10/1/2009 and is accessed through the user interface of LUST4.

Regional QA/QC Evaluation Checklist –

Note: Checklist is to be completed by Regional reviewer and will appear "shaded" to others.

1. Previous Totals Column

-- Verify the previous total number is correct by comparing it to the total from the last reporting period. If there is a discrepancy, report the information in the "Correction To Previous Data" column. Please add

comments in the “Comments” column for any corrections that are made to the applicable performance measure.

2. Actions This Reporting Period

For each performance measure, if the “Reported” number deviates by more than 10% from the last period’s number, the Region must include an explanation of the deviation.

3. Corrections to Previous Data Column

-- Ensure that any corrections to measures are documented at the Regional office and in the LUST4 system.
-- Evaluate if the corrections will impact other performance measures (e.g., if the number of cleanups completed is adjusted downward by a correction, does this also result in a commensurate downward adjustment of cleanups initiated?) Include any additional comments in the “Comments” column as necessary.

4. Totals (Cumulative, if applicable)

-- Verify accuracy of all cumulative totals
-- Include any additional comments in the “Comments” column as necessary

AUTOMATED VALIDATION. This feature is no longer applicable. The feature ONLY applied to the American Recovery and Reinvestment Act (ARRA) funded projects.

EPA/OUST provides second-level data quality reviews of all data

LUST4. LUST4 operates under OLEM's QMP, including the security policy specified in that QMP. LUST4 does not have any stand-alone certifications related to the EPA security policy or the Systems Life Cycle Management policy. The LUST4 system is built upon Oracle Business Intelligence tools provided by the EPA Business Intelligence Analytics Center, which ensures that a stand-alone security certification is not necessary.

PAT. PAT operates under the OLEM Quality Management Plan (QMP). PAT has a security certification confirming that a security policy is not necessary because no sensitive data are handled and PAT is built upon the Oracle-based business intelligence system. PAT's security certification indicates that it follows all security guidelines for EPA's Oracle Portal and that PAT is (1) not defined as a “Major Application” according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 2.3.1; (2) does not store, process, or transmit information that the degree of sensitivity is assessed as high by considering the requirements for availability, integrity, and confidentiality according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 3.7.2. (3) is not covered by EPA Order 2100.2A1 Information Technology Capital Planning and Investment Control (CPIC).
Data Flow:

Step 1. Performance measure are entered into LUST4 by Regions (for EPA contractors).

Step 2. Each Region conducts Regional level review of their data from the LUST4 system.

Step 3. Headquarters' staff perform performs National Program Review, using data from the LUST4 system. Rejected data must be corrected by the Region (Step 2).

Step 4. PAT pulls data from LUST4. Headquarters staff compare PAT results to LUST4 results. If PAT does not match LUST4 then there was an error with the upload and data is reloaded. Headquarters staff enter into PAT

the ACS status information of "Indicator" for each measure and, if desired, explanation. (Note: PAT allows for programs to identify status other than "Indicator." When programs select a status of "no status," "data not available," or "target not met," PAT requires that an explanation be provided. LUST program policy is to resolve all reporting issues prior to ACS reporting, so "Indicator" is the only status chosen and explanations for that status are optional.)

Step 5. Headquarters approves PAT results, and PAT pushes results into BAS/Measures Central.

Step 6. Measures Central aggregates Regional data into a national total. OUST reporting lead reviews and certifies results.

3c. Data Oversight:

An EPA Headquarters primary contact maintains a list of the HQ (OUST and OEI) and Regional users; a record of changes to the list is also maintained. The primary HQ contact ensures that Regional reporting is on track, conducts QA on LUST performance measures, ensures QA issues are resolved and/or documented, and oversees final reporting to BAS.

Regional Program Managers are ultimately responsible for regional-level data. They conduct their review based upon a national QA/QC checklist.

3d. Calculation Methodology:

The cumulative number of confirmed releases where cleanup has been initiated and where the region has determined that no further actions are currently necessary to protect human health and the environment, includes sites where post-closure monitoring is occurring as long as site specific (e.g., risk based) cleanup goals have been met. Site characterization, monitoring plans and site-specific cleanup goals must be established and cleanup goals must be attained for sites being remediated by natural attenuation to be counted in this category. (See <https://www.epa.gov/ust/ust-performance-measures>.)

The unit of analysis is site cleanup

4a. Oversight and Timing of Final Results Reporting:

Semiannual by Deputy Office Director. Responsible for final review to ensure LUST 4 System Manager has completed review, and numbers are accurate.

4b. Data Limitations/Qualifications:

Data quality depends on the accuracy and completeness of state records.

4c. Third-Party Audits:

Not applicable

Measure Code: 337 - Percent of all FRP inspected facilities found to be non-compliant which are brought into compliance.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

1 - Emergency Preparedness and Response

Strategic Target Code and Title:

3 - Bring FRP Facilities into compliance

Managing Office:

Office of Emergency Management

1a. Performance Measure Term Definitions:

1. FRP facility: A facility which must submit a Facility Response Plan (FRP) to EPA to demonstrate its preparedness to respond to a worst-case discharge of oil under Clean Water Act, as amended by the Oil Pollution Act. FRP planholders typically represent facilities that pose a higher-risk to human health and the environment from a discharge of oil.
2. Initially compliant: The tag used to describe facilities that are not in violation of the requirements in the FRP regulation of the Oil Pollution Act upon inspection in a given fiscal year.
3. Non-compliant: The tag used to describe a facility that upon inspection is deemed to be in violation of the FRP regulation. Non-compliant facilities are brought into compliance through EPA follow-up activity.
4. Brought into compliance: The tag used to describe a facility that was found non-compliant at some point during the measurement period and then was then found to be in compliance after a follow-up inspection activity.
5. Not Subject: The tag used to describe a facility that, upon inspection, is not required to comply with the FRP regulation. Facility may have been subject previously but has made changes to the facility whereby it is no longer subject to the FRP regulation.
6. Closed: The tag used to describe a facility that, upon inspection, is closed and no longer subject to the FRP rule. Facility may have been subject previously.
7. Carry Over: The tag used to describe facilities that were found non-compliant at some point before the current FY in the measurement period and remain non-compliant as of the beginning of the current FY.
8. Oil Database Application: The online database that is used to collect and store facility and inspection-related data for FRP facilities. The Oil Database is not a public database.

2a. Original Data Source:

The primary data used to calculate the oil measures are the number and outcomes of facility inspections and government initiated unannounced exercises (GIUEs) and the dates in which non-compliant facilities are brought into compliance. Specifically, calculation of the oil measures involves the recording of the inspection activity and the outcome (in compliance vs. out of compliance) and subsequent tracking of the dates when non-compliant FRP facilities are brought into compliance. Starting with FY 2011, the reported value of facilities brought into compliance in any given FY must also capture inspections that occurred prior to the current FY (using FY 2010 as the base year).

2b. Source Data Collection:

In order to calculate the measure for each FY, the following data must be collected and entered by the regions for each inspection conducted:

1. Facility Identifier – identifier assigned by the Oil Database Application used to track the activity for each unique facility.
2. Inspection (Activity) Tracking Number – also assigned by the Oil Database Application, but prior to October 2011, these tracking numbers were Region-specific.
3. Inspection Date (Activity Start/Schedule Date in the Oil Database Application) – date of the initial inspection or most recent compliance inspection.
4. Inspection Outcome – either in compliance or not in compliance.
5. Date of Confirmed Compliance (Brought into Compliance Date in the Oil Database Application) – date the facility is verified to be in compliance overall; could occur in subsequent FYs.

The business rules for entering data into the “Compliance Module” of the Oil Database Application used to calculate the end-of-year measures results are as follows:

- Inspection Outcomes: When a facility is inspected for FRP compliance (including GIUE’s), the outcome of the inspection should be recorded in the application. If the facility is found to be out of compliance, the outcome should be recorded as “out of compliance.” If the facility is found to be compliant, then the outcome should be recorded as “in compliance.”
- “Not-Subject Facilities” Reporting: If an inspected facility is found to be not subject to FRP regulations, the outcome of the inspection should be recorded as “in compliance”.
- Tracking Multiple Inspections: If there are multiple inspections in the same FY for a facility, the SPCC inspection will be counted as a single inspection, and the FRP inspection/GIUE will be counted as a separate inspection/exercise. Multiple FRP inspections would not be added together by the Oil Database Application for the same facility. If there are multiple inspections and a GIUE in the same FY for a facility, in order to determine compliance status of the facility, the application will look at the activities to determine if the most recent activity has an “Inspection Outcome” or a “Brought into Compliance” date. If an “Inspection Outcome” or a “Brought into Compliance” date doesn’t exist on the most recent activity, the Oil Database Application will look at the previous activity within the FY to determine the facility’s compliance status.
- Tracking Compliance vs. Enforcement: Once a facility is brought into compliance, it should be captured in the “Inspection Outcome” and “Brought into Compliance” fields in the application. If additional enforcement is pursued by the Region after a facility is brought into compliance, the facility record should retain the facility’s status as “in compliance.”
- Treatment of Carryover Non-Compliant Facilities: The application automatically tracks the carryover of non-compliant facilities to the next FY, starting at the end of FY 2010. Specifically, the application will review the recorded inspections (FRP and GIUE’s) performed since FY 2010 and for facilities that remain out of compliance as of the date the report is run, these facilities will represent the total population of non-compliant facilities, including carryover and newly-inspected, non-compliant facilities. For example, if you have a facility that was inspected in FY 2010 that was initially found to be “not in compliance” and is still showing as “not in compliance” at the end of FY 2011, the facility will be included in the carryover of non-compliant facilities to the next FY (i.e., FY 2012). This carryover count will be automatically added to the list of facilities found to be non-compliant in the current FY (or FY 2012 in this example).
- Treatment of Follow-up Inspections: If a non-compliant facility is inspected for FRP or is exercised (i.e., GIUE) in a subsequent FY, this inspection should be identified as a “Follow-up Inspection”. It should be noted that the application will identify this follow-up inspection as tied to the original inspection where the outcome as identified as “out of compliance.” This follow-up inspection will not be recorded as new inspection in that

FY to avoid double-counting in the “Facilities Inspected” column for the HQ Oil Measures Report. However, for programmatic tracking, this follow-up inspection will be retained in the facility record in the compliance module.

- Treatment of Inspections with No Outcome: If the inspection or GIUE does not have an “Inspection Outcome” or a “Brought into Compliance” date populated in the compliance module of the application, the facility will count as “not in compliance” on the HQ Measures Report. When this occurs, the record should be updated with inspection outcome.

- Tracking of Inspection and Plan Review Outcomes: For inspected facilities that are in compliance at the time of the inspection, but a subsequent Plan review reveals the Plan to be out of compliance, enter the two activities as different activities, field inspection vs. Plan review. Enter the inspection as “out of compliance” (using the date of the inspection), and then enter the Plan review activity as “not in compliance” (using the review date). When the Plan is deemed “in compliance”, enter this compliance date in the “Brought into Compliance Field” for the Plan review activity and the inspection activity. Note that the “Brought into Compliance” date for the inspection activity is considered the overall compliance date for oil measures reporting.

2c. Source Data Reporting:

Data Submission Instrument: Data submission and data entry are handled via the Oil Database Application. The Oil Database Application can be accessed at <http://emp.epa.gov/>

Data Entry Mechanism: Data are entered by EPA personnel in the regions. Facility and inspection results data are entered for each initial inspection and follow-up activity.

Frequency of Data Transmission to EPA: Data are entered on an ongoing-basis as inspections are completed.

The initial measurement period for this measure starts with FY 2010 and concludes in FY 2015. The measure was extended to FY 2018 for the next iteration of the Agency’s Strategic Plan.

A progressive rate (i.e., cumulative over the measurement period) of non-compliant facilities brought into compliance was selected starting with 15% in the base year leading up to 60% brought into compliance in the final year to account for carryover of non-compliant facilities to subsequent fiscal years. The reasoning behind this approach is based on program experience of the time-lag to bring facilities into compliance. For example, non-compliant facilities may need to install equipment or complete construction activities to achieve compliance. Another example is a facility may be subject to enforcement action as a result of non-compliance. Each or both of these scenarios could result in an extended timeframe to bring the facility into compliance. Thus, a 60% target was selected for FY 2015 to account for the potential time-lag for achieving compliance. The goal over the FY 2016- 2018 measurement period is to maintain a cumulative 60% brought into compliance rate.

3a. Relevant Information Systems:

System Description: The Oil Database Application contains all of the necessary fields and data entry points for a facility inspection. The data are reported via the HQ Measures Report in the Oil Database Application. The Oil Database Application contains data on the following components of a facility and its inspection history:

1. General
2. Address
3. Contacts/Ownership
4. FRP

5. Compliance Module
6. Oil Capacity
7. Discharge History
8. Documents

Source/Transformed Data: The data in the system are source data about the facility and the inspection results.

Information System Integrity Standards: As an application module of the Emergency Management Portal (EMP) the Oil Database application contains Information System Integrity measures to secure its data. EMP has undergone an annual Continuous Monitoring Assessment (CMA) and SAISO Audit of its security posture and continuous monitoring activities. In addition, the CMA was to facilitate ongoing Security Authorization of the system in accordance with Office of Management & Budget Circular A-130, Appendix III, Security of Federal Automated Information Resource; NIST Special Publication 800-37, rev.1, Guide for Applying the Risk Management Framework to Federal Information Systems; and NIST Special Publication 800-53A Rev.1, a subset of the applicable Security Controls of EMP's System Security Plan (SSP) were assessed. EMP's SSP and its Security Controls get reviewed on an annual basis.

The EPA Annual Commitment System (ACS) in BAS is the database for the number of inspections/exercises at FRP facilities. Using data submitted directly by Regional staff as well as data in ACS, the Office of Emergency Management (OEM) tracks in a spreadsheet national information about Regional activities at FRP facilities. EPA will also be using its in-house SPCC/FRP Oil Database to pull data related to inspected facilities to assist measurement tracking.

3b. Data Quality Procedures:

Facility and Inspection data go through a multi-phase quality check. The Oil Database Application has built in data checks for common data entry problems (e.g., checks for missing data) for each facility and inspection outcome. Regions also engage in periodic (usually quarterly or bi-annual) manual QA/QC procedures to double check the data that are entered in the database.

OEM HQ also assists the regions with their manual data checks and resolves problems with missing or incorrect data. This happens on a bi-annual basis.

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

- HQ Project Manager: Office of Emergency Management Resources Management Division & Regulations Implementation Division
- HQ Project Support: Office of Emergency Management - Resources Management Division & Regulations Implementation Division
- Regional Oil Program Managers and Inspector Personnel

Source Data Reporting Oversight Responsibilities:

- Ensure Accuracy of source data entered into the Oil Database Application through manual QA/QC and data quality checks built into the application.

Information Systems Oversight Personnel:

- HQ Project Manager: Office of Emergency Management – Resources Management Division & Regulations Implementation Division
- HQ Project Support: Office of Emergency Management – Resources Management Division & Regulations Implementation Division

Information Systems Oversight Responsibilities:

- Maintain information systems and correct errors in report calculations.
- Provide upgrades to database capabilities.

3d. Calculation Methodology:

Explanation of Calculations: Data are subject to the following steps in order to determine the brought into compliance percentage (BIC%) that is the final reporting form for these measures.

1. First, the Regional BIC% is calculated for each region using the following steps:
 - a. For each Fiscal Year of the overall reporting period (initially FYs 2010 to 2015, extended to FY 2018) the number of facilities that are found non-compliant (NC#) is subtracted from the total number of inspections conducted in that FY, which includes those that were found compliant, not subject or closed (Total). NC# is that region’s portion of the total denominator used to calculate the brought into compliance percentage (BIC %).
 - b. Facilities that are brought into compliance during the same fiscal (BIC#) year make up that region’s portion of the numerator of the BIC %.
 - c. So Regional BIC% = BIC# divided by total NC# (facilities found non-compliant in current FY and carryover non-compliant facilities from prior FY)

2. Then, the National BIC% is calculated by summing the regional BIC# and NC# and dividing them. So, National BIC% = (All Regional BIC# / All Regional NC#)

3. The Cumulative National BIC% is then calculated by dividing the National BIC# and the National NC# for all FYs from FY 2010 to the current FY. This Cumulative National BIC% accounts for Carry Over facilities from previous FYs, and it is the number that is reported as the final GPRA result for the current FY (i.e., it is not just the National BIC% for the current FY that is reported). So, Cumulative National BIC% = (National BIC# for All FYs / National NC# for All FYs).

The Unit of Measure is percentage of facilities brought into compliance (BIC%).

There are no Assumptions for this calculation.

The Timeframe is from FY 2010 – FY 2018. BIC% represents the percentage of facilities that were initially inspected and brought into compliance during this timeframe.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

- HQ Project Manager: Office of Emergency Management - Resources Management Division & Regulations Implementation Division
- HQ Project Support: Office of Emergency Management – Resources Management Division & Regulations Implementation Division

- HQ Results and Reporting Support: Office of Emergency Management - Resources Management Division & Regulations Implementation Division

Final Reporting Oversight Responsibilities:

- Ensure Accuracy of source data entered into the Oil Database Application through manual QA/QC and data quality checks built into the application.
- Calculate the Cumulative National BIC% (as outlined in Section 3d of this DQR).
- Enter final performance result into EPA's Budget Automation System (BAS).

Final Reporting Timing: The final cumulative brought into compliance percentage for FY 2010 through the current FY is calculated for FRP facilities for inclusion in OLEM reporting activities for the Government Performance and Results Act.

4b. Data Limitations/Qualifications:

OEM has not identified any systematic limitations or qualifications to the data beyond typical data entry and user error.

4c. Third-Party Audits:

There are no third-party audits for this measure.

Measure Code: B33 - Acres of Brownfields properties made ready for reuse.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

1 - Promote Sustainable and Livable Communities.

Sub-Objective Number and Title:

2 - Assess and Clean Up Brownfields

Strategic Target Code and Title:

2 - By 2018, make an additional 16,200 acres of brownfield properties ready for reuse

Managing Office:

Brownfields

1a. Performance Measure Term Definitions:

Acres Made Ready for Reuse – Acres associated with properties benefiting from EPA Brownfields funding that have been assessed and determined not to require cleanup, or where cleanup has been completed and institutional controls are in place, if required, as reported by cooperative agreement recipients.

This typically occurs when one of the following conditions applies:

1. A clean or no further action letter (or its equivalent) has been issued by the state or tribe under its voluntary response program (or its equivalent) for cleanup activities at the property; or
2. The cooperative agreement recipient or property owner, upon the recommendation of an environmental professional, has determined and documented that on-property work is finished. Ongoing operation and maintenance activities or monitoring may continue after a cleanup completion designation has been made.

Note: a property can be counted under this measure if an assessment is completed and results in a determination of no further cleanup being required.

A "property" is defined as a contiguous piece of land under unitary ownership. A property may contain several smaller components, parcels or areas.

For additional information on the Brownfields Program please visit: <https://www.epa.gov/brownfields>

2a. Original Data Source:

Assessments and Cleanups are funded either through cooperative agreements, or through EPA contracts (for Targeted Brownfields Assessments (TBAs)). Cooperative agreement recipients (or sub-recipients) and contractors submit performance data to EPA in quarterly reports, and property profile reports. On a limited basis EPA personnel are allowed to update or supplement information when a cooperative agreement has been closed and outcomes have been reported to EPA.

2b. Source Data Collection:

Data collection may involve tabulation of records and review of field surveys that identify acreage. The program does not require or recommend a specific land surveying protocol for determining acreage. Data collection is ongoing as projects are implemented. Reporting instructions indicate that accomplishments are to be recorded as they occur.

Acres Made Ready for Reuse can be achieved by conducting an assessment and/or cleanup activities via an Assessment, Revolving Loan Fund or Cleanup (ARC) award, a Targeted Brownfield Assessment (TBA) or by 128(a) funding used for site specific activities.

Conditions for counting “ACRES Made Ready for Reuse” above and beyond the completion of the funded activity:

Under assessment activities:

- If neither cleanup nor Institutional Controls (ICs) are required, then the acres are ready for reuse.
- If ICs are required and they are in place, but cleanup is not required, then the acres are ready for reuse.
- If cleanup is required and later conducted, (where EPA funds assessment activity, but does not fund cleanup) than the property associated with the original assessment is considered ready for reuse.

Under cleanup activities:

- If cleanup is required and completed and ICs are not required, then acres are ready for reuse.
- If cleanup is required and completed and ICs are required and they are in place, then acres are ready for reuse.

Geographic Detail: As of FY12 ACRES leverages a Google Maps application within the system to assign geocoordinates based on address information. Any deviation from these coordinated requires a manual override by the reporting party.

All the Brownfields cooperative agreements have a QA term and condition. Project-level QA documents (i.e. QAPPs) are a minimum requirement for EPA funding of Brownfields activities which include environmental data collection. The program prepares and provides the QA term and condition to the regional offices and requires them to include it in the cooperative agreements. The QA term and condition for Brownfields Assessment cooperative agreements reads as follows:

"B. Quality Assurance (QA) Requirement. 1. When environmental samples are collected as part of the brownfields assessment, the CAR shall comply with 40 CFR Part 31.45 requirements to develop and implement quality assurance practices sufficient to produce data adequate to meet project objectives and to minimize data loss. State law may impose additional QA requirements."

EPA contractors conducting Targeted Brownfields Assessment should develop site-specific Quality Assurance Project Plans (QAPP) for environmental assessment activities or a site-specific QAPP addendum if a Generic QAPP has already been approved for assessment activities. The EPA requires all environmental monitoring and measurement efforts be conducted in accordance with approved QAPPs. The purpose of the QAPP is to document the project planning process, enhance the credibility of sampling results, produce data of known quality, and potentially save time and money by gathering data that meets the needs of the project and intended use of the data. The QAPP is a formal document describing in comprehensive detail the necessary QA/QC and other technical activities that must be conducted to ensure the results of the work performed will satisfy performance criteria and can be used for their intended purposes. All QA/QC procedures shall be in accordance with applicable professional technical standards, EPA requirements, government regulations and guidelines, and specific project goals and requirements.

OLEM has available the following guidance: "Quality Assurance Guidance for Conducting Brownfields Assessments." EPA 540-R-98-038. 1998. <https://www.epa.gov/quality/quality-assurance-guidance-conducting-brownfields-site-assessments-september-1998>

2c. Source Data Reporting:

Cooperative agreement recipients (or sub-recipients) and contractors submit performance data to EPA in quarterly reports, and property profile reports. A Property Profile Form (PPF) collects information (environmental, historical, physical) from a property-specific investigation funded under the Brownfields Program.

Contract Agreement recipients have 3 submission options: complete and submit the Property Profile Form (PPF) in online format connected to the Assessment, Cleanup and Redevelopment Exchange System (ACRES) database; fill out a PPF version in Microsoft Excel format and submit it via e-mail or regular mail to the EPA Regional Representative; or for multiple properties (more than ten properties) fill out a multi-property Excel spreadsheet and submit it via email; or regular mail to the EPA Regional Representative. Any paper forms are entered into ACRES via EPA contractor.

The Property Profile Form is an approved OMB form - OMB No. 2050-0192. Online forms available to registered users here: <https://www.epa.gov/brownfields/brownfields-grantee-reporting-assessment-cleanup-and-redevelopment-exchange-system-acres>

EPA contractors conducting TBAs provide the assessment report to the EPA Region, who in turn enters the data into ACRES. In some cases, the contractor will also provide a filled-out PPF.

In accordance with the Terms and Conditions of the Brownfields Cooperative Agreements, all Brownfields cooperative agreement recipients (CARs) must report accomplishments to EPA on a quarterly basis. Quarterly reports are due 30 days from the end of the federal fiscal quarter.

3a. Relevant Information Systems:

Assessment, Cleanup, and Redevelopment Exchange System (ACRES). This database is the master database of all data supporting OBLR measures. Recipients and EPA report directly into ACRES. It includes source data and transformed data (e.g., data aggregated into Regional totals). <https://www.epa.gov/brownfields/brownfields-grantee-reporting-assessment-cleanup-and-redevelopment-exchange-system-acres> provides more information about this database.

ACRES quality is assured by adherence to a security plan and quality management plan:

-- Security plan. The latest version of the Security Plan for ACRES is dated 07/2016.

-- Quality Management Plan. ACRES operates under its own Quality Management Plan (Data Quality Management Plan for the Assessment, Cleanup, and Redevelopment Exchange System), which is updated annually, has been updated as of 07/2016. Contact Kelly Gorini for the most recent copy of the QMP.

OLEM Performance Assessment Tool (PAT). This tool serves as the primary external servicing resource for organizing and reporting OLEM's performance data, which collects information from OLEM program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from CERCLIS; replicates business logic used by CERCLIS for calculating measures; delivers that data to EPA staff and managers via a

business intelligence dashboard interface for analytic and reporting use; and transmits data to BAS. No current system specifications document is currently available for PAT, but will be provided when available. Contact Lisa Jenkins in OLEM regarding questions about PAT.

PAT operates under the OLEM Quality Management Plan (QMP).

PAT has a security certification confirming that a security policy is not necessary because no sensitive data are handled and PAT is built upon the Oracle-based business intelligence system. PAT's security certification indicates that it follows all security guidelines for EPA's Oracle Portal and that PAT is (1) not defined as a "Major Application" according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 2.3.1; (2) does not store, process, or transmit information that the degree of sensitivity is assessed as high by considering the requirements for availability, integrity, and confidentiality according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 3.7.2. (3) is not covered by EPA Order 2100.2A1 Information Technology Capital Planning and Investment Control (CPIC).

Budget Automation System (BAS). BAS is the final repository of the performance values.

3b. Data Quality Procedures:

Data reported by cooperative award agreement recipients are reviewed by EPA Regional grant managers for accuracy, to verify activities and accomplishments, and to ensure appropriate interpretation of performance measure definitions.

Step 1. Performance measure data entered into ACRES by recipients and/or EPA HQ contractor (for data submitted by recipients in an alternate format, such as hard copy). For each cooperative agreement recipient,, all data entered are signed off by the EPA Regional Representative (Regional Project Officer) identified in the terms and conditions of the cooperative agreement. For contractors, the EPA Regional COR/WAM signs off on the data.

Step 2. Each Region conducts Regional level review of data from the ACRES system. Rejected data must be edited by the original data source. Approved data proceed to Step 3.

Step 3. HQ conducts National level review (EPA HQ contractors) of data approved by regions. Rejected data must be edited by the region (Step 2). Approved data is stored in ACRES.

Step 4. Each quarter, OLEM Performance Assessment Tool (PAT) database pulls the approved data (performance measure) from ACRES.

Step 5. Headquarters approves PAT results, and PAT pushes results into ACS/Measures Central.

Step 6. ACS/Measures Central aggregates Regional data into a national total. OBLR reporting lead reviews and confirms result

ACRES. ACRES quality is assured by adherence to a security plan and quality management plan:

3c. Data Oversight:

Headquarters-level oversight is provided by maintained by the EPA Contract Officer Technical Representative (COTR)

There is a Regional Project Officer assigned to each cooperative agreement. That Regional Project Officer is responsible for reviewing for completeness and correctness all data provided by cooperative agreement recipients and data related to Targeted Brownfields Assessment (TBA) contracts; their data is reviewed at the Headquarters level. A list of Regional Project Officers is maintained by the Regional Brownfields Coordinator in each region.

Each region also has a data manager (some Regions have a SEE Employee as their data manager). The responsibility of the data manager is to disseminate information about ACRES updates and accomplishments updates. This person serves as the regional point of contact for data related issues.

3d. Calculation Methodology:

"Acres of Brownfields property made ready for reuse" is an aggregate of "acreage assessed that does not require cleanup" and "acreage cleaned up as reported by Assessment Grantees, Regional Targeted Brownfields Assessments, Cleanup Grantees, RLF Grantees, and State and Tribal 128(a) Voluntary Response Program Grantees for which any required institutional controls are in place."

The unit of measure is acres.

4a. Oversight and Timing of Final Results Reporting:

The ACRES Project Manager is responsible for reporting accomplishments and program results recorded via ACRES.

4b. Data Limitations/Qualifications:

There are some known limitations related to the nature of much of the data being recipient-reported. Regional Project Officers review data to minimize errors (as described above), but some known quality issues remain. Most pertinent to this measure is that outcome data are sometimes not reported by recipients, in the event that the EPA funding expires before the work is complete (for instance, if EPA funding is only part of the funding used for an assessment for cleanup).

Given the reporting cycle and the data entry/QA period, there is typically a several month data lag getting reported data into ACRES.

4c. Third-Party Audits:

No external reviews.

Measure Code: B29 - Brownfield properties assessed.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

1 - Promote Sustainable and Livable Communities.

Sub-Objective Number and Title:

2 - Assess and Clean Up Brownfields

Strategic Target Code and Title:

1 - By 2018, conduct environmental assessments at 24,400 (cumulative) brownfield properties

Managing Office:

Brownfields

1a. Performance Measure Term Definitions:

Properties Assessed -- Number of properties that have been environmentally assessed for the first time using EPA Brownfields funding.

A property will be counted for this measure if the property has not previously been counted for this annual performance measure as a result of other assessments completed with regular EPA Brownfields funding.

A "property" is defined as a contiguous piece of land under unitary ownership. A property may contain several smaller components, parcels or areas.

"Assessments" can consist of a Phase I assessment, Phase II assessment, and/or supplemental assessments. Assessments are deemed complete when the reports for those assessments are deemed complete.

A Phase I assessment report is final when an environmental professional or state official has signed and dated the report as required in the final rule (see 40 CFR 312.21 (c)).

For Phase II, the report is final when an environmental professional or state official has prepared an environmental assessment report that has been accepted by the grant recipient.

For a supplemental assessment, the report is considered final when it has been accepted by the cooperative agreement recipient.

For additional information on the Brownfields Program please visit: <https://www.epa.gov/brownfields>

2a. Original Data Source:

Assessments are funded either through cooperative agreements, or through EPA contracts (for Targeted Brownfields Assessments (TBAs)). Cooperative agreement recipients (or sub-recipients) and contractors submit performance data to EPA in quarterly reports, and property profile reports. On a limited basis EPA personnel are allowed to update or supplement information when a cooperative agreement has been closed and outcomes have been reported to EPA.

2b. Source Data Collection:

Field sampling is utilized during the assessment process to determine cleanup needs and to develop assessment reports. Formal completion of assessment reports is tabulated for this measure. Data collection is ongoing as projects are implemented. Reporting instructions indicate that accomplishments are to be recorded as they occur.

Assessment Pathways – Assessments meeting this definition can be completed by using funds via an Assessment Award, a Targeted Brownfields Assessment (TBA) or by completing activities funded by 128(a) awards.

Geographic Detail: As of FY12 ACRES leverages a Google Maps application within the system to assign geocoordinates based on address information. Any deviation from these coordinated requires a manual override by the reporting party.

All the Brownfields cooperative agreements have a QA term and condition. Project-level QA documents (i.e. QAPPs) are a minimum requirement for EPA funding of Brownfields activities which include environmental data collection. The program prepares and provides the QA term and condition to the regional offices and requires them to include it in the cooperative agreements. The QA term and condition for Brownfields Assessment cooperative agreements reads as follows:

"B. Quality Assurance (QA) Requirement. 1. When environmental samples are collected as part of the brownfields assessment, the CAR shall comply with 40 CFR Part 31.45 requirements to develop and implement quality assurance practices sufficient to produce data adequate to meet project objectives and to minimize data loss. State law may impose additional QA requirements."

EPA contractors conducting Targeted Brownfields Assessment should develop site-specific Quality Assurance Project Plans (QAPP) for environmental assessment activities or a site-specific QAPP addendum if a Generic QAPP has already been approved for assessment activities. The EPA requires all environmental monitoring and measurement efforts be conducted in accordance with approved QAPPs. The purpose of the QAPP is to document the project planning process, enhance the credibility of sampling results, produce data of known quality, and potentially save time and money by gathering data that meets the needs of the project and intended use of the data. The QAPP is a formal document describing in comprehensive detail the necessary QA/QC and other technical activities that must be conducted to ensure the results of the work performed will satisfy performance criteria and can be used for their intended purposes. All QA/QC procedures shall be in accordance with applicable professional technical standards, EPA requirements, government regulations and guidelines, and specific project goals and requirements.

OLEM has available the following guidance: "Quality Assurance Guidance for Conducting Brownfields Assessments." EPA 540-R-98-038. 1998. <https://www.epa.gov/quality/quality-assurance-guidance-conducting-brownfields-site-assessments-september-1998>

2c. Source Data Reporting:

Cooperative agreement recipients (or sub-recipients) and contractors submit performance data to EPA in quarterly reports, and property profile reports. A Property Profile Form (PPF) collects information (environmental, historical, physical) from a property-specific investigation funded under the Brownfields Program.

Contract Agreement recipients have 2 submission options: complete and submit the Property Profile Form (PPF) in online format connected to the Assessment, Cleanup and Redevelopment Exchange System (ACRES) database; or for multiple properties (more than ten properties) fill out a multi-property Excel spreadsheet and

submit it via email; or regular mail to the EPA Regional Representative. Any paper forms are entered into ACRES via EPA contractor.

The Property Profile Form is an approved OMB form - OMB No. 2050-0192. Online forms available to registered users here: <https://www.epa.gov/brownfields/brownfields-grantee-reporting-assessment-cleanup-and-redevelopment-exchange-system-acres>

EPA contractors conducting TBAs provide the assessment report to the EPA Region, who in turn enters the data into ACRES. In some cases, the contractor will also provide a filled-out PPF.

In accordance with the Terms and Conditions of the Brownfields Cooperative Agreements, all Brownfields cooperative agreement recipients (CARs) must report accomplishments to EPA on a quarterly basis. Quarterly reports are due 30 days from the end of the federal fiscal quarter.

3a. Relevant Information Systems:

Assessment, Cleanup, and Redevelopment Exchange System (ACRES). This database is the master database of all data supporting OBLR measures. Recipients and EPA report directly into ACRES. It includes source data and transformed data (e.g., data aggregated into Regional totals). <https://www.epa.gov/brownfields/brownfields-grantee-reporting-assessment-cleanup-and-redevelopment-exchange-system-acres> provides more information about this database.

ACRES quality is assured by adherence to a security plan and quality management plan:

-- Security plan. The latest version of the security plan for ACRES is dated 07/2016. Contact Kelly Gorini in OLEM for a copy of the security plan.

-- Quality Management Plan. ACRES operates under its own Quality Management Plan (Data Quality Management Plan for the Assessment, Cleanup, and Redevelopment Exchange System), which is updated annually, has been updated as of 07/2016. Contact Kelly Gorini for the most recent copy of the QMP.

OLEM Performance Assessment Tool (PAT). This tool serves as the primary external servicing resource for organizing and reporting OLEM's performance data, which collects information from OLEM program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from CERCLIS; replicates business logic used by CERCLIS for calculating measures; delivers that data to EPA staff and managers via a business intelligence dashboard interface for analytic and reporting use; ; and transmits data to BAS. No current system specifications document is currently available for PAT, but will be provided when available. Contact Lisa Jenkins in OLEM regarding questions about PAT.

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Information Technology Systems, section 3.7.2. (3) is not covered by EPA Order 2100.2A1 Information Technology Capital Planning and Investment Control (CPIC).

Budget Automation System (BAS). BAS is the final repository of the performance values.

3b. Data Quality Procedures:

Data reported by cooperative award agreement recipients are reviewed by EPA Regional grant managers for accuracy, to verify activities and accomplishments, and to ensure appropriate interpretation of performance measure definitions.

Step 1. Performance measure data entered into ACRES by recipients and/or EPA HQ contractor (for data submitted by recipients in an alternate format, such as hard copy). For each cooperative agreement recipient,, all data entered are signed off by the EPA Regional Representative (Regional Project Officer) identified in the terms and conditions of the cooperative agreement. For contractors, the EPA Regional COR signs off on the data.

Step 2. Each Region conducts Regional level review of data from the ACRES system. Rejected data must be edited by the original data source. Approved data proceed to Step 3.

Step 3. HQ conducts National level review (EPA HQ contractors) of data approved by regions. Rejected data must be edited by the region (Step 2). Approved data is stored in ACRES.

Step 4. Each quarter, OLEM Performance Assessment Tool (PAT) database pulls the approved data (performance measure) from ACRES.

Step 5. Headquarters approves PAT results, and PAT pushes results into ACS/Measures Central.

Step 6. ACS/Measures Central aggregates Regional data into a national total. OBLR reporting lead reviews and confirms result.

3c. Data Oversight:

Headquarters-level oversight is provided by maintained by the EPA Contract Officer Technical Representative (COTR)

There is a Regional Project Officer assigned to each cooperative agreement. That Regional Project Officer is responsible for reviewing for completeness and correctness all data provided by cooperative agreement recipients and data related to Targeted Brownfields Assessment (TBA) contracts; their data is reviewed at the Headquarters level. A list of Regional Project Officers is maintained by the Regional Brownfields Coordinator in each region.

Each region also has a data manager (some Regions have a SEE Employee as their data manager). The responsibility of the data manager is to disseminate information about ACRES updates and accomplishments updates. This person serves as the regional point of contact for data related issues.

3d. Calculation Methodology:

"Number of Brownfields properties assessed" is an aggregate of properties assessed using funding from Assessment Grants, Regional TBA funds, and State and Tribal 128(a) Voluntary Response Program funding.

The unit of measure is "Properties"

4a. Oversight and Timing of Final Results Reporting:

The ACRES Project Manager is responsible for reporting accomplishments and program results recorded via ACRES.

4b. Data Limitations/Qualifications:

There are some known limitations related to the nature of much of the data being recipient-reported. Regional Project Officers review data to minimize errors (as described above), but some known quality issues remain. Most pertinent to this measure is that outcome data are sometimes not reported by recipients, in the event that the EPA funding expires before the work is complete (for instance, if EPA funding is only part of the funding used for an assessment for cleanup).

Given the reporting cycle and the data entry/QA period, there is typically a several month data lag getting reported data into ACRES.

4c. Third-Party Audits:

No external reviews.

Measure Code: HW0 - Number of hazardous waste facilities with new or updated controls.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

2 - Preserve Land

Sub-Objective Number and Title:

2 - Minimize Releases of Hazardous Waste and Petroleum Products

Strategic Target Code and Title:

1 - By 2018, prevent releases at 500 additional hazardous waste management facilities by issuing initial

Managing Office:

Office of Resource Conservation and Recovery

1a. Performance Measure Term Definitions:

Definition of "Hazardous Waste Facilities": This universe is composed of facilities that were subject to permits as of 10-1-1997 and subsequent years. EPA updates the list of units that need "updated controls" at the end of each Strategic Plan cycle. Those facilities that need updated controls are a smaller set within the larger permitting universe tracked for strategic and annual goals associated with the Government Performance and Results Act (GPRA).

Definition of "New or Updated Controls":

Facilities under control is an outcome-based measure as permits or similar mechanisms are not issued until facilities have met standards or permit conditions that are based on human health or environmental standards. Examples include sites cleaned up to a protective level; any groundwater releases controlled so no further attenuation is occurring; any remaining waste safely removed or capped (isolated); and long term controls in place to protect people and the environment at the site, if any contamination remains. New and updated controls ensure that the facilities are designed and operated to maintain continued safe management of hazardous wastes, thus minimizing the potential for releases and accidents, and protecting human health and the environment. <https://www.epa.gov/hwpermitting>

2a. Original Data Source:

States and EPA's Regional offices generate the data.

2b. Source Data Collection:

Facility data: The authorized states have ownership of their data and EPA has to rely on them to make changes. The data that determine if a facility has met its permit requirements are prioritized in update efforts. States and EPA's Regional offices manage data quality related to timeliness and accuracy.

2c. Source Data Reporting:

Data can be entered directly into RCRAInfo, submitted by the facility through the myRCRAid interface, or some use a different approach and then "translate" the information into RCRAInfo. Supporting documentation and reference materials are maintained in Regional and state files. Users log into the following URL:

<https://rcrainfo.epa.gov/>

3a. Relevant Information Systems:

RCRAInfo, the national database which supports EPA's RCRA program, contains information on entities (generically referred to as "handlers") engaged in hazardous waste generation and management activities regulated under the portion of the Resource Conservation and Recovery Act (RCRA) that provides for regulation of hazardous waste.

RCRAInfo has several different modules, and allows for tracking of information on the regulated universe of RCRA hazardous waste handlers, such as facility status, regulated activities, and compliance history. The system also captures detailed data on the generation of hazardous waste by large quantity generators and on waste management practices from treatment, storage, and disposal facilities. RCRAInfo is web accessible, providing a convenient user interface for Federal, state and local managers, encouraging development of in-house expertise for controlled cost, and states have the option to use commercial off-the-shelf software to develop reports from database tables.

Access to RCRAInfo is open only to EPA Headquarters, Regional, and authorized state personnel. It is not available to the general public because the system contains enforcement sensitive data. The general public is referred to EPA's Envirofacts Data Warehouse to obtain information on RCRA-regulated hazardous waste sites. This non-sensitive information is supplied from RCRAInfo to Envirofacts.

3b. Data Quality Procedures:

Within RCRAInfo, the application software contains structural controls that promote the correct entry of the high-priority national components.

Starting in January 2013, the RCRAInfo Team started an in-depth State-by-State data quality project. This entails taking a single state's data, processing it through the business rules, and identifying any errors. Once the errors are identified, they are sent to the State and the Regional representative for resolution. The RCRAInfo Team works closely with the State, in conjunction with the Region, to resolve all errors in RCRAInfo. Eleven (11) States have been processed thus far. This project will continue until all 57 entities that report to RCRAInfo have been processed and corrected.

3c. Data Oversight:

The Information Collection and Analysis Branch (ICAB) maintains a list of the Headquarters, Regional, and delegated state/territory users and controls access to the system. Branch members ensure data collection is on track, conduct QA reports, and work with Regional and state partners to resolve issues as they are discovered.

3d. Calculation Methodology:

Determination of whether or not the facility has approved controls in place is based primarily on the legal and operating status codes for each unit.

Accomplishment of updated controls is based on the permit expiration date code and other related codes.

The baseline is composed of facilities that can have multiple units. These units may consolidate, split or undergo other activities that cause the number of units to change. There may be occasions where there needs to be minor baseline modifications. The larger permitting universe is carried over from one EPA strategic planning cycle to the next (starting with facilities subject to permits as of October 1, 1997) with minor changes made with each subsequent strategic planning cycle (e.g., facilities referred to Superfund are removed, or facilities never regulated are removed; facilities that applied for a permit within the last strategic cycle are added). EPA updates the list of units that need "updated controls" after the end of each strategic planning cycle. Those facilities that need updated controls are a smaller set within the larger permitting universe.

Complete data dictionary is available at: <https://rcrainfo.epa.gov/>

The unit of analysis for this measure is "facilities."

4a. Oversight and Timing of Final Results Reporting:

Program Implementation and Information Division (PIID) data analysts are responsible for the reporting.

4b. Data Limitations/Qualifications:

Even with the increasing emphasis on data quality, with roughly 10,000 units in the baseline (e.g., a facility can have more than one unit), there are problems with the number of facilities in the baseline and their supporting information, particularly with the older inactive facilities. EPA Headquarters works with the EPA Regional offices to resolve them.

Basic site data may become out-of-date because RCRA does not mandate the notification of all information changes. Nevertheless, EPA tracks the facilities by their ID numbers and those should not change even during ownership changes (RCRA Subtitle C EPA Identification Number, Site Status, and Site Tracking Guidance, March 21, 2005).

4c. Third-Party Audits:

The 1995 U.S. Government Accountability Office (GAO) report Hazardous Waste: Benefits of EPA's Information System Are Limited, AIMD-95-167, August 22, 1995, <http://www.gao.gov/archive/1995/ai95167.pdf> (accessed December 17, 2013) on EPA's Hazardous Waste Information System reviewed whether national RCRA information systems support EPA and the states in managing their hazardous waste programs. Those recommendations coincided with ongoing internal efforts to improve the definitions of data collected, and ensure that data collected provide critical information and minimize the burden on states. RCRAInfo, the current national database, has evolved in part as a response to this report. The "Permitting and Corrective Action Program Area Analysis" was the primary vehicle for the improvements made in the December 2008 release (V4).

EPA OIG report:

U.S. Environmental Protection Agency. "Permitting and Corrective Action Program Area Analysis". WIN/INFORMED Executive Steering Committee, July 28, 2005.

Measure Code: CA5 - Cumulative percentage of RCRA facilities with final remedies constructed.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

2 - Clean Up Contaminated Land

Strategic Target Code and Title:

4 - By 2018, , increase the number of RCRA facilities with final remedies constructed

Managing Office:

Office of Resource Conservation and Recovery

1a. Performance Measure Term Definitions:

The remedy construction measure tracks the RCRA Corrective Action Program's progress in moving sites towards final cleanup. For background information, please visit: <https://www.epa.gov/hw/learn-about-corrective-action>

RCRA Facilities – facilities subject to restriction or action from the Resource Conservation and Recovery Act;

Definition of "final remedies constructed":

The lead regulators (delegated state or EPA Region) for the facility select the remedy and determine when the facility has completed construction of that remedy. EPA collects the determinations as made by the lead regulator and this total is used for this measure.

2a. Original Data Source:

States and regions enter all data on determinations made.

2b. Source Data Collection:

Known and suspected facility-wide conditions are evaluated using a series of simple questions and flow-chart logic to arrive at a reasonable, defensible determination. These questions were issued as a memorandum titled: Interim Final Guidance for RCRA Corrective Action Environmental Indicators, Office of Solid Waste, February 5, 1999). The lead regulators (delegated state or EPA Region) for the facility select the remedy and determine when the facility has completed construction of that remedy.

Construction completions are collected on both an area-wide and site-wide basis.

States and regions generate the data and manage data quality related to timeliness and accuracy (i.e., the environmental conditions and determinations are correctly reflected by the data). EPA has provided guidance and training to states and regions to help ensure consistency in those determinations. RCRAInfo documentation, available to all users on-line, provides guidance to facilitate the generation and interpretation of data.

2c. Source Data Reporting:

The remedy construction measure tracks the RCRA Corrective Action Program's progress in moving sites towards final cleanup. The date of remedy construction is entered in the database. (EPA makes the same kind of entry related to facilities in non-delegated states.)

3a. Relevant Information Systems:

RCRAInfo, the national database which supports EPA's RCRA program, contains information on entities (generically referred to as "handlers") engaged in hazardous waste generation and management activities regulated under the portion of the Resource Conservation and Recovery Act (RCRA) that provides for regulation of hazardous waste.

RCRAInfo has several different modules, and allows for tracking of information on the regulated universe of RCRA hazardous waste handlers, such as facility status, regulated activities, and compliance history. The system also captures detailed data on the generation of hazardous waste by large quantity generators and on waste management practices from treatment, storage, and disposal facilities. Within RCRAInfo, the Corrective Action Module tracks the status of facilities that require, or may require, corrective actions, including the information related to the performance measure.

RCRAInfo is web accessible, providing a convenient user interface for Federal, state and local managers, encouraging development of in-house expertise for controlled cost, and states have the option to use commercial off-the-shelf software to develop reports from database tables.

RCRAInfo is currently at Version 5 (V5), which was released in March 2010. V5 expanded on V4's capabilities and made updates to the Handler module to support two new rules that went into effect in 2009.

Access to RCRAInfo is open only to EPA Headquarters, Regional, and authorized state personnel. It is not available to the general public because the system contains enforcement sensitive data. The general public is referred to EPA's Envirofacts Data Warehouse to obtain information on RCRA-regulated hazardous waste sites. This non-sensitive information is supplied from RCRAInfo to Envirofacts. For more information, see: <https://www3.epa.gov/enviro/facts/rcrainfo/search.html>

Find more information about RCRAInfo at: <https://rcrainfo.epa.gov/>

3b. Data Quality Procedures:

Manual procedures: EPA Corrective Action sites are monitored on a facility-by-facility basis and QA/QC procedures are in place to ensure data validity.

Automated procedures: Within RCRAInfo, the application software enforces structural controls that ensure that high-priority national components of the data are properly entered. Training on use of RCRAInfo is provided on a regular basis, usually annually, depending on the nature of systems changes and user needs. The latest version of RCRAInfo, Version 5 (V5), was released in March 2010 and has many added components that will help the user identify errors in the system.

3c. Data Oversight:

The Information Collection and Analysis Branch (ICAB) maintains a list of the Headquarters, Regional and delegated state/territory users and controls access to the system. Branch members ensure data collection is on track, conduct QA reports, and work with Regional and state partners to resolve issues as they are discovered.

3d. Calculation Methodology:

The remedy construction measure tracks the RCRA Corrective Action Program's progress in moving sites towards final cleanup. Like with the environmental indicators determination, the lead regulators for the facility select the remedy and determine when the facility has completed construction of that remedy.

Construction completions are collected on both an area-wide and site-wide basis for sake of the efficiency measure.

4a. Oversight and Timing of Final Results Reporting:

Program Implementation and Information Division (PIID) data analysts are responsible for the reporting.

4b. Data Limitations/Qualifications:

With emphasis on data quality, EPA Headquarters works with the EPA Regional offices to ensure the national data pulls are consistent with the Regional data pulls.

4c. Third-Party Audits:

US Government Accountability Office (GAO) report: "Hazardous Waste: Early Goals Have Been Met in EPA's Corrective Action Program, but Resource and Technical Challenges Will Constrain Future Progress." (GAO-11-514, August 25, 2011, <http://www.gao.gov/assets/330/321743.pdf>)

Measure Code: CA2 - Cumulative percentage of RCRA facilities with migration of contaminated groundwater under control.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

2 - Clean Up Contaminated Land

Strategic Target Code and Title:

3 - By 2018, increase number of Resource Conservation and Recovery Act (RCRA) facilities

Managing Office:

Office of Resource Conservation and Recovery

1a. Performance Measure Term Definitions:

The performance measure is used to track the RCRA Corrective Action Program's progress in dealing with immediate threats to human health and groundwater resources. It is meant to summarize and report on facility-wide environmental conditions at RCRA Corrective Action Program's facilities nation-wide. For background information, please visit: <https://www.epa.gov/hw/learn-about-corrective-action>

Cumulative – made up of accumulated parts; increasing by successive additions

RCRA Facilities – facilities subject to restriction or action from the Resource Conservation and Recovery Act;

Migration – to change position; movement from one location to another

Contaminated Groundwater – water in the subsurface which has become tainted with any number of dissolved contaminants at levels greater than the prescribed environmental standard levels

Definition of "under control": Known and suspected facility-wide conditions are evaluated using a series of simple questions and flow-chart logic to arrive at a reasonable, defensible determination. These questions were issued as a memorandum titled: Interim Final Guidance for RCRA Corrective Action Environmental Indicators, Office of Solid Waste, February 5, 1999). Lead regulators (delegated state or EPA Region) for the facility (authorized state or EPA) make the environmental indicator determination, but facilities or their consultants may assist EPA in the evaluation by providing information on the current environmental conditions. The determinations are entered directly into RCRAInfo. EPA collects the determinations as made by the lead regulator, and this total is used for this measure.

2a. Original Data Source:

States and regions enter all data on determinations made.

2b. Source Data Collection:

Known and suspected facility-wide conditions are evaluated using a series of simple questions and flow-chart logic to arrive at a reasonable, defensible determination. These questions were issued as a memorandum titled: Interim Final Guidance for RCRA Corrective Action Environmental Indicators, Office of Solid Waste, February 5, 1999). Lead regulators for the facility (authorized state or EPA) make the environmental indicator determination (like whether migration of contaminated groundwater is under control), but facilities or their

consultants may assist EPA in the evaluation by providing information on the current environmental conditions.

States and regions generate the data and manage data quality related to timeliness and accuracy (i.e., the environmental conditions and determinations are correctly reflected by the data). EPA has provided guidance and training to states and regions to help ensure consistency in those determinations. RCRAInfo documentation, available to all users on-line, provides guidance to facilitate the generation and interpretation of data.

2c. Source Data Reporting:

States: With respect to releases to groundwater controlled, a “yes,” “no”, or “insufficient information” entry is made in the database. (EPA makes the same kind of entry related to facilities in non-delegated states.)

3a. Relevant Information Systems:

RCRAInfo, the national database which supports EPA’s RCRA program, contains information on entities (generically referred to as “handlers”) engaged in hazardous waste generation and management activities regulated under the portion of the Resource Conservation and Recovery Act (RCRA) that provides for regulation of hazardous waste.

RCRAInfo has several different modules, and allows for tracking of information on the regulated universe of RCRA hazardous waste handlers, such as facility status, regulated activities, and compliance history. The system also captures detailed data on the generation of hazardous waste by large quantity generators and on waste management practices from treatment, storage, and disposal facilities. Within RCRAInfo, the Corrective Action Module tracks the status of facilities that require, or may require, corrective actions, including the information related to the performance measure.

RCRAInfo is web accessible, providing a convenient user interface for Federal, state and local managers, encouraging development of in-house expertise for controlled cost, and states have the option to use commercial off-the-shelf software to develop reports from database tables.

RCRAInfo is currently at Version 5 (V5), which was released in March 2010. V5 expanded on V4’s capabilities and made updates to the Handler module to support two new rules that went into effect in 2009.

Access to RCRAInfo is open only to EPA Headquarters, Regional, and authorized state personnel. It is not available to the general public because the system contains enforcement sensitive data. The general public is referred to EPA’s Envirofacts Data Warehouse to obtain information on RCRA-regulated hazardous waste sites. This non-sensitive information is supplied from RCRAInfo to Envirofacts. For more information, see: <https://www3.epa.gov/enviro/facts/rcrainfo/search.html>

Find more information about RCRAInfo at: <https://rcrainfo.epa.gov/>

3b. Data Quality Procedures:

Manual procedures: EPA Corrective Action sites are monitored on a facility-by-facility basis and QA/QC procedures are in place to ensure data validity.

Automated procedures: Within RCRAInfo, the application software enforces structural controls that ensure that high-priority national components of the data are properly entered. Training on use of RCRAInfo is provided on a regular basis, usually annually, depending on the nature of systems changes and user needs.

The latest version of RCRAInfo, Version 5 (V5), was released in March 2010 and has many added components that will help the user identify errors in the system.

3c. Data Oversight:

The Information Collection and Analysis Branch (ICAB) maintains a list of the Headquarters, Regional and delegated state/territory users and controls access to the system. Branch members ensure data collection is on track, conduct QA reports, and work with Regional and state partners to resolve issues as they are discovered.

3d. Calculation Methodology:

Annual progress for each measure is found by subtracting the cumulative progress at the end of the previous fiscal year from the cumulative progress at the end of the current fiscal year.

4a. Oversight and Timing of Final Results Reporting:

Program Implementation and Information Division (PIID) data analysts are responsible for the reporting.

4b. Data Limitations/Qualifications:

With emphasis on data quality, EPA Headquarters works with the EPA Regional offices to ensure the national data pulls are consistent with the Regional data pulls.

4c. Third-Party Audits:

US Government Accountability Office (GAO) report: "Hazardous Waste: Early Goals Have Been Met in EPA's Corrective Action Program, but Resource and Technical Challenges Will Constrain Future Progress." (GAO-11-514, August 25, 2011, <http://www.gao.gov/assets/330/321743.pdf>)

Measure Code: CA1 - Cumulative percentage of RCRA facilities with human exposures to toxins under control.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

2 - Clean Up Contaminated Land

Strategic Target Code and Title:

2 - By 2018, increase the number of Superfund sites and RCRA facilities where human exposure and toxins

Managing Office:

Office of Resource Conservation and Recovery

1a. Performance Measure Term Definitions:

The performance measure is used to track the RCRA Corrective Action Program's progress in dealing with immediate threats to human health and groundwater resources. It is meant to summarize and report on facility-wide environmental conditions at RCRA Corrective Action Program's facilities nation-wide. For background information, please visit: <http://www.epa.gov/hw/learn-about-corrective-action>

RCRA Facilities – facilities subject to restriction or action from the Resource Conservation and Recovery Act;

Human Exposure to Toxins – pathways or means by which toxic substances may come into direct contact with a person

Definition of "under control": Known and suspected facility-wide conditions are evaluated using a series of simple questions and flow-chart logic to arrive at a reasonable, defensible determination. These questions were issued as a memorandum titled: Interim Final Guidance for RCRA Corrective Action Environmental Indicators, Office of Solid Waste, February 5, 1999). Lead regulators (delegated state or EPA Region) for the facility (authorized state or EPA) make the environmental indicator determination, but facilities or their consultants may assist EPA in the evaluation by providing information on the current environmental conditions. The determinations are entered directly into RCRAInfo. EPA collects the determinations as made by the lead regulator, and this total is used for this measure.

2a. Original Data Source:

States and regions enter all data on determinations made.

2b. Source Data Collection:

Known and suspected facility-wide conditions are evaluated using a series of simple questions and flow-chart logic to arrive at a reasonable, defensible determination. These questions were issued as a memorandum titled: Interim Final Guidance for RCRA Corrective Action Environmental Indicators, Office of Solid Waste, February 5, 1999). Lead regulators for the facility (authorized state or EPA) make the environmental indicator determination (like whether human exposures to toxins are under control), but facilities or their consultants may assist EPA in the evaluation by providing information on the current environmental conditions.

States and regions generate the data and manage data quality related to timeliness and accuracy (i.e., the environmental conditions and determinations are correctly reflected by the data). EPA has provided guidance and training to states and regions to help ensure consistency in those determinations. RCRAInfo

documentation, available to all users on-line, provides guidance to facilitate the generation and interpretation of data.

2c. Source Data Reporting:

States: With respect to meeting the human exposures to toxins controlled a “yes,” “no”, or “insufficient information” entry is made in the database. (EPA makes the same kind of entry related to facilities in non-delegated states.)

3a. Relevant Information Systems:

RCRAInfo, the national database which supports EPA’s RCRA program, contains information on entities (generically referred to as “handlers”) engaged in hazardous waste generation and management activities regulated under the portion of the Resource Conservation and Recovery Act (RCRA) that provides for regulation of hazardous waste.

RCRAInfo has several different modules, and allows for tracking of information on the regulated universe of RCRA hazardous waste handlers, such as facility status, regulated activities, and compliance history. The system also captures detailed data on the generation of hazardous waste by large quantity generators and on waste management practices from treatment, storage, and disposal facilities. Within RCRAInfo, the Corrective Action Module tracks the status of facilities that require, or may require, corrective actions, including the information related to the performance measure.

RCRAInfo is web accessible, providing a convenient user interface for Federal, state and local managers, encouraging development of in-house expertise for controlled cost, and states have the option to use commercial off-the-shelf software to develop reports from database tables.

RCRAInfo is currently at Version 5 (V5), which was released in March 2010. V5 expanded on V4’s capabilities and made updates to the Handler module to support two new rules that went into effect in 2009.

