

# **Environmental Management System Internal Audit Report**

**U.S. EPA Region 7  
Kansas City, Kansas**

**Conducted  
September 8-10, 2015**

## TABLE OF CONTENTS

1.0 INTRODUCTION		Page 3
2.0 INTERVIEWS		Page 3
3.0 AUDIT OBSERVATIONS / FINDINGS		Page 5
APPENDICIES		
Attachment 1	Internal Audit Schedule	Page 9
Attachment 2	Audit Team Notes	Page 13

## 1.0 INTRODUCTION

The internal audit was conducted on September 8-10, 2015 with the stated purpose of:

- Determining whether the Region's EMS conforms to the core foundations of ISO-14001, the requirements of EPA's EMS Audit Protocol, and current Region 7 internal performance objectives;
- Determining if the EMS has been properly implemented and maintained; and
- Providing relevant information on the suitability, adequacy, and sufficiency of the EMS to the Region's Senior Management.

The internal audit followed the schedule provided in Attachment 1. The initial schedule was prepared by Chris Taylor, the EMS Coordinator, and was reviewed by Diane Harris, the Lead Auditor. Minor schedule changes were made along the way to accommodate the needs of Region 7 personnel and the Audit Team. An opening meeting, attended by Diane Harris, lead auditor; Kathy Finazzo, audit team member; Chris Taylor, EMS Coordinator; Neal Gilbert, Associate EMS Coordinator and Doug Jones, Security, Safety and Facilities Management Acting Branch Chief was held at the beginning of the on-site activities to review the audit plan. The closing meeting was held on September 10, 2015, at which the time the Audit Team presented the preliminary findings of the internal audit. The meeting was attended by Diane Harris, lead auditor; Kathy Finazzo, audit team member; Chris Taylor, EMS Coordinator; Mike Brinks, Acting Deputy Regional Administrator and Doug Jones, Security, Safety and Facilities Management Acting Branch Chief. Senior staff and members of the EMS Sustainment Team were invited to both the opening and closing meetings.

The EMS Internal Audit Team was led by Diane Harris of the Environmental Sciences and Technology Division. Diane has completed the ANSI-RAB EMS auditor course and was a member of the 2009, 2011, and 2013 Region 7 Internal EMS Audit Teams. She was assisted in the audit by Kathy Finazzo from the Office of Policy and Management. Kathy has completed the ANSI-RAB EMS auditor course and has extensive financial auditing experience.

The criteria used for this internal audit is based on the ISO 14001 standard and is contained as an attachment to EMS Operating Procedure 007.7210.13, *Internal EMS Conformance Audits*.

Observations and findings from the internal audit are found below in Section 3.0. All findings are based on objective evidence that was gathered from reviews of EMS documents and records, interviews with Region 7 employees, and direct observations made during site tours. Areas listed in the criteria, but not listed as findings in Section 3.2, are considered to be in conformance. Copies of notes created by the Audit Team during the course of the audit can be found at Attachment 2.

## 2.0 INTERVIEWS

### 2.1 Science and Technology Center

Diane Harris interviewed staff at the Science and Technology Center (STC) on September 15, 2015 (due to a scheduling conflict these interviews had to be delayed) and met specifically with the following STC staff:

- Mike Davis, Monitoring and Environmental Sampling Branch Manager

Additionally, Diane randomly selected other staff members regarding their knowledge of the EMS, e.g., compliance with regulatory requirements, continual improvement, pollution prevention, and communication. Those interviewed generally had an understanding of the EMS and their responsibilities under the EMS.

- Interviewees at the STC referred to recycling and/or hazardous waste/materials as the common themes of the EMS.
- Most interviewees were confused about the environmental policy vs the sustainability policy, and most believed they were separate policies/initiatives.
- One interviewee was not aware that the hazardous materials program has moved from the EMS to the

SHMS and was unsure of when the EMS ends and where SHMS begins. Staff was confused and not sure it makes sense.

The management and staff at the STC have taken ownership of the EMS and how their activities at the facility relate to and impact the Region's EMS. There is a clear commitment to the EMS and they are proactive in working with the EMS Coordinator.

