State Review Framework

Compliance and Enforcement Program Oversight

SRF Reviewer's Guide

Round 5 (2024- 2028)

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U.S. Environmental Protection Agency Office of Compliance, Office of Enforcement and Compliance Assurance (OECA)

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I. INTRODUCTION

This document, "The SRF Reviewer's Guide," serves as the comprehensive guidance for the State Review Framework (SRF), meant to provide regional and headquarters personnel involved in an SRF review — managers, liaisons, coordinators, and program leads — with a description of the process for conducting the review, roles and responsibilities, and essential content to include in the final report.

Though the *Reviewer's Guide* covers a considerable amount of material, it is not exhaustive and therefore is intended to be used in conjunction with additional material when conducting a review, such as:

- <u>Media-Specific Plain Language Guides (PLGs</u>) in-depth descriptions of the review elements and metrics along with instructions on using the metrics to make appropriate performance findings
- Metric Quick Reference Guides spreadsheets with SRF metric descriptions
- <u>File Review Checklist</u> template to document file specific information for each file review metric during a file review
- <u>File Review Worksheet</u> template to compile results and preliminary findings based on the file review metrics
- <u>Training Videos</u> visual step-by-step explanations of key parts of a review (e.g., file selection)
- <u>SRF Manager Database: User Guide</u> Instructions on how to use the database

The documents above can be found on the SRF Manager Database, while the training videos are available on ECHO's SRF web page.

A. Background on the State Review Framework

The State Review Framework (SRF) is the primary means by which EPA conducts oversight of state delegated and EPA directly implemented compliance and enforcement programs under three core federal environmental statutes covering air, water, land (Clean Air Act, Clean Water Act, Resource Conservation and Recovery Act). SRF was established in 2004, developed jointly by EPA and the Environmental Council of the States (ECOS) in response to calls both inside and outside the agency for improved and more consistent oversight. The key goals that were agreed upon at its formation are:

- 1. Ensure delegated programs and EPA Direct Implementation (DI) programs meet minimum performance standards outlined in federal policies and guidance
- 2. Promote fair and consistent enforcement necessary to protect human health and the environment
- 3. Promote equitable treatment and level interstate playing field for business
- 4. Provide transparency with publicly available data and reports.

The review is conducted on a five-year cycle, so programs are reviewed once every five years. Programs are evaluated on a one-year period of performance; typically,

the fiscal year prior to review. The review is based on a standardized set of metrics to make findings on performance in five categories: data, inspections, violations, enforcement, and penalties. EPA issues recommendations for deficiencies and tracks through completion. Results of the review are organized into a final report which is published on EPA's public web site.

B. The Importance of a High-Quality Review

Conducting a thorough, high-quality review is essential if the findings on program performance are to be considered accurate and credible - an important factor in terms of oversight and public transparency. Furthermore, a high-quality review increases the likelihood that if or when performance issues are identified, EPA and the authorized program can effectively work together to improve performance and return to conformance with federal policy and standards.

What comprises a high-quality review?

- ✓ States, regional DI programs and local agencies have the opportunity to verify to ensure reviews use complete and accurate data to establish findings.
- ✓ The selection of files is sufficient in number and to the degree possible, representative of the universe and program activities.
- ✓ Program reviewers are adequately trained (training modules for reviewers' refresher can be found at: https://echo.epa.gov/help/state-review-framework/training).
- ✓ Findings on performance are accurate and substantiated.
- ✓ The report is clear and concise.
- Recommendations are SMART (specific, measurable, achievable, results-oriented, timebound).
- Recommendation implementation is monitored (<u>https://www.epa.gov/compliance/state-review-framework-results-table</u>) and completion verified.

C. Overview of the SRF Review Process

The review typically takes one year to complete, from verification of data in the national systems by state and regional data stewards until publication of the final report on the public SRF web site. The diagram below outlines general stages in the review process and a suggested schedule for completion. The three fixed dates pertain to data verification, the draft report, and final report.

Figure 1. Overview of SRF Process

Action	Time Period
Preparing for the File Review	November-February
Conducting the Review	March-August
Data Metric Analysis	60 days before review
CWA Inspection Coverage Table	60 days before review
• File Selection	30 days before review
On-Site or Remote Review of Files	
File Review Worksheet	30 days after review
Drafting And Finalizing Report	September-December
Draft Report	By September 30
HQ Comment Period	15 working days
Send Revised Report to HQ	
State/Region Program Comment Period	30 calendar days
Final Report	By December 31
Recommendation Monitoring and Close Out	Ongoing
 Track recommendation implementation process Work with reviewed program to document progress and develop completion verification statement 	Ongoing

Completion Verification and Close Out

II. Preparing for the SRF Review

Before reviewers can begin the substantive review - analyzing the compliance and enforcement data metrics and reviewing facility files - a series of preparatory steps are required. These steps include ensuring accuracy of data in the national databases; if applicable, selecting the appropriate local agencies or state district offices to review and; establishing communication with the agency being reviewed to officially notify them of the upcoming review and coordinate the review process. These steps are described in more detail below.

A. Data Verification

Data verification is an annual process by which states, and regions responsible for Direct Implementation (DI) programs, can review and correct data in the national data systems (e.g. – facility and activity counts) to ensure completeness and accuracy.

Steps undertaken by data stewards to verify data are listed in Appendix B

Since the SRF review relies on verified data, all data stewards for state delegated programs and

EPA DI programs need to complete steps outlined in Appendix B. This typically occurs during the November to February timeframe following the SRF review year.

Important: Regional SRF Coordinators should work with their regional and state data stewards to ensure completion of the data verification process.

Once the period of data verification concludes, "frozen data," namely the final SRF data metrics based on verified numbers, should be made available soon after. At that time, reviewers can begin the main portion of the review by conducting the data metric analyses and selecting facility files for the file review. Should a region decide to use production data (unfrozen data), the region will be required to reconcile the frozen data with the production data used to initiate the review sooner.

Important: Ideally, SRF reviews will be based only on data that has been verified or frozen through the data verification process. If a situation occurs in which frozen data isn't available or accurate, the option of using state database or production data can be used to start the review process.

The region will need to coordinate with the state more closely to make sure the data will support the appropriate elements and files to reflect the activities during the review year. The region may need to consider supplemental files to ensure an appropriate number of files are valid to complete the review for each element. The review team will be required to reconcile the data with frozen database and production data. State database information may be mentioned as a recommendation for the data element of the report (see Appendix B on Data Verification process and the recommendation section on providing S.M.A.R.T. recommendations for data clean-up).

B. Selecting Local Agencies and State District Offices (if applicable)

This section applies <u>only</u> to reviews of states with authorized local agencies or states with a decentralized state district office structure. If this situation doesn't apply, you can skip this section.

1. Reviewing Local Agencies

In some states, local agencies and state districts may have a delegation authority role in implementing compliance monitoring and enforcement programs. Therefore, as part of the State Review Framework, EPA reviews local agencies and state districts to ensure they are implementing their inspection and/or enforcement programs consistent with national policy and guidance.

Local agencies, as described in this section, are those that implement their programs in lieu of a state agency or EPA. They are different from state district offices because local agencies are not staffed by state employees and generally only have jurisdiction within a city, county,

or metropolitan area.

a. Determining which local agencies to review

Generally, EPA should review in each SRF round local agencies that regulate moderately to heavily populated cities, counties, or metropolitan areas as well as those serving areas with a smaller universe. If a state has several local agencies, it may be appropriate to review some in one review cycle and the others during a later cycle with the goal of covering each jurisdiction over time to ensure oversight coverage across the entire state. This might depend on the size, location, and responsibilities of the local agencies. If local agencies are to be reviewed in a staggered fashion, regions should indicate their plans for selecting local agencies, including the criteria and analysis involved in targeting selected local agencies and state district offices, as part of the discussions with Headquarters at the beginning of the SRF review cycle.

b. Conducting a local agency review

This means EPA must include data metric analysis, file selection lists, files, findings, recommendations, and metrics specific to the local agency and separate from the state agency in the final report. Once EPA completes the state and local agency reviews, both the state and local agency findings will be included in the final report and uploaded onto the public SRF Website. If these reviews are done in separate years, please send reports separately, and HQ will combine the content into one consolidated report for each cycle on the public SRF website.

2. Reviewing State District Offices

Many state agencies administer their compliance and enforcement programs out of district offices (these may also be called regional offices, districts, or boards). SRF data and file reviews cover a state in its entirety regardless of whether it administers programs and stores its facility files at a central office or at district offices.

A SRF file review in a state with districts may require selected facility files be sent to a central location (if files are not already centrally located or available electronically). If that is not possible, the EPA region should attempt to conduct file reviews at every district office, in which case the review will follow the same rules as any other SRF review. Where it is not possible for the EPA region to review files from every district, the EPA region should meet the criteria described below and agreed upon with their HQ SRF Liaison.

Except for the steps below, EPA will conduct these SRF reviews in the same way as those in any other state.

c. Selecting a subset of state district offices for review

If reviewing a subset of districts, consider the criteria below to determine which and how many districts to review. EPA regions may choose to review different districts in CAA, CWA, and RCRA based on these factors:

- Size of state and number of district offices: Conduct file reviews at a minimum of two state district offices per media program. Three or more is preferred. In a large state with many offices, such as California, reviewing all or even most may not be possible. Regardless, EPA should try to review more districts in a state with many district offices than it would in a state with few district offices. It should also review more facilities in a state with a larger universe than it would in a state with a smaller universe.
- Known problems in district offices: Once EPA has established the number of district offices to visit, begin to decide which to review by:
 - Considering known compliance monitoring and enforcement problems in the districts
 - Evaluating ADMA of the districts to determine selection priority
 - Asking the state about performance issues in each district
 - Breaking out SRF data metrics for each district, if possible
- **Districts visited during previous reviews**: The state's prior SRF reports may provide additional information on how districts reviewed during those rounds were performing. If EPA did not review a district during the previous round, it should receive additional consideration in the current round.

A "representative sample" of district offices:

Generally, EPA should evaluate the state holistically, even when performance varies significantly across the districts reviewed. Unless there is clear evidence that issues are isolated, EPA should not assume that the problem only exists in one or more of the districts reviewed — the problem could also exist in districts not reviewed. When drafting the report, EPA should write the finding and recommendation to ensure adequacy of performance state-wide.

d. Next Steps

The EPA region should communicate which districts it plans to review, and the rationale (e.g., selection criteria, Annual Data Metric Analysis (ADMA), and information considered) for selecting them to its HQ liaison prior to developing the data metric analysis and file selection list. Upon reaching agreement with HQ, the reviewer can begin the file selection process. See Table 1 in the File Selection section below for guidelines on how many facility files to pull.

C. Kickoff Letter / Conference

To mark the official start of the review process, regions typically send an initial communication letter, or "kickoff" letter, to the state or local agency to notify them of the upcoming review, provide details on logistics and contacts, and coordinate the review schedule. Depending on needs and resources, regions may choose to also set up an in-person meeting or conference call.

1. Kickoff Letter

Communication can be in the form of either a formal written letter from a Regional senior manager or an informal email from a program manager to his/her state/local counterpart. To fully inform the state and local agency of the purpose and details of the review and ensure coordination goes smoothly, make sure to include the following:

- The purpose of the review and expected process
- A summary of discussions and agreements to date regarding the upcoming review
- The date and time of the on-site review (if already scheduled), or the need to schedule it
- Media-specific program leads with contact information
- Explanation of next steps

If the region intends to hold a kick-off conference, the letter should also include the date, time, and topics for discussion (see below).

A suggested kickoff letter template is attached in Appendix D.

2. Kickoff Conference (optional)

a. Personnel and Scheduling

If scheduling a kickoff conference with the state or local agency, determine who should attend the conference. For EPA, this would generally include the SRF regional coordinator, the media program reviewers, and the appropriate senior managers. For the state or local agency, it might be senior management and staff coordinating the review. EPA and the state will need to determine how they will conduct the conference — it can be in person, video, or phone. The Regional Coordinator can work with the state to schedule the meeting.

b. Conducting the Conference

EPA should discuss the following topics during the conference:

- Changes to the SRF process for Round 5, such as revisions to the metrics and guidance
- Results of the Annual Data Metric Analyses (ADMA) from previous years and Data Metric Analysis (DMA) for the SRF review year

- The scope of the review
- Status of performance issues and unresolved recommended actions from previous SRF reviews
- Expected timeline for the current review national guidance and policies.

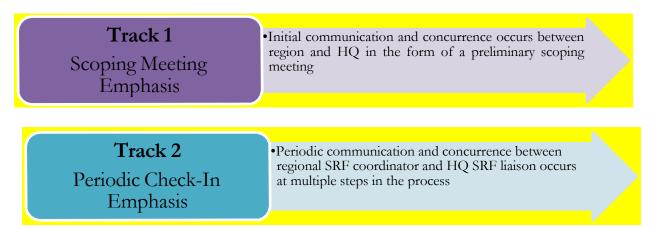
D. Regional Coordination with Headquarters During the SRF Review

Roles and Responsibilities

Regional Coordinator: Ensure effective and efficient communication and coordination occurs between the Region (within the region, regional coordinator, SRF reviewers, relevant regional management) and Headquarters. Coordinators are ultimately responsible for making sure all relevant documents, including the draft and final report, are submitted on time and of high quality.