Access to RCRAInfo is open only to EPA Headquarters, Regional, and authorized state personnel. It is not available to the general public because the system contains enforcement sensitive data. The general public is referred to EPA’s Envirofacts Data Warehouse to obtain information on RCRA-regulated hazardous waste sites. This non-sensitive information is supplied from RCRAInfo to Envirofacts. For more information, see: <https://www3.epa.gov/enviro/facts/rcrainfo/search.html>

Find more information about RCRAInfo at: <https://rcrainfo.epa.gov/>

3b. Data Quality Procedures:

Manual procedures: EPA Corrective Action sites are monitored on a facility-by-facility basis and QA/QC procedures are in place to ensure data validity.

Automated procedures: Within RCRAInfo, the application software enforces structural controls that ensure that high-priority national components of the data are properly entered. Training on use of RCRAInfo is provided on a regular basis, usually annually, depending on the nature of systems changes and user needs. The latest version of RCRAInfo, Version 5 (V5), was released in March 2010 and has many added components that will help the user identify errors in the system.

3c. Data Oversight:

The Information Collection and Analysis Branch (ICAB) maintains a list of the Headquarters, Regional and delegated state/territory users and controls access to the system. Branch members ensure data collection is

on track, conduct QA reports, and work with Regional and state partners to resolve issues as they are discovered.

3d. Calculation Methodology:

Annual progress for each measure is found by subtracting the cumulative progress at the end of the previous fiscal year from the cumulative progress at the end of the current fiscal year.

4a. Oversight and Timing of Final Results Reporting:

Program Implementation and Information Division (PIID) data analysts are responsible for the reporting.

4b. Data Limitations/Qualifications:

With emphasis on data quality, EPA Headquarters works with the EPA Regional offices to ensure the national data pulls are consistent with the Regional data pulls.

4c. Third-Party Audits:

US Government Accountability Office (GAO) report: "Hazardous Waste: Early Goals Have Been Met in EPA's Corrective Action Program, but Resource and Technical Challenges Will Constrain Future Progress." (GAO-11-514, August 25, 2011, <http://www.gao.gov/assets/330/321743.pdf>)

Measure Code: ST6 - Increase the percentage of UST facilities that are in significant operational compliance (SOC) with both release detection and release prevention requirements by 0.5% over the previous year's target.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

2 - Preserve Land

Sub-Objective Number and Title:

2 - Minimize Releases of Hazardous Waste and Petroleum Products

Strategic Target Code and Title:

3 - Through 2018, increase the percentage of UST facilities in significant operational compliance(SOC)

Managing Office:

Office of Underground Storage Tanks

1a. Performance Measure Term Definitions:

The most current definitions for the EPA's performance measures related to underground storage tanks are available on EPA's UST website <https://www.epa.gov/ust/ust-performance-measures> under Definitions. See the definition for the measure number UST-6 in the definitions document.

For more information on EPA's Underground Storage Tanks Program, see: <https://www.epa.gov/ust>

2a. Original Data Source:

The data suppliers are the states and territories who are the direct implementers of the program in their respective jurisdictions and the EPA regions who provide assistance to the tribes.

2b. Source Data Collection:

The data is collected by each state and territory using their own systems and databases. They then report this information to OUST using the LUST4 system described under section 3.

EPA Quality Assurance Requirements/Guidance under Which Original Data Sources Collect Data:

For cooperative agreements: Regional offices include QA Terms and Conditions in their states' assistance agreement. CAs must be current and specify: QA roles and responsibilities for EPA and grantee recipients; and quality requirements including responsibilities for final review and approval. Default quality requirements include: organization-level QA documentation (i.e. QMP) for state agencies and primary contractors; and project-level QAPPs for each CA. In accordance with EPA's Uniform Administrative Requirements for Grants and Cooperative Agreements, 40 CFR Part 31.45, states must develop and implement quality assurance practices. The regulation requires developing and implementing quality assurance practices that will "produce data of quality adequate to meet project objectives and to minimize loss of data to out of control conditions or malfunctions"; see LUST Trust Fund Corrective Action Cooperative Agreement Guidelines

<https://www.epa.gov/ust/leaking-underground-storage-tank-lust-trust-fund>

For contracts: EPA Regions determine which quality requirements are applicable. Contracts must be current and specify: QA roles and responsibilities for EPA and national LUST contractors; and quality requirements including responsibilities for final review and approval. Default quality requirements include: organization-level QA documentation (i.e. QMP) for the primary contractors; and project-level QAPPs for each Tribal LUST remedial Work Assignment. Sample EPA contract language: "the Contractor shall comply with the higher-level quality standard selected below: Specifications and Guidelines for Quality Systems for Environmental Data Collection and Environmental Technology Programs (ANSI/ASQC E4, 1994). As authorized by FAR 52.246-11,

the higher-level quality standard ANSI/ASQC E4 is tailored as follows: The solicitation and contract require the offerors/contractor to demonstrate conformance to ANSI/ASQC E4 by submitting the quality documentation described below. The Contractor shall not commence actual field work until the Government has approved the quality documentation (i.e., QAPP)."

Note: Regions keep copies of individual QAPPs associated with cooperative agreements and contracts. Each EPA regional office manages its own state and tribal assistance agreements.

2c. Source Data Reporting:

Data Submission Instrument:

State-specific databases.

Data Entry Mechanism:

Each state enters their data into the online LUST4 Oracle-based system (see section 3 for more details).

Frequency of Data Transmission to EPA: Twice annually.

Timing of Data Transmission to EPA:

Within 10 days of the end of the reporting period (by April 10 for mid-year, and October 10 for end-of-year).

3a. Relevant Information Systems:

System Description:

LUST4. This database is the master database of all UST program-related data. States, territories and EPA report data for activity and measures directly into LUST4. LUST4 's Oracle Web-based system is accessed through the EPA portal at <http://portal.epa.gov/> under the My Communities/Underground Storage Tank Menu Page.

OLEM Performance Assessment Tool (PAT). This tool serves as the primary external servicing resource for organizing and reporting OLEM's performance data. PAT collects information from OLEM program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from LUST4; replicates business logic used by LUST4 for calculating measures; can deliver that data to EPA staff and managers via a business intelligence dashboard interface for analytic and reporting use; enables LUST point of contact to document status and provide explanation for each measure; and transmits data to EPA's Budget Automation System (BAS). No current system specifications document is currently available, but will be provided when available.

BAS. BAS is the final repository of the performance values.

Source/Transformed Data:

LUST4. LUST4 includes both source data and transformed data (e.g., data aggregated into Regional totals).

PAT. PAT includes only transformed data.

BAS. BAS includes only transformed data.

Information System Integrity Standards:

LUST4. LUST4 operates under OLEM's QMP, including the security policy specified in that QMP. LUST4 does not have any stand-alone certifications related to the EPA security policy or the Systems Life Cycle Management policy. The LUST4 system is built upon Oracle Business Intelligence tools provided by the EPA Business Intelligence Analytics Center, which ensures that a stand-alone security certification is not necessary.

PAT. PAT operates under the OLEM Quality Management Plan (QMP). PAT has a security certification confirming that a security policy is not necessary because no sensitive data are handled and PAT is built upon the Oracle-based business intelligence system. PAT's security certification indicates that it follows all security guidelines for EPA's Oracle Portal and that PAT is (1) not defined as a "Major Application" according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 2.3.1; (2) does not store, process, or transmit information that the degree of sensitivity is assessed as high by considering the requirements for availability, integrity, and confidentiality according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 3.7.2. (3) is not covered by EPA Order 2100.2A1 Information Technology Capital Planning and Investment Control (CPIC).

BAS. Not applicable.

3b. Data Quality Procedures:

EPA's regional grants project officers and regional program managers provide first-level data quality reviews and oversight of their recipients' program performance measure results. EPA/OUST reviews, comments and approves each record.

OUST uses a combination of automated validation along with manual QA/QC review.

QA/QC REVIEW BY REGIONS. EPA/OUST oversees the use of the QA/QC checklist, which is incorporated into the LUST4 oracle web-based system. Regions complete the QA/QC checklist, sign it electronically and submit it to EPA/OUST for review, comment and approval of each record.

NOTE: This QA/QC checklist was last updated 10/1/2009 and is accessed through the user interface of LUST4.

Regional QA/QC Evaluation Checklist –

Note: Checklist is to be completed by Regional reviewer and will appear "shaded" to others.

Actions This Reporting Period

Compare this reported percentage to the last three reporting periods for the data submitter. If the current number deviates by more than 10 percentage points from the last period's number or appears otherwise questionable, complete the following actions:

- Review the state's explanation, if available.
- If necessary, contact the state to obtain the corrected numbers and/or obtain a sufficient explanation and include the explanation in the "Comments" section for the applicable performance measure.
- Verify that the numbers being reported were calculated based on the last 12-months of inspections.

AUTOMATED VALIDATION. The LUST4 systems provides an error message when the combined SOC rate (ST6) is higher than either of the individual SOC rates. Also, the system provides an error if the following formula is false:

100% minus UST-4 plus 100% minus UST-5 minus 100% minus UST-6 is equal to or greater than zero (e.g., if UST-4 and UST-5 are 75% and 70%, respectively, UST-6 cannot be lower than 45%. The calculation is $((100\% - 75\%) + (100\% - 70\%)) - (100\% - 45\%) = 0$)

EPA/OUST provides second-level data quality reviews of all data.

DATA FLOW:

Step 1. SOC data are entered into LUST4 by state recipients or by Regions (for tribal data).

Step 2. Each Region conducts Regional level review of data from the LUST4 system. Rejected data must be edited by the original data source. Approved data proceed to Step 3.

Step 3. Headquarters' staff perform performs National Program Review, using data from the LUST4 system. Rejected data must be reviewed by the region and, if needed, pushed back to the state for editing (Step 2).

Step 4. PAT pulls data from LUST4. Headquarters staff compare PAT results to LUST4 results. If PAT does not match LUST4 then there was an error with the upload and data is reloaded. Headquarters staff enter into PAT the ACS status information of "Indicator" for each measure and, if desired, explanation. (Note: PAT allows for programs to identify status other than "Indicator." When programs select a status of "no status," "data not available," or "target not met," PAT requires that an explanation be provided. LUST program policy is to resolve all reporting issues prior to ACS reporting, so "Indicator" is the only status chosen and explanations for that status are optional.)

Step 5. Headquarters approves PAT results, and PAT pushes results into BAS/Measures Central.

Step 6. Measures Central aggregates Regional data into a national total. OUST reporting lead reviews and certifies results.

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

Regional Program Managers are ultimately responsible for regional-level data.

Source Data Reporting Oversight Responsibilities:

Regional Program Managers conduct their review based upon a national QA/QC checklist, as described in the Data Quality Procedures field.

Information Systems Oversight Personnel:

OUST LUST4 System Manager

Information Systems Oversight Responsibilities:

Maintains a list of the HQ (OUST and OEI), Regional and state/territory primary and backup users; a record of changes to the list is also maintained. Ensures that Regional reporting is on track, conducts QA on LUST performance measures, ensures QA issues are resolved and/or documented, and oversees final reporting to BAS. Works with OUST contractor to resolve any issues with the LUST4 data system.

3d. Calculation Methodology:

Users report SOC by taking the total number of facilities inspected during the last 12 months that were in significant operational compliance and dividing by the total number of inspections conducted in the last 12

months. For example, 80 facilities inspected in the last 12 months by the state were in compliance out of 100 inspected during this time period, therefore their SOC is 80%.

To calculate the national SOC rate, OUST multiplies each state's SOC rate by their active USTs for the reporting period ("estimated USTs in SOC"). Then OUST sums all of the estimated USTs in SOC, and divides this number by the total number of active USTs in the country.

Unit of Measure: Percent.

Timeframe of Result: Annual, reported twice a year on a rolling 12-month basis. In other words, the April reporting period reflects the SOC of inspections from April through March and the October reporting period reflects the SOC of inspections from October through September.

Documentation of Methodological Changes:

In FY2004 OUST began collecting the combined SOC measure (ST6). From 2001 through 2004 OUST only collected SOC for release detection and SOC for release prevention. From 1997-2000 OUST collected percentages of UST systems equipped to comply with OUST's 1998 regulatory requirements. The changes reflect a move to document the percentage of facilities that were properly operating their required UST equipment after nearly all USTs had the required equipment.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

Deputy Office Director.

Final Reporting Oversight Responsibilities:

Responsible for final review to ensure LUST 4 System Manager has completed review, and numbers are accurate.

Final Reporting Timing: Semiannual.

4b. Data Limitations/Qualifications:

Data quality depends on the accuracy and completeness of state records. Also, some states rely on local jurisdictions for their data, which can cause delays for these states. Additionally, the tanks program is primarily run by states, and each state operates their program in a manner that works best for them. Because there are differences between all states, the data from each state can be influenced by the policies and interpretations of each state. This creates limitations when someone compares state-level data.

4c. Third-Party Audits:

None.

Measure Code: 338 - Percent of all Spill Prevention, Control and Countermeasure (SPCC) inspected facilities found to be non-compliant which are brought into compliance.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

1 - Emergency Preparedness and Response

Strategic Target Code and Title:

4 - Bring SPCC inspected facilities into compliance

Managing Office:

Office of Emergency Management

1a. Performance Measure Term Definitions:

1. SPCC facility: A facility which must prepare, amend and implement a Spill Prevention, Control and Countermeasure Plan (SPCC) to demonstrate the ability to prevent, prepare and respond to oil discharges to navigable waters and adjoining shorelines.
2. Initially compliant: The tag used to describe facilities that are not in violation of the requirements in the SPCC regulation of the Oil Pollution Act upon inspection in a given fiscal year.
3. Non-compliant: The tag used to describe a facility that upon inspection is deemed to be in violation of the SPCC regulation. Non-compliant facilities are brought into compliance through EPA follow-up activity.
4. Brought into compliance: The tag used to describe a facility that was found non-compliant at some point during the measurement period and then was then found to be in compliance after a follow-up inspection activity.
5. Not Subject: The tag used to describe a facility that, upon inspection, is not required to comply with the SPCC regulation. Facility may have been subject previously but has made changes to the facility whereby it is no longer subject to the SPCC regulation.
6. Closed: The tag used to describe a facility that, upon inspection, is closed and no longer subject to the SPCC rule. Facility may have been subject previously.
7. Carry Over: The tag used to describe facilities that were found non-compliant at some point before the current FY in the measurement period and remain non-compliant as of the beginning of the current FY.
8. Oil Database Application: The online database that is used to collect and store facility and inspection-related data for SPCC facilities. The Oil Database is not a public database.

2a. Original Data Source:

The primary data used to calculate the oil measures are the number and outcomes of facility inspections and the dates in which non-compliant facilities are brought into compliance. Specifically, calculation of the oil measures involves the recording of the inspection activity and the outcome (in compliance vs. out of compliance) and subsequent tracking of the dates when non-compliant SPCC facilities are brought into compliance. Starting with FY 2011, the reported value of facilities brought into compliance in any given FY must also capture inspections that occurred prior to the current FY (using FY 2010 as the base year).

2b. Source Data Collection:

In order to calculate the measure for each FY, the following data must be collected and entered by the regions for each inspection conducted:

1. Facility Identifier – identifier assigned by the Oil Database Application used to track the activity for each unique facility.

2. Inspection (Activity) Tracking Number – also assigned by the Oil Database Application, but prior to October 2011, these tracking numbers were Region-specific.
3. Inspection Date (Activity Start/Schedule Date in the Oil Database Application) – date of the initial inspection or most recent compliance inspection.
4. Inspection Outcome – either in compliance or not in compliance.
5. Date of Confirmed Compliance (Brought into Compliance Date in the Oil Database Application) – date the facility is verified to be in compliance overall; could occur in subsequent FYs.

The business rules for entering data into the “Compliance Module” of the Oil Database Application used to calculate the end-of-year measures results are as follows:

- Inspection Outcomes: When a facility is inspected for SPCC compliance, the outcome of the inspection should be recorded in the application. If the facility is found to be out of compliance, the outcome should be recorded as “out of compliance.” If the facility is found to be compliant, then the outcome should be recorded as “in compliance.”
- “Not-Subject Facilities” Reporting: If an inspected facility is found to be not subject to SPCC regulations, the outcome of the inspection should be recorded as “in compliance”.
- Tracking Multiple Inspections: If there are multiple inspections in the same FY for a facility, the SPCC inspection will be counted as a single inspection. Multiple SPCC inspections would not be added together by the Oil Database Application for the same facility. If there are multiple inspections in the same FY for a facility, in order to determine compliance status of the facility, the application will look at the activities to determine if the most recent activity has an “Inspection Outcome” or a “Brought into Compliance” date. If an “Inspection Outcome” or a “Brought into Compliance” date doesn’t exist on the most recent activity, the Oil Database Application will look at the previous activity within the FY to determine the facility’s compliance status.
- Tracking Compliance vs. Enforcement: Once a facility is brought into compliance, it should be captured in the “Inspection Outcome” and “Brought into Compliance” fields in the application. If additional enforcement is pursued by the Region after a facility is brought into compliance, the facility record should retain the facility’s status as “in compliance.”
- Treatment of Carryover Non-Compliant Facilities: The application automatically tracks the carryover of non-compliant facilities to the next FY, starting at the end of FY 2010. Specifically, the application will review the recorded inspections performed since FY 2010 and for facilities that remain out of compliance as of the date the report is run, these facilities will represent the total population of non-compliant facilities, including carryover and newly-inspected, non-compliant facilities. For example, if you have a facility that was inspected in FY 2010 that was initially found to be “not in compliance” and is still showing as “not in compliance” at the end of FY 2011, the facility will be included in the carryover of non-compliant facilities to the next FY (i.e. FY 2012). This carryover count will be automatically added to the list of facilities found to be non-compliant in the current FY (or FY 2012 in this example).
- Treatment of Follow-up Inspections: If a non-compliant facility is inspected for SPCC in a subsequent FY, this inspection should be identified as a “Follow-up Inspection”. It should be noted that the application will identify this follow-up inspection as tied to the original inspection where the outcome as identified as “out of compliance.” This follow-up inspection will not be recorded as new inspection in that FY to avoid double-counting in the “Facilities Inspected” column for the HQ Oil Measures Report. However, for programmatic tracking, this follow-up inspection will be retained in the facility record in the compliance module.
- Treatment of Inspections with No Outcome: If the inspection does not have an “Inspection Outcome” or a “Brought into Compliance” date populated in the compliance module of the application, the facility will

count as “not in compliance” on the HQ Measures Report. When this occurs, the record should be updated with inspection outcome.

· Tracking of Inspection and Plan Review Outcomes: For inspected facilities that are in compliance at the time of the inspection, but a subsequent Plan review reveals the Plan to be out of compliance, enter the two activities as different activities, field inspection vs. Plan review. Enter the inspection as “out of compliance” (using the date of the inspection), and then enter the Plan review activity as “not in compliance” (using the review date). When the Plan is deemed “in compliance”, enter this compliance date in the “Brought into Compliance Field” for the Plan review activity and the inspection activity. Note that the “Brought into Compliance” date for the inspection activity is considered the overall compliance date for oil measures reporting.

2c. Source Data Reporting:

Data Submission Instrument: Data submission and data entry are handled via the Oil Database Application. The Oil Database Application can be accessed at <http://emp.epa.gov/>

Data Entry Mechanism: Data are entered by EPA personnel in the regions. Facility and inspection results data are entered for each initial inspection and follow-up activity.

Frequency of Data Transmission to EPA: Data are entered on an ongoing-basis as inspections are completed.

The initial measurement period for this measure starts with FY 2010 and concludes in FY 2015. The measure was extended to FY 2018 for the next iteration of the Agency’s Strategic Plan.

A progressive rate (i.e., cumulative over the measurement period) of non-compliant facilities brought into compliance was selected starting with 15% in the base year leading up to 60% brought into compliance in the final year to account for carryover of non-compliant facilities to subsequent fiscal years. The reasoning behind this approach is based on program experience of the time-lag to bring facilities into compliance. For example, non-compliant facilities may need to install equipment or complete construction activities to achieve compliance. Another example is a facility may be subject to enforcement action as a result of non-compliance. Each or both of these scenarios could result in an extended timeframe to bring the facility into compliance. Thus, a 60% target was selected for FY 2015 to account for the potential time-lag for achieving compliance. The goal over the FY 2016- 2018 measurement period is to maintain a cumulative 60% brought into compliance rate.

3a. Relevant Information Systems:

System Description: The Oil Database Application contains all of the necessary fields and data entry points for a facility inspection. The data are reported via the HQ Measures Report in the Oil Database Application. The Oil Database Application contains data on the following components of a facility and its inspection history:

1. General
2. Address
3. Contacts/Ownership
4. Compliance Module
5. Oil Capacity
6. Discharge History
7. Documents

Source/Transformed Data: The data in the system are source data about the facility and the inspection results.

Information System Integrity Standards: As an application module of the Emergency Management Portal (EMP) the Oil Database application contains Information System Integrity measures to secure its data. EMP has undergone an annual Continuous Monitoring Assessment (CMA) and SAISO Audit of its security posture and continuous monitoring activities. In addition, the CMA was to facilitate ongoing Security Authorization of the system in accordance with Office of Management & Budget Circular A-130, Appendix III, Security of Federal Automated Information Resource; NIST Special Publication 800-37, rev.1, Guide for Applying the Risk Management Framework to Federal Information Systems; and NIST Special Publication 800-53A Rev.1, a subset of the applicable Security Controls of EMP's System Security Plan (SSP) were assessed. EMP's SSP and its Security Controls get reviewed on an annual basis.

3b. Data Quality Procedures:

Facility and Inspection data go through a multi-phase quality check. The Oil Database Application has built in data checks for common data entry problems (e.g., checks for missing data) for each facility and inspection outcome. Regions also engage in periodic (usually quarterly or bi-annual) manual QA/QC procedures to double check the data that are entered in the database.

OEM HQ also assists the regions with their manual data checks and resolves problems with missing or incorrect data. This happens on a bi-annual basis.

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

- HQ Project Manager: Office of Emergency Management – Resources Management Division & Regulations Implementation Division
- HQ Project Support: Office of Emergency Management – Resources Management Division & Regulations Implementation Division
- Regional Oil Program Managers and Inspector Personnel

Source Data Reporting Oversight Responsibilities:

- Ensure Accuracy of source data entered into the Oil Database Application through manual QA/QC and data quality checks built into the application.

Information Systems Oversight Personnel:

- HQ Project Manager: Office of Emergency Management – Resources Management Division & Regulations Implementation Division
- HQ Project Support: Office of Emergency Management – Resources Management Division & Regulations Implementation Division

Information Systems Oversight Responsibilities:

- Maintain information systems and correct errors in report calculations.
- Provide upgrades to database capabilities.

3d. Calculation Methodology:

Explanation of Calculations: Data are subject to the following steps in order to determine the brought into compliance percentage (BIC%) that is the final reporting form for these measures.

1. First, the Regional BIC% is calculated for each region using the following steps:

- a. For each Fiscal Year of the overall reporting period (initially FYs 2010 to 2015, extended to FY 2018) the number of facilities that are found non-compliant (NC#) is subtracted from the total number of inspections conducted in that FY, which includes those that were found compliant, not subject or closed (Total). NC# is that region's portion of the total denominator used to calculate the brought into compliance percentage (BIC %).
 - b. Facilities that are brought into compliance during the same fiscal (BIC#) year make up that region's portion of the numerator of the BIC %.
 - c. So Regional BIC% = BIC# divided by total NC# (facilities found non-compliant in current FY and carryover non-compliant facilities from prior FY)
2. Then, the National BIC% is calculated by summing the regional BIC# and NC# and dividing them. So, National BIC% = (All Regional BIC# / All Regional NC#)
 3. The Cumulative National BIC% is then calculated by dividing the National BIC# and the National NC# for all FYs from FY 2010 to the current FY. This Cumulative National BIC% accounts for Carry Over facilities from previous FYs, and it is the number that is reported as the final GPRA result for the current FY (i.e., it is not just the National BIC% for the current FY that is reported). So, Cumulative National BIC% = (National BIC# for All FYs / National NC# for All FYs).

The Unit of Measure is percentage of facilities brought into compliance (BIC%).

There are no Assumptions for this calculation.

The Timeframe is from FY 2010 – FY 2018. BIC% represents the percentage of facilities that were initially inspected and brought into compliance during this timeframe.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

- HQ Project Manager: Office of Emergency Management – Resources Management Division & Regulations Implementation Division
- HQ Project Support: Office of Emergency Management – Resources Management Division & Regulations Implementation Division
- HQ Results Reporting Support: Office of Emergency Management - Resources Management Division & Regulations Implementation Division

Final Reporting Oversight Responsibilities:

- Ensure Accuracy of source data entered into the Oil Database Application through manual QA/QC and data quality checks built into the application.
- Calculate the Cumulative National BIC% (as outlined in Section 3d of this DQR).
- Enter final performance result into EPA's Budget Automation System (BAS).

Final Reporting Timing: The final cumulative brought into compliance percentage for FY 2010 through the current FY is calculated for SPCC facilities for inclusion in OSWER reporting activities for the Government Performance and Results Act.

4b. Data Limitations/Qualifications:

OEM has not identified any systematic limitations or qualifications to the data beyond typical data entry and user error.

4c. Third-Party Audits:

There are no third-party audits for of this measure.

Measure Code: 112 - Number of LUST cleanups completed that meet risk-based standards for human exposure and groundwater migration.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

2 - Clean Up Contaminated Land

Strategic Target Code and Title:

6 - Through 2018, reduce the backlog of LUST cleanups

Managing Office:

Office of Underground Storage Tanks (OUST)

1a. Performance Measure Term Definitions:

Cleanups Completed –The number of cleanups completed is the cumulative number of confirmed releases where cleanup has been initiated and where the state has determined that no further actions are currently necessary to protect human health and the environment. This number includes sites where post-closure monitoring is occurring as long as site-specific (e.g., risk-based) cleanup goals have been met. Site characterization, monitoring plans, and site-specific cleanup goals must be established and cleanup goals must be attained for sites being remediated by natural attenuation to be counted in this category. Clarification: “Cleanups Completed” is a cumulative category—sites should never be deleted from this category. It is no longer necessary to report separately cleanups completed that are state lead with state money and cleanups completed that are responsible party lead. It is, however, still necessary to report the number of cleanups completed that are state lead with Trust Fund money. A “no further action” determination made by the state that satisfies the “cleanups initiated” measure above, also satisfies this “cleanups completed” measure. This determination will allow a confirmed release that does not require further action to meet the definition of both an initiated and completed cleanup.

Risk-based standards for human exposure and groundwater migration.

Reference: UST Performance Measures <https://www.epa.gov/ust/ust-performance-measures>

2a. Original Data Source:

The original data source is States, DC, and territories who are the primary implementers of the UST program and receive funding through Leaking Underground Storage Tank (LUST) cooperative agreements with EPA. Each EPA regional office manages work that occurs within regional boundaries & tracks data for Indian country.

2b. Source Data Collection:

Determination of cleanup completion requires consideration of environmental data, such as field sampling, which can vary by project. The overall measure requires tabulation of the number LUST clean-ups completed. Spatial Detail: Geographic granularity is aggregated state data.. Granularity for work in Indian Country is the Regional level.

Spatial Coverage: National

For cooperative agreements: Regional offices include QA Terms and Conditions in their states' assistance agreement. CAs must be current and specify: QA roles and responsibilities for EPA and grantee recipients; and quality requirements including responsibilities for final review and approval. Default quality requirements include: organization-level QA documentation (i.e. QMP) for state agencies and primary contractors; and project-level QAPPs for each CA. In accordance with EPA's Uniform Administrative Requirements for Grants and Cooperative Agreements, 40 CFR Part 31.45, states must develop and implement quality assurance practices. The regulation requires developing and implementing quality assurance practices that will "produce data of quality adequate to meet project objectives and to minimize loss of data to out of control conditions or malfunctions"; see Leaking Underground Storage Tank Trust Fund Corrective Action Cooperative Agreement Guidelines <https://www.epa.gov/ust/leaking-underground-storage-tank-lust-trust-fund> OLEM

For contracts: EPA Regions determine which quality requirements are applicable. Contracts must be current and specify: QA roles and responsibilities for EPA and national LUST contractors; and quality requirements including responsibilities for final review and approval. Default quality requirements include: organization-level QA documentation (i.e. QMP) for the primary contractors; and project-level QAPPs for each Tribal LUST remedial Work Assignment. Sample EPA contract language: "the Contractor shall comply with the higher-level quality standard selected below: Specifications and Guidelines for Quality Systems for Environmental Data Collection and Environmental Technology Programs (ANSI/ASQC E4, 1994). As authorized by FAR 52.246-11, the higher-level quality standard ANSI/ASQC E4 is tailored as follows: The solicitation and contract require the offerors/contractor to demonstrate conformance to ANSI/ASQC E4 by submitting the quality documentation described below. The Contractor shall not commence actual field work until the Government has approved the quality documentation (i.e., QAPP)."

Note: Regions keep copies of individual QAPPs associated with cooperative agreements and contracts. Each EPA regional office manages its own state and tribal assistance agreements.

2c. Source Data Reporting:

States, Washington, DC and territories submit data directly into LUST4.

3a. Relevant Information Systems:

LUST4. This database is the master database of all LUST program-related data and transformed data (e.g., data aggregated into Regional totals).

The program's Oracle web-based system-- LUST4-- accessed through EPA's portal.

OLEM Performance Assessment Tool (PAT). This tool serves as the primary external servicing resource for organizing and reporting OLEM's performance data. PAT collects information from OLEM program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from LUST4; replicates business logic used by LUST4 for calculating measures; can deliver that data to EPA staff and managers via a business intelligence dashboard interface for analytic and reporting use; enables LUST point of contact to document status and provide explanation for each measure; and transmits data to the Budget Automation System.

Budget Automation System (BAS). BAS is the final repository of the performance values.

3b. Data Quality Procedures:

EPA's regional grants project officers and regional program managers provide first-level data quality reviews and oversight of their recipients' program performance measure results.

OUST uses a combination of automated validation along with manual QA/QC review.

QA/QC REVIEW BY REGIONS. EPA/OUST oversees the use of the QA/QC checklist, which is incorporated into the LUST4 oracle web-based system. Regions complete the QA/QC checklist, sign it electronically and submit it to EPA/OUST for review, comment and approval of each record.

NOTE: This QA/QC checklist was last updated 10/1/2009 and is accessed through the user interface of LUST4.

Regional QA/QC Evaluation Checklist –

Note: Checklist is to be completed by Regional reviewer and will appear “shaded” to others.

1. Previous Totals Column

-- Verify the previous total number is correct by comparing it to the total from the last reporting period. If there is a discrepancy, report the information in the “Correction To Previous Data” column. Please add comments in the “Comments” column for any corrections that are made to the applicable performance measure.

2. Actions This Reporting Period

For each performance measure, if this “Reported” number deviates by more than 10% from the last period's number or appears otherwise questionable, complete the following actions:

-- Review the state's explanation, if available.

-- If necessary, contact the state to obtain the corrected numbers and/or obtain a sufficient explanation and include the explanation in the “Comments” section for the applicable performance measure.

3. Corrections to Previous Data Column

Verify that if any corrections have been listed that an explanation for the correction is provided in the “Comments” column and complete the following actions:

-- Verify and discuss the correction with the state if the correction is >10% or if the correction appears questionable (e.g., database conversions, database cleanup efforts to resolve misclassified data, duplicative records, etc.)

-- Verify if the corrections are anticipated to be a one-time event or occur over multiple years

-- Evaluate if the corrections will impact other performance measures (e.g., if the number of cleanups completed is adjusted downward by a correction, does this also result in a commensurate downward adjustment of cleanups initiated?) Include any additional comments in the “Comments” column as necessary.

4. Totals (Cumulative, if applicable)

-- Verify accuracy of all cumulative totals

-- Include any additional comments in the “Comments” column as necessary

AUTOMATED VALIDATION

EPA/OUST provides second-level data quality reviews of all data

LUST4. LUST4 operates under OLEMOLEM's QMP, including the security policy specified in that QMP. LUST4 does not have any stand-alone certifications related to the EPA security policy or the Systems Life Cycle

Management policy. The LUST4 system is built upon Oracle Business Intelligence tools provided by the EPA Business Intelligence Analytics Center, which ensures that a stand-alone security certification is not necessary.

PAT. PAT operates under the OLEMOLEM Quality Management Plan (QMP). PAT has a security certification confirming that a security policy is not necessary because no sensitive data are handled and PAT is built upon the Oracle-based business intelligence system. PAT's security certification indicates that it follows all security guidelines for EPA's Oracle Portal and that PAT is (1) not defined as a "Major Application" according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 2.3.1; (2) does not store, process, or transmit information that the degree of sensitivity is assessed as high by considering the requirements for availability, integrity, and confidentiality according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 3.7.2. (3) is not covered by EPA Order 2100.2A1 Information Technology Capital Planning and Investment Control (CPIC).
Data Flow:

Step 1. Performance measure data are entered into LUST4 by states and territories or by Regions.

Step 2. Each Region conducts Regional level review of data from the LUST4 system and accepts or rejects the data. Rejected data must be edited by the original data source. Approved data proceed to Step 3.

Step 3. Headquarters' staff perform National Program Review, using data from the LUST4 system. Rejected data must be reviewed by the region and, if needed, pushed back to the state for editing (Step 2).

Step 4. PAT pulls data from LUST4. Headquarters staff compare PAT results to LUST4 results. If PAT does not match LUST4 then there was an error with the upload and data is reloaded. Headquarters staff enter into PAT the ACS status information of "Indicator" for each measure and, if desired, explanation. (Note: PAT allows for programs to identify status other than "Indicator." When programs select a status of "no status," "data not available," or "target not met," PAT requires that an explanation be provided. LUST program policy is to resolve all reporting issues prior to ACS reporting, so "Indicator" is the only status chosen and explanations for that status are optional.)

Step 5. Headquarters approves PAT results, and PAT pushes results into BAS/Measures Central.

Step 6. Measures Central aggregates Regional data into a national total. OUST reporting lead reviews and certifies results.

3c. Data Oversight:

An EPA Headquarters primary contact maintains a list of the HQ (OUST and OEI), Regional and state/territory primary and backup users; a record of changes to the list is also maintained. The primary HQ contact ensures that Regional reporting is on track, conducts QA on LUST performance measures, ensures QA issues are resolved and/or documented, and oversees final reporting to BAS.

Regional Program Managers are ultimately responsible for regional-level data. They conduct their review based upon a national QA/QC checklist.

3d. Calculation Methodology:

The cumulative number of confirmed releases where cleanup has been initiated and where the state or region (for sites in Indian country) has determined that no further actions are currently necessary to protect human

health and the environment, includes sites where post-closure monitoring is occurring as long as site specific (e.g., risk based) cleanup goals have been met. Site characterization, monitoring plans and site-specific cleanup goals must be established and cleanup goals must be attained for sites being remediated by natural attenuation to be counted in this category. (See <https://www.epa.gov/ust/ust-performance-measures>)

The unit of analysis is site cleanup

4a. Oversight and Timing of Final Results Reporting:

Semiannual by Deputy Office Director. Responsible for final review to ensure LUST 4 System Manager has completed review, and numbers are accurate.

4b. Data Limitations/Qualifications:

Data quality depends on the accuracy and completeness of state records.

4c. Third-Party Audits:

Not applicable

Measure Code: 151 - Number of Superfund sites with human exposures under control.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

2 - Clean Up Contaminated Land

Strategic Target Code and Title:

2 - By 2018, increase the number of Superfund sites and RCRA facilities where human exposure and toxins

Managing Office:

OSRTI

1a. Performance Measure Term Definitions:

Definition of Site: "Sites" refers only to National Priorities List (NPL) sites. (See below for definition of NPL.) The term "site" itself is not explicitly defined under Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) or by the Superfund program; instead "site" is defined indirectly in CERCLA's definition of "facility," as follows: "The term 'facility' means (A) any building, structure, installation, equipment, pipe or pipeline (including any pipe into a sewer or publicly owned treatment works), well, pit, pond, lagoon, impoundment, ditch, landfill, storage container, motor vehicle, rolling stock, or aircraft, or (B) any site or area where a hazardous substance has been deposited, stored, disposed of, or placed, or otherwise come to be located; but does not include any consumer product in consumer use or any vessel." (CERCLA, Title I, Section 101, (9)).

Superfund Alternative Approach (SAA) sites: The program collects and enters into the Superfund Enterprise Management System (SEMS), human exposure determinations at SAA sites, but does not target or report official results at this time.

Definition of National Priorities List (NPL): Sites are listed on the National Priorities List (NPL) upon completion of Hazard Ranking System (HRS) screening, public solicitation of comments about the proposed site, and final placement of the site on the NPL after all comments have been addressed. The NPL primarily serves as an information and management tool. It is a part of the Superfund cleanup process and is updated periodically. Section 105(a)(8)(B) of CERCLA as amended, requires that the statutory criteria provided by the HRS be used to prepare a list of national priorities among the known releases or threatened releases of hazardous substances, pollutants, or contaminants throughout the United States. This list, which is Appendix B of the National Contingency Plan, is the NPL. Visit the HRS Toolbox (www.epa.gov/superfund/hrs-toolbox) page for guidance documents that are used to determine if a site is a candidate for inclusion on the NPL. [Source: Superfund website, <http://www.epa.gov/superfund/superfund-national-priorities-list-npl>]

(Also see Appendix B of the most recent Superfund Program Implementation Manual (SPIM), which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here: <http://epa.gov/superfund/superfund-program-implementation-manual>.)

Definition of "Current Human Exposure under Control" (HEUC): - Sites are assigned to this category when assessments for human exposures indicate there are no unacceptable human exposure pathways and the Region has determined the site is under control for current conditions site wide.

The human exposure status at a site is reviewed annually by the 10th working day in October, or at any time site conditions change. SEMS is to be updated within 10 days of any change in status.

The HEUC documents, for Proposed, Final, and Deleted NPL sites and SAA settlement sites, the progress achieved towards providing long-term human health protection by measuring the incremental progress achieved in controlling unacceptable human exposures at a site. This is also a Government Performance and Results Act (GPRA) performance measure.

Controlling unacceptable human exposures can occur in three ways:

- Reducing the level of contamination. For purposes of this policy, "contamination" generally refers to media containing contaminants in concentrations above appropriate protective risk-based levels associated with complete exposure pathways to the point where the exposure is no longer "unacceptable;" and/or
- Preventing human receptors from contacting contaminants in-place; and/or
- Controlling human receptor activity patterns (e.g., by reducing the potential frequency or duration of exposure).

Five categories have been created to describe the level of human health protection achieved at a site:

- Insufficient data to determine human exposure control status;
- Current human exposures not under control;
- Current human exposures under control;
- Current human exposures under control and protective remedy or remedies in place; and
- Current human exposures under control, and long-term human health protection achieved.

Definition of Accomplishment of "HEUC":

The criteria for determining the Site-Wide Human Exposure status at a site are found in the Superfund Environmental Indicators Guidance Human Exposures Revisions" March 2008

(<https://semspub.epa.gov/work/HQ/176152.pdf> [Source: SPIM Appendix B]

(See Appendix B of the most recent SPIM, which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here:

<http://epa.gov/superfund/superfund-program-implementation-manual>.

The Superfund Program's performance measures are used to demonstrate program progress and reflect major site cleanup milestones from start (remedial assessment completion) to finish (number of sites ready for anticipated use sitewide). Each measure marks a significant step in ensuring human health and environment protection at Superfund sites.

References:

U.S. Environmental Protection Agency, EPA Performance and Accountability Reports,
<http://www.epa.gov/planandbudget/results>

U.S. Environmental Protection Agency, Superfund Remedial Performance Measures, <https://www.epa.gov/superfund/superfund-remedial-performance-measures>

U.S. Environmental Protection Agency, Federal Facilities Restoration and Reuse Office – National Priority List Measures and Accomplishments <https://www.epa.gov/fedfac/federal-facilities-national-priority-list-measures-and-accomplishments>

U.S. Government Accountability Office, “Superfund Information on the Status of Sites, GAO/RCED-98-241”, <http://www.gao.gov/archive/1998/rc98241.pdf>

U.S. Environmental Protection Agency, Office of Superfund Remediation and Technology Innovation, Superfund Program Implementation Manuals (SPIM), <https://semspub.epa.gov/work/HQ/190517.pdf>

U.S. Environmental Protection Agency, Office of Environmental Information, EPA System Life Cycle Management Policy Agency Directive 2100.5, https://www.epa.gov/sites/production/files/2013-11/documents/cio_2121.1.pdf

U.S. Environmental Protection Agency, Office of Environmental Information, EPA’s Information Quality Guidelines, <http://www.epa.gov/quality/epa-information-quality-guidelines>

2a. Original Data Source:

Original data sources vary, and multiple data sources can be used for each site. Typical data sources are EPA personnel, contractors (directly to EPA or indirectly, through the interagency agreement recipient or cooperative agreement recipient), U.S. Army Corps of Engineers (interagency agreement recipient), and states/tribes/other political subdivisions (cooperative agreement recipients). EPA also collects data via pre-final inspections at sites.

(See item Performance Measure Term Definitions in Tab 1, for more information. Also, detailed information on requirements for source data and completion procedures can be found on the following Superfund website: <http://www.epa.gov/superfund/close-out-procedures-national-priorities-list-superfund-sites>

2b. Source Data Collection:

Collection typically involves some combination of environmental data collection, estimation and/or tabulation of records/activities. Documents such as risk assessments, Record of Decisions (RODs), Action Memoranda, Pollution Reports (POLREPS), Remedial Action (RA Reports), Close-out Reports, Five-year Reviews, NPL Deletion/Partial Deletion Notices are known reliable sources of data and often provide the information necessary for making an HEUC evaluation with reasonable certainty.

Each EPA Region has an information management coordinator (IMC) that oversees reporting.

The Human Exposure Environmental Indicator data were collected beginning in FY 2002.

The collection methods and guidance for determining HEUC status are found in the Superfund Environmental Indicators Guidance Human Exposures Revisions" March 2008.

<http://semspub.epa.gov/work/HQ/176152.pdf>

(See item Performance Measure Term Definitions, for more information and references.)

Source data collection frequency: No set interval. Varies by site

Spatial Extent: National

Spatial detail: Site, defined in database by latitude/longitude pair. In cases in which projects work on a smaller part of a site, geography may be defined at a finer grain -- the project-level.

2c. Source Data Reporting:

Varied reporting format for source data EPA uses to make decisions. In many cases, EPA reviews site-specific secondary data or existing EPA-prepared reports. Documents such as risk assessments, RODs, Action Memoranda, POLREPS, RA Reports, Close-out Reports, Five-year Reviews, and NPL Deletion/Partial Deletion Notices are known reliable sources of data and often provide the information necessary for making an HEUC evaluation with reasonable certainty.

EPA's Regional offices and Headquarters enter data into SEMS on a rolling basis.

The human exposure status at a site is reviewed annually by the 10th working day in October, or at any time site conditions change. SEMS is to be updated within 10 days of any change in status.

The instrument for determining the Site-Wide Human Exposure status at a site is found in the " Superfund Environmental Indicators Guidance Human Exposures Revisions" March 2008. Determinations are made by regional staff and management and entered directly into SEMS. <https://semspub.epa.gov/work/11/176152.pdf>

See Appendix B of the most recent SPIM, which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here: <http://epa.gov/superfund/superfund-program-implementation-manual>

3a. Relevant Information Systems:

The HEUC determination is made directly in SEMS once it is determined that the site is Under Control and has been approved as such by appropriate regional personnel.

SEMS database – The SEMS database is used by the Agency to track, store, and report Superfund site information (e.g., NPL sites and non-NPL Superfund sites).

(For more information about SEMS, see Appendix E of the most recent SPIM, which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here: <http://epa.gov/superfund/superfund-program-implementation-manual>.)

SEMS operation and further development is taking place under the following administrative control quality assurance procedures: 1) Office of Environmental Information Interim Agency Life Cycle Management Policy Agency Directive; 2) the Office Land and Emergency Management (OLEM) Quality Management Plan (QMP); 3) EPA IT standards; 4) Quality Assurance Requirements in all contract vehicles under which SEMS is being developed and maintained; and 5) EPA IT security policies. In addition, specific controls are in place for system design, data conversion and data capture, as well as SEMS outputs.

SEMS adherence to the security policy has been audited. Audit findings are attached to this record.

OLEM Performance Assessment Tool (PAT). This tool serves as the primary external servicing resource for organizing and reporting OLEM's performance data, which collects information from OLEM program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from SEMS; replicates business logic used by SEMS for calculating measures; delivers that data to EPA staff and managers via a business intelligence dashboard interface for analytic and reporting use; and transmits data to the Budget Automated System (BAS). No current system specifications document is currently available for PAT, but will be provided when available. For this measure, PAT transmits Regional-level data to BAS.

PAT operates under the OLEM QMP. PAT has a security certification confirming that a security policy is not necessary because no sensitive data are handled and PAT is built upon the Oracle-based business intelligence system. PAT's security certification indicates that it follows all security guidelines for EPA's Oracle Portal and that PAT is (1) not defined as a "Major Application" according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 2.3.1; (2) does not store, process, or transmit information that the degree of sensitivity is assessed as high by considering the requirements for availability, integrity, and confidentiality according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 3.7.2. (3) is not covered by EPA Order 2100.2A1 Information Technology Capital Planning and Investment Control (CPIC).

SEMS represents further re-engineering of the national reporting systems to include additional elements of EPA's Enterprise Architecture. SEMS will provide a common platform for major Superfund systems and future IT development. It will be constructed in part using EPA IT enterprise architecture principles and components. SEMS will provide a Superfund Program user gateway to various IT systems and information collections.

3b. Data Quality Procedures:

The regional SOPs for HEUC data entry, along with review and instructions/guidance for determining the Site-Wide Human Exposure status at a site are found in the Superfund Environmental Indicators Guidance Human Exposures Revisions" March 2008.

<https://semspub.epa.gov/work/HQ/176152.pdf>

A list of all Headquarters-level data sponsors is provided in Exhibit E.2 in SPIM Appendix E, Information Systems. The most current SPIM can be found here:

<http://epa.gov/superfund/superfund-program-implementation-manual>

SEMS: To ensure data accuracy and control, the following administrative controls are in place: 1) Superfund Program Implementation Manual (SPIM), the program management manual that details what data must be reported; 2) Report Specifications, which are published for each report detailing how reported data are calculated; 3) Coding Guide, which contains technical instructions to data users including Regional IMCs, program personnel, data owners, and data entry personnel; 4) User Guides and Quick Tips, which are available in the SEMS Documents Database and provide detailed instructions on data entry for nearly every module in SEMS; 5) Superfund Comprehensive Accomplishment (SCAP) Reports within SEMS, which serve as a means to track, budget, plan, and evaluate progress towards meeting Superfund targets and measures; 6) an "accomplishment lockout" feature in SEMS that maintains a record of all changes to historic accomplishments

that ensures that appropriate individuals have knowledge of and approve any accomplishment changes., 7OLEM7) SEMS Data Entry Control Plans.

EPA Headquarters has developed data quality audit reports and Standard Operating Procedures, which address timeliness, completeness, and accuracy, and has provided these reports to the Regions. In addition, as required by the Office of Management and Budget (OMB), SEMS audit logs are reviewed monthly

A key component of SEMS verification/validation procedures is the regional SEMS Data Entry Control Plan. The control plans include: 1) regional policies and procedures for entering data into SEMS; 2) a review process to ensure that all Superfund accomplishments are supported by source documentation; 3) delegation of authorities for approval of data input into SEMS; and 4) procedures to ensure that reported accomplishments meet accomplishment definitions. In addition, regions document in their control plans the roles and responsibilities of key regional employees responsible for SEMS data (e.g., regional project manager, information management coordinator, supervisor, etc.), and the processes to assure that SEMS data are current, complete, consistent, and accurate. Regions are required to update their SEMS Data Entry Control Plan at least annually, unless otherwise directed by HQ. HQ reviews these plans for conformance to national guidance, and suggests improvements where necessary.

Regions are required to update their SEMS Data Entry Control Plan at least annually, as noted in the SPIM.

Superfund Program Implementation Manual (SPIM). The SPIM should be the first source referred to for additional questions related to program data and reporting. The SPIM is a planning document that defines program management priorities, procedures, and practices for the Superfund program (including response, enforcement, and Federal facilities). The SPIM provides the link between the GPRA, EPA's Strategic Plan, and the Superfund program's internal processes for setting priorities, meeting program goals, and tracking performance. It establishes the process to track overall program progress through program targets and measures.

The SPIM provides standardized and common definitions for the Superfund program, and it is part of EPA's internal control structure. As required by the Comptroller General of the United States, through generally accepted accounting principles (GAAP) and auditing standards, this document defines program scope and schedule in relation to budget, and is used for audits and inspections by the Government Accountability Office (GAO) and the Office of the Inspector General (OIG). The SPIM is developed on an annual basis. Revisions to the SPIM are issued during the annual cycle as needed.

The SPIM contains thirteen chapters and a number of appendices. Chapter 1 provides a brief summary of the Superfund program and summarizes key program priorities and initiatives. Chapter 2 describes Superfund's Performance Measure and Planning and Reporting requirements. Chapter 3 outlines budget process and financial management requirements. Chapter 4 describes SEMS Data Management and Coding. Chapter 5 details Site Information; Chapter 6 goes over Remedial Site Assessment; Chapter 7, 8 and 9 outline the Removal, Remedial, and Federal Facility Programs, respectively; Chapter 10 describes Enforcement procedures and approaches; Chapter 11 provides guidance on Community Involvement; and Chapter 13 focuses on Information systems.

The most current version of the SPIM can be found at: <http://epa.gov/superfund/superfund-program-implementation-manual>

Data Flow:

Step 1. Original data sources provide information.

Step 2. EPA Region reviews and determines HEUC status at the site and adjusts SEMs records as needed.

Step 3. Headquarters' OSRTI data sponsor reviews and approves/disapproves written justifications for Regional determinations of "Not Under Control" and "Insufficient Data," using data from SEMs. Data sponsor works with Regional staff to ensure that disapproved justifications comport with Superfund Program guidance.

Step 4. OLEM's PAT pulls data from SEMs. Headquarters staff compare PAT results to SEMs results. If PAT does not match SEMs then there was an error with the upload and data are reloaded. Headquarters staff enter into PAT the Annual Commitment System (ACS) status information for each measure and, if necessary, a status explanation.

Step 5. Headquarters approves PAT results, and PAT pushes results into BAS.

Step 6. BAS aggregates Regional data into a national total. OSRTI reporting lead reviews and certifies results.

3c. Data Oversight:

The Superfund program has a "data sponsorship" approach to database oversight. Headquarters staff and managers take an active role in improving the quality of data stored in CERCLIS by acting as data sponsors.

The Superfund program has a "data sponsorship" approach to database oversight. Headquarters staff and managers take an active role in improving the quality of data stored in SEMs by acting as data sponsors.

Data sponsorship promotes consistency and communication across the Superfund program. Headquarters data sponsors communicate and gain consensus from data owners on data collection and reporting processes. Data sponsors ensure that the data they need to monitor performance and compliance with program requirements is captured and stored properly in SEMs. To meet this goal, headquarters data sponsors identify their data needs, develop data field definitions, and distribute guidance requiring submittal of these data. Data owners are normally site managers that need the data in support of site work. Data owners follow the guidance they receive from data sponsors, as they acquire and submit data. Headquarters data sponsors assist data owners in maintaining and improving the quality of Superfund program data. These data are available for data evaluation and reporting.. In addition, data sponsorship provides a tool to improve data quality through program evaluation and adjustments in guidance to correct weaknesses detected. Data sponsors may conduct audits to determine if there are systematic data problems (e.g., incorrect use of codes, data gaps, etc.). A list of all Headquarters-level data sponsors is provided in Appendix B.A. The most current SPIM can be found here: <https://semspub.epa.gov/work/HQ/190517.pdf>

Specific roles and responsibilities of data sponsors:

- Identify data needs;
- Oversee the process of entering data into the system;
- Use data for reporting purposes;

- Conduct periodic audit reports;
 - Provide definitions for data elements;
 - Promote consistency across the Superfund program;
 - Initiate changes in SEMS as the program changes;
 - Provide guidance requiring submittal of these data;
 - Support the development of requirements for electronic data submission; and
 - Ensure there is 'objective' evidence to support the accomplishment data in SEMS by identifying data requirements and checking to assure compliance by performing periodic reviews of a random SEMS data samples. (Objective Evidence Rule: 'All transactions must be supported by objective evidence, that is, documentation that a third party could examine and arrive at the same conclusion.')
- [Source: SPIM 2017, IV.B.2]

The primary responsibilities of data owners are 1) Enter and maintain data in SEMS; 2) Assume responsibility for complete, current, consistent, and accurate data; and 3) Ensure there is 'objective' evidence to support accomplishment data in SEMS. (Objective Evidence Rule: 'All transactions must be supported by objective evidence, that is, documentation that a third party could examine and arrive at the same conclusion.')

Information Management Coordinators (IMC). In each Region, the IMC is a senior position which serves as regional lead for all Superfund program and SEMS systems management activities. The following lead responsibilities for regional program planning and management rest with the IMC:

- Coordinate program planning, budget development, and reporting activities;
- Ensure regional planning and accomplishments are complete, current, and consistent, and accurately reflected in SEMS by working with data sponsors and data owners;
- Provide liaison to HQ on SCAP process and program evaluation issues;
- Coordinate regional evaluations by headquarters;
- Ensure that the quality of SEMS data are such that accomplishments and planning data can be accurately retrieved from the system; and
- Ensure there is "objective" evidence to support accomplishment data entered in SEMS. (Objective Evidence Rule: "All transactions must be supported by objective evidence, that is, documentation that a third party could examine and arrive at the same conclusion.") [Source: SPIM 2017, IV.B.1]

The Information Management Officer (IMO) & Director, Information Management and Data Quality Staff. OLEM is the lead point of contact for information about the data from SEMS .

The Project Manager for SEMS oversees and is the approving authority for quality-related SEMS processes, and is closely supported by a Contract Task Manager. (See the SEMS QAPP, attached, for more information.) The lead point of contact for information about the data from SEMS is the Director, Office of Superfund Remediation and Technology Innovation, Office of Land and Emergency Management, Office of Solid Waste and Emergency Response.

PAT Data Entry

The Annual Commitment System (ACS) Coordinator in OSRTI ensures that SEMS data for this measure are correctly loaded into PAT. The ACS Coordinator then works with the data sponsor to review uploaded data, edit records as appropriate, and then push data to ACS--part of the Office of Chief Financial Officer's (OCFO)

BAS. PAT is maintained by OLEM's System Manager who ensures that the PAT system operates correctly, based on business logic agreed to by OSRTI.

3d. Calculation Methodology:

The performance measure is a specific variable entered into CERCLIS following specific coding guidance and corresponding supporting site-specific documentation.

The unit of measure is number of sites. The calculation includes final and proposed NPL sites and Superfund Alternative sites.

4a. Oversight and Timing of Final Results Reporting:

Data Sponsor for HUEC, Annual Commitment System coordinator, and National Program Office (NPO) management.

Progress reporting is done periodically as checks, while official numbers are reported annually.

4b. Data Limitations/Qualifications:

Users of HEUC data should recognize that HEUC status is reviewed at least annually, on a schedule that varies based upon site characteristics. This status review can result in a change in status with regard to this measure, with a site moving from HEUC status to non-HEUC status.

4c. Third-Party Audits:

Three audits, two by the Office Inspector General (OIG) and the other by Government Accountability Office (GAO), assessed the validity of the data in SEMS. The OIG audit report, Superfund Construction Completion Reporting (No. E1SGF7_05_0102_8100030), dated December 30, 1997, concluded that the Agency "has good management controls to ensure accuracy of the information that is reported," and "Congress and the public can rely upon the information EPA provides regarding construction completions." The GAO report, Superfund: Information on the Status of Sites (GAO/RCED-98-241), dated August 28, 1998, estimated that the cleanup status of National Priority List (NPL) sites reported by SEMS as of September 30, 1997, is accurate for 95 percent of the sites. Another OIG audit, Information Technology - Comprehensive Environmental Response, Compensation, and Liability Information System (SEMS) Data Quality (Report No. 2002-P-00016), dated September 30, 2002, evaluated the accuracy, completeness, timeliness, and consistency of the data entered into SEMS. The report provided 11 recommendations to improve controls for SEMS data quality. EPA has implemented these recommendations and continues to use the monitoring tools for verification.

The IG annually reviews the end-of-year SEMS data, in an informal process, to verify data that supports the performance measures. Typically, there are no published results.

EPA received an unqualified audit opinion by the OIG for the annual financial statements and recommends several corrective actions. The Office of the Chief Financial Officer indicates that corrective actions will be taken.

Measure Code: SM1 - Tons of materials and products offsetting use of virgin resources through sustainable materials management.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

2 - Preserve Land

Sub-Objective Number and Title:

1 - Waste Generation and Recycling

Strategic Target Code and Title:

1 - By 2018, increase the amount of municipal solid waste reduced, reused, or recycled

Managing Office:

Office of Resource Conservation and Recovery

1a. Performance Measure Term Definitions:

N/A

2a. Original Data Source:

The level of national recycling is published annually in the report "Municipal Solid Waste in the United States." The Sustainable Materials Management (SMM) measure uses the amount of material recycled as reported in the characterization report.

SMM Challenge results will be quantified by organizations participating in the SMM initiatives and are self-reported to EPA.

2b. Source Data Collection:

Data from the MSW Characterization report is accessed from trade association and U.S. Department of Commerce data.

Data for the SMM Challenges are reported to EPA by organizations participating in the Challenges.

2c. Source Data Reporting:

The level of national recycling is published annually in the report "Municipal Solid Waste in the United States." This report is published on EPA's website.

Participant accomplishments are aggregated annually and reported on the individual SMM Challenge web pages on the EPA website.

3a. Relevant Information Systems:

System Description: Participant data for the SMM Challenges is reported to EPA by participants via an online database software. Challenge participants self-report by entering their data into the database, saving the data as they work, and then ultimately submitting the data for EPA review.

Source/Transformed Data: N/A

Information System Integrity Standards: The online database software provider maintains system integrity standards for the software system. Data is housed and only accessed by user name and password for each individual user.

3b. Data Quality Procedures:

Data for the MSW Characterization report which are accessed from other organizations undergo quality checks by those organizations before they are provided to EPA. In addition, staff in the Resource Conservation and Sustainability Division (RCSD) at EPA reviews the data and compares to other data sets as a quality check.

