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for the U.S. Department of Energy

# Memo

*date:* February 18, 2008

*to:* Distribution

*from:* R. Savage / J. Montalto

*Subject:* Collider –Accelerator Division / Superconducting Magnet Division  
Environmental Management System (EMS)  
and  
Occupational Health and Safety Management System (OHSAS)  
Readiness Assessment  
(QA 2008-225)

This internal readiness assessment was conducted to determine whether the Collider-Accelerator Department (C-AD) and the Superconducting Magnet Division (SMD) Environmental Management System (EMS) (which has been implemented for nine years) and their Occupational Health and Safety Management System (OH&S) Programs (implemented for five years) are being implemented in accordance with Environmental Management System 14001-2004 and Occupational, Health and Safety Management System OHSAS 18001 – 1999 Standards. To accomplish this task the assessment focused on reviewing EMS/OH&S elements for compliance and effectiveness in meeting the EMS and OH&S Policy and Objectives within their operating processes. This appraisal was performed on February 11 through February 14, 2008. A completed assessment checklist, containing criteria is available upon request. Personnel interviewed during this assessment were P. Bergh, T. Blydenburgh, P. Cirmigliaro, L. Di Filippo, A. Etkin, S. Gill, M. Heimerle, R. Karol, K. Krasner, D. Lederlie, E. Lessard, A. Luhrs, J. Maraviglia, T. Nehring, D. Passarello, D. Philips, R. Roberts, J. Sandberg, J. Scott, Y. Than, M. VanEssendelft, A Warkentien, R. Zapasek.

Based on interviews conducted and documents reviewed, the C-A/SMD EMS and OH&S Management System written programs are being implemented in accordance with the SBMS Procedures Subject Area requirements. The EMS and OH&S programs are integrated into everyday work activities through Operating Procedures and Work Planning and Control Processes with the exception of two observations that affect the EMS program and two minor non-compliance and two opportunity for improvements that affect the OHSAS program.

As identified in 2007, employee representatives from C-AD and SMD who have been appointed to the Worker Occupational Safety and Health (WOSH) Committee have participated throughout the year with ensuring worker concerns, ideas and inputs related to OH&S and EMS topics are received, reviewed and responded to by either the Committee or Upper Management. In addition,

group supervisors and managers participate in weekly safety meetings to discuss topics such as EMS/OH&S objectives, human performance, Code regulations, and on-going related issues to Staff.

The following lists the EMS/OHSAS findings as a result of this audit. They will be entered and tracked into the CAD Family Assessment Tracking System until completion.

### **EMS Findings:**

**Observation 1:** (EMS Element 4.2) requires that the Environmental Policy is communicated to all persons working for or on behalf of the organization. Group Managers and Management were found to be knowledgeable of the policy. However, additional training is required for all employees on the awareness of the policy. This training is scheduled for the second quarter of 2008 and will be prior to the 2008 Registrar Audit.

**Observation 2:** (EMS Element 4.3.3 & OHSAS Element 4.3.3) Objectives, Targets and Programmes states that the organization shall establish, implement and maintain documented environmental/occupational health and safety objectives, at each relevant function and level within the organization. C-AD has addressed this requirement via OPM 14.1 & 14.30. However, it was discovered that the C-AD FY 2008 Self-Assessment Report which identifies an evaluation of the objectives and measures has not yet been issued as required.

### **OHSAS Findings:**

**Minor Non-Compliance 1:** (OHSAS Element 4.1) section 3 asks, what evidence is there the program was maintained and continual improvement of their implementation of the OSH management system within the last year? Of the four items verified on the audit checklist, the "Risk Assessments updated on schedule" question was answered no because some of the FY 2008 Risk Assessments have not been issued at the time of this audit.

**Minor Non-Compliance 2:** (OHSAS Element 4.4.6) section 1.a-e., stipulate operational controls for deviations that may compromise OSH policy and objectives. During a walkthrough of ERL several minor safety concerns were observed.

**Minor Non-Compliance 3:** (OHSAS Element 4.5.1, Performance Measurement & Monitoring) section 2 asks, is equipment required to monitor or measure performance covered by procedures for the calibration and maintenance? All measuring and monitoring equipment related to OSH performance are calibrated as required. However, nine calibrated helium gas check standards used to verify proper readings by helium leak detectors were found out of calibration. No out of tolerance conditions noted. This equipment is not used in OSH or EMS applications.

**Opportunity for Improvement 1:** (OHSAS Element 4.2, OH&S Policy) section 1 asks, does the organization maintain a list of the locations where "official" copies (of the ESSH Policy) are posted? [if not, this is an OFI unless another mechanism is used.] C-AD does not maintain a list of the locations where official copies of the OH&S Policy are posted.

**Opportunity for Improvement 2:** (OHSAS Element 4.2, OH&S Policy) section 3 asks, is there demonstrable knowledge of OSH policy by persons working in the organization...were they

knowledgeable of the location of the policy...comfortable recalling the major components... able to relate to the policy... Group Leaders and Management were found knowledgeable of the OH&S Policy. However, additional refresher training is required for all employees on the awareness of the policy. This training is scheduled for the second quarter of 2008 prior to the Registrar Audit.