Headquarters Liaison: Assist the Coordinator with training, technical assistance, and guidance on SRF policy, process, and materials. Liaisons are responsible for working with HQ staff and the Regions to ensure the completeness and accuracy of all review materials and their consistency with national guidance and policies.

The SRF review process involves numerous process steps, documents, people as well as managing a shared database and therefore requires a considerable amount of coordination. EPA regions may select from one of two process tracks for coordinating SRF reviews with Headquarters that best suits their needs. The emphasis in Track 1 is on an initial comprehensive scoping meeting, while Track 2 relies on check-ins throughout the review process. Regions are encouraged to communicate with Headquarters whenever issues or questions arise.



Appendix C provides a detailed description of each track.

Region should let their SRF Liaison know which track they intend to use prior to beginning the review.

III. Conducting the Review

When all the preparatory steps above have been completed, reviewers can begin the substantive portion of the review, starting with the analysis of compliance and enforcement data generated from the national data systems followed by the review of facility files for a more qualitative look at program activities.

A. Data Metric Analysis (DMA)

Roles and Responsibilities

Regional Coordinator: Submit DMA and CWA Inspection Table (60-days before the file review)

HQ Liaison: Review material for completion and accuracy

A Data Metric Analysis (DMA) contains a set of metrics that provide information on program compliance monitoring and enforcement activities by fiscal year. The metric data is sourced from ECHO, which in turn pulls data from the national data systems for each media. The DMA metric values will serve as one of two main sources - along with file metrics - of information used to make findings on program performance.

Conducting a DMA represents the first analytical step in the review process. Based on the data metric values, the reviewer will develop initial findings based on the recommended finding levels shown below (table 2 on p.29). These can be used to determine what program areas may need additional focus for file selection, on-site reviews, or discussion with state and locals.

**The instructions for completing a DMA and making preliminary findings are outlined in Appendix E. Reviewers may also log into ECHO to view the training video with step-by-step instructions on conducting a DMA.

Once a DMA has been completed and reviewed by HQ, reviewers may wish to share the DMA with the state or local agency as part of the kick-off letter or meeting, as mentioned in the section above (section C below has more details on the Kick-off Letter and meeting coordination; Appendix D has an example Kick-off letter). This will allow for agencies to provide any feedback or corrections of the data before findings are drafted in a report, since findings should be based on data that the region and state agree are accurate. All metrics in the data metric analysis are required to appear in SRF reports including goal metrics, CMS metrics, and review indicator metrics.

B. Overview of the Annual Review

Roles and Responsibilities

Regional Coordinator: Work with Regional program staff to develop the ADMA and share with the state. Upload final ADMA to SRF Manager.

HQ Liaison: Assist the Region on development of ADMA and long-term trend data, if needed. Annual Data Metric Analysis (ADMA)

Annual Review of SRF Data and Recommendations

The State Review Framework (SRF) uses a five-year cycle, with each program typically reviewed once every five years. In the intervening years, EPA can conduct routine oversight. The Annual Review, or Annual Data Metric Analysis (ADMA) outlined in this document supplements existing oversight practices by providing additional structure and consistency. The purpose of the Annual Review is to

a) identify and address performance issues in a timely manner, without waiting for a full SRF review; and

b) ensure program performance improvement in areas identified as "area for improvement" in previous reviews.

If the region chooses to use this process, it should cover each media in SRF, including Clean Air Act, Clean Water Act NPDES and RCRA, and should be completed at least once per year, except for the year of the formal comprehensive SRF Review.

The annual review isn't intended to replace or supersede existing regional oversight tools, rather it's meant to supplement efforts by providing a different approach.

The table below summarizes major steps in the annual review and comprehensive SRF, notes the differences, specifically in formality and public reporting/posting.

Annual Review	Comprehensive Review
Review Data Metric Analysis	Formal In brief
Review Recommendation Status	Review Data Metric Analysis
Review End of Year Report	File Selection
Compile Information in Standard Format	File Review Metric Analysis
Discuss Results with State	Formal Out brief
Develop and Implement Action Plan, if	Draft Report (findings and recommendations) in SRF
Necessary	Manager database
Upload report to SRF Manager (non-public)	Opportunity for State Review and Comment
Meet With State, as Necessary	Post Final Report on Public Site
	Track Recommendations Through Closure

C. Sources of Data and Information

<u>Annual Data Metrics.</u> The full suite of metrics providing information on universe size, compliance monitoring, and enforcement activities derived from the national database (ICIS-AIR, ICIS-NPDES, RCRA Info). The metrics are available on EPA's <u>Enforcement and</u> <u>Compliance History Online (ECHO)</u> (see instructions in Attachment #1 on how to compile data and Attachment #2 for a list of included metrics). The comprehensive SRF and the annual data metrics have some overlap in metrics, however there are additional metrics in the annual data metrics not included in the comprehensive SRF. The goals remain the same for a metric if it's included in both reviews.

<u>Data Trends (3-5 years)</u>. The Annual Data Metrics available on ECHO can be compiled to include results over specific periods, for example 3 years. This data may highlight trends, anomalies or outliers in the data, or other patterns to assess state performance or data quality.

<u>SRF recommendations</u>. The SRF requires recommendations for metrics that fall below national goals, these are labeled as an area for improvement. EPA tracks the status of these recommendations in its internal tracking tool (SRF Manager database). The manager organizes details of the recommendation such as required deliverables or actions and lists the associated timeline for completion. The database itself is only available to EPA employees, however the states or public can view the data on the public facing <u>State Review Framework - Results Table</u>. EPA coordinates with states to ensure progress in closing recommendations and assists as requested. When reviewing recommendations, it's important to discuss challenges in resolving recommendations. The annual review may create an opportunity for states to elevate awareness and possibly gain additional support from the region or EPA HQ. Ensuring recommendations remain on their assigned timeline and are properly addressed is one tool to support an effective monitoring and enforcement program.

<u>State End-of-Year (EOY) reports</u>. States submit end-of-year reports to the EPA. These reports detail performance of the state's grant work plan and may provide contextual information such as organizational structure and resource allocation, and how this impacts state performance. It's recommended for regions to review the EOY report in conjunction with other data sources in the annual review, as this may provide insight to the state's priorities or possibly constraints within their program.

<u>Compliance Monitoring Strategy (CMS) or Alternative.</u> The CMS defines program priorities, implementation strategies, inspection commitments, and regional performance measures.

D. Potential Benefits and Uses of the Annual Review

<u>Planning and Targeting of Enforcement Resources</u>: Regions can use ADMA information to inform annual planning and targeting discussions with states. For example, violation and SNC rates may suggest program "weakness" within a state and influence EPA's inspection targeting and investment of inspection resources within a state. ADMAs can also be helpful in grant workplan discussions with states by helping set annual commitments for enforcement activities. Additionally, if the review notes positive results, the state can use this data to further support compliance and enforcement initiatives, especially if they're recently enacted.

<u>Verifying or Checking the Quality of SRF Data:</u> ADMAs can be used prior to and during data verification as a cross-check to confirm numbers reported by the states for data metrics are accurately reflected in the data systems. Regions can engage with states on the quality of their data before the data is frozen, providing states an opportunity to address during the verification process. This proactive step may provide immediate impacts in data quality and may also lead to a successful comprehensive SRF if the corrective action resolves the root cause. States can supply explanations where data issues exist and may contact the region during the data verification process to discuss or explain issues.

<u>Identify Trends</u>: Trends in data could show strong or weak performance, and the annual review is an opportunity to recognize performance and take appropriate action in a timely manner. Similar to timely enforcement of environmental regulations, timely action on data metrics should result in a return to conformance or compliance or to acknowledge effective programs. The Annual Data Metric Analysis can be used during routine oversight of states as a tool for reviewing the state performance and identifying or getting ahead of any potential problems or issues that may require additional oversight, monitoring and/or assistance. The ADMAs can provide valuable information to be used during quarterly or annual discussions with the states on Performance Partnership Agreements (PPAs)/ Performance Partnership Grants (PPGs) or other program grants commitments.

For example, state data can be reviewed to determine if minimum data requirements are being met for data entry, inspection commitments are meeting CMS goals, and enforcement actions to ensure SNC are being addressed within designated timeframes. If data seem to indicate an area of concern, Regions can request inspection reports or other enforcement files for a more in-depth review. Increased communication with states: EPA and states traditionally have multiple avenues to effectively communicate, and the annual analysis provides another opportunity either by itself in a stand-alone meeting, or as an additional agenda topic on an existing method.

<u>Semi-Automated</u>: The annual review is a semi-automated process that pulls data from ECHO and presents data metrics for the specified media in an easy-to-follow table. Regions can then review data and insert additional detail, such as trend analysis or conclusions from conversations with the states, in predetermined sections. By being semi-automated, the goal is to reduce the burden on regions and streamline the process.

<u>Support to OECA's ELMS Bowling Chart Metric</u>: OECA established a bowling chart to track certain metrics, and one is the SRF metric on status of recommendations. Each region established a quarterly target, which represents the number of Round 4 recommendations and subsequently Round 5 recommendations in FY24 closed in the reporting period. ADMAs can be a useful means for tracking states' progress in addressing problems identified in a past SRF reviews. Although most SRF findings are based on file metrics, the data metrics can be helpful in assessing state progress in fixing problems and implementing recommendations from previous reviews. Furthermore, annual data analysis in the form of trend data can help plan for upcoming SRF reviews so there are fewer surprises when the reviews occur. Regions can also use the ADMAs to determine which states might be candidates for conducting a SRF review in the upcoming year. If the data indicates a drop off in performance in one of more areas, the Region may decide to prioritize the state for a review sooner rather than wait for the full 5-year cycle.

<u>Opportunity to train new staff or to keep SRF principles at the front of mind:</u> The annual review can be completed by a single EPA employee; however, the team could also expand to include new employees, or those with a specific area of expertise. This presents an opportunity to train employees or gain a deeper understanding of data. Since this is an annual process, reviewers keep SRF principles fresh in their mind.

E. Conducting the Annual Review (process and end products)

STEP #1: <u>Determine date for the Annual Review</u>

- Option A: Prior to Data Verification (Oct Feb)
 - Data is from latest full fiscal year, but production data can be used to improve the data verification process if completed prior to end of data verification period.
 - Trend data can still be analyzed.
- Option B: After Data Verification (Feb May)
 - Latest data are from previous fiscal year, at minimum approximately five months old.
 - Data are verified by State

* It is not recommended to complete the DMA between June and September as the data are incomplete for the current FY.

STEP #2: Begin Annual Review by compiling Source Information

- Download an ADMA (see Attachment #1 of Appendix L for instructions)
- Download latest list of recommendations from the SRF Manager database (recommendations are only for findings with an area for improvement)
- Obtain Compliance Monitoring Strategy (CMS) Plan or Alternative CMS
- Obtain End-of-Year Reports, if available

STEP #3: Use questions in attachment #2 of Appendix L and data metric analysis template provided in attachment #3 of Appendix L to review data, identify potential issues, and document follow-up.

STEP #4: Discuss results and findings with the state.

STEP #5: Upload the completed template to SRF Manager database.

F.When Potential Issues Are Identified (Follow-up)

Initial follow-up with the state to discuss results and correct data. Per the June 2023
 Effective Partnerships Between EPA and the States in Civil Enforcement and Compliance
 Assurance memo, regions should include discussions of the results of program audits in their regular coordination meetings with states, including from the Annual Review.
 These discussions should include the status of recommendations from the most recent SRF review.

During these discussions the state should notify the Region of known data issues. Once data quality is determined, the Region and the state should have a conversation on outcome of the regional assessment. Discussion may include trend analysis, outliers, anomalies or perceived strengths or weaknesses. If the region identifies an area with room for improvement or an area of concern, they will coordinate with the state to develop an action plan and coordinate through completion. This plan doesn't necessarily have to be documented and there isn't a required format, but to aid in developing an action plan, it's recommended regions and states identify the root cause

and use the Specific, Measurable, Achievable, Relevant, and Time bound (SMART) method when establishing actions.

- <u>Additional research and problem-solving</u>. Based on the information in the Annual Review as well as follow-up discussions, the Region may want to take additional steps to investigate a potential issue, such as completing an abbreviated file review as part of enhanced oversight:
 - If a comprehensive review is scheduled in the next 18 months, the Region may decide to select supplemental files based on areas of concern identified in the Annual Review
 - The Region could identify and review a subset of files normally done in the comprehensive review. For example, a normal file review may include 35 files, whereas the subset for the annual analysis may be five files targeted for the specific area of focus.
 - If the state maintains an accessible online records inventory, or is willing to provide records electronically, the Region has the option conducting the review remotely.
 - Recurring meetings with the state present an opportunity for scheduled discussions to address concerns or to track progress.
- Determine steps to resolve performance issues. The region and state should discuss, and to the extent possible, agree on actions to resolve know performance issues. If issues identified during the Annual Review appear to be persistent or widespread, regional program managers may decide to elevate the issue to Regional senior management, and if necessary, their HQ liaison, for attention and resolution.

IV. OECA's Responsibility

OECA will review regional input to each annual review and provide feedback to ensure EPA maintains a nationally consistent approach, and to also identify and communicate best practices. In addition, OECA will periodically meet to discuss progress of the annual reviews in addition to the overall status of the SRF program.