Data reported to EPA under the Challenges is self-reported by participants. Organizations apply to EPA to become affiliated with each Challenge, such as the Food Waste Challenge, and as part of their commitment to participate they must provide their own results to EPA at least once a year. Participants do this by accessing a password-protected website that interfaces with a secure tracking system. Participants are asked to review and verify their data before submitting to EPA to review. EPA staff in the Resource Conservation and Sustainability Division also conduct reviews, comparing data submitted to other sets of data, and compile results over time to demonstrate program effectiveness.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: The SMM Measurement team, which consists of Regional and HQ staff, is responsible for overseeing data for the MSW Characterization Report. Each of the SMM Challenges is supported by Regional and HQ personnel who are responsible overseeing the data for the SMM Challenges.

Source Data Reporting Oversight Responsibilities: The SMM Measurement team oversees the contractor who compiles data sources and reviews data sources and computations as well as the report before it is finalized. ORCR managers also review the data before it is released to the public. SMM Challenge Teams review each participant's entries, compares to previous data submissions from those participants, and follows up with any need for clarification and/or correction.

Information Systems Oversight Personnel: There is a database team that consists of Resource Conservation and Sustainability Division and contractor personnel who oversee the database itself and personnel who oversee data systems for the MSW Characterization report and each SMM Challenge.

Information Systems Oversight Responsibilities: Ensure system is built to specification. Ensure all users properly trained in how to use the system appropriately. Maintain system operation, monitor system performance and user interface, and troubleshoot problems identified or that arise.

3d. Calculation Methodology:

10% National Recycling Rate (national influence) + 100% SMM Program Results

The level of national recycling is published annually in the report "Municipal Solid Waste in the United States."

SMM Challenge results will be calculated as cumulative participant achievements over their individually established baselines.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: The SMM Measurement Team, which consists of regional and headquarters staff, is responsible for overseeing data for the MSW Characterization Report. In addition, for each SMM challenge, there is a SMM Challenge Team consisting of regional and headquarters personnel who are responsible overseeing the data for the SMM Challenges.

Final Reporting Oversight Responsibilities: The SMM Measurement Team reviews work assigned to contractor to compile data sources, make computations, and prepare final report. The SMM Challenge teams oversee participant input of data, quality check of data, and compile Challenge totals.

Final Reporting Timing: All results are compiled annually.

4b. Data Limitations/Qualifications:

None.

4c. Third-Party Audits:

None.

Measure Code: 115 - Number of Superfund remedial site assessments completed.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

2 - Clean Up Contaminated Land

Strategic Target Code and Title:

1 - By 2018, complete assessments at potential hazardous waste sites

Managing Office:

Office of Site Remediation and Technology Innovation

1a. Performance Measure Term Definitions:

Definition of Assessments: The Superfund site assessment process is used to evaluate potential or confirmed releases of hazardous substances that may pose a threat to human health or the environment. The process is guided by criteria established under the Hazard Ranking System (HRS) and is carried out by EPA, State, Tribal, or other Federal Agency environmental programs. Following notification of a potential site, a series of assessments are carried out until a final decision is reached regarding the need for remedial cleanup attention.

[Source: <https://www.epa.gov/superfund/superfund-site-assessment-process>

(Also see Chapter V of the most recent Superfund Program Implementation Manual (SPIM), which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here: <https://epa.gov/superfund/superfund-site-assessment-process>

Definition of Potential Hazardous Waste Sites: Any site or area where a hazardous substance may have been deposited, stored, disposed of, or otherwise come to be located and is or was assessed by EPA or its State, Tribal, or other Federal partners under the Federal Superfund Program.

Definition of Remedial Response: A remedial response is a long-term action that stops or substantially reduces a release of a hazardous substance that could affect public health or the environment. [Source: Superfund website, <http://congressionalresearch.com/97-312/document.php?study=SUPERFUND+FACT+BOOK>

Definition of "Other Cleanup Activity": - Sites that are not on EPA's National Priorities List that have completed the Superfund remedial assessment process and are considered to be NPL-caliber (i.e., existing information indicates that the site may achieve an HRS score > 28.5) and determined to need remedial-type cleanup attention may be addressed under a State, Tribal or other Federal Agency environmental cleanup program. EPA refers to these sites as "Other Cleanup Activity (OCA)" sites. Remedial-type work can include comprehensive site investigations in support of making cleanup determinations, interim cleanup actions, removals or final cleanup decisions, including decisions that cleanup is not required. At these sites, there is no continuous and substantive involvement on the part of EPA's site assessment program while remedial-type work is ongoing, such as routinely reviewing work products and other documents and providing comments. EPA performs a monitoring role at OCA sites by annually checking in with state, tribal, municipal and other federal agency partners on the status of cleanup work at these sites. Should conditions change such that Federal Superfund involvement becomes necessary, EPA will work with its State, Tribal and other Federal

Agency partners to determine an alternative approach for addressing a site. [Source: <https://www.epa.gov/superfund/superfund-program-implementation-manual>]

References:

U.S. Environmental Protection Agency, EPA Performance and Accountability Reports, <https://www.epa.gov/planandbudget/results>

U.S. Environmental Protection Agency, Superfund Accomplishment and Performance Measures, <https://www.epa.gov/superfund/superfund-accomplishments-and-benefits>

U.S. Environmental Protection Agency, Office of Inspector General, Information Technology - Superfund Enterprise Management System (SEMS) Data Quality, No. 2002-P-00016, <http://www.epa.gov/sites/production/files/2015-12/documents/cerlcis.pdf> .

U.S. Government Accountability Office, "Superfund Information on the Status of Sites, GAO/RCED-98-241", <http://www.gao.gov/archive/1998/rc98241.pdf>

U.S. Environmental Protection Agency, Office of Superfund Remediation and Technology Innovation, Superfund Program Implementation Manuals (SPIM), <http://www.epa.gov/superfund/superfund-program-implementation-manual>

U.S. Environmental Protection Agency, Office of Environmental Information, EPA System Life Cycle Management (SLCM) Requirements Guidance, CIO 2121-G-01.0, https://www.epa.gov/sites/production/files/2013-11/documents/cio_2121-g-01.0.pdf

U.S. Environmental Protection Agency, Office of Environmental Information, EPA's Information Quality Guidelines, <https://www.epa.gov/quality/epa-information-quality-guidelines>

NOTE: Strategic Target Title should read " By 2018, complete 95,500 assessments at potential hazardous waste sites".

2a. Original Data Source:

Original data sources vary, and multiple data sources can be used for each site. Typical data sources are EPA personnel, contractors (directly to EPA or indirectly, through the interagency agreement recipient or cooperative agreement recipient), and states/tribes (cooperative agreement recipients).

(See item Performance Measure Term Definitions in Section 1, for more information.)

2b. Source Data Collection:

Collection typically involves some combination of environmental data collection, estimation and/or tabulation of records/activities. Documents such as Preliminary Assessment Reports, Site Inspection Reports, Expanded Site Inspection Reports, Pre-CERCLA SEMS Screening Reports, and Hazardous Ranking Package are known reliable sources of data and provide the information necessary for determining the Assessment is completed.

Each EPA Region has a site assessment manager that oversees reporting.

The completion of site assessment activities has always been required to be entered into the Superfund Enterprise Management System (SEMS) database and its precursor database (Comprehensive Environmental Compensation and Liability Information System (CERCLIS) and tracked on a SCAP-13 and SCAP-15 reports.

The collection methods and guidance for determining the number of assessments completed are found in the Superfund Program Implementation Manual (SPIM).

<https://www.epa.gov/superfund/superfund-program-implementation-manual>

Source data collection frequency: At the conclusion of each individual site assessment.

Spatial detail: Site, defined in database by latitude/longitude pair.

2c. Source Data Reporting:

SEMS is used to report the completion of the site assessments. The completion dates come from various site assessment reports such as the Preliminary Assessment report, Site Inspection report, Pre-SEMs CERCLA screening report along with other site assessment activity reports. The report date is a known reliable sources of data and provide the information necessary identifying an assessment completion.

EPA's Regional offices and Headquarters enter data into SEMS as assessments are completed. The site assessment completion is reviewed quarterly by the 5th working day of the start of the following quarter. SEMS is to be updated prior to the quarterly pull for the quarter in which the event occurs.

See Chapter V of the most recent SPIM, which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here:

<https://www.epa.gov/superfund/superfund-program-implementation-manual>

3a. Relevant Information Systems:

The number of sites assessments completed are pulled directly from SEMS. The assessment completion date is entered into SEMS when the assessment has been completed and the Site Decision Form is completed and has been approved as such by the appropriate regional personnel.

SEMS database – The SEMS database is used by the Agency to track, store, and report Superfund site information (e.g., NPL sites and non-NPL Superfund sites).

(For more information about SEMS, see Chapter IV of the most recent SPIM, which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here:

<https://www.epa.gov/superfund/superfund-program-implementation-manual>.

SEMS operation and further development is taking place under the following administrative control quality assurance procedures: 1) Office of Environmental Information System Life Cycle Management Policy Agency Guidance; 2) the Office of Land Emergency Management (OLEM) Quality Management Plan (QMP); 3) EPA IT standards; 4) Quality Assurance Requirements in all contract vehicles under which SEMS is being developed and maintained; and 5) EPA IT security policies. In addition, specific controls are in place for system design, data conversion and data capture, as well as SEMS outputs.

SEMS adherence to the security policy has been audited. Audit findings are attached to this record.

OLEM Performance Assessment Tool (PAT). This tool serves as the primary external servicing resource for organizing and reporting OLEM's performance data, which collects information from OLEM program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from SEMS; replicates business logic used by SEMS for calculating measures; delivers that data to EPA staff and managers via a business intelligence dashboard interface for analytic and reporting use; and transmits data to the Budget Automated System (BAS). No current system specifications document is currently available for PAT, but will be provided when available. For this measure, PAT transmits Regional-level data to BAS.

PAT operates under the OLEM QMP. PAT has a security certification confirming that a security policy is not necessary because no sensitive data are handled and PAT is built upon the Oracle-based business intelligence system. PAT's security certification indicates that it follows all security guidelines for EPA's Oracle Portal and that PAT is (1) not defined as a "Major Application" according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 2.3.1; (2) does not store, process, or transmit information that the degree of sensitivity is assessed as high by considering the requirements for availability, integrity, and confidentiality according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 3.7.2. (3) is not covered by EPA Order 2100.2A1 Information Technology Capital Planning and Investment Control (CPIC).

3b. Data Quality Procedures:

A list of all data sponsors is provided in Appendix B of the SPIM. The most current SPIM can be found here: <https://www.epa.gov/superfund/superfund-program-implementation-manual>

SEMS: To ensure data accuracy and control, the following administrative controls are in place: 1) Superfund Program Implementation Manual (SPIM), the program management manual that details what data must be reported; 2) Report Specifications, which are published for each report detailing how reported data are calculated; 3) Coding Guide, which contains technical instructions to data users including Regional IMCs, program personnel, data owners, and data entry personnel; 4) Quick Reference Guides (QRG), which are available in the SEMS/ Documents Database and provide detailed instructions on data entry for nearly every module in SEMS; 5) Superfund Comprehensive Accomplishment (SCAP) Reports within SEMS, which serve as a means to track, budget, plan, and evaluate progress towards meeting Superfund targets and measures; 6) a historical lockout feature in SEMS so that changes in past fiscal year data can be changed only by approved and designated personnel and are logged to a Change Log report, 7) the OLEM QMP; and 8) Regional Data Entry Control Plans.

EPA Headquarters has developed data quality audit reports and Standard Operating Procedures, which address timeliness, completeness, and accuracy, and has provided these reports to the Regions. In addition, as required by the Office of Management and Budget (OMB), SEMS audit logs are reviewed monthly.

Regional Data Entry Control Plans. Regions have established and published Data Entry Control Plans, which are a key component of SEMS verification/validation procedures. The control plans include: (1) regional policies and procedures for entering data into SEMS, (2) a review process to ensure that all Superfund accomplishments are supported by source documentation, (3) delegation of authorities for approval of data input into SEMS, and (4) procedures to ensure that reported accomplishments meet accomplishment definitions. In addition, regions document in their control plans the roles and responsibilities of key regional

employees responsible for SEMS data (e.g., regional project manager, information management coordinator, supervisor, etc.), and the processes to assure that SEMS data are current, complete, consistent, and accurate. Regions may undertake centralized or decentralized approaches to data management. These plans are collected annually for review by OSRTI/IMB (Information Management Branch). [Source: SPIM IV (<https://www.epa.gov/superfund/superfund-program-implementation-manual>)

Copies of the Regional Data Entry Control Plans are provided with this DQR. Current and past year plans are available by contacting the Chief, Information Management Branch, Office of Superfund Remediation and Technology Innovation.

Regions are expected to prepare Data Entry Control Plans consistent with the SPIM and the Headquarters guidance: "SEMS Data Entry Control Plan Guidance."

Superfund Program Implementation Manual (SPIM). The SPIM should be the first source referred to for additional questions related to program data and reporting. The SPIM is a planning document that defines program management priorities, procedures, and practices for the Superfund program (including response, enforcement, and Federal facilities). The SPIM provides the link between the GPRA, EPA's Strategic Plan, and the Superfund program's internal processes for setting priorities, meeting program goals, and tracking performance. It establishes the process to track overall program progress through program targets and measures.

The SPIM provides standardized and common definitions for the Superfund program, and it is part of EPA's internal control structure. As required by the Comptroller General of the United States, through generally accepted accounting principles (GAAP) and auditing standards, this document defines program scope and schedule in relation to budget, and is used for audits and inspections by the Government Accountability Office (GAO) and the Office of the Inspector General (OIG). The SPIM is developed on an annual basis. Revisions to the SPIM are issued during the annual cycle as needed.

The most current version of the SPIM can be found at: <https://www.epa.gov/superfund/superfund-program-implementation-manual>

Data Flow:

Step 1. Original data sources provide information.

Step 2. EPA Region enters the assessment completion dates in SEMS/CERCLIS as needed.

Step 3. OSWER's PAT pulls data from SEMS/CERCLIS. Headquarters staff compare PAT results to SEMS/CERCLIS results. If PAT does not match SEMS/CERCLIS then there was an error with the upload and data are reloaded. Headquarters staff enter into PAT the Annual Commitment System (ACS) status information for each measure and, if necessary, a status explanation.

Step 5. Headquarters approves PAT results, and PAT pushes results into BAS.

Step 6. BAS aggregates Regional data into a national total. The OSRTI lead for reporting reviews and certifies results in BAS.

3c. Data Oversight:

The Superfund program has a "data sponsorship" approach to database oversight. Headquarters staff and managers take an active role in improving the quality of data stored in SEMS/CERCLIS by acting as data sponsors.

HQ managers take an active role in improving the quality of data stored in SEMS by acting as data sponsors. Data sponsorship promotes consistency and communication across the Superfund program. HQ data sponsors communicate and gain consensus from data owners on data collection and reporting processes. Data sponsors ensure that the data they need to monitor performance and compliance with program requirements are captured and stored properly in SEMS. To meet this goal, HQ data sponsors identify their data needs, develop data field definitions, and distribute guidance requiring submittal of these data. Data owners are normally site managers that need the data in support of site work. Data owners follow the guidance they receive from data sponsors, as they acquire and submit data.

HQ data sponsors assist data owners in maintaining and improving the quality of Superfund program data. These data are available for data evaluation and reporting. Data sponsorship helps promote consistency in both national and regional reporting. In addition, data sponsorship provides a tool to improve data quality through program evaluation and adjustments in guidance to correct weaknesses detected. Data sponsors may conduct audits to determine if there are systematic data problems (e.g., incorrect use of codes, data gaps, etc.). [Source: XI.A.4 of the FY 2012 SPIM] A list of data sponsors is provided in Appendix B of the SPIM. The latest version of the SPIM can be found here: <https://www.epa.gov/superfund/superfund-program-implementation-manual>

Specific roles and responsibilities of data sponsors can be found in Chapter IV of the SPIM.

<https://www.epa.gov/superfund/superfund-program-implementation-manual>

The primary responsibilities of data owners are (1) to enter and maintain data in SEMS/CERCLIS and (2) assume responsibility for complete, current, consistent, and accurate data. The data owners for specific data are clearly identified in the system audit tables. Regions annually update region-specific Data Entry Control Plans (DECP). Among other things, Regional data entry control plans identify which Data Sponsors/Data Owners are responsible for different aspects of data entry. (See item 3b., Data Quality Procedures for more information on Data Entry Control Plans.)

Roles and Responsibilities of the Information Management Coordinators (IMCs). The IMC is a senior position which serves as regional lead for all Superfund program and SEMS data systems management activities. The following lead responsibilities for regional program planning and management rest with the IMC:

- Coordinate program planning, budget development, and reporting activities;
- Ensure regional planning and accomplishments are complete, current, and consistent, and accurately reflected in SEMS by working with data sponsors and data owners;
- Provide liaison to HQ on SCAP process and program review issues;
- Provide liaison to regional management and data entry staff, as appropriate;

- Coordinate regional reviews by HQ;
- Ensure that the quality of SEMS data is such that accomplishments and planning data can be accurately retrieved from the system; and,
- Ensure there is 'objective' evidence to support accomplishment data in SEMS. (Objective Evidence Rule: 'All transactions must be supported by objective evidence, that is, documentation that a third party could examine and arrive at the same conclusion.') [Source: SPIM 2017, IV-2]

The latest version can be found here: <https://www.epa.gov/superfund/superfund-program-implementation-manual>

The Information Management Officer (IMO) & Director, Information Management and Data Quality Staff. OLEM is the lead point of contact for information about the data from SEMS.

PAT Data Entry

The Annual Commitment System (ACS) Coordinator in OSRTI ensures that SEMS data for this measure are correctly loaded into PAT. The ACS Coordinator then works with the data sponsor to review uploaded data, edit records as appropriate, and then push data to ACS--part of the Office of Chief Financial Officer's (OCFO) BAS. PAT is maintained by OLEM's System Manager who ensures that the PAT system operates correctly, based on business logic agreed to by OSRTI.

3d. Calculation Methodology:

The performance measure is a specific variable entered into SEMS following specific coding guidance and corresponding supporting site-specific documentation.

The unit of measure is the number of remedial site assessments completed.

4a. Oversight and Timing of Final Results Reporting:

Data Sponsor for Site Assessment Completions, Annual Commitment System coordinator, and National Program Office (NPO) management.

Progress reporting is done periodically, while official numbers are reported annually.

4b. Data Limitations/Qualifications:

The Superfund Remedial Assessment Completions measure is reported at least annually, and data must be entered in SEMS prior to the annual data pull which is usually the 10th business day following the end of the FYQ4.

4c. Third-Party Audits:

Three audits, two by the Office Inspector General (OIG) and the other by Government Accountability Office (GAO), assessed the validity of the data in SEMS. The OIG audit report, Superfund Construction Completion Reporting (No. E1SGF7_05_0102_8100030), dated December 30, 1997, concluded that the Agency "has good management controls to ensure accuracy of the information that is reported," and "Congress and the public can rely upon the information EPA provides regarding construction completions." The GAO report, Superfund: Information on the Status of Sites (GAO/RCED-98-241), dated August 28, 1998, estimated that the cleanup

status of National Priority List (NPL) sites reported by SEMS as of September 30, 1997, is accurate for 95 percent of the sites. Another OIG audit, Information Technology - Comprehensive Environmental Response, Compensation, and Liability Information System (SEMS) Data Quality (Report No. 2002-P-00016), dated September 30, 2002, evaluated the accuracy, completeness, timeliness, and consistency of the data entered into SEMS. The report provided 11 recommendations to improve controls for SEMS data quality. EPA has implemented these recommendations and continues to use the monitoring tools for verification.

The IG annually reviews the end-of-year SEMS data, in an informal process, to verify data that supports the performance measures. Typically, there are no published results.

Measure Code: ST1 - Reduce the number of confirmed releases at UST facilities to five percent (5%) fewer than the prior year's target.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

2 - Preserve Land

Sub-Objective Number and Title:

2 - Minimize Releases of Hazardous Waste and Petroleum Products

Strategic Target Code and Title:

4 - Through 2018, minimize the number of confirmed releases at UST facilities

Managing Office:

Office of Underground Storage Tanks

1a. Performance Measure Term Definitions:

The most current definitions for the EPA's performance measures related to underground storage tanks are available on EPA's website <https://www.epa.gov/ust/ust-performance-measures> under Definitions. See the definition for the measure number LUST-1 in the definitions document.

For more information on EPA's Underground Storage Tanks Program, see: <http://www.epa.gov/ust>

2a. Original Data Source:

The data suppliers are the states and territories who are the direct implementers of the program in their respective jurisdictions and the EPA regions who provide assistance to the tribes.

2b. Source Data Collection:

The data is collected by each state and territory using their own systems and databases. They then report this information to OUST using the LUST4 system described under section 3.

EPA Quality Assurance Requirements/Guidance under Which Original Data Sources Collect Data:

For cooperative agreements: Regional offices include QA Terms and Conditions in their states' assistance agreement. CAs must be current and specify: QA roles and responsibilities for EPA and grantee recipients; and quality requirements including responsibilities for final review and approval. Default quality requirements include: organization-level QA documentation (i.e. QMP) for state agencies and primary contractors; and project-level QAPPs for each CA. In accordance with EPA's Uniform Administrative Requirements for Grants and Cooperative Agreements, 40 CFR Part 31.45, states must develop and implement quality assurance practices. The regulation requires developing and implementing quality assurance practices that will "produce data of quality adequate to meet project objectives and to minimize loss of data to out of control conditions or malfunctions"; see LUST Trust Fund Corrective Action Cooperative Agreement Guidelines <https://www.epa.gov/ust/leaking-underground-storage-tank-lust-trust-fund>

For contracts: EPA Regions determine which quality requirements are applicable. Contracts must be current and specify: QA roles and responsibilities for EPA and national LUST contractors; and quality requirements including responsibilities for final review and approval. Default quality requirements include: organization-level QA documentation (i.e. QMP) for the primary contractors; and project-level QAPPs for each Tribal LUST remedial Work Assignment. Sample EPA contract language: "the Contractor shall comply with the higher-level quality standard selected below: Specifications and Guidelines for Quality Systems for Environmental Data

Collection and Environmental Technology Programs (ANSI/ASQC E4, 1994). As authorized by FAR 52.246-11, the higher-level quality standard ANSI/ASQC E4 is tailored as follows: The solicitation and contract require the offerors/contractor to demonstrate conformance to ANSI/ASQC E4 by submitting the quality documentation described below. The Contractor shall not commence actual field work until the Government has approved the quality documentation (i.e., QAPP)."

Note: Regions keep copies of individual QAPPs associated with cooperative agreements and contracts. Each EPA regional office manages its own state and tribal assistance agreements.

2c. Source Data Reporting:

Data Submission Instrument:

State-specific databases.

Data Entry Mechanism:

Each state enters their data into the online LUST4 Oracle-based system (see section 3 for more details).

Frequency of Data Transmission to EPA: Twice annually.

Timing of Data Transmission to EPA:

Within 10 days of the end of the reporting period (by April 10 for mid-year, and October 10 for end-of-year).

3a. Relevant Information Systems:

System Description:

LUST4. This database is the master database of all LUST program-related data. States, territories and EPA report data for activity and measures directly into LUST4. LUST4 's Oracle Web-based system is accessed through the EPA portal at <http://portal.epa.gov/> under the My Communities/Underground Storage Tank Menu Page.

OLEMOLEM Performance Assessment Tool (PAT). This tool serves as the primary external servicing resource for organizing and reporting OLEMOLEM's performance data. PAT collects information from OLEMOLEM program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from LUST4; replicates business logic used by LUST4 for calculating measures; can deliver that data to EPA staff and managers via a business intelligence dashboard interface for analytic and reporting use; enables LUST point of contact to document status and provide explanation for each measure; and transmits data to EPA's Budget Automation System (BAS). No current system specifications document is currently available, but will be provided when available.

BAS. BAS is the final repository of the performance values.

Source/Transformed Data:

LUST4. LUST4 includes both source data and transformed data (e.g., data aggregated into Regional totals).

PAT. PAT includes only transformed data.

BAS. BAS includes only transformed data.

Information System Integrity Standards:

LUST4. LUST4 operates under OLEMOLEM's QMP, including the security policy specified in that QMP. LUST4 does not have any stand-alone certifications related to the EPA security policy or the Systems Life Cycle Management policy. The LUST4 system is built upon Oracle Business Intelligence tools provided by the EPA Business Intelligence Analytics Center, which ensures that a stand-alone security certification is not necessary.

PAT. PAT operates under the OLEMOLEM Quality Management Plan (QMP). PAT has a security certification confirming that a security policy is not necessary because no sensitive data are handled and PAT is built upon the Oracle-based business intelligence system. PAT's security certification indicates that it follows all security guidelines for EPA's Oracle Portal and that PAT is (1) not defined as a "Major Application" according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 2.3.1; (2) does not store, process, or transmit information that the degree of sensitivity is assessed as high by considering the requirements for availability, integrity, and confidentiality according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 3.7.2. (3) is not covered by EPA Order 2100.2A1 Information Technology Capital Planning and Investment Control (CPIC).

BAS. Not applicable.

3b. Data Quality Procedures:

EPA's regional grants project officers and regional program managers provide first-level data quality reviews and oversight of their recipients' program performance measure results. EPA/OUST reviews, comments and approves each record.

OUST uses a combination of automated validation along with manual QA/QC review.

QA/QC REVIEW BY REGIONS. EPA/OUST oversees the use of the QA/QC checklist, which is incorporated into the LUST4 oracle web-based system. Regions complete the QA/QC checklist, sign it electronically and submit it to EPA/OUST for review, comment and approval of each record.

NOTE: This QA/QC checklist was last updated 10/1/2009 and is accessed through the user interface of LUST4.

Regional QA/QC Evaluation Checklist –

Note: Checklist is to be completed by Regional reviewer and will appear "shaded" to others.

1. Previous Totals Column

-- Verify the previous total number is correct by comparing it to the total from the last reporting period. If there is a discrepancy, report the information in the "Correction To Previous Data" column. Please add comments in the "Comments" column for any corrections that are made to the applicable performance measure.

2. Actions This Reporting Period

For each performance measure, if this "Reported" number deviates by more than 10% from the last period's number or appears otherwise questionable, complete the following actions:

-- Compare data to additional previous reporting periods to see if this current data deviates by more than 10% from previous reporting periods as well.

-- Review the state's explanation, if available.

-- If necessary, contact the state to obtain the corrected numbers and/or obtain a sufficient explanation and include the explanation in the "Comments" section for the applicable performance measure.

3. Corrections to Previous Data Column

Verify that if any corrections have been listed that an explanation for the correction is provided in the "Comments" column and complete the following actions:

- Verify and discuss the correction with the state if the correction is >10% or if the correction appears questionable (e.g., database conversions, database cleanup efforts to resolve misclassified data, duplicative records, etc.)
- Verify if the corrections are anticipated to be a one-time event or occur over multiple years
- Evaluate if the corrections will impact other performance measures (e.g., if the number of cleanups completed is adjusted downward by a correction, does this also result in a commensurate downward adjustment of cleanups initiated?) Include any additional comments in the "Comments" column as necessary.

4. Totals (Cumulative, if applicable)

- Verify accuracy of all cumulative totals
- Include any additional comments in the "Comments" column as necessary
- Verify that the cumulative total confirmed releases is equal to or greater than the cumulative totals for both cleanups initiated and cleanups completed. The two data elements are subsets of confirmed releases.

AUTOMATED VALIDATION.

LUST4 will show an error message if the user enters values that result in the cumulative total of confirmed releases being less than the cumulative total of either cleanups initiated or cleanups completed.

DATA FLOW:

Step 1. Confirmed releases are entered into LUST4 by state recipients or by Regions (for tribal data).

Step 2. Each Region conducts Regional level review of data from the LUST4 system. Rejected data must be edited by the original data source. Approved data proceed to Step 3.

Step 3. Headquarters' staff perform National Program Review, using data from the LUST4 system. Rejected data must be reviewed by the region and, if needed, pushed back to the state for editing (Step 2).

Step 4. PAT pulls data from LUST4. Headquarters staff compare PAT results to LUST4 results. If PAT does not match LUST4 then there was an error with the upload and data is reloaded. Headquarters staff enter into PAT the ACS status information of "Indicator" for each measure and, if desired, explanation. (Note: PAT allows for programs to identify status other than "Indicator." When programs select a status of "no status," "data not available," or "target not met," PAT requires that an explanation be provided. LUST program policy is to resolve all reporting issues prior to ACS reporting, so "Indicator" is the only status chosen and explanations for that status are optional.)

Step 5. Headquarters approves PAT results, and PAT pushes results into BAS/Measures Central.

Step 6. Measures Central aggregates Regional data into a national total. OUST reporting lead reviews and certifies results.

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

Regional Program Managers are ultimately responsible for regional-level data.

Source Data Reporting Oversight Responsibilities:

Regional Program Managers conduct their review based upon a national QA/QC checklist, as described in the Data Quality Procedures field.

Information Systems Oversight Personnel:
OUST LUST4 System Manager

Information Systems Oversight Responsibilities:

Maintains a list of the HQ (OUST and OEI), Regional and state/territory primary and backup users; a record of changes to the list is also maintained. Ensures that Regional reporting is on track, conducts QA on LUST performance measures, ensures QA issues are resolved and/or documented, and oversees final reporting to BAS.

Works with OUST contractor to resolve any issues with the LUST4 data system.

3d. Calculation Methodology:

At the end of the fiscal year, users report the number of confirmed releases they had over the last six months. The system adds this number to what the user reported in the mid-year report to calculate the total number of confirmed releases for the year. The user will also report any corrections to their previous cumulative totals. The corrections and actions during this reporting period are added to the users' previous cumulative total to get the new current cumulative total of confirmed releases in that state.

Unit of Measure: Number of releases from regulated underground storage tanks that are reported and verified by the state during the reporting period.

Timeframe of Result: Semi-annual.

Documentation of Methodological Changes: Not applicable.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:
Deputy Office Director.

Final Reporting Oversight Responsibilities:

Responsible for final review to ensure LUST 4 System Manager has completed review, and numbers are accurate.

Final Reporting Timing: Semiannual.

4b. Data Limitations/Qualifications:

Data quality depends on the accuracy and completeness of state records. Also, some states rely on local jurisdictions for their data, which can cause delays for these states. Additionally, the tanks program is primarily run by states, and each state operates their program in a manner that works best for them. Because there are differences between all states, the data from each state can be influenced by the policies and interpretations of each state. This creates limitations when someone compares state-level data.

4c. Third-Party Audits:

None.

Measure Code: C1 - Score on annual Core NAR.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

1 - Emergency Preparedness and Response

Strategic Target Code and Title:

1 - By 2018, achieve and maintain percent of the maximum score on the Core National Approach to Response

Managing Office:

Office of Emergency Management

1a. Performance Measure Term Definitions:

The National Approach to Response (NAR) is an Agency-wide mechanism to address effective allocation of resources during an incident and effective implementation of response procedures. To ensure that the goals of the NAR are being met, EPA continues to implement its annual assessment of its response and removal preparedness via the Core National Approach to Response (Core NAR) assessment, which grew out of its Core Emergency Response (ER) program and assessment. The Core NAR evaluation is conducted annually and consists of two parts. The first part, called Core ER, addresses day-to-day preparedness for removal actions for regions, special teams and Headquarters (HQ). The second part addresses national preparedness for chemical, biological, radiological and nuclear (CBRN) incidents. The score on Core NAR, which is reflected as composite percentage of both the ER and CBRN components for the Regions, Special Teams and HQ, reflects Agency performance relative to the evaluation criteria.

2a. Original Data Source:

Information to support Core NAR scoring is collected by the evaluation team. The evaluation team consists of managers and staff from HQ, including contractor support. The data consist of scores (on a scale of 0 to 3 for Core ER and 0 to 5 for Core CBRN) for a number of readiness elements. Scores are collected for each of the 10 EPA regions, HQ and EPA special teams. The original scores are developed by OEM HQ staff and their contract support.

2b. Source Data Collection:

Data are collected through detailed self-evaluation surveys of all regional programs, EPA special teams and HQ offices. Following the self-evaluation surveys, the evaluation team conducts interviews with personnel and managers in order to gather more information and to support their determination of the final score. The evaluation team reviews the data during the data collection and analysis process. The data are collected by a combination of managers and staff to provide consistency across all reviews plus to serve as an important element of objectivity in each review. Standards and evaluation criteria have been developed and reviewed extensively by HQ, and EPA's regional managers and staff and special teams managers and staff. Beginning in FY 2014, the Core NAR evaluation will include Readiness Assessments where response staff will be tested on their ability to use response equipment.

2c. Source Data Reporting:

Scores are entered into a form and sent to the 10 regions and special teams in advance of each Core NAR evaluation conference call (see attached form). The scores are also tabulated by EPA HQ contract support into a database and stored until they are to be revised based on input received during the evaluation call. The scores for Core ER are typically shared with the recipients within three weeks of the completion of individual

interviews. The composite score for Core ER and CBRN is provided to all recipients within a month of the completion of all interviews.

Attached Documents:

Core NAR ER Regions FY 2012_FINAL,rcredits.docx

3a. Relevant Information Systems:

System Description: Data from evaluations from each of the 10 regions, special teams, and HQ are tabulated and stored using standard software (e.g., Word, Excel). No specific database has been developed. Currently, there are no plans to develop a dedicated system to manage the data.

Source/Transformed Data: The files identified above contain both source and transformed data (modified and agreed-upon scores from the evaluation interviews).

Information System Integrity Standards: Not Applicable.

3b. Data Quality Procedures:

Data review is conducted after the data have been analyzed by the evaluation team, to ensure the scores are consistent with the data and program information. The scores are developed by a team looking across all 10 regions, special teams, and HQ, allowing for easier cross-checking and ensuring better consistency of data analysis and identification of data quality gaps.

The evaluation team considers any programmatic constraints across the Agency that might call for adjustments to scores for individual Core NAR elements being evaluated. As individual evaluation interviews progress during the year, a particular development or re-occurring instance or theme might emerge for a number of regions or special teams that might warrant revision of scores for groups that had their evaluation earlier in the process. If this instance affects enough of the regions and special teams, then it might, for example, be concluded that no group should receive a score of 3 for the element in question even if a group was given a 3 during an earlier evaluation call.

For the HQ evaluation, two regional managers participate in the process and make the final determination for HQ's scores to ensure fairness and accuracy.

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

- HQ Project Manager: Office of Emergency Management –Evaluation and Communications Division
- HQ Project Support: Office of Emergency Management –Evaluation and Communications Division

Source Data Reporting Oversight Responsibilities:

- Making any necessary changes to the evaluation criteria for Core ER and CBRN
- Evaluating materials submitted by regions, special teams and HQ to determine initial scores
- Schedule and conduct individual evaluation interviews / meetings
- Make revisions to initial scores based on input from interviews / meetings

Information Systems Oversight Personnel:

- HQ Project Manager: Office of Emergency Management –Evaluation and Communications Division
- HQ Project Support: Office of Emergency Management –Evaluation and Communications Division

Information Systems Oversight Responsibilities:

- Tabulate revised scores into spreadsheets to develop final regional, special teams and HQ scores

3d. Calculation Methodology:

Once all of the evaluations are complete, a national average score is calculated by a team looking across all 10 regions, special teams and HQ.

For the two parts of the Core NAR evaluation (Core ER & CBRN), the total score for the region, special team or HQ is divided by the total possible score. This percentage is considered the score for that part of the evaluation for that particular group. For the ER component, percentages are calculated in this manner for all 10 regions, four special teams and EPA HQ. For the CBRN component, one percentage is calculated for the 10 regions, and separate percentages are calculated for each of the four special teams and EPA HQ.

The percentages are given equal weight and averaged to obtain final agency-wide scores for Core ER and CBRN. These two agency-wide scores are averaged to obtain the final, national average Core NAR score for the Agency.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

- HQ Project Manager: Office of Emergency Management –Evaluation and Communications Division
- HQ Project Support: Office of Emergency Management –Evaluation and Communications Division
- HQ Results Reporting Support: Office of Emergency Management—Evaluation and Communications Division

Final Reporting Oversight Responsibilities:

- Working with EPA HQ contractor support to finalize scores for the regions, special teams and HQ
- Working with EPA HQ contractor support to finalize the composite score for Core ER and CBRN
- Providing the final composite score to OSWER for end-of-year reporting purposes

Final Reporting Timing: The final Core NAR score is reported annually to OSWER for inclusion in end-of-year reporting activities for the Government Performance and Results Act.

4b. Data Limitations/Qualifications:

One key limitation of the data is the lack of a dedicated database system to collect and manage the data. Standard software packages (word processing, spreadsheets) are used to develop the evaluation criteria, collect the data and develop the accompanying readiness scores. There is also the possibility of subjective interpretation of data.

It is likely that the error for this measure will be small for the following reasons: the standards and evaluation criteria have been developed and reviewed extensively by HQ and EPA’s regional managers and staff; the data will be collected by a combination of managers and staff to provide consistency across all reviews plus an important element of objectivity in each review; the scores will be developed by a team looking across all ten regions, special teams, and HQ, allowing for easier cross-checking and ensuring better consistency of data analysis and identification of data quality gaps.

4c. Third-Party Audits:

The Core NAR evaluation has two features that help it achieve validation and verification similar to that of an independent third party audit.

- The final determination on the HQ score is given by two regional managers to help ensure fairness of the evaluation whereas HQ staff gives scores for the regions and special teams.
- Readiness Assessments of EPA's ability to use response equipment will be conducted and overseen by other regions rather than a self evaluation.

Measure Code: CH2 - Number of risk management plan inspections conducted.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

1 - Promote Sustainable and Livable Communities.

Sub-Objective Number and Title:

3 - Reduce Chemical Risks at Facilities and in Communities

Strategic Target Code and Title:

1 - By 2018, continue to maintain the Risk Management Plan (RMP) prevention program

Managing Office:

The Office of Emergency Management (OEM)

1a. Performance Measure Term Definitions:

Risk Management Plans: Risk Management Plans are documents that are submitted by facilities that store chemicals over a certain threshold quantity. These plans are submitted every five years and document chemical processes, accident history, emergency contact information, etc.

Inspections: An inspection is considered "completed" when the EPA region completes the Inspection Conclusion Data Sheet (ICDS) and enters the information into the Integrated Compliance Information System (ICIS). However this is not always the case. For example, in an ongoing enforcement case, more information or a second site visit might be needed.

Audit: Audits are similar to inspections but do not proceed to enforcement.

Background: The subobjective's goal is to reduce chemical risks at facilities and in communities. Under the authority of section 112(r) of the Clean Air Act, the Chemical Accident Prevention Provisions require facilities that produce, handle, process, distribute, or store certain chemicals to develop a Risk Management Program, prepare a Risk Management Plan (RMP), and submit the Plan to EPA. The purpose of this performance measure is to ensure that facilities that are required to have risk management plans do indeed have plans and are available in case of an incident.

OLEM's Office of Emergency Management implements the Risk Management Program under Clean Air Act section 112(r). Facilities are required to prepare Risk Management Plans (RMPs) and submit them to EPA. In turn, EPA Headquarters (HQ) provides appropriate data to each Region and delegated state so that they have the RMP data for their geographical area. EPA regions and delegated states conduct inspections.

2a. Original Data Source:

Data come from one of two sources:

1) EPA Regions. For most states, EPA regions are the implementing authorities that conduct and make record of inspections.

2) States: Ten states and some counties and territories have received delegation to operate the RMP program. These delegated States report audit numbers to the appropriate EPA Regional office so it can maintain composite information on RMP audits.

2b. Source Data Collection:

EPA personnel travel to facilities to conduct inspections, using the Risk Management Plans that the facilities have submitted, as a basis for their inspection. EPA inspects approximately 3 percent of the entire RMP facility universe annually.

2c. Source Data Reporting:

EPA regional staff complete inspections and record information on the ICDS form. Inspections are recorded in the ICIS system as they are completed. EPA headquarters monitors progress of the data collection regularly and reports on the data at mid year and at the end of the fiscal year.

3a. Relevant Information Systems:

The EPA Annual Commitment System (ACS) is the database for the number of risk management plan (RMP) inspections. The Integrated Compliance Information System (ICIS) is used for tracking RMP inspection activities. The Risk Management Plan (RMP) database is used to collect RMP information from regulated facilities, and provides essential background information for inspectors.

3b. Data Quality Procedures:

Facilities submit RMP data via an online system, with extensive validation and quality control measures applied during and after submission to EPA. Regions review RMP data, and compare with information obtained during inspections. Inspection data are collected from states by EPA's Regional offices, and reviewed at the time of Regional data entry. Inspection data are regularly compared to similar data from the past to identify potential errors. Inspection data quality is evaluated by both Regional and Headquarters' personnel. Regions enter data into the Agency's Annual Commitment System, and HQ prepares an annual report.

3c. Data Oversight:

These individuals are Regional Chemical Emergency Preparedness and Prevention managers who are responsible for overseeing the inspections and data entry at the Regional level. Headquarters staff performs QA/QC on the data entered by the Regions and reports data out.

3d. Calculation Methodology:

Regional and National targets for the number of RMP inspections are set based on the FTE and program funding available to the Regions, and our understanding of the resources required to conduct RMP inspections. In prior years, our experience has shown that Regional offices can inspect approximately 3% to 5% of the universe of RMP facilities with available resources. However, this percentage is strongly dependent on the size and complexity of facilities inspected. EPA experience indicates that the field portion of RMP facility inspections alone can require anywhere from a single person for one day or less at a simple, single-process facility up to a team of 6-8 inspectors for 1-2 weeks or more at a large chemical plant or refinery. In recent years, EPA has shifted its inspection focus to high-risk RMP facilities by requiring regional offices to conduct a certain percentage of RMP inspections at these facilities. As high-risk facilities generally require the most inspection resources, the agency has reduced the overall RMP inspection target in order to devote additional resources toward high-risk facility inspections. EPA has established criteria for identifying high-risk RMP facilities and provides a list of these facilities at the beginning of each fiscal year to each Regional office. For FY 2018, the overall national RMP inspection target has been reduced from approximately 5% to 3%, while the percentage of high-risk facility inspections has been raised from approximately 25% to 36%.

4a. Oversight and Timing of Final Results Reporting:

These individuals are OEM personnel who work on the Chemical Emergency Preparedness and Prevention programs either in technical expertise or program evaluation.

4b. Data Limitations/Qualifications:

ICIS data quality is dependent on completeness and accuracy of the data provided by state programs and the EPA Regional offices.

Data are count data and not open to interpretation.

RMP data quality is enhanced by system validation, but accuracy is dependent on what the facility submits in their Risk Management Plan.

4c. Third-Party Audits:

There are no third party audits for the RMP measure.

Measure Code: MW8 - Number of tribes covered by an integrated solid waste management plan.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

2 - Preserve Land

Sub-Objective Number and Title:

1 - Waste Generation and Recycling

Strategic Target Code and Title:

2 - By 2018, increase by 50 the number of tribes covered by an integrated waste management plan

Managing Office:

Office of Resource Conservation and Recovery

1a. Performance Measure Term Definitions:

Tribe: Federally recognized tribes as defined by the Bureau of Indian Affairs. The most recent list can be found here: <https://www.bia.gov/cs/groups/xraca/documents/text/idc1-033010.pdf> (accessed February 11, 2014)

Integrated Waste Management Plan: An integrated solid waste management plan provides a tribe with a comprehensive approach to organizing their waste collection and management programs. This is also referred to as an "Integrated Waste Management Plan (IWMP)." The following five elements represent the basic requirements that must be included in a tribe's IWMP for that plan to be considered adequate for GPRC purposes: description of the community service area; description of the tribe's waste management program structure and administration; description of the tribe's current and proposed waste management practices; description of the funding and sustainability and the long-term goals of the tribe's waste management program; and demonstration of approval of the IWMP by an appropriate governing body. Plans that do not meet all five elements may be adequate if a region determines that one or more elements are not applicable to a tribe's waste management program.

For more information on the expectations associated with each element, see the following document: U.S. Environmental Protection Agency. "Five Elements of a Tribal Integrated Waste Management Plan".

Memorandum from Matt Hale, former Director, Office of Resource Conservation and Recovery.

[http://yosemite.epa.gov/osw/rcra.nsf/0c994248c239947e85256d090071175f/E7661F353791AD71852573780050876E/\\$file/14776.pdf](http://yosemite.epa.gov/osw/rcra.nsf/0c994248c239947e85256d090071175f/E7661F353791AD71852573780050876E/$file/14776.pdf) (accessed December 17, 2013).

For more information on EPA's Tribal Solid Waste Management Program, visit: <https://www.epa.gov/tribal-lands/overview-tribal-waste-management-program>

2a. Original Data Source:

EPA regional personnel evaluate tribal integrated waste management plans, and record the data for this measure in internal Regional data systems and EPA's Budget Automation System (BAS). Regional data is collected by ORCR and maintained in a spreadsheet.

2b. Source Data Collection:

The data set is very small and has only two elements (tribe and fiscal year). The data are reviewed by EPA regional offices for data quality and periodic adjustments are made during these reviews. The minimal data is then provided to ORCR for collection in a spreadsheet.

Because the data sets are small in size on a region-by-region basis, they can be managed efficiently by each regional office.

There is not any geographical or spatial detail of source data. The measure is only determining the number of tribal IWMPs.

2c. Source Data Reporting:

The data is originated by EPA. The data from each EPA Region is entered into BAS and also submitted to the ORCR Project manager.

The instrument that the data is recorded and submitted is a spreadsheet. There is no EPA information system for this data at this time.

EPA staff will manually enter information about each IWMP in a spreadsheet.

The frequency of data transmission to EPA is at least bi-annually. Data may be submitted to the ORCR Project manager on a quarterly basis.

3a. Relevant Information Systems:

EPA Regional offices enter data into their internal data systems and the Annual Commitments System in BAS - see further description of EPA's Annual Commitments System. The internal EPA data set housing the specific integrated waste management plans for each tribe is managed by each regional office and is under the control of each region. DATA is also collected by ORCR in a spreadsheet. As of October 2013, a nationwide total of 173 tribal integrated waste management plans have been counted.

3b. Data Quality Procedures:

The regional data systems are considered to be appropriate for the minimal complexity and small size of the data set.

3c. Data Oversight:

Tribal solid waste program staff in each regional office.

Regional staff ensure that data is entered correctly into BAS.

ORCR/ Federal, State and Tribal Programs Branch, staff reviews data entered into BAS by regional staff to ensure accuracy.

3d. Calculation Methodology:

Units: Number of Tribes

The result is calculated by counting all tribes that EPA Regions have defined as being covered by an Integrated Waste Management Plan, as defined in field 1a, Performance Measure Term Definitions.

EPA has compiled the regional data into a spreadsheet for national tracking purposes. This spreadsheet is updated quarterly.

4a. Oversight and Timing of Final Results Reporting:

Project Manager/ ORCR/ Federal, State and Tribal Programs Branch.

Data is collected from BAS, and confirmed through the informal reporting of data requested from the regions that is placed into a spreadsheet. Official results are reported annually.

4b. Data Limitations/Qualifications:

The data are considered to be accurate on a regional and national scale.

4c. Third-Party Audits:

None.

Measure Code: S10 - Number of Superfund sites ready for anticipated use site-wide.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

2 - Clean Up Contaminated Land

Strategic Target Code and Title:

8 - By 2018, ensure that 946 Superfund sites are "sitewide ready for anticipated use."

Managing Office:

OSRTI

1a. Performance Measure Term Definitions:

Definition of Site: "Sites" refers only to National Priorities List (NPL) sites. (See below for definition of NPL.) The term "site" itself is not explicitly defined under Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) or by the Superfund program; instead "site" is defined indirectly in CERCLA's definition of "facility," as follows: "The term 'facility' means (A) any building, structure, installation, equipment, pipe or pipeline (including any pipe into a sewer or publicly owned treatment works), well, pit, pond, lagoon, impoundment, ditch, landfill, storage container, motor vehicle, rolling stock, or aircraft, or (B) any site or area where a hazardous substance has been deposited, stored, disposed of, or placed, or otherwise come to be located; but does not include any consumer product in consumer use or any vessel." (CERCLA, Title I, Section 101, (9)).

Definition of Sitewide Ready for Anticipated Use (SWRAU): Where for the entire construction complete NPL site or Superfund Alternative Approach (SAA) site: All cleanup goals in the Record(s) of Decision or other remedy decision document(s) have been achieved for media that may affect current and reasonably anticipated future land uses of the site, so that there are no unacceptable risks; and all institutional or other controls required in the Record(s) of Decision or other remedy decision document(s) have been put in place.

The Human Exposure determination for sites that qualify for the Sitewide Ready-for-use measure should either be:

- "Current Human Exposure Controlled and Protective Remedy in Place"; or
- "Long-Term Human Health Protection Achieved"

In addition, all acreage at the site must be Ready for Anticipated Use (RAU) (i.e., the Superfund Remedial/Federal Facilities Response Universe Acres minus the total RAU Acres must be zero). Acreage information for SWRAU sites is tracked and reported at the end of each fiscal year. There are no acreage targets at this time.

For more information about the SWRAU performance measure, visit: <https://www.epa.gov/superfund-redevelopment-initiative/performance-measures-superfund-sites>

Also, see the most recent Superfund Program Implementation Manual (SPIM), which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here: <https://epa.gov/superfund/superfund-program-implementation-manual>

Definition of National Priorities List (NPL): Sites are listed on the National Priorities List (NPL) upon completion of Hazard Ranking System (HRS) screening, public solicitation of comments about the proposed site, and final placement of the site on the NPL after all comments have been addressed. The NPL primarily serves as an information and management tool. It is a part of the Superfund cleanup process and is updated periodically. Section 105(a)(8)(B) of CERCLA as amended, requires that the statutory criteria provided by the HRS be used to prepare a list of national priorities among the known releases or threatened releases of hazardous substances, pollutants, or contaminants throughout the United States. This list, which is Appendix B of the National Contingency Plan, is the NPL. Visit the HRS Toolbox (<http://www.epa.gov/superfund/hrs-toolbox> page for guidance documents that are used to determine if a site is a candidate for inclusion on the NPL.

Definition of Superfund Alternative Approach (SAA): When a liable Potential Responsible Party (PRP) demonstrates it is viable and cooperative, EPA regional offices, at their discretion, may enter into a SAA agreement with the PRP to facilitate the cleanup of a site. The SAA uses the same investigation and cleanup process and standards that are used for sites listed on the NPL. The SAA is generally the Agency's preferred enforcement approach for CERCLA non-NPL sites that are NPL-caliber, where feasible and appropriate. [Source: SPIM, <https://www.epa.gov/superfund/superfund-program-implementation-manual>

(Also see the most recent SPIM, which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here: <https://epa.gov/superfund/superfund-program-implementation-manual>

The Superfund Program's performance measures are used to demonstrate the agency's progress of site cleanup and reuse. Each measure marks a significant step in ensuring human health and environmental protection at Superfund sites.

References:

U.S. Environmental Protection Agency, EPA Performance and Accountability Reports, <https://www.epa.gov/planandbudget/results>

U.S. Environmental Protection Agency, Superfund Accomplishment and Performance Measures, <https://www.epa.gov/superfund/superfund-accomplishments-and-benefits>

U.S. Environmental Protection Agency, Federal Facilities Restoration and Reuse Office – Performance measures, <https://www.epa.gov/fedfac/federal-facilities-national-priority-list-measures-and-accomplishments>

U.S. Government Accountability Office, “Superfund Information on the Status of Sites, GAO/RCED-98-241”, <http://www.gao.gov/archive/1998/rc98241.pdf>

U.S. Environmental Protection Agency, Office of Superfund Remediation and Technology Innovation, Superfund Program Implementation Manuals (SPIM), <https://epa.gov/superfund/superfund-program-implementation-manual> (accessed July 30, 2009).

2a. Original Data Source:

Original data sources vary, and multiple data sources can be used for each site. Typical data sources are EPA personnel, contractors (directly to EPA or indirectly, through the interagency agreement recipient or cooperative agreement recipient), U.S. Army Corps of Engineers (interagency agreement recipient), and states/tribes/other political subdivisions (cooperative agreement recipients). EPA also collects data via pre-final inspections at sites.

(See item Performance Measure Term Definitions in Tab 1, for more information. Also, detailed information on requirements for source data and completion procedures can be found on the following Superfund website: <https://www.epa.gov/superfund/hrs-toolbox>

2b. Source Data Collection:

Collection mode varies, typically with multiple collection modes at each site. Collection typically involves some combination of environmental data collection, estimation and/or tabulation of records/activities. Documents such as risk assessments, Record of Decisions (RODs), Action Memoranda, Pollution Reports (POLREPS), Remedial Action (RA) Reports, Close-out Reports, Five-year Reviews, NPL Deletion/Partial Deletion Notices are known reliable sources of data and often provide the information necessary for making a SWRAU evaluation with reasonable certainty. Regions should also ensure consistency between the SWRAU determination, the All ICs Implemented indicator, and the HEUC environmental indicator.

The SWRAU baseline was established in 2006. Data were from FY 2007 and continues through FY 2017.

The Guidance and Checklist can be found at: <https://www.epa.gov/superfund-redevelopment-initiative/performance-measures-superfund-sites>

(See item Performance Measure Term Definitions, for more information and references.)

Source data collection frequency: On a regular basis with no set schedule, as the data are entered real-time. Varies by site.

Spatial Extent: National

Spatial detail: Site, defined in database by latitude/longitude pair.

2c. Source Data Reporting:

Collection mode varies, typically with multiple collection modes at each site. Collection typically involves some combination of environmental data collection, estimation and/or tabulation of records/activities. Documents such as risk assessments, RODs, Action Memoranda, POLREPS, RA Reports, Close-out Reports, Five-year Reviews, NPL Deletion/Partial Deletion Notices are known reliable sources of data and often provide the information necessary for making a SWRAU evaluation with reasonable certainty. Regions should also ensure consistency between the SWRAU determination, the All ICs Implemented indicator, and the HEUC environmental indicator.

SWRAU source data are entered in SEMS on a regular basis with no set schedule, as the data are entered real-time. However, status at a site is reviewed annually by the 10th working day in October, or at any time site conditions change. SEMS is to be updated within 10 days of any change in status.

The information is entered in SEMS in the Land Reuse Module. This module contains screens for entering and defining acreage data and the checklist, as well as setting the SWRAU status and applicable dates. Acreage information for SWRAU sites is tracked and reported at the end of each fiscal year. Acreage reported as part of the SWRAU measure should be consistent with CRPM reporting. There are no acreage targets at this time.

In addition to submitting information through SEMS, Regions are required to submit a Checklist to Headquarters documenting that the site has met the measure.

3a. Relevant Information Systems:

The SWRAU determination is made directly in SEMS once it is determined that the site meets all required criteria and has been approved as such by appropriate regional personnel. The SEMS data system meets all relevant EPA QA standards.

SEMS database – SEMS is EPA's primary database to store and report data for NPL and non-NPL Superfund sites. The Superfund Comprehensive Accomplishment Plan (SCAP) reports in SEMS are used to report progress on measures, including SWRAU.

(For more information about SEMS, see the most recent SPIM, which is updated each fiscal year and contains definitions and documentation/coding guidance for Superfund measures. The most current SPIM can be found here: <https://www.epa.gov/superfund/superfund-program-implementation-manual>

SEMS operation and further development is taking place under the following administrative control quality assurance procedures: 1) Office of Environmental Information Interim Agency Life Cycle Management Policy Agency Directive; 2) the Office of Land and Emergency Management (OLEM) Quality Management Plan (QMP); 3) EPA IT standards; 4) Quality Assurance Requirements in all contract vehicles under which SEMS is being developed and maintained; and 5) EPA IT security policies. In addition, specific controls are in place for system design, data conversion and data capture, as well as SEMS outputs.

OSWER Performance Assessment Tool (PAT). This tool serves as the primary external servicing resource for organizing and reporting OLEM's performance data, which collects information from OLEM program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from SEMS; replicates business logic used by SEMS for calculating measures; delivers that data to EPA staff and managers via a business intelligence dashboard interface for analytic and reporting use; and transmits data to the Budget Automated System (BAS).

PAT operates under the OLEM QMP. PAT has a security certification confirming that a security policy is not necessary because no sensitive data are handled and PAT is built upon the Oracle-based business intelligence system. PAT's security certification indicates that it follows all security guidelines for EPA's Oracle Portal and that PAT is (1) not defined as a "Major Application" according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 2.3.1; (2) does not store, process, or transmit information that the degree of sensitivity is assessed as high by considering the requirements for availability, integrity, and confidentiality according to NIST Special Publication 800-18, Guide for Developing

Security Plans for Information Technology Systems, section 3.7.2. (3) is not covered by EPA Order 2100.2A1 Information Technology Capital Planning and Investment Control (CPIC).

3b. Data Quality Procedures:

SEMS: To ensure data accuracy and control, the following administrative controls are in place: 1) SPIM, the program management manual that details what data must be reported; 2) Report Specifications, which are published for each report detailing how reported data are calculated; 3) Coding Guide, which contains technical instructions to data users including Regional Information Management Coordinators (IMCs), program personnel, data owners, and data entry personnel; 4) Quick Reference Guides (QRG), which are available in the SEMS Documents Database and provide detailed instructions on data entry for nearly every module in SEMS; 5) SCAP Reports within SEMS, which serve as a means to track, budget, plan, and evaluate progress towards meeting Superfund targets and measures; 6) a historical lockout feature in SEMS so that changes in past fiscal year data can be changed only by approved and designated personnel and are logged to a Change Log report, 7) the OLEM QMP; and 8) Regional Data Entry Control Plans.

EPA Headquarters has developed data quality audit reports and Standard Operating Procedures, which address timeliness, completeness, and accuracy, and has provided these reports to the Regions. In addition, as required by the Office of Management and Budget (OMB), SEMS audit logs are reviewed monthly.

Regional Data Entry Control Plans. Regions have established and published Data Entry Control Plans, which are a key component of SEMS verification/validation procedures. The control plans include: (1) regional policies and procedures for entering data into SEMS, (2) a review process to ensure that all Superfund accomplishments are supported by source documentation, (3) delegation of authorities for approval of data input into SEMS, and (4) procedures to ensure that reported accomplishments meet accomplishment definitions. In addition, regions document in their control plans the roles and responsibilities of key regional employees responsible for SEMS data (e.g., regional project manager, information management coordinator, supervisor, etc.), and the processes to assure that SEMS data are current, complete, consistent, and accurate. Regions may undertake centralized or decentralized approaches to data management. These plans are collected annually for review by OSRTI/IMB. [Source: SPIM FY17, Chapter IV:SEMS Data Management and Coding. <https://www.epa.gov/superfund/superfund-program-implementation-manual> Copies of the 2017 Regional Data Entry Control Plans are provided with this DQR. Current and past year plans are available by contacting the Chief, Information Management Branch, Office of Superfund Remediation and Technology Innovation.

Regions are expected to prepare Data Entry Control Plans consistent with the SPIM and the Headquarters guidance: "2017 SEMS Data Quality Control Plan Guidance," January 2017.