Approved:

R. Karol, C-AD ESSHQ Division Head



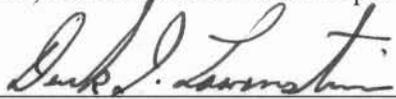
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E. Lessard, C-AD ESSHQ, Chair



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D. Lowenstein, Collider-Accelerator Department Chairman



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P. Wanderer, Superconducting Magnet Division Head



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Cc:

R. Karol  
E. Lessard  
D. Lowenstein  
P. Wanderer  
D. Passarello

Attachments EMS / OHSAS - Checklist

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ISO 14001 EMS Assessment

Organization: C-AD/SMD

Date: 2/14/08

Lead Auditor: R. Savage / J. Montalto

Environmental Management System Model		<b>GENERAL REQUIREMENTS</b>	
<b>ELEMENT:</b>	4.1	<b>TITLE:</b>	General Requirements
<b>ISO 14001 STANDARD:</b>			
	<b>NO</b>	<b>PARTIAL</b>	<b>YES</b>
The organization shall establish, <b>document, implement</b> and maintain an <b>EMS in accordance with</b> the requirements of <b>this International Standard and determine how it will fulfill these requirements.</b>			X
<b>The organization shall define and document the scope of its EMS.</b>			X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>			
<p><b>Discussion:</b> SMD &amp; C-AD EMS System established and implemented for almost (9) years and is in accordance with lab wide SBMS Subject Area and internal operating procedures. OPM 1.10.2, EMS Program Description, describes program and individuals responsible for EMS tasks, including researchers and contractors.</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>			
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>			
<p>OPM 1.10.2 OPM 14.1</p>			
<b>COMMENTS:</b> Personnel interviewed familiar with EMS Roles & Responsibilities and are presently on schedule for completing their assignments.			
<b>Suggested lines of inquiry in future assessments:</b>			
<b>EVALUATION:</b>			
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE
<b>OPTIONAL AUDITOR QUESTIONS:</b>			
<p>Has a program been established?</p> <p>How long has the program been established?</p> <p>Is it fully implemented?</p> <p><b>Does it apply to persons work for or on its behalf? (e.g., students, contractors, etc.)</b></p> <p>Is it effective?</p> <p>Is the program meeting the intent of ISO 14001?</p> <p>Is it being maintained the requirements of International Standard ISO 14001:2004?</p> <p><b>Have they defined and documented the scope of the EMS (noting exclusions)?</b></p> <p><b>Does the scope cover products and services (including R&amp;D)?</b></p>			

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ISO 14001 EMS Assessment

Organization: C-AD/SMD

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Environmental Management System Model		<b>ENVIRONMENTAL POLICY</b>	
<b>ELEMENT:</b>	4.2	<b>TITLE:</b>	Environmental Policy
<b>ISO 14001 STANDARD:</b>		<b>NO</b>	<b>PARTIAL</b>
<p>Top Management shall define the organization's environmental policy and ensure that, <b>within the defined scope of the EMS</b>, it:</p> <p>a) is appropriate to the nature, scale and environmental impacts of its activities, products, or services;</p> <p>b) includes a commitment to continual improvement and prevention of pollution;</p> <p>c) includes a commitment to comply with <b>applicable legal requirements</b> and with other requirements to which the organization subscribes <b>which relate to its environmental aspects</b>;</p> <p>d) provides the framework for setting and reviewing environmental objectives and targets;</p> <p>e) is documented, implemented, maintained</p> <p>f) is communicated to <b>all persons working for or on behalf of the organization</b>;</p> <p>g) is available to the public.</p>		X	
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>			
<p><b>Discussion:</b></p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b> Laboratory ES&amp;H policy posted in C-AD Chairman's office, C-AD lobby, and Magnet Division lobby. Requires additional training which is scheduled for 2<sup>nd</sup> quarter of 2008. However, Group Leaders and Management were found knowledgeable of EMS requirements.</p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>			
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>			
OPM 1.10 & 1.10.2,			
<b>COMMENTS:</b> (See above)			
<b>Suggested lines of inquiry in future assessments:</b>			
<b>EVALUATION:</b>			
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE
<b>OPTIONAL AUDITOR QUESTIONS:</b>			
Is the policy defined and is it appropriate to the type, size, and environmental impacts of the activities?			
<b>Is the policy aligned with the scope of the EMS?</b>			
<b>Has it been endorsed by top management?</b>			
Does the policy include a commitment to continual improvement and evidence of such in the organization's operations?			
Does the policy include a commitment to pollution prevention and evidence of such in the organization's operations?			
Does the policy include a commitment to compliance to legal requirements and is there evidence indicating intent to comply?			
Does the organization subscribe to other requirements, and are they covered also?			
Does the policy include a mechanism for setting and reviewing environmental objectives and targets?			
Is the policy documented, implemented, maintained?			
Is the policy communicated to all <b>persons working for or on behalf of the organization</b> ?			
Do persons working for or on behalf of the organization exhibit knowledge of environmental policy (key commitments and how			