The Office of Compliance developed the <u>SRF Recommendation Breakout dashboard in Qlik</u> to include annual results for data and files metrics. Regions can use the Qlik Sense tool to create trend charts for data metrics in the ADMAs.

**Sample media specific ADMA can be found in Appendix L.

A. File Selection

Roles and Responsibilities

Regional Coordinator: Submit File Selection List and if relevant, state specific Compliance

Monitoring Strategy plans for inspection coverage/MOA/Workplans used for inspection coverage (30-days before on-site review)

HQ Liaison: Review material to ensure selection criteria is met and that the correct number of files, categories of compliance and enforcement activity, and type of facilities (size, geographic distribution, sector, coverage of large universe and coverage areas in state specific CMS inspection coverage plans, etc.)

The objective of file selection is to obtain sufficient information to draw conclusions regarding state performance under each SRF element. It is very important that reviewers have an adequate number of files to develop supportable findings and recommendations particularly where there is a potential concern (e.g., withdrawal petition, ADMA trends, or previous SRF findings of performance issues).

1. File Selection Preparation

Before selecting facilities, EPA completes the DMA to identify potential problems. For CWA reviews, EPA also completes the CWA inspection coverage table (see the *CWA Plain Language Guide* for instructions). Reviewers should consider these sources of information, combined with problems identified in previous SRF reviews and annual DMAs, when determining what activities or sectors to focus on during the review. Areas with no data appearing in the data metric analysis, such as zero violations or actions, should be discussed with the state to determine whether there are any unreported activities available from information in state data system to supplement the review. In these instances, the reviewer should ask for a list of all unreported activities and select files randomly from the list.

After HQ reviews the DMA and file selection, HQ recommends EPA regions transmit the file selection list to the state at the same time as the DMA. In addition, EPA should decide if the state review will include any reviews of local agencies or district offices. Earlier sections of this document deal with these types of reviews.

Reminder: The DFR's change over time and are not frozen data. It's a tool to help assess the facility information by quarter. The DFR should be accessed and printed after the file selection has been completed.

2. Determining Minimum Number of Facilities to Review

To determine the total number of files to select for your review, examine the "total number of records returned" or activities returned found in the upper left-hand portion of your screen in the ECHO file selection tool. For example, if the total number of inspections, violations, enforcement actions, and penalties that occur in the review year is 256, this would be within the range of 26-300 compliance monitoring and

enforcement activities reported at the top of the File Selection Tool "Total Number of Records Returned." As a result, the reviewer would select 25-30 files as the table below indicates.

For step-by-step instructions on creating a file selection list via the ECHO File Selection Tool, see Appendix F, or visit the SRF training videos on ECHO.

Table 1: File Selection Guidelines			
State-Wide Review			
Number of Activities in File Selection Tool	Minimum # of Facilities or Files Selected		
More than 1,000 activities reported	35 to 40 files selected		
301 to 1,000 activities reported	30 to 35 files selected		
26 to 300 activities reported	25 to 30 files selected		
Fewer than 25 activities reported	All files selected		
Review of Local Agencies & State District Offices ¹			
Number of Local Agencies or State Districts	Minimum # of Facility or Files Selected		
1 agency or district	30 files selected		
2 agencies or districts	30 files selected (15 per agency/district)		
3 agencies or districts	30 files selected (10 per agency/district		
4 agencies or districts	30 files selected (7 per agency/district, plus 2		
	additional files)		
5 or more agencies or districts More	30 files selected with roughly even distribution		
	across agencies / districts		

If data in the national data systems do not accurately reflect state activities, EPA may need to work with the state to verify the number of activities taken by the jurisdiction, then select a more representative group of facilities. This applies primarily to CWA wet weather, pretreatment, and significant industrial user universes, which may not be fully populated in ICIS-NPDES. (See Appendix C of the *CWA Plain Language Guide* for additional information.)

3. Selecting a Representative Sample of Files

a. Basic Requirements

Important: EPA should select <u>at least five</u> facilities for each of the following categories:

- Inspections with enforcement
- Inspections without enforcement
- Non-SNC violations (CWA/RCRA), federally reportable violations (CAA), or secondary violations (RCRA)

¹ For these reviews, also refer to section I, "Preparing for the SRF Review." If fewer than 30 files are available for review in the file selection tool, select all files available for review

- SEVs (CWA) or stack tests failed (CAA)
- SNCs (CWA/RCRA) or HPVs (CAA)
- Informal enforcement actions
- Formal enforcement actions
- Penalties

A <u>single facility can count toward multiple activities reviewed</u>. For example, if a facility has an inspection, a formal enforcement action, and a penalty, then that facility addresses all three categories.

If there are fewer than five facilities in a category, select all available to include in the file selection list and determine if the low number is indicative of a performance issue.

Important: Regions should then select files from a prior fiscal year(s) if fewer than 5 activities are available to select in the review year to ensure that performance findings are based on a sufficient number of activities.

For example, if there are only four penalties available in the review year (e.g., FY24), reviewers should examine the prior year (e.g., FY23) of file selection tool data to select one additional penalty.

b. Other Considerations

- At least half of the facilities selected should have compliance monitoring activity, and roughly half should have enforcement activity. (Enforcement includes informal and formal actions, and penalties.). If enforcement activities are limited, make sure you select all review year activities.
- Selection should include a representative mix of facilities:
 - With and without violations
 - Different facility types based on size (major, minor, etc.), sector, geographic location, and other factors
 - Violations but no enforcement, particularly if the DMA indicated that the state might not be taking appropriate enforcement
- It is a good practice to include facilities with multiple inspections in a single year, but no violations found.
- The "Map Selected Facilities" feature allows File Selection Tool users to view geographic distribution at a glance to determine file selection provides an even representation.

4. Supplemental File Selection

Representative file selection will usually provide a sufficient number of files to assess performance across the necessary range of activities, facilities, and geographic areas. However, there are a few circumstances where EPA may elect to select supplemental files, including:

- There is a sector that EPA is concerned about in the state such as CAFOs or POTWs in the NPDES program that the representative selection did not adequately cover.
- A review of previous SRF reports, the review-year DMA, or the annual DMAs show longstanding problems in a performance area not adequately covered by the representative selection.

When selecting supplemental facilities, click their checkboxes to indicate that they are part of the supplemental selection.

Other considerations:

- Reviewers should generally select supplemental files randomly from the list of facilities for the given category.
- On rare occasions, the file review leads to new discoveries about problem areas, and the official file selection does not provide an adequate number of facilities to make findings, EPA may request additional files while on site.
- Reviewers may also want to use the ECHO.gov SRF data metric facility drilldown screen for the issue requiring additional file review. For example, if you are interested in facilities with formal actions not taken in a timely manner, find the relevant SRF metric in the ECHO.gov data metric query and click on the metric number. This will bring up a list of facilities. Then go back into the file selection tool and randomly select some of these.

5. Transmit File Selection List

Upon completing file selection, download an Excel file listing selected facilities by clicking the Download button and then clicking the Download Selected button. The region should send the list to HQ for review in advance of the on-site file review. This will allow the Liaison to provide valuable input on the quality of the list. Following HQ review, the region should transmit the list to the state agency at least two weeks before the file review to allow the state time to pull files.

At this time, the reviewers should also print the DFRs in landscape to ensure that all quarters are viewable. It is much easier to pull them at the end of file selection than later. The File Selection Tool has a Print Selected DFRs button for this purpose.

Reminder: that the DFR is production data and can change as the data updates are entered. DFRs are a reference tool to view detailed activities by quarter. This tool is to be used in conjunction with the frozen data, which is the main source for determining the accuracy of data.

B. File Review

Roles and Responsibilities

Regional Coordinator: Submit File Review Worksheet (30-days after File review)

HQ Liaison: Review material to ensure completion and accuracy of metric calculations, initial findings, and comments

1. File Review Preparation

After selecting files, the review team should continue preparing for the file review.

*See Appendix G for a checklist of all essential materials to have on hand during the review.

a. Print ECHO.gov Detailed Facility Reports (DFRs)

If you did not print DFRs for all the facilities on the file selection list during file selection, pull them by entering facility ID numbers into the facility ID search on ECHO.gov.

b. Print File Review Checklists

Download the CAA, CWA, or RCRA file review checklists from the SRF documentation and guidance page in ECHO.gov or the EPA Manager database. Fill in the information requested on pp. 1-2 based upon information on your detailed facility report to save time during the on-site file review. Print or save an electronic copy for each facility to be reviewed and clip it to the facility's DFR.

2. Coordination with State

For on-site reviews:

If you need access to the state's data system, or assistance navigating the data system, ask the state for assistance.

Contact the state the week before the on-site review to confirm that:

- The state has pulled all selected files; if the state was unable to find some files, select additional files to ensure minimum file selection requirements are met
- The state has reserved a room for EPA to review files
- The files contain all documentation needed to complete the review
- The state has designated a point-of-contact to offer assistance during the review
- The appropriate managers and staff will be available for entrance and exit meeting

Important: During the on-site file review, it is vital that reviewers take quality notes, or if allowed, scan or copy key sections of files or documents particularly where the situation seems complex or unclear. This will ensure that the necessary information will be available to explain findings, support recommendation development when drafting the report, or discussing the preliminary findings with state or local agency.

3. Conducting the File Review

a. Conducting Reviews Remotely

If a state has all files available electronically, regions may choose to conduct the file review remotely. Inspection reports and formal enforcement actions are available on some state web sites. It is a good practice to determine whether compliance determinations following inspections, informal enforcement actions, penalty calculations, and justification for changing penalties are, or can be made available electronically. If some or all these data are not available remotely, an on-site file review will be necessary. Consider whether state public disclosure laws or internal policies make it necessary to supplement electronic reviews with on-site file review and discussion with state staff.

See Appendix K has more details on organizing a successful remote review.

b. Entrance Conference

Regions and states often find it helpful to hold an entrance conference. Appropriate topics include:

- A brief discussion of the new Round 5 process;
- SRF DMA results and how those compare to past ADMAs, including CWA CMS metrics, to indicate potential performance issues;
- File review process;
- Confirming availability of the state's point-of-contact during the review;
- Expected timeline for completion of review and tentative date and time of exit conference; and
- Proposed topics to be covered at exit meeting, such as preliminary findings from the review, requests for additional materials, and the process for drafting and finalizing the report.

c. File Review

Use file review checklists and DFRs to review facility files and refer to the *Plain Language Guides* and underlying EPA policy and guidance for questions about specific metrics. There may be activity from a previous or subsequent year linked to activity in the year reviewed. If so, EPA should review these activities. For example, Region 11 is conducting a review of activity in FY 2018 in one of its states. One of the facilities selected for file review had an enforcement action during FY 2016. This enforcement action was in response to violations found during an inspection in FY 2015. Because they are directly related, Region 11 would review the inspection, violation determination, and enforcement action.

Another facility had an inspection in FY 2018 that resulted in a SNC determination and formal enforcement in FY 2019. Again, Region 11 would review the inspection, violation determination, and enforcement action.

If a facility has multiple inspections or enforcement actions during the review period, review all activities that take place in the review year and record responses for the same question on a separate row of the file review spreadsheet. The file review checklists contain supplemental sections for multiple activities, and the file review spreadsheet contains instructions for capturing each action.

Use the File Review Worksheet to calculate metrics and make initial findings the recommended finding levels shown on p.29. The worksheet automatically tabulates metric values based on the "Y" and "N" responses entered for the facilities. For N/A responses, you may leave them blank or enter N/A. (To prevent data entry and calculation errors, the Worksheet only allows responses of Y, N, N/A, and blank.) Do not adjust the formulas in the Worksheet. It is a good practice to enter checklist responses in the file review spreadsheet daily to ensure that all appropriate questions were answered while the review team still has access to the files. Use the far-right hand column in the table on p.1 of the file review checklist as a guide to the specific questions that should be answered for each type of activity reviewed.

4. Developing Preliminary Findings

Once you have entered all responses in the Worksheet, click on the Initial Findings tab. Metric values will automatically populate in the Initial Findings tab based on values entered in the file review Worksheet. Compare the state performance result to the national goal for each metric to establish preliminary file review findings. You may do this prior to the exit conference, time permitting.

Issues identified as Area for State Attention or Area of State Improvement in the DMA generally represent a performance issue of one kind or another (see definitions of findings on p.29). For example, if EPA made a Area of State Improvement initial finding in the DMA for not inspecting enough major facilities, but state data confirms that the agency exceeded its inspection commitment, it

would appear that the agency was not entering all inspections in the national data system. In this case, the state would receive findings of Area for State Improvement under Element 1 (Data) and Meets or Exceeds Expectations under Element 2 (Inspections).

Reviewers may revise these findings and recommendations later based on additional research and analysis.

5. Exit Conference

EPA should hold an exit conference with state agency personnel following the file review. This conference may occur on site immediately following the review or at a meeting or conference call as soon as possible after the review.

a. Discussing Preliminary Findings and Potential Recommendations

EPA may begin the exit conference by telling the state that it has completed the review and has developed preliminary findings and, if possible, recommendations. EPA should stress that these are subject to change based on further analysis and discussions with HQ. EPA should also discuss areas where state performance is strong.