In addition to entering information into SEMS, Regions must also submit a Checklist for Reporting the SWRAU Government Performance and Results Act (GPRA) Measure to the headquarters data sponsor. The information provided in the Checklist can be used by Headquarters to ensure sites nominated for the measure conform to the same national best practices.

SWRAU is unique in that sites that cease to meet the measure can be retracted from the national total in the event they no longer meet the criteria. Sites that are retracted must submit a retraction form to Headquarters,

explaining the reason for the retractions. For more information, see Appendix A of the Guidance at: <http://www.epa.gov/superfund-redevelopment-initiative/performance-measures-superfund-sites>

Superfund Program Implementation Manual (SPIM). The Superfund Program Implementation Manual (SPIM) provides overarching program management priorities, procedures, and practices for the Superfund remedial, removal, enforcement, and Federal Facilities programs, providing the link between the Government Performance and Results Act (GPRA), EPA's Strategic Plan, and Superfund program internal processes. The SPIM provides standardized and common definitions for Superfund program accomplishments and processes for planning and tracking these accomplishments through program targets and measures.

The SPIM is part of EPA's internal control structure, and, as required by the Comptroller General of the United States through generally accepted accounting principles (GAAP) and auditing standards, this document defines program scope and schedule in relation to budget, and is used for audits and inspections by the Government Accountability Office (GAO) and the Office of the Inspector General (OIG). The SPIM is typically updated annually but may also be revised during the year as needed.

The SPIM is divided into thirteen separate chapters. Chapter I offers an introduction of Superfund along with descriptions of each of the Superfund programs and the Superfund Enterprise Management System (SEMS). Chapter II describes the Superfund program measures, budget and program planning, and reporting requirements. Chapter III describes the financial management mechanisms within the Superfund program and addresses resource management topics, financial vehicles for obligating resources, systems and tools that manage financial data, Superfund resource allocation procedures, Superfund State Contracts (SSCs), and special accounts. Chapter IV describes SEMS data elements, including codes used for targeting and reporting accomplishments, codes that describe specific budget sources and actions, and the 'Who Pays for What' chart. Chapter V describes the structure and key elements of the site-level information tracked for each Superfund site.

The next six chapters highlight program priorities and initiatives and provide detailed information on annual targets for GPRA performance measures and targets for Key Programmatic Measures for Superfund programmatic areas, and for the removal, remedial, enforcement, and Federal Facility programs. The chapters are given in the following order: Chapter VI: Remedial Site Assessment, Chapter VII: Removal Program, Chapter VIII: Remedial Program, Chapter IX: Federal Facility Program, Chapter X: Enforcement, and Chapter XI: Community Involvement.

The last two chapters of the SPIM are Chapter XII: Information Systems and Chapter XIII: Records and Information Management. Chapter XII describes the various modules of SEMS. Chapter XIII describes the process of documenting records and information in the SEMS Records Management module (SEMS-RM).

In addition, there are four appendices that provide supplemental information to the SPIM. Appendix A provides details on new and future data initiatives and data reporting requirements. Appendix B includes subject matter expert and data sponsor contact information for both Headquarters (HQ) and regional offices. Appendix C contains the most recent remedial program Work Planning Memo that identifies the scope and schedule of work planning activities and priorities. Appendix D describes in detail the provisions, reporting requirements, budget execution guidance and financial management as it relates to American Recovery and Reinvestment Act (ARRA). [Source: SPIM 2017, Chapter I]

The most current version of the SPIM can be found at: <https://www.epa.gov/superfund/superfund-program-implementation-manual>

Data Flow:

Step 1. Original data sources provide information.

Step 2. EPA Region reviews and determines SWRAU status at the site and adjusts SEMs records as needed.

Step 3. Headquarters' OSRTI data sponsor reviews and approves/disapproves Regional determinations of SWRAU using data from SEMs. Data sponsor works with Regional staff to ensure that determinations follow Superfund Program guidance. Regions must also submit a hard-copy checklist for all approved sites. The approved and most recent checklist to be used is located here: <https://semspub.epa.gov/work/HQ/500018226.pdf>
The date in SEMs and the signature date on the checklist must match.

Step 4. The OLEM's PAT pulls data from SEMs. Headquarters staff compare PAT results to SEMs results. If PAT does not match SEMs then there was an error with the upload and data are reloaded. Headquarters staff enter into PAT the Annual Commitment System (ACS) status information for each measure and, if necessary, a status explanation.

Step 5. Headquarters approves PAT results, and PAT pushes results into BAS.

Step 6. BAS aggregates Regional data into a national total. OSRTI reporting lead reviews and certifies results.

3c. Data Oversight:

The Superfund program has a "data sponsorship" approach to database oversight. Headquarters staff and managers take an active role in improving the quality of data stored in SEMs by acting as data sponsors. The data sponsor for SWRAU is available in Appendix B of SPIM . <https://www.epa.gov/superfund/superfund-program-implementation-manual>

Specific roles and responsibilities of data sponsors:

- Identify data needs
 - Oversee the process of entering data into the system;
 - Use data for reporting purposes;
 - Conduct periodic audit reports;
 - Provide definitions for data elements;
 - Promote consistency across the Superfund program;
 - Initiate changes in SEMs as the program changes;
 - Provide guidance requiring submittal of these data;
 - Support the development of requirements for electronic data submission; and
 - Ensure there is 'objective' evidence to support the accomplishment data in SEMs by identifying data requirements and checking to assure compliance by performing periodic reviews of a random SEMs data samples. (Objective Evidence Rule: 'All transactions must be supported by objective evidence, that is, documentation that a third party could examine and arrive at the same conclusion.')
- [Source: SPIM 2017, IV.B.2]

Measure-specific data sponsor information:

The Headquarter SEMS users responsible for the QA/QC of SWRAU data have primary source knowledge of program and site data used in the Superfund Program Implementation Manual (SPIM) and in SEMS. The data sponsor is responsible for:

- ensuring that the correct data enters the system on a real-time basis, as the program/site plans and accomplishments change.
- assuring procedures for determining that a site's SWRAU eligibility has been accomplished.
- flipping the special initiative flag in SEMS once a site is determined to be SWRAU, and running audit and confirmatory reports from SEMS to ensure the information is accurate and up to date.

The Project Manager for SEMS oversees and is the approving authority for quality-related SEMS processes, and is closely supported by a Contract Task Manager. (See the SEMS QAPP, attached, for more information.) The lead point of contact for information about the data from SEMS is the Director, Information Management and Data Quality Staff, Office of Solid Waste and Emergency Response.

Information Management Coordinators(IMCs). The IMC is a senior position which serves as regional lead for all Superfund program and SEMS data systems management activities. The following lead responsibilities for regional program planning and management rest with the IMC:

- Coordinate program planning, budget development, and reporting activities;
 - Ensure regional planning and accomplishments are complete, current, and consistent, and accurately reflected in SEMS by working with data sponsors and data owners;
 - Provide liaison to HQ on SCAP process and program review issues;
 - Provide liaison to regional management and data entry staff, as appropriate;
 - Coordinate regional reviews by HQ;
 - Ensure that the quality of SEMS data is such that accomplishments and planning data can be accurately retrieved from the system; and,
 - Ensure there is 'objective' evidence to support accomplishment data in SEMS. (Objective Evidence Rule: 'All transactions must be supported by objective evidence, that is, documentation that a third party could examine and arrive at the same conclusion.')
- [Source: SPIM 2017, IV-2]

The primary responsibilities of Data Owners are to (1) Enter and maintain data in SEMS, (2) Assume responsibility for complete, current, consistent, and accurate data and (3) Ensure there is 'objective' evidence to support accomplishment data in SEMS. (Objective Evidence Rule: 'All transactions must be supported by objective evidence, that is, documentation that a third party could examine and arrive at the same conclusion.'). The data owners for specific data are clearly identified in the system audit tables. Regions annually update region-specific Data Entry Control Plans (DECP). Among other things, Regional data entry control plans identify which Data Sponsors/Data Owners are responsible for different aspects of data entry. (See item 2e, Regions Have Standard Operating Procedures, for more information on Data Entry Control Plans.)

The Information Management Officer (IMO) & Director, Information Management and Data Quality Staff. Office of Land and Emergency Management is the lead point of contact for Superfund program and SEMS data systems management activities.

PAT Data Entry

The Annual Commitment System (ACS) Coordinator in OSRTI ensures that SEMS data for this measure are correctly loaded into PAT. The ACS Coordinator then works with the data sponsor to review uploaded data, edit records as appropriate, and then push data to ACS--part of the Office of Chief Financial Officer's (OCFO) BAS. PAT is maintained by OLEM's System Manager who ensures that the PAT system operates correctly, based on business logic agreed to by OSRTI.

3d. Calculation Methodology:

The performance measure is a specific variable entered into SEMS following specific coding guidance and corresponding supporting site-specific documentation.

The unit of measure is number of sites. The calculation includes NPL and SAA sites.

In addition, Cross Program Revitalization Measures (CPRM) acres are tracked in SEMS and any acreage designations should be consistent with the site's SWRAU status. If a site is SWRAU, all acreage at the site must be RAU (i.e., the Superfund Remedial/Federal Facilities Response Universe Acres minus the total RAU Acres must be zero).

References:

Superfund Data Element Dictionary. The DED provides definitions and descriptions of elements, tables and codes from the SEMS database used by the Superfund program. It also provides additional technical information for each entry, such as data type, field length and primary table. Using the DED, you can look up terms by table name or element name, or search the entire dictionary by keyword.

Other additional references that may be useful:

Coding Guide. The Superfund Coding Guide contains technical instructions to data users including Regional Information Management Coordinators (IMCs), program personnel, data owners, and data entry personnel. The Remedial component of the Coding Guide is attached to this record.

Quick Reference Guides (QRG). Superfund Quick Reference Guides are available in the SEMS Documents Database and provide detailed instructions on data entry for nearly every module in SEMS. Sample QRGs are available for entering data related to Remedial Action Starts.

Site Status and Description document: this is a Quick Reference Guide for SEMS users, for filling in information related to site status and description.

Attached Documents:

Site Status and Description.doc

4a. Oversight and Timing of Final Results Reporting:

Data Sponsor for SWRAU, Annual Commitment System (ACS) coordinator, and National Program Office (NPO) management.

Progress reporting is done quarterly as checks, while official numbers are reported annually.

4b. Data Limitations/Qualifications:

Sites that meet the SWRAU performance measure must also meet one of two Human Exposure Under Control (HEUC) performance measures:

- "Current Human Exposure Controlled and Protective Remedy in Place"; or
- "Long-Term Human Health Protection Achieved"

Specific to S10, if the HEUC changes to something other than the two environmental indicators, and will not be restored by the end of the fiscal year, Regions must retract a site from the SWRAU national total, and that retraction counts against the national target. Retractions are made when Regions determine that an entire site no longer meets the SWRAU criteria. Because SWRAU is counted as a "net" number on a yearly basis, a retraction is subtracted from that year's total number of SWRAU sites. If a Region retracts a site, the Region must still achieve its net SWRAU goal. For example, if a Region has a goal of achieving a SWRAU designation for 10 sites, but retracts two that year, the Region must identify 12 sites to meet the SWRAU target that year ($12 - 2 = 10$).

Based on experience dealing with sites to date, there are categories of sites that may not meet the SWRAU measure. Even sites that on the surface appear to not meet the measure may have circumstances that require additional consideration.

· Groundwater-only sites: Groundwater-only sites may not be able to achieve a SWRAU designation. However, if EPA has assessed the soil and surface contamination in a remedial investigation/feasibility study (RI/FS) and the surface area above the contaminated ground water is ready for its anticipated use, or if EPA performed removal actions that addressed all soil and other surface contamination, then the site may be eligible to be SWRAU. For groundwater sites that also have a vapor intrusion pathway, Regions should consider whether this pathway impacts current or future reasonably anticipated land uses.

· NPL sites addressed by state programs: NPL sites that have been delegated to the states to be addressed by state cleanup programs may not be able to achieve a SWRAU designation. However, if EPA issues a CERCLA decision document upon completion of the state response actions, documenting that the state has taken all appropriate actions and established O&M procedures, implemented all necessary ICs and conducted FYRs, as appropriate, to ensure protectiveness, then the site may be eligible to be SWRAU.

4c. Third-Party Audits:

For SEMS data: The GAO report, Superfund: Information on the Status of Sites (GAO/RCED-98-241), dated August 28, 1998, estimated that the cleanup status of National Priority List (NPL) sites reported by SEMS as of September 30, 1997, is accurate for 95 percent of the sites.

(www.gao.gov/archive/1998/rc98241.pdf Another OIG audit, Information Technology - Comprehensive Environmental Response, Compensation, and Liability Information System (CERCLIS) Data Quality (Report No. 2002-P-00016), dated September 30, 2002, evaluated the accuracy, completeness, timeliness, and consistency

of the data entered into CERCLIS. (See <http://www.epa.gov/oig/reports/2002/cerlcis.pdf> The report provided 11 recommendations to improve controls for CERCLIS data quality. EPA has either implemented or continues to implement these recommendations.

The IG also annually reviews the end-of-year SEM data, in an informal process, to verify data that supports the performance measures. Typically, there are no published results.

Annual EPA Office of Inspector General Audit/Report. The EPA OIG provides an annual report to Congress of the results of its audits of the Superfund Program. Those reports are available at: <https://www.epa.gov/office-inspector-general/oig-reports> The most recently available report is the FY 2016 report.

Measure Code: PCB - Number of approvals issued for polychlorinated biphenyl (PCB) cleanup, storage and disposal activities.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

2 - Preserve Land

Sub-Objective Number and Title:

2 - Minimize Releases of Hazardous Waste and Petroleum Products

Strategic Target Code and Title:

2 - Prevent exposures at PCB sites

Managing Office:

Office of Resource Conservation and Recovery

1a. Performance Measure Term Definitions:

Approval: The PCB regulations require that many cleanup and disposal activities receive EPA approval. These approvals cover many cleanup, storage, treatment, disposal, and decontamination activities outlined in 40 CFR Part 761. This performance measure captures approvals issued by EPA under the PCB cleanup and disposal program. <https://www.epa.gov/pcbs>

2a. Original Data Source:

EPA Regions and Headquarters issue approvals for PCB cleanup and disposal activities. The staff and management responsible for issuing these approvals will provide the data to EPA's Office of Resource Conservation and Recovery (ORCR). The program is not delegated to the States therefore all approvals will be issued from EPA. No external organizations will be responsible for transferring data to EPA.

2b. Source Data Collection:

EPA Regions and Headquarters issue approvals for PCB cleanup and disposal activities. The PCB program is not delegated to the states therefore all approvals will be issued from EPA Regions and HQ. No external organizations will be responsible for transferring data to EPA.

Each Regional program and ORCR will compile data for each approval issued for PCB cleanup and disposal activity. The staff and management in the program will confirm the data is accurate and complete before submitting their approval data to ORCR. ORCR will compile all of the Regional and HQ approvals issued and report the total number of approvals issued.

The geographical extent of this data could cover all 10 EPA regions, depending on where the approved PCB cleanup and disposal activity is located.

There will not be any spatial detail of source data. The measure is only determining the number of approvals issued.

2c. Source Data Reporting:

The data is originated by EPA. The data from each EPA Region will be submitted to ORCR.

The instrument the data will be submitted will be in the form of a spreadsheet. There is no EPA information system for this data at this time.

EPA staff (or management) will manually enter information about each approval issued for PCB cleanup and disposal activity in a spreadsheet.

The frequency of data transmission to EPA is based on when the approvals are issued. ORCR will collect approval data from the Regional programs at the end of each Fiscal Year in order to compile and report the national total number of PCB approvals issued.

3a. Relevant Information Systems:

ORCR is in the process of developing a national database to contain all regional and HQ approval information for tracking and reporting purposes. Until this database is in full operation, the regions will submit spreadsheet databases for their regional accomplishments, to be compiled by ORCR.

Source data will be submitted by EPA Regions and ORCR in a spreadsheet until the national database is completed.

EPA Regions and ORCR will be responsible for submitting accurate and complete data.

3b. Data Quality Procedures:

The Regional data is created and reviewed by the Regional program and then reviewed by ORCR to ensure data quality.

3c. Data Oversight:

EPA Regional PCB program personnel will be responsible for submitting Regional approvals data to ORCR. ORCR personnel will be responsible for submitting HQ approvals data and compiling all national data.

EPA Regional PCB program personnel will review and submit data to ORCR, which will review and compile. When the national approval database is complete, this data will be reported in the national database and quality checked by the Regions and HQ.

ORCR personnel will review and compile data submitted.

ORCR personnel will compile all approvals data to calculate final national totals for reporting purposes.

3d. Calculation Methodology:

The unit of measure is approvals. The results will be calculated by adding the number of approvals issued by both EPA Regions and HQ for PCB cleanup and disposal activities.

4a. Oversight and Timing of Final Results Reporting:

Project Manager/ ORCR/ Cleanup Programs Branch.

Results data are reviewed for accuracy and entered into the EPA's BAS.

Official results are reported annually.

4b. Data Limitations/Qualifications:

No limitations noted. The data are considered to be accurate on a regional and national scale.

4c. Third-Party Audits:

None.

Measure Code: 111 - Percent of confirmed releases pending cleanup completion at UST facilities.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

2 - Clean Up Contaminated Land

Strategic Target Code and Title:

6 - Through 2018, reduce the backlog of LUST cleanups

Managing Office:

Office of Underground Storage Tanks (OUST)

1a. Performance Measure Term Definitions:

The annual performance measure tracks progress toward narrowing the gap between the number of confirmed releases reported and the number of those releases that have been cleaned up. Reducing the number of releases pending cleanups (also known as the backlog) remains a priority for the national UST program. The Office of Underground Storage Tanks' performance measure definitions describe EPA's UST program measures including number of confirmed releases and number of cleanups completed. The percent of confirmed releases pending cleanup completion is the difference between these two measures compared with the cumulative number of confirmed releases (includes both confirmed releases pending cleanup and confirmed releases that have achieved cleanup completed).

Reference: UST and LUST Performance Measure Definitions, January 18, 2008; <https://www.epa.gov/ust/ust-performance-measures>

2a. Original Data Source:

The original data source is States, DC, and territories who are the primary implementers of the UST program and receive funding through Leaking Underground Storage Tank (LUST) cooperative agreements with EPA. Each EPA regional office manages work that occurs within regional boundaries & tracks data for Indian country. The data element is the percentage of sites with a confirmed release that have not achieved cleanup completed (i.e., the Backlog) divided by the cumulative number of confirmed releases.

2b. Source Data Collection:

Determination of cleanup completion by the implementing agency requires consideration of environmental data, such as field sampling, which can vary by project. The overall measure requires tabulation of the number of LUST clean-ups completed.

Spatial Detail: For States, activities are aggregated at the State level. They report "actions this period" as well as corrections to prior periods. Data for work in Indian country is aggregated at the Regional level.

Spatial Coverage: National

For cooperative agreements: Regional offices include quality assurance (QA) Terms and Conditions in their states' assistance agreement. Cooperative agreements (CAs) must be current and specify: QA roles and responsibilities for EPA and grantee recipients; and quality requirements including responsibilities for final review and approval. Default quality requirements include: organization-level QA documentation (i.e. quality management plan or QMP) for state agencies and primary contractors; and project-level quality assurance project plans (QAPPs) for each CA. In accordance with EPA's Uniform Administrative Requirements for Grants and Cooperative Agreements, 40 CFR Part 31.45, states must develop and implement quality assurance

practices. The regulation requires developing and implementing quality assurance practices that will "produce data of quality adequate to meet project objectives and to minimize loss of data to out of control conditions or malfunctions"; see LUST Trust Fund Corrective Action Cooperative Agreement Guidelines

<https://www.epa.gov/ust/leaking-underground-storage-tank-lust-trust-fund>

For contracts: EPA Regions determine which quality requirements are applicable. Contracts must be current and specify: QA roles and responsibilities for EPA and national LUST contractors; and quality requirements including responsibilities for final review and approval. Default quality requirements include: organization-level QA documentation (i.e., QMP) for the primary contractors; and project-level QAPPs for each Tribal LUST remedial Work Assignment. Sample EPA contract language: "the Contractor shall comply with the higher-level quality standard selected below: Specifications and Guidelines for Quality Systems for Environmental Data Collection and Environmental Technology Programs (ANSI/ASQC E4, 1994). As authorized by FAR 52.246-11, the higher-level quality standard ANSI/ASQC E4 is tailored as follows: The solicitation and contract require the offerors/contractor to demonstrate conformance to ANSI/ASQC E4 by submitting the quality documentation described below. The Contractor shall not commence actual field work until the Government has approved the quality documentation (i.e., QAPP)."

Note: Regions keep copies of individual QAPPs associated with cooperative agreements and contracts. Each EPA regional office manages its own state and tribal assistance agreements.

2c. Source Data Reporting:

States, Washington, DC and territories submit data directly into LUST4.

3a. Relevant Information Systems:

LUST4. This database is the master database of all aggregate LUST program-related data. States, Territories and EPA report data for activities and measures. LUST4 contains aggregate data from states as well as regions.

Oracle web-based system accessed through EPA's portal.

OLEM Performance Assessment Tool (PAT). This tool serves as the primary external servicing resource for organizing and reporting OLEM's performance data. PAT collects information from OLEM program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from LUST4; replicates business logic used by LUST4 for calculating measures; can deliver that data to EPA staff and managers via a business intelligence dashboard interface for analytic and reporting use; enables LUST point of contact to document status and provides explanation for each measure; and transmits data to the EPA's central budget and planning database, the Budget Automation System or BAS.

Budget Automation System (BAS). BAS is the final repository of the performance values.

3b. Data Quality Procedures:

EPA's regional grants project officers and regional program managers provide first-level data quality reviews and oversight of their recipients' program performance measure results.

OUST uses a combination of automated validation along with manual QA/QC review.

QA/QC REVIEW BY REGIONS. EPA/OUST oversees the use of the QA/QC checklist, which is incorporated into the LUST4 Oracle web-based system. Regions complete the QA/QC checklist, sign it electronically and submit it to EPA/OUST for review, comment and approval of each record.

NOTE: This QA/QC checklist was last updated 09/1/2014 and is accessed through the user interface of LUST4.

Regional QA/QC Evaluation Checklist –

Note: Checklist is to be completed by Regional reviewer and will appear “shaded” to others.

1. Previous Totals Column

-- Verify the previous total number is correct by comparing it to the total from the last reporting period. If there is a discrepancy, report the information in the “Correction to Previous Data” column. Please add comments in the “Comments” column for any corrections that are made to the applicable performance measure.

2. Actions This Reporting Period

For each performance measure, if this “Reported” number deviates by more than 10% from the last period’s number or appears otherwise questionable, complete the following actions:

-- Review the state’s explanation, if available.

-- If necessary, contact the state to obtain the corrected numbers and/or obtain a sufficient explanation and include the explanation in the “Comments” section for the applicable performance measure.

3. Corrections to Previous Data Column

Verify that if any corrections have been listed that an explanation for the correction is provided in the “Comments” column and complete the following actions: -- Verify and discuss the correction with the state if the correction is >10% or if the correction appears questionable (e.g., database conversions, database cleanup efforts to resolve misclassified data, duplicative records, etc.)

-- Verify if the corrections are anticipated to be a one-time event or occur over multiple years.

-- Evaluate if the corrections will impact other performance measures (e.g., if the number of cleanups completed is adjusted downward by a correction, does this also result in a commensurate downward adjustment of cleanups initiated?) Include any additional comments in the “Comments” column as necessary.

4. Totals (Cumulative, if applicable)

-- Verify accuracy of all cumulative totals

-- Include any additional comments in the “Comments” column as necessary

AUTOMATED VALIDATION.

EPA/OUST provides second-level data quality reviews of all data.

LUST4. LUST4 operates under OLEM's QMP, including the security policy specified in that QMP. LUST4 does not have any stand-alone certifications related to the EPA security policy or the Systems Life Cycle Management policy. The LUST4 system is built upon Oracle Business Intelligence tools provided by the EPA Business Intelligence Analytics Center, which ensures that a stand-alone security certification is not necessary.

PAT. PAT operates under the OLEM Quality Management Plan (QMP). PAT has a security certification confirming that a security policy is not necessary because no sensitive data are handled and PAT is built upon the Oracle-based business intelligence system. PAT's security certification indicates that it follows all security guidelines for EPA's Oracle Portal and that PAT is (1) not defined as a “Major Application” according to NIST Special Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 2.3.1; (2) does not store, process, or transmit information that the degree of sensitivity is assessed as high by considering the requirements for availability, integrity, and confidentiality according to NIST Special

Publication 800-18, Guide for Developing Security Plans for Information Technology Systems, section 3.7.2. (3) is not covered by EPA Order 2100.2A1 Information Technology Capital Planning and Investment Control (CPIC).

Data Flow:

Step 1. Performance measure data are entered into LUST4 by grant recipients (i.e., States or Territories) or by Regions (for Indian country).

Step 2. Each Region conducts Regional level review of data from the LUST4 system and approve or reject it. Rejected data must be edited by the original reporting entity. Approved data proceed to Step 3.

Step 3. Headquarters' staff perform review, using data from the LUST4 system and comparing it to past trends. Comment fields are reviewed to look for explanations of performance variations. Rejected data must be reviewed by the region and, if needed, edited (Step 2).

Step 4. PAT pulls data from LUST4. Headquarters staff compare PAT results to LUST4 results. If PAT does not match LUST4 then there was an error with the upload and data is reloaded. Headquarters staff enter into PAT the ACS status information of "Indicator" for each measure and, if desired, explanation. (Note: PAT allows for programs to identify status other than "Indicator." When programs select a status of "no status," "data not available," or "target not met," PAT requires that an explanation be provided. LUST program policy is to resolve all reporting issues prior to ACS reporting, so "Indicator" is the only status chosen and explanations for that status are optional.)

Step 5. Headquarters approves PAT results, and PAT pushes results into BAS.

Step 6. BAS aggregates Regional data into a national total. OUST reporting lead reviews and certifies results.

3c. Data Oversight:

An EPA Headquarters primary contact maintains a list of the HQ (OUST and OEI), Regional and state/territory primary and backup users; a record of changes to the list is also maintained. The primary HQ contact ensures that Regional reporting is on track, conducts QA on LUST performance measures, ensures QA issues are resolved and/or documented, and oversees final reporting to BAS.

Regional Program Managers are ultimately responsible for regional-level data. They conduct their review based upon a national QA/QC checklist.

Source Data Reporting Oversight Personnel: LUST4 System Manager, OUST

Information Systems Oversight Personnel: LUST4 System Manager, OUST

3d. Calculation Methodology:

The data elements are the percentage of sites with a confirmed release that have not reached cleanup completed (i.e., the Backlog) divided by the cumulative number of confirmed releases.

4a. Oversight and Timing of Final Results Reporting:

Reporting Oversight Personnel:

Semiannual by the Office Director, OUST

4b. Data Limitations/Qualifications:

Data quality depends on the accuracy and completeness of state records.

4c. Third-Party Audits:

Not applicable

Measure Code: CA6 - Cumulative percentage of RCRA facilities with corrective action performance standards attained.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

2 - Clean Up Contaminated Land

Strategic Target Code and Title:

5 - Increase percentage of RCRA facilities with corrective action performance standards attained

Managing Office:

Office of Resource Conservation and Recovery

1a. Performance Measure Term Definitions:

This performance measure captures additional cleanup progress being made at Corrective Action facilities as measured against the 2020 RCRA Corrective Action Baseline. The term Performance Standards Attained is used to indicate facilities that have met their cleanup standards (e.g., cleanup is complete). <https://www.epa.gov/hw/learn-about-corrective-action>

2a. Original Data Source:

EPA Regions and authorized States make these determinations and will be the source of the original data. No external organizations will be responsible for transferring data to EPA.

2b. Source Data Collection:

EPA Regions and authorized States will be collecting this information for each determination. No external organizations will be responsible for transferring data to EPA.

Each Regional and authorized state program will collect data for each facility that meets this performance measure. The staff and management in the programs will confirm the data is accurate and complete before entering the decision into the national RCRAInfo database. The Office of Resource Conservation and Recovery (ORCR) will query the data from RCRAInfo and report the total number accomplishments.

The geographical extent of this data could cover all EPA regions and all States, depending on where the facility is located. There are RCRA Corrective Action facilities located across the country.

There will not be any spatial detail of source data.

2c. Source Data Reporting:

The data is originated by EPA and authorized States. The data from each EPA Region and State will be entered into the RCRAInfo system.

The instrument into which the data will be submitted will be in the form of the national RCRAInfo database.

EPA & State staff (or management) will enter information about each accomplishment into the specific facility's record in RCRAInfo.

The frequency of data transmission to EPA is based on when the information is entered into RCRAInfo. ORCR will query the data from RCRAInfo at the end of each fiscal year in order to compile and report the national total number of RCRA facilities with corrective action performance standards attained.

3a. Relevant Information Systems:

System Description: RCRAInfo is a national database used by EPA and the States - <https://rcrainfo.epa.gov/> It is a fully supported database that houses data on RCRA facilities included Corrective Action data. Progress of the new measure will be tracked using this system.

Source/Transformed Data: Source data will be entered into RCRAInfo by EPA Regions and States.

Information System Integrity Standards: EPA Regions and States are responsible for entering accurate and complete data.

3b. Data Quality Procedures:

The data is entered and reviewed for each decision by the appropriate EPA Region or State. Data is reviewed by lead program staff in the Program Implementation and Information Division (PIID) and by ORCR program managers prior to the reporting of national progress, to ensure consistent data quality.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Waste management program staff in EPA Regions and States are responsible for entering accurate and complete data consistent with internal program data standards.

Source Data Reporting Oversight Responsibilities: EPA Regions and States are responsible for entering accurate and complete data. Data is reviewed by the Program Implementation and Information Division (PIID) in ORCR prior to the reporting of national progress, to ensure consistent national data quality.

Information Systems Oversight Personnel: The RCRAInfo database (version 5) is maintained by the Information Collection and Analysis Branch (ICAB) staff at EPA headquarters and supported in the Regions and States.

Information Systems Oversight Responsibilities: The RCRAInfo database is maintained by the Information Collection and Analysis Branch (ICAB) staff at EPA headquarters and supported in the Regions and States. RCRAInfo system features and improvements are either coded directly by ICAB or done by contractors overseen by ICAB.

3d. Calculation Methodology:

Units: Percent of RCRA facilities with corrective action performance standards attained. This will be calculated by the percentage of facilities on the Corrective Action 2020 Baseline with performance standards attained.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: ORCR Program Implementation and Information Division (PIID) data analysts will report final results.

Final Reporting Oversight Responsibilities: Will rely on Regions and States to enter accurate data into RCRAInfo.

Final Reporting Timing: ORCR PIID data analysts will report national totals at the end of each fiscal year.

4b. Data Limitations/Qualifications:

The data are considered to be accurate on a state, regional, and national scale.

4c. Third-Party Audits:

None.

Measure Code: 137 - Number of Superfund removals completed.

Office of Land and Emergency Management (OLEM)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

3 - Restore Land

Sub-Objective Number and Title:

1 - Emergency Preparedness and Response

Strategic Target Code and Title:

2 - By 2018, complete an additional 1,700 Superfund removals through Agency-financed actions

Managing Office:

Office of Emergency Management

1a. Performance Measure Term Definitions:

Superfund or CERCLA: The Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA) is a United States federal law designed to clean-up sites contaminated with hazardous substances as well as broadly defined pollutants or contaminants. Superfund also gives authority to federal natural resource agencies, states and Native American tribes to recover natural resource damages caused by releases of hazardous substances.

Potentially Responsible Party (PRP): The Superfund law imposes liability on parties responsible for, in whole or in part, the presence of hazardous substances at a site. There are four classes of liable parties that may perform removal actions, including:

- Current Owners / Operator. Although this class of liable party excludes property acquired through foreclosure or a security interest, it includes current owners even if they made no contribution to the hazardous release.
- Past Owner / Operator at time the pollution occurred.
- Arrangers or person who arranged for disposal of a hazardous substance at a site.
- Transporters or person who transported a hazardous substance to the site.

Removal or Removal Action: Short-term actions authorized by CERCLA, these may be taken to address releases or threat of release that require a prompt response.

Completed: Documentation of the date of demobilization from the site when all work associated with the removal action has been completed.

2a. Original Data Source:

Original data sources vary, and multiple data sources can be used for each site. Typical data sources are EPA personnel or contractors (directly to EPA or indirectly, through the interagency agreement recipient or cooperative agreement recipient)

Data are generated by EPA On-Scene Coordinators (OSCs) or their contractors and entered by the Regional Information Management Coordinator (or designee).

2b. Source Data Collection:

Collection typically involves some combination of environmental data collection, estimation and/or tabulation of records/activities. Documents such as Action Memoranda and Pollution Reports (POLREPS) are known reliable sources of data and often provide the information necessary for completing a removal action. Data

requirements are referenced in Chapter 7 of the Superfund Program Implementation Manual (SPIM), which can be found at <http://www.epa.gov/superfund/superfund-program-implementation-manual>

2c. Source Data Reporting:

Data Submission Instrument: Data submission and data entry are handled via the Superfund Enterprise Management System or SEMS (the SEMS portal can found at <http://sems.epa.gov/>)

Data Entry Mechanism: Data are entered by EPA personnel (Information Management Coordinator or designee) in the Regions.

Frequency of Data Transmission to EPA: Data are entered for each removal action completion.

Timing of Data Transmission to EPA: Data are typically entered when a removal action is initiated and after it is completed as documented in the final POLREP.

3a. Relevant Information Systems:

System Description: Two main systems are used for removal action completion data entry and reporting:

Superfund Enterprise Management System (SEMS): SEMS is a Superfund specific database that houses site- and non-site specific data including the financial planning data that are used by program managers to monitor resource needs and uses. SEMS contains various screens and reports, generated from the Oracle Business Intelligence Reporting tool that support program planning and performance.

Source/Transformed Data: The data in the system are source data about the clean-up site. Required data for removal completions include the following:

- Removal Work Package Name and Sequence Number
- Performance Lead
- Response Type (Critical Indicator)
- Start Date
- Completion Date
- Media Name
- Media Type
- NPL/Non-NPL
- Site Type / Subtype
- Volume
- Contaminants
- Contaminants of Concern

OLEM Performance Assessment Tool (PAT): This tool serves as the primary external servicing resource for organizing and reporting OLEM performance data, which collects information from OLEM program systems, and conforms it for uniform reporting and data provisioning. PAT captures data from SEMS; replicates business logic used by SEMS for calculating measure results; delivers that data to EPA staff and managers via a business intelligence dashboard interface for analytic and reporting use; and transmits data to the Budget Automated System (BAS). No current system specifications document is currently available for PAT, but will be provided when available.

Information System Integrity Standards: SEMS operation and further development is taking place under the following administrative control quality assurance procedures: 1) Office of Environmental Information Interim Agency Life Cycle Management Policy Agency Directive; 2) the Office of Land and Emergency Management (OLEM) Quality Management Plan (QMP); 3) EPA IT standards; 4) Quality Assurance Requirements in all contract vehicles under which CERCLIS is being developed and maintained; and 5) EPA IT security policies. In addition, specific controls are in place for system design, data conversion and data capture, as well as CERCLIS outputs.

3b. Data Quality Procedures:

Data entry and data quality procedures are detailed in the SPIM at <http://www.epa.gov/superfund/superfund-program-implementation-manual> Procedures specific to the Emergency Response and Removal program are detailed in Chapter 7. EPA and the Regions follow these procedures and verify data for quality and completeness on a regular basis

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

- HQ Project Manager: Office of Emergency Management – Resources Management Division & Preparedness and Response Operations Division
- HQ Project Support: Office of Emergency Management – Resources Management Division & Preparedness and Response Operations Division
- Regional Removal Program Managers, OSCs and IMCs.

Source Data Reporting Oversight Responsibilities:

- Ensure Accuracy of source data entered into SEMS through manual QA/QC and data quality checks built into the application.

Information Systems Oversight Personnel:

- HQ Project Manager: Office of Emergency Management – Resources Management Division & Preparedness and Response Operations Division
- HQ Project Support: Office of Emergency Management – Resources Management Division & Preparedness and Response Operations Division

Information Systems Oversight Responsibilities:

- QA / QC Regional data

3d. Calculation Methodology:

Decision Rules for Selecting Data: Removal actions are documented as complete in the final POLREP for each action. If a removal action is completed within the fiscal year at a non-federal facility site, it is counted in the measure.

Definitions of Variables: Since the measure is a simple count of actions completed, there are no variables in the calculation.

Explanation of Calculations: The measure is a simple count of the number of removal actions completed in a given fiscal year.

The Unit of Measure: The unit of measure is removal actions completed.

There are no Assumptions for the measure.

The Timeframe is the given fiscal year.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

- HQ Project Manager: Office of Emergency Management – Resources Management Division & Preparedness and Response Operations Division
- HQ Project Support: Office of Emergency Management – Resources Management Division & Preparedness and Response Operations Division
- HQ Results Reporting Support: Office of Emergency Management - Resources Management Division & Preparedness and Response Operations Division

Final Reporting Oversight Responsibilities:

- Ensure Accuracy of source data entered into SEMS through manual QA/QC and data quality checks built into the database and manual checks of data generated through reports.
- Confirm final results with Regional program managers
- Enter final performance result into Annual Commitment System (in BAS)

Final Reporting Timing: The final number of removal completions for the current FY is included in OLEM reporting activities for the Government Performance and Results Act.

4b. Data Limitations/Qualifications:

EPA has not identified any systematic limitations, qualifications or lag to the data beyond typical data entry and user error.

4c. Third-Party Audits:

Annual EPA Office of Inspector General (OIG) Audit/Report. The EPA OIG provides an annual report to Congress of the results of its audits of the Superfund Program. Those reports are available at:

<https://www.epa.gov/office-inspector-general/oig-reports>

The IG annually reviews the end-of-year CERCLIS data, in an informal process, to verify data that supports the performance measures. Typically, there are no published results.

Office of Research and Development (ORD) Record(s)

Measure Code: SW1 - Percentage of planned research products completed on time by the Safe and Sustainable Water Resources research program.

Office of Research and Development (ORD)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Program Accountability and Resource Management- Planning; Budget and Performance Analysis Branch

1a. Performance Measure Term Definitions:

A research product is "a deliverable that results from a specific research project or task. Research products may require translation or synthesis before integration into an output ready for partner use."

This secondary performance measure tracks the timely completion of research products.

Sustainability Research Strategy, available from: <http://epa.gov/sciencematters/april2011/truenorth.htm>

http://www.epa.gov/risk_assessment/health-risk.htm

2a. Original Data Source:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the research program. The actual product completion date is self-reported.

2b. Source Data Collection:

Each output is assigned to a Lab or Center representative before the start of the fiscal year. This individual provides quarterly status updates via ORD's Resource Management System. Status reports are reviewed by senior management, including the Lab or Center Director and National Program Director. Overall status data is generated and reviewed by ORD's Office of Program Accountability and Resource Management.

2c. Source Data Reporting:

Quarterly status updates are provided via ORD's Resource Management System.

3a. Relevant Information Systems:

Internal database or internal tracking system such as the Resources Management System (RMS).

3b. Data Quality Procedures:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the program.

3c. Data Oversight:

The National Program Director oversees the source data reporting, specifically, the process of establishing agreement with program stakeholders and senior ORD managers on the list and content of the planned products, and subsequent progress, completion, and delivery of these products.

3d. Calculation Methodology:

At the end of the fiscal year, outputs are either classified as "met" or "not met". An overall percentage of planned products met by the program is reported.

4a. Oversight and Timing of Final Results Reporting:

The Office of Program Accountability and Resource Management is responsible for reporting program progress in meeting its target of completion of 100% of program planned products.

4b. Data Limitations/Qualifications:

This measure does not capture directly the quality or impact of the research products.

4c. Third-Party Audits:

Not applicable

Measure Code: HS1 - Percentage of planned research products completed on time by the Homeland Security research program.

Office of Research and Development (ORD)

Goal Number and Title:

0 -

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Program Accountability and Resource Management- Planning; Budget and Performance Analysis Branch

1a. Performance Measure Term Definitions:

A research product is “a deliverable that results from a specific research project or task. Research products may require translation or synthesis before integration into an output ready for partner use.”

This secondary performance measure tracks the timely completion of research products.

Sustainability Research Strategy, available from:

<http://epa.gov/sciencematters/april2011/truenorth.htm>

http://www.epa.gov/risk_assessment/health-risk.htm

2a. Original Data Source:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the research program. The actual product completion date is self-reported.

2b. Source Data Collection:

Each output is assigned to a Lab or Center representative before the start of the fiscal year. This individual provides quarterly status updates via ORD's Resource Management System. Status reports are reviewed by senior management, including the Lab or Center Director and National Program Director. Overall status data is generated and reviewed by ORD's Office of Program Accountability and Resource Management.

2c. Source Data Reporting:

Quarterly status updates are provided via ORD's Resource Management System.

3a. Relevant Information Systems:

Internal database or internal tracking system such as the Resources Management System (RMS).

3b. Data Quality Procedures:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the program.

3c. Data Oversight:

The National Program Director oversees the source data reporting, specifically, the process of establishing agreement with program stakeholders and senior ORD managers on the list and content of the planned products, and subsequent progress, completion, and delivery of these products.

3d. Calculation Methodology:

At the end of the fiscal year, outputs are either classified as "met" or "not met". An overall percentage of planned products met by the program is reported.

4a. Oversight and Timing of Final Results Reporting:

The Office of Program Accountability and Resource Management is responsible for reporting program progress in meeting its target of completion of 100% of program planned products.

4b. Data Limitations/Qualifications:

This measure does not capture directly the quality or impact of the research products.

4c. Third-Party Audits:

Not applicable

Measure Code: RA1 - Percentage of planned research products completed on time by the Human Health Risk Assessment research program.

Office of Research and Development (ORD)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Program Accountability and Resource Management- Planning; Budget and Performance Analysis Branch

1a. Performance Measure Term Definitions:

A research product is “a deliverable that results from a specific research project or task. Research products may require translation or synthesis before integration into an output ready for partner use.”

This secondary performance measure tracks the timely completion of research products.

Sustainability Research Strategy, available from: <http://epa.gov/sciencematters/april2011/truenorth.htm>

http://www.epa.gov/risk_assessment/health-risk.htm

2a. Original Data Source:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the research program. The actual product completion date is self-reported.

2b. Source Data Collection:

Each output is assigned to a Lab or Center representative before the start of the fiscal year. This individual provides quarterly status updates via ORD's Resource Management System. Status reports are reviewed by senior management, including the Lab or Center Director and National Program Director. Overall status data is generated and reviewed by ORD's Office of Program Accountability and Resource Management.

2c. Source Data Reporting:

Quarterly status updates are provided via ORD's Resource Management System.

3a. Relevant Information Systems:

Internal database or internal tracking system such as the Resources Management System (RMS).

3b. Data Quality Procedures:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the program.

3c. Data Oversight:

The National Program Director oversees the source data reporting, specifically, the process of establishing agreement with program stakeholders and senior ORD managers on the list and content of the planned products, and subsequent progress, completion, and delivery of these products.

3d. Calculation Methodology:

At the end of the fiscal year, outputs are either classified as "met" or "not met". An overall percentage of planned products met by the program is reported.

4a. Oversight and Timing of Final Results Reporting:

The Office of Program Accountability and Resource Management is responsible for reporting program progress in meeting its target of completion of 100% of program planned products.

4b. Data Limitations/Qualifications:

This measure does not capture directly the quality or impact of the research products.

4c. Third-Party Audits:

Not applicable

Measure Code: CS1 - Percentage of planned research products completed on time by the Chemical Safety for Sustainability research program.

Office of Research and Development (ORD)

Goal Number and Title:

4 - Ensuring the Safety of Chemicals and Preventing Pollution

Objective Number and Title:

1 - Ensure Chemical Safety

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Program Accountability and Resource Management- Planning; Budget and Performance Analysis Branch

1a. Performance Measure Term Definitions:

A research product is "a deliverable that results from a specific research project or task. Research products may require translation or synthesis before integration into an output ready for partner use."

This secondary performance measure tracks the timely completion of research products.

Sustainability Research Strategy, available from:

<http://epa.gov/sciencematters/april2011/truenorth.htm>

http://www.epa.gov/risk_assessment/health-risk.htm

2a. Original Data Source:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the research program. The actual product completion date is self-reported.

2b. Source Data Collection:

Each output is assigned to a Lab or Center representative before the start of the fiscal year. This individual provides quarterly status updates via ORD's Resource Management System. Status reports are reviewed by senior management, including the Lab or Center Director and National Program Director. Overall status data is generated and reviewed by ORD's Office of Program Accountability and Resource Management.

2c. Source Data Reporting:

Quarterly status updates are provided via ORD's Resource Management System.

3a. Relevant Information Systems:

Internal database or internal tracking system such as the Resources Management System (RMS).

3b. Data Quality Procedures:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the program.

3c. Data Oversight:

The National Program Director oversees the source data reporting, specifically, the process of establishing agreement with program stakeholders and senior ORD managers on the list and content of the planned products, and subsequent progress, completion, and delivery of these products.

3d. Calculation Methodology:

At the end of the fiscal year, outputs are either classified as "met" or "not met". An overall percentage of planned products met by the program is reported.

4a. Oversight and Timing of Final Results Reporting:

The Office of Program Accountability and Resource Management is responsible for reporting program progress in meeting its target of completion of 100% of program planned products.

4b. Data Limitations/Qualifications:

This measure does not capture directly the quality or impact of the research products.

4c. Third-Party Audits:

Not applicable

Measure Code: HC1 - Percentage of planned research products completed on time by the Safe and Healthy Communities research program.

Office of Research and Development (ORD)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Program Accountability and Resource Management- Planning; Budget and Performance Analysis Branch

1a. Performance Measure Term Definitions:

A research product is "a deliverable that results from a specific research project or task. Research products may require translation or synthesis before integration into an output ready for partner use."

This secondary performance measure tracks the timely completion of research products.

Sustainability Research Strategy, available from: <http://epa.gov/sciencematters/april2011/truenorth.htm>

http://www.epa.gov/risk_assessment/health-risk.htm

2a. Original Data Source:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the research program. The actual product completion date is self-reported.

2b. Source Data Collection:

Each output is assigned to a Lab or Center representative before the start of the fiscal year. This individual provides quarterly status updates via ORD's Resource Management System. Status reports are reviewed by senior management, including the Lab or Center Director and National Program Director. Overall status data is generated and reviewed by ORD's Office of Program Accountability and Resource Management.

2c. Source Data Reporting:

Quarterly status updates are provided via ORD's Resource Management System.

3a. Relevant Information Systems:

Internal database or internal tracking system such as the Resources Management System (RMS).

3b. Data Quality Procedures:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the program.

3c. Data Oversight:

The National Program Director oversees the source data reporting, specifically, the process of establishing agreement with program stakeholders and senior ORD managers on the list and content of the planned products, and subsequent progress, completion, and delivery of these products.

3d. Calculation Methodology:

At the end of the fiscal year, outputs are either classified as "met" or "not met". An overall percentage of planned products met by the program is reported.

4a. Oversight and Timing of Final Results Reporting:

The Office of Program Accountability and Resource Management is responsible for reporting program progress in meeting its target of completion of 100% of program planned products.

4b. Data Limitations/Qualifications:

This measure does not capture directly the quality or impact of the research products.

4c. Third-Party Audits:

Not applicable

Measure Code: AC1 - Percentage of products completed on time by Air, Climate, and Energy research program.

Office of Research and Development (ORD)

Goal Number and Title:

1 - Addressing Climate Change and Improving Air Quality

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Program Accountability and Resource Management- Planning; Budget and Performance Analysis Branch

1a. Performance Measure Term Definitions:

A research product is "a deliverable that results from a specific research project or task. Research products may require translation or synthesis before integration into an output ready for partner use."

This secondary performance measure tracks the timely completion of research products.

Sustainability Research Strategy, available from: <http://epa.gov/sciencematters/april2011/truenorth.htm>

http://www.epa.gov/risk_assessment/health-risk.htm

2a. Original Data Source:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the research program. The actual product completion date is self-reported.

2b. Source Data Collection:

Each output is assigned to a Lab or Center representative before the start of the fiscal year. This individual provides quarterly status updates via ORD's Resource Management System. Status reports are reviewed by senior management, including the Lab or Center Director and National Program Director. Overall status data is generated and reviewed by ORD's Office of Program Accountability and Resource Management.

2c. Source Data Reporting:

Quarterly status updates are provided via ORD's Resource Management System.

3a. Relevant Information Systems:

Internal database or internal tracking system such as the Resources Management System (RMS).

3b. Data Quality Procedures:

EPA and its partners confirm the schedule for completing research outputs and products that are transformed or synthesized into outputs. ORD tracks progress toward delivering the outputs; clients are notified of progress. Scheduled milestones are compared to actual progress on a quarterly basis. At the end of the fiscal

year, outputs are either classified as "met" or "not met" to determine the overall percentage of planned products that have been met by the ACE program.

3c. Data Oversight:

The National Program Director oversees the source data reporting, specifically, the process of establishing agreement with program stakeholders and senior ORD managers on the list and content of the planned products, and subsequent progress, completion, and delivery of these products.

3d. Calculation Methodology:

At the end of the fiscal year, outputs are either classified as "met" or "not met". An overall percentage of planned products met by the ACE program is reported.

4a. Oversight and Timing of Final Results Reporting:

The Office of Program Accountability and Resource Management is responsible for reporting program progress in meeting its target of completion of 100% of Ace, Climate, and Energy program planned products.

4b. Data Limitations/Qualifications:

This measure does not capture directly the quality or impact of the research products.

4c. Third-Party Audits:

Not applicable

Measure Code: HC1 - Percentage of planned research products completed on time by the Sustainable and Healthy Communities research program.

Office of Research and Development (ORD)

Goal Number and Title:

3 - Cleaning Up Communities and Advancing Sustainable Development

Objective Number and Title:

0 -

Sub-Objective Number and Title:

0 -

Strategic Target Code and Title:

0 -

Managing Office:

Office of Pollution Prevention and Toxics

1a. Performance Measure Term Definitions:

Hazard characterizations: "Hazard characterizations" refers to Screening Level Hazard Characterization Reports prepared by EPA staff based on information submitted by the companies that make the chemicals, as well as on data identified from a targeted search of publicly available sources of information specifically relevant to characterizing hazards.

Completed: Screening Level Hazard Characterization Reports are deemed "completed" once they are deemed by senior Agency scientists and OPPT management to be suitable for posting on the program's website. In order for reports to be completed, the source Screening Information Data Set data submissions must be judged by the Agency to be adequate.

HPV chemicals: High Production Volume chemicals produced or imported in the United States in quantities of 1 million pounds or more per year.

Background:

- EPA's High Production Volume Challenge (HPV Challenge) program has inspired chemical manufacturers and users to deliver health and environmental effects data on many of the most heavily used chemicals in U.S. commerce to the agency. More information is available at: <http://www.epa.gov/hpv/>
- EPA is investigating the hazard characteristics of heavily used chemicals in conjunction with the Organization for Economic Cooperation and Development (OECD). The OECD's criteria for including chemicals in its Screening Information Data Sets (SIDS) program are production in one OECD Member country in quantities above 10,000 metric tons (22 million lbs) per annum or above 1,000 metric tons (2.2 million lbs) in two or more OECD countries. More information is available at <http://www.epa.gov/opptintr/sids/pubs/overview.htm>

Screening Level Hazard Characterization Reports are supplemented and aligned twice a year with the international database of chemicals sponsored internationally through Screening Information Data Sets (SIDS) Initial Assessment Meetings. Hazard characterizations are made publicly available through OPPT's High Production Volume Information System (HPVIS): <http://www.epa.gov/hpvis/>

2a. Original Data Source:

Submissions from chemical sponsors, for both U.S. HPVs and international Screening Information Data Sets (SIDS) chemicals.

2b. Source Data Collection:

Tabulation of records or activities: Screening Level Hazard Characterization Reports are prepared by EPA staff based on submissions from chemical sponsors and are reviewed by senior scientists and management to determine whether they are complete. Each screening level hazard characterization document represents a thorough review by qualified EPA personnel of the information provided by the submitter, as well as other targeted sources of information. For more information about sources utilized, please visit:

<http://www.epa.gov/hpvis/hazardinfo.htm>

This measure analyzes and supplements data received through EPA's High Production Volume (HPV) challenge, the EPA program that has inspired companies to deliver health and environmental effects data on many of the most heavily used chemicals in U.S. commerce to the agency. An assessment of adequacy is made for HPV chemicals, defined as approximately 2,450 chemicals (1400 US Sponsored chemicals, 850 International sponsored chemicals, and 200 Original Organization for Economic Cooperation and Development (OECD) SIDS Initial Assessment Reports (SIARs)). The measure is a count of completed reports from all of these sources, which are then posted on EPA's website. <http://www.epa.gov/hpvis/abouthc.htm>

EPA QA requirements/guidance governing collection: OPPT has in place a signed Quality Management Plan (Quality Management Plan for the Office of Pollution Prevention and Toxics; Office of Prevention, Pesticides and Toxic Substances, November 2008).

2c. Source Data Reporting:

Form/mechanism for receiving data and entering into EPA system: EPA staff complete Screening Level Hazard Characterization Reports based on submissions from chemical sponsors.

Once a report is completed, as determined by senior scientist and management review, an internal reporting spreadsheet called HPV HC Tracking Data is updated with the chemical name and date of completion. The HPV tracking system is updated by EPA staff upon posting of final documents to the EPA web site at the end of each quarter. The number of chemicals reviewed and posted is then recorded in the internal reporting spreadsheet.

Timing and frequency of reporting: As new HCs are posted at the end of each quarter, the number of chemicals posted is recorded in the internal tracking spreadsheet.

3a. Relevant Information Systems:

EPA uses a reporting spreadsheet called HPV HC Tracking Data to track the number of completed Screening Level Hazard Characterization Reports. There are no transformed data in this spreadsheet as this is a simple tracking measure.

3b. Data Quality Procedures:

Not Available

3c. Data Oversight:

Branch Chief, Planning and Assessment Branch

3d. Calculation Methodology:

The performance result is simply a count of Screening Level Hazard Characterization Reports completed by EPA either quarterly or over the fiscal year.

4a. Oversight and Timing of Final Results Reporting:

Planning and Accountability Lead in the Resource Management Staff in the Office of Program Management Operations. Reporting semiannually: mid-year and end-of-year.

4b. Data Limitations/Qualifications:

Not Available

4c. Third-Party Audits:

Recent GAO reviews found that EPA does not routinely assess the risks of all existing chemicals and faces challenges in obtaining the information necessary to do so. EPA has taken several steps to respond to these reviews including more aggressive efforts to collect data, continued efforts to assess data through hazard characterizations, and increased emphasis on risk management activities for chemicals of concern.

GAO-05-458: Chemical Regulation: Options Exist to Improve EPA's Ability to Assess Health Risks and Manage Its Chemical Review Program, June 2005.

GAO-06-1032T: Chemical Regulation: Actions Are Needed to Improve the Effectiveness of EPA's Chemical Review Program, August 2006.

GAO-09-271: High Risk Series-An update. Transforming EPA's Processes for Assessing and Controlling Toxic Chemicals, January 2009.

Office of Water (OW) Record(s)

Measure Code: dw2 - Percent of person months during which community water systems provide drinking water that meets all applicable health-based standards.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

1 - Protect Human Health

Sub-Objective Number and Title:

1 - Water Safe to Drink

Strategic Target Code and Title:

1 - By 2018, provide drinking water that meets applicable health-based drinking standards for communities

Managing Office:

Office of Ground Water and Drinking Water

1a. Performance Measure Term Definitions:

Community water systems --The U.S. Environmental Protection Agency (EPA) defines a community water system (CWS) as a public water system that serves at least 15 service connections used by year-round residents or regularly serves at least 25 year-round residents. CWSs provide water to more than 280 million persons in the United States. They are a tremendously diverse group. CWSs range from very small, privately owned systems whose primary business is not supplying drinking water (e.g., mobile home parks) to very large publicly owned systems that serve millions of customers.

2006 Community Water System Survey Volume I: Overview

<http://water.epa.gov/aboutow/ogwdw/upload/cwssreportvolumel2006.pdf>

Person months – All persons served by CWSs times 12 months (3,525.1 million for FY2011). This measure is calculated by multiplying the number of months in the most recent four quarter period in which health-based violations overlap by the retail population served.

Health-based standards -- exceedances of a maximum contaminant level (MCL) and violations of a treatment technique

Effective treatment

2a. Original Data Source:

Data are provided by agencies with primacy (primary enforcement authority) for the Public Water System Supervision (PWSS) program. These agencies are either: States, EPA for non-delegated states or territories, and the Navajo Nation Indian tribe, the only tribe with primacy. Primacy agencies collect the data from the regulated water systems, determine compliance, and report a subset of the data to EPA (a subset of the inventory data and summary violations).

2b. Source Data Collection:

State certified laboratories report contaminant occurrence to states that, in turn, determine exceedances of maximum contaminant levels or non-compliance with treatment techniques and report these violations to EPA.

Under the drinking water regulations, water systems must use approved analytical methods for testing for contaminants.

2c. Source Data Reporting:

Public Water Sanitary System (PWSS) Regulation-Specific Reporting Requirements Guidance. Available on the Internet at <http://www.epa.gov/safewater/regs.html>

System, user, and reporting requirements documents can be found on the EPA web site, <http://www.epa.gov/safewater/>

States may choose to use electronic Data Verification (eDV) tool to help improve data quality.

3a. Relevant Information Systems:

SDWIS/STATE, a software information system jointly designed by states and EPA, to support states as they implement the drinking water program. SDWIS/STATE is an optional data base application available for use by states and EPA regions to support implementation of their drinking water programs.

U.S. EPA, Office of Ground Water and Drinking Water. Data and Databases. Drinking Water Data & Databases – SDWIS/STATE, July 2002. Information available on the Internet:

http://www.epa.gov/safewater/sdwis_st/current.html

SDWIS/FED User and System Guidance Manuals (includes data entry instructions, data On-line Data Element Dictionary-a database application, Error Code Data Base (ECDB) - a database application, users guide, release notes, etc.) Available on the Internet at <http://www.epa.gov/safewater/sdwisfed/sdwis.htm>

System and user documents are accessed via the database link <http://www.epa.gov/safewater/databases.html> and specific rule reporting requirements documents are accessed via the regulations, guidance, and policy documents link <http://www.epa.gov/safewater/regs.html>

Documentation is also available at the Association of State Drinking Water Administrators web site at www.ASDWA.org

SDWIS/Fed does not have a Quality Assurance Project Plan. The SDWIS/FED equivalent is the Data Reliability Action Plan [2006 Drinking Water Data Reliability Analysis and Action Plan, EPA-816-R-07-010 March 2008] The DRAP contains the processes and procedures and major activities to be employed and undertaken for assuring the data in SDWIS meet required data quality standards. This plan has three major components: assurance, assessment, and control.