## 2.2 Training & Logistics Center

Diane Harris and Kathy Finazzo, Audit Team member, interviewed staff at the Training & Logistics Center (TLC) on September 9, 2013. Diane and Kathy specifically interviewed:

- Joe Ricard, Warehouse Manager

Additionally, Kathy randomly selected other staff members regarding their knowledge of the EMS, e.g., compliance with regulatory requirements, continual improvement, pollution prevention, and communication. Those interviewed had an understanding of the EMS and their responsibilities under the EMS.

## 2.3 Regional Office

Diane Harris and Kathy Finazzo, Audit Team Member, interviewed members of Senior Staff and others with EMS roles and responsibilities. The following individuals were interviewed:

- Mark Hague, Acting Regional Administrator;
- Mike Brinks, Acting Deputy Regional Administrator; and
- Management Program Leads: Janet Shearer, Chris Taylor, Jennifer Dawani

Additionally, Diane and Kathy randomly selected other staff members regarding their knowledge of the EMS, e.g., compliance with regulatory requirements, continual improvement, pollution prevention, and communication. Those interviewed had an understanding of the EMS and their responsibilities under the EMS.

Employees provided suggestions, concerns, observations or comments on the EMS system.

- Concern was expressed about the public appearance of non HE/LE vehicles parking in designated spots.
- One individual felt the training could be more personal regarding how they could individually contribute to organizational objectives, targets and goals.
- During the random interviews, the most recognizable EMS components were the recycling program, Carbon Footprint, and the commuting program.
- One manager interviewed was interested in having the internal audit report made available to the Region thru the intranet.
- Several staff interviewed expressed positive thoughts on the recycling program and felt it has greatly improved.
- Many staff were cognizant of commuting, telework, and recycling programs and identified them as "good things".
- Several staff interviewed believed that when it comes to EMS the Region should "walk the walk" and set the example for others.
- There was some confusion among staff regarding EMS terminology, for example, many staff were confused regarding the distinction between the term Environmental Policy versus Sustainability Policy, also most staff were unable to name a Significant Environmental Aspect, yet could explain a component of the EMS.

### **3.0 AUDIT OBSERVATIONS / FINDINGS**

#### **3.1 Observations**

Region 7 senior management and employees demonstrated an interest and commitment to continually improving their environmental performance and reducing the Region's footprint.

Observations included:

- Management Program Leads were knowledgeable about their programs, how the review and updating process works, and how to address changes as they occur. They had all received some form of training specific to their program. However, some Management Program Leads feel they do not have influence on some of the objectives and targets.
- The EMS Coordinator was successful in training the majority of employees on the Region's EMS.
- Staff interviewed at random were familiar with the EMS, could define what they saw as their role in the system, and they were all aware of and had taken EMS training.
- It is clear that EMS activities are documented through EMS documents and/or EMS records.
- EMS data could be repositioned to be more easily assessable to the public on Region 7's internet site. This would allow others to more effortlessly model regional stewardship activities.

3.2 Audit Findings

ISO 14001-2004(E) Section	Finding Type	Requirement	Evidence of Nonconformity
4.1 General Requirements (Scope)	Meets Standard		
4.2 Policy	Meets Standard		
4.3.1 Environmental Aspects	Recommendation	1006.7210.01I ... the process of discerning significant aspects is generally one of validating and, if necessary, updating the existing list found at Attachment 1.	The inventory list found in the OP as Attachment 1 and the SEA list available online do not match. The OP implies Attachment 1 is the current inventory but it actually appears to be simply a generic list. The OP does not indicate the list is generic nor does it refer to where the current inventory list of SEAs can be found.
4.3.1 Environmental Aspects	Recommendation	OP 1006.7210.01I The final list of SEAs is used to discern the need to develop/maintain MPs and to create the Region's EMS O&Ts in accordance with the most current version of EMS 1006.7210.05.	On the Management Program forms for Sustainable Travel and Sustainable Facilities, the SEA listed in Box A were incomplete. However, this was corrected during the review.
E4.3.2 Legal and Other Requirements	Recommendation	OP 1006.7210.04F The purpose of this Operating Procedure is to establish a uniform procedure for identifying and having access to the legal and other requirements that govern EPA Region	One LOR was missing from the Sustainable Facilities MP. However, this was corrected during the review.