When discussing preliminary findings for *Areas for Improvement,* EPA should provide reasons for these findings, and, if possible, potential recommendations to improve performance. This should be an opportunity for dialogue, particularly when EPA is unsure what is causing a particular problem, or how to improve it. The state may have additional reasons for low performance, and it may have helpful ideas for how to improve. EPA should note these and add them to the report as appropriate.

When problems noted in prior SRF reviews recur, ask the state why prior recommendations did not solve the problem, and what the state believes it can do to improve performance. If an action was completed that did not solve the problem, recommend a different action.

EPA may ask the state or local agency when they plan to begin correcting the issue, and what they need in terms of assistance, so a realistic due date for a proposed recommendation can be included in the report.

Finally, EPA should discuss the process for drafting the report, reaching agreement with HQ on findings and recommendations, and sharing a draft with the state for its comment.

V. Drafting and Finalizing the SRF Report

A. Developing the First Draft

Roles and responsibilities

Regional Coordinator: Develop and submit a draft report to HQ liaison

HQ Liaison: Review draft report for completeness, accuracy, and integrity

The draft report represents the main product of the review, which when finalized is made available to the public on the SRF web site. Drafting of the report typically begins after the file review, though some reviewers may wish to begin entering administrative information, data metric values along with preliminary findings prior to that point.

Regions have the flexibility to decide who is responsible for drafting the report, or sections of the report, whether that be the SRF coordinator, program reviewers or some combination. Typically, the coordinator is ultimately the one responsible for ensuring that the report is completed properly and on time.

In drafting the report, reviewers will compile the data and file metrics, along with any other relevant information gathered during the review, to make findings on a program's performance under each element (i.e., data, inspections, etc.). To help ensure consistency, a metric value range generally corresponds to one of three finding levels unless there are justifiable reasons otherwise (See Table 2 on page 29). Wherever findings of *area for improvement* are made, recommendations for corrective action must be included, which to the degree possible, should be developed in coordination with the agency reviewed.

Draft reports are due to the HQ Liaison by the end of the federal fiscal year. If the Region needs additional time to complete the draft report, reviewers or SRF Coordinators should contact their liaison and provide them with an expected submission date.

Important: All Round 5 SRF reports will be drafted in the program's SRF Manager- Oracle Apex data system launched in January 2018. The Database is a one-stop system that allows coordinators, reviewers, and liaisons to access key guidance documents, draft, and review SRF reports, and track recommendations until completion.

For more information on how to use SRF Manager in developing a draft report, see the User's Guide posted in the database.

1. Administrative Information

Before drafting the report, reviewers should provide the following information in the Administrative Information view of the SRF Manager's Database:

- Region
- State
- <u>Agency Reviewed:</u> The implementing agency (EPA, State, Local). If state district offices are being reviewed, the state is the implementing agency. If a local is being reviewed, the local is the implementing agency. **All state district offices should be combined into a single report, while separate reports should be created for each local.**
- Round
- <u>Review Year</u>: Federal Fiscal Year (FFY) during which the reviewed activities were conducted.
- Regional Coordinator
- HQ Liaison
- Report Version (final or draft)
- Report Author
- <u>File Review</u>: Dates that the file review was conducted and contact info of media program lead

2. Performance Findings

Findings are the reviewers' determinations on program performance that make up the main content of the report. There should be at least one finding per element, though there are typically multiple findings within an element.

a. Finding Number (up to 3 findings per element: Meets or Exceeds Expectations, Area for Attention, Area for Improvement)

• Each element in the report (data, inspections, etc.) has metrics associated with it and therefore will receive at least one finding. For each element, start with finding 1 and continue sequentially up to a maximum of five findings.

e.g., Element = Data Finding 1-1, Finding 1-2, and Finding 1-3

b. Finding Level

- Review the source information that will be used to make findings:
 - Data metrics from the DMA.
 - File metrics from the file review spreadsheet.
 - Other information such as ADMA performance trends, etc.

Important: Reviewers should use the national goal of the metric, not the national average, for determining a finding level. Averages should be used to provide context to the findings.

• Choose a final finding level. The table below provides a definition of each finding level and offers suggested metric value ranges for help in deciding on a finding level. These value ranges are simply a guide in selecting an appropriate finding

level. Other factors may be considered in choosing an appropriate level, such as the universe size of the metric or whether the issue has recurred across several SRF rounds.

Important: Reviewers must include all metrics including indicators, but no findings levels are to be made on review indicator or indicator metrics. They can be used in the explanation section to communicate factors being considered to goal metrics or why additional files were selected.

See Appendix J to consider other factors for developing finding levels.

Table 2: Finding Levels		
<i>Suggested</i> Metric Value Ranges	Finding Level	
≥85-100%	Meets or Exceeds Expectations: The base level of performance is met, and no deficiencies are identified, or the program is performing above national expectations.	
≥71-84%	Area for Attention: An activity, process, or policy that one or more SRF metrics show as a minor problem. Where appropriate, the state should correct the issue without additional EPA oversight. EPA may make suggestions to improve performance, but it will not monitor these suggestions for completion between SRF reviews.	
≤70% and below	Area for Improvement: An activity, process, or policy that one or more SRF metrics under a specific element show as a significant problem that the agency is required to address. Recommended activities to correct the issues should be included in the report and must have well-defined timelines and milestones for completion, and, if possible, should address root causes. EPA will monitor recommendations for completion between SRF reviews and provide any necessary updates in the SRF Manager database.	

Important: Group metrics within an element under the same finding level. If metric values within an element lead to the <u>same</u> finding level, create a single finding, and include all metrics under that finding. If metrics within an element lead to <u>different finding levels</u>, create multiple findings, grouping only those metrics that lead to the same finding level

- c. Summary
 - Provide 1-2 sentences describing the specific programmatic area(s) reviewed and conclusions on performance. Reviewers should typically try to use the language of the metric on which the finding is based as a guide in drafting the summary statements.

For example:

- Compliance determinations are generally accurate in cases where there is sufficient documentation (*Meets or Exceeds*);
- Inspection reports occasionally lack information sufficient to determine compliance and are not consistently completed in a timely manner (*Area for Attention*);
- Enforcement responses do not consistently address violations in an appropriate manner (*Area for Improvement*)

d. Explanation

- Describe the program's performance in more detail, providing an explanation for how and why the finding level was chosen
- If the finding is *area for attention*: Reviewers may wish to include a suggestion to the state/local agency on how to improve the program or alleviate a concern at the end of the explanation section, though this <u>will not</u> be tracked as an official recommendation in the database.
- If the finding is *area for improvement*: Define the scope of the issue and the cause(s), or potential cause(s) to the best degree possible.

Important: Determine if the performance issue is recurring. Check to see if the same issue was identified in previous SRF rounds. If so, explain as best as possible, why the issue persists or resurfaced. Also, make sure to check the "recurring issue" box in the findings section of the SRF Manager Database.

3. Recommendations

Recommendations are required whenever there is a finding of *area for improvement*. The purpose of recommendations is to ensure that any significant performance issues identified in the review receive a response that either resolves the issue or leads to substantial and consistent progress towards a resolution of the issue (a determination made using best professional judgement).

a. Writing Effective Recommendations

- All recommendations must contain a description of the specific actions that will be taken to address the issue identified, the responsible party, and welldefined timelines or due dates for completion (e.g., 90 days from the completion of the final report). To the greatest extent possible, recommendations should attempt to address the full scope and underlying cause(s) of the performance issue.
- When writing recommendations, reviewers may find it helpful to use the

following SMART checklist to ensure the recommendation includes the required components.

SMART Checklist:

- Specific description of specific actions that will be taken and who will take them.
- Measurable the actions can be measured either quantitatively or qualitatively but should indicate what evidence is needed to measure completion.
- Achievable the actions are within the means of the implementing agency to complete.
- Results-oriented completion of the actions should result in improved outcomes i.e., the issue is addressed, or meaningful and consistent progress is made towards that end.
- □ Time-bound actions include timelines or due dates that create a practical sense of urgency.

Important: If the recommendation is addressing a recurring performance issue, or one identified in the previous round, the recommendation should represent an escalated response. If the issue was resolved but resurfaced, the EPA might consider a longer period of monitoring. Examples of escalated action can be found in the Agency's National Strategy for Improving Oversight of State Enforcement Performance found on the ECHO SRF web page and in the SRF Manager database guidance section.

b. Recommendations vs. Milestones (choose an option)

Important: In writing recommendations for a finding of *area for improvement*, **reviewers can develop one recommendation with multiple milestones/due dates, or create several recommendations based on each milestone.** There may be no difference in deliverables or actions between recommendations and milestones; the only difference is how regions would like to monitor and report out on recommendations during the post review monitoring process. Here are the two options:

- Draft a <u>single recommendation</u> that has multiple milestones (deliverables or actions) but a <u>single due date</u>. The due date will typically mark when the final milestone is to be completed.
- Draft <u>multiple recommendations</u>, each with its own due date, meaning, there would be multiple recommendations and <u>multiple due dates</u> associated with that single finding.

For example, a recommendation may include the following deliverable or action milestones: "1) The state should complete ICIS data entry training by July 31, 2019. 2) The state should enter all SEVs into ICIS by Dec. 31, 2019. 3) The state should complete an SOP for entering SEVs into ICIS by March 31, 2020." Each action or deliverable would be entered in the SRF Manager database as a separate recommendation (no. 1, no. 2, no. 3) with a single due date for each.

4. Executive Summary

As you enter data in the SRF Manager, several buttons are available to ease the generation of the executive summary. The strengths and priority issues buttons are available to ease the process of drafting the executive summary, as they will automatically insert this text into the executive summary. The Summary should convey the main findings from the review, namely the most notable performance successes and challenges of a given program. In other words, readers, especially management, should be able to turn to the Executive Summary to get a sense of what parts of a program are being well implemented, and what parts require additional attention.

a. Areas of Strong Performance (1-3 findings):

- Review all *Meets-or-Exceeds* findings.
- Identify up to five findings that reflect parts of the program that are being implemented at a high or very high level.
- Include the finding summary(s) as written or re-write to better encapsulate the finding.
- If no Areas of Strong Performance are identified, indicate this by writing "No Areas of Strong Performance were identified."

b. Priority Issues to Address (1-3 findings):

- Review all Area for Improvement findings.
- Identify up to five findings that reflect parts of the program that are being implemented at a low or very low level.
- Include the finding summary(s) as written or re-write it to better encapsulate the finding.
- If no Areas of Strong Performance are identified, indicate this by writing "No Priority Issues to Address were identified."

c. Other considerations (optional)

- Include discussions of state or regional policies in the executive summary
- Other areas reviewed that are not captured in the report

d. Summary Table

- Following the highlights of the current review, the Executive Summary should include a brief overview of performance issues from past reviews if it was an area for improvement in current or prior rounds.
- The SRF Manager has a recurring box that once you check-off, will generate the table.
- The overview should indicate whether issues identified in previous reviews have been resolved or continue to be a problem.
- The SRF Manager will create a table that includes the finding levels for each issue associated with a SRF metric and columns for each Round of a reviews.
- The table below is an example:

Metric	Round 4 Finding Level	Round 5 Finding Level
10b - Appropriate enforcement taken to address violations [GOAL]	Area for Improvement	Area for Improvement

B. Finalizing the Report

1. HQ Review of Initial Draft Report

Once Regional reviewers have completed developing a draft report in the SRF Manager database, the Regional Coordinator should notify the HQ Liaison that the initial draft is complete. The Liaison will begin a completeness check to make sure all the necessary information is in the draft and all the required documents are uploaded to the database. If everything is complete, the Liaison and HQ program staff will begin their review and provide their comments to the Regional Coordinator within **15 working days.**

2. HQ Review of Subsequent Draft SRF Reports

The process and criteria for substantive reviews of revised draft reports will be the same as for first-draft reports unless the HQ Liaison elevates the revised draft to management, in which case management will review and determine how to resolve remaining issues.

3. State Comment on Draft SRF Report

Important: The recommended approach for state review of the draft report is for the EPA region and HQ to reach agreement on a draft report before the EPA region shares the report with the state. This is an effort to reduce transaction costs and make sure EPA speaks to outside parties with one voice. Experience has shown that reports shared with the state first result in additional reviews by the state and HQ and take longer to finalize.

Once the state receives the report, it has **30 calendar days** to make comments. Once the state has reviewed the report and the Region has made all the necessary revisions, the EPA region should send the report back to the HQ Liaison. The EPA region must notify the Liaison if it made any significant changes to the report based on state comments.

e. Finalizing the Report in the SRF Manager Database and Posting to SRF Web Site

Once the state has reviewed the report and HQ and the EPA region reach agreement on its content, the Region will make all final edits in the SRF Manager database and select the Final Report option in the Administrative Information view of the draft report section. This will transfer the report into the Final Report view and the document will appear in the table. The HQ Liaison will review the final reports and will notify the EPA region in writing that the report is final. The report is not final until the EPA region receives this written notification from HQ. Final reports are typically due by the end of the calendar year. The Liaison will publish the final report and along with the review recommendations on the EPA SRF web site and notify the Regional Coordinator when the document will be available to the public or if you need to update a final report.