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they relate to job)			
Is the policy available to the public?			
Environmental Management System Model		<b>PLANNING</b>	
<b>ELEMENT:</b>	4.3.1	<b>TITLE:</b>	Environmental Aspects
<b>ISO 14001 STANDARD:</b>			<b>NO</b>
			<b>PARTIAL</b>
			<b>YES</b>
The organization shall establish, implement and maintain a procedure(s) a) to identify the environmental aspects of its activities, products, or services <b>within the defined scope of its EMS</b> that it can control and <b>those it can influence taking into account planned or new developments, or new or modified activities, products or services, and</b> b) to determine those <b>aspects that</b> have or can have significant impacts on the environment (i.e., <b>significant environmental aspects</b> ).  The organization shall ensure that the <b>significant environmental</b> aspects are <b>taken into account in establishing, implementing and maintaining its EMS</b> .  The organization shall <b>document this</b> information and <b>keep it</b> up-to-date.			X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>			
<b>Discussion:</b> C-AD / SMD identifies environmental aspects during planning work phases of its operations using work planning & safety reviews, as well as external contractors performing work within both facilities. <b>Major Nonconformance:</b> <b>Minor Nonconformance:</b> <b>Observation:</b> <b>Opportunity for Improvement:</b> <b>Noteworthy Practice:</b>			
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>			
OPM 1.10.2, 2.12, 2.18, 2.29, and EMS task list 2007/2008.			
<b>COMMENTS:</b> None			
<b>Suggested lines of inquiry in future assessments:</b>			
<b>EVALUATION:</b>			
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE
<b>OPTIONAL AUDITOR QUESTIONS:</b>			
Is there a documented and maintained procedure to review and update aspects? When was the last time they were reviewed? Are aspects documented? What mechanism is used to initiate aspect review/revision when operations, <b>products or services</b> change? <b>How do they identify aspects for PLANNED activities?</b> <b>Is it clear that significant aspects were taken into account in developing and implementing the EMS?</b> Are there records showing that an analysis to select significant aspects was done? Was there effort to include aspects over which there is influence? Are there any obvious aspects that should have been considered and were not? If not, why not?			

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Environmental Management System Model		<b>PLANNING</b>		
<b>ELEMENT:</b>	4.3.2	<b>TITLE:</b>	Legal and Other Requirements	
<b>ISO 14001 STANDARD:</b>		<b>NO</b>	<b>PARTIAL</b>	<b>YES</b>
<p>The organization shall establish and maintain a procedure</p> <p>a) to identify and have access to <b>applicable</b> legal and other requirements to which the organization subscribes <b>related to its environmental aspects, and</b></p> <p>b) <b>To determine how these requirements apply to its environmental aspects,</b></p> <p><b>The organization shall ensure that these applicable legal requirements and other requirements to which the organization subscribes are taken into account in establishing, implementing and maintaining its EMS.</b></p>				X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>				
<p><b>Discussion:</b> 2007 legal requirements originate from external agencies to lab personnel. CAD/SMD personnel have subscribed to SBMS subscription service that identifies new and updated subject areas. In addition, subject matter experts (ECR's) also identify legal and other requirements associated with EMS attributes.</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>				
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>				
OPM 1.10.2, EMP, SBMS SA, SBMS Subscription Service, ECR and Subject Matter Experts.				
<b>COMMENTS:</b> None				
<b>Suggested lines of inquiry in future assessments:</b>				
<b>EVALUATION:</b>				
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE	
<b>OPTIONAL AUDITOR QUESTIONS:</b>				
<p>Is there a documented procedure for the organization to identify and have access to all applicable legal requirements? Does it include federal, state and local requirements (including those applicable to remote locations), including regulations, permits, and agreements, and <b>ISO 14001:2004</b>?</p> <p>Is someone (or more than one) designated to keep unit current on requirements? What are that persons resources, references, methods to keep current?</p> <p>How is applicability of new requirements determined?</p> <p>How are affected employees made aware of new requirements?</p> <p><b>How have they determined how these requirements apply to the environmental aspects?</b></p> <p><b>How can they demonstrate that they have taken legal requirements into account when setting up the EMS?</b></p>				

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Environmental Management System Model		<b>PLANNING</b>		
<b>ELEMENT:</b>	4.3.3	<b>TITLE:</b>	Objectives, Targets, and Programmes	
<b>ISO 14001 STANDARD:</b>				
		<b>NO</b>	<b>PARTIAL</b>	<b>YES</b>
<p>The organization shall establish, <b>implement</b> and maintain documented environmental objectives and targets, at relevant functions and levels within the organization.</p> <p><b>The objectives and targets shall be measurable, where practicable</b>, and consistent with the environmental policy, including the commitments to prevention of pollution, <b>to compliance with applicable legal and other requirements to which the organization subscribes, and to continual improvement.</b></p> <p>When establishing and reviewing its objectives <b>and targets</b>, an organization shall <b>take into account</b> the legal requirements and other requirements to which it subscribes, and its significant environmental aspects. It shall also consider its technological options, its financial, operational and business requirements, and the views of interested parties.</p> <p>The organization shall establish, <b>implement</b> and maintain (a) programme(s) for achieving its objectives and targets. Programme(s) shall include:</p> <p>a) designation of responsibility for achieving objectives and targets at relevant functions and levels of the organization;</p> <p>b) the means and time-frame by which they are to be achieved.</p>			X	
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>				
<p><b>Discussion:</b></p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b> As identified in 2006/2007 it was observed that the FY 2007/2008 C-AD Self-Assessment report has not been issued to date. The reason for this appears to be certain issues identified in the report have not been satisfactorily closed at this time. These issues are being tracked by the author of the report.</p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>				
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>				
OPM 1.10.2, 14.1, C-AD / SMD EMS matrix of objectives and targets.				
<b>COMMENTS:</b> See Above				
<b>Suggested lines of inquiry in future assessments:</b>				
<b>EVALUATION:</b>				
X MEETS REQUIREMENT (See observation above)		MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE	
<b>OPTIONAL AUDITOR QUESTIONS:</b>				
Has the organization established and maintained objectives and targets for at least some significant aspects?				