Office of Water Quality Management Plan, available at <http://www.epa.gov/water/info.html>

3b. Data Quality Procedures:

The Office of Ground Water and Drinking Water is modifying its approach to data quality review based on the recommendations of the Data Quality Workgroup and on the Drinking Water Strategy for monitoring data.

There are quality assurance manuals for states and Regions, which provide standard operating procedures for conducting routine assessments of the quality of the data, including timely corrective action(s).

Reporting requirements can be found on the EPA web site, <http://www.epa.gov/safewater/>

SDWIS/FED edit checks built into the software to reject erroneous data.

EPA offers the following to reduce reporting and database errors:

- 1) training to states on data entry, data retrieval, compliance determination, reporting requirements and error correction,
- 2) user and system documentation produced with each software release and maintained on EPA's web site,
- 3) Specific error correction and reconciliation support through a troubleshooter's guide,
- 4) a system-

generated summary with detailed reports documenting the results of each data submission, 5) an error code database for states to use when they have questions on how to enter or correct data, and 6) User support hotline available 5 days a week.

3c. Data Oversight:

The Infrastructure Branch Chief is responsible for overseeing source data reporting.

The Associate Director of Drinking Water Protection is responsible for overseeing information systems utilized in producing performance results.

3d. Calculation Methodology:

Person months – All persons served by CWSs times 12 months (3,525.1 million for FY2011). This measure is calculated by multiplying the number of months in the most recent four quarter period in which health-based violations overlap by the retail population served.

SDWIS contains basic water system information, population served, and detailed records of violations of the Safe Drinking Water Act and the statute's implementing health-based drinking water regulations.

SDWIS/FED data On-line Data Element Dictionary-a database application Available on the Internet at <http://www.epa.gov/safewater/sdwisfed/sdwis.htm>

Additional information: Several improvements are underway.

First, EPA will continue to work with states to implement the DRAP, which has already improved the completeness, accuracy, timeliness, and consistency of the data in SDWIS/FED through: 1) training courses for specific compliance determination and reporting requirements, 2) state-specific technical assistance, 3) targeted data audits conducted each year to better understand challenges with specific rules and 4) assistance to regions and states in the identification and reconciliation of missing, incomplete, or conflicting data.

Second, more states (as of January 2011, 55 States, Tribes, and territories are using SDWIS/STATE) will use SDWIS/STATE, SDWIS/STATE is an optional data base application available for use by states and EPA regions to support implementation of their drinking water programs.

U.S. EPA, Office of Ground Water and Drinking Water. Data and Databases. Drinking Water Data & Databases – SDWIS/STATE, July 2002. Information available on the Internet:

http://www.epa.gov/safewater/sdwis_st/current.html a software information system jointly designed by states and EPA, to support states as they implement the drinking water program.

Third, in 2006 EPA modified SDWIS/FED to (1) simplify the database, (2) minimize data entry options resulting in complex software, (3) enforce Agency data standards, and (4) ease the flow of data to EPA through a secure data exchange environment incorporating modern technologies, all of which will improve the accuracy of the data. Data are stored in a data warehouse system that is optimized for analysis, data retrieval, and data integration from other data sources. It has improved the program's ability to more efficiently use information to support decision-making and effectively manage the program.

EPA has also begun a multi-year effort to develop the next generation information system to replace SDWIS/State. In addition to reducing the total cost of ownership to EPA, a high priority goal of this effort is to support improved data quality through the evaluation of all public water system monitoring data.

4a. Oversight and Timing of Final Results Reporting:

The Deputy Director for the Office of Groundwater and Drinking Water and the Evaluation and Accountability Team Leader for the Office of Water are responsible for coordinating the reporting of all measures for the Office of Water.

4b. Data Limitations/Qualifications:

Recent state data verification and other quality assurance analyses indicate that the most significant data quality problem is under-reporting by the states of monitoring and health-based standards violations and inventory characteristics. The most significant under-reporting occurs in monitoring violations. Even though those are not covered in the health based violation category, which is covered by the performance measure, failures to monitor could mask treatment technique and MCL violations. Such under-reporting of violations limits EPA's ability to: 1) accurately portray the percent of people affected by health-based violations, 2) target enforcement oversight, 3) target program assistance to primacy agencies, and 4) provide information to the public on the safety of their drinking water facilities

4c. Third-Party Audits:

N/A

Measure Code: 625 - Areas of Concern Beneficial Use Impairments removed (cumulative).

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

4 - Great Lakes

Strategic Target Code and Title:

1 - Implement management actions necessary for later delisting at Areas of Concern in the Great Lakes

Managing Office:

Great Lakes National Program Office

1a. Performance Measure Term Definitions:

Areas of Concern: Great Lakes Areas of Concern (AOCs) are severely degraded geographic areas within the Basin. An AOC is described in the U.S.-Canada Great Lakes Water Quality Agreement (Annex 1 of the 2012 Protocol) as "a geographic area designated by the Parties where significant impairment of beneficial uses has occurred as a result of human activities at the local level." There were once a total of 43 AOCs: 26 located entirely within the United States; 12 located wholly within Canada; and 5 shared by both countries. There were thus 31 United States or Binational AOCs until the delisting of the Oswego River (NY) AOC in July of 2006, the Presque Isle Bay (PA) AOC in February of 2013, and the White Lake (MI) and Deer Lake (MI) AOCs in October of 2014. As of October of 2015, 27 US and bi-national AOCs remain.

Beneficial Use Impairments: This measure tracks the cumulative total number of beneficial use impairments (BUIs) removed within the 26 AOCs located entirely within the United States and the 5 AOCs that are shared by both the United States and Canada. Restoration of U.S. or Binational AOCs will ultimately be measured by the removal of all BUIs. Additional information is available at: <http://www.epa.gov/grtlakes/aoc/> An impaired beneficial use means a change in the chemical, physical or biological integrity of the Great Lakes system sufficient to cause any of the following:

- restrictions on fish and wildlife consumption
- tainting of fish and wildlife flavor
- degradation of fish wildlife populations
- fish tumors or other deformities
- bird or animal deformities or reproduction problems
- degradation of benthos
- restrictions on dredging activities
- eutrophication or undesirable algae
- restrictions on drinking water consumption, or taste and odor problems
- beach closings
- degradation of aesthetics
- added costs to agriculture or industry
- degradation of phytoplankton and zooplankton populations
- loss of fish and wildlife habitat

Remedial Action Plans (RAPs) for each of the AOCs address one or up to 14 BUIs associated with these areas.

Removed: A BUI is determined to be removed when:

- A state has established the delisting criteria.
- A state has developed a Stage two RAP.
- All management actions necessary for removal of the BUI (determined by the Stage two RAP) have been completed and the delisting targets have been met.
- The state provides documentation that monitoring data indicates the delisting targets have been met and environmental conditions have improved such that the impairment no longer exists.
- EPA issues an approval letter.

2a. Original Data Source:

Great Lakes States and EPA Task Force Leads (staff responsible for overseeing AOC progress).

2b. Source Data Collection:

The designated state environmental office or Office of Great Lakes in the appropriate state work with the local stakeholders in the AOCs to develop delisting criteria to remove the impaired BUIs. The state offices are the sources of the formal letters (data) for this measure. EPA's AOC program staff led collects these letters from the state offices.

Data is collected and is subject to Quality Assurance procedures established and approved by USEPA. State Quality Programs are reviewed and approved by EPA's Quality Assurance program. State requests to remove BUIs and/or to delist AOCs are submitted to EPA and are reviewed according to the 2001 US Policy Committee document, "Delisting Principles and Guidelines." See: <http://www.epa.gov/glnpo/aoc/rapdelistingfinal02.PDF>

2c. Source Data Reporting:

When reasonable and realistic management actions have been completed for a BUI, the appropriate Great Lakes state informs EPA that local environmental conditions are improving and they are on a path to removing a BUI. EPA, State staff and local entities coordinate the information and, once all comments and concerns and documentation that the BUI has met the delisting targets have been addressed, the applicable state submits the BUI Removal package to EPA for approval.

The designated state environmental office or Office of Great Lakes in the appropriate state works with the local stakeholders in the AOCs to develop BUI removal criteria to remove the impaired BUIs. The state offices are the sources of the formal letters (data and other supporting documentation) for this measure. EPA's AOC Task Force Leads collect these letters from the state offices.

3a. Relevant Information Systems:

System Description: The Environmental Accomplishments in the Great Lakes (EAGL) information system is a GLNPO-hosted SharePoint platform, information system developed in FY 2015 for reporting results into shared and standardized Excel spreadsheets, on GLRI-funded projects under GLRI Action Plan II. The EAGL information system was developed by the EPA in FY 2015 and is used as a repository for data reporting on accomplishments by the RWG agencies.

Source/Transformed Data: A total result from all projects for which this measure is applicable is calculated by EPA using the data and information reported in the "Results" section of the EAGL information system (available using the EAGL link from <https://login.glnpo.net/>)

Information System Integrity Standards: Not applicable.

3b. Data Quality Procedures:

GLNPO has an approved Quality Management System in place that conforms to the USEPA Quality Management Order and is audited at least every 3 years in accordance with Federal policy for Quality Management. In FY 2015 GLNPO's Quality Management System was combined with EPA Region 5's Quality program.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: AOC Program Coordinator, located in the GLNPO Technical Assistance and Analysis Branch.

Source Data Reporting Oversight Responsibilities: GLNPO Technical Assistance and Analysis Branch , through the AOC Program Coordinator who is responsible for coordinating amongst federal, state, and tribal agencies; tracking and reporting on progress; and ensuring supporting data and files are maintained.

Information Systems Oversight Personnel: EAGL Information System Contact/GLNPO IT Specialist.

Information Systems Oversight Responsibilities: Ensures RWG Agencies receive training on definitions of progress for each Measure; ensures EAGL Information System Spreadsheets are submitted semi-annually; and queries EAGL, conducts QA, and calculates total progress to send to GLRI Reporting Coordinator Lead.

3d. Calculation Methodology:

Decision Rules for Selecting Data: All EPA-approved removals are included. See definition of "Removed" and Section 2c – Source Data Reporting.

Definitions of Variables: Not applicable.

Explanation of Calculations: The sum of all approved BUI removals for each fiscal year is added to the cumulative total of BUI removals through the previous fiscal year.

Explanation of Assumptions: See above.

Unit of Measure: Number of BUIs (cumulative) removed.

Timeframe of Result: Through the end of the most recent fiscal year.

Documentation of Methodological Changes: Not applicable.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: GLNPO Technical Assistance and Analysis Branch Chief.

Final Reporting Oversight Responsibilities: Review the reported results for accuracy.

Final Reporting Timing: Annual

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: GLNPO relies on verification of BUI removal by the States to certify that a BUI has been removed. EPA technical staff review such requests, as input to management decisions. Known sources of error include the input of unacceptable data by a state or local partner, data that is incomplete regarding management actions and other data that may be applicable to actions in the AOC but are not

relevant to actions that lead to BUI removal. When all BUIs have been removed the site is eligible for the state to formally request delisting as an AOC.

Data Lag Length and Explanation: None expected from the time the GLNPO director transmits the approval letter. Approval itself could take up to a month after a State transmits its letter and associated documentation.

Methodological Changes: Not applicable.

4c. Third-Party Audits:

GLNPO's Quality Management System has been given "outstanding" evaluations in previous peer and management reviews. EPA Office of Environmental Information (OEI) conducted a Quality System Assessment (QSA) of GLNPO on June 18 to 20, 2013. There were no findings as a result of the QSA and the report stated that "the results of the QSA reflect a quality system that is effective for the organizational structure and environmental data programs.

There is senior management commitment to ensuring that quality requirements are met for data and information supporting GLNPO's decisions."

GAO evaluated the EPA Great Lakes program in 2004 and found deficiencies in organizational coordination and information collection. Please see <http://www.gao.gov/new.items/d041024.pdf>

OMB assessed the EPA Great Lakes program in 2007. Please see <http://www.whitehouse.gov/omb/expectmore/summary/10009010.2007.html>

EPA OIG evaluated the Great Lakes' progress in cleaning up AOCs, including recommendations for the data management and reporting of clean-up volume totals and costs. Please see <http://www.epa.gov/oig/reports/2009/20090914-09-P-0231.pdf>

In FY 2015, GAO reviewed how GLRI funds have been used. Among other things, GAO recommended in its draft report that EPA: 1) decide whether it should continue to use its Great Lakes Accountability System (GLAS) for tracking GLRI projects or replace GLAS with a different system; 2) take steps to ensure that information collected on projects is accurate; and 3) ensure that the project tracking system include guidance for entering information. EPA implemented GAO's recommendations prior to the finalization of GAO's report. GAO reviewed the actions taken and determined that the recommendations had been addressed. As a result, GAO's July 21, 2015 final report, entitled Great Lakes Restoration Initiative: Improved Data Collection and Reporting Would Enhance Oversight (GAP-15-526) contained no recommendations for EPA.

Measure Code: 606 - Cubic yards of contaminated sediment remediated (cumulative from 1997) in the Great Lakes.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

4 - Improve the Health of the Great Lakes

Strategic Target Code and Title:

2 - Remediate a cumulative total of 10.2 million cubic yards of contaminated sediment in the Great Lakes

Managing Office:

Great Lakes National Program Office

1a. Performance Measure Term Definitions:

Contaminated sediment: Although many point sources of pollution – discharges from discernible, often end-of-pipe conduits – have been reduced, legacy contamination remains. “Legacy contamination” is pollutants largely left over from past practices, but that continue to recirculate through the ecosystem. Such legacy pollutants, often persistent toxic substances (PTS), such as mercury and polychlorinated biphenyls (PCBs), continue to be present at levels above those considered safe for humans and wildlife, warranting fish consumption advisories in the Great Lakes, connecting channels, and Midwestern and New York interior lakes. These contaminated sediments have been created by decades of industrial and municipal discharges, combined sewer overflows, and urban and agricultural non-point source runoff. Buried contaminants posing serious human and ecological health concerns can be resuspended by storms, ship propellers, and bottom-dwelling organisms.

In addition to the well-known toxicants like mercury, PCBs, and banned pesticides, there are chemicals of emerging concern that have been detected in the Great Lakes over the past several years, which may pose threats to the ecosystem. Some such chemicals may include flame retardants, surfactants, pharmaceuticals and personal care product constituents.

Sediments are considered contaminated when they “contain chemical substances in excess of appropriate geochemical, toxicological, or sediment quality criteria or measures, or are otherwise considered to pose a threat to human health or the environment.” Source: EPA’s Contaminated Sediment Management Strategy, April 1998.

Remediated: An area is considered remediated when sediment is removed, contained, or treated via dredging, capping, in-situ treatment, or natural recovery.

Great Lakes: Sediment remediation information is tracked for harbors and tributaries in the entire Great Lakes basin (AOCs and non-AOCs); not the lakes themselves.

Background:

Although significant progress over the past 30 years has substantially reduced the discharge of toxic and persistent chemicals to the Great Lakes, persistent high concentrations of contaminants in the bottom sediments of rivers and harbors have raised considerable concern about potential risks to aquatic organisms,

wildlife, and humans. EPA's Great Lakes program identifies polluted sediments and air toxics deposition as the largest major sources of contaminants to the Great Lakes food chain. As a result, advisories against fish consumption are in place in most locations around the Great Lakes.

Problem harbor and tributary areas in the Great Lakes basin have been identified and labeled as "Areas of Concern" (AOCs). This measure supports the cleaning up toxics and AOCs, which is the first of five focus areas of the Great Lakes Restoration Initiative (GLRI) being jointly implemented by 11 federal agencies.

GLNPO began tracking sediment remediation actions in the Great Lakes Basin in 1997. At that time, GLNPO's "best guess" of the total number of cubic yards that required remediation in the Great Lakes AOCs was 40 million. In 2004, the U.S. Policy Committee tasked the Great Lakes States with establishing a more comprehensive list of sites requiring remediation in the entire Great Lakes Basin (AOCs and non-AOCs), using best professional judgment to estimate the sediment volumes to be remediated. Using this list of estimated sediment remediation needs created by Great Lakes States in 2004, and sediment remediation estimates reported by Project Managers for calendar years 1997 through 2004, GLNPO estimated the 1997 "universe," for contaminated sediments requiring remediation to be 46.5 million cubic yards. The 2005 "baseline" for this measure for EPA's 2011-2015 Strategic Plan was 3.7 million cubic yards. The 2007 "baseline" for this measure in the GLRI Action Plan was 5.5 million cubic yards.

Efforts to accelerate the rate of sediment remediation in the 29 U.S. Great Lakes AOCs are underway using a variety of funding sources including those under the Great Lakes Legacy Act, Superfund and other programs. For more information, see:

-Great Lakes Restoration Initiative website, <http://www.epa.gov/glnpo/glri/>

-GLNPO Contaminated Sediments Program website, <http://www.epa.gov/glnpo/sediments.html>

-Great Lakes Restoration Action Plan, http://greatlakesrestoration.us/action/wp-content/uploads/glri_actionplan.pdf
2/21/2010

-"Indicator 3: Sediment Contamination." Unpublished – in Great Lakes National Program Office files.

2a. Original Data Source:

GLNPO collects sediment remediation data from various State and Federal project managers across the Great Lakes region, who conduct and coordinate contaminated sediments work, including appropriately characterizing and managing navigational dredging of contaminated sediments.

2b. Source Data Collection:

Collection Methodology: The totals for sediment remediation are estimates provided by project managers. Methodologies vary by site. For example, the volume of sediment remediated may be based on either data from depth soundings taken before and after dredging or the weight of sediment (plus possible solidification agents) transported to a landfill or confined disposal facility.

Geographical Extent: U.S. Great Lakes basin

Spatial Detail: City and state

Time Interval Covered by Source Data: 1997-present

Quality Procedures: Quality procedures vary by site. The project manager indicates whether an approved Quality Assurance Project Plan (QAPP) or other quality documentation was in place during remediation of contaminated sediment.

2c. Source Data Reporting:

These data are obtained directly from the project manager via an information fact sheet the project manager completes for any site in the Great Lakes basin that has performed any remedial work on contaminated sediment. The data collected to track sediment remediation in the Great Lakes show the amount of sediment remediated (removed, capped, undergoing natural recovery, or other) for that year and the amount of sediment remediated in prior years for a particular site. This format is suitable for year-to-year comparisons for individual sites.

Project managers report annually and all information about the site must be received by September 30th of the reporting year. The GLNPO project manager is responsible for transferring information from the request forms to the matrix, and generates the associated bar graphs.

More information:

Giancarlo, M.B. "Compilation of Project Managers Informational Sheets". Unpublished - in Great Lakes National Program Office files.

3a. Relevant Information Systems:

System Description: The sediment tracking database houses information on the calculated amount of sediment remediated at individual sites as provided by the project managers. Data tracking sediment remediation are compiled in two different formats. The first is a matrix that shows the annual and cumulative totals of contaminated sediment that were remediated in the Great Lakes basin in the reporting year and from 1997 for each Area of Concern or other non-Areas of Concern with sediment remediation. The second format depicts the yearly and cumulative totals on a calendar year basis graphically.

Please see: Giancarlo, M.B. "Sediment Remediation Matrix". Unpublished - in Great Lakes National Program Office files.

· Giancarlo, M.B. "Sediment Remediation Graphics." Unpublished - in Great Lakes National Program Office files.

Source/Transformed Data: Individual site data are entered into the matrix as reported by project managers. Occasionally the GLNPO project manager converts the reported estimates into cubic yards before entering the estimates into the matrix (when data is reported in tons, for example).

Information System Integrity Standards: Standards not applicable.

3b. Data Quality Procedures:

It is GLNPO's responsibility to determine if the data are usable based upon the information sheet provided by the project managers. GLNPO does not attempt to verify mass and volume estimates due to the variability in how to calculate them. GLNPO ensures that the estimates provided make sense for the site, and that all estimates are reported in the same units. GLNPO management and Sediment Team members review the data, in the graphic and matrix formats, prior to reporting. GLNPO's Sediment Team works closely with partners and has confidence in those who provide data for the summary statistics. This familiarity with partners and general knowledge of ongoing projects allows GLNPO management to detect mistakes or questionable data. Individual site project managers are also responsible for double checking to ensure that data have been entered properly.

GLNPO does not accept unsolicited data without adequate assurance that quality system documentation was in place and the reporters of the data are not likely to be biased. GLNPO relies on the individual government/agency project managers to provide information on whether an approved QAPP was in place during remediation of contaminated sediment. This information is used to decide if the data provided by the project manager are reliable for GLNPO reporting purposes. If an approved QAPP was not used, sediment data would not likely be reported by GLNPO, unless GLNPO finds that alternative information is available that provides sufficient quality documentation for the project and associated data. This approach allows GLNPO to use best professional judgment and flexibility in reporting data from any cases where there was not a QAPP, but (a) the remedial action is noteworthy and (b) the project was conducted by recognized entities using widely accepted best practices and operating procedures.

The data, in both the graphic and matrix formats, are reviewed by individual project managers, GLNPO's Sediment Team, and management prior to being released. Data quality review procedures are outlined in the QAPP referenced below. See:

Giancarlo Ross, M.B. Quality Assurance Project Plan for "Great Lakes Sediment Remediation Project Summary Support." Unpublished – in Great Lakes National Program Office files, June 2008.

GLNPO has an approved Quality Management System in place that conforms to the USEPA Quality Management Order and is audited at least every 5 years in accordance with Federal policy for Quality Management. See: "Quality Management Plan for the Great Lakes National Program Office." EPA905-R-02-009. Revised and approved May 2008. <http://www.epa.gov/glnpo/qmp/>

3c. Data Oversight:

Source Data Reporting Oversight Personnel: GLNPO Project Manager

Source Data Reporting Oversight Responsibilities: The GLNPO project manager is responsible for distributing the request form, determining if the data are usable, transferring information from the request forms to the matrix, generating the associated bar graphs, and obtaining final approval from management.

Information Systems Oversight Personnel: Not applicable.

Information Systems Oversight Responsibilities: Not applicable.

3d. Calculation Methodology:

Decision Rules for Selecting Data: All reported volume estimates are included in the sum.

Definitions of Variables: Not applicable.

Explanation of Calculations: GLNPO sums the volume estimates as provided by the individual project managers, but then rounds the totals. For reporting purposes, the yearly volume total is rounded to the nearest one thousand cubic yards and the cumulative volume total is rounded to the nearest one hundred thousand cubic yards. The cumulative total is based off of the previous year's unrounded total.

Explanation of Assumptions: Remedial actions occurred in the Great Lakes basin prior to 1997; however, the GLNPO didn't start tracking the volume of sediment remediated until 1997. GLNPO estimated that as of 1997, the volume, or "universe," of contaminated sediments requiring remediation, was 46.5 million cubic yards.

Unit of Measure: Millions of cubic yards

Timeframe of Result: 1997-present (cumulative)

Documentation of Methodological Changes: In 2008, the yearly and cumulative totals began including large-scale navigation dredging projects that removed a significant amount of contaminated sediment from the environment granted that the site was sufficiently characterized, managed using best practices, and was completed by a recognized entity. No effort has been made to include navigation projects between 1997 and 2008.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Final Reporting Oversight Personnel: GLNPO Technical Assistance and Analysis Branch Chief

Final Reporting Oversight Responsibilities: Review the list of sites and volume estimates reported by individual project managers for potential mistakes or questionable data based on familiarity with partners and general knowledge of ongoing projects.

Final Reporting Timing: Annual

4b. Data Limitations/Qualifications:

General Limitations/Qualifications:

The data provided in the sediment tracking database should be used as a tool to track sediment remediation progress at sites across the Great Lakes Basin. Many of the totals for sediment remediation are estimates provided by project managers. For specific data uses, individual project managers should be contacted to provide additional information. The amount of sediment remediated or yet to be addressed should be viewed as qualitative data since a specific error estimate is not able to be calculated.

Data Lag Length and Explanation: One year. For example, the results from calendar year 2011 remediation were reported in FY 2012.

Methodological Changes: See field 3d.

4c. Third-Party Audits:

GLNPO's Quality Management System has been given "outstanding" evaluations in previous peer and management reviews. EPA Office of Environmental Information (OEI) conducted a Quality System Assessment (QSA) of GLNPO on June 18 to 20, 2013. There were no findings as a result of the QSA and the report stated "The results of the QSA reflect a quality system that is effective for the organizational structure and environmental data programs. There is senior management commitment to ensuring that quality requirements are met for data and information supporting GLNPO's decisions."

GLNPO anticipates submitting an updated version of the Quality Management Plan to OEI for review in December 2014.

GAO evaluated the EPA Great Lakes program in 2004 and found deficiencies in organizational coordination and information collection. Please see <http://www.gao.gov/new.items/d041024.pdf>

OMB assessed the EPA Great Lakes program in 2007. Please see <http://www.whitehouse.gov/omb/expectmore/summary/10009010.2007.html>

EPA OIG evaluated the Great Lakes' progress in cleaning up AOCs, including recommendations for the data management and reporting of clean-up volume totals and costs. Please see

<http://www.epa.gov/oig/reports/2009/20090914-09-P-0231.pdf>

Measure Code: L - Number of water body segments identified by states in 2002 as not attaining standards, where water quality standards are now fully attained (cumulative).

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

1 - Improve Water Quality on a Watershed Basis

Strategic Target Code and Title:

1 - By 2018, attain water quality standards for all pollutants and impairments in more than 5,000 water

Managing Office:

Office of Wetlands Oceans and Watersheds

1a. Performance Measure Term Definitions:

Waterbody segments: A geographically defined portion of navigable waters, waters of the contiguous zone, and ocean waters under the jurisdiction of the United States, including segments of rivers, streams, lakes, wetlands, coastal waters and ocean waters.

Identified by States in 2002 as not attaining standards: In 2002, an estimated 39,503 waterbodies were identified by states or EPA as not meeting water quality standards. These waterbodies and waterbody segments were identified in state-submitted Section 303(d) lists, Section 305(b) reports, and Integrated Reports for the 2002 reporting cycle. (See EPA's guidance for such reporting under "303(d) Listing of Impaired Waters Guidance" at <http://www.epa.gov/owow/tmdl/guidance.html>. Impairments identified after 2002 are not considered in counting waters under this measure; such impairments may be considered when revising this measure for future updates of the Strategic Plan.

The universe for this measure - the estimated 39,503 waterbodies identified by states or EPA as not meeting water quality standards in 2002 - is sometimes referred to as the "fixed base" or "SP-10 baseline." The universe includes all waters in categories 5, 4a, 4b, and 4c in 2002. Of these waters, 1,703 are impaired by multiple pollutants including mercury, and 6,501 are impaired by mercury alone.

States: All 50 states.

Water quality standards are now fully attained: Attaining water quality standards means the waterbody is no longer impaired for any of the causes identified in 2002, as reflected in subsequent state-submitted assessments and EPA-approved 303(d) lists. Impairment refers to an "impairment cause" in state- or EPA-reported data, stored in ATTAINS (Assessment Total Maximum Daily Load (TMDL) Tracking and Implementation System) or its predecessors NTS (National TMDL Tracking System) or ADB (Assessment Database). (Any waterbody listed as impaired in these databases must have an impairment cause entered.) There are several reasons why EPA or states may determine that specific waterbodies listed as impaired in 2002 (the baseline year) are no longer impaired in the current reporting year. For example, water quality might improve due to state or EPA actions to reduce point and nonpoint source discharges of pollutants. In other cases, a state or EPA might conduct more robust monitoring studies and use these data to complete more accurate assessments of water quality conditions. In some cases, a state might modify its water quality standards in accordance with EPA's regulations to update scientific criteria or better reflect the highest

attainable conditions for its waters. Each of these examples represents a case where an impaired water may no longer exceed water quality standards. Any such removals of waterbody impairments will be recorded based on reports from states scheduled every two years through 2014.

Background:

This is a cumulative measure, and it was first tracked in FY 2007. The FY 2007 target was 1,166; the actual result was 1,409. The FY 2008 target was 1,550; the actual result was 2,165. The FY 2009 target for this measure was 2,270; the actual result was 2,505. The FY 2010 target for this measure was 2,809; the actual result was 2,909. The FY 2011 target for this measure was 3,073; the actual result was 3,119.

2a. Original Data Source:

Regional EPA staff, who review and approve states' 303(d) lists.

2b. Source Data Collection:

Approval and Review of 303(d) lists by regional EPA staff: EPA reviews and approves state determinations that water by segments has fully attained standards. The primary data source is states' 303(d) lists of their impaired waterbodies needing development of TMDLs and required submittals of monitoring information pursuant to section 305(b) of the Clean Water Act. These lists/reports are submitted each biennial reporting cycle. EPA regional staffs interact with the states during the process of approval of the lists to ensure the integrity of the data consistent with the Office of Water Quality Management Plan (QMP). EPA review and approval is governed by the Office of Water Quality Management Plan (QMP).

State 303(d) submissions:

States submit 303(d) lists of impaired waterbodies needing development of TMDLs and monitoring information pursuant to section 305(b) of the Clean Water Act. States prepare lists/reports using actual water quality monitoring data, probability-based monitoring information, and other existing and readily available information and knowledge the state has in order to make comprehensive determinations addressing the total extent of the state's waterbody impairments. States exercise considerable discretion in using monitoring data and other available information to make decisions about which waters meet their designated uses in accordance with state water quality standards.

States employ various analytical methods of data collection, compilation, and reporting, including:

- 1) Direct water samples of chemical, physical, and biological parameters;
- 2) Predictive models of water quality standards attainment;
- 3) Probabilistic models of pollutant sources; and
- 4) Compilation of data from volunteer groups, academic interests and others. EPA-supported models include BASINS, QUAL2E, AQUATOX, and CORMIX. (Descriptions of these models and instructions for their use can be found at <http://www.epa.gov/waterscience/models/>)

Most states have provided this information in Integrated Reports, pursuant to EPA guidance. An Integrated Report is a biennial state submittal that includes the state's findings on the status of all its assessed waters (as required under Section 305(b) of the Clean Water Act), a listing of its impaired waters and the causes of impairment, and the status of actions being taken to restore impaired waters (as required under Section 303(d)).

QA/QC of data provided by states pursuant to individual state 303(d) lists (under CWA Section 303(d)) and/or Integrated 305(b)/303(d) Reports) is dependent on individual state procedures. EPA enhanced two existing

data management tools (STORET and the National Assessment Database) so they include documentation of data quality information.

EPA released the Water Quality Exchange (WQX), which provides data exchange capability to any organization that generates data of documented quality and would like to contribute that data to the national timeframe data warehouse so their data may be used in combination with other sources of data to track improvements in individual watersheds. Currently, data providers must transmit data and required documentation through their own Exchange Network node. EPA has rolled out a web data entry tool called WQXweb for users who have not invested in the node technology.

2c. Source Data Reporting:

Once EPA approves a state's 303(d) list, the information is entered into EPA's Assessment, TMDL Tracking, and Implementation System ATTAINS. After approving a state's 303(d) list, EPA reviews waterbodies in the 2002 universe to determine progress in achieving annual commitments for this measure (coded as SP-10). A waterbody may be counted under this measure when it attains water quality standards for all impairments identified in the 2002 reporting cycle, as reflected in subsequent Integrated Reports. Impairments are identified in later Integrated Reports are not considered for this measure.

Waters delisted for the following reasons can be counted toward meeting this measure:

Results for this performance measure are then entered by the EPA Regional Offices into EPA's Annual Commitment System (ACS).

Guidance Documents:

- The Office of Water has been working with states to improve the guidance under which 303(d) lists are prepared. In 2005, EPA issued listing guidance entitled Guidance for 2006 Assessment, Listing, and Reporting Requirements Pursuant to Sections 303(d), 305(b), and 314 of the Clean Water Act. This document provided a comprehensive compilation of relevant guidance EPA had issued to date regarding the Integrated Report. It included some specific changes from the 2004 guidance. For example, the 2006 Integrated Report Guidance provided greater clarity on the content and format of those components of the Integrated Report that are recommended and required under Clean Water Act sections 303(d), 305(b), and 314. The guidance also gave additional clarity and flexibility on reporting alternatives to TMDLs for attaining water quality standards (e.g., utilization of reporting Category 4b). Available at <http://www.epa.gov/owow/tmdl/2006IRG>
- In 2008, USEPA's Office of Water published Information Concerning 2008 Clean Water Act Sections 303(d), 305(b), and 314 Integrated Reporting and Listing Decisions. Available at http://www.epa.gov/owow/tmdl/2008_ir_memorandum.html
- In May, 2009, EPA released Information Concerning 2010 Clean Water Act Sections 303(d), 305(b), and 314 Integrated Reporting and Listing Decisions. Available at www.epa.gov/owow/tmdl/guidance/final52009.pdf
- EPA issued a 2010 Integrated Report clarification memo (released May 5, 2009 at <http://www.epa.gov/owow/tmdl/guidance/final52009.html>) which includes suggestions for the use of the rotating basin approach and Category 3, circumstances and expectation for "partial approval/further review pending" determinations, and using and reporting on Statewide Statistical Survey Data in ATTAINS and the National Water Quality Inventory Report to Congress.
- The Consolidated Assessment and Listing Methodology – Toward a Compendium of Best Practices (released on the web July 31, 2002 at www.epa.gov/owow/monitoring/calm.html) intended to facilitate increased

consistency in monitoring program design and the data and decision criteria used to support water quality assessments.

- The Office of Water (OW) and EPA's Regional Offices have developed the Elements of a State Water Monitoring and Assessment Program (March 2008). This guidance describes ten elements each state water quality monitoring program should contain and directs states to develop monitoring strategies that propose time frames for implementing all ten elements.

- Reporting guidelines for this measure can be found under the water quality sub-objective (SP-10 code) at:[http://water.epa.gov/resource_performance/planning/FY-2012-NWPG-Measure-Definitions-Water-Quality.cfm - Measure%20Code %20WQ_SP10_N11](http://water.epa.gov/resource_performance/planning/FY-2012-NWPG-Measure-Definitions-Water-Quality.cfm-Measure%20Code%20WQ_SP10_N11)

- Additional information on the use of ATTAINS was furnished in a March 2011 memorandum: "2012 Clean Water Act Sections 303(d), 305(b), and 314 Integrated Reporting and Listing Decisions" issued by the Director, OW/Office of Wetlands, Oceans and Watersheds. This memo is available athttp://water.epa.gov/lawsregs/lawsguidance/cwa/tmdl/ir_memo_2012.cfm

3a. Relevant Information Systems:

The Assessment and Total Maximum Daily Load (TMDL) Tracking And ImplementatioN System (ATTAINS) is the database which captures water quality information related to this measure. ATTAINS is an integrated system that documents and manages the connections between state assessment and listing decisions reported under Sections 305(b) and 303(d) (i.e., integrated reporting) and completed TMDLs. This system holds information about assessment decisions and restoration actions across reporting cycles and over time until water quality standards are attained. Annual TMDL totals by state, fiscal year, and pollutant are available at http://iaspub.epa.gov/waters10/attains_nation_cy.control?p_report_type=T-APRTMDLS and TMDL document searches can be conducted at http://www.epa.gov/waters/tmdl/tmdl_document_search.html More information about ATTAINS can be found at <http://www.epa.gov/waters/data/prog.html> and http://www.epa.gov/waters/ir/about_integrated.html

The Watershed Assessment, Tracking, and Environmental Results System (WATERS) is used to provide water program information and display it spatially using a geographic information system (National Hydrography Dataset (NHD)) integrated with several of EPA's existing databases. These databases include: the STORage and RETrieval (STORET) database, the Assessment TMDL Tracking and ImplementatioN System (ATTAINS), the Water Quality Standards Database (WQSDB), and the Grants Tracking and Reporting System (GRTS). This water quality information was previously available only from several independent and unconnected databases. General information about WATERS is available at <http://www.epa.gov/waters/> a system architecture diagram is available at <http://www.epa.gov/waters/about/arch.html> and information about WATERS geographic data is available at <http://www.epa.gov/waters/about/geography.html>

3b. Data Quality Procedures:

Water Management Divisions in EPA Regional Offices have responsibility for oversight, review and quality assurance of the performance data reported to EPA by the original data source which is the individual states.

3c. Data Oversight:

(1) Source Data Reporting: Water Management Divisions in the EPA Regional Offices. (2) Information Systems Oversight: System Manager for ATTAINS; System Manager for WATERS.

3d. Calculation Methodology:

The calculation methodology is described in Section 2c, "Source Data Reporting". While ATTAINS is the repository for 303(d) lists and 305(b) reports, it is not yet used for tracking performance and success for this measure. EPA is continuing to work to address discrepancies between Regional data records and ATTAINS.

4a. Oversight and Timing of Final Results Reporting:

The Associate Director of the Assessment and Watershed Protection Division is responsible for overseeing final reporting of measure.

4b. Data Limitations/Qualifications:

Delays are often encountered in state 303(d) lists and 305(b) submissions and in EPA's approval of the 303(d) portion of these biennial submissions. EPA encourages states to effectively assess their waters and make all necessary efforts to ensure the timely submittal of required Clean Water Act Section 303(d) impaired waters lists. EPA will continue to work with states to facilitate accurate, comprehensive, and geo-referenced data submissions. Also, EPA is heightening efforts to ensure expeditious review of the 303(d) list submissions with national consistency. Timely submittal and EPA review of integrated reports is important to demonstrate state and EPA success in accomplishing Strategic Plan goals for water quality.

Data may not precisely represent the extent of impaired waters because states do not employ a monitoring design that monitors all their waters. States, territories and tribes collect data and information on only a portion of their waterbodies. States do not use a consistent suite of water quality indicators to assess attainment of water quality standards. For example, indicators of aquatic life use support range from biological community assessments to levels of dissolved oxygen to concentrations of toxic pollutants. These variations in state practices limit how the CWA Sections 305(b) reports and the 303(d) lists provided by states can be used to describe water quality at the national level. There are also differences among sampling techniques and standards.

State assessments of water quality may include uncertainties associated with derived or modeled data. Differences in monitoring designs among and within states prevent the agency from aggregating water quality assessments at the national level with known statistical confidence. States, territories, and authorized tribes monitor to identify problems; typically, lag times between data collection and reporting can vary by state.

Additionally, states exercise considerable discretion in using monitoring data and other available information to make decisions about which waters meet their designated uses in accordance with state water quality standards. EPA then aggregates these various state decisions to generate national performance measures.

Impact of Supplemental Funding. In FY 2010 and CR 2011, the program which this measure supports receives funding from the American Recovery and Reinvestment Act (ARRA). Results from that funding will be reflected in this measure because they cannot easily be separated from results related to other EPA funding.

4c. Third-Party Audits:

Independent reports have cited the ways in which weaknesses in monitoring and reporting of monitoring data undermine EPA's ability to depict the condition of the Nation's waters and to support scientifically sound water program decisions. The most recent reports include the following:

- USEPA, Office of the Inspector General. 2009. EPA Needs to Accelerate Adoption of Numeric Nutrient Water Quality Standards. Available at www.epa.gov/oig/reports/2009/20090826-09-P-0223.pdf
- USEPA, Office of the Inspector General. 2007. Total Maximum Daily Load Program Needs Better Data and Measures to Demonstrate Environmental Results. Available at <http://www.epa.gov/oig/reports/2007/20070919-2007-P-00036.pdf>
- Government Accountability Office. 2003. Water Quality: Improved EPA Guidance and Support Can Help States Develop Standards That Better Target Cleanup Efforts. GAO-03-308. Washington, DC. Available at www.gao.gov/new.items/d03308.pdf

- Government Accountability Office. 2002. Water Quality: Inconsistent State Approaches Complicate Nation's Efforts to Identify its Most Polluted Waters. GAO-02-186. Washington, DC. Available at: www.epa.gov/waters/doc/gaofeb02.pdf
- Government Accountability Office. 2000. Water Quality: Key EPA and State Decisions Limited by Inconsistent and Incomplete Data. GAO-RCED-00-54. Washington, DC. Available at www.gao.gov/products/RCED-00-54

In response to these evaluations, EPA has been working with states and other stakeholders to improve 1) data coverage, so that state reports reflect the condition of all waters of the state; 2) data consistency to facilitate comparison and aggregation of state data to the national level; and 3) documentation so that data limitations and discrepancies are fully understood by data users. EPA has taken several steps in an effort to make the following improvements:

First, EPA enhanced two existing data management tools (STORET and the National Assessment Database) so that they include documentation of data quality information.

Second, EPA has developed a GIS tool called WATERS that integrates many databases including STORET, ATTAINS, and a water quality standards database. These integrated databases facilitate comparison and understanding of differences among state standards, monitoring activities, and assessment results.

Third, EPA and states have developed guidance. The 2006 Integrated Report Guidance (released August 3, 2005 at <http://www.epa.gov/owow/tmdl/2006IRG>) provides comprehensive direction to states on fulfilling reporting requirements of Clean Water Act Sections 305(b) and 303(d). EPA also issued a 2010 Integrated Report clarification memo (released May 5, 2009 at <http://www.epa.gov/owow/tmdl/guidance/final52009.html>) which includes suggestions for the use of the rotating basin approach, appropriate use of Category 3, circumstances and expectation for "partial approval/further review pending" determinations, and using and reporting on Statewide Statistical Survey Data in ATTAINS and the National Water Quality Inventory Report to Congress.

Also, the Consolidated Assessment and Listing Methodology – Toward a Compendium of Best Practices (released July 31, 2002 at www.epa.gov/owow/monitoring/calm.html) intended to facilitate increased consistency in monitoring program design and the data and decision criteria used to support water quality assessments.

Fourth, the Office of Water (OW) and EPA's Regional Offices have developed the Elements of a State Water Monitoring and Assessment Program (March 2008). This guidance describes ten elements each state water quality monitoring program should contain and directs states to develop monitoring strategies that propose timeframes for implementing all ten elements. (USEPA, Office of Water. 2003. Elements of a State Water Monitoring and Assessment Program. EPA 841-B-03-003. Washington, DC. Available at www.epa.gov/owow/monitoring/elements/.)

Measure Code: bps - Number of TMDLs that are established or approved by EPA [Total TMDL] on a schedule consistent with national policy (cumulative). [A TMDL is a technical plan for reducing pollutants in order to attain water quality standards. The terms "approved" and "established" refer to the completion and approval of the TMDL itself.]

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

1 - Improve Water Quality on a Watershed Basis

Strategic Target Code and Title:

1 - Attain water quality standards for all pollutants and impairments in more than 3,360 water bodies id

Managing Office:

Office of Wetlands Oceans and Watersheds

1a. Performance Measure Term Definitions:

TMDL: A Total Daily Maximum Load (TMDL) is a calculation of the maximum amount of a pollutant that a waterbody can receive and still safely meet water quality standards. A TMDL is a technical plan for reducing pollutants in order to attain water quality standards. For the purposes of this measure, each individual pollutant for which an allocation has been established/approved is counted as a TMDL. The development of TMDLs for an impaired waterbody is a critical step toward meeting water restoration goals.

TMDLs focus on clearly defined environmental goals and establish a pollutant budget, which is then implemented via permit requirements or a wide variety of state, local, and federal programs (which may be regulatory, non-regulatory, or incentive-based, depending on the program), as well as voluntary action by citizens.

TMDLs established/approved: The terms "approved" and "established" refer to the completion and approval of the TMDL itself. While the majority of TMDLs are developed by states, territories, or authorized tribes, EPA in some instances may establish a TMDL if:

- EPA disapproves TMDLs submitted by states, territories, or authorized tribes,
- States, territories, or authorized tribes do not submit TMDLs in a timely manner,
- EPA is required to do so pursuant to litigation settlements or judicial orders, or
- States ask EPA to establish TMDLs for particular water bodies.

Schedule consistent with national policy: National policy states that TMDLs are typically established and approved within 8 to 13 years of the water having been listed as impaired under Clean Water Act Section 303(d). The "state pace" is the number of TMDLs needing to be completed in a given state in a given fiscal year (these TMDLs may eventually be developed by either the state and approved by EPA or established by EPA). State pace is based on state litigation or other schedules or straight-line rates that ensure that national policy is met. Regions collaborate with States to set targets for the number of TMDLs projected to be completed in a given fiscal year. EPA policy has been that targets should be within 80 to 100% of the pace.

Cumulative trend information:

Background:

EPA and States have developed more than 50,000 TMDLs thru FY 2012.

Projecting state TMDL production numbers several months in advance continues to be a challenge as resource constraints and technical and legal challenges still exist. There has also been a notable shift toward the development of more difficult TMDLs that take more time and resources.

As TMDLs and other watershed-related activities are developed and implemented, waterbodies that were once impaired will meet water quality standards. Thus these TMDL measures are closely tied to the program assessment measures WQ-SP10.N11 and WQ-SP-11, "Number of waterbody segments identified by States in 2002 as not attaining standards, where water quality standards are now fully attained," and "remove the specific causes of waterbody impairment identified by states in 2002."

The number of TMDLs needed to address outstanding causes of impairment changes with each 303(d) list cycle; therefore, a baseline as such is not appropriate for these measures.

For more information, please visit <http://www.epa.gov/owow/tmdl/>

2a. Original Data Source:

State-submitted and EPA-approved TMDLs or EPA-established TMDLs

2b. Source Data Collection:

State-submitted and EPA-approved TMDLs and EPA-established TMDLs are publicly reviewed during their development. Electronic and hard copies of state-submitted and EPA-approved TMDLs are made available by states and often linked to EPA Web sites. The Watershed Assessment, Tracking, and Environmental Results system allows search for TMDL documents at http://www.epa.gov/waters/tmdl/tmdl_document_search.html

Explanation:

Office of Water Quality Management Plan. EPA requires that organizations prepare a document called a QMP that: documents the organization's quality policy; describes its quality system; and identifies the environmental programs to which the quality system applies (e.g., those programs involved in the collection or use of environmental data).

2c. Source Data Reporting:

Relevant information from each TMDL is entered into the Assessment and Total Maximum Daily Load (TMDL) Tracking And Implementation System (ATTAINS) data entry system and made available to the public via the web reports. See <http://www.epa.gov/waters/ir>

3a. Relevant Information Systems:

The Assessment and Total Maximum Daily Load (TMDL) Tracking And Implementation System (ATTAINS) is the database which captures water quality information related to this measure. ATTAINS is an integrated system that documents and manages the connections between state assessment and listing decisions reported under sections 305(b) and 303(d) (i.e., integrated reporting) and completed TMDLs. This system holds information about assessment decisions and restoration actions across reporting cycles and over time until water quality standards are attained. Annual TMDL totals by state, fiscal year, and pollutant are available at http://iaspub.epa.gov/waters10/attains_nation_cy.control?p_report_type=T-APRTMDLSand TMDL document searches can be conducted at http://www.epa.gov/waters/tmdl/tmdl_document_search.html More information about ATTAINS can be found at <http://www.epa.gov/waters/data/prog.html> and http://www.epa.gov/waters/ir/about_integrated.html

The Watershed Assessment, Tracking, and Environmental Results System (WATERS) is used to provide water program information and display it spatially using a geographic information system (National Hydrography Dataset (NHD)) integrated with several of EPA's existing databases. These databases include the STORage and RETrieval (STORET) database, the Assessment TMDL Tracking and Implementation System (ATTAINS), the Water Quality Standards Database (WQSDB), and the Grants Tracking and Reporting System (GRTS). This water quality information was previously available only from several independent and unconnected

databases. General information about WATERS is available at: <http://www.epa.gov/waters/> a system architecture diagram is available at: <http://www.epa.gov/waters/about/arch.html> and information about WATERS geographic data is available at: <http://www.epa.gov/waters/about/geography.html>

3b. Data Quality Procedures:

QA/QC of data is provided by EPA Regional staff and through cross-checks of ATTAINS information regarding impaired water listings, consistent with the Office of Water Quality Management Plan (QMP). EPA requires that organizations prepare a document called a QMP that: documents the organization's quality policy; describes its quality system; and identifies the environmental programs to which the quality system applies (e.g., those programs involved in the collection or use of environmental data).

3c. Data Oversight:

The Assessment and Watershed Protection Division Director is responsible for overseeing the source data reporting and information systems.

3d. Calculation Methodology:

Additional information: Internal reviews of data quality revealed some inconsistencies in the methodology of data entry between EPA Regional Offices. In 2005 and 2006, EPA convened a meeting of NTTS users to discuss how to improve the database. As a result, data field definitions were clarified, the users' group was reinstated, several training sessions were scheduled, and an ATTAINS design made the necessary database upgrades. One of the issues raised included the methodology used to count TMDLs. Previous methodology generated a TMDL "count" based on the causes of impairment removed from the 303(d) impaired waters list as well as the TMDL pollutant. EPA proposed to change the counting methodology to directly reflect only the pollutants given allocations in TMDLs. During a recent EPA Office of the Inspector General review they concurred with this recommendation. This proposed change was vetted during the TMDL Program's annual meeting in March 2007 and implemented in August 2007, resulting in a cumulative net reduction of 1,577 TMDLs.

Guidance:

Detailed measure guidance reporting can be found under the water quality sub-objective (WQ-8a) at http://water.epa.gov/resource_performance/planning/FY-2012-NWPG-Measure-Definitions-Water-Quality.cfm

4a. Oversight and Timing of Final Results Reporting:

The Headquarters point of contact for this measure works with Regions to address any questions and to ensure the TMDL information is correctly entered into and made available to the public in ATTAINS. Branch Chief for Watershed Branch (WB) is responsible for tracking and reporting on this measure.

4b. Data Limitations/Qualifications:

To meet the increasing need for readily accessible CWA information, EPA continues to improve the database and oversee quality review of existing data. Data quality has been improving and will continue to improve as existing data entry requirements and procedures are being re-evaluated and communicated with data entry practitioners.

4c. Third-Party Audits:

USEPA, Office of the Inspector General. 2007. Total Maximum Daily Load Program Needs Better Data and Measures to Demonstrate Environmental Results. Available at <http://www.epa.gov/oig/reports/2007/20070919-2007-P-00036.pdf>

USEPA, Office of the Inspector General. 2005. Sustained Commitment Needed to Further Advance the Watershed Approach. Available at <http://www.epa.gov/oig/reports/2005/20050921-2005-P-00025.pdf>

National Research Council, Committee to Assess the Scientific Basis of the Total Maximum Daily Load Approach to Water Pollution Reduction. 2001. Assessing the TMDL Approach to Water Quality Management. Washington, DC: National Academy Press. <http://www.nap.edu/openbook.php?isbn=0309075793>

Measure Code: cb6 - Percent of goal achieved for implementing nitrogen reduction actions to achieve the final TMDL allocations, as measured through the phase 5.3 watershed model.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

5 - Chesapeake Bay

Strategic Target Code and Title:

1 - Achieve attainment of water quality standards in Chesapeake Bay and tidal tributaries

Managing Office:

CBPO

1a. Performance Measure Term Definitions:

Percent of goal achieved to achieve final TMDL allocations for nitrogen: In December 2010, the Environmental Protection Agency established a pollution diet for the Chesapeake Bay, formally known as a Total Maximum Daily Load or TMDL. The TMDL is designed to ensure that all nitrogen, phosphorus and sediment pollution control efforts needed to fully restore the Bay and its tidal rivers are in place by 2025, with controls, practices and actions in place by 2017 that would achieve at least 60% of the reductions from 2009 necessary to meet the TMDL. The TMDL sets pollution limits (allocations) necessary to meet applicable water quality standards in the Bay and its tidal rivers. Specifically, the TMDL allocations are 201.63 million pounds of nitrogen, 12.54 million pounds of phosphorus, and 6,453.61 million pounds of sediment per year (note, the nitrogen allocation includes a 15.7 million pound allocation for atmospheric deposition of nitrogen to tidal waters).

As a result of this new Bay-wide “pollution diet,” Bay Program partners are implementing and refining Watershed Implementation Plans (WIPs) and improving the accounting of their efforts to reduce nitrogen, phosphorus and sediment pollution. The WIPs developed by Delaware, the District of Columbia, Maryland, New York, Pennsylvania, Virginia and West Virginia identify how the Bay jurisdictions are putting measures in place by 2025 that are needed to restore the Bay, and by 2017 to achieve at least 60 percent of the necessary nitrogen, phosphorus and sediment reductions compared to 2009. Much of this work already is being implemented by the jurisdictions consistent with their Phase I WIP commitments, building on 30 years of Bay restoration efforts.

Planning targets were established August 1, 2011 to assist jurisdictions in developing their Phase II WIPs. Specifically, the planning targets are 207.27 million pounds of nitrogen, 14.55 million pounds of phosphorus and 7,341 million pounds of sediment per year (note, the planning target for nitrogen includes a 15.7 million pound allocation for atmospheric deposition of nitrogen to tidal waters). These planning targets, while slightly higher than the allocations published in the December 2010 TMDL, represent the actions, assumptions, and “level of effort” necessary to meet the TMDL allocations.

The CBP partnership is committed to flexible, transparent, and adaptive approaches towards Bay restoration and will revisit these planning targets in 2017. The partnership will also conduct a comprehensive evaluation of the TMDL and the CBP’s computer modeling tools in 2017. Phase III WIPs will be established in 2017 and are expected to address any needed modifications to ensure, by 2025, that controls, practices and actions are

in place which would achieve full restoration of the Chesapeake Bay and its tidal tributaries to meet applicable water quality standards.

Annual nitrogen loading, taking into account implementation of nitrogen pollution reduction actions throughout the Chesapeake Bay watershed, will be calculated using the Chesapeake Bay Program phase 5.3.2 Watershed Model. The CBP Watershed Model uses actual wastewater discharge data, which is influenced by annual weather conditions, to estimate wastewater pollution. The influence of weather, rain and snowfall can be quite large and can influence wastewater loads more than the restoration efforts in any single year. However, the indicator does demonstrate long-term progress to reduce wastewater pollution. The Model estimates pollution from other sources such as agriculture or urban runoff using average weather conditions. This allows managers to understand trends in efforts to implement pollution reduction actions.

Data will be from Chesapeake Bay watershed portions of NY, MD, PA, VA, WV, DE, and DC.

This annual loading estimate will be used to identify progress toward the EPA reduction goal, which will be expressed as % of the annual goal achieved. Achieving the Bay TMDL nitrogen allocation is necessary for attaining tidal water quality standards for clarity/submerged aquatic vegetation.

TMDL: is an acronym for Total Daily Maximum Load, a calculation of the maximum amount of a pollutant that a waterbody can receive and still safely meet EPA water quality standards. The Chesapeake Bay TMDL was completed on December 29, 2010. It is the largest and most complex ever developed, involving six states and the District of Columbia and the impacts of pollution sources throughout a 64,000-square-mile watershed. The Bay TMDL is actually a combination of 92 smaller TMDLs for individual Chesapeake Bay tidal segments. It includes limits on nitrogen, phosphorus and sediment sufficient to achieve state clean water standards for dissolved oxygen, water clarity, underwater Bay grasses and chlorophyll-a, an indicator of algae levels. More information about the Chesapeake Bay's TMDL is at <http://www.epa.gov/reg3wapd/tmdl/ChesapeakeBay/tmdlexec.html>

Implementing nitrogen pollution reduction actions: Activities by municipalities and state agencies in the Chesapeake Bay watershed to improve stormwater management and wastewater treatment plants (WWTPs), as well as management of septic fields and other nonpoint nitrogen sources, to reduce the amounts of nitrogen that enters the bay.

Phase 5.3 Watershed Model: The CBP Watershed Model uses actual wastewater discharge data, which is influenced by annual weather conditions, to estimate wastewater pollution. The influence of weather, rain and snowfall can be quite large and can influence wastewater loads more than the restoration efforts in any single year. However, the indicator does demonstrate long-term progress to reduce wastewater pollution. The Model estimates pollution from other sources such as agriculture or urban runoff using average weather conditions. This allows managers to understand trends in efforts to implement pollution reduction actions.

Information about the Chesapeake Bay Program Watershed Model can be found in Section 5 of the Bay TMDL (http://www.epa.gov/reg3wapd/pdf/pdf_chesbay/FinalBayTMDL/CBayFinalTMDLSection5_final.pdf Additionally, please see <http://ches.communitymodeling.org/models/CBPhase5/index.php> for the most recent WSM documentation (December 2010).

Background:

· Nitrogen loads originate from many sources in the Chesapeake Bay watershed. Point sources of nitrogen include municipal wastewater facilities, industrial discharge facilities, combined sewer overflows (CSOs), sanitary sewer overflows (SSOs), NPDES permitted stormwater (MS4s and construction and industrial sites), and confined animal feeding operations (CAFOs). Nonpoint sources include agricultural lands (animal feeding operations (AFOs), cropland, hay land, and pasture), atmospheric deposition, forest lands, on-site treatment systems, nonregulated stormwater runoff, stream banks and tidal shorelines, tidal resuspension, the ocean, wildlife, and natural background.

· The website for EPA's Chesapeake Bay program office is <http://www.epa.gov/region3/chesapeake/>

For additional information about this indicator, go to

http://www.chesapeakebay.net/indicators/indicator/reducing_nitrogen_pollution

2a. Original Data Source:

Annual jurisdictional submissions (NY, MD, PA, VA, WV, DE, and DC) of both monitored and estimated wastewater effluent concentrations and flows approved by each jurisdiction as well as best management practice (BMP) data for other sources of pollution tracked by jurisdictions and reported to the Chesapeake Bay Program office. The Phase 5.3.2 watershed model uses many types of data from sources too numerous to describe here. Please see <http://ches.communitymodeling.org/models/CBPhase5/index.php> for the most recent WSM documentation (December 2010).

2b. Source Data Collection:

Collection Methods:

Jurisdictions from Chesapeake Bay watershed portions of NY, MD, PA, VA, WV, DE, and DC annually submit two kinds of data. One type of data is monitored and estimated wastewater effluent concentrations and flows from WWTPs and industrial facilities. These are approved by each jurisdiction. The second is nonpoint source practice data tracked by jurisdictions based on land uses, animal manure and chemical fertilizer inputs, human population, nonpoint source controls/practices, septic, and atmospheric deposition. This data is reported to the Chesapeake Bay Program office.

For additional information, refer to the Analysis and Methods documentation for this indicator at

http://www.chesapeakebay.net/images/indicators/17662/reducingpollutionamdoc2011_050912.doc

Quality Procedures:

Procedures for compiling and managing wastewater discharge data at the Chesapeake Bay Program Office are documented in the following EPA-approved Quality Assurance Project Plan:

· "Standard Operating Procedures for Managing Point Source Data – Chesapeake Bay Program" on file for the EPA grant.

Procedures at the Chesapeake Bay Program Office for acquiring and managing data from sources of pollution other than wastewater treatment plants are documented in the following EPA-approved Quality Assurance Project Plan:

· "Standard Operating Procedures for Managing Nonpoint Source Data – Chesapeake Bay Program" on file for the EPA grant.