VI. Post-Review Recommendation Monitoring and Closeout

Roles and Responsibilities

<u>Regional Coordinator</u>: Monitor recommendation implementation to make sure progress is being made, support is available where needed, and the completion of a recommendation is verified.

<u>HQ</u> Liaison: Monitor status of recommendations, ensure that completion verification meets all appropriate criteria, and elevating issues that may require a national or upper management response.

Following the publication of the final report, EPA is responsible for ensuring that any recommendations resulting from the review are fully implemented so that performance issues are resolved, or meaningful and consistent progress is made towards that end.

The SRF Manager database is a key tool for monitoring recommendations. Once the report is finalized in the system, all report recommendations can be viewed in the Findings and Recommendations section, where reviewers can sort and filter recommendations by various categories including round, region, state, finding number and level, summary, explanation, recommendation text, due date, and status. Reviewers are encouraged to check on the status of outstanding recommendations on at least a quarterly basis and coordinate with the implementing program to complete them prior to the due date.

A. Annual Recommendation Inventory

At the beginning of each fiscal year, regional coordinators should conduct an inventory of all recommendations in the SRF Manager to assess their status (completed, ongoing or overdue) and which ones will be coming due in the upcoming year. For those that are upcoming, and especially those that are overdue, review the content of the recommendation and prepare to follow up with the agency to ensure they are completed. Regions are encouraged to discuss the status of any ongoing or overdue recommendations with their states as part of their communication of their annual data metric analysis (ADMA).

B. Monitoring Ongoing Recommendations (known as "working" in previous rounds)

For ongoing recommendations that have not reached their due dates, reviewers are advised not to wait until a recommendation is due to check in with the responsible agency on the status of its implementation.

For example, if a recommendation deliverable or action is due in 90 days from the report publication date, the reviewer should contact the agency at least 60-90 days in advance to inquire on what progress has been made in implementing the recommendation. As a suggested best practice, timelines for inquiry are included in the table below.

Recommendation Due Date	Suggested Initial Check-In Date
90 days from publication	3- days from due date
180 days from publication	120 days from due date
240 days from publication	120 days from due date
365 days from publication	180 days from due date

During check-ins, reviewers should try to determine if the reviewing agency is on track or having trouble implementing the recommendation deliverable or action. If EPA and the responsible agency both determine that the agency will not be able to meet the due date, they should try to determine the cause for the delay and what actions EPA can take to aid the state or local agency that will help them resolve the performance issue.

If it is unlikely that the issue can be resolved before the original due date, each party will try to reach an agreement on a new due date. Once a new date is determined, the Regional Coordinator should request a change in the due date in the SRF Manager Database. The HQ Liaison will review the request and update the due date, if appropriate.

C. Prioritizing and Elevating Overdue Recommendations

Overdue recommendations are those that have not been completed by the due date committed to in the final report. There might be many reasons why a recommendation becomes overdue - staff turnover or a lack of staff, state unwillingness, the issue is considered a low-priority, or it is simply a complex and intractable issue to resolve. The expectation, however, is that <u>all recommendations are to be completed</u>, unless upon elevation, senior management determines that the issue cannot be solved or is no longer relevant.

Reviewers should prioritize the monitoring of overdue recommendations and develop a strategy for working with the appropriate agencies to resolve them. Most pressing to resolve are the subset of overdue recommendations that address what reviewers determine to be "<u>significant and recurring issues</u>" and have been unresolved for an extended period (e.g., greater than one year overdue). For these types of recommendations, Regions should implement an elevation process for resolution by senior management either at the Regional or HQ level in accordance with the Process for Elevation of Issues outlined in the <u>Memo on Enhancing Effective Partnerships Between the EPA and the States in Civil Enforcement and Compliance Assurance</u>.

D. Verifying Recommendation Completion

For a recommendation to be considered complete, EPA verifies that all parts of the recommendation have been carried out in full and/or the underlying performance issue(s) has been either resolved, or substantial and consistent progress has been made towards a resolution.

Confirmation may require EPA to review data or a sample of inspection reports or enforcement actions to determine that an issue has been resolved. This may or may not be explicitly spelled out in the recommendation itself. For the most significant issues, EPA will want to monitor implementation of a recommendation for a longer period and see sustained improvement over several quarters before closing out the recommendation.

Documentation to demonstrate verification may differ depending on the type of performance issue identified in the report. The list below includes some common practices and documents for verifying specific performance issues:

1. Policies, Guidance, and Procedures

• Development or revision of a new or existing document, such as a response policy, inspection report format, checklist or template, standard operating procedure, penalty calculation spreadsheet, or data entry procedures.



2. Incomplete, Inaccurate, and Untimely Entry of Data

- Entry of missing data, such as facility info, universe, inspections, violations, enforcement actions, or penalty counts and amounts under file metric 2b
- Resolving technical issues such as translating data from state to federal databases (i.e., Electronic Data Transfers (EDT))
- Revising incorrectly entered data such as inaccurate dates, SEV codes, enforcement types, penalty dollar amounts

Does the recommendation require entry of or changes to data?

Review download of production or frozen SRF metric data Attach data download to SRF Manager Database

3. Insufficient knowledge, skills, and abilities

 Providing training and technical assistance on how to accurately enter data, which data are required to be entered, when data are required to be entered, identification of violations and discerning SNC/HPV/FRV from other types of violations, how to calculate penalties (e.g., economic benefit)



4. Inadequate Inspection Reports and Documentation of Penalty Calculations

 Inspection report quality (e.g., facility information, dates, narratives, checklist, documentation, violation identification) Penalty documentation (e.g., economic benefit and gravity, changes to penalty amounts, penalty collection)



5. Inadequate SNC-HPV determination, Return to Compliance, and Appropriate and Timely Enforcement Action

- Making appropriate HPV-SNC determinations of violations
- Taking appropriate and timely informal or formal action in response to violations.



Regions should enter all the necessary verification information the in SRF Manager, after which, they will need to notify their HQ Liaison to request a close out of the recommendation. The Liaison will review the information in the SRF Manager and, if all the verification criteria are met, they will approve the request and close out the recommendation.

In cases where the verification lacks sufficient justification or documentation, the Liaison will work with the Region to try to reach an agreement. If relevant documentation or information cannot be obtained, an explanation should be provided. If both parties are unable to reach agreement, the Liaison will elevate the issue to their management.

Appendix A: SRF Key Information

- **Reviewer**: EPA Office of Enforcement and Compliance Assurance and 10 Regional Offices
- **Reviewed**: Local, state, and EPA DI compliance monitoring and enforcement programs
- **Frequency**: At least once every five years
- Current Round: Round 5(FY2024-2028)
- Statutes Covered:
 - Clean Water Act (CAA) National Pollutant Discharge Elimination System (NPDES)
 - Clean Air Act (CWA) Title V
 - Resource Conservation and Recovery Act (RCRA) Subtitle C
- Source Information:
 - Data Metrics Verified compliance monitoring and enforcement data in the national data systems
 - *File Metrics* Facility files that contain compliance monitoring and enforcement activity
 - Other Non-review year data or multi-year data trends; review of previous SRF reports; Compliance Monitoring Strategies, MOUs, and performance agreements; follow-up conversations with agency personnel, and; additional information collected to determine an issue's severity and root causes
- Program Elements Covered:
 - o Data completeness, accuracy, and timeliness of data entry into national data systems
 - Inspections meeting inspection and coverage commitments, inspection report quality, and report timeliness
 - *Violations* identification of violations, accuracy of compliance determinations, and determination of significant noncompliance (SNC) or high priority violators (HPV)
 - Enforcement timeliness, appropriateness, returning facilities to compliance
 - *Penalties* calculation including gravity and economic benefit components, assessment, collection, and changes to penalty calculations.
- Finding Levels:
 - Meets or Exceeds Expectations: This rating describes a situation where the base level is met, and no performance deficiency is identified, or a state performs above base program expectations
 - Area for Attention: An activity, process, or policy that one or more SRF metrics show as a minor problem. Where appropriate, the state should correct the issue without additional EPA oversight.
 - Area for Improvement: An activity, process, or policy that one or more SRF metrics under a specific element show as a significant problem that the agency is required to address. Recommended activities to correct the issues should be included in the report and must have well-defined timelines and milestones for completion, and, if possible,

should address root causes. EPA will monitor recommendations for completion between SRF reviews in the SRF Manager database.

Appendix B: Data Verification

Data Verification typically occurs every year from November to February. The following steps should be taken by the data stewards for all state delegated and EPA Direct Implementation programs:

- Log into the government-only area of the Enforcement and Compliance History Online (ECHO) website with your EPA web application ID and password.
- Click the "Oversight" box and the "State Review Framework" link (direct link after log in is https://echo.epa.gov/oversight/state-review-framework).
- Click the <u>ECHO.gov SRF Data Verification</u> tab and submit a search for the state or local agency.
- Go to the Review the facility and activity counts on the search results screen to ensure their accuracy. In other words, if a number appears inaccurate, click on it to view the list of facilities or activities behind it.
- Make any necessary corrections in the national data system of record. ECHO.gov will reflect corrections after the next weekly data refresh. See the right-hand side of the ECHO.gov Data Verification page for final refresh and anticipated freeze dates.
- States and EPA should correct the national data systems before the final ECHO.gov refresh. This allows for a final review prior to the data verification deadline, which is typically in February. Click the Submit Verification button at the bottom of the results page to complete verification.
- When a state finds data inaccuracies that it cannot correct, it should consult with EPA regional data stewards to develop caveats to explain why data are inaccurate. EPA will post these caveats on ECHO.

Appendix C: Regional and Headquarters Coordination During the SRF Review

Track 1	•Initial communication and concurrence occurs between
Scoping Meeting	region and HQ in the form of a preliminary scoping
Emphasis	meeting

Step 1: Initial Meeting

The initial meeting is the EPA region's presentation to HQ of its comprehensive plan for the review. This also provides a forum for discussing how the SRF process can address state performance issues. Regional managers and/or SRF coordinators and liaison should participate.

Before the meeting, regions should provide HQ no less than 2 days in advance, and prepare to discuss, the following:

- If applicable, a proposal for reviewing selected district offices, or local agencies (see Section II, "Preparing for the Review," above)
- DMA results, NPDES Compliance Monitoring Strategy state specific CMS plan and the CWA inspection coverage table
- Proposed file selection lists
- An estimate of the draft report submission date

HQ and the EPA region may schedule follow-up discussions to address any outstanding issues and finalize a review plan. HQ and the region should document final decisions.

As another recommended but optional step, regions should provide file review results to their HQ SRF liaison for review after the on-site or electronic file review. HQ will provide comments within five working days.

Step 2: Draft and Final Report

The regional SRF coordinator provides a completed draft report to the HQ SRF liaison with all supporting SRF documents uploaded in the SRF Manager. HQ will provide comments within 15 working days, if all SRF documents are provided. See the "Finalizing Report" section below for additional information.

Track 2 Periodic Check-In Emphasis

Periodic communication and concurrence between regional SRF coordinator and HQ SRF liaison occurs at multiple steps in the process

Step 1: Determining Scope of Review

This step applies when EPA is reviewing local agencies or select district offices in a state. Section II in the SRF Reviewer's Guide (starts on p. 6) provides relevant elaboration.

Step 2: SRF Data Metric Analyses

Forward copies of SRF data metric analyses to the HQ SRF liaison via SRF Manager database. For CWA SRF reviews, include any CWA state specific CMS plans. The liaison will review and provide feedback within five working days.

Step 3: File Selection Lists

Forward file selection lists to the HQ SRF liaison before sending them to the state. The liaison will review to ensure that:

- The region selected a sufficient number of facilities
- The region selected the recommended number of facilities for each element (inspections, violations, enforcement, etc.)
- The facilities selected are sufficiently representative of the full universe in terms of major/minor designation, geography, CMS commitments, and sector

Regions may wish to send file selection lists and data metric analyses at the same time. The HQ SRF liaison will review and send feedback to the region within five working days.

<u>Step 4 –5:</u> File Review Results and Prepare Draft Report

Once the file review is completed, regions should forward copies of the file review worksheet to their liaison via the SRF Manager. A complete tally of the file metrics and the region's initial findings must be included (including the comments). The liaison will provide informal comments to the region within five working days, which the region can incorporate into the worksheets.

The Regional SRF Coordinator provides a completed draft report, file review spreadsheet, and all relevant documents to the OC SRF liaison a the SRF Manager database. HQ will provide comments within **15 working days.**

Step 6: Finalizing Report

The regional SRF coordinator provides a completed draft report to the HQ SRF liaison. See the "Finalizing Report" section on page 25 of the Reviewer's Guide for additional guidance.

Optional Steps:

- **Review calendar:** Develop milestones for completing each step in the review process and forward them to HQ SRF liaison.
- **Kickoff letter:** When sending a kickoff letter to the state, also send a copy to the HQ SRF liaison.

Appendix D: Kick-off Letter Template

Date

Name Title Agency Address City/State/Zip

Re: State Review Framework - Review of Regional Implementation of <mark>[Insert State} [Insert Media</mark>] Act Enforcement Program

Dear [Insert Name],

As an integral part of our U.S. Environmental Protection Agency – [Insert State] partnership, EPA [Insert number] will be conducting a State Review Framework (SRF) review of the EPA Region [Insert number] [Insert Media] program for [Insert State] this year. We will review inspection and enforcement activity from fiscal year [Insert Year] and supplemental activities from previous years, as necessary.