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Have the documented objectives and targets taken into account legal and other requirements?  
Are there programs to achieve all the identified objectives and targets? Do the targets support achievement of the objectives?  
Are objectives and targets reasonable and measurable?  
Is there a documented and maintained procedure for periodically reviewing objectives and targets?  
Are objectives and targets communicated to the employees that are supposed to achieve them?  
Do objectives and targets reflect a commitment to pollution prevention? **Compliance? Continual Improvement?**  
Do the programs include schedules for completion and resources necessary to achieve the objectives and targets?  
Do the programs assign responsibilities for completion of tasks in achieving objectives and targets?  
Do the programs specify performance indicators and methods for performing monitoring and measurement?  
Are all procedures that supplement the EMP's available to the appropriate personnel and current?  
Are operational controls in place and working as expected?  
Is there evidence that new or modified activities have resulted in necessary amendments?

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Environmental Management System Model		<b>IMPLEMENTATION AND OPERATION</b>		
<b>ELEMENT:</b>	4.4.1	<b>TITLE:</b>	Resources, Roles, Responsibility and Authority	
<b>ISO 14001 STANDARD:</b>				
		<b>NO</b>	<b>PARTIAL</b>	<b>YES</b>
<p>Management shall <b>ensure the availability of</b> resources essential to <b>establish, implement, maintain and improve</b> the EMS. Resources include human resources and specialized skills, <b>organizational infrastructure</b>, technology and financial resources.</p> <p>Roles, responsibility and authority shall be defined, documented and communicated in order to facilitate effective environmental management.</p> <p>The organization's top management shall appoint a specific management representative(s) who, irrespective of other responsibilities, shall have defined roles, responsibilities and authority for</p> <p>a) ensuring that an EMS is established, implemented and maintained in accordance with this International Standard;</p> <p>b) reporting to top management on the performance of the EMS for review, <b>including recommendations</b> for improvement.</p>				X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>				
<p><b>Discussion:</b> Management is providing appropriate resources to meet their management review goals, objectives and EMS responsibilities. R2A2s are current for both C-AD/SMD staff and are maintained as required.</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>				
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>				
R2A2s for C-AD / SMD, OPM 1.10, 1.10.2 and 2.2.				
<b>COMMENTS:</b> None				
<b>Suggested lines of inquiry in future assessments:</b>				
<b>EVALUATION:</b>				
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE	
<b>OPTIONAL AUDITOR QUESTIONS:</b>				
<p>Are roles and responsibility, and authorities defined, documented and communicated?</p> <p>Do employees (e.g., management rep) know their roles, authorities and responsibilities?</p> <p>Has management <b>ensured the availability</b> of necessary resources (people, technology organizational <b>infrastructure</b>, money) to accomplish objectives and targets?</p> <p>Has top management appointed an environmental management representative?</p> <p>Has the top management rep giving management recommendations for improvement?</p> <p>Do the roles and responsibilities of the EMS representative document include sufficient authority to accomplish a &amp; b above?</p>				

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Organization: C-AD/SMD

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Environmental Management System Model		IMPLEMENTATION AND OPERATION		
ELEMENT:	4.4.2	TITLE:	Competence, Training and Awareness	
ISO 14001 STANDARD:		NO	PARTIAL	YES
<p>The organization shall <b>ensure that any person(s) performing tasks for it or on its behalf that have the potential</b> to cause a significant environmental impact(s) <b>identified by the organization</b> is (are) competent on the basis of appropriate education, training or experience, and <b>shall retain associated records</b>.</p> <p>The organization shall identify training needs <b>associated with its environmental aspects and its EMS</b>. It shall provide training <b>or take other action to meet these needs</b>, and shall retain associated records.</p> <p>The organization shall establish, <b>implement</b> and maintain a procedure(s) to <b>persons working for it or on its behalf</b> aware of</p> <ul style="list-style-type: none"> <li>a) the importance of conformity with the environmental policy and procedures and with the requirements of the EMS;</li> <li>b) the significant environmental impacts <b>and related</b> actual or potential impacts associated with their work, and the environmental benefits of improved personal performance;</li> <li>c) their roles and responsibilities in achieving conformity with the requirements of the EMS, and</li> <li>d) the potential consequences of departure from specified operating procedures.</li> </ul>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>				
<p><b>Discussion:</b> SMD/CAD job specific training is in accordance with their JTAs and process evaluation. C-AD presently is maintaining 98% training and SMD is maintaining 97% efficiency levels. EMS awareness training is presently scheduled for 2<sup>nd</sup> quarter 2008.</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice</b></p> <p>:</p>				
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>				
R2A2s for C-AD / SMD, OPM 1.10, 1.10.2 and 2.2.				
<b>COMMENTS:</b> None				
<b>Suggested lines of inquiry in future assessments:</b>				
<b>EVALUATION:</b>				
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE	

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**OPTIONAL AUDITOR QUESTIONS:**

Have training needs been identified for those (**including those who work ON BEHALF of the organization – e.g., contractors, temporary workers, visiting scientists/students, home-based staff**) whose work can have a significant impact on the environment?

**Does training need identification consider environmental aspects?**

Has the appropriate training been done and, where required, by qualified trainers?

Are procedures established and maintained to make **persons work for or on its behalf** aware of a – d above?

**What portion of employees have received required awareness training?**

Are there specific, documented minimum requirements for each person performing a task that can cause significant environmental impact?