Jurisdictions providing wastewater effluent data and BMP data for other sources of pollution to the Bay Program Office have supplied documentation of their quality assurance and quality control policies, procedures, and specifications in the form of Quality Assurance Management Plans and Quality Assurance

Project Plans. Jurisdictional documentation can be obtained by contacting the Quality Assurance Coordinator, Mary Ellen Ley, mley@chesapeakebay.net).

Geographical Extent: Jurisdictions from Chesapeake Bay watershed portions of NY, MD, PA, VA, WV, DE, and DC. Refer to map at http://www.chesapeakebay.net/maps/map/chesapeake_bay_watershed_model_phase_5_modeling_segments

Spatial Detail: Depending on the practice and jurisdiction, data for other sources of pollution are tracked and reported at the following spatial scales:

- § State
- § River Segment
- § State-Segment – intersection of jurisdictional boundary and Watershed Model river segment
- § Major Basin
- § State-Basin – intersection of jurisdictional boundary and Major Basin
- § County
- § County-Segment – intersection of county boundary and Watershed Model river segment

Wastewater: Data can be aggregated to Hydrologic Units (HUC8 and HUC11), counties/cities (FIPS), “state-segments” (the intersection of state boundaries and Phase 5.3.2 Watershed Model river segments), jurisdictional portions of major basins, major basins, jurisdictions, and the Chesapeake Bay watershed as a whole.

Agriculture, Urban/Suburban and Septic, Air:

BMP implementation data to reduce pollution from these sources are aggregated to “state-segments”, or the intersection of state boundaries and Phase 5.3.2 Watershed Model river segments, jurisdictional portions of major basins, major basins, major tributaries, jurisdictions, and the Chesapeake Bay watershed as a whole.

2c. Source Data Reporting:

Data Submission/Data Entry: Data are reported to EPA’s Chesapeake Bay Program office (CBPO) through the Chesapeake Bay TMDL Tracking and Accounting System (BayTAS) and the National Environmental Information Exchange Network (NEIEN).

Data Transmission Timing and Frequency: Data are transmitted to CBPO by Dec 31st each year. It takes approximately 3-4 months to process the data and utilize in a watershed model run in order to have final output for use in updating the indicator on an annual basis.

3a. Relevant Information Systems:

System Description: The Chesapeake Bay TMDL Tracking and Accounting System (BayTAS) was developed to inform EPA, the Bay Jurisdictions, and the public on progress in implementing the bay’s TMDL. BayTAS stores the TMDL allocations (based on the Watershed Model Phase 5.3.0 and tracks implementation progress (based on the Watershed Model Phase 5.3.2 and the jurisdictions’ Phase II Watershed Implementation Plans). For more information about the BayTAS, refer to http://stat.chesapeakebay.net/sites/all/cstat/tmdl/BayTAS_factsheet.pdf

Source/Transformed Data: Source and transformed data.

Information System Integrity Standards: Refer to Section 5 of the Bay TMDL

(http://www.epa.gov/reg3wapd/pdf/pdf_chesbay/FinalBayTMDL/CBayFinalTMDLSection5_final.pdf) Additionally, please see <http://ches.communitymodeling.org/models/CBPhase5/index.php> for the most recent WSM documentation (December 2010).

3b. Data Quality Procedures:

Procedures for compiling and managing wastewater discharge data at the Chesapeake Bay Program Office are documented in the following EPA-approved Quality Assurance Project Plan:

- “Standard Operating Procedures for Managing Point Source Data – Chesapeake Bay Program” on file for the EPA grant.

Procedures at the Chesapeake Bay Program Office for acquiring and managing data from sources of pollution other than wastewater treatment plants are documented in the following EPA-approved Quality Assurance Project Plan:

- “Standard Operating Procedures for Managing Nonpoint Source Data – Chesapeake Bay Program” on file for the EPA grant.

Jurisdictions providing wastewater effluent data and BMP data for other sources of pollution to the Bay Program Office have supplied documentation of their quality assurance and quality control policies, procedures, and specifications in the form of Quality Assurance Management Plans and Quality Assurance Project Plans. Jurisdictional documentation can be obtained by contacting the Quality Assurance Coordinator, Mary Ellen Ley, mley@chesapeakebay.net).

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

Wastewater: Ning Zhou, Wastewater Data Manager, Virginia Polytechnic Institute and State University, Chesapeake Bay Program Office

Best Management Practice and Watershed Model information: Jeff Sweeney, Nonpoint Source Data Manager, USEPA, Chesapeake Bay Program Office.

Source Data Reporting Oversight Responsibilities: Assure quality of data submitted by states.

Information Systems Oversight Personnel:

Wastewater: Ning Zhou, Wastewater Data Manager, Virginia Polytechnic Institute and State University, Chesapeake Bay Program Office

Best Management Practice and Watershed Model information: Jeff Sweeney, Nonpoint Source Data Manager, USEPA, Chesapeake Bay Program Office.

Information Systems Oversight Responsibilities: Assure data has been transferred correctly to watershed model.

3d. Calculation Methodology:

Decision Rules for Selecting Data, Definition of Variables, and Explanation of Calculations: Refer to Section 5 of the Bay TMDL (http://www.epa.gov/reg3wapd/pdf/pdf_chesbay/FinalBayTMDL/CBayFinalTMDLSection5_final.pdf)

Additionally, please see <http://ches.communitymodeling.org/models/CBPhase5/index.php> for the most recent WSM documentation (December 2010).

Unit of Measure: Percent of goal achieved

Timeframe of Result: FY 2010 is baseline (based on 2009 progress run) and FY 2026 is the end year (will be based on 2025 progress run. Most recent year of progress will be calculated based on the most current progress run (progress runs are completed on an annual basis).

Documentation of Methodological Changes: Refer to Section 5 of the Bay TMDL (http://www.epa.gov/reg3wapd/pdf/pdf_chesbay/FinalBayTMDL/CBayFinalTMDLSection5_final.pdf) Additionally, please see <http://ches.communitymodeling.org/models/CBPhase5/index.php> for the most recent WSM documentation (December 2010).

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

Jeff Sweeney, Nonpoint Source Data Manager, USEPA, Chesapeake Bay Program Office

Katherine Antos, Water Quality Goal Implementation Team Coordinator, USEPA, Chesapeake Bay Program Office

Final Reporting Oversight Responsibilities: Provide final, approved data for use in indicator.

Final Reporting Timing: Usually by March or April every year.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: The Chesapeake Bay Program Watershed Model, employed to integrate wastewater technology controls and a large array of BMPs to reduce pollution from other sources, is best utilized when making comparisons among scenarios. For the Reducing Pollution indicators, these comparisons are among the 2009 Bay TMDL baseline, the yearly model assessments of loads, and the Phase II WIP planning targets.

By presenting trends and status at the large scale of the 64,000 square mile watershed over a 20-year period, yearly changes in data tracking mechanisms by particular jurisdictions and changes in methods of data analysis for particular wastewater plants and BMPs are somewhat masked.

The indicators are designed 1) to depict, generally, the degree of progress over the long term toward the implementation goals and 2) to clearly identify pollutant sources where gaps are large and to what extent. The indicators connect efforts (pollutant controls) with results (loading reductions and subsequently, water quality and habitat health).

Data Lag Length and Explanation: Fiscal year end of year results are based on progress run data from the previous year.

Methodological Changes: N/A

4c. Third-Party Audits:

The following evaluation from the National Academies of Sciences assesses Chesapeake Bay nutrient/sediment reduction strategies:

- The National Research Council (NRC) established the Committee on the Evaluation of Chesapeake Bay Program Implementation for Nutrient Reduction in Improve Water Quality in 2009 in response to a request from the EPA. (Executive Order 13508, Chesapeake Bay Restoration and Protection, called for an independent evaluator to periodically evaluate protection and restoration activities and report on progress toward meeting the goals of the Executive Order.) The committee was charged to assess the framework used by the states and the CBP for tracking nutrient and sediment control practices that are implemented in the Chesapeake Bay watershed and to evaluate the two-year milestone strategy. The committee was also asked to assess existing adaptive management strategies and to recommend improvements that could help CBP to meet its nutrient and sediment reduction goals. See: Committee on the Evaluation of Chesapeake Bay Program Implementation for Nutrient Reduction to Improve Water Quality; National Research Council. Achieving Nutrient and Sediment Reduction Goals in the Chesapeake Bay: An Evaluation of Program Strategies and Implementation (2011). <http://dels.nas.edu/Report/Achieving-Nutrient-Sediment-Reduction-Goals/13131>

The following reviews are relevant to the Bay Program's modeling approach:

- An external review of the Bay Program's Phase 5 Watershed Model hydrologic calibrations was completed in September 2008 and can be found at: http://www.chesapeakebay.net/content/publications/cbp_51626.pdf
- In February, 2008, an external panel assembled by the Chesapeake Bay Program's Scientific and Technical Advisory Committee reviewed the Chesapeake Bay Phase 5 Watershed Model assessing (1) work to date, (2) the model's suitability for making management decisions at the Bay Watershed and local scales, and (3) potential enhancements to improve the predictive ability of the next generation of the Chesapeake Bay Watershed Models. A report of the review, with specific recommendations, can be found at the STAC site: <http://www.chesapeake.org/stac/stacpubs.html>
- Another external review of Bay Program modeling efforts "Modeling in the Chesapeake Bay Program: 2010 and Beyond" completed January, 2006 is published by STAC at: <http://www.chesapeake.org/stac/Pubs/ModBay2010Report.pdf>
- In June, 2005, another external review of the Watershed Model addressed the following broad questions: 1) Does the current phase of the model use the most appropriate protocols for simulation of watershed processes and management impacts, based on the current state of the art in the HSPF model development?, and 2) Looking forward to the future refinement of the model, where should the Bay Program look to increase the utility of the Watershed Model? Details of this review and responses can be found at: http://www.chesapeakebay.net/pubs/subcommittee/mdsc/Watershed_Model_Peer_Review.pdf

The following EPA OIG reports focus on the performance measures or the data underlying the performance measures for the Chesapeake Bay measures discussed in this DQR.

- Despite Progress, EPA Needs to Improve Oversight of Wastewater Upgrades in the Chesapeake Bay Watershed, Report No. 08-P-0049. Available at <http://www.epa.gov/oig/reports/2008/20080108-08-P-0049.pdf>
- Saving the Chesapeake Bay Watershed Requires Better Coordination of Environmental and Agricultural Resources, EPA OIG Report No. 2007-P-00004. Available at <http://www.epa.gov/oig/reports/2007/20070910-2007-P-00031.pdf>
- Development Growth Outpacing Progress in Watershed Efforts to Restore the Chesapeake Bay, Report No. 2007-P-00031. Available at <http://www.epa.gov/oig/reports/2007/20070910-2007-P-00031.pdf>

- EPA Relying on Existing Clean Air Act Regulations to Reduce Atmospheric Deposition to the Chesapeake Bay and its Watershed, Report No. 2007-P-00009. Available at <http://www.epa.gov/oig/reports/2007/20070228-2007-P-00009.pdf>

The following GAO reports focus on the performance measures or the data underlying the performance measures for the Chesapeake Bay measures discussed in this DQR.

- Chesapeake Bay Program: Recent Actions Are Positive Steps Toward More Effectively Guiding the Restoration Effort. Available at <http://www.gao.gov/products/GAO-08-1033T> (2008)
- CHESAPEAKE BAY PROGRAM: Improved Strategies Are Needed to Better Assess, Report, and Manage Restoration Progress. Available at <http://www.gao.gov/new.items/d0696.pdf> (2005)

Measure Code: Opb - Percent of serviceable rural Alaska homes with access to drinking water supply and wastewater disposal.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

1 - Improve Water Quality on a Watershed Basis

Strategic Target Code and Title:

5 - Provide access to basic sanitation for 91,900 American Indian and Alaska Native homes

Managing Office:

Primary: US. EPA; Office of Water; Office of Wastewater Management; Municipal Support Division; Sustainable Communities Branch; Secondary: EPA Region 10 Office of Water and Watersheds; Grants and Strategic Planning Unit; ANV grant Project Officer (PO)

1a. Performance Measure Term Definitions:

Serviceable rural Alaska home: Roughly 1,500 of the 36,000 Alaskan Native and rural homes are categorized as unserviceable, the remaining are considered serviceable. As defined by the State of Alaska Department of Environmental Conservation, Village Safe Water program, unserviceable homes are those that will likely never receive full scale water and sewer services. General reasons for unserviceable homes may include: the community does not want the services, the home does not have electricity, the home does not have thermostatically controlled heat, the home is structurally unsound, it is located beyond the proper community, there is an extremely high capital cost to make the homes serviceable, and/or it is a seasonally occupied residence.

Access to drinking water supply and wastewater disposal: Refers to the reduction in the sanitation deficiency level of a tribal home from a 4 or 5 to a 3 or less. The sanitation deficiency levels definitions are described in Appendix E of the "Indian Health Service Sanitation Deficiency System Guide for Reporting Sanitation Deficiencies for Indian Homes and Communities," working draft, May 2003 (<http://www.dsfc.ihs.gov/Documents/SDSWorkingDraft2003.pdf>). Sanitation deficiency is an identified need for new or upgraded sanitation facilities for existing homes of American Indians or Alaska Natives.

Background: Initiated in FY 2007 through the Program Assessment Rating Tool (PART), this measure was established to track the environmental and human health performance of EPA's Alaska Native Village and Rural Communities Grant Program. This program provides funding to assist Alaska Native Villages (ANVs) and Alaska rural communities with the construction of new or improved drinking water and wastewater systems, and to provide training and technical assistance in the operation and maintenance of these systems. For this program, EPA Headquarters' Office of Wastewater Management allocates funds to the EPA Region 10 Alaska Operations Office, which in turn provides funding to the Alaska Department of Environmental Conservation (DEC). The Alaska DEC administers the funds for projects through its Village Safe Water (VSW) Program.

For more information, please see:

- Website for EPA's ANV and Rural Communities Grant Program (<http://www.epa.gov/alaskanativevillages>).
- Webpage for Alaska DEC's VSW Program (<http://www.dec.state.ak.us/water/vsw/pdfs/vswbrief.pdf>).

- Infrastructure Task Force Access Subgroup. "Meeting the Access Goal: Strategies for Increasing Access to Safe Drinking Water and Wastewater Treatment to American Indian and Alaska Native Homes." March 2008. (www.epa.gov/tp/pdf/infra-tribal-access-plan.pdf).

2a. Original Data Source:

Indian Health Service (IHS) through the Alaska Native Tribal Health Consortium and the VSW. For the Alaska Native Villages IHS and VSW enters the original data for this measure into the IHS Sanitation Tracking and Reporting System (STARS). For non-native rural Alaska communities the VSW program is using the U.S. Census Bureau's American Community Survey. This survey collects data annually rather than every ten years and is used to help determine how more than \$400 billion in federal and state funding are distributed each year.

2b. Source Data Collection:

The IHS and VSW identify sanitation deficiencies at rural Alaska homes in several ways, the most common of which follow:

- Consultation with Tribal members, community members and other Agencies
- Field visits by engineers, sanitarians or regional health corporation staff
- Public Water System Supervision (PWSS) Sanitary Surveys
- Community Master Plans for Development
- Telephone Surveys
- Feasibility Studies

The most reliable and preferred method is a field visit to each community to identify and obtain accurate numbers of homes with sanitation deficiencies. The number of rural/Native Alaskan homes within the communities must be consistent among the various methods cited above. If a field visit cannot be made, it is highly recommended that more than one method be used to determine sanitation deficiencies to increase the accuracy and establish greater credibility for the data. The identification methods used for each project must be retained and documented in area records.

Sanitation deficiency data entered into STARS undergo a series of highly organized quality control reviews at various levels within the IHS (field, district, and area). Data is also reviewed by the State of Alaska as well as experienced tribal personnel. The data quality review consists of performing a number of established data queries and reports, which identify errors and/or inconsistencies. In addition, the top sanitation deficiency projects and corresponding community deficiency profiles for each area are reviewed against their budgets. Detailed cost estimates are required for the review.

STARS is comprised of several sub-data systems, including the Sanitation Deficiency System (SDS), which contains the data that is used to calculate this measure. The SDS is an inventory of sanitation deficiencies for Indian and rural Alaska homes, ANVs and communities, and is updated on an ongoing basis. The sub-data system called the Housing Inventory Tracking System (HITS) was fully implemented in FY2014 and is a mapped based housing tracking system. The HITS system is more accurate than the previously used tabular housing inventory referred to as the Community Deficiency Profile. The utilization of a map based housing inventory allows for the connection of specific homes to specific projects in SDS. As projects are funded in SDS the deficiency level for the corresponding homes are changed to reflect the change as a result of the funded project.

For more information, please see:

- Indian Health Service (IHS), Division of Sanitation Facilities (DSFC). Criteria for the Sanitation Facilities Construction Program, June 1999, Version 1.02, 3/13/2003.

http://www.dsfc.ihs.gov/Documents/Criteria_March_2003.cfm .

- Indian Health Service (IHS), Division of Sanitation Facilities (DSFC). Sanitation Deficiency System (SDS), Working Draft, "Guide for Reporting Sanitation Deficiencies for Indian Homes and Communities", May 2003.

<http://www.dsfc.ihs.gov/Documents/SDSWorkingDraft2003.pdf> .

2c. Source Data Reporting:

STARS is managed by the IHS Office of Environmental Health and Engineering (OEHE), Division of Sanitation Facilities Construction (DSFC). The State of Alaska retrieves data from STARS via reports generated through STARS dataset queries and through the U.S. Census Bureau's American Community Survey. EPA staff have read only access to STARS. The system is password protected, and IHS maintains ownership and oversight responsibilities. This database is utilized to establish funding priorities for all federal funds identified for water and wastewater infrastructure in rural Native Alaskan communities.

STARS is a web-based application and includes data fields for sanitation deficiencies, Indian homes, and construction projects. The SDS sub-system contains the data that is used to calculate this measure. HITS is a mapped based housing tracking system. As projects are funded in SDS the deficiency level for corresponding homes are changed to reflect the change as a result of the funded project. The HITS image below identifies homes with water service (not circled) and without water service (circled):

HITS – Map Based Housing Inventory

STARS routinely undergoes standard ongoing support and updates to maintain database integrity, efficiency, and accuracy.

For more information, please see:

- STARS <https://wstarstest.ihs.gov/>

- STARS user manual:

http://www.ihs.gov/EHSCT/dsp_folder/dsp_filedownload.cfm?folder=main_resource_docs&filename=STARS_Manual_20080922.pdf&filetype=pdf .

Source Data Reported: Housing information undergoes QA/QC and is compiled annually at the end of the construction year (typically March) in order to capture progress over the previous construction season. For example, housing information collected in March 2014 reflects progress through calendar year 2013. Analysis and data reviews are conducted around April, and the results are made available around May.

Performance Data Reported: annually

Data Lag: Approximately 5 months.

3a. Relevant Information Systems:

System Description: STARS is a web-based application and includes data fields for sanitation deficiencies, American Indian & Alaskan Native homes, and construction projects. This database is utilized to establish funding priorities for all federal funds identified for water and wastewater infrastructure in American Indian and Alaskan Native communities. STARS is comprised of several sub-data systems, including SDS and HITS.

Source/Transformed Data: IHS and VSW staff input data into STARS. The State of Alaska retrieves data for the Alaska Native communities from STARS via an online interface that pulls a STARS dataset query and combines the STARS data from the U.S. Census Bureau's American Community Survey for non-native communities.

Information System Integrity Standards: The combined data undergo a series of quality control reviews at various levels within the IHS and the State of Alaska. IHS Field Engineers, District Engineers and/or the Area Office staff tabulate records and activities. STARS routinely undergoes standard ongoing support and updates to maintain database integrity, efficiency, and accuracy. The State then sorts, filters and QA the data against the previously reported data for reporting on the ANV measure.

3b. Data Quality Procedures:

IHS Area and VSW staff enter data into STARS, the State of Alaska pulls data, sorts, filters and QA the data against the previously reported data in coordination with the EPA Project Officer (PO), results are compiled into a measures monitoring spreadsheet, results are reported as appropriate to: OWM Immediate Office (who imports the data into ACS), OW Immediate Office, OMB, OCFO, etc.

The SDS within STARS data undergo a series of highly organized reviews by experienced tribal, IHS field, IHS district, State of Alaska and IHS area personnel. The data quality review consists of performing a number of established data queries and reports, which identify errors and/or inconsistencies. In addition, the top SDS projects and corresponding community deficiency profiles for each area are reviewed against their budgets. Detailed cost estimates are required for the review.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: EPA ANV HQ Coordinator, Matthew Richardson; EPA ANV Project Officer, EPA Region 10 staff, Dennis Wagner (Reg 10) .

Source Data Reporting Oversight Responsibilities: EPA ANV HQ Coordinator and EPA ANV Project Officer in Region10 store original and transformed data on individual Microsoft Excel files on local EPA networks. State of Alaska dual database querying and QA assurance.

Information Systems Oversight Personnel: IHS staff and State of Alaska Staff.

Information Systems Oversight Responsibilities: IHS staff and State of Alaska staff.

3d. Calculation Methodology:

Unit of Measure: Rural Alaska homes.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: EPA ANV HQ Coordinator, Matthew Richardson; EPA ANV Project Officer, EPA Region 10 staff, Dennis Wagner (Reg 10) .

Final Reporting Oversight Responsibilities: The State of Alaska retrieves data from STARS via reports generated through STARS dataset queries and through the U.S. Census Bureau's American Community Survey. The State then sorts, filters and QA the data against the previously reported data for reporting on the ANV measure. The data is then compiled into a measures monitoring spreadsheet. The data is then provided to the EPA program staff.

OWM Immediate Office (who imports the data into ACS), OW Immediate Office, OMB, OCFO, etc.

Final Reporting Timing: Housing information is undergoes QA/QC and is collected once annually at the end of the construction year (typically March) in order to capture progress over the previous construction season. For example, housing information collected in March 2014 reflects progress through calendar year 2013.

4b. Data Limitations/Qualifications:

The data is limited by the accuracy of reported data in STARS and the quality assurance procedures performed by IHS and the State of Alaska. EPA does not know the precise definitions and data quality procedures used by IHS and the State of Alaska to create the original data. IHS requires that the top 20% of SDS projects are to have cost estimates within 10% of the actual costs.

4c. Third-Party Audits:

No external audits are currently underway (as of February 2014) but EPA in regular communication with IHS about improving STARS data.

In 2011-2012 EPA conducted a detailed internal program evaluation of both the CWISA and the Drinking Water Infrastructure Grant Tribal Set-Aside (DWIG-TSA) Programs, which also use IHS STARS data for reporting their measures. The evaluation assessed the tribal set-aside programs and included program implementation issues, measures and outcomes applicability, and the identification of any needed improvements. The final evaluation report is available online at <http://www.epa.gov/evaluate/pdf/water/eval-drinking-water-and-clean-water-infrastructure-tribal-set-aside-grant-programs.pdf>

Measure Code: fs1 - Percent of women of childbearing age having mercury levels in blood above the level of concern.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

1 - Protect Human Health

Sub-Objective Number and Title:

2 - Fish and Shellfish Safe to Eat

Strategic Target Code and Title:

1 - By 2018, reduce percentage of women of childbearing age having mercury levels above level of concern

Managing Office:

Office of Science and Technology

1a. Performance Measure Term Definitions:

Women of Childbearing Age: 16 - 49 years of age

Mercury Levels in Blood: NHANES collects information about a wide range of health-related behaviors, performs a physical examination and collects samples for laboratory tests. Beginning in 1999, NHANES became a continuous survey, sampling the U.S. population annually and releasing the data in two-year cycles. (Note, however, that the Fourth Report was issued four years after the Third Report.) The sampling plan follows a complex, stratified, multistage, probability-cluster design to select a representative sample of the civilian, noninstitutionalized population in the United States. Additional detailed information on the design and conduct of the NHANES survey is available at <http://www.cdc.gov/nchs/nhanes.htm>

Level of Concern: This measure is the percentage of women of childbearing age with blood mercury concentrations within a factor of 10 of those associated with neurodevelopmental effects. This measure was selected because it provides an indication of levels of exposure in the human population to organic mercury, where the main source is the consumption of fish and shellfish contaminated with methylmercury. As consumers follow fish consumption advice, levels of mercury in blood will decrease. Find out more about EPA's efforts to reduce mercury exposure at <http://www.epa.gov/hg/>

2a. Original Data Source:

The Centers for Disease Control and Prevention (CDC) National Center for Health Statistics (NCHS). National Center for Health Statistics (NCHS) collects the data for women's blood levels through the National Health and Nutrition Examination Survey (NHANES), and is responsible for releasing the data to the public. NHANES is a survey designed to assess the health and nutritional status of adults and children in the U.S. The NHANES Web site is <http://www.cdc.gov/nchs/nhanes.htm> Data from NHANES is recognized as the primary database in the United States for national statistics on blood levels of certain chemicals of concern among the general population and selected subpopulation groups.

2b. Source Data Collection:

Collection Methodology: Survey, field sampling. NHANES collects information about a wide range of health-related behaviors, and includes a physical examination and samples for laboratory tests. The sampling plan follows a complex, stratified, multistage, probability-cluster design to select a representative sample of the civilian, noninstitutionalized population in the United States. The NHANES survey examines a nationally representative sample of approximately 5,000 men, women, and children each year located across the U.S. CDC's National Center for Health Statistics (NCHS) is responsible for the conduct of the survey and the release

of the data to the public. The NHANES survey program began in the early 1960s as a periodic study. Beginning in 1999, NHANES became a continuous survey, sampling the U.S. population annually and releasing the data in 2-year cycles. Results are published with a 95% confidence interval.

The NHANES survey contains detailed interview questions covering areas related to demographic, socio-economic, dietary, and health-related subjects. It also includes an extensive medical and dental examination of participants, physiological measurements, and laboratory tests (including blood and urine testing). Specific laboratory measurements of environmental interest include: metals (e.g. lead, cadmium, and mercury), VOCs, phthalates, organophosphates (OPs), pesticides and their metabolites, dioxins/furans, and polyaromatic hydrocarbons (PAHs). NHANES is unique in that it links laboratory-derived biological markers (e.g. blood, urine etc.) to questionnaire responses and results of physical exams. NHANES measures blood levels in the same units (i.e., ug/dL) and at standard detection limits. Additional information on the interview and examination process can be found at the NHANES web site at <http://www.cdc.gov/nchs/nhanes.htm>

Because NHANES is based on a complex multi-stage sample design, appropriate sampling weights should be used in analyses to produce estimates and associated measures of variation. Analytical guidelines issued by NCHS provide guidance on how many years of data should be combined for an analysis. Details about the methodology, including statistical methods, are reported in the Third and Fourth National Reports on Human Exposure to Environmental Chemicals. The CDC National Center for Health Statistics (NCHS) provides guidelines for the analysis of NHANES data at http://www.cdc.gov/nchs/data/nhanes/nhanes_03_04/nhanes_analytic_guidelines_dec_2005.pdf Assumptions inherent in the CDC's analysis are delineated in the Data Sources and Data Analysis chapter of the national reports. Additional detailed information on the design and conduct of the NHANES survey is available at <http://www.cdc.gov/nchs/nhanes.htm>

Change in Methodology for Estimating Percentiles, from the CDC: "In the Third National Report on Human Exposure to Environmental Chemicals, weighted percentile estimates for 1999–2000 and 2001–2002 data were calculated using SAS Proc Univariate and a proportions estimation procedure. A percentile estimate may fall on a value that is repeated multiple times in a particular demographic group defined by age, sex and race (e.g., in non-Hispanic white males 12-19 years old, five results that all have a value of 90.1). Since the Third Report, we have improved the procedure for estimating percentiles to better handle this situation. This improved procedure makes each repeated value unique by adding a unique negligibly small number to each repeated value. All data from 1999–2004 have been reanalyzed using this new procedure to handle situations where the percentile falls on a repeating value. Therefore, occasional percentile estimates may differ slightly in the current Fourth Report compared to the Third Report. Appendix A gives the details of the new procedure for estimating percentiles." (http://www.cdc.gov/exposurereport/data_tables/data_sources_analysis.html)

Geographical Extent: The sample is selected from the civilian, non-institutionalized U.S. population.

Quality Procedures: The data comes from the NHANES study, which CDC has designed to have a high quality. CDC follows standardized survey instrument procedures to collect data to promote data quality and data are subjected to rigorous QA/QC review. CDC's National Center for Environmental Health (NCEH) and National Center for Health Statistics (NCHS) are responsible for QA/QC of laboratory analysis and NHANES datasets that are made publicly available through CDC/NCEH's website. Background documentation is available at the NHANES Web site at <http://www.cdc.gov/nchs/nhanes.htm> The following documents provide background

information specific to data quality: [http://www.cdc.gov/nchs/data/nhanes/nhanes_01_02/lab_b_generaldoc.pdf - search=%22quality%20control%20NHANES%22](http://www.cdc.gov/nchs/data/nhanes/nhanes_01_02/lab_b_generaldoc.pdf-search=%22quality%20control%20NHANES%22) and [http://www.cdc.gov/nchs/data/nhanes/nhanes_03_04/lab_c_generaldoc.pdf - search=%22quality%20NHANES%22](http://www.cdc.gov/nchs/data/nhanes/nhanes_03_04/lab_c_generaldoc.pdf-search=%22quality%20NHANES%22)

Additional information on the interview and examination process can be found at the NHANES web site at <http://www.cdc.gov/nchs/nhanes.htm>

More information on the CDC's program for improving quality of laboratory testing for mercury can be found at: <http://www.cdc.gov/labstandards/lamp.html>

2c. Source Data Reporting:

EPA downloads relevant data directly from CDC databases, in an SAS format that does not require conversion. Source data are not entered into an EPA information system. After calculations are conducted, the result is entered into EPA's Annual Commitment System (ACS), prior to publication, by Office of Water budget staff in either the Office of Science and Technology or the immediate Office of Water (HQ).

The data used by EPA for EPA's 2012 result (reflecting 2009-2010 data) are published in Table 5 of the report, Trends in Blood Mercury Concentrations and Fish Consumption Among U.S. Women of Reproductive Age, NHANES, 1999-2010 .The report will be available at [http://water.epa.gov/scitech/swguidance/fishshellfish/fishadvisories/technical.cfm - tabs-4](http://water.epa.gov/scitech/swguidance/fishshellfish/fishadvisories/technical.cfm-tabs-4)

The CDC National Center for Health Statistics (NCHS) has a policy for release of and access to NHANES data at http://www.cdc.gov/nchs/data/nhanes/nhanes_general_guidelines_june_04.pdf Although the studies are supposed to be on a two-year schedule, they have not always been timely.

Background: The CDC reports the full array of NHANES results in its National Reports on Human Exposure to Environmental Chemicals (and updates to the data tables): <http://www.cdc.gov/exposurereport/> The most recent report (published in December 2009), the Fourth National Report on Human Exposure to Environmental Chemicals, is the reporting format for this measure. This report presents exposure data for the U.S. population over the two-year survey period of 2003–2004. The Fourth Report also includes data from 1999–2000 and 2001–2002, as reported in the Second and Third National Reports on Human Exposure to Environmental Chemicals.

In the Fourth Report, CDC presents data on 212 chemicals, including results for 75 chemicals measured for the first time in the U.S. population. The Updated Tables (published in February 2012) provide nationally-representative biomonitoring data from the 2007-2008 survey cycle of the National Health and Nutrition Examination Survey (NHANES) for 51 of the environmental chemicals measured in the Fourth Report on Human Exposure to Environmental Chemicals, as well as results for prior survey cycles.

3a. Relevant Information Systems:

System Description: EPA's Annual Commitment System (ACS) is used to record and transmit the data for performance results for the measure. ACS is a module of the Agency's Budget Formulation system BFS Please see the DQR for BFS for additional information

Source/Transformed Data: ACS contains only transformed data – the final result – for this measure.

Information System Integrity Standards: Please see the DQR for BFS for additional information.

3b. Data Quality Procedures:

Data quality procedures are detailed in the project's Quality Assurance Project Plan titled, "Statistical and Technical Support for Fish Advisory Analyses." The EPA Project Manager maintains the QAPP. NHANES data are evaluated for timeliness, representativeness, comparability, and completeness. The data are downloaded, maintained, and analyzed in SAS files by an EPA contractor – no conversion is necessary. Senior contractor personnel review the work of junior staff and of each other. The contractor examines the NHANES documentation to determine whether the data from the 6 sets of releases were collected in the same manner. In preparing the methodology, the contractor reviewed the NHANES analytic guidelines to ensure use of appropriate statistical methodologies and weights. The EPA Project Manager provides overall management of the project and oversees appropriate internal reviews of the contractor's analysis and reporting.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Not applicable.

Source Data Reporting Oversight Responsibilities: Not applicable.

Information Systems Oversight Personnel: Please see the DQR for BFS for additional information.

Information Systems Oversight Responsibilities: Please see the DQR for BFS for additional information.

3d. Calculation Methodology:

Decision Rules for Selecting Data: For its analysis, EPA selects all records of women of childbearing age for the sample time frame in question (for 2012, the timeframe was 2009-2010). From those records, EPA captures data on measured blood mercury levels.

Definitions of Variables:

Please see Section 1a, Performance Measure Term Definition.

Explanation of the Calculations:

The percent of women of childbearing age with blood mercury greater than 5.8 µg/L was calculated using SAS survey procedures. The survey procedures incorporate the sample weights and the stratification and clustering of the design into the analysis, yielding proper estimates and standard errors of estimates. A variable was derived that indicated if a participant had blood mercury greater than 5.8 µg/L, coded as 1 if yes, and 0 if no. Then SAS procedure SurveyMeans was used to determine the proportion of women of childbearing age with levels greater than 5.8 µg/L. Estimating the mean of a 0/1 variable provides a proportion. The standard error of the proportion was also estimated. The calculation used balanced repeated replication weights to account for the survey design. The procedure computes the variance with replication methods by using the variability among replicate estimates to estimate the overall variance.

Explanation of Assumptions: Not applicable.

Unit of Measure: Percent of women of childbearing age

Timeframe of Result. EPA uses the most recent two-year sampling period. For the result reported FY 2012, the most recent available two-year sampling period is 2009-2010.

Documentation of Methodological Changes: Any methodological changes are documented in the project QAPP.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Branch Chief of the Fish, Shellfish, Beach and Outreach Branch / Standards and Health Protection Division / Office of Science and Technology / Office of Water.

Final Reporting Oversight Responsibilities: Forward result to Office of Water budget staff for entry of data into ACS, and ensure result is accurate prior to publication.

Final Reporting Timing: Every two years, approximately in December, on the following cycle: FY 2012 report using 2009-2010 data; FY 2014 report using 2011-2012 data; etc.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications:

Representativeness:

- NHANES is designed to provide estimates for the civilian, non-institutionalized U.S. population. NHANES is a voluntary survey and selected persons may refuse to participate. In addition, the NHANES survey uses two steps, a questionnaire and a physical exam. There are sometimes different numbers of subjects in the interview and examinations because some participants only complete one step of the survey. Participants may answer the questionnaire but not provide the more invasive blood sample. Special weighting techniques are used to adjust for non-response.
- The periodic reports from NHANES provide a direct measure of mercury in blood levels in a representative sample of the US population. The current design does not permit examination of exposure levels by locality, state, or region; seasons of the year; proximity to sources of exposure; or use of particular products. For example, it is not possible to extract a subset of the data and examine levels of blood mercury that represent levels in a particular state's population.

Precision: The standard error of the percent over 5.8 µg/L is reported along with the percent. The 95% CI for the percent can be calculated with the equation: $\% \pm (1.96 * SE)$. This is consistent with the Third and Fourth National Reports on Human Exposure to Environmental Chemicals, which provide 95% confidence intervals for all statistics.

Comparability: The measure can be compared to estimates from other sets of NHANES releases. If doing this, one should note the change in laboratory procedures that occurred between the 2001-2002 and 2003-2004 sets of data.

Data Lag: Data lags may prevent performance results from being determined for every reporting year. Performance results will be updated as NHANES data are published either in the official CDC report on human exposure to environmental chemicals or other journal articles or as the data becomes available. There can be a substantial lag between CDC sampling and publication of data. For instance, the result reported for FY 2012 is based upon data from the sampling period of 2009-2010.

Methodological Changes: Between the Third National Report and the Fourth National Report, the CDC changed its method of estimating percentiles, as described under Source Data Collection Methodology of this DQR. This does not affect the interpretations of the EPA results as the measure is not based off of a percentile.

4c. Third-Party Audits:

The NCHS of CDC appointed a panel to review NHANES. The report is available at:
www.cdc.gov/nchs/data/bsc/NHANESReviewPanelReportrapril09.pdf

Measure Code: 4pg - Loading of biochemical oxygen demand (BOD) removed (million pounds/year) from the U.S.-Mexico border area since 2003.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

9 - U.S.-Mexico Border Environmental Health

Strategic Target Code and Title:

1 - Provide safe drinking water or adequate wastewater sanitation

Managing Office:

Office of Wastewater Management (OWM)

1a. Performance Measure Term Definitions:

U.S.-Mexico Border area: The area 100km North and South of the U.S.-Mexico border.

Loading of biochemical oxygen demand removed since 2003: The amount of pollutant (biochemical oxygen demand [BOD]) from wastewater that has been removed (either through sanitary sewer connections or wastewater treatment plant upgrades) since 2003 as a result of completed Border Environment Infrastructure Fund (BEIF) supported projects. The removal of BOD, which is listed as a conventional pollutant in the US Clean Water Act, can be used as a gauge of the effectiveness of wastewater treatment plants. BOD is released into the environment when homes lack wastewater treatment or when wastewater treatment plants lack adequate treatment processes.

Background:

This measure reflects the work of EPA's U.S.-Mexico Border Water Infrastructure Program, a cooperative program that aims to improve human health and environmental quality along the international boundary by improving drinking water quality and wastewater sanitation. For more information, please see

<http://water.epa.gov/infrastructure/wastewater/mexican/index.cfm>

2a. Original Data Source:

Border Environment Cooperation Commission (BECC) and North American Development Bank (NADB). For more information on the BECC and NADB, please visit <http://www.cocef.org/> and <http://www.nadb.org/> respectively.

2b. Source Data Collection:

Methodology: Projections of BOD removal are based on actual average daily flows at wastewater treatment plants, when available, or incorporate per-capita averages typical of the region. Actual influent and effluent water quality data are used when available and are otherwise based on accepted engineering averages.

Quality Procedures: BECC and NADB are responsible for field verification of project information and progress. EPA Regions are responsible for evaluation of reports from BECC and NADB on drinking water and wastewater sanitation projects. Regional representatives attend meetings of the certifying and financing entities for border projects (BECC and NADB), review various planning and construction related documents and conduct project oversight visits of projects to confirm information accuracy. EPA Headquarters compiles, reviews and tracks information provided by the EPA Regions.

Geographical Extent: The area 100km North and South of the U.S.-Mexico border.

Spatial Detail: N/A

Dates Covered by Source Data: 2003 to present

2c. Source Data Reporting:

Quarterly reports submitted by BECC and NADB to EPA. The BECC and NADB report on the construction progress of certified drinking water and wastewater projects, as well as homes connected to potable water and wastewater collection and treatment systems, applicable design specifications, and water quality and flow data for removal of biochemical oxygen demand. "Certified" means a project that has completed planning and design and has been approved by the BECC/NADB board for construction funding.

No formal EPA database. Performance is based on construction completion of certified projects, which is tracked and reported quarterly by the Border Environment Cooperation Commission (BECC) and the North American Development Bank (NADB). Data fields are: population served by, and homes connected to, potable water and wastewater collection and treatment systems and, applicable design specifications, water quality and flow data for removal of biological oxygen demand (BOD).

3a. Relevant Information Systems:

System Description: No formal EPA database. Performance is based on construction completion of certified projects, which is tracked and reported quarterly by the Border Environment Cooperation Commission (BECC) and the North American Development Bank (NADB) in an Excel spreadsheet format. Data fields are: population served by, and homes connected to, potable water and wastewater collection and treatment systems; and applicable design specifications, water quality, and flow data for removal of biochemical oxygen demand (BOD).

Source/Transformed Data: Source data is provided by EPA grantees and verified by the EPA project officers.

Information System Integrity Standards: Data quality assurance procedures are articulated in Quality Assurance Project Plans (QAPPs) for each grant. No formal data system (beyond simple spreadsheets and paper files) has been needed to store this information. The Border Program typically completes fewer than 10 projects per year. Thus, there are few data points to track.

3b. Data Quality Procedures:

EPA Regions 6 and 9 hold quarterly meetings with the certifying and financing entities for Border water infrastructure projects, the Border Environment Cooperative Commission (BECC) and the North American Development Bank (NADB). Regional EPA staff review various planning and construction related documents. These documents include design specifications for each project. Annual BOD targets for this measure are based on these design specifications. Regional staff also conduct oversight visits of project sites to confirm information accuracy and review monthly and quarterly reports from BECC and NADB. The monthly and quarterly reports document project completions. As projects are nearing completion, BOD targets and BOD removal estimates are updated to more accurately reflect actual wastewater treatment volumes, treatment efficiencies, and actual outflows. EPA Headquarters compiles, reviews, and tracks information provided by the EPA Regions. This information can be cross-referenced with the BECC and NADB monthly or quarterly reports as needed.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Team Leader/Environmental Engineer, Region 6; Team Leader/Environmental Engineer, Region 9; Subobjective Lead/Program Analyst, Headquarters.

Source Data Reporting Oversight Responsibilities: Regional project officers and regional environmental engineers (Regions 6 and 9) gather and verify source data and report annual results to the subobjective lead. The headquarters subobjective lead for the Border Program compiles annual targets and results and reports these results.

Information Systems Oversight Personnel: N/A

Information Systems Oversight Responsibilities: N/A

3d. Calculation Methodology:

Decision Rules for Selecting Data: N/A

Definitions of Variables: N/A

Explanation of Calculations and Assumptions: Concentrations of BOD at wastewater treatment plants (pre- and post- treatment) are multiplied by flow rates to determine the removal of BOD on a mass-basis for each project site. Concentrations are based on actual influent and effluent water quality data when available, or are otherwise based on accepted engineering averages. Flow rates are the actual average daily flows at wastewater treatment plants, when available, or incorporate per-capita averages typical of the region. EPA compiles influent and effluent concentrations (mg/L) of BOD for BEIF-funded wastewater treatment and collection projects from either site-specific water quality data or accepted engineering averages. These influent and effluent concentrations are then multiplied by their site-specific average daily flow rates or per-capita averages typical of the region. The difference between the influent and effluent BOD, when multiplied by the corresponding flow rate, is used as the BOD loading (lbs./yr.) removed from each site. These site-specific reductions are then aggregated annually to determine the total BOD loading removed from the US-Mexico Border resulting from the BEIF-funded wastewater infrastructure projects.

Unit of Measure: Millions of pounds of BOD

Timeframe of Result: 2003-end of most recent fiscal year

Documentation of Methodological Changes: Not applicable.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Planning and Evaluation Coordinator, OWM/OW

Final Reporting Oversight Responsibilities: Team Leader, Planning and Evaluation Team, OW

Final Reporting Timing: The Planning and Evaluation Coordinator reviews and reports information for the sub-office (OWM). The Planning and Evaluation Team Lead reviews information for the Office of Water.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: This measure only estimates the amount of waste (BOD) removed from Border area water bodies as a result of EPA-funded wastewater treatment projects. It does not capture the

total amount of "BOD removal" from other, non-EPA funded projects, nor does it estimate the total BOD loadings for individual water ways.

Once a project is completed, it's "BOD removal per year" is assumed to be constant. In reality, treatment flows and treatment efficiency can change from year-to-year. The measure is meant to describe the combined impact of multiple projects, but is not meant to track the ongoing performance of each individual project.

Data Lag Length and Explanation: No significant data lag.

Methodological Changes: Not applicable.

4c. Third-Party Audits:

EPA Office of Inspector General (IG) report: <http://www.epa.gov/oig/reports/2008/20080331-08-P-0121.pdf>

Measure Code: xg1 - Restore water and habitat quality to meet water quality standards in impaired segments in 13 priority coastal areas (cumulative starting in FY 07).

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

6 - Restore and Protect the Gulf of Mexico

Strategic Target Code and Title:

1 - Reduce releases of nutrients throughout the Mississippi River Basin

Managing Office:

1a. Performance Measure Term Definitions:

Restore water and habitat quality: 196.45 acres of habitat were restored.

Water quality standards: The Gulf of Mexico Program supports the Gulf States' goal to return impaired waters to established designated uses and/or water quality standards.

Impaired: The waterbody does not meet water quality standards or is threatened for one or more designated uses by one or more pollutants.

Segments: 617 impaired segments removed, 30 restored, and 60 Total Mass Daily Loading (TMDL) determinations established.

13 priority coastal areas: There are 67 coastal watersheds at the 8-digit hydrologic unit code (HUC) scale on the Gulf Coast. The five Gulf States (Florida, Alabama, Mississippi, Louisiana, and Texas) identified 13 priority coastal areas to receive targeted technical and financial assistance for projects that restore impaired water quality. For the current reporting period, the 5 Gulf States have identified 617 specific water segments that are not meeting State water quality standards.

Background: The EPA's Gulf of Mexico Program Office (GMPO; see <http://www.epa.gov/gmpo/> reports on this performance measure. In FY 2007, this measure replaced measure GM-1, which tracked water and habitat quality in 12 priority coastal areas along the Gulf of Mexico. This measure tracks the number of impaired segments previously listed as not meeting water quality standards for a particular pollutant but are now delisted from the current 303(d) report and meeting water quality standards.

For more information on water quality throughout the United States, visit EPA's "Surf Your Watershed" website at <http://cfpub.epa.gov/surf/locate/map2.cfm> For more information on water quality in the Gulf of Mexico watersheds, visit EPA GMPO's "Surf Your Gulf Watershed" website at <http://www.epa.gov/gmpo/surfgulf/>

The tables and maps generated for each water quality monitoring cycle are uploaded to the "Surf Your Gulf Watershed" website, and the website details the impaired segments for the Gulf Program's 13 priority areas, which are the focus of this measure.

2a. Original Data Source:

Gulf States (Texas, Louisiana, Mississippi, Alabama and Florida) provide data on the status of their impaired waterbody segments.

2b. Source Data Collection:

Collection Methodology and Quality Procedures: State-specific Decision Documents provide information on collection methodology and quality procedures, effectively acting as Quality Assurance Project Plans for the state 303(d) data. These decision documents can generally be found on the websites for EPA's Regional offices. A "shapefile" supports the development of maps which depict the status of a stream segment for either impaired, restored or TMDL established. These maps are informational and linked to their respective watershed area.

Geographical Extent: US regional (13 priority coastal areas along the Gulf of Mexico).

Spatial Detail: Gulf-wide; coastal 8-digit HUCs from Texas to Florida.

2c. Source Data Reporting:

Data Submission: One data submission instrument is biannual state 303(d) reports on the status of their impaired waterbody segments, as required under Clean Water Act (CWA) Section 305(b) and as determined by the TMDL schedule. Shapefiles with geospatial data related to 303(d) segments are also acquired from the relevant States and are used in the calculation of this measure.

Data Entry: Data is gathered from public sources (see 3. Information Systems and Data Quality Procedures).

Frequency and Timing of Data Transmission: States submit their 303(d) reports every two years. The EPA's Gulf of Mexico Program does not directly influence the frequency or timing of data transmission. The five Gulf States report data on a schedule coordinated with their respective Regional Office - either Region 4 (FL, MS and AL data) or Region 6 (LA and TX data).

3a. Relevant Information Systems:

System Description: EPA's "Surf Your Watershed" (see <http://cfpub.epa.gov/surf/locate/map2.cfm> and EPA's WATERS (Watershed Assessment Tracking and Environmental Results) Expert Query Tool (see http://www.epa.gov/waters/tmdl/expert_query.html are the databases for this performance measure. ATTAINS (see <http://www.epa.gov/waters/ir/>

Surf Your Watershed: <http://cfpub.epa.gov/surf/locate/map2.cfm>

WATERS: The Watershed Assessment, Tracking, and Environmental Results System (WATERS) is used to provide water program information and display it spatially using a geographic information system integrated with several of EPA's existing databases. These databases include the STOrage and RETrieval (STORET) database, the Assessment TMDL Tracking and Implementation System (ATTAINS), the Water Quality Standards Database (WQSDB), and the Grants Tracking and Reporting System (GRTS). This water quality information was previously available only from several independent and unconnected databases. Under WATERS, the Water Program databases are connected to a larger framework. This framework is a digital network of surface water features, known as the National Hydrography Dataset (NHD). By linking to the NHD, one Water Program database can reach another, and information can be shared across programs.

General information about WATERS is at <http://www.epa.gov/waters/> A system architecture diagram is available at <http://www.epa.gov/waters/about/arch.html> Information about WATERS geographic data is available at <http://www.epa.gov/waters/about/geography.html> Information about tools that can be used with WATERS is at <http://www.epa.gov/waters/tools/index.html> For example, WATERS can be used to view information compiled from states' listings of impaired waters as required by Clean Water Act Section 303(d), which are recorded in the Assessment, TMDL Tracking, and Implementation System (ATTAINS). This information (found at http://iaspub.epa.gov/waters10/attains_nation_cy.control?p_report_type=T is used to generate reports that identify waters that are not meeting water quality standards ("impaired waters") and need one or more TMDLs to be developed.

Source/Transformed Data: Data is not "transformed"; it is extracted from the source material (State-developed Decision Documents, the WATERS Expert Query Tool, and "Surf Your Watershed") in order to monitor 13 priority watersheds around the Gulf of Mexico.

Information System Integrity Standards: The EPA Gulf of Mexico developed a "Quality Assurance Project Plan (QAPP) for the Gulf of Mexico 303(d) Priority Watershed Inventory Mapping", which was approved by EPA Region 4 on April 19, 2007.

3b. Data Quality Procedures:

To create the best report possible, three EPA sources are used to cross-reference the data. Each source is verified with the other two sources. The waterbodies listed as impaired in the Decision Documents for Florida, Alabama, and Mississippi are compared to "Surf Your Watershed" and then to the WATERS Expert Query Tool. Louisiana and Texas have a different form for the Decision Documents in that only the delisted water bodies are listed in the document. For these two states, "Surf Your Watershed" and WATERS Expert Query Tool are used. All the data is cross-referenced; "Surf Your Watershed" is cross referenced with WATERS and the Decision Documents, and WATERS are cross-referenced to the Decision Documents. It is pertinent that each of the sources matches, and no discrepancies in the listed impaired segments are found. No state documents are used in this process, since all state documents have to go through EPA review. Thus, the EPA sources used are a result of EPA reviewing the state documents.

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

Source Data Reporting Oversight Responsibilities: Reference the approved QAPP.

Information Systems Oversight Personnel: Chief of Staff.

Information Systems Oversight Responsibilities: Reference the approved QAPP.

3d. Calculation Methodology:

Decision Rules for Selecting Data and Definitions of Variables: After all data are cross-referenced against each of the sources, tables are created for each watershed in the Gulf of Mexico Program's Priority Watershed Inventory. In all, 67 tables are created and populated with information obtained from "Surf Your Watershed". These tables include an ID number for the segment to view the location of the segment on the map, the segment ID with a link to "Surf Your Watershed", name of the state basin the segment is located within, the watershed the segment is located in, the name of the waterbody, the number of impairments for that segment, the impairments for that segment, and the year the impairment is listed. Delisting information is also listed in the tables for segments that have that information available. The information available in that

table includes the ID number, the segment ID, the waterbody name, what impairment was delisted, the basis for the delisting, and a link to the TMDL document (if it exists). Segments shared among two or more watersheds are highlighted for easier recognition when counting the number of segments duplicated among watersheds.

Shapefiles are acquired from the states that contain the 303(d) segments for that state. Although the segments listed in the shapefile do not always match the documents that EPA provides ("Surf Your Watershed", WATERS Expert Query Tool, and Decision Documents). Therefore, it may be necessary to contact the state for additional shapefiles that contain other segments not available in the shapefile originally obtained from the state. The data is grouped by the watershed with a name to represent the area in the shapefile (ex. 2002_03170009_303d_line). New fields are added to the shapefile to provide meaningful data to the Gulf of Mexico Program Office. New fields include, ID number (which matches the number from the tables), TMDL status (Impaired Water Segment, TMDL Completed, Restored), Number of Impairments for that segment, List of Impairments for that segment, and the waterbody name for that segment. Maps are then generated for each watershed to show the number of impairments in each of the watersheds. Impaired Water Segments are visible with a red cross hatch, while a segment that has a TMDL completed would appear with a yellow cross hatch, and a Restored segment would appear with a blue cross hatch. Each segment is then labeled with the ID number found in the shapefile and table. All maps include the HUC number and name, the map, legend, scale bar, inset map, GMPO logo and a disclaimer for the state (if one was provided), and the date the map was created. In all, 67 maps are created.

Explanation of Calculations: The maps are generated by using the data contained in the shapefiles.

Explanation of Assumptions: Not applicable.

Unit of Measure: Number of impaired segments in each priority watershed.

Timeframe of Result: Two-year cycle. Current reporting cycle is called "2012" but uses the 2010 reports, as the 2012 reports have yet to be released by the State agencies.

Documentation of Methodological Changes: Not applicable.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel:

Final Reporting Oversight Responsibilities: Specific duties are specified in the PARS Critical Element for [removed]. Duties include: tracking data and delisting performance for each Gulf State, reporting the data on the "Surf Your Watershed" website maintained by the Gulf of Mexico Program, and creating and posting color maps to visualize the impaired and/or delisted stream segments.

Final Reporting Timing: States report 303(d) data on a 2-year cycle.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: No error estimate is available.

Data Lag Length and Explanation: Data is updated every two years on “Surf Your Watershed” and in the WATERS Expert Query Tool due to the fact that states submit a 303(d) report every two years of the status of the impaired segments in each state as required in Clean Water Act (CWA) 305(b) report.

Methodological Changes: Not applicable.

4c. Third-Party Audits:

There are no outside reviews of the tables and maps used to calculate this performance measure.

Measure Code: wq3 - Improve water quality conditions in impaired watersheds nationwide using the watershed approach (cumulative).

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

1 - Improve Water Quality on a Watershed Basis

Strategic Target Code and Title:

2 - Improve water quality conditions in 620 impaired watersheds nationwide using the watershed approach

Managing Office:

Office of Wetlands Oceans and Watersheds

1a. Performance Measure Term Definitions:

This measure demonstrates the capacity for watershed-scale restoration and incremental water quality improvement using the “watershed approach.”

Improve water quality conditions: In 2002, 4,737 watersheds were listed as having 1 or more waterbodies impaired. For this measure, one or more of the waterbody/impairment causes identified in 2002 must be removed, as reflected in EPA-approved state assessments, for a) at least 40% of the impaired waterbodies or impaired stream miles/lake acres in the watershed; or b) if there is significant watershed-wide improvement, as demonstrated by valid scientific information, in one or more water quality parameters or related indicators associated with the impairments. Removal of an impairment cause means the original specific impairment cause listed by the state or EPA in 2002 is no longer impairing the waterbody, as reflected in subsequent state-submitted assessments and EPA-approved 303(d) lists.

Impaired watersheds: For purposes of this measure, watershed means (a) a hydrologic unit at the scale of 12-digit hydrologic unit codes, or HUC-12, as determined by the draft or final Watershed Boundary Dataset (WBD); or (b) a regionally-defined hydrologic unit of appropriate scale. Watersheds at this scale average 22 square miles in size. (The second definition includes waters, such as coastal and estuary waters, which fall outside the WBD, and may or may not be hydrologically definable at a scale comparable to inland HUC-12s.) Watersheds or hydrologic units at the 12-digit scale are technically termed "sub-watersheds" by the U.S. Geological Survey (USGS).

An impaired watershed is a watershed containing one or more impaired waterbodies. Impairment refers to an “impairment cause” in state- or EPA-reported data, stored in ATTAINS (Assessment Total Maximum Daily Load (TMDL) Tracking and Implementation System) or its predecessors NTTS (National TMDL Tracking System) or ADB (Assessment Database). (Any waterbody listed as impaired in these databases must have an impairment cause entered.) Any such removals of waterbody impairments will be recorded based on reports from states scheduled every two years through 2012.

Watershed approach: This term refers to a coordinating process for focusing on priority water resource problems focused on hydrologically-defined areas. This type of approach involves key stakeholders and uses an iterative planning or adaptive management process to address priority water resource goals. It also uses an integrated set of tools and programs. Functionally, the watershed approach is a problem-solving tool for

protecting water quality and aquatic resources. It recognizes that factors affecting the health of our nation's waters should be understood within their watershed context. It includes: assessment of relevant watershed hydrological and ecological processes, socioeconomic factors, identification of priority issues and most promising corrective actions, involvement by affected parties throughout the process, and implementation at the required scale. See EPA's website at

<http://water.epa.gov/type/watersheds/approach.cfm> for more information. The watershed approach can be applied at any appropriate scale, including scales smaller or larger than the HUC-12 watersheds described above. Thus, for this measure, one watershed effort could result in improvements in one or in many HUC-12 watersheds, depending on its scale. For consistency, however, all successes under this measure will be reported as numbers of HUC-12 watersheds.

Nationwide: All 50 states.

Background:

This measure is reported as the cumulative number of the 2002-listed watersheds within the 4,737 watersheds; 39,503 water bodies were identified by states or EPA as not meeting water quality standards. The waterbodies and waterbody segments were identified in state-submitted Section 303(d) lists, Section 305(b) reports, and Integrated Reports, for the 2002 reporting cycle. (See EPA's guidance for reporting under "303(d) Listing of Impaired Waters Guidance" at <http://www.epa.gov/owow/tmdl/guidance.html>. Impairments and/or waterbodies identified after 2002 are not considered under this measure (such changes in scope may be considered when revising this measure for future updates of the Strategic Plan).

This measure is intended to establish and demonstrate a capacity for watershed-scale restoration and protection throughout the country using the "watershed approach." It is not designed to be a measure of what portion of the 12-digit watersheds in the country have improved or meet water quality standards.

2a. Original Data Source:

Regional EPA water quality staff make the determinations about whether an individual watershed meets the criteria for this measure.

2b. Source Data Collection:

For a watershed to be counted under SP-12, the state and Region must demonstrate that the watershed approach was applied and that water quality improved. Results and documentation of evidence that water quality conditions in an impaired watershed have improved, based on the watershed approach, must be reviewed and approved by the Regional office.

EPA's assessment of incremental improvements of water quality conditions utilizes (1) information on impairments from the 2002 303(d) list, described above; (2) 12-digit hydrologic unit code (HUC) boundaries (in 2009, boundaries and data on 12-digit HUC code watersheds were completed, certified and stored on USDA's comprehensive website for HUC watershed information - see

<http://www.ncgc.nrcs.usda.gov/products/datasets/watershed/index.html>); and (3) data and/or information on "watershed-wide water quality improvement" relative to the identified pollutant or response indicator listed as the impairment.