This review will assess whether the region is implementing the program and meeting minimum performance standards laid out in EPA policy and regulations. The overarching goal of such reviews is to ensure consistency of program implementation and oversight, and in so doing, ensure equal protection for the public and a level playing field for business.

[Method of review- Electronic]: Normally, an important part of the review process is visiting the regional office, where we can converse face-to-face with compliance and enforcement staff, examine regional data in ICIS, and review a sampling of facility files that contain inspection and enforcement activity, we are adapting the planned review into an electronic file review. We value face-to-face interactions with [regional or state] offices during these reviews and hope to find an opportunity to visit the [region/state] in the future; however, we expect to complete the review of [Insert State name] prior to such a visit.

OR

[Method of review- On-site]: We will perform this review on-site and logistical coordination will be addressed during the kick-off meeting.

The [electronic]or [on-site] review of [Insert State Name] will be led by [Insert Lead POC] along with a small team from [Insert Region X] staff. They will coordinate with the lead regional counterpart [Name of POC]. The team will host a kickoff call to discuss logistics, schedule, preliminary analysis of the region's SRF data metrics (DMA) and the file selection list.

Following the review, we will summarize findings and recommendations in a draft report. Regional management and staff will have 30 days to review and comment on this draft. We expect to complete these reviews, including the final draft report, by [Insert Date]. If EPA identifies areas for improvement for the program, we will work with you and your team to address such issues until they are either resolved or meaningful and consistent progress is made.

Please contact me at XX-XXX-XXXX or have your staff contact [Lead Review insert name] at XXX-XXX-XXXX with any questions regarding the review. We look forward to working with you and furthering the goals of the SRF program.

Sincerely,

XXX, Director Planning, Measures and Oversight Division Office of Enforcement and Compliance Assurance

Cc: <mark>POC, state</mark> POC, region

Appendix E: Data Metric Analysis (DMA) Procedures

DMA Step-by-step:

Step 1: Downloading the DMA from ECHO

- 1) Log in to ECHO.gov
- 2) Go to Search Options > Oversight > State Review Framework
- 3) Click on the Data Metrics Analysis tab
 - Select the *Statute* (CAA, CWA, RCRA)
 - Select the *Review Year*
 - Choose the *State* being reviewed, and if applicable, the *Local Agency*
 - Click submit
- 4) A new window with table of metric values will appear, click download button
- 5) Save document as: *State-Local_Statute_Review Year Document Type*
 - o e.g., AL_CWA_FY17_DMA or AL-Jefferson_CAA_FY17_DMA

Step 2: Making Initial Findings

- 6) Open the downloaded copy and locate the columns *Initial Finding* and *Explanation*
- 7) For all Goal Metrics:
 - Evaluate each goal metric value and make an initial finding according to the general ranges on page 29 or in Appendix J of the Reviewer's Guide.
 - \circ $\;$ Provide a brief explanation to substantiate the finding
- 8) For all Non-Goal Metrics:
 - If metric values appear satisfactory, no finding is required
 - If metric values suggest performance issues:
 - Or flag the issue for follow-up in file selection and review to obtain more information. To do this, enter *Supplemental Review* in either of the newly created columns

Step 3: Using the Initial Findings

- 9) When finished, **submit the DMA** with initial findings to your HQ liaison for review before starting the file selection and review process
- 10) Once the DMA is submitted and reviewed, focus attention on findings of *area for attention*, *area for improvement*, or those flagged for *Supplemental Review*.

- Check-in with the agency to make sure the values are accurate
- If so, in the file selection process make sure to select files pertaining to potential areas of concern. (See *File Selection section on pages 12-15*)
- During the file review, or whenever possible, discuss the DMA results with the agency to try to gather any additional information that could be helpful in making and substantiating findings in the report

Regions should share the DMA with the state or local agency as part of the kick-off letter or meeting. This will allow for agencies to provide any feedback or corrections of the data before conducting the review.

Note: The DMA and initial findings along with the results from the file review will be used later in the process to make findings in the report

Appendix F: File Selection Procedures

Representative File Selection Step-By-Step

- 1.) Enter the following EPA web site address in your Internet web browser (preferably Google for full functionality of the file selection tool): <u>http://echo.epa.gov</u>
- 2.) In the upper right-hand corner, click on the ECHO Gov Login link
- 3.) Enter your LAN user id and password; this is the same user id and password that you use to log into your computer. This is not the numeric PIN for your smartcard.
- **4.)** At the left side of the screen, select "Search Options", then at the bottom of your screen, click on the blue icon at right called "Oversight". Next, click on the link at the of the bottom of the page called "State Review Framework"
- 5.) Scroll down and click on the File Selection tab in the gray box in the middle of the page
- 6.) Select the media you are reviewing (CAA, CWA, or RCRA)
- 7.) Select the fiscal year of frozen data.
- 8.) Select **State Only** as the Agency to be reviewed
- 9.) Select the state or local agency from the Jurisdiction drop down box
- 10.) Click on the Submit Without Flags button
- 11.) Click the arrows below the Informal Action header twice to bring facilities with informal actions to the top

12.) Select at least five facilities with informal actions at random by clicking on the checkboxes on the left. Click the checkboxes twice to indicate that the facilities are part of the representative selection. You will see a green checkmark next to all selected files. (Beginning with enforcement actions is an efficient way to conduct files selection. These facilities are the most likely to have inspections, violations and penalties reported. To assist with random selection, the File Selection Tool only identifies facilities by program ID number.)

- 13.) Use the same methodology to select at least 5 formal actions, penalties, non-HPV/ non-SNC violations, SNC/HPV violations, and inspections
- 14.) Select at least 10 facilities with inspections. (Some of the facilities already selected will have inspections. These count toward the 10 inspection files.) For CAA, click the

up arrow in the FCE column; for CWA and RCRA files, choose the Inspection column

15.) Select additional facilities as needed so at least five are selected in each of the violation categories

16.) Review the number of files required to be selected based on comparison of the total number of records returned in the top left side of the file selection tool to the number of files required to be reviewed in Table 1 [page 20]. If more files need to be selected to meet minimum file selection requirements, identify activities in greatest need of additional facilities to make a proper evaluation. Randomly select facilities for those activities until you have selected at least the minimum number of total files. Review the file selection criteria on pages 19-20 to ensure that all factors such as geographic distribution and other criteria are met.

Appendix G: Checklist of Key Items for Conducting File Review

Hard copies:

List of selected facilities Detailed Facility Reports (DFRs) for each facility File review checklists for each facility Contact information for point-of-contact and others at state agency Copy of the DMA

Electronic copies:

File review worksheet

Completed CWA CMS metric spreadsheet (metrics 4a1 - 4a11) - CWA only

Either hard or electronic copies:

Plain Language Guide
Previous SRF reports & recommendation status
Program MOA or any other relevant state-EPA agreement
This guidance document
CMS Plan?
End of year report?
State and EPA Enforcement response policies
State and EPA Penalty policies
State and EPA Inspection Manual
State compliance monitoring or inspection policies

Appendix H: SRF Draft Report Completeness Checklist

When creating a draft report, be advised that the DMA, File Selection List, CWA inspection coverage table, File Review Worksheet, and any other documents used for the SRF review process must be submitted to the HQ SRF Liaison for him/her to determine completeness and perform an accurate review of the report. These should also be uploaded to the SRF Manager database which serves as a central repository and official record for the review.

A draft report is complete if all required sections listed below are uploaded into the SRF Manager database or emailed to the Liaison.

Report Components and Attachments	Comp	lete?
	Yes	No
Report Components for Each Element for Each Media Chapter (CWA, CAA, and/or RCRA) See Example in Appendix I		
Finding (number and level)		
Summary		
Explanation		
Relevant metrics		
Recommendations		
Attachments		
Data Metric Analysis spreadsheet*		
File Selection spreadsheet*		
CWA inspection coverage table* and/or alternative CMS plans		
File Review spreadsheet*		
* These documents can be uploaded on the Administration Information page of the SRF Manager. They will appear in the Attachments table when the report is finalized		

CWA Element 4 — En	forcement					
Finding 4-1	Area for State Improvement					
Summary	SNC violations are not addressed in a timely	y or ap	propria	te mann	er.	
Explanation	For two of the eight SNC violations reappropriate follow-up action. However, in a neither informal nor formal enforcement at The state does not have a formal policy in SNC violators. Metric 10a shows that the state was not caction. This can be traced to the failure to comanner.	six insta ction. place onsiste	ances, t for taki ently tak	hese vio ng enfoi ting time	lations i rcement	received against
Relevant metrics	Metric ID Number and Description	Natl Goal	Natl Avg	State N	State D	State % or #
	10a Major facilities with timely action	98%	-	1	8	13%
	10b Enforcement responses reviewed that address violations in an appropriate manner		-	5	15	33%
State response	The state agrees that this is a problem and l it.	has agr	eed to v	vork wit	h EPA to	resolve
Recommendation	1) The state will develop a Standard O enforcement action against SNC violators report and will send a copy to EPA for appro- taking enforcement action against SNC v developed under item 1. 3) EPA will monitor calls and annual SRF data metric analyses after approving the state's SOP and obse performance that meets national goals.	within val. 2) ⁻ iolator perfor . EPA v	90 day The stat s in accord mance will clos	ys of fin e will im cordance via quar e this re	alization mediate e with terly cor ecomme	n of this ely begin the SOP oference endation

Appendix I: Sample Finding and Recommendation

Appendix J: Establishing Finding Levels

The table below provides a definition of each finding level and offers suggested metric value ranges for help in deciding on a finding level. These value ranges are simply a guide in selecting an appropriate finding level. Other factors may be considered (e.g., universe size of metric) in choosing an appropriate level.

Suggested Metric Value Ranges	Finding Level
~85-100%	Meets or Exceeds Expectations: The base level is met, and no performance deficiencies are identified, or the program is performing above national expectations.
~71-84%	Area for Attention: An activity, process, or policy that one or more SRF metrics show as a minor problem. Where appropriate, the state should correct the issue without additional EPA oversight. EPA may make suggestions to improve performance, but it will not monitor these suggestions for completion between SRF reviews. These areas are typically not highlighted as priority areas to address in an executive summary.
~70% and below	Area for Improvement: An activity, process, or policy that one or more SRF metrics under a specific element show as a significant problem that the agency is required to address. Recommended activities to correct the issues should be included in the report and must have well-defined timelines and milestones for completion, and, if possible, should address root causes. EPA will monitor recommendations for completion between SRF reviews in the SRF Manager database and provide any necessary updates in the EPA Manager database.

Additional Factors

Sample Size

In cases where there is a small universe for a metric or a low number of activities to review, the small sample size means greater variability in metric values which can make it difficult to establish a reliable finding on performance.

Though the review focuses on a one-year period of activity, the reviewer can select additional files from prior years of activity to increase the sample size and have a more robust set of files. Reviewers can also use multi-year trend data to decide when performance is on the edge of two finding levels Otherwise, follow the general range unless there is evidence to support a different conclusion. If such evidence exists, include that information in the explanation section of the finding which will be reviewed by HQ.

Appendix K: Tips for Conducting Electronic File Reviews Under the State Review Framework

The purpose of this document is to assist SRF reviewers in their ability to conduct reviews using electronic files. Whether or not it is appropriate to conduct an SRF review electronically will depend upon a number of factors, most fundamentally, the availability of electronic files and/or the ability to put such documents into an electronic format. This document outlines strategies for success specific to electronic file reviews. In addition, the document seeks to articulate the benefits and constraints associated with electronic file reviews. Overall, the SRF program seeks to take advantage of the benefits that electronic file reviews can provide without underemphasizing the insight and benefits to the program that face-to-face interactions provide.