Are persons working for or on behalf of the organization aware of:

environmental aspects of personal tasks (how job can impact environment)

of how to avoid environmental degradation (what controls are in place to prevent negative environmental impact)

negative consequences of not following controls, positive consequences of improved personal performance

how to contribute to unit's programs (e.g., recycling), and objectives and targets if relevant to their job

emergency response/actions

**Are records retained?**

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Environmental Management System Model		<b>IMPLEMENTATION AND OPERATION</b>	
<b>ELEMENT:</b>	4.4.3	<b>TITLE:</b>	Communication
<b>ISO 14001 STANDARD:</b>			
With regard to its environmental aspects and EMS, the organization shall establish, <b>implement</b> and maintain a procedure(s) for: a) internal communication between the various levels and functions of the organization; b) receiving, documenting and responding to relevant communication from external interested parties.  The organization shall <b>decide</b> whether to externally communicate about its significant environmental aspects, and shall document its decision.  <b>If the decision is to communicate, the organization shall establish and implement a method(s) for this external communication.</b>		<b>NO</b>	<b>PARTIAL</b>
			<b>YES</b>
			X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>			
<b>Discussion:</b> As identified in 2007, internal communication is performed using various means which revolve around work planning processes and weekly meetings. In addition, formal memos, e-mails, newsletter, monthly & weekly meetings, SBMS, Tier I reports, ATS, and lab web postings are sources of internal communication.  <b>Major Nonconformance:</b> <b>Minor Nonconformance:</b> <b>Observation:</b> <b>Opportunity for Improvement:</b> <b>Noteworthy Practice:</b>			
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>			
OPMS 2.12, 1.10.3, 1.10.2, 1.10.2c, C-AD/SMD web site, CCTS.			
<b>COMMENTS:</b> See ISO 14001 attribute 4.2 of EMS Assessment.			
<b>EVALUATION:</b>			
<b>Suggested lines of inquiry in future assessments:</b>			
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE
<b>OPTIONAL AUDITOR QUESTIONS:</b>			
Are there procedures and records that are maintained for communications and activities regarding the company's environmental aspects and its overall EMS? How are internal communications between different levels and different functions documented? How are they handling and documenting receipt and response to relevant questions from interested parties? <b>What was their decision on externally communicating significant environmental aspects, and where it is documented?</b> <b>What method have they implemented to communicate externally on significant aspects?</b>			

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Environmental Management System Model		<b>IMPLEMENTATION AND OPERATION</b>	
<b>ELEMENT:</b>	4.4.4	<b>TITLE:</b>	(EMS) Documentation
<b>ISO 14001 STANDARD:</b>		<b>NO</b>	<b>PARTIAL</b>
The EMS documentation shall <b>include</b> : a) <b>the environmental policy, objectives and targets,</b> b) <b>description of the scope of the EMS,</b> c) description of the main elements of the EMS and their interaction, and reference to related documents, d) <b>documents, including records, required by this International Standard, and</b> e) <b>documents, including records, determined by the organization to be necessary to ensure the effective planning, operation and control of processes that relate to its significant environmental aspects.</b>			X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>			
<b>Discussion:</b> C-AD / SMD EMS program description describes how program is implemented, via SBMS & C-AD OPMs. Responsibilities are well defined in both lower and higher laboratory levels.			
<b>Major Nonconformance:</b>			
<b>Minor Nonconformance:</b>			
<b>Observation:</b>			
<b>Opportunity for Improvement:</b>			
<b>Noteworthy Practice:</b>			
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>			
OPMs 1.10.2, b, c & d; 14.1; SBMS SA; C-AD / SMD organization chart.			
<b>COMMENTS:</b> None			
<b>Suggested lines of inquiry in future assessments:</b>			
<b>EVALUATION:</b>			
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE
<b>OPTIONAL AUDITOR QUESTIONS:</b>			
How is the organization's EMS documented and maintained?			
Does the EMS documentation address all required content?			
Does the system document how the related documentation [regulations, permits, forms, etc.] is to be used?			
<b>Have they determined what documents and records are needed to ensure effective planning, operation and control of processes that relate to significant aspects?</b>			

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ISO 14001 EMS Assessment

Organization: C-AD/SMD

Date: 2/14/08

Lead Auditor: R. Savage / J. Montalto

Environmental Management System Model		<b>IMPLEMENTATION AND OPERATION</b>	
<b>ELEMENT:</b>	4.4.5	<b>TITLE:</b>	Control of Documents
<b>ISO 14001 STANDARD:</b>			
		<b>NO</b>	<b>PARTIAL</b>
			<b>YES</b>
<p>Documents required by the EMS and by this International Standard shall be controlled. Records are a special type of document and shall be controlled in accordance with the requirements given in 4.5.4.</p> <p>The organization shall establish, implement and maintain a procedure(s) to</p> <ul style="list-style-type: none"> <li>a) approve documents for adequacy prior to issue,</li> <li>b) review and <b>update</b> as necessary and <b>re-approve</b> documents,</li> <li>c) ensure that changes and the current revision status of documents are identified,</li> <li>d) ensure that <b>relevant</b> versions of applicable documents are available at points of use,</li> <li>e) ensure that documents remain legible and readily identifiable,</li> <li>f) ensure that documents of external origin determined by the organization to be necessary for the planning and operation of the EMS are identified and their distribution controlled, and</li> <li>g) prevent the unintended use of obsolete documents and apply suitable identification to them if they are retained for <b>any</b> purpose.</li> </ul>			X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>			
<p><b>Discussion:</b> EMS documents are controlled and maintained as required, as necessary for implementing EMS program requirements. EMS vendor manuals are posted on C-AD web page.</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>			
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b> OPMs 1.2, 1.4, 1.4.3, 1.4.7, 13.4, 13.6.1			
<b>COMMENTS:</b> None			
<b>Suggested lines of inquiry in future assessments:</b>			
<b>EVALUATION:</b>			
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE
<b>OPTIONAL AUDITOR QUESTIONS:</b>			
<p>Are there procedures for controlling and maintaining all documents required by ISO 14001? Are the documents accessible? Are EMS documents reviewed, updated and approved or re-approved? Where does this requirement exist? (<b>Note: periodic reviews are no longer required.</b>)</p> <p><b>Do document control procedures cover all required elements?</b> Are latest versions of documents available in all areas and by all personnel that perform tasks essential to the effective functioning of the EMS?</p> <p><b>Are documents of external origin needed for the EMS (e.g., maintenance manuals, CFRs, etc.) identified and controlled?</b> Are obsolete documents removed from use and assured from unintended use? Are any historical copies maintained &amp; labeled?</p>			