		7's activities, products, and services.	
4.3.3 Objectives, targets and environmental programs	Recommendation	OP EMS 1006.7210.05H Senior Management shall review and approve O&Ts.	For the list of O&Ts, Senior Management approval was not clearly documented. The EMS team relied on the absence of comments/response rather than on documented approval via signature(s) or a similar positive response as was seen in other instances of Senior Management approval of EMS elements.
4.3.3 Objectives, targets and environmental programs	Recommendation	OP EMS 1006.7210.05H Achieving the O&Ts, along with the completion of all tasks and maintaining and updating the MP form, is the responsibility of the Program Lead with assistance, as needed, from the EMS Coordinator.	Program Leads should be encouraged to update expected timeframes for task completion within the MPs on an annual basis.
4.4.1 Resources, roles, responsibility, and authority	Meets Standard		
4.4.2 Competence, training, and awareness	Recommendation	OP EMS 006.7210.07G All Region 7 EMS training is designed to ensure all personnel are aware of,,,...the significant environmental aspects and related actual or potential impacts associated with their work and the environmental benefits of improved personal performance	When asked about Significant Environmental Aspects (SEA) or environmental issues, most employees were unable to connect the EMS program with the SEA. During the next EMS cycle, this may be a place to focus training.  A number of personnel interviewed did not have current EMS cards including the Acting RA and the Acting DRA.
4.2 Competence, training, and awareness	Recommendation	OP EMS 006.7210.07G Awareness Training and Refresher Training in the Region is conducted by the EMS Coordinator or designee.	Historically, all EMS training has been conducted by the EMS Coordinator. Recommend that in planning for attrition and to provide for a cross training opportunity that 'designees' be allowed to develop experience in presenting the EMS training sessions.

4.4.3 Communications	Minor	<p>OP EMS 1006.7210.08F The EMS Coordinator will maintain an EMS section on the Region's Internet site.</p> <p>The environmental policy has been distributed to all division employees within the region.</p> <p>OP EMS 1006.7210.08F Internal and External Communication OP states various EMS-related documents (i.e., the policy statement, EMS OPs, significant aspect lists, and the management programs) are to be posted to the Internet in order to make them available to external stakeholders.</p>	<p>The EMS website (internet) is available to the public but it is not easily found. This website has not been fully updated and several inconsistencies were noted.</p> <p>The email address for the Green Meeting Team lead on the EMS roster list on the Sharepoint site was incorrect and has been corrected by the EMS Coordinator.</p> <p>Random interviews were conducted and staff were consistently unaware that the sustainability policy is synonymous with the environmental policy.</p> <p>The MP forms were not located on the internet for internal or external stakeholders. Recommend that the OP be revised to indicate the MPs are available to only internal users and not to external stakeholders. Further, the MP forms should be placed on the intranet site to improve transparency and communication of the EMS.</p>
4.4.4 Documentation	Meets Standard		
4.4.5 Document Control	Minor	<p>SHEMS 1006.7210.02I ...the control of documents under both the SHMS and EMS are equally important to ensure ... Obsolete documents are promptly removed from all points of issue and points of use.</p>	<p>The EMS Suggestion Program OP was not provided to the auditors as an EMS document; however, it is available on the internet but is not current (last recertified date found is 2011). The status of this OP and its applicability to the EMS unclear. This OP should be removed or at least updated.</p>

4.4.6 Operational Control	Meets Standard		
4.4.7 Emergency Preparedness & Response	Meets Standard		This requirement has been deferred to the various health and safety-related Regional response plans.
4.5.1 Monitoring and Measuring	Meets Standard		
4.5.2 Evaluation of Compliance	Meets Standard		
4.5.3 Nonconformity, Corrective Action, and Preventive Action	Recommendation	OP SHEMS 1006.7210.12F The Coordinator shall initiate the Corrective/Preventive Action Process.	Targeted and actual completion dates for corrective actions are expected and a timeframe for conducting a follow-up assessment after implementing corrective actions is identified. However, timeliness for initiating the corrective action process is not addressed. Add language for a goal to initiate the corrective action process.
4.5.4 Control of Records	Meets Standard		
4.5.5 Internal Audit	Meets Standard		
4.6 Management Review	Meets Standard		