Basic Steps:

- 1.) Determine how many of the following file review materials are currently available electronically:
 - Inspection reports
 - Alternate compliance monitoring strategy agreements
 - Violations
 - Compliance determinations
 - Force majeure claims, compliance extension and waiver requests
 - Correspondence sent to/from facilities and the state on response to violations
 - Informal enforcement actions
 - Formal enforcement actions
 - Supplemental environmental project (SEP) proposals associated with enforcement actions
 - Certifications of completion for corrective action completion required by enforcement actions
 - Penalty calculation spreadsheets that document economic benefit and gravity
 - Documentation of changes between the initial and final penalty Documentation of penalty collection including copies of cancelled checks and/or documentation from state financial accounting systems

2.) Develop a single place to store all file review materials including:

- Data metric analysis
- Guidance: plain language, quick metric reference guide, SRF Reviewer's guide
- Past SRF reports
- File selection list
- File selection assignments among review team members
- File review worksheet

- File review facility checklists
- Draft report
- Responses to EPA questions from the state
- Database reports from ICIS or RCRAInfo and information received from state data system
- Inspection reports
- Violations
- Compliance determinations
- Correspondence sent to/from facilities and the state on response to violations
- Informal enforcement actions
- Formal enforcement actions
- Penalty calculation spreadsheets that document economic benefit and gravity
- Documentation of changes between the initial and final penalty
- Documentation of penalty collection including copies of cancelled checks and/or documentation from state financial accounting systems
- State end of year results reports and grant work plans
- Alternative CMS commitments
- CWA inspection coverage table (for water reviews only)
- EPA and state inspection manuals, enforcement response policies, standard operating procedures, and penalty policies
- EPA inspection manuals, enforcement response policies, and penalty policies
- Contact list for review team members and key state contacts, including their roles and responsibilities throughout the process
- Organization Charts including both an Agency and Program specific overview to see how items such as formal enforcement move through the process (i.e., legal services vs. City Council etc.)
- Database reports from ICIS or RCRAInfo and information received from state data systems
- SRF review and report development schedule

Tips for a Successful File Review

Pre-Review Planning

- Determine the number of staff needed to complete the facility and programmatic reviews within the target deadlines
- Electronic file reviews may allow for different numbers of team members and different review timeframes than an in-person review might allow because of travel and other considerations.
- Discuss the variety of ways that states document their compliance determinations and assess whether sufficient information will be available electronically

- Evaluate what information is publicly available to reduce burden of document collection on state staff, many states publicize formal enforcement actions, and some post inspection reports online
- Establish a file naming convention with the state in advance or rename files upon receipt with a record of their original name
 - Experience indicates that some state IT departments or data staff save the date of the file upload to a web site or shared drive rather than the date the inspection/action took place
- Be aware that file naming conventions/nomenclature can be misleading; plan on extra time to inventory whether all requested information is provided before starting the file review

Review Team Coordination

- Block off and schedule time on a regular basis to review files, discuss findings with review team members, and request additional information or ask further questions of state counterparts to ensure the review team can meet its established file review deadlines
- Consider using One Note, Microsoft Teams, SharePoint, One Drive, or obtain direct access to the state's electronic files, if possible, to share files with EPA staff on the review team and to organize file review materials listed above as well as questions and answers developed during the review between the review team and the primary agency being reviewed.
- Familiarize team members with electronic files and establish mechanism for sharing files with the review team
- Conduct an inventory of all files received on the first day of the partial on-site file review, or remotely once all files are provided prior to starting the file review
- Network with other staff who have conducted full, or partial, remote file reviews to learn from their experience
- Search electronically for content in lengthier documents by key word search using the CTRL + F search capability in Microsoft Word and/or pdf files to make the review of files more efficient
- Clarify process for the integration of results across team reviewers

Appendix L: Annual Data Metric Analysis

ATTACHMENT #1 Instructions for Downloading the ADMA from ECHO

To download an ADMA, follow the steps below:

- 1) Log in to ECHO.gov
- 2) Go to Search Options > Oversight > State Review Framework
- 3) Click on the Annual Data Metrics Analysis tab
 - Select the *Statute* (CAA, CWA, RCRA)
 - Select the *Review Year*
 - Choose the *State* being reviewed, and if applicable, the *Local Agency*
 - o Click submit
- 4) A new window with table of metric values will appear, click download button
- 5) Save document as: State-Local_Statute_Review Year Document Type
 - o e.g., AL_CWA_FY17_ADMA or AL-Jefferson_CAA_FY17_ADMA

Attachment #2 SRF Data Metrics

<u>RCRA</u>

Element 1 – Data

- 1a1 Number of operating TSDFs
- 1a2 Number of active LQGs
- 1a5 Number of BR LQGs

Element 2 – Inspections

- 1b1 Number of sites with on-site inspections
- 5a Two-year inspection coverage for operating TSDFs
- 5b Annual inspection coverage for BR LQGs (review 5b or 5b1)
- 5b1 Annual inspection coverage for active LQGs (review 5b or 5b1)
- 5d1 Number of SQGs inspected
- 5e5 Number of VSQGs inspected
- 5e6 Number of transporters inspected
- 5e7 Number of other sites inspected

Element 3 – Violations

- 1c1 Number of sites with new violations during review year
- 1c2 Number of sites in violation at any time during the review year regardless of determination date
- 1e1 Number of sites with new SNC during year
- 2a Long-standing secondary violators
- 7b Violations found during CEI and FCI compliance evaluations
- 8a SNC identification rate at sites with CEI and FCI compliance evaluations
- 8b Timeliness of SNC determinations

Element 4 – Enforcement

- 1d1 Number of sites with informal enforcement actions
- 1d2 Number of informal enforcement actions
- 1f1 Number of sites with formal enforcement actions
- 1f2 Number of formal enforcement actions
- 10a Number of SNY evaluations with timely enforcement
- Element 5 Penalties
 - 1g Total dollar amount of final penalties

Element	Metric ID	Metric description	Metric Type	National Goal	National Average (FY20)	FY20	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
Flomont			Data								
Element 1 - Data	1a1	Number of operating TSDFs	Verification								
Element	1.2		Data								
1 - Data	1a2	Number of active LQGs	Verification								
Element			Data								
1 - Data	1a5	Number of BR LQGs	Verification								
Element											
2 -			Data								
Inspecti ons	1b1	Number of sites with on-site inspections	Data Verification								
Element											
2 -											
Inspecti	_	Two-year inspection coverage for									
ons	5a	operating TSDFs	Goal								
Element 2 -											
Inspecti		Annual inspection coverage for BR LQGs									
ons	5b	(review 5b or 5b1)	Goal								
Element											
2 -											
Inspecti		Annual inspection coverage for active									
ons	5b1	LQGs (review 5b or 5b1)	Goal								

Element	Metric ID	Metric description	Metric Type	National Goal	National Average (FY20)	FY20	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
Element											
2 -											
Inspecti	_		Informatio								
ons	5d1	Number of SQGs inspected	nal Only								
Element											
2 -											
Inspecti			Informatio								
ons	5E5	Number of VSQGs inspected	nal Only								
Element											
2 -											
Inspecti			Informatio								
ons	5E6	Number of transporters inspected	nal Only								
Element											
2 -											
Inspecti			Informatio								
ons	5E7	Number of other sites inspected	nal Only								
Element											
3 - Violatio		Number of sites with new violations	Data								
	1c1		Data Verification								
ns	101	during review year	vernication								
Element											
3 -		Number of sites in violation at any time									
Violatio		during the review year regardless of	Data								
ns	1c2	determination date	Verification								
Element											
3 -											
Violatio		Number of sites with new SNC during	Data								
ns	1E1	year	Verification								

Element	Metric ID	Metric description	Metric Type	National Goal	National Average (FY20)	FY20	Data Trend	Related SRF Recommendation (Review Year,	Analysis	Questions for the State	Follow-Up
Element								Finding #, Status)			
3 -											
Violatio			Review								
ns	2a	Long-standing secondary violators	Indicator								
Element											
3 -											
Violatio		Violations found during CEI and FCI	Review								
ns	7b	compliance evaluations	Indicator								
Element											
3 -											
Violatio		SNC identification rate at sites with CEI	Review								
ns	8a	and FCI compliance evaluations	Indicator								
Element											
3-											
Violatio	8b	Timeliness of SNC determinations	Goal								
ns Element	00	Timeliness of SNC determinations	Goal								
4 -											
Enforce		Number of sites with informal	Data								
ment	1d1	enforcement actions	Verification								
Element	-										
4 -											
Enforce			Data								
ment	1d2	Number of informal enforcement actions	Verification								
Element											
4 -											
Enforce		Number of sites with formal enforcement	Data								
ment	1f1	actions	Verification								

Element	Metric ID	Metric description	Metric Type	National Goal	National Average (FY20)	FY20	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
Element											
4 -											
Enforce			Data								
ment	1f2	Number of formal enforcement actions	Verification								
Element											
4 -											
Enforce		Number of SNY evaluations with timely									
ment	10a	enforcement	Goal								
Element											
5 -											
Penaltie			Data								
S	1g	Total dollar amount of final penalties	Verification								

CAA

Element 1 – Data

- 1a1 Number of Active Majors
- 1a2 Number of Active Synthetic Minors
- 1a3 Number of Active Minors Subject to NESHAP Part 61
- 1a4 Number of Other Active Facilities on CMS Plan
- 1a5 Number of HPV Minors
- 1a6 Number of Minors Subject to Formal Enforcement
- 1b4 Number of Active Title V Facilities
- 1b5 Number of CMS Majors
- 1b6 Number of CMS 80% Synthetic Minors
- 1b7 Number of Other CMS Minors
- 3a2 Timely reporting of HPV determinations into ICIS-Air
- 3b1 Timely reporting of compliance monitoring MDRs
- 3b2 Timely reporting of stack tests and stack test results
- 3b3 Timely reporting of enforcement MDRs

Element 2 – Inspections

- 1c1 Number of Facilities with an FCE (Facility Count)
- 1c2 Number of FCEs (Activity Count)
- 1i7 Number of Stack Tests that occurred
- 1j1 Number of Facilities with a Reviewed TVACC
- 1j2 Number of Facilities with TVACC Due
- 5a FCE coverage: majors and mega-sites
- 5b FCE coverage: SM-80s
- 5c FCE coverage: minor and synthetics minor (non-SM80s) sources that are part of a CMS Plan and Alternative CMS Facilities
- 5e Reviews of Title V annual compliance certifications completed

Element 3 – Violations

- 1d1 Number of Facilities with an FRV Identified (Facility Count)
- 1d2 Number of Case Files with an FRV Identified (Activity Count)
- 1e1 Number of Informal Enforcement Actions (Activity Count)

- 1e2 Number of Facilities with an Informal Enforcement Action (Facility Count)
- 1f1 Number of Case Files with an HPV Identified (Activity Count)
- 1f2 Number of Facilities with an HPV Identified (Facility Count)
- 7a1 FRV 'discovery rate' based on evaluations at active CMS sources
- 8a Discovery rate of HPVs at majors
- 13 Timeliness of HPV Identification

Element 4 – Enforcement

- 1g1 Number of Formal Enforcement Actions (Activity Count)
- 1g2 Number of Facilities with a Formal Enforcement Action (Facility Count)
- 1h2 Number of Formal Enforcement Actions with an Assessed Penalty
- 10a1 Rate of Addressing HPVs within 180 days
- 10b1 Rate of managing HPVs with an NOV or NOW or no action

Element 5 – Penalties

1h1 Total Amount of Assessed Penalties

Metric ID	Metric Name	Metric Type	Agency	National Goal	National Average (FY20)	FY20	FY21	FY22	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
Data Verification													
1a1	Number of Active Majors	Data Verificatio n	State			274	272	253					
1a2	Number of Active Synthetic Minors	Data Verificatio n	State			281	290	252					

Metric ID	Metric Name	Metric Type	Agency	National Goal	National Average (FY20)	FY20	FY21	FY22	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
1a3	Number of Active Minors Subject to NESHAP Part 61	Data Verificatio n	State			1	0	0					
1a4	Number of Active CMS Minors	Data Verificatio n	State			1	1	6					
1a5	Number of HPV Minors	Data Verificatio n	State			0	0	0					
1a6	Number of Minors Subject to Formal Enforcement	Data Verificatio n	State			2	3	1					
1b4	Number of Active Title V Facilities	Data Verificatio n	State			242	235	225					
1b5	Number of CMS Majors	Data Verificatio n	State				190	140					
1b6	Number of CMS 80% Synthetic Minors	Data Verificatio n	State				131	85					
1b7	Number of Other CMS Minors	Data Verificatio n	State				0	0					

Metric ID	Metric Name	Metric Type	Agency	National Goal	National Average (FY20)	FY20	FY21	FY22	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
1c1	Number of Facilities with an FCE (Facility Count)	Data Verificatio n	State			288	303	197			Significant drop in FCEs in FY20, although data entry may not be complete.		
1c2	Number of FCEs (Activity Count)	Data Verificatio n	State			293	307	197					
1d1	Number of Facilities with an FRV Identified (Facility Count)	Data Verificatio n	State			2	2	2					
1d2	Number of Case Files with an FRV Identified (Activity Count)	Data Verificatio n	State			2	2	2					
1e1	Number of Informal Enforcement Actions (Activity Count)	Data Verificatio n	State			93	63	41			3-year downward trend in informal enforcement actions, although the number of facilities with informal actions remained fairly steady		

Metric ID	Metric Name	Metric Type	Agency	National Goal	National Average (FY20)	FY20	FY21	FY22	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
1e2	Number of Facilities with an Informal Enforcement Action (Facility Count)	Data Verificatio n	State			45	47	31					
1f1	Number of Case Files with an HPV Identified (Activity Count)	Data Verificatio n	State			2	1	2					
1f2	Number of Facilities with an HPV Identified (Facility Count)	Data Verificatio n	State			2	1	2					
1g1	Number of Formal Enforcement Actions (Activity Count)	Data Verificatio n	State			7	9	6			Less than 15% of informal actions progress to formal actions		
1g2	Number of Facilities with a Formal Enforcement Action (Facility Count)	Data Verificatio n	State			7	9	6					

Metric ID	Metric Name	Metric Type	Agency	National Goal	National Average (FY20)	FY20	FY21	FY22	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
1h1	Total Amount of Assessed Penalties	Data Verificatio n	State			\$258,50 0	\$247,50 0	\$92,00 0			Significant drop in penalties in FY20, although data entry may not be complete.		
1h2	Number of Formal Enforcement Actions with an Assessed Penalty	Data Verificatio n	State			6	9	6					
1i7	Number of Stack Tests that occurred	Data Verificatio n	State				146	48					
1j1	Number of Facilities with a Reviewed TVACC	Data Verificatio n	State				424	364			Metric value should not significantly exceed the number of Title V facilities (1b4); appears that non-Title V certifications are being entered as TVACCs		
1j2	Number of Facilities with TVACC Due	Data Verificatio n	State				225	223					