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Organization: C-AD/SMD

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Lead Auditor: R. Savage / J. Montalto

Environmental Management System Model		<b>IMPLEMENTATION AND OPERATION</b>	
<b>ELEMENT:</b>	4.4.6	<b>TITLE:</b>	Operational Control
<b>ISO 14001 STANDARD:</b>			
		<b>NO</b>	<b>PARTIAL</b>
			<b>YES</b>
<p>The organization shall identify <b>and plan</b> those operations that are associated with the identified significant environmental aspects consistent with its policy, objectives and targets, in order to ensure that they are carried out under specified conditions, by:</p> <p>a) establishing, <b>implementing</b> and maintaining a documented procedure(s) to <b>control</b> situations where their absence could lead to deviation from the environmental policy, objectives and targets;</p> <p>b) stipulating operating criteria in the procedure(s);</p> <p>c) establishing, <b>implementing</b> and maintaining procedures related to the <b>identified</b> significant environmental aspects of goods and services used by the organization and communicating applicable procedures and requirements to suppliers, including contractors.</p>			X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>			
<p><b>Discussion:</b> Reviewed ERL, EBIS, Power Supply Group, Vacuum Group and Cryogenics which identified that all EMS controls are in-place to protect the working environment. Radiation controls were also found in accordance with OPM 8.20 requirements.</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>			
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b> OPM 1.10.2, 8.20, SBMS SA requirements.			
<b>COMMENTS:</b> None			
<b>Suggested lines of inquiry in future assessments:</b>			
<b>EVALUATION:</b>			
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE
<b>OPTIONAL AUDITOR QUESTIONS:</b>			
<p>Have the operations and activities been identified that are associated with the significant environmental aspects?</p> <p>Are the identified operations and activities consistent with the company's policy, objectives and targets?</p> <p>Is there a maintenance plan for the above identified operations and activities?</p> <p><b>Does work planning take significant aspects into account and ensure that adequate controls are established?</b></p> <p>Have procedures been established and maintained for the above operations that, if they are not followed for these situations, could lead to deviations from the environmental policy and the objectives and targets?</p> <p>Are operating criteria clearly established and documented in the procedures for the operations and activities identified above?</p> <p>Have the significant environmental aspects of raw materials, supplies and services used in the above operations and activities been identified?</p> <p>Are there procedures for handling raw materials, supplies and services used in the activities associated with significant impacts?</p> <p>Are relevant procedures and requirements communicated to the appropriate suppliers and contractors?</p> <p>Are operational controls in place and working?</p>			

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Lead Auditor: R. Savage / J. Montalto

Environmental Management System Model		<b>IMPLEMENTATION AND OPERATION</b>		
<b>ELEMENT:</b>	4.4.7	<b>TITLE:</b>	Emergency Preparedness and Response	
<b>ISO 14001 STANDARD:</b>		<b>NO</b>	<b>PARTIAL</b>	<b>YES</b>
<p>The organization shall establish, <b>implement</b> and maintain a procedure(s) to identify potential for and respond to accidents and emergency situations, and for preventing and mitigating the environmental impacts that may be associated with them.</p> <p>The organization shall review and revise, where necessary, its emergency preparedness and response procedures, in particular, after the occurrence of accidents or emergency situations.</p> <p>The organization shall also periodically test such procedures where practicable.</p>				X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>				
<p><b>Discussion:</b> Emergency Preparedness &amp; Response procedures current and in accordance with SBMS SA requirements. R2A2s in accordance with EMS tasks. Drills performed at C-AD and SMD were from actual events (C-AD 6/30/07 &amp; 10/26/07) (SMD 8/07) all related to smoke conditions within facilities. All appropriate parties responded as required.</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>				
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b> OPM 3.0, 10.1, 10.2, SMD 3.0.				
<b>COMMENTS:</b> None				
<b>Suggested lines of inquiry in future assessments:</b>				
<b>EVALUATION:</b>				
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE	
<b>OPTIONAL AUDITOR QUESTIONS:</b>				
<p>Are there maintained procedures to identify potential for accidents and emergency situations?</p> <p>Are there maintained procedures to respond to accidents and emergency situations?</p> <p>Are there maintained procedures to prevent and minimize the environmental impacts that may be associated with the identified accidents and emergency situations?</p> <p>Are there reviews and revisions of the emergency preparedness and response procedures, particularly after an incident?</p> <p>Are there periodic tests of the above procedures?</p>				

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Lead Auditor: R. Savage / J. Montalto