**Attachment A**  
**EPA Region 7**  
**Internal EMS Audit Schedule**  
**September 8-10, 2015**

**Tuesday; September 8**

<b>Time</b>	<b>Activity</b>	<b>Location</b>	<b>Region 7 Participant</b>
8:30-9:00	Audit Opening Meeting	RO 2.1 "The Lion's Den"	EMS Coordinator, Associate EMS Coordinator, Acting ARA, Acting SSFM Branch Chief, & EMS Sustainment Team (as available)
9:30-2:30	Review EMS Documents  -Scope and Policy -Roles and Responsibilities -Significant Aspects -Legal and Other Requirements -Objectives and Targets -MPs -EMS Training -Internal and External Communication - Document Control/Records Management - Operational Controls - Emergency Response - Monitoring and Measuring - Management Review	RO 2.1-L47 "Fort Knox"	EMS Coordinator, Associate EMS Coordinator
2:30-3:00	Audit Team Meeting	RO 2.1-L47 "Fort Knox"	None
3:00-3:30	Day 1 Review	RO 2.1-L47 "Fort Knox"	EMS Coordinator, Associate EMS Coordinator

**Wednesday; September 9**

<b>Time</b>	<b>Activity</b>	<b>Location</b>	<b>Region 7 Participant</b>
8:15-8:30	Audit Schedule Day 2	RO 2.C-C09 "Shawnee Conference Room"	EMS Coordinator, Associate EMS Coordinator
8:30-11:30	- Interview Sustainable Travel Mgmt Program Lead - Interview R3 Mgmt Program	RO 2.C-C09 "Shawnee Conference Room"	Chris Taylor  Jennifer Dawani

	Lead - Interview Sustainable Facilities Mgmt Program Lead - Interview SPP Mgmt Program Lead		Chris Taylor  Janet Shearer
10:00-10:30	Interview with Acting RA/DRA	RO 2.2-P46 "RA Conference Room"	Mark Hague & Mike Brincks
12:00-3:15	- Interview Hazardous Waste Management Program Lead  - Interview EPA employees on awareness; GOV Fleet Manager  - Interview Senior Staff members as necessary	STC  STC/RO/TLC  RO	Mike Davis & others with responsibility as necessary  TBD; Joe Ricard & Bill Whalen TBD
3:15-3:45	Audit Team Meeting	RO 2.C-C09 "Shawnee Conference Room"	None
3:45-4:15	Day 2 Review	RO 2.C-C09 "Shawnee Conference Room"	EMS Coordinator, Alternate EMS Coordinator

**Thursday, September 10**

<b>Time</b>	<b>Activity</b>	<b>Location</b>	<b>Region 7 Participant</b>
8:00-8:15	Audit Schedule Day 3	RO 2.C-C09 "Shawnee Conference Room"	EMS Coordinator, Associate EMS Coordinator
8:15-1:00	Complete any remaining interviews or document reviews  Audit Report Preparation	RO 2.C-C09 "Shawnee Conference Room" RO/STC	EMS Coordinator, Associate EMS Coordinator, others as necessary
1:00-1:30	Audit Pre-Brief	RO 2.C-C09 "Shawnee Conference Room"	EMS Coordinator, Alternate EMS Coordinator
1:30-2:00	Audit Closing Meeting	RO 2.B-C32 "Lakeview Conference Room"	Acting DRA, Acting ARA, EMS Coordinator, Associate EMS Coordinator, EMS Sustainment Team (as available)

**Wednesday, August 14, 2013**

<b>Time</b>	<b>Activity</b>	<b>Location</b>	<b>EPA Participant</b>
8:00-8:15	Audit Schedule Day 3	RO 2.A-L09 "Market View 2"	EMS Coordinator, Associate EMS Coordinator
8:15-2:00	Complete any remaining interviews or document reviews  Audit Report Preparation	RO 2.A-L09 "Market View 2" RO/STC	EMS Coordinator, Associate EMS Coordinator, others as necessary
2:00-2:30	Audit Pre-Brief	RO 2.A-L09 "Market View 2"	EMS Coordinator, Alternate EMS Coordinator
2:30-3:00	Audit Closing Meeting	RO 2.B-C32 "Lakeview Conference Room"	Acting ARA, EMS Coordinator, Associate EMS Coordinator, EMS Sustainment Team (as available)

## **Attachment 2**

### **Audit Team Notes**