Metric ID	Metric Name	Metric Type	Agency	National Goal	National Average (FY20)	FY20	FY21	FY22	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
Element 1 - Data													
3a2	Timely reporting of HPV determination s	Goal	State		40.5%	50.0%	0.0%	100.0%			The one HPV in FY21 was reporting into ICIS-Air about 2 months late.		
3b1	Timely reporting of compliance monitoring MDRs	Goal	State	100.0%	82.3%	83.1%	46.8%	95.5%					
3b2	Timely reporting of stack tests and stack test results	Goal	State	100.0%	67.1%	45.4%	43.2%	66.7%					
3b3	Timely reporting of enforcement MDRs	Goal	State	100.0%	77.6%	89.0%	48.6%	95.7%					
Element 2 - inspections													
5a	FCE coverage: majors and mega-sites	Goal	State	100.0%	88.7%	99.4%	93.2%	80.0%					

Metric ID	Metric Name	Metric Type	Agency	National Goal	National Average (FY20)	FY20	FY21	FY22	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
5b	FCE coverage: SM-80s	Goal	State	100.0%	93.7%	95.5%	90.8%	97.6%					
5c	FCE coverage: minor and synthetics minor (non- SM80s) sources that are part of a CMS Plan and Alternative CMS Facilities	Goal	State	100.0%	85.8%	NA	NA	NA					
5e	Reviews of Title V annual compliance certifications completed	Goal	State	100.0%	76.7%	85.1%	90.7%	78.0%					
Element 3 - Violations													
7a1	FRV "discovery rate" based on evaluations at active CMS sources	Support	State		6.2%	0.4%	0.4%	0.4%					
8a	Discovery rate of HPVs at majors	Support	State		2.3%	0.7%	0.4%	0.8%					

Metric ID	Metric Name	Metric Type	Agency	National Goal	National Average (FY20)	FY20	FY21	FY22	Data Trend	Related SRF Recommendation (Review Year, Finding #, Status)	Analysis	Questions for the State	Follow-Up
13	Timeliness of HPV Identification	Goal	State	100.0%	87.7%	50.0%	100.0%	100.0%					
Element 4 - Enforcemen t													
10a1	Rate of Addressing HPVs within 180 days	Support	State		63.7%	0.0%	0.0%	NA					
10b1	Rate of managing HPVs with a NOV or NOW or No Action	Support	State		12.9%	100.0%	50.0%	NA					

<u>CWA</u>

Element 1 – Data

- 1a1 Number of active NPDES major individual permits
- 1a2 Number of active NPDES major general permits
- 1a3 Number of active NPDES non-major individual permits
- 1a4 Number of active NPDES non-major general permits
- 1b5 Permit limit data entry rate for major and non-major facilities

- 1b6 DMR data entry rate for major and non-major facilities
- 1b7 Number of active NPDES individual DMR filers
- 1b8 Number of active NPDES individual DMR filers with permit limits in ICIS
- 1e1 Facilities with Informal Actions
- 1f1 Facilities with Formal Actions
- 1g3 Facilities with Penalties

Element 2 – Inspections

- 5a1 Inspection coverage of NPDES majors
- 5a3 Number of inspected major facilities
- 5b1 Inspection coverage of NPDES non-majors with individual permits
- 5b2 Inspection coverage of NPDES non-majors with general permits
- 5b3 Number of inspected non-major individual or unpermitted facilities
- 5b4 Number of inspected non-major general permit covered facilities

Element 3 – Violations

- 7j1 Number of major and non-major facilities with single-event violations reported in the review year
- 7j2 Number of facilities with SNC/Category 1 noncompliance
- 7j3 Number of facilities with RNC/Category 2 noncompliance or effluent, single event, or schedule violations open during the year
- 7k1 Major and non-major facilities in noncompliance
- 8a3 Percentage of active major facilities in SNC and non-major facilities in Category I noncompliance during the reporting year
- 8a4 Percentage of active non-major general permit facilities in Category I noncompliance during the reporting year

Element 4 – Enforcement

- 10a1 Percentage of major NPDES facilities with formal enforcement action taken in a timely manner in response to SNC violations
- 10a2 Percentage of major individually permitted NPDES facilities with formal enforcement action taken in a timely manner in response to missing DMR SNC violations
- 10a3 Percentage of major individually permitted NPDES facilities with formal enforcement action taken in a timely manner in response to SNC effluent violations
- 10a4 Percentage of major individually permitted NPDES facilities with formal enforcement action taken in a timely manner in response to SNC compliance schedule violations Element 5 Penalties

<u>CWA</u>

Elemen	Metric		Metric	Add ADMA Data from	Area of	
t	ID	Metric Description	Туре	ECHO	Concern	ADMA Question
	1b5	Completeness of data entry on major and non-major permit limits.	Goal		х	Are data entered complete?
	1b6	Completeness of data entry on major and non-major discharge monitoring reports	Goal			Are data entered complete?
Data						If an Area for Concern: Provide the state with MDRs Ensure that state has a designated data steward, and that the state and regional data stewards are effectively coordinating Ensure that protocol is in place for entering data Ensure that state database is accurately transferring data into the national database (i.e Electronic Data Transfer (EDT)) Provide training if necessary
	5a3	Number of inspected major facilities [Data Verification]	Indicator			Are inspections increasing or decreasing in any significant way from previous year(s)?
Inspections	5b3	Number of inspected non- major individual or unpermitted facilities [Data Verification]	Indicator			Are inspections increasing or decreasing in any significant way from previous year(s)?
Inspe	5b4	Number of inspected non- major general permit facilities [Data Verification] Image: Constant of the second secon	Indicator			Are inspections increasing or decreasing in any significant way from previous year(s)?
	5a1	Inspection coverage of NPDES majors	Goal			Is inspection coverage being met, either through traditional or alternative CMS?

	5b1	Inspections coverage of NPDES non-majors with individual permits	Goal	Is inspection coverage being met, either through traditional or alternative CMS?
	5b2	Inspections coverage of NPDES non-majors with general permits	Goal	Is inspection coverage being met, either through traditional or alternative CMS?
				If an Area for Concern:
				Provide state with NPDES CMS policy
				Determine if inspection numbers match with End of Year Reports (EOY)
				If inspections are <u>below commitments</u> or <u>decreasing</u> , determine if
				state is using a traditional or alternative CMS
				- if using an alternative plan, determine why commitments
				are not being met and if adjustments are required
				- if using a traditional plan, consider working with the state to create an alternative plan
				Ensure that the state has an adequate targeting strategy in place
				in coordination with the region
	7j1	Number of major and non-major facilities with single-event violations reported in the review year	Indicator	Are SEVs being entered? Are they increasing or decreasing in any significant way from previous year(s)?
			· · ·	If an Area for Concern:
				Provide SEV data entry guide
				Provide training if necessary
Violations	7j2	Number of active facilities with SNC/Category 1 non- compliance [Data Verification]	Indicator	Are facilities with significant violations increasing or decreasing in any significant way?
ÿ		Number of active facilities		
		with RNC/Category 2 non-		
	7j3	compliance [Data		Are facilities with violations increasing or decreasing in any
		Verification]	Indicator	significant way?
	8a1	Number of Major facilities in SNC [<i>Data Verification</i>]	Indicator	Are majors with significant violations increasing or decreasing in any significant way?

	7k1	Major and non-major facilities in noncompliance	Indicator	Is the percentage of facilities in non-compliance significantly above or below the annual national average? Is the increasing or decreasing in any significant way from previous year(s)?
	8a3	Percentage of major facilities in SNC and non-major facilities in Category I noncompliance during the reporting year	Indicator	 Is the percentage of major and non-major facilities with more severe violations significantly above or below average? Is the percentage of major and non-major facilities with more severe violations increasing or decreasing in any significant way?
	8a4	Percentage of active non-major general permit facilities in Category I noncompliance during the reporting year	Indicator	 Is the percentage of non-major facilities in Cat. I noncompliance significantly above or below average? Is the percentage non-major facilities in Cat. I noncompliance increasing or decreasing in any significant way?
				If an Area for Concern:Determine if the violation rates match with state dataProvide the state with the relevant violation policies (FRV/HPV,SEV/SNC, SV/SNC)If violation counts or rates appear notably low, review a selectionof files containing inspections to determine if the state is makingaccurate violation determinationsIf violation counts or rates appear notably high, review a selectionof files containing inspections to determine if violations are beingadequately addressed
	1e1	Number of facilities with informal actions [<i>Data Verification</i>]	_	Are informal actions being entered (MDR requirement for minors as of FY17)? Are the numbers of informal actions increasing or
lent	1e2	Number of informal actions [Data Verification]	Indicator	decreasing in any significant way from previous year(s)? Does the number of informal actions suggest any potential issues in terms of taking appropriate enforcement or overall compliance rates?
en	1f1	Number of facilities with formal actions [Data Verification]		Are the numbers of formal actions increasing or decreasing in any
Enforcement	1f2	Number of formal actions [Data Verification]	Indicator	significant way? Does the number of formal actions suggest any potential issues in terms of taking appropriate enforcement or overall compliance rates?
	10a1	Percentage of major NPDES facilities with formal enforcement action taken in a timely manner in response to SNC violations	Indicator	Is formal enforcement being taken timely in accordance with the response policy? Has timely formal enforcement increased or decreased in any significant way?

10a2	Percentage of major individually permitted NPDES facilities with formal enforcement action taken in a timely manner in response to missing DMR SNC violations	Indicator	Is formal enforcement being taken timely in accordance with the response policy? Has timely formal enforcement increased or decreased in any significant way?
10a3	Percentage of major individually permitted NPDES facilities with formal enforcement action taken in a timely manner in response to SNC effluent violations	Indicator	Is formal enforcement being taken timely in accordance with the response policy? Has timely formal enforcement increased or decreased in any significant way?
10a4	Percentage of major individually permitted NPDES facilities with formal enforcement action taken in a timely manner in response to SNC compliance schedule violations	Indicator	Is formal enforcement being taken timely in accordance with the response policy? Has timely formal enforcement increased or decreased in any significant way?
			If an Area for Concern: Provide the state with the relevant enforcement response policies If rates of timely formal enforcement appear notably <u>low</u> , review a selection of files containing SNC violations to determine if enforcement eventually took place

Genera	l l
Is there	e a SRF recommendation from a completed report related to a flagged area?
<u>Y/N</u>	Response
Yes	Prioritize recommendation for completion.
Yes	Contact state or local agency to inquire what progress is being made to implement recommendation. Work with the state or local agency to identify potential causes and solutions. Track any action items through
No	routine oversight.

ATTACHMENT #3 General Questions for the Annual Review

Verify or Check the Quality of SRF Public Data

- Are Minimum Data Requirements (MDRs) met for data entry?
- Are there data gaps or data quality concerns for specific metrics that may require special attention during the Annual Data Verification process?

Determine Potential Annual Performance Issues

- Did the program meet its annual inspection commitments, either through alternative or traditional Compliance Monitoring Strategy (CMS)?
 - If not, should commitments be revised in the alternative CMS or grant workplan?
 - If an alternative CMS does not exist, should EPA work with the program to develop one?
- Are violation determinations for SNC and HPV timely?
- Does the number of reported violations (SEVs, FRVs/HPVs, SV/SNC) seem realistic in relation to inspections conducted?
- Are the 'violation rate' metrics (i.e., % of major facilities in non-compliance, FRVs found during inspections, etc.) notably above or below the annual national average?
- Does the number of informal and formal actions seem realistic in relation to universe, inspections, and violations?
- Is formal enforcement taken timely against SNC/HPVs in accordance with the response polices?

Utilize Data Trends

- What is the trend direction, is it gradual or sudden?
- Are data metrics increasing or decreasing in any notable way from previous years?
- Are the number of inspections higher or relatively the same while violation rates are lower than previous years? Might this indicate the program is not accurately identifying or reporting violations?
- Are violation rates or counts higher while the number of enforcement actions lower than previous years? Might this indicate that the program is not taking timely and appropriate enforcement?

Track Areas for Improvement Identified in Previous SRF Reviews

- Is there a recommendation(s) from a previous SRF review related to a flagged area in the ADMA?
 - If yes and the recommendation deadline is in the future (ongoing), check with the state to ensure progress.
 - If yes and the recommendation is overdue, prioritize the recommendation for completion.

 \circ $\;$ If yes and completed, determine if the issue has resurfaced.

ATTACHMENT #4

The table below is a sample of the reporting tool used for the annual analysis. Each cell should be completed, and the level of detail may vary based on status of a given metric.

CWA Data Metrics

Metric #	Metric	ECHO Data Results + metric type	Data Quality Confidence (High, Medium, Low)	Goal Met (Y/N)	Related SRF Recommendation? (Finding number)	Analysis	Questions for the State	Follow-Up Required (e.g., training, file review)
1b5	Completeness of data entry							
	on major and							
	non-major							
	permit limits.							