Environmental Management System Model		<b>CHECKING AND CORRECTIVE ACTION</b>		
<b>ELEMENT:</b>	4.5.1	<b>TITLE:</b>	Monitoring and Measurement	
<b>ISO 14001 STANDARD:</b>		<b>NO</b>	<b>PARTIAL</b>	<b>YES</b>
<p>The organization shall establish, <b>implement</b> and maintain a procedure(s) to monitor and measure, on a regular basis, the key characteristics of its operations that can have a significant environmental impact. The procedure(s) shall include the documenting of information to monitor performance, applicable operational controls and conformity with the organization's environmental objectives and targets.</p> <p>The organization shall ensure that calibrated <b>or verified monitoring and measurement equipment is used</b> and maintained and shall retain associated records.</p>				X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>				
<p><b>Discussion:</b> C-AD/SMD ECR reviews compliance areas and documents inspections. Monitoring &amp; measurement of EMS instruments is being performed in accordance with SBMS SA &amp; C-AD OPM requirements. Examples of EMS attribute (ODH, Chipmunks, Ground Water Wells, Lab Analysis).</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>				
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>				
OPMs 1.8, 1.14, 1.15, 1.19, 2.19, 8.20, 8.20.1, 8.20.2, 8.16 series, 8.18, 8.18.1.a, 8.18.4, 8.18.5, 8.22, 8.27, 8.31, 9.5.12, SBMS SA.				
<b>COMMENTS:</b> None				
<b>Suggested lines of inquiry in future assessments:</b>				
<b>EVALUATION:</b>				
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE	
<b>OPTIONAL AUDITOR QUESTIONS:</b>				
<p>Are procedures documented and maintained to monitor and measure operations that can have a significant impact on the environment?</p> <p>Is there a calibration <b>or verification</b> system for monitoring equipment?</p> <p><b>Is calibration up to date? How do they know when calibration is due?</b></p> <p><b>If stickers are required by internal procedures, are they in place?</b></p> <p><b>How are they evaluating/determining EMS performance (vs. conformance)?</b></p>				

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Lead Auditor: R. Savage / J. Montalto

Environmental Management System Model		<b>CHECKING AND CORRECTIVE ACTION</b>	
<b>ELEMENT:</b>	4.5.2	<b>TITLE:</b>	Evaluation of Compliance
<b>ISO 14001 STANDARD:</b>			
4.5.2.1 Consistent with its commitment to compliance, the organization shall establish, <b>implement</b> and maintain a procedure(s) for periodically evaluating compliance with relevant environmental legislation and regulations. <b>The organization shall keep records of the results of the periodic evaluations.</b>		<b>NO</b>	<b>PARTIAL</b>
4.5.2.2 The organization shall evaluate compliance with other requirements to which it subscribes. The organization may wish to combine this evaluation with the evaluation of legal compliance referred to in 4.5.2.1 or establish a separate procedure(s). <b>The organization shall keep records of the results of the periodic evaluations.</b>			<b>YES</b>
<p><b>FACILITY IMPLEMENTATION OF STANDARD:</b>  <b>Discussion:</b> C-AD Tickler Card TC304 is being implemented which evaluates compliance corrective action issues. NCRs are recorded and maintained by QA Manager as applicable.</p> <p><b>Major Nonconformance:</b>  <b>Minor Nonconformance:</b>  <b>Observation:</b>  <b>Opportunity for Improvement:</b>  <b>Noteworthy Practice:</b></p>			
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b>			
OPMs 10.0 series, 1.10.2, 13.10.1, C-AD / SMD ATS, ESHQ TC304, SBMS SA requirements.			
<b>COMMENTS:</b> None			
<b>Suggested lines of inquiry in future assessments:</b>			
<b>EVALUATION:</b>			
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE
<b>OPTIONAL AUDITOR QUESTIONS:</b>			
Does the company have a documented procedure for periodically evaluating compliance with environmental legislation and regulations?			
<b>Do compliance assessments include "other requirements"?</b>			
<b>Who is responsible for ensuring that all environmental media are covered over some time period?</b>			
<b>Are results of evaluations documented and records retained?</b>			

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Lead Auditor: R. Savage / J. Montalto

Environmental Management System Model		<b>CHECKING AND CORRECTIVE ACTION</b>					
<b>ELEMENT:</b>	4.5.3	<b>TITLE:</b>	Nonconformity, Corrective Action and Preventive Action				
<b>ISO 14001 STANDARD:</b>		<b>NO</b>	<b>PARTIAL</b>				
<p>The organization shall establish, <b>implement</b> and maintain a procedure(s) for <b>dealing with</b> actual or potential nonconformities and for taking corrective and preventive action. The procedure shall define requirements for</p> <ul style="list-style-type: none"> <li>a) <b>identifying and correcting nonconformities and taking actions to mitigate their environmental impacts</b></li> <li>b) <b>investing nonconformities, determining their causes and taking actions in order to avoid their recurrence</b></li> <li>c) <b>evaluating the needs for actions to prevent nonconformities and implementing appropriate actions designed to avoid their occurrence.</b></li> <li>d) <b>Recording the results of corrective actions and preventive actions taken</b></li> <li>e) <b>Reviewing the effectiveness of corrective actions and preventive actions taken.</b></li> </ul> <p>Actions taken shall be appropriate to the magnitude of problems and the environmental impact encountered.</p> <p>The organization shall ensure that any necessary changes are made to <b>EMS documentation.</b></p>		NO	PARTIAL				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%; text-align: center;">X</td> </tr> </table>							X
			X				
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>							
<p><b>Discussion:</b> ORPS, Critiques, and NCRs are used to identify EMS concerns/issues. These concerns are posted on C-AD web page and tracked via ATS until closed. Records are maintained in accordance with C-AD record requirements.</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>							
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b> OPMs 1.10.2, 10.0 series, 13.3.2, ATS system, SBMS SA requirements.							
<b>COMMENTS:</b> None							
<b>Suggested lines of inquiry in future assessments:</b>							
<b>EVALUATION:</b>							
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE				
<b>OPTIONAL AUDITOR QUESTIONS:</b>							
<p>Are procedures documented and maintained for defining responsibility and authority for handling, investigating and taking action to minimize impacts of nonconformities?</p> <p><b>Does the corrective action program address both actual and potential (e.g., near miss) nonconformities?</b></p> <p><b>Is evaluation of the need to prevent nonconformities included in procedures?</b></p> <p>Are procedures documented and maintained for initiating and completing corrective and preventive action?</p> <p>Are appropriate corrective and preventive actions taken?</p> <p>Are the results of the corrective and preventive actions implemented and recorded?</p> <p><b>Is the effectiveness of corrective and preventive actions reviewed?</b></p>							