An individual watershed may be counted only once under this measure. That is, a watershed may be counted only when it initially meets the definition. Subsequent actions/restoration efforts resulting in additional

impairment causes removed or additional water quality parameters showing water-wide improvements do not enable the watershed to be counted again in subsequent reporting periods.

2c. Source Data Reporting:

When reporting on this measure, the region must provide the following information as demonstration of the watershed approach:

- Applicable HUC-12 or defined watershed(s)
- Key stakeholders involved and role of each
- Description of watershed plan developed and how it was implemented
- Description of restoration activities
- Documentation of results

The guidance for this measure describes two options for meeting the two SP-12 definitions.

Option 1. Reporting Watershed Improvement Based on Impairment Removal. This option corresponds to the first definition of improvement under this measure. The region must demonstrate that the removal of impairment causes meets the 40% threshold. That is, one or more waterbody impairment causes identified in 2002 are removed for at least 40% of the impaired waterbodies or stream miles/lake acres in the watershed. Option 1 is perhaps the most rigorous of the three options.

Option 2. Reporting Watershed-wide Improvement Based on Monitoring. This option corresponds to the second definition of improvement under this measure. It utilizes water quality monitoring data to track improvements occurring across the watershed that have not yet resulted in an impairment being removed. Examples of various monitoring designs are given as part of the guidance. A region may opt to use a statistical approach (option 2a) or multiple-lines-of-evidence approach (option 2b) when documenting the measure.

Results reported under this measure must be provided using a standardized template. When reporting results to ACS, the Region must submit the template immediately or within 45 days after entering results in ACS. Headquarters will provide an electronic storage location for the templates. Currently this location is the EPA Portal at <http://portal.epa.gov/> using the Watershed Managers Forum project in the Environmental Science Connector (ESC). This location may change in the future. The regions post their templates to the ESC site and notify Christopher Zabawa at Zabawa.Christopher@epa.gov by e-mail.

Detailed information on meeting the criteria and reporting for this measure is contained in “Guidance for Reporting Watershed Improvement under Measure SP-12 – FY 2009” (December 2008), found at http://water.epa.gov/resource_performance/planning/FY-2012-NWPG-Measure-Definition/cfm - Measure%20Code %WQ SP12 N11

3a. Relevant Information Systems:

The Assessment and Total Maximum Daily Load (TMDL) Tracking And ImplementatioN System (ATTAINS) is the database which captures water quality information related to this measure. ATTAINS is an integrated system that documents and manages state assessment and listing/delisting decisions reported under sections 305(b) and 303(d) (i.e., integrated reporting). This system holds information about assessment decisions and restoration actions across reporting cycles and over time until water quality standards are attained More information about ATTAINS can be found at <http://www.epa.gov/waters/data/prog.html> and http://www.epa.gov/waters/ir/about_integrated.html

The Watershed Assessment, Tracking, and Environmental Results System (WATERS) is used to provide water program information and display it spatially using a geographic information system (National Hydrography Dataset (NHD)) integrated with several of EPA's existing databases. These databases include the STORage and RETrieval (STORET) database, ATAINS, the Water Quality Standards Database (WQSDB), and the Grants Tracking and Reporting System (GRTS). General information about WATERS is available at:

<http://www.epa.gov/waters/>, and a system architecture diagram is available at

<http://www.epa.gov/waters/about/arch.html> Information about WATERS geographic data is available at

<http://www.epa.gov/waters/about/geography.html>

3b. Data Quality Procedures:

Managers in the Water Management Divisions in EPA Regional Offices have the responsibility for oversight, review, and quality assurance of the performance data for this measure.

Periodically the results and documentation for at least one submission from each Region will be reviewed by an EPA SP-12 Review Panel. The Panel will consist of at least two reviewers from Regions other than the reporting Region and at least one reviewer from EPA Headquarters. The Review Panel will recommend whether to accept the watershed(s) to be counted and may develop recommendations for improving the submission to ensure consistency.

3c. Data Oversight:

Source data reporting and oversight are the responsibility of staff personnel and managers in the Water Management Divisions of EPA's Regional Offices. Information systems data entry into ATAINS is performed by the states with EPA regional and headquarters oversight.

3d. Calculation Methodology:

Criteria for selecting which of the 2002-listed watersheds to focus on is at the discretion of the Region water program offices. Results are reported as the cumulative number of 12-digit HUC watersheds that meet the definition of the measure.

4a. Oversight and Timing of Final Results Reporting:

The Associate Division Director of the Assessment and Watershed Protection Division is responsible for overseeing final reporting of this measure. The ADD reports to the Office Director of the Office of Wetlands, Oceans, and Watersheds.

4b. Data Limitations/Qualifications:

The rate of regional progress varies with some regions making significant strides and others scoring small successes. The main factors in this discrepancy primarily relate to a combination of complex watersheds and the reduction in resources at both the state and federal level (e.g., 319 grant funds). For example, watersheds in the mid-Atlantic states tend to be interstate or otherwise multi-jurisdictional, urban or in highly developed/populated areas, and almost always involve many diverse stakeholders. This coupled with stretched budgets further increases the difficulty of attaining significant water quality improvements. As a result, these regions' annual rate of progress is often less than other regions, where monitoring and active restoration efforts are more straightforward.

4c. Third-Party Audits:

Over the past decade or so, independent reports have cited the ways in which weaknesses in monitoring and reporting of monitoring data undermine EPA's ability to depict the condition of the Nation's waters and adequately track water quality improvements. The most recent report on this subject is: USEPA, Office of the Inspector General. 2007. Total Maximum Daily Load Program Needs Better Data and Measures to Demonstrate Environmental Results. Available at: <http://www.epa.gov/oig/reports/2007/20070919-2007-P-00036.pdf>.

In response to these evaluations, EPA has been working with states and other stakeholders to improve 1) data coverage, so that state reports reflect the condition of all waters of the state; 2) data consistency to facilitate comparison and aggregation of state data to the national level; and 3) documentation so that data limitations and discrepancies are fully understood by data users. EPA has taken several steps in an effort to make these improvements:

First, EPA enhanced two existing data management tools (STORET and ADB) so that they include documentation of data quality information.

Second, EPA has developed the GIS tool WATERS that integrates many databases including STORET, ATTAINS, and a water quality standards database. These integrated databases facilitate comparison and understanding of differences among state standards, monitoring activities, and assessment results.

Third, EPA has developed several guidance documents. In 2005, EPA issued guidance using and reporting on Statewide Statistical Survey Data in ATTAINS, and in 2008, the Agency issued Elements of a State Water Monitoring and Assessment Program. These guidance documents are available at <http://www.epa.gov/owow/tmdl/guidance/final52009.html> and <http://www.epa.gov/owow/monitoring/elements/> respectively.

Measure Code: 202 - Acres protected or restored in National Estuary Program study areas.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

2 - Improve Coastal and Ocean Waters

Strategic Target Code and Title:

3 - Protect or restore an additional 600,000 acres of habitat

Managing Office:

Office of Wetlands Oceans and Watersheds

1a. Performance Measure Term Definitions:

Acres of habitat: "Habitat" means aquatic and terrestrial areas within the NEP study area. For purposes of this measure, "Habitat Acres Restored and Protected" encompasses a range of activities and is interpreted broadly to include: creation of habitat, acquisition of sites for the purpose of protection, conservation easements and deed restrictions, increasing submerged aquatic vegetation coverage, increasing the number of permanent shellfish bed openings, and increasing the amount of anadromous fish habitat. Habitat acreage serves as an important surrogate and a measure of on-the-ground progress made toward EPA's annual performance goal of habitat protection and restoration in the NEP.

Protected: "Protect" refers to preserving areas through acquisition, conservation easements, deed restrictions, etc.

Restored: "Restore" refers to the return of habitat to a close approximation of its prior condition.

National Estuary Program (NEP) study areas: An estuary is a partially enclosed body of water along the coast where freshwater from rivers and streams meet and mix with salt water from the ocean. The National Estuary Program (NEP) includes 28 estuaries in EPA Regions 1, 2, 3, 4, 6, 9 and 10. EPA provides funding to independent National Estuary Programs for each of those estuaries. For more information about NEP, go to: <http://water.epa.gov/type/oceb/nep/index.cfm>

Study areas: The NEP Study Areas include the estuary and adjacent watersheds that could impact the water quality and ecological integrity of the estuary; these are the areas that the NEPs focus on. For a graphical display of the 28 estuaries, visit: http://water.epa.gov/type/oceb/nep/upload/NatGeo_24x36_final_revised.pdf

Background:

The Office of Wetlands, Oceans, and Watersheds has developed a standardized nomenclature for defining habitat protection and restoration activities

(http://www.epa.gov/owow_keep/estuaries/pivot/habitat/gpra_def.htm and specifying habitat categories

(http://www.epa.gov/owow_keep/estuaries/pivot/habitat/habtype.htm)

2a. Original Data Source:

The 28 National Estuary Programs

2b. Source Data Collection:

Collection Methodology: Primary data are prepared by staff in each NEP based on their own reports and on data provided by partner agencies/organizations that directly engage in habitat protection and restoration activities. NEP documents such as annual work plans, which report on NEP achievements during the previous year, annual progress reports, State of the Bay reports, and implementation tracking materials document the number of acres of habitat restored and protected. EPA has defined and provided examples of protection and restoration activities for purposes of tracking and reporting associated with these measures at the website for the agency's Performance Indicators Visualization and Outreach Tool (PIVOT):

http://www.epa.gov/owow/keep/estuaries/pivot/habitat/hab_fr.htm

Geographical Extent: The study areas of the 28 National Estuary Programs vary from Program to Program. Some are less than 100 square miles, while others are several thousand square miles. For a graphical display of the 28 estuaries, visit:

http://water.epa.gov/type/oceb/nep/upload/NatGeo_24x36_final_revised.pdf

Spatial Detail: NEPs provide latitude and longitude data (where possible) for each protection and restoration project.

Quality Procedures: EPA requests that the NEPs follow EPA guidance to prepare their reports, and to verify the numbers. See "Frequently asked NEPORT Questions" document for more information.

Attached Documents:

Frequently Asked NEPORT Questions 6-21.docx

2c. Source Data Reporting:

Each NEP reports data to the respective EPA regional office. NEPs and EPA track habitat projects using a standardized format for data reporting and compilation, defining habitat protection and restoration activities and specifying habitat categories that the Office of Wetlands Oceans and Watersheds has developed. On or about September 1 each year, the NEPs enter their habitat data into the National Estuary Program On-line Reporting Tool (NEPORT), an online reporting system/database that is managed by EPA. NEPORT is an internal database intended for NEPs use only. Members of the general public do not have access to NEPORT.

Attached Documents:

Frequently Asked NEPORT Questions 6-21.docx

3a. Relevant Information Systems:

System Description:

NEPORT. The National Estuary Program On-Line Reporting Tool (NEPORT) is a web-based database that EPA's Office of Wetlands Oceans and Watersheds developed. NEPORT was developed for National Estuary Programs (NEPs) to submit their annual Habitat and Leveraging reports. <http://gispub2.epa.gov/NEPMap/index.html> NEPORT was developed by the Office of Wetlands Oceans and Watersheds as a standardized format for data reporting and compilation, defining habitat protection and restoration activities and specifying habitat categories.

NEPORT was intended to reduce the reporting burden on NEPs and the time required for quality assurance and quality control. Starting in FY06, NEPs were required to submit their Habitat and Leveraging reports through NEPORT. NEPORT replaces the prior data reporting protocols in which EPA distributed Habitat and Leveraging forms to NEPs and NEPs completed the forms and submitted them to EPA. Through NEPORT, NEPs are able to download Habitat and Leveraging reports into Microsoft Excel, create pie charts and save them in bitmap format, access data on a secure web site, check report status, and search for NEP staff contact information. At the same time, EPA is able to store NEP data on a centralized database and receive e-mail reports on newly submitted data.

For more information about NEPORT, see <http://www.epa.gov/owow/keep/estuaries/neport/index.html>

PIVOT. The Performance Indicators Visualization and Outreach Tool (PIVOT) is a reporting tool that visually communicates NEP progress toward protecting and restoring habitat to a wide range of stakeholders and decision makers. It can display aggregate national and regional data for this measurement, as well as data submitted by each NEP. The website highlights habitat loss/alteration, as well as the number of acres protected and restored by habitat type. Data can be displayed numerically, graphically, and by habitat type. PIVOT data are publicly available at http://www.epa.gov/owow/keep/estuaries/pivot/habitat/hab_fr.htm

Source/Transformed Data: Data originates from the NEPs.

Attached Documents:

Frequently Asked NEPORT Questions 6-21.docx

3b. Data Quality Procedures:

Each year, after the data has been entered by the NEPs, the regions complete a QA/QC review within two weeks, to validate the habitat data. For projects where the NEPs provide latitude and longitude data, these data are mapped. Precisely identifying project sites helps to highlight where projects are located in each NEP study area. It also makes it possible for NEPs and EPA to validate NEPORT data, and highlights where different partners may be double counting acreage. This QA/QC may include circling back to a NEP requesting that they redo their submission before the Region “approves” the data.

After Regional review, EPA Headquarters (HQ) conducts a brief examination to finalize and approve all the data 2 weeks after Regional approval. In the process, EPA confirms that the national total accurately reflects the information submitted by each program.

EPA is confident that the annually-reported data are as accurate as possible. EPA actions are consistent with data quality and management policies. The Office of Water Quality Management Plan (July 2002) is available on the Intranet at <http://intranet.epa.gov/ow/informationresources/quality/qualitymanage.html>

Risk Management Procedures: EPA conducts regular reviews of NEP implementation to help ensure that information provided in NEP documents is accurate, and progress reported is in fact being achieved. EPA's triennial NEP program evaluations include a review of the data reported by the NEPs' over the three year period. Reporting in FY 2007 through FY 2009 did not indicate that any improvements to any of the databases

associated with this measure were needed. For information on how the evaluations are conducted, please see EPA's September 28, 2007, National Estuary Program Evaluation Guidance:

http://water.epa.gov/type/oceb/nep/upload/2009_03_26_estuaries_pdf_final_guidance_sept28.pdf

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Headquarters' NEP Coordinator

Source Data Reporting Oversight Responsibilities: Reviews the submitted habitat acres data and conducts a QA/QC of the NEP projects.

Information Systems Oversight Personnel: Headquarters' NEP Coordinator

Information Systems Oversight Responsibilities: Reviews the submitted habitat acres data and conducts a QA/QC of the NEP projects.

3d. Calculation Methodology:

Decision Rules for Selecting Data: The key field used to calculate annual performance is habitat acreage.

Definitions of Variables: Not applicable.

Explanation of Calculations: After EPA Regional Offices and HQ staff validate individual NEP totals, EPA HQ aggregates the selected acreage data provided by each NEP to arrive at a national total for all 28 estuaries in the NEP.

Explanation of Assumptions: Not applicable.

Unit of Measure: Acres

Timeframe of Result: Regions report the data in early September, a QA/QC is then conducted which takes approximately one month.

Documentation of Methodological Changes: Not applicable.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Environmental Protection Specialist

Final Reporting Oversight Responsibilities: Review the habitat acres reported by each of the Regions and conduct a QA/QC of each of the projects for accuracy.

Final Reporting Timing: Annual

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: Current data limitations include: (1) information that may be reported inconsistently across the NEPs because they may interpret the meaning of "protection and restoration" differently; (2) acreage amounts may be miscalculated or incorrectly reported, and (3) acreage may be double-counted (i.e., the same parcel may also be counted by more than one partner, or the same parcel may be counted more than once because it has been restored several times over a period of years). Also habitat restored, improved, and protected may not directly correlate to overall improvements in the health of that

habitat (particularly in the year of reporting); rather, habitat acreage protected and restored is only one indicator of habitat health and of on-the-ground progress made by the NEPs.

Data Lag Length and Explanation: Data lag time is approximately one month, from the time it is submitted to the time it is approved.

Methodological Changes: None

4c. Third-Party Audits:

Not applicable

Measure Code: 4G - Number of acres restored and improved under the 5-Star, NEP, 319, and great water body programs (cumulative).

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

3 - Increase Wetlands

Strategic Target Code and Title:

1 - Working with partners, achieve a net increase of wetlands nationwide

Managing Office:

Office of Wetlands Oceans and Watersheds

1a. Performance Measure Term Definitions:

Wetlands: As defined by this measure use the biological definition, Cowardin et al. (1979). This classification system for wetlands became a U.S. Fish and Wildlife Service Standard (1980) as well as the Federal Geographic Data Committee standard for wetlands monitoring and reporting (December 17, 1996). The Cowardin et al definition indicates that wetlands must have one or more of the following three attributes: 1) at least periodically, the land supports predominantly wetland or hydrophytic plants; 2) predominantly undrained hydric soils; and 3) the substrate is non-soil and is saturated with water or covered by shallow water at some time during the growing season of each year. This means that areas that fall into one of the following five categories are considered wetlands for the purpose of this report: 1) areas with hydrophytic plants and with hydric soils, 2) areas without hydrophytic plants but with hydric soils such as mudflats, 3) areas with hydrophytic plants but non-hydric soils which include areas in which hydric soils have not yet developed, 4) areas without soils but with hydrophytic plants such as seaweed covered portions of rocky shores; and 5) areas without soil and without hydrophytic plants such as gravel beaches and rocky shores without vegetation.

Restored: "Restore or create" wetlands result in a gain of wetland acres and includes:

a. Creation of wetland that did not previously exist on an upland or deepwater

site. These actions are referred to as "establishment" by the White House Wetlands Working Group (WHWWG). "Establishment" is the manipulation of the physical, chemical, or biological characteristics present to develop a wetland on an upland or deepwater site, where a wetland did not previously exist. Establishment results in a gain in wetland acres.

b. Restoration of a former wetland to natural/historic functions and resulting value. Typically, such a former wetland had been drained for some purpose. These actions are known as "re-establishment" by the WHWWG. "Re-establishment" is the manipulation of the physical, chemical, or biological characteristics of a site with the goal of returning natural or historic functions to a former wetland. Re-establishment results in rebuilding a former wetland and results in a gain in wetland acres.

Improved: "Improve" wetlands results in a gain of wetlands function or quality, rather than additional acreage, and includes:

a. Repair of the natural/historic functions and associated values of a degraded wetland. The WHWWG refers to these actions as "rehabilitation" of wetlands. "Rehabilitation" is the manipulation of the physical, chemical, or biological characteristics of a site with the goal of repairing natural or historic functions of a degraded wetland. Rehabilitation results in a gain in wetland function but does not result in a gain in wetland acres.

b. Heightening, intensification, or improvement of one or more selected

functions and associated values. The WHWWG called these types of actions “enhancement.” Enhancement is undertaken for a purpose such as water quality improvement, flood water retention, or wildlife habitat. "Enhancement" is the manipulation of the physical, chemical, or biological characteristics of a wetland (undisturbed or degraded) site to heighten, intensify, or improve specific function(s) or to change the growth stage or composition of the vegetation present. Enhancement is undertaken for specified purposes such as water quality improvement, flood water retention, or wildlife habitat. Enhancement results in a change in wetland function(s) and can lead to a decline in other wetland functions, but does not result in a gain in wetland acres. This term includes activities commonly associated with enhancement, management, manipulation, and directed alteration.

5-Star: This National Fish and Wildlife Foundation program provides modest financial assistance on a competitive basis to support community-based wetland, riparian, and coastal habitat restoration projects that build diverse partnerships and foster local natural resource stewardship through education, outreach and training activities. NFWF is a 501(c)(3) non-profit that preserves and restores our nation’s native wildlife species and habitats. The organization was created by Congress in 1984. In addition to EPA, major funding is provided by FedEx, Pacific Gas & Electric's Nature Restoration Trust and Southern Company. For more information, see EPA's website for the program (<http://www.epa.gov/owow/wetlands/restore/5star/>) and NFWF's website for the program

(http://www.nfwf.org/AM/Template.cfm?Section=Charter_Programs_List&Template=/TaggedPage/TaggedPageDisplay.cfm&TPLID=60&ContentID=17901)

NEP: EPA's National Estuary Program (NEP) was established by Congress in 1987 to improve the quality of estuaries of national importance. The National Estuary Program (NEP) includes 28 estuaries in EPA Regions 1, 2, 3,4,6,9, and 10. For more information, go to: <http://water.epa.gov/type/oceb/nep/index.cfm>

319: The 1987 amendments to the Clean Water Act (CWA) established the Section 319 Nonpoint Source Management Program. Section 319 addresses the need for greater federal leadership to help focus state and local nonpoint source efforts. Under Section 319, states, territories and tribes receive grant money that supports a wide variety of activities including technical assistance, financial assistance, education, training, technology transfer, demonstration projects and monitoring to assess the success of specific nonpoint source implementation projects. Grant recipients have the option to enter information about whether the project affects wetlands and to indicate the number of acres restored, improved, or protected.

Great Water Body Program: The Great Water Body Programs include: the Chesapeake Bay Program Office located in Region 3, the Great Lakes Program Office located in Region 5, the Gulf of Mexico Program Office located in Region 4.

Cumulative: The baseline for this measure is FY 2006, when EPA reported that 58,777 acres of wetland were restored and improved through the Five Star Restoration Grants, the National Estuary Program, Section 319 Nonpoint Source Grants, Brownfield Grants, and EPA Great Water Body Programs.

Background:

· From 1986-1997, the U.S. had an annual net wetland loss of an estimated 58,500 acres, as measured by the U.S. Fish and Wildlife Service. From 1998-2004, the U.S. achieved a net cumulative increase of 32,000 acres per year of wetlands, as measured by the U.S. Fish and Wildlife Service.

· A number of national programs include efforts to restore and improve wetlands. These acres may include those supported by the Wetland Five Star Restoration Grants, the National Estuary Program, Section 319 Nonpoint Source (NPS) Grants, Brownfield grants, or EPA's Great Water Body Programs. This does not include enforcement or mitigation acres. This measure is shared with other offices including: EPA Office of Wetlands, Oceans, and Watersheds Divisions, EPA Office of Solid Waste and Emergency Response (OSWER) Brownfields Office, EPA Gulf of Mexico Program Office, EPA Great Lakes National Program Office, and the Chesapeake Bay Program Office.

· National Estuary Program (NEP): The Office of Wetlands, Oceans, and Watersheds (OWOW) has developed a standardized nomenclature for defining habitat protection and restoration activities (http://www.epa.gov/owow/keep/estuaries/pivot/habitat/gpra_def.htm and specifying habitat categories (<http://www.epa.gov/owow/keep/estuaries/pivot/habitat/habtype.htm> Additional information regarding habitat protection is accessible on a web page that highlights habitat loss/alteration, as well as the number of acres protected and restored by habitat type (http://www.epa.gov/owow/keep/estuaries/pivot/habitat/hab_fr.htm The website visually communicates NEP progress toward protecting and restoring habitat to a wide range of stakeholders and decision makers.

2a. Original Data Source:

5-Star: National Fish and Wildlife Foundation (NFWF)

NEP: The 28 National Estuary Programs funded by EPA. The National Estuary Program (NEP) includes 28 estuaries in EPA Regions 1, 2, 3, 4, 6, 9, and 10. For more information about NEP, go to:

<http://water.epa.gov/type/oceb/nep/index.cfm>

319: State agencies that are grant recipients for wetlands projects from State NPS Management Programs and Section 319 funded work programs.

Great Water Body Program: The Great Water Body Programs include and restoration or improvement of wetland resources through: the Chesapeake Bay Program Office located in Region 3, the Great Lakes Program Office located in Region 5, the Gulf of Mexico Program Office located in Region 4. Acreage data from these programs have not been reported under this measure because of their initial inability to provide timely information starting in 2004 when the measure was initiated.

2b. Source Data Collection:

Collection Methodology and Quality Procedures:

5-Star Program: The National Fish and Wildlife Foundation (NFWF), EPA's 5-Star grantee, maintains a subgrant outcome tracking system that tracks the acres of wetlands enhanced, established, or re-established, miles of riparian buffer restored, and other information such as number of volunteers engaged in restoration activities.

5-Star data entered by grantee, the National Fish and Wildlife Foundation, and the National Association of Counties from annual and final reports from subgrantees into the common grantee managed database.

Subgrantees will report the number of acres of wetlands by habitat restoration and improvement activity type from their annual and final reports. EPA has defined and provided examples of protection and restoration activities for purposes of tracking and reporting associated with these measures. Subgrantees determine the number of acres they have restored or improved using hand held GPS units and estimating acreage from those GPS points. Subgrantees provide acres effect and a description of the activities on those acres. EPA then double-checks and determines final restoration or improvement designations for those acres from the description provided for each project.

NEP: Primary data are prepared by staff in each NEP based on their own reports and on data provided by partner agencies/organizations that directly engage in habitat protection and restoration activities. NEP documents such as annual work plans, which report on NEP achievements during the previous year, annual progress reports, State of the Bay reports, and implementation tracking materials document the number of acres of habitat restored and protected. EPA has defined and provided examples of protection and restoration activities for purposes of tracking and reporting associated with these measures at the website for the agency's Performance Indicators Visualization and Outreach Tool (PIVOT):

http://www.epa.gov/owow_keep/estuaries/pivot/habitat/hab_fr.htm EPA requests that the NEPs follow EPA guidance to prepare their reports, and to verify the numbers.

Section 319 Grants:

States have continual access and opportunity to review the information in GRTS to ensure it accurately reflects the data they entered (according to their QA procedures).

· Nonpoint Source Program and Grants Guidelines for States and Territories. October 23, 2003
(<http://www.epa.gov/OWOW/NPS/cwact.html>)

Great Water Body Program: Acreage data from these programs have not been reported under this measure because of their initial inability to provide timely information starting in 2004 when the measure was initiated.

Geographical Extent: The study areas of the 28 National Estuary Programs. For a graphical display of the 28 estuaries, visit:

http://water.epa.gov/type/oceb/nep/upload/NatGeo_24x36_final_revised.pdf For 5-Star and 319 the study areas are found national-wide. For 5-Star visit: http://water.epa.gov/grants_funding/wetlands/restore/index.cfm

Spatial Detail: NEPs and 5-Star projects provide latitude and longitude data (where possible) for each protection and restoration project. 319 projects provide state, county, township data and will also provide latitude and longitude data.

2c. Source Data Reporting:

5-Star: NFWF provides to EPA annual documentation of acres of wetlands acreage enhanced, established, or re-established and stream miles buffered and/or restored during the life of the cooperative agreement in accordance with OWOW requirements. Data for this measure are kept in the Wetlands Program's Five-Star Restoration Grant Database. For the next four years NFWF will be providing EPA information on or around September 30 through their annual grant report.

NEP: Each NEP reports data to the respective EPA regional office. NEPs and EPA track habitat projects using a standardized format for data reporting and compilation, defining habitat protection and restoration activities and specifying habitat categories that the Office of Wetlands Oceans and Watersheds has developed. On or about September 1 each year, the NEPs enter their habitat data into the National Estuary Program On-line Reporting Tool (NEPORT), an online reporting system/database that is managed by EPA. NEPORT is an internal database intended for NEPs use only. Members of the general public do not have access to NEPORT.

Section 319 Grants: As part of the basic reporting requirements specified by CWA section 319(h), EPA requires reporting through the section 319 Grants Reporting and Tracking System (GRTS). States are encouraged to attach final project reports completed under their grants to the Project Evaluation field in GRTS. States also

enter, if applicable, if the project affects wetlands (an optional field) and indicates the number of acres restored, improved, or protected.

· USEPA. Modifications to Nonpoint Source Reporting Requirements for Section 319 Grants. September 27, 2001.

Great Water Body Program: The Great Water Body programs have not submitted any data for this measure since its inception in 2004 when the measure was initiated.

3a. Relevant Information Systems:

System Description:

5-Star: Five-Star Restoration Grant Database. Data for this measure are kept in the Five-Star Restoration Grant Database. NFWF launched a new, paperless grants management system in 2008 and Five Star subgrants awarded under the current cooperative agreement will be managed using this system. The system allows NFWF to evaluate both the quantitative and qualitative outcomes for individual subgrants and attribute individual projects to the attainment of overall programmatic outcomes. Managing the grants includes overseeing the completion of restoration and training projects and collecting regular financial and programmatic updates from grantees. NFWF also has populated its web-based Grants Library with grant files and subgrant outcomes (final project reports) for all grant programs across the country. Five Star subgrants have been and will continue to be integrated in to this online, browser-based, publically searchable database.

NEP: NEPORT. The National Estuary Program On-Line Reporting Tool (NEPORT) is a web-based database that EPA's Office of Wetlands Oceans and Watersheds developed. NEPORT was developed for National Estuary Programs (NEPs) to submit their annual Habitat and Leveraging reports.

<http://gispub2.epa.gov/NEPMap/index.html> NEPORT was developed by the Office of Wetlands Oceans and Watersheds as a standardized format for data reporting and compilation, defining habitat protection and restoration activities and specifying habitat categories.

NEPORT was intended to reduce the reporting burden on NEPs and the time required for quality assurance and quality control. Starting in FY06, NEPs were required to submit their Habitat and Leveraging reports through NEPORT. NEPORT replaces the prior data reporting protocols in which EPA distributed Habitat and Leveraging forms to NEPs and NEPs completed the forms and submitted them to EPA. Through NEPORT, NEPs are able to download Habitat and Leveraging reports into Microsoft Excel, create pie charts and save them in bitmap format, access data on a secure web site, check report status, and search for NEP staff contact information. At the same time, EPA is able to store NEP data on a centralized database and receive e-mail reports on newly submitted data. For more information about NEPORT, see

<http://gispub2.epa.gov/NEPMap/index.html>

PIVOT. The Performance Indicators Visualization and Outreach Tool (PIVOT) is a reporting tool that visually communicates NEP progress toward protecting and restoring habitat to a wide range of stakeholders and decision makers. It can display aggregate national and regional data for this measurement, as well as data submitted by each NEP. The website highlights habitat loss/alteration, as well as the number of acres protected and restored by habitat type. Data can be displayed numerically, graphically, and by habitat type. PIVOT data are publicly available at http://www.epa.gov/owow_keep/estuaries/pivot/habitat/hab_fr.htm

319: GRTS. The Grants Reporting and Tracking System (GRTS) is the primary tool for management and oversight of the EPA's Nonpoint Source (NPS) Pollution Control Program. GRTS is used by grant recipients (State agencies) to supply information about State NPS Management Programs and annual Section 319 funded work programs, which include wetlands and stream restoration and improvement projects. GRTS pulls grant information from EPA's centralized grants and financial databases and allows grant recipients to enter detailed information on the individual projects or activities funded under each grant.

GRTS also provides EPA and other stakeholders greater and more efficient access to data, information, and program accomplishments than would otherwise be available. GRTS provides detailed georeferencing (i.e., National Hydrography Dataset – or “NHD”-- reach addresses) for 319-funded projects, project cost information, load reduction information, and a host of other elements. For more information:

- Users Guide: USEPA. GRTS. Grants Tracking and Reporting System. GRTS Web User Guide, Version 1.6 March 15, 2007. USEPA.

- More information about GRTS is at: <http://iaspub.epa.gov/pls/grts/f?p=110:199:3920887085074706>

Great Water Body Program: Acreage data from the Great Water Body Programs have not been reported under this measure because of their initial inability to provide timely information starting in 2004 when the measure was initiated. Since then the Great Lakes and Chesapeake Bay programs have developed or in the process of developing databases to collect restoration data under their grant programs.

Source/Transformed Data: All databases listed above contain original source data.

Information System Integrity Standards: The NEW PIVOT and the 319 GRTS data systems are both managed to the relevant EPA standards for information systems integrity including the IT Security policy. The 5-Star data system is managed by an EPA grantee, NFWF, and managed using their data security standards. Acreage data from the Great Water Body Programs have not been reported under this measure because of their initial inability to provide timely information starting in 2004 when the measure was initiated.

3b. Data Quality Procedures:

5-Star: EPA is confident that the annually-reported data are as accurate as possible. Any data collected by NFWF will require all subawards use standard reporting templates and data standards to assist the Foundation in meeting all EPA requirements and to ensure data compatibility with OWOW standards. Five Star projects are generally small restoration projects and do not collect sufficient scientific data warranting extensive QA/QC protocols be employed. Documentation of quality control procedures or any observed QA/QC problems will be included as a component in existing reporting requirements and will serve as the equivalent documentation under the EPA's current QA/QC policy. Specific quality control elements that are to be included in the annual reports include: quantity of data, documentation of how and from whom any data will be obtained, (including secondary data and constraints on the data collection process). In addition NFWF will include in their reporting any specific QA/QC activities that will be conducted during data collection that includes how project data will be analyzed, evaluated and data validation procedures for the reporting period if any data collection has occurred.

NEP: EPA is confident that the annually-reported data are as accurate as possible. Each year, after the data has been entered by the NEPs, the regions complete a QA/QC review within two weeks, to validate the habitat data. For projects where the NEPs provide latitude and longitude data, these data are mapped. Precisely identifying project sites helps to highlight where projects are located in each NEP study area. It also makes it possible for NEPs and EPA to validate NEPORT data, and highlights where different partners may be double

counting acreage. This QA/QC may include reporting back to a NEP requesting that they redo their submission before the Region “approves” the data. After Regional review, EPA Headquarters (HQ) conducts a brief examination to finalize and approve all the data 2 weeks after Regional approval. In the process, EPA confirms that the national total accurately reflects the information submitted by each program.

EPA conducts regular reviews of NEP implementation to help ensure that information provided in NEP documents is accurate, and progress reported is in fact being achieved. EPA's triennial NEP program evaluations include a review of the data reported by the NEPs' over the three year period. Reporting in FY 2007 through FY 2009 did not indicate that any improvements to any of the databases associated with this measure were needed. For information on how the evaluations are conducted, please see EPA's September 28, 2007, National Estuary Program Evaluation Guidance:

http://water.epa.gov/type/oceb/nep/upload/2009_03_26_estuaries_pdf_final_guidance_sept28.pdf

319: EPA Regions and Headquarters staff periodically review data entered in GRTS and remind states of the critical importance of their completing mandated data elements in a timely, high-quality manner. Regional personnel also maintain hardcopies of the states work programs, watershed project implementation plans, and Annual Progress Reports. Verification of data in GRTS can be cross-checked with these documents to ensure quality, consistency, and reliability in progress reporting on an incremental (such as, year-to-year) basis, or to note any problems in data quality in GRTS. EPA frequently reviews various aggregation(s) of all the data in GRTS by our use of “ad-hoc” and standard reports available in the GRTS reporting system. The agency sponsors national GRTS-users group meetings each year. These meetings serve not only to meet the training needs of the user community, but also provide a forum for discussing needed enhancements to GRTS. These enhancements range from better capturing environmental results to improving consistency of data entry to facilitate state-by-state comparisons.

State CWA 319 Quality Management Plans (QMPs), are also periodically reviewed and approved by EPA Regions.

Great Water Body Program: Acreage data from the Great Water Body Programs have not been reported under this measure because of their initial inability to provide timely information starting in 2004 when the measure was initiated.

Office of Water: EPA actions are consistent with data quality and management policies. Reporting in FY 2007 through FY 2009 did not indicate that any improvements to any of the databases associated with this measure were needed. The Office of Water Quality Management Plan (July 2002) is available on the Intranet at <http://intranet.epa.gov/ow/informationresources/quality/qualitymanage.html>

Attached Documents:

OW_QMP.pdf

3c. Data Oversight:

Source Data Reporting Oversight Personnel:

5-Star: 5-Star Grant Project Officer; Headquarters; Office of Water; Office of Wetlands, Oceans, and Watersheds; Wetlands Division; Wetland Strategies and State Programs Branch.

NEP: Regional NEP Coordinators; Regions

319: Regional GRTS Coordinators; Regions

Great Water Body Program: Acreage data from the Great Water Body Programs have not been reported under this measure because of their initial inability to provide timely information starting in 2004 when the measure was initiated.

Source Data Reporting Oversight Responsibilities: All oversight personnel check grantee-reporting data against hardcopies and spot check quality of data entry.

Information Systems Oversight Personnel:

5-Star: 5-Star Grant Project Officer; Headquarters; Office of Water; Office of Wetlands, Oceans, and Watersheds; Wetlands Division; Wetland Strategies and State Programs Branch.

NEP: National NEP Coordinator; Headquarters; Office of Water; Office of Wetlands, Oceans, and Watersheds; Oceans and Coastal Protection Division; Coastal Management Branch.

319: National GRTS Coordinator; Headquarters; Office of Water; Office of Wetlands, Oceans, and Watersheds; Assessment and Watershed Protection Division, Nonpoint Source Branch.

Great Water Body Program: Acreage data from the Great Water Body Programs have not been reported under this measure because of their initial inability to provide timely information starting in 2004 when the measure was initiated.

Information Systems Oversight Responsibilities: All information systems oversight personnel manage either grantees or contractors who maintain each of the data systems per contract or grant QA/QC procedures.

3d. Calculation Methodology:

Decision Rules for Selecting Data: Data has to be located in one of the three listed databases after QA/QC procedures have been finalized. Data includes projects that are finalized in the applicable fiscal year; all projects that are not finalized in the applicable fiscal are excluded. Data from all projects that do not address wetlands are excluded (these include upland areas not defined as wetlands on Tab 1 of this database.) All projects for restoration or improvement are added together excluding projects that protect wetlands.

Definitions of Variables: Definitions of all variables are described in Tab 1 of this database.

Explanation of Calculations: The “Wetland Acres Restored or Improved” measure is calculated by adding together wetlands acres from the restoration and improvement projects reported from each of the relevant programs (NEP, 319, and 5-Star) tracking and reporting systems for grants. These databases are as follows: the 319 Grants Reporting and Tracking System (GRTS), NEP’s Performance Indicators Visualization and Outreach Tool (PIVOT) and Wetlands Program’s Five-Star Restoration Grant Database. Acreage data from the

Great Water Body Programs have not been reported under this measure because of their initial inability to provide timely information starting in 2004 when the measure was initiated.

Explanation of Assumptions: All projects are finalized in each applicable fiscal year. Projects do not include routine operations and maintenance of wetlands.

Unit of Measure: Acres of wetlands restored and improved

Timeframe of Result: Annual.

Documentation of Methodological Changes: Not applicable.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Senior Budget Officer, Headquarters, Office of Water, Office of Wetlands, Oceans, and Watersheds.

Final Reporting Oversight Responsibilities: Oversight personnel checks the final numbers provided in the system and checks them for reasonability and approves final number.

Final Reporting Timing: Annual by fiscal year.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: Current data limitations include: (1) information that may be reported inconsistently across the NEPs, CWA 319, and 5-Star projects because they may interpret the meaning of “protection and restoration” differently; (2) acreage amounts may be miscalculated or incorrectly reported, and (3) acreage may be double-counted (i.e., the same parcel may also be counted more than one partner, or the same parcel may be counted more than once because it has been restored several times over a period of years).

Data Lag Length and Explanation: No data lag. All data is reported at the end of each fiscal year.

Methodological Changes: Not applicable.

4c. Third-Party Audits:

In the past, Nonpoint Source Program reporting under Section 319 had been identified as an Agency-level weakness under the Federal Managers Financial Integrity Act. The Agency’s establishment and subsequent enhancements of GRTS has served to mitigate this problem by requiring states to identify the activities and results of projects funded with Section 319(h).

Measure Code: sf4 - At least seventy-five percent of the monitored stations in the near shore and coastal waters of the Florida Keys National Marine Sanctuary will maintain dissolved inorganic nitrogen (DIN) levels at less than or equal to 0.75 uM and total phosphorus (TP) levels at less than or equal to 0.25 uM.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

2 - Improve Coastal and Ocean Waters

Strategic Target Code and Title:

1 - Improve regional coastal aquatic ecosystem health, as measured on the "Good/Fair/Poor" scale

Managing Office:

EPA Region 4

1a. Performance Measure Term Definitions:

Monitored stations in the near shore and coastal waters of the Florida Keys National Marine Sanctuary: Ongoing quarterly sampling of 112 stations in the FKNMS has provided a unique opportunity to explore the spatial and temporal component of water quality variability. The period of record for monitoring is March 1995 – December 2013 that includes 73 quarterly sampling events within the FKNMS. Funding reductions from EPA in 2012 resulted in the reduction of the spatial monitoring network from 155 to 112 sites and the elimination of monitoring stations within the Dry Tortugas National Park (DRTO) ecosystem.

Total Phosphorus (TP): TP, maintain TP nutrient level less than or equal to 0.25 uM.

Dissolved Inorganic Nitrogen (DIN), maintain DIN nutrient less than or equal to 0.75 uM.

Background:

The Florida Keys are an archipelago of sub-tropical islands of Pleistocene origin which extend in a NE to SW direction from Miami to Key West and out to the Dry Tortugas. In 1990, President Bush signed into law the Florida Keys National Sanctuary and Protection Act (Public Law 101-605) which designated a boundary encompassing 2,900 square nautical miles of islands, coastal waters, and coral reef tract as the Florida Keys National Marine Sanctuary (FKNMS). The Act directed EPA and the State of Florida to develop a Water Quality Protection Plan (WQPP) for the Sanctuary. The original agreement for the water quality monitoring component of the WQPP was subsequently awarded to the Southeast Environmental Research Program at Florida International University and the field sampling program began in March 1995.

As required by the Florida Keys National Marine Sanctuary and Protection Act of 1990, EPA and its partners developed a comprehensive long-term status and trends monitoring program as a critical component of the Water Quality Protection Program for the FKNMS. The comprehensive monitoring program was initiated in 1995 and includes water quality, coral reef and seagrass components. (This measure relates to the water quality component.) The overall monitoring program was designed to address the primary objective of the comprehensive long-term monitoring program for the FKNMS - to provide data needed to make unbiased, statistically rigorous statements about the "status of and trends in" selected water quality conditions and biological communities in the Sanctuary. All three monitoring projects (water quality, coral reef and seagrass)

have demonstrated the ability to detect change over time and are suitable for determining the health of the coral reef ecosystem of the FKNMS. In addition, the principal investigators for each monitoring project have developed Web sites where anyone can go and review the data at <http://serc.fiu.edu/wqmnetwork/FKNMS-CD/index.htm> and http://ocean.floridamarine.org/fknms_wqpp/

Historically, EPA has provided the majority of funding for the three monitoring projects, but other agencies (e.g., NOAA, NPS, SFWMD, U.S. Army Corps of Engineers (USACOE), and state/local government agencies) have contributed in the past. In FY15, it is anticipated that EPA provide most of the funding for the three monitoring programs. EPA provides funding via cooperative agreements and the other government agencies provide funds via federal assistance agreements or contracts.

The baseline for this measure is TP \leq 0.25 μ M (75.0%); and DIN \leq 0.75 μ M (75.0%), established by (FY 1995-2005) data.

For more information, please see:

- http://ocean.floridamarine.org/fknms_wqpp/pages/wqpp.html
2013 Annual Report of the Water Quality Monitoring Project, SERC,
http://ocean.floridamarine.org/fknms_wqpp/pages/wqmp.html

2a. Original Data Source:

Florida International University's Southeast Environmental Research Center (SERC). Funded through cooperative agreement X7 00D02412.

The Water Quality and Seagrass Monitoring Projects are conducted by Florida International University's Southeast Environmental Research Center (SERC) and the Coral Reef Evaluation and Monitoring Project is conducted by the Florida Fish and Wildlife Research Institute.

For more information, please see:

http://ocean.floridamarine.org/fknms_wqpp

2b. Source Data Collection:

The comprehensive monitoring program for the FKNMS was developed by a large group of technically competent and knowledgeable scientists familiar with the aquatic environment of the Florida Keys and the coral reef ecosystem. For each monitoring project, EPA worked closely with recognized experts to develop a detailed scope of work including sampling locations and frequency, parameters, field and analytical methods, quality assurance/quality control, data management, and reporting. The monitoring program was designed to provide representative coverage of the entire 2,900 square nautical miles of the Sanctuary. In general, monitoring sites were located throughout the FKNMS on a stratified-random basis and were determined to be compatible with EPA's Environmental Monitoring and Assessment Program protocol (<http://www.epa.gov/region4/sesd/reports/epa904r01002.html>) For the monitoring program, the null hypothesis is that there is no change over time. The field data are tested against the null hypothesis that no change has occurred.

The Water Quality Monitoring Project (WQMP) was initiated in 1995 and samples and data are collected quarterly from 155 stations throughout the FKNMS. In 2012, funding reductions reduced the monitoring network to 112 stations. The WQMP uses a stratified random design based upon EPA's Environmental

Monitoring and Assessment Program (EMAP) and stations are randomly located along near shore to offshore transects. By stratifying the sampling stations according to depth, distance from shore, proximity to tidal passes, and influence of water masses outside the Florida Keys, the project has been able to report on the relative importance of external versus internal factors affecting the ambient water quality within the FKNMS. Numerous (about 18) physical and chemical water quality parameters are tracked by the WQMP. However, for purposes of strategic measures, only four critical water quality metrics are considered. For reef stations, chlorophyll less than or equal to 0.2 micrograms/liter (ug/l) and vertical attenuation coefficient for downward irradiance (K_d , i.e., light attenuation) less than or equal to 0.13 per meter; for all stations in the FKNMS, dissolved inorganic nitrogen less than or equal to 0.75 micromolar and total phosphorus less than or equal to 0.2 micromolar; water quality within these limits is considered essential to promote coral growth and overall health. The "number of samples" exceeding these targets is tracked and reported annually.

The principal investigators for each monitoring project developed and submitted to EPA a Quality Assurance Project Plan (QAPP) to ensure that the data generated are accurate and representative of actual conditions and the degree of certainty of the data can be established. The QAPPs were developed in accordance with EPA guidance documents and the principal investigators consulted with the Regional QA/QC Officer and the Project Officer for the monitoring projects. Through the QAPP, the principal investigators explicitly commit to incorporating procedures that will reduce random and systematic errors. In addition, the principal investigators document quality assurance procedures and evaluate the quality of the data being generated by the monitoring projects. Further, the Technical Advisory Committee (TAC) of the Florida Keys National Marine Sanctuary reviews and assesses the monitoring projects and the data they produce on a regular and continuing basis.

The database management system for the Water Quality Protection Program of the FKNMS is geographic information based (GIS) and used to record the biological, physical, and chemical results from the comprehensive monitoring projects. The data from the three monitoring projects are collected and archived by the database managers at the Florida Fish and Wildlife Research Institute and STORET. The data archives component encompasses both raw and synthesized data. The data integration component incorporates the synthesized data, both tabular and geospatial. These data are integrated into a GIS to facilitate further analysis by scientists and managers. The results data contained within the database integration system are documented with project level metadata as well as attribute or parameter level metadata. Tools are being further developed to allow users to query data by location, date and parameters collected. The overall goal of the database management system is to provide a data integration system that takes into account the varying levels of data produced by the various monitoring projects and the needs of both managers and researchers.

Source Data Collection Frequency: Quarterly

2c. Source Data Reporting:

Results of each monitoring project are reported in annual reports.

SERC's Annual Reports include data on the percentage of stations which meet EPA strategic target levels for dissolved inorganic nitrogen and total phosphorus (see Table 1, pg. 6 of the 2012 report at http://ocean.floridamarine.org/fknms_wqpp/products/wqmp/reports/2012_WQMP_Annual_Report.pdf Performance Period: Annual results are reported each year on a fiscal- year basis.

Data Lag: One year.

FY 2013 results will reflect FY 2012 data.

Quality Documentation: The principal investigators for each monitoring project developed and submitted to EPA a Quality Assurance Project Plan (QAPP); EPA required that the QAPP be approved by EPA before any work could begin on a monitoring project.

3a. Relevant Information Systems:

System Description: Not Applicable

Source/Transformed Data: Not Applicable

Information System Integrity Standards: Not Applicable

3b. Data Quality Procedures:

The Florida International University Southeast Environmental Research Center (FIU-SERC) through annual EPA grants is responsible for collection of the water quality monitoring data for the FKNMS Water Quality Protection Program and the annual reporting of compliance with the Strategic Targets. FIU-SERC's QA program ensures compliance with the QAPP by reviewing data quality, metadata, ensuring data integrity, and providing for the proper storage of data in the EPA STORET and the Florida STORET database systems.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Steven Blackburn, EPA Region 4, Atlanta GA

Source Data Reporting Oversight Responsibilities: The cooperative agreement with FIU for water quality monitoring in the FKNMS requires EPA Region 4 to conduct annual baseline monitoring of the project goals and objectives and periodic advanced monitoring to ensure compliance with QAPP procedures.

Information Systems Oversight Personnel: Florida International University Southeast Environmental Research Center (FIU-SERC)

Information Systems Oversight Responsibilities: Responsible for all aspects of project initiation, field activities, development and implementation, including development of DQOs, ensuring that there are adequate resources to complete the project within time and quality specifications, coordinates training related to procedures and data quality, conducts field audits, and performing Data Quality Assessment (DQA).

3d. Calculation Methodology:

Make determination with the following criteria: 75% of the sampled stations must meet $TP \leq 0.25 \mu M$ and $DIN \leq 0.75 \mu M$. TP and DIN nutrient targets reflect local government activities to improve wastewater treatment and stormwater. The levels for these two parameters were established at the 75 percentile for all data collected for the period of 1995 – 2005.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Steven Blackburn, EPA Region 4, Atlanta GA

Final Reporting Oversight Responsibilities:

Compliance oversight with the QAPP; completion of grant requirements and conditions; reporting EPA Strategic Targets for the Water Quality Monitoring Program; completion of the FKNMS Water Quality Monitoring Annual Report; administration of the monitoring programs annual budgets; and the presentation of monitoring results by the Principal Investigators to the FKNMS Steering Committee, stakeholders and the public at the FKNMS Water Quality Protection Program Steering Committee meeting.

Final Reporting Timing: Results are published annually.

4b. Data Limitations/Qualifications:

There are some data limitations related to the reduction of monitoring stations due to budget realignments and inherent temporal and spatial variability of the 2,900 square mile aquatic ecosystem.

The reduction of sampling stations from 155 sites by which the ten-year baseline was developed to the current 112 sites introduces a bias to the dataset. The sites eliminated included the less human impacted western FKNMS including the Dry Tortugas. Reestablishing a new baseline is currently not possible with a two-year data set at the 112 sites.

The Water Quality Monitoring Project currently collects data from 112 sites within the FKNMS on a quarterly basis. Therefore, error estimates for the 2005 baseline values are mostly due to the large spatial variability and seasonal temporal variability. Because water quality data are not normally distributed, the project uses the median as the measure of central tendency. Dissolved inorganic nitrogen has an interquartile range (IQR) of 0.50 and a median of absolute deviation (MAD) of 0.26. For total phosphorus, the IQR is 0.90 and the MAD is 0.04.

Clearly, there have been large changes in the FKNMS water quality over time, and some sustained monotonic trends have been observed; however, we must always keep in mind that trend analysis is limited to the window of observation. Trends may change, or even reverse, with additional data collection. This brings up another important point; when looking at what are perceived to be local trends, we find that they seem to occur across the whole region but at more damped amplitudes. This spatial auto correlation in water quality is an inherent property of highly interconnected systems such as coastal and estuarine ecosystems driven by similar hydrological and climatological forcing functions. It is clear that trends observed inside the FKNMS are influenced by regional conditions outside the Sanctuary boundaries.

4c. Third-Party Audits:

Battelle Report, Evaluation of the Science Program for the Florida Keys National Marine Sanctuary, EPA Contract Number: 68-C-03-041, May 2007.

Measure Code: sf3 - At least seventy-five percent of the monitored stations in the near shore and coastal waters of the Florida Keys National Marine Sanctuary will maintain Chlorophyll a(CHLA) levels at less than or equal to 0.35 ug l-1 and light clarity (Kd) levels at less than or equal to 0.20 m-1.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

2 - Improve Coastal and Ocean Waters

Strategic Target Code and Title:

1 - Improve regional coastal aquatic ecosystem health, as measured on the "Good/Fair/Poor" scale

Managing Office:

EPA Region 4

1a. Performance Measure Term Definitions:

Monitored stations in the near shore and coastal waters of the Florida Keys National Marine Sanctuary:
Monitored stations in the near shore and coastal waters of the Florida Keys National Marine Sanctuary:
Ongoing quarterly sampling of 112 stations in the FKNMS has provided a unique opportunity to explore the spatial and temporal component of water quality variability. The period of record for monitoring is March 1995 – December 2013 that includes 73 quarterly sampling events within the FKNMS. Funding reductions from EPA in 2012 resulted in the reduction of the spatial monitoring network from 155 to 112 sites and the elimination of monitoring stations within the Dry Tortugas National Park (DRTO) ecosystem.

Maintain:

Chlorophyll a (CHLA): Chlorophyll a(CHLA), estimates the amount of algae in the water.

Light clarity (Kd) levels: Light clarity (Kd) measures the water clarity.

Background:

The Florida Keys are an archipelago of sub-tropical islands of Pleistocene origin which extend in a NE to SW direction from Miami to Key West and out to the Dry Tortugas. In 1990, President Bush signed into law the Florida Keys National Sanctuary and Protection Act (Public Law 101-605) which designated a boundary encompassing 2,900 square nautical miles of islands, coastal waters, and coral reef tract as the Florida Keys National Marine Sanctuary (FKNMS). The Act directed EPA and the State of Florida to develop a Water Quality Protection Plan (WQPP) for the Sanctuary. The original agreement for the water quality monitoring component of the WQPP was subsequently awarded to the Southeast Environmental Research Program at Florida International University and the field sampling program began in March 1995.

As required by the Florida Keys National Marine Sanctuary and Protection Act of 1990, EPA and its partners developed a comprehensive long-term status and trends monitoring program as a critical component of the Water Quality Protection Program for the FKNMS. The comprehensive monitoring program was initiated in 1995 and includes water quality, coral reef and seagrass components. (This measure relates to the water quality component.) The overall monitoring program was designed to address the primary objective of the comprehensive long-term monitoring program for the FKNMS - to provide data needed to make unbiased, statistically rigorous statements about the "status of and trends in" selected water quality conditions and

biological communities in the Sanctuary. All three monitoring projects (water quality, coral reef and seagrass) have demonstrated the ability to detect change over time and are suitable for determining the health of the coral reef ecosystem of the FKNMS. In addition, the principal investigators for each monitoring project have developed Web sites where anyone can go and review the data at <http://serc.fiu.edu/wqmnetwork/FKNMS-CD/index.htm> and http://ocean.floridamarine.org/fknms_wqpp/

Historically, EPA has provided the majority of funding for the three monitoring projects, but other agencies (e.g., NOAA, NPS, SFWMD, U.S. Army Corps of Engineers (USACE), and state/local government agencies) have contributed in the past. In FY15, it is anticipated that EPA provide most of the funding for the three monitoring programs. EPA provides funding via cooperative agreements and the other government agencies provide funds via federal assistance agreements or contracts.

The baseline for this measure is CHL A ≤ 0.35 ug/L (75.0%); and Kd ≤ 0.20 m⁻¹ (75.0%), established by (FY 1995-2005) data.

For more information, please see:

- http://ocean.floridamarine.org/fknms_wqpp/pages/wqpp.html

2013 Annual Report of the Water Quality Monitoring Project, SERC,

http://ocean.floridamarine.org/fknms_wqpp/pages/wqmp.html

2a. Original Data Source:

Florida International University's Southeast Environmental Research Center (SERC). Funded through cooperative agreement X7 00D02412.

The Water Quality and Seagrass Monitoring Projects are conducted by Florida International University's Southeast Environmental Research Center (SERC) and the Coral Reef Evaluation and Monitoring Project is conducted by the Florida Fish and Wildlife Research Institute.

For more information, please see:

http://ocean.floridamarine.org/fknms_wqpp

2b. Source Data Collection:

The comprehensive monitoring program for the FKNMS was developed by a large group of technically competent and knowledgeable scientists familiar with the aquatic environment of the Florida Keys and the coral reef ecosystem. For each monitoring project, EPA worked closely with recognized experts to develop a detailed scope of work including sampling locations and frequency, parameters, field and analytical methods, quality assurance/quality control, data management, and reporting. The monitoring program was designed to provide representative coverage of the entire 2,900 square nautical miles of the Sanctuary. In general, monitoring sites were located throughout the FKNMS on a stratified-random basis and were determined to be compatible with EPA's Environmental Monitoring and Assessment Program protocol

(<http://www.epa.gov/region4/sesd/reports/epa904r01002.html>) For the monitoring program, the null hypothesis is that there is no change over time. The field data are tested against the null hypothesis that no change has occurred.

The Water Quality Monitoring Project (WQMP) was initiated in 1995 and samples and data are collected quarterly from 155 stations throughout the FKNMS. In 2012, funding reductions reduced the monitoring network to 112 stations. The WQMP uses a stratified random design based upon EPA's Environmental Monitoring and Assessment Program (EMAP) and stations are randomly located along near shore to offshore

transects. By stratifying the sampling stations according to depth, distance from shore, proximity to tidal passes, and influence of water masses outside the Florida Keys, the project has been able to report on the relative importance of external versus internal factors affecting the ambient water quality within the FKNMS. Numerous (about 18) physical and chemical water quality parameters are tracked by the WQMP. However, for purposes of strategic measures, only four critical water quality metrics are considered. For reef stations, chlorophyll less than or equal to 0.2 micrograms/liter (ug/L) and vertical attenuation coefficient for downward irradiance (Kd, i.e., light attenuation) less than or equal to 0.13 per meter; for all stations in the FKNMS, dissolved inorganic nitrogen less than or equal to 0.75 micromolar and total phosphorus less than or equal to 0.2 micromolar; water quality within these limits is considered essential to promote coral growth and overall health. The “number of samples” exceeding these targets is tracked and reported annually.

The principal investigators for each monitoring project developed and submitted to EPA a Quality Assurance Project Plan (QAPP) to ensure that the data generated are accurate and representative of actual conditions and the degree of certainty of the data can be established. The QAPPs were developed in accordance with EPA guidance documents and the principal investigators consulted with the Regional QA/QC Officer and the Project Officer for the monitoring projects. Through the QAPP, the principal investigators explicitly commit to incorporating procedures that will reduce random and systematic errors. In addition, the principal investigators document quality assurance procedures and evaluate the quality of the data being generated by the monitoring projects. Further, the Technical Advisory Committee (TAC) of the Florida Keys National Marine Sanctuary reviews and assesses the monitoring projects and the data they produce on a regular and continuing basis.

The database management system for the Water Quality Protection Program of the FKNMS is geographic information based (GIS) and used to record the biological, physical, and chemical results from the comprehensive monitoring projects. The data from the three monitoring projects are collected and archived by the database managers at the Florida Fish and Wildlife Research Institute and STORET. The data archives component encompasses both raw and synthesized data. The data integration component incorporates the synthesized data, both tabular and geospatial. These data are integrated into a GIS to facilitate further analysis by scientists and managers. The results data contained within the database integration system are documented with project level metadata as well as attribute or parameter level metadata. Tools are being further developed to allow users to query data by location, date and parameters collected. The overall goal of the database management system is to provide a data integration system that takes into account the varying levels of data produced by the various monitoring projects and the needs of both managers and researchers.

Source Data Collection Frequency: Quarterly

2c. Source Data Reporting:

Results of each monitoring project are reported in annual reports.

SERC’s Annual Reports include data on the percentage of stations which meet EPA strategic target levels for chlorophyll a and light clarity (see Table 1, pg. 6 of the 2012 report at http://ocean.floridamarine.org/fknms_wqpp/products/wqmp/reports/2012_WQMP_Annual_Report.pdf .

Performance Period: Annual results are reported each year on a fiscal- year basis.

Data Lag: One year.

FY 2013 results will reflect FY 2012 data.

Quality Documentation: The principal investigators for each monitoring project developed and submitted to EPA a Quality Assurance Project Plan (QAPP); EPA required that the QAPP be approved by EPA before any work could begin on a monitoring project.

3a. Relevant Information Systems:

System Description: Not Applicable

Source/Transformed Data: Not Applicable

Information System Integrity Standards: Not Applicable

3b. Data Quality Procedures:

The Florida International University Southeast Environmental Research Center (FIU-SERC) through annual EPA grants is responsible for collection of the water quality monitoring data for the FKNMS Water Quality Protection Program and the annual reporting of compliance with the Strategic Targets. FIU-SERC's QA program ensures compliance with the QAPP by reviewing data quality, metadata, ensuring data integrity, and providing for the proper storage of data in the EPA STORET and the Florida STORET database systems.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: Steven Blackburn, EPA Region 4, Atlanta GA

Source Data Reporting Oversight Responsibilities: The cooperative agreement with FIU for water quality monitoring in the FKNMS requires EPA Region 4 to conduct annual baseline monitoring of the project goals and objectives and periodic advanced monitoring to ensure compliance with QAPP procedures.

Information Systems Oversight Personnel: Florida International University Southeast Environmental Research Center (FIU-SERC)

Information Systems Oversight Responsibilities: Responsible for all aspects of project initiation, field activities, development and implementation, including development of DQOs, ensuring that there are adequate resources to complete the project within time and quality specifications, coordinates training related to procedures and data quality, conducts field audits, and performing Data Quality Assessment (DQA).

3d. Calculation Methodology:

Make determination with the following criteria: 75% of the sampled stations must meet $\text{Chl.a} \leq 0.35 \text{ ug/L}$ and $\text{Kd} \leq 0.20 \text{ m}^{-1}$. Chlorophyll and water clarity reflect local government activities to improve wastewater treatment and stormwater. The levels for these two parameters were established at the 75 percentile for all data collected for the period of 1995 – 2005.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Steven Blackburn, EPA Region 4, Atlanta GA

Final Reporting Oversight Responsibilities: Compliance oversight with the QAPP; completion of grant requirements and conditions; reporting EPA Strategic Targets for the Water Quality Monitoring Program; completion of the FKNMS Water Quality Monitoring Annual Report; administration of the monitoring programs annual budgets; and the presentation of monitoring results by the Principal Investigators to the FKNMS Steering Committee, stakeholders and the public at the FKNMS Water Quality Protection Program Steering Committee meeting.

Final Reporting Timing: Results are published annually.

4b. Data Limitations/Qualifications:

There are some data limitations related to the reduction of monitoring stations due to budget realignments and inherent temporal and spatial variability of the 2,900 square mile aquatic ecosystem.

The reduction of sampling stations from 155 sites by which the ten-year baseline was developed to the current 112 sites introduces a bias to the dataset. The sites eliminated included the less human impacted western FKNMS including the Dry Tortugas. Reestablishing a new baseline is currently not possible with a two-year data set at the 112 sites.

The Water Quality Monitoring Project currently collects data from 155 sites within the FKNMS on a quarterly basis. Therefore, error estimates for the 2005 baseline values are mostly due to the large spatial variability and seasonal temporal variability. Because water quality data are not normally distributed, the project uses the median as the measure of central tendency. For chlorophyll a, the interquartile range (IQR) is 0.29 and the median absolute deviation (MAD) is 0.12. The light attenuation k_d IQR is 0.12 and the MAD is 0.05.

Clearly, there have been large changes in the FKNMS water quality over time, and some sustained monotonic trends have been observed; however, we must always keep in mind that trend analysis is limited to the window of observation. Trends may change, or even reverse, with additional data collection. This brings up another important point; when looking at what are perceived to be local trends, we find that they seem to occur across the whole region but at more damped amplitudes. This spatial auto correlation in water quality is an inherent property of highly interconnected systems such as coastal and estuarine ecosystems driven by similar hydrological and climatological forcing functions. It is clear that trends observed inside the FKNMS are influenced by regional conditions outside the Sanctuary boundaries.

4c. Third-Party Audits:

Battelle Report, Evaluation of the Science Program for the Florida Keys National Marine Sanctuary, EPA Contract Number: 68-C-03-041, May 2007.

Measure Code: E - Percent of the population in Indian Country served by community water systems that receive drinking water that meets all applicable health-based drinking water standards.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

1 - Protect Human Health

Sub-Objective Number and Title:

1 - Water Safe to Drink

Strategic Target Code and Title:

2 - By 2018, drinking water that meets health-based drinking water standards for Indian countries

Managing Office:

Office of Groundwater and Drinking Water

1a. Performance Measure Term Definitions:

The definition of Indian country used by the US Department of Justice can be found at this web link:http://www.justice.gov/usao/eousa/foia_reading_room/usam/title9/crm00677.htm

Community water systems --The U.S. Environmental Protection Agency (EPA) defines a community water system (CWS) as a public water system that serves at least 15 service connections used by year-round residents or regularly serves at least 25 year-round residents. In FY2011 737 CWSs in Indian country regulated by the EPA and Navajo Nation provided water to more than 918 thousand persons.

Health-based drinking water standards-- exceedances of a maximum contaminant level (MCL) and violations of a treatment technique

2a. Original Data Source:

EPA, except for community water systems serving the Navajo Nation, because the Navajo Nation has primacy responsibility for implementing the Safe Drinking Water Act.

2b. Source Data Collection:

The EPA Office of Ground Water and Drinking Water (Headquarters) calculates this measure using data reported in the Safe Drinking Water Information System-Federal (SDWIS-FED) and provides the results to EPA Regions and the Navajo Nation.

This measure includes federally-regulated contaminants of the following violation types: Maximum Contaminant Level, Maximum Residual Disinfection Limit, and Treatment Technique violations. It includes any violations from currently open and closed community water systems (CWSs) that overlap any part of the most recent four quarters.

2c. Source Data Reporting:

Public Water Sanitary System (PWSS) Regulation-Specific Reporting Requirements Guidance. Available on the Internet at <http://www.epa.gov/safewater/regs.html>

System, user, and reporting requirements documents can be found on the EPA web site, <http://www.epa.gov/safewater/>

3a. Relevant Information Systems:

SDWIS/STATE, a software information system jointly designed by states and EPA, to support states and EPA Regions as they implement the drinking water program. SDWIS/STATE is an optional data base application available for use by states and EPA regions to support implementation of their drinking water programs. EPA

Region 9 utilizes an access database system (DIME) to collect and report on tribal community water systems in Region 9.

SDWIS/FED User and System Guidance Manuals (includes data entry instructions, data On-line Data Element Dictionary-a database application, Error Code Data Base (ECDB) - a database application, users guide, release notes, etc.) Available on the Internet at <http://www.epa.gov/safewater/sdwisfed/sdwis.htm>

System and user documents are accessed via the database link <http://www.epa.gov/safewater/databases.html> and specific rule reporting requirements documents are accessed via the regulations, guidance, and policy documents link <http://www.epa.gov/safewater/regs.html>

SDWIS/Fed does not have a Quality Assurance Project Plan. The SDWIS/FED equivalent is the Data Reliability Action Plan [2006 Drinking Water Data Reliability Analysis and Action Plan, EPA-816-R-07-010 March 2008] The DRAP contains the processes and procedures and major activities to be employed and undertaken for assuring the data in SDWIS meet required data quality standards. This plan has three major components: assurance, assessment, and control.

Office of Water Quality Management Plan, available at <http://www.epa.gov/water/info.html>

3b. Data Quality Procedures:

The Office of Ground Water and Drinking Water is modifying its approach to data quality review based on the recommendations of the Data Quality Workgroup and on the Drinking Water Strategy for monitoring data.

There are quality assurance manuals for states and Regions, which provide standard operating procedures for conducting routine assessments of the quality of the data, including timely corrective action(s).

Reporting requirements can be found on the EPA web site, <http://www.epa.gov/safewater/> SDWIS/FED edit checks built into the software to reject erroneous data.

EPA offers the following to reduce reporting and database errors:

1) training to states on data entry, data retrieval, compliance determination, reporting requirements and error correction, 2) user and system documentation produced with each software release and maintained on EPA's web site, 3) Specific error correction and reconciliation support through a troubleshooter's guide, 4) a system-generated summary with detailed reports documenting the results of each data submission, 5) an error code database for states to use when they have questions on how to enter or correct data, and 6) User support hotline available 5 days a week.

3c. Data Oversight:

The Drinking Water Protection Division Director oversees the source data reporting and the information systems producing the performance result.

3d. Calculation Methodology:

SDWIS/STATE, a software information system jointly designed by states and EPA, to support states as they implement the drinking water program. SDWIS/STATE is an optional data base application available for use by states and EPA regions to support implementation of their drinking water programs.

U.S. EPA, Office of Ground Water and Drinking Water. Data and Databases. Drinking Water Data & Databases – SDWIS/STATE, July 2002. Information available on the Internet:

http://www.epa.gov/safewater/sdwis_st/current.html

SDWIS/FED User and System Guidance Manuals (includes data entry instructions, data On-line Data Element Dictionary-a database application, Error Code Data Base (ECDB) - a database application, users guide, release notes, etc.) Available on the Internet at <http://www.epa.gov/safewater/sdwisfed/sdwis.htm>

System and user documents are accessed via the database link <http://www.epa.gov/safewater/databases.html> and specific rule reporting requirements documents are accessed via the regulations, guidance, and policy documents link <http://www.epa.gov/safewater/regs.html>

Documentation is also available at the Association of State Drinking Water Administrators web site at www.ASDWA.org

SDWIS/Fed does not have a Quality Assurance Project Plan. The SDWIS/FED equivalent is the Data Reliability Action Plan [2006 Drinking Water Data Reliability Analysis and Action Plan, EPA-816-R-07-010 March 2008] The DRAP contains the processes and procedures and major activities to be employed and undertaken for assuring the data in SDWIS meet required data quality standards. This plan has three major components: assurance, assessment, and control.

Office of Water Quality Management Plan, available at <http://www.epa.gov/water/info.html>

4a. Oversight and Timing of Final Results Reporting:

The Evaluation and Accountability Team Leader is responsible for overseeing the final reporting for the Office of Water

4b. Data Limitations/Qualifications:

Recent state and EPA Regional data verification and other quality assurance analyses indicate that the most significant data quality problem is under-reporting by the states of monitoring and health-based standards violations and inventory characteristics. The most significant under-reporting occurs in monitoring violations. Even though those are not covered in the health based violation category, which is covered by the performance measure, failures to monitor could mask treatment technique and MCL violations. Such under-reporting of violations limits EPA's ability to: 1) accurately portray the percent of people affected by health-based violations, 2) target enforcement oversight, 3) target program assistance to primacy agencies, and 4) provide information to the public on the safety of their drinking water facilities

4c. Third-Party Audits:

N/A

Measure Code: co5 - Percent of active dredged material ocean dumping sites that will have achieved environmentally acceptable conditions (as reflected in each site's management plan).

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

2 - Improve Coastal and Ocean Waters

Strategic Target Code and Title:

2 - Percent of active dredged material ocean dumping sites, will have achieved environmentally acceptable

Managing Office:

Office of Wetlands Oceans and Watersheds

1a. Performance Measure Term Definitions:

Active dredged material ocean dumping site: A dredged material ocean dumping site is a precise geographical area within which ocean dumping of wastes is permitted under conditions specified in permits issued by EPA Regions under section 102 and 103 of the Marine Protection, Research, and Sanctuaries Act (MPRSA). Active refers to a dredged material ocean dumping site that has been used in five years, and/or a site at which there are foreseeable plans for continued use. EPA Regions evaluate whether a site is active at the mid-year and end-of-year periods.

Environmentally acceptable conditions: The responsible EPA Regions determine whether dredged material ocean dumping sites are achieving environmentally acceptable conditions on a case-by-case basis, based on the requirements of the Site Management and Monitoring Plan (SMMP) and site sampling/surveying/monitoring results. On-site monitoring programs are used to collect, test, measure, and analyze data on bathymetry, chemical, biological, and physical conditions (e.g., grain size, current speed) at dredged material ocean dumping sites. Based on the requirements of each SMMP, the responsible Regions may conduct monitoring surveys of the dump sites to determine benthic impacts, spatial distribution of dredged material, characterize physical changes to the seafloor resulting from disposal, pH, turbidity, and other water quality indicators. Monitoring/sampling methodologies and assumptions are site-specific.

Site management plan: Under the MPRSA, each dredged material ocean dumping site must have a Site Management and Monitoring Plan (SMMP). The SMMP includes, but is not limited to, a baseline assessment of the site, a consideration of anticipated use, a monitoring program, and site management conditions or practices that are necessary for protection of the aquatic environment. Each SMMP is unique to the dump site and is developed with the opportunity for stakeholder input.

Background:

This performance measure, which is a target in the 2011-2015 Strategic Plan, will be tracked on an annual basis as a management tool for EPA's ocean dumping program. The baseline year for the measure is 2005. For more information on EPA's ocean dumping program, please visit <http://water.epa.gov/type/oceb/oceandumping/dredgedmaterial/dumpdredged.cfm>

2a. Original Data Source:

EPA Regions. EPA Regional offices responsible for management, oversight, and data collection at dredged material ocean dumping sites enter their determinations of sites meeting environmentally acceptable conditions directly into EPA's Annual Commitment System (ACS) database.

2b. Source Data Collection:

Collection Methodology:

EPA Regions determine whether dredged material ocean dumping sites are achieving environmentally acceptable conditions on a case-by-case basis, based on the requirements of the SMMP and site sampling/surveying/monitoring results. For more information on the type of site sampling/surveying/monitoring that is conducted, please see the Performance Measure Term Definitions field. EPA's Oceans and Coastal Protection Division has prepared a template for the Regions to use when preparing survey plans and many oceanographic vessels, such as NOAA vessels, have their own survey plan template. The periodicity of monitoring is determined by the SMMP and is suitable for tracking this measure. Regions collect data per the requirements of the SMMP and based upon site-specific conditions and needs. Regions determine the percentage of active sites meeting environmentally acceptable conditions (as reflected in each site's management plan and measured through on-site monitoring program).

Geographical Extent: Ocean dredged material disposal sites are designated in ocean waters in each of the seven EPA Regions with ocean programs.

Spatial Detail: Ocean dredged material disposal sites are designated in the federal register (lat/log is provided in the federal register for each site) and can vary in shape and size.

Quality Procedures:

Regional OD Coordinators collect and evaluate data to determine if sites are achieving environmentally acceptable conditions on a case-by-case basis, based on the requirements of the Site Management and Monitoring Plan (SMMP) and site sampling/surveying/monitoring results. Regional OD Coordinators collect data/information related to site status (active vs. inactive).

For each survey, the Region is required to submit to EPA Headquarters a survey plan that presents types of sampling techniques, including equipment used, and how data are recorded. Regions must develop a Quality Assurance Project Plan (QAPP), as prescribed by their regional quality assurance procedures, when collecting data at an ocean dumping site. The QAPP outlines the procedures for collection methods, use of analytical equipment, analytical methods, quality control, and documentation and records. Regions must conduct data quality reviews as determined by their quality assurance procedures and included in their QAPPs. If a Region uses a NOAA vessel for the survey, it is expected that the Region will submit a survey plan to NOAA and adhere to NOAA requirements for conducting the survey.

QAPP guidance documents for those Regions responsible for ocean dumping sites may be found at the following internet sites:

EPA Region 1 - <http://www.epa.gov/ne/lab/qa/pdfs/QAPPProgram.pdf>

EPA Region 2 - <http://www.epa.gov/region2/qa/documents.htm> - qag

EPA Region 3 - <http://www.epa.gov/quality/qmps.html>

EPA Region 4 - <http://www.epa.gov/region4/sesd/oqa/r4qmp.html>

EPA Region 6 - <http://www.epa.gov/earth1r6/6pd/qa/qatools.htm>

EPA Region 9 - http://www.epa.gov/region9/qa/pdfs/qaprp_guidance3.pdf

2c. Source Data Reporting:

The EPA Regions annually enter their determinations of dredged material ocean dumping sites meeting environmentally acceptable conditions directly into EPA's Annual Commitment System (ACS) database in October. (Regions also provide a report at mid-year).

3a. Relevant Information Systems:

System Description: EPA's Annual Commitment System (ACS) is used to record and transmit the data for performance results for the measure. ACS is a module of the Agency's Budget Formulation system BFS. Please see the DQR for BFS for additional information.

Source/Transformed Data: The EPA Regions enter data into ACS. The Office of Wetlands, Oceans and Watersheds reviews the data to ensure accurate data entry.

Information System Integrity Standards: National Ocean Dumping Program Coordinator, OCPD/OWOW/OW, reviews.

3b. Data Quality Procedures:

National Ocean Dumping Program Coordinator, OCPD/OWOW/OW, reviews.

The data are entered into ACS by EPA Regional OD Coordinators and the HQ National Ocean Dumping Program Coordinator follows up when necessary. HQ maintains a list of designated ocean dredged material disposal sites and works with Regions to verify active or inactive site status and up-to-date site management and monitoring plans (SMMPs). HQ cross-checks data entered into ACS with reporting from years past to ensure consistency and account for irregularities.

Furthermore, Headquarters convenes monthly Ocean Dumping Calls with the Regions, administers a chief scientist certification program, and coordinates, as needed, to address issues associated with ocean dredged material disposal sites, including issues identified through monitoring.

Reporting in FY 2007 through FY 2010 did not indicate that any improvements to the collection and/or evaluation of data to support the measure were needed.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: HQ National Ocean Dumping Program Coordinator, OCPD/OWOW/OW

Source Data Reporting Oversight Responsibilities: HQ maintains a list of designated ocean dredged material disposal sites and works with Regions to verify active or inactive site status and up-to-date site management and monitoring plans (SMMPs). HQ oversees and reviews final data entry into ACS. HQ cross-checks data entered into ACS with reporting in years past to ensure consistency and account for irregularities.

Information Systems Oversight Personnel: Please see the DQR for BFS for additional information.

Information Systems Oversight Responsibilities: Please see the DQR for BFS for additional information.

3d. Calculation Methodology:

Decision Rules for Selecting Data: On a case-by-case basis, active sites are determined to be achieving environmentally acceptable conditions, based on the requirements of the Site Management and Monitoring Plan (SMMP) and site sampling/surveying/monitoring results.

Definitions of Variables: Active dredged material ocean dumping site: A dredged material ocean dumping site is a precise geographical area within which ocean dumping of wastes is permitted under conditions specified in permits issued by EPA Regions under section 102 and 103 of the Marine Protection, Research, and Sanctuaries Act (MPRSA). Active refers to a dredged material ocean dumping site that has been used in five years, and/or a site at which there are foreseeable plans for continued use. EPA Regions evaluate whether a site is active at the mid-year and end-of-year periods.

Environmentally acceptable conditions: The responsible EPA Regions determine whether dredged material ocean dumping sites are achieving environmentally acceptable conditions on a case-by-case basis, based on the requirements of the Site Management and Monitoring Plan (SMMP) and site sampling/surveying/monitoring results. On-site monitoring programs are used to collect, test, measure, and analyze data on bathymetry, chemical, biological, and physical conditions (e.g., grain size, current speed) at dredged material ocean dumping sites. Based on the requirements of each SMMP, the responsible Regions may conduct monitoring surveys of the dump sites to determine benthic impacts, spatial distribution of dredged material, characterize physical changes to the seafloor resulting from disposal, pH, turbidity, and other water quality indicators. Monitoring/sampling methodologies and assumptions are site-specific.

Site management plan: Under the MPRSA, each dredged material ocean dumping site must have a Site Management and Monitoring Plan (SMMP). The SMMP includes, but is not limited to, a baseline assessment of the site, a consideration of anticipated use, a monitoring program, and site management conditions or practices that are necessary for protection of the aquatic environment. Each SMMP is unique to the dump site and is developed with the opportunity for stakeholder input.

Explanation of Calculations: Each EPA Region reports the percent of active sites that are achieving environmentally acceptable conditions, based on the requirements of the Site Management and Monitoring Plan (SMMP) and site sampling/surveying/monitoring results. The results from the seven EPA regions are averaged.

Explanation of Assumptions: This result does not necessarily reflect monitoring data from that year at all sites. The result reflects several factors such as meeting the requirements of the SMMP as well as site sampling/surveying/monitoring results.

Unit of Measure: Percent of active dredged material ocean dumping sites

Timeframe of Result: annual

Documentation of Methodological Changes: Not applicable

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: OCPD/OWOW Division Director

Final Reporting Oversight Responsibilities: Review the data entered into ACS by EPA Regions and national program targets.

Final Reporting Timing: Annual

4b. Data Limitations/Qualifications:

General Limitations/Qualifications:

No error estimate is available for this data. The data collected by the EPA Regions are highly suitable for tracking the performance of this measure, as they are collected for the specific purpose of determining the environmental conditions of the dredged material ocean dump sites.

Data Lag Length and Explanation: Analysis of data collected as part of monitoring surveys may take several months for initial results and even longer for final results.

Methodological Changes: N/A

4c. Third-Party Audits:

N/A

Measure Code: li5 - Percent of goal achieved in reducing trade-equalized (TE) point source nitrogen discharges to Long Island Sound from the 1999 baseline of 59,146 TE lbs/day.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

7 - Long Island Sound

Strategic Target Code and Title:

1 - Reduce the maximum area of hypoxia in Long Island Sound

Managing Office:

Long Island Sound Office

1a. Performance Measure Term Definitions:

Goal: Nitrogen waste load allocations (WLA) are specified in the "A Total Maximum Daily Load (TMDL) Analysis to Achieve Water Quality Standards for Dissolved Oxygen in Long Island Sound" (December 2000) that was prepared by the states of New York and Connecticut and approved by EPA in conformance with Section 303(d) of the Clean Water Act. (See: www.longislandsoundstudy.net/wp-content/uploads/2010/03/Tmdl.pdf) The TMDL nitrogen WLAs are included in the NPDES (state-delegated) permits issued by the states for dischargers to Long Island Sound.

The baseline for this measure is 211,724 pounds per day of nitrogen or 59,146 TE/lbs-day as calculated in the TMDL. The TMDL established a WLAN of 22,774 TE lbs/day from point sources, to be achieved over a 15-year period beginning in 2000. The TMDL itself does not establish annual targets for nitrogen reduction. However, EPA developed this measure as a means of tracking annual progress, with each year's target for the measure equivalent to 1/15 of the overall reduction goal. So the goal is a reduction of 36,372 TE lbs/day (59,146-22,774=36,372). Annualized aggregate reduction = TMDL baseline minus 2014 target (84,474 lbs/day or 22,774 TE/lbs-day) divided by 15 year TMDL time period = 8,487 lbs/day or 2,425 TE lbs/day. The measure will be tracked in lbs/day and Trade Equalized (TE) lbs/day.

Trade-equalized (TE): TE lbs/day are pounds of nitrogen adjusted by application of the equivalency factor assigned to each point source based on its proximity to the receiving water body (Long Island Sound) as specified in the TMDL. Trade equalization is a geographical calculation of the effect a pound of nitrogen leaving a point source will eventually have when it reaches western Long Island Sound. The connections among nitrogen, rivers, currents and hypoxia drive this calculation. The calculation takes into account both east-west as well as north-south distance from the western Sound when estimating nitrogen impact on the western Sound. If a coastal wastewater treatment plant is located in the western part of Long Island Sound, 100% of the nitrogen discharged into Long Island Sound could contribute to the hypoxia problem there. However, if a coastal wastewater treatment plant is in the eastern part of the Sound, not all of the nitrogen discharged will end up in the western Sound. Some of the nitrogen will be carried out of the Sound by currents through the Race, and the calculation of this loss due to currents is called "transfer efficiency." For this reason, an equal amount of nitrogen discharged by these examples will not result in the same amount of nitrogen ending up in the western Sound. Similarly, if an inland wastewater treatment plant discharges nitrogen into a river, some of the nitrogen will be lost before the river waters reach Long Island Sound. This

“river attenuation” is also taken into account when calculating nitrogen loads. The combination of transfer efficiency and river attenuation is used to create trade equalization.

Point source nitrogen discharges to Long Island Sound: This measure is the annual aggregate reduction from the TMDL-defined baseline point source nitrogen discharge from 106 sewage treatment plants (STPs) in Connecticut and New York discharging to Long Island Sound waters during the calendar year January-December. Point source pollution is defined in section 502 of the Clean Water Act as “any discernible, confined and discrete conveyance, including but not limited to any pipe, ditch, channel, tunnel, conduit, well, discrete fissure, container, rolling stock, concentrated animal feeding operation, or vessel or other floating craft, from which pollutants are or may be discharged. This term does not include agricultural storm water discharges and return flows from irrigated agriculture.

Background:

Long Island Sound, bounded by New York and Connecticut, has more than 8 million people living within its watershed. It is approximately 110 miles long (east to west) and about 21 miles across at its widest point. Research commissioned by the Long Island Sound Study estimated that more than \$5 billion is generated annually in the regional economy from boating, commercial and sport fishing, swimming, and beachgoing in 1990 dollars. In 2012 dollars that value is in excess of \$9.5 billion. Congress passed legislation in 1990 establishing an EPA Long Island Sound Office. The office was established in January 1992 with offices in Stamford, CT and Stony Brook, NY. The Long Island Sound Comprehensive Conservation and Management Plan (CCMP), developed under the National Estuary Program, is the result of a strong partnership between EPA Regions 1 and 2 and the states of Connecticut and New York. The CCMP was approved by EPA Administrator Browner and the Governors of Connecticut and New York in September 1994. To address the water quality problems in the Long Island Sound, EPA created the Long Island Sound Study (LISS) in partnership with the Connecticut Department of Energy and Environmental Protection (CTDEEP) and the New York State Department of Environmental Conservation (NYSDEC). The top priority of the LISS is reducing nitrogen loads which contribute to the low levels of oxygen affecting substantial areas of western Long Island Sound in late summer. Other implementation priorities are habitat restoration, watershed management, disposal of dredged materials, and public education and involvement on Long Island Sound issues.

Pollutant sources associated with increased urbanization, including sewage treatment plants and stormwater runoff, have discharged excessive levels of nitrogen to the Sound leading to increased algal blooms and decreased dissolved oxygen (DO) levels, caused when algae die and use up oxygen in the decaying process. As a result of eutrophication and hypoxia, large areas in the western portion of the Sound cannot support aquatic life, recreation, and other important uses. The analysis conducted by the LISS led to the adoption of a 58.5 percent nitrogen reduction target to reduce the extent and duration of hypoxic conditions in the Long Island Sound. Through the TMDL development process, CTDEEP and NYSDEC were able to incorporate the 58.5 percent nitrogen reduction target into a regulatory and legal framework. The Clean Water Act (CWA) requires implementation of pollutant load reductions through point source permits issued under the National Pollutant Discharge Elimination System (NPDES) Program. The TMDL nitrogen WLAs are included in the NPDES (state-delegated) permits issued by the states for dischargers to Long Island Sound.

Point source nitrogen loads have been reduced over the last 25 years in great part due to the large number of wastewater treatment plant upgrades that have been performed in Connecticut and New York. The relatively flat progress in reducing point source nitrogen to the Sound from 2005-2009 was due to several New York City wastewater treatment plants under construction for nitrogen removal upgrades and their capacity to store and process wastewater has been reduced as a result. Weather and rainfall also affect the ability of

wastewater treatment plants to effectively remove nitrogen, i.e., during periods of intense rainfall the capacity of a plant to handle wastewater may be exceeded and excess nitrogen discharged as a result.

For more information, please see:

- http://www.ct.gov/dep/cwp/view.asp?a=2719&q=325604&depNav_GID=1654
- <http://longislandsoundstudy.net/2010/07/lis-point-source-nitrogen-trade-equalized-loads/>
- <http://www.longislandsoundstudy.net/pubs/reports/tmdl.pdf>
- http://water.epa.gov/lawsregs/lawsguidance/cwa/tmdl/upload/long_island_technical-2.pdf

2a. Original Data Source:

State offices (New York State DEC and Connecticut DEEP).

2b. Source Data Collection:

Collection Methodology: Under NPDES, as part of the discharge monitoring reporting process, the STPs in question must regularly monitor and test effluent for appropriate pollutants, including nitrogen, and annually report pollutant loading data to their respective states (Connecticut and New York). The STPs and the states must follow EPA guidance as part of the DMR process.

Quality Procedures:

- Legal requirements for permittees to self-report data on compliance with effluent parameters in permits generally results in consistent data quality and accuracy.
- Major and selected minor facilities are required to participate in the Discharge Monitoring Report (DMR) Quality Assurance Study Program: <http://www.epa.gov/compliance/monitoring/programs/cwa/dmr/>

Geographical Extent: Sewage treatment plants in the New York and Connecticut portions of the Long Island Sound watershed. See the TMDL for more information.

Spatial Detail: Facility-level data are provided by the states.

2c. Source Data Reporting:

Data Submission and Data Entry: The EPA Long Island Sound Office (LISO) requests that the states of New York and Connecticut provide information on the pounds of nitrogen discharged by each STP under their jurisdiction for Long Island Sound. The states use the DMR data submitted to them by the STPs. Within each state, the Long Island Sound Coordinator enters annual nitrogen effluent data for each STP into a spreadsheet provided by EPA's Long Island Sound National Estuary Program (NEP) Coordinator. The reporting spreadsheet utilized is a copy of the master spreadsheet used by EPA's Long Island Sound Office store and calculate results (described in more detail in section 3 of this DQR). Upon receiving the state data, the Long Island Sound NEP Coordinator copies relevant data from each state's spreadsheet into EPA's master spreadsheet.

Frequency and Timing of Data Transmission: States annually report nitrogen discharges for the previous calendar year. States provide the data once available, usually by late February or early March.

3a. Relevant Information Systems:

System Description:

The EPA Long Island Sound Office (LISO) stores state-provided data in an Excel spreadsheet stored on the office's network share drive. The filename is a version of the following: "TE WLA 20xx Master File final." The spreadsheet stores current and prior year data for the performance measure. The spreadsheet houses both

source data and transformed data, as the spreadsheet conducts calculations on the nitrogen effluent data to determine trade-equalized nitrogen discharge levels. (See the Calculations field for more information.)

Information System Integrity Standards: N/A

3b. Data Quality Procedures:

The Long Island Sound Office assumes the data provided by the states is complete and correct.

3c. Data Oversight:

Source Data and Information Systems Reporting Oversight Personnel: The Long Island Sound NEP Coordinator

Oversight Responsibilities: Coordinate with state personnel to ensure timely and accurate reporting; transfer state data into EPA master spreadsheet; maintain spreadsheet on EPA share drive; and backup data.

3d. Calculation Methodology:

The Long Island Sound NEP Coordinator calculates the result for this measure based on total annual average loads from these 106 STPs discharging to Long Island Sound from Connecticut and New York. LISO uses an Excel spreadsheet that has a column that converts data on pounds of nitrogen discharged by each STP into trade-equalized pounds based on the equivalency factors established and explained in the TMDL referenced above. The STP totals are summed to calculate subtotals for New York and Connecticut and a grand total for both states is calculated as the annual result for this measure.

Unit of Measure: Percent of Goal Achieved

Timeframe of Result: 1999-present (cumulative measure starting with the 1999 baseline.)

Documentation of Methodological Changes: N/A

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: Director, EPA Long Island Sound Office

Final Reporting Oversight Responsibilities: Oversight personnel checks the final numbers provided and follows-up with states for confirmation. Director has final review.

Final Reporting Timing: Annually, in February-March

4b. Data Limitations/Qualifications:

General Limitations/Qualifications:

- There may be errors of omission, in classification, documentation or mistakes in the processing of data.
- National trends over the past several years show an average of 94% of DMRs are entered timely and complete.

Data Lag Length and Explanation: There is a lag time of approximately 60-90 days between the end of the reporting year (in this case, a calendar year) and public reporting of the data, given that STPs are required to prepare and provide calendar-year DMR data to the states, who must in turn enter the data and provide to EPA.

Methodological Changes:N/A

4c. Third-Party Audits:

None

Measure Code: ps1 - Improve water quality and enable the lifting of harvest restrictions in acres of shellfish bed growing areas impacted by degrading or declining water quality.

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

8 - Puget Sound Basin

Strategic Target Code and Title:

1 - Improve water quality and enable the lifting of harvest restrictions in shellfish bed growing areas

Managing Office:

Region 10

1a. Performance Measure Term Definitions:

Improve water quality: Measuring the number of acres of shellfish beds with harvest restrictions lifted is not a direct measure of habitat quality, but it is a measure of improvement in water quality with respect to fecal coliform contamination. This measure of recovered shellfish growing acreage serves as an important surrogate for water quality and human health protection in Puget Sound.

Lifting of harvest restrictions: The Washington State Department of Health's (WDOH) Growing Area Classification program is responsible for evaluating all commercially harvested shellfish-growing areas in Washington State to determine their suitability for harvest. The state approves shellfish as safe for harvest if sanitary surveys show that the area is not subject to contamination that presents an actual or potential public health hazard. The sanitary surveys look for the presence of fecal material, pathogenic microorganisms, or poisonous or harmful organisms in concentrations that pose a health risk to shellfish consumers. For more information, see the Washington State Department of Health's Growing Area Classification Program at: <http://www.doh.wa.gov/CommunityandEnvironment/Shellfish/GrowingAreas.aspx>

Acres of shellfish bed growing areas impacted by degraded or declining water quality: The acreage counted via this measure is based on monitoring and status determinations made by the Washington State Department of Health (WDOH). Commercial shellfish growing areas in Washington State are classified as Approved, Conditionally Approved, Restricted, or Prohibited. (See "Definition of Variables" in section 3-d that follows.) These classifications have specific standards that are derived from the National Shellfish Sanitation Program Guide for the Control of Molluscan Shellfish (Chapter IV, 2009 Revision). Results of these classifications frequently include shellfish harvesting acres affected by National Estuary Program or Section 319 Nonpoint Source grants. The universe of potentially recoverable shellfish areas in the Puget Sound is an estimated 10,000 acres. This estimate is based on a table of potentially recoverable shellfish growing areas in Puget Sound as developed by the WDOH in 2006. The total area of Puget Sound restricted from the safe harvest of shellfish because of the impacts of pollution is approximately 30,000 acres based on baseline data from 2006.

Background:

EPA's Puget Sound webpage is: <http://www.epa.gov/pugetsound/index.html>

Also see the WDOH annual shellfish reports at:

<http://www.doh.wa.gov/CommunityandEnvironment/Shellfish/GrowingAreas/AnnualReports.aspx>

2a. Original Data Source:

The Washington State Department of Health (WDOH) determines and tracks the status of shellfish beds. The WDOH does the sampling and analysis, which forms the basis of their shellfish bed status determinations. WDOH provides updates annually and more frequently as requested, to both EPA and Puget Sound Partnership - the lead entity for the Puget Sound National Estuary Program.

2b. Source Data Collection:

Collection Methodology: The Puget Sound Partnership and EPA receive data from the Washington State Department of Health (WDOH), which is the entity that determines and tracks the status of shellfish beds. The WDOH does the sampling and analysis, which forms the basis of their shellfish bed status determinations. WDOH maintains a spreadsheet database of recoverable shellfish growing beds and status of each.

Quality Procedures:

The WDOH's Office of Shellfish and Water Protection (OSWP) has a Quality Management Plan (QMP) on file with EPA's Region 10 Puget Sound Program.

The principal components of OSWP's quality system and corresponding tools for implementing them include: Quality Management, Accountability, and Performance Policy (Health Policy 02.005)

Public Health Laboratories Quality Management Plan

OSWP Policies/Procedures

Marine Water Sampling (OSWP #3)

Data Flow (OSWP #4)

Shoreline Surveys (OSWP #13)

Voluntary Water Sampling for Growing Area Classifications (OSWP #16)

Establishing Marine Water Sampling Station Locations (OSWP #17)

Closure Zones For Wastewater Treatment Plants (OSWP #19)

Harvest Site Pollution Assessment Policy (OSWP #21)

Recreational Shellfish Beach Classification (OSWP #22)

OSWP Annual Report: Commercial and Recreational Shellfish Areas

OSWP Status and Trends in Fecal Coliform Pollution in Shellfish Growing Areas of Puget Sound

On-site Sewage Systems Recommended Standards and Guidance (RS&G) Document:

OSWP reviews the status of all shellfish growing areas on at least an annual basis, including: review of the past year's water quality sample results, available field inspection reports, and review of available information from other sources. This review is summarized both in individual reports for each growing area, as well as a

summary report (<http://www.doh.wa.gov/ehp/sf/Pubs/annual-inventory.pdf>)

Microbiological water quality status and trends are also summarized in a separate report

(<http://www.doh.wa.gov/ehp/sf/Pubs/fecalreport.pdf>)

An annual list of Threatened areas identified through these evaluations are published to highlight areas which need attention

(<http://www.doh.wa.gov/ehp/sf/Pubs/gareports/threatenlist.pdf>)

Geographical Extent: US Regional, Washington State, and Puget Sound Basin. Commercial shellfish bed growing areas in the Puget Sound estuary. A .pdf map of the shellfish-growing areas in Washington State,

including Puget Sound, can be found

at <http://www.doh.wa.gov/CommunityandEnvironment/HealthyCommunitiesWashington.aspx>

Spatial Detail: The spatial extent of growing area classifications is determined by a number of factors, including: marine water quality parameters, proximity to shorelines with sources of potential pollution/contamination (such as outfalls for WWTP or stormwater systems), and dilution and dispersion influences of tidal, wind and current action. Data for the Puget Sound shellfish measure are gathered from growing areas from within the Puget Sound basin, which includes the Strait of Juan de Fuca (but does not include shellfish-growing areas in Washington State located on the Pacific Ocean coast outside of the Puget Sound Basin).

Time Interval Covered by Source Data: WDOH reviews the status of all shellfish-growing areas on at least an annual basis, which includes: review of the past year's water quality sample results, available field inspection reports, and review of available information from other sources. This review is summarized both in individual reports for each growing area as well as a summary report (<http://www.doh.wa.gov/ehp/sf/Pubs/annual-inventory.pdf>).

2c. Source Data Reporting:

Data Submission: The Region 10 Puget Sound Program Performance Manager requests the annual shellfish-growing area classification data results from WDOH. Data reported is a single number for total annual results, representing the sum of separate shellfish-growing areas where harvest restrictions were lifted during the reporting period. Region 10's Puget Sound Program Performance Manager receives performance measure data from WDOH either verbally via telephone or electronically in a spreadsheet document. WDOH provides a list containing the number of growing areas with classification upgrades and growing areas with classification downgrades by location. WDOH may report a single net number over the phone, but the official final data is organized by both location and gain/loss for the final net number of acres. The Puget Sound Program Performance Manager reviews submission of data from WDOH in light of previous planning discussions and mid-year status checks on shellfish growing areas targeted for recovery. The Performance Manager compares reported results against the table of potentially recoverable growing areas and uses that as the basis for developing annual targets. The Performance Manager contacts WDOH to ask about any unusual results or uncertainties.

Data Entry: The ACS Coordinator in the Region 10 Office of Water And Watersheds Grants and Strategic Planning Unit enters the data received from the WDOH for this measure into ACS.

Frequency and Timing of Data Transmission: The Region 10 Puget Sound Program Performance Manager requests the annual shellfish-growing area classification data results from WDOH. These data are typically requested in September for end-of-federal fiscal- year reporting. Additional interim data requests may occur for other performance and planning activities including, mid-year results and out-year projections.

3a. Relevant Information Systems:

System Description: EPA's Annual Commitment System (ACS) is used to record and transmit the data for performance results for the measure on the lifting of commercial harvest restrictions for shellfish in Puget Sound. ACS is a module of the Agency's Budget Formulation System (BFS). Please see the DQR for BFS for additional information.

Source/Transformed Data: The EPA Region 10 Office of Water and Watersheds ACS Coordinator enters source data into ACS. The numerical results reported by WDOH are not transformed before entry into ACS.

Information System Integrity Standards: Please see the DQR for BFS for additional information.

3b. Data Quality Procedures:

The Region 10 Puget Sound Program Performance Manager performs a QA/QC on the annual shellfish growing-area classification data results when received from WDOH. Additional QA/QC is achieved during discussions among the Puget Sound Performance Manager, Puget Sound Partnership, and WDOH for annual target setting, mid-year and end-of-year performance reporting, as well as episodic changes in growing area classifications that impact annual results. The source data quality procedures take place at the time monitoring and sampling of marine water quality during the sanitary surveys used to determine the lifting of harvest restrictions.

3c. Data Oversight:

Source Data Reporting Oversight Personnel , Region 10's Puget Sound Program Performance Manager in the Region 10 Office of Water Watersheds is responsible for acquiring the performance data from the WDOH.

Source Data Reporting Oversight Responsibilities: Region 10's Puget Sound Program Performance Manager receives performance measure data from WDOH. The Puget Sound Program Performance Manager reviews submission of data from WDOH in light of previous planning discussions and mid-year status checks on shellfish-growing areas targeted for recovery. The Performance Manager compares the reported results against the table of potentially recoverable growing areas and uses that as the basis for developing annual targets. The Performance Manager contacts WDOH to ask about any unusual results or uncertainties. The Performance Manager verifies that reported results meet the criteria for reporting under the EPA's OW National Water Program Guidance and provides the explanation of results as needed for targets not met or target significantly exceeded. The Puget Sound Performance Manager provides the data to the Region 10 Office of Water and Watersheds ACS Coordinator, who in turn enters the data into the EPA's ACS.

Information Systems Oversight Personnel: Please see the DQR for BFS for additional information.

Information Systems Oversight Responsibilities: Please see the DQR for BFS for additional information.

The Puget Sound Program Performance Manager reviews submission of data from WDOH in light of previous planning discussions and mid-year status checks on shellfish-growing areas targeted for recovery. The Performance Manager compares reported results against the table of potentially recoverable growing areas is the basis for developing annual targets. The Performance Manager contacts WDOH to ask about any unusual results or uncertainties. The Performance Manager verifies that reported results meet the criteria for reporting under the EPA's OW National Water Program Guidance and provides the explanation of results as needed for targets not met or target significantly exceeded.

3d. Calculation Methodology:

The cumulative level of acres where harvest restrictions are lifted is dynamic. The reported performance result is a result of the annual incremental number of shellfish growing acres that have restrictions lifted (and are thus re-classified as Approved or Conditionally Approved), less any acres in growing areas downgraded to Restricted or Prohibited classification during the same period annually. The cumulative measures are a product of the net upgrades minus downgrades for the reporting periods beginning in 2007 from a baseline in 2006.

The universe of 10,000 recoverable harvest acres is static, based on the 2006 baseline. This baseline was developed utilizing a WDOH shellfish-growing area restoration table that identified potentially recoverable growing areas.

Staff working in the WA State Shellfish Growing Area Program continually analyzes marine growing areas to make sure that shellfish in those marine areas are safe to eat. This work involves completing an evaluation of the growing area, assigning a classification to the area based on the results of the evaluation, and monitoring shellfish-growing areas for changes in water quality.

The evaluation process is called a "sanitary survey" and involves:

- A shoreline survey, which identifies pollution sources that may impact water quality. WDOH evaluates sewage treatment plants, onsite sewage systems, animal farms, drainage ways, and wildlife.
- Marine water sampling to determine fecal coliform bacteria levels in the marine water.
- Analysis of how weather conditions, tides, currents, and other factors may affect the distribution of any pollutants in the area.

Decision Rules for Selecting Data: A change in harvest classification is the deciding rule for selecting data. EPA Puget Sound Program's Performance Manager uses the WDOH-reported data for areas that have been upgraded from Prohibited or Restricted and Reclassified to Approved or Conditionally Approved. Additionally, shellfish harvest areas that have been downgraded are selected for inclusion in data to calculate the net change in the cumulative shellfish acreage that have been upgraded to safe harvest conditions. Particular attention is given to data from areas where current or recent restoration and water quality improvement actions have been undertaken, but data is not exclusively limited to these.

Definitions of Variables:

Approved - when the sanitary survey shows that the area is not subject to contamination that presents an actual or potential public health hazard. An Approved classification authorizes commercial shellfish harvest for direct marketing.

Conditionally Approved - when an area meets Approved criteria some of the time, but does not during predictable periods (such as significant rainfall events occurring right after extended dry periods or high boater usage periods during the summer). During these periods, the area is closed. The length of closure is predetermined for each Conditionally Approved area and is based on water sample data that show the amount of time it takes for water quality to recover and again meet Approved criteria.

Restricted - when water quality meets standards for an Approved classification, but the sanitary survey indicates a limited degree of pollution from non-human sources. Shellfish harvested from Restricted growing areas cannot be marketed directly.

Prohibited - when the sanitary survey indicates that fecal material, pathogenic microorganisms, or poisonous or harmful substances may be present in concentrations that pose a health risk to shellfish consumers.

Growing areas adjacent to sewage treatment plant outfalls, marinas, and other persistent or unpredictable pollution sources are classified as Prohibited. Growing areas that have not undergone a sanitary survey are also classified as Prohibited. Commercial shellfish harvests are not allowed from Prohibited areas.

Explanation of Calculations:

The calculation of cumulative acres is a result of the annual incremental number of shellfish-growing acres that have restrictions lifted (and thus classified as Approved or Conditionally Approved), less any acres in growing areas downgraded to Restricted or Prohibited during the same period annually. The cumulative measure result is a product of the net upgrades minus downgrades for the reporting periods beginning in 2007 from a baseline in 2006.

Explanation of Assumptions:

Molluscan shellfish such as clams, oysters, and mussels feed by filtering large volumes of seawater. Along with food particles, they can also absorb bacteria, viruses, and other contaminants that are present. If contaminant levels are high enough, shellfish harvested from these areas can make people sick.

Measuring the number of acres of shellfish beds with harvest restrictions lifted is not a direct measure of water quality, but it is a measure of improving water quality with respect to fecal coliform contamination. This acreage serves as an important surrogate for water quality and human health protection in Puget Sound.

Unit of Measure: Acres (e.g., acres of commercial shellfish growing areas within the Puget Sound basin where harvest restrictions have been lifted due to improved water quality parameters).

Time Frame of Result:

The cumulative measure result is a product of the net upgrades minus downgrades for the reporting periods beginning in 2007 from a baseline in 2006.

Documentation of Methodological Changes:

Not applicable.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: The Region 10 Office of Water and Watersheds, Grants and Strategic Planning Unit ACS Coordinator oversees final reporting by the Regional Puget Sound Program. Resource Management Staff in the EPA HQ OW confirm reporting by the Region 10 ACS Coordinator.

Final Reporting Oversight Responsibilities: Resource Management Staff in the EPA HQ OW confirm reporting by the Region 10 ACS Coordinator. Additionally, OW Resource Management Staff will confer with Office of Wetlands Oceans and Watersheds Policy, Communications & Resource Management Staff if questions about the data reported need to be addressed by the NPO.

Final Reporting Timing: Annually, on a fiscal year basis.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: Data are limited to the commercial shellfish beds which are monitored by the WDOH. Commercial shellfish growing areas are only a part of the potential shellfish harvesting areas in Puget Sound (for example, recreational and non-commercial Tribal shellfish harvesting areas are not included in the data represented in this performance measure). Approximately 30,000 ~ 40,000 acres of potential shellfish harvesting areas in Puget Sound are restricted because of pollution and contamination impacts; the identified recoverable commercial shellfish growing areas are approximately 10,000 acres. These growing areas have typically been located in more rural areas and downgrades and restrictions to harvest represent

the point and nonpoint pollution sources generated in these environments. Currently, the Washington State Department of Health is evaluating some of the shoreline along the more urbanized corridors; however, these areas have not been classified. The lack of data from the more urbanized shoreline limits the evaluation of the more commercial/industrial impacts to the Sound. Even though the monitoring and classification of commercial shellfish growing areas is a limited spatial subset of all the potential shellfish harvest areas in Puget Sound, improvements to the water quality in commercial growing areas indicates a healthier Puget Sound.

Data Lag Length and Explanation: The period of time between changes in the harvest classification of shellfish growing areas and the time in which these changes are reflected in EPA's performance reporting can be as long as 12 months. This data lag can occur because annual performance results reflect changes from the prior year's report. Conceivably, a prior year's report might reflect the status of shellfish growing beds as they were in September of 2011 (i.e., for end-of-year FY 2011), and the end-of-year report for FY 2012 would report the results as of the end of September 2012. Thus, if changes in the shellfish growing beds classification occur very early in the performance period, a longer data lag occurs because reporting won't happen until the end of that performance period. It is also important to recognize that this measure of acres of shellfish growing areas that have harvest restrictions lifted, is a cumulative measure. Consequently, upgrades and downgrades in growing area classifications that occur in prior years still impact the net cumulative results reported in the current year. In this regard, a significant data lag can be embedded in the performance results because any prior years' downgrades are not easily recognized in current years' performance reporting.

Methodological Changes: Not applicable.

4c. Third-Party Audits:

No audits or quality reviews of the primary data have been conducted by EPA. EPA conducted a review of the Puget Sound NEP implementation in spring 2010 to help ensure that information provided is accurate and progress reported is in fact being achieved. EPA Regional staff also met with Washington State Department of Health (WDOH) staff in summer 2010 to review, validate, and update the targets for this performance measure.

Measure Code: 642 - Number of acres of Great Lakes coastal wetlands protected, restored, and enhanced by GLRI-funded projects. (Cumulative)

Office of Water (OW)

Goal Number and Title:

2 - Protecting America's Waters

Objective Number and Title:

2 - Protect and Restore Watersheds and Aquatic Ecosystems

Sub-Objective Number and Title:

4 - Great Lakes

Strategic Target Code and Title:

2 - Implement and evaluate actions necessary to protect, restore, or enhance U.S. Great Lakes

Managing Office:

Great Lakes National Program Office

1a. Performance Measure Term Definitions:

Great Lakes Coastal Wetlands: The historical or existing 375,000 acres of U.S. wetlands with a current, previous, or potential hydrologic connection to a Great Lake or connecting channel via surface or subsurface water such that water levels of the wetland are influenced by the water levels of the Great Lakes.

The wetlands represented by this measure can be located on any of the following:

- Great Lake
- Connecting channel
- River (if the river is influenced by the Great Lakes)
- An isolated wetland (with a subsurface connection to the Great Lakes).

Results of protected, restored, or enhanced wetlands for this measure include acreage realized in FY15 and subsequent years, but do not include inland wetland acreage, coastal wetland areas located within Canada, or acreage that is projected to be protected, enhanced, or restored rather than realized.

Protected: Stresses to the ecosystem have been prevented.

Restored: Ecosystem has recovered from degradation, damage or destruction.

Enhanced: Value and effectiveness of habitats and species has increased.

GLRI: Great Lakes Restoration Initiative or the GLRI was launched in 2010 to accelerate efforts to protect, enhance and restore the largest system of fresh surface water in the world — the Great Lakes.

GLRI-funded Project: GLRI-funded projects include an organized activity or set of activities whose implementation includes the expenditure of GLRI funds in support of GLRI Action Plan goals, objectives, and/or measures.

2a. Original Data Source:

The data source for each project is the applicable RWG agency or their funding recipients and sub-recipients. The RWG Agencies implement the GLRI and fund different recipients who then fund sub recipients. The data is reported up from the sub-recipients to the recipients who then report to the GLRI/RWG agency in charge. Only GLRI/RWG agencies report into EPA's Environmental Accomplishments in the Great Lakes (EAGL) information system that EPA uses to collect information on GLRI projects and results.

This measure includes work directly implemented as well as work performed via subsequent contracting and granting arrangements.

2b. Source Data Collection:

Funding recipients use various methods to calculate acreage including but not limited to:

- Geographic Information Services (GIS)
- Google Earth-type mapping tools
- Estimation based on photographic surveys
- GPS mapping
- Manual calculations through direct observations
- Any other methods, using best professional judgment, that are acceptable to the GLRI funding agency

2c. Source Data Reporting:

The applicable RWG agencies report results semi-annually into the EAGL information system. Each RWG Agency is responsible for ensuring the methodology they and their sub-recipients use to calculate acres is consistent with the descriptions and methodologies in the applicable section of a “Measures Reporting Plan” developed by EPA. The Measures Reporting Plan includes definitions for each of the GLRI Action Plan II measures and supports consistent and accurate data reporting on the measures. The Measures Reporting Plan supports the quality and reliability of data entered into the EAGL information system.

The total results from all projects for which this measure is applicable is calculated by the EPA using the data and information reported in the “Results” section of the EAGL information system.

Each RWG agency is responsible for storing all records and documentation used to support its reported Measures results.

3a. Relevant Information Systems:

System Description: The EAGL information system is a GLNPO-hosted SharePoint platform, information system for reporting results into shared and standardized Excel spreadsheets, on GLRI-funded projects under GLRI Action Plan II. The EAGL information system was developed by the EPA in FY 2015 and is used as a repository for data reporting on accomplishments by the RWG agencies.

Source/Transformed Data: Includes source data and transformed data.

Information System Integrity Standards: Not applicable.

3b. Data Quality Procedures:

Acceptable and quality documentation is required for EPA’s recipients and sub-recipients of GLRI funding when that funding is used for projects involving the use or collection of environmental data.

Federal agencies must have a quality assurance and quality control system in place that will provide the needed management and technical practices that are used to ensure that environmental data that supports GLRI decisions is of adequate quality and usability.

EPA GLNPO’s Quality Management System conforms to the USEPA Quality Management Order and is audited every five years in accordance with the Federal Policy for Quality Management.

In FY 2015 GLNPO’s Quality Management System was combined with EPA Region 5’s Quality program.

3c. Data Oversight:

Source Data Reporting Oversight Personnel: GLRI Focus Area Lead for Habitats and Species.

Source Data Reporting Oversight Responsibilities: Oversight and review of information provided by EPA project officers from grantee progress reports. General oversight for reasonableness of information provided by other federal agencies.

Information Systems Oversight Personnel: EAGL Information System Contact/GLNPO IT Specialist.

Information Systems Oversight Responsibilities: Ensures RWG Agencies receive training on definitions of progress for each Measure; ensures EAGL Information System Spreadsheets are submitted semi-annually; and queries EAGL, conducts QA, and calculates total progress to send to GLRI Reporting Coordinator Lead.

3d. Calculation Methodology:

Funding recipients use various methods to calculate acreage including but not limited to GIS, Google Earth-type mapping tools, estimations based on photographic surveys, GPS mapping, manual calculations through direct observation, and other methods using professional judgments that are acceptable to the GLRI funding agency.

Explanation of Calculations: The sum of the amount of acres protected, restored or enhanced each fiscal year is added to the cumulative total of acres of Great Lakes coastal wetlands protected, restored, or enhanced the previous fiscal year. The baseline of "0 acres of wetlands" defines the status of efforts in September 2014 prior to the initiation of GLRI Action Plan II. Data is not readily available to determine the history of acres of wetlands restored, protected or enhanced through past programs.

Unit of Measure: Acres

Type of Measure: Budget (642), Action Plan (4.1.3), ACS Commitment w/ annual target (GL-21)

The incremental and cumulative totals through the end of the applicable Reporting Period are entered into the EAGL system and reported to the GLNPO Reporting Coordinator.

The total result from all projects for which this measure is applicable is calculated by the EPA Measure Lead through a query and summation of results applicable for this measure in the EAGL system.

Totals are entered into the EAGL system and reported to the GLNPO Reporting Coordinator, who reports the information into EPA's annual commitment system.

4a. Oversight and Timing of Final Results Reporting:

Final Reporting Oversight Personnel: GLNPO Reporting Coordinator.

Final Reporting Oversight Responsibilities: Review information from Measure Lead for completeness and reasonableness.

Final Reporting Timing: Semi-annual in May and November.

4b. Data Limitations/Qualifications:

General Limitations/Qualifications: There may be errors in classification, geo-referencing, input accuracy, as well as data omissions, the fact that statistics from the system reflect a point in time, and that information in the EAGL system is input by multiple Federal agencies using different methodologies.

Data Lag Length and Explanation: The data lag is approximately two months. For example, funding recipients have 30 days after their reporting periods to provide their progress reports. In the succeeding 30 days, Federal agencies review that information and use it to report into the EAGL system and EPA collects and sums the data for final reporting.

4c. Third-Party Audits:

GLNPO's Quality Management System has been given "outstanding" evaluations in previous peer and management reviews. EPA Office of Environmental Information (OEI) conducted a Quality System Assessment (QSA) of GLNPO on June 18 to 20, 2013. There were no findings as a result of the QSA and the report stated that "the results of the QSA reflect a quality system that is effective for the organizational structure and environmental data programs.

There is senior management commitment to ensuring that quality requirements are met for data and information supporting GLNPO's decisions."

GAO evaluated the EPA Great Lakes program in 2004 and found deficiencies in organizational coordination and information collection. Please see <http://www.gao.gov/new.items/d041024.pdf>

OMB assessed the EPA Great Lakes program in 2007. Please see

<http://www.whitehouse.gov/omb/expectmore/summary/10009010.2007.html>

EPA OIG evaluated the Great Lakes' progress in cleaning up AOCs, including recommendations for the data management and reporting of clean-up volume totals and costs. Please see

<http://www.epa.gov/oig/reports/2009/20090914-09-P-0231.pdf>

In FY 2015, GAO reviewed how GLRI funds have been used. Among other things, GAO recommended in its draft report that EPA: 1) decide whether it should continue to use its Great Lakes Accountability System (GLAS) for tracking GLRI projects or replace GLAS with a different system; 2) take steps to ensure that information collected on projects is accurate; and 3) ensure that the project tracking system include guidance for entering information. EPA implemented GAO's recommendations prior to the finalization of GAO's report. GAO reviewed the actions taken and determined that the recommendations had been addressed. As a result, GAO's July 21, 2015 final report, entitled Great Lakes Restoration Initiative: Improved Data Collection and Reporting Would Enhance Oversight (GAP-15-526) contained no recommendations for EPA.