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Lead Auditor: R. Savage / J. Montalto

Environmental Management System Model		<b>CHECKING AND CORRECTIVE ACTION</b>		
<b>ELEMENT:</b>	4.5.4	<b>TITLE:</b>	Control of Records	
<b>ISO 14001 STANDARD:</b>				
		<b>NO</b>	<b>PARTIAL</b>	<b>YES</b>
The organizational shall establish and maintain records as necessary to demonstrate conformity to the requirements of its EMS and of this International Standard, and the <b>results achieved.</b>				X
The organization shall establish, <b>implement</b> and maintain a procedure(s) for the identification, <b>storage, retrieval, retention</b> and disposal of environmental records.				
Environmental records shall be <b>and remain</b> legible, identifiable, and traceable.				
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>				
<b>Discussion:</b> Records are maintained in accordance with SBMS SA requirements and OPM procedures. It was noted that the C-AD OPM procedures are currently under review and are being revised to reflect current conditions.				
<b>Major Nonconformance:</b>				
<b>Minor Nonconformance:</b>				
<b>Observation:</b>				
<b>Opportunity for Improvement:</b>				
<b>Noteworthy Practice:</b>				
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b> OPMs 13.4.1, 13.4.2, 2.1.				
<b>COMMENTS:</b> None				
<b>Suggested lines of inquiry in future assessments:</b>				
<b>EVALUATION:</b>				
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE	
<b>OPTIONAL AUDITOR QUESTIONS:</b>				
Are procedures documented and maintained for the identification, maintenance and disposition of environmental records?				
Are the records legible, identifiable and traceable to the activity, product or service involved?				
Where are EMS records kept?				
Are the records stored and maintained such that they are readily retrievable and protected against damage, deterioration or loss?				
Are there documented specified retention times for all of the records identified?				
<b>Are records demonstrating the results of the EMS maintained?</b>				
Are records managed and retained per plans/procedures?				

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Lead Auditor: R. Savage / J. Montalto

Environmental Management System Model		<b>MANAGEMENT REVIEW</b>	
<b>ELEMENT:</b>	4.5.5	<b>TITLE:</b>	Internal (EMS) Audit
<b>ISO 14001 STANDARD:</b>			
		<b>NO</b>	<b>PARTIAL</b>
			<b>YES</b>
<p>The organization shall <b>ensure that internal audits of the EMS are conducted at planned intervals to</b></p> <p>a) determine whether the EMS</p> <p style="padding-left: 20px;">1) conforms to planned arrangements for environmental management including the requirements of this International Standard, and</p> <p style="padding-left: 20px;">2) has been properly implemented and is maintained; and</p> <p>b) provide information on the results of audits to management.</p> <p>Audit programme(s) shall <b>be planned, established, implemented and maintained</b> by the organization, taking into consideration the environmental importance of the operation(s) concerned and the results of previous audits.</p> <p>Audit procedure(s) shall be established, <b>implemented</b> and maintained that address</p> <ul style="list-style-type: none"> <li>- responsibilities and requirements for <b>planning and</b> conducting audits, reporting results, and retaining associated records,</li> <li>- the determination of audit <b>criteria</b>, scope, frequency and methods.</li> </ul> <p><b>Selection of auditors and conduct of audits shall ensure objectivity and the impartiality of the audit process.</b></p>			X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>			
<p><b>Discussion:</b> This EMS Audit is being performed in accordance with C-AD Self-Assessment Program. Records are maintained and elements reviewed are in accordance with SBMS EMS Assessment Criteria.</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>			
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b> OPMs 1.10.2, 13.10.1, SBMS Environmental Subject Area.			
<b>COMMENTS:</b> None			
<b>Suggested lines of inquiry in future assessments:</b>			
<b>EVALUATION:</b>			
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE
<b>OPTIONAL AUDITOR QUESTIONS:</b>			
<p>Are procedures documented and maintained for periodic EMS audits?</p> <p><b>Has the environmental importance of operations and results of previous audits been incorporated into the audit program?</b></p> <p>Does the EMS audit determine whether their EMS has been implemented and maintained and conforms to this standard?</p> <p>Does the procedure for EMS audits include the scope of the audit, frequency, methodologies used, responsibilities, <b>responsibilities, requirements</b>, and method of reporting results.</p> <p>Does the EMS audit provide results of the audits to management?</p> <p><b>Are EMS audit records maintained?</b></p> <p><b>Can the independence of the auditor be demonstrated (e.g., freedom from responsibility for the activity being audited.)?</b></p>			

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Lead Auditor: R. Savage / J. Montalto

Environmental Management System Model		<b>MANAGEMENT REVIEW</b>	
<b>ELEMENT:</b>	4.6	<b>TITLE:</b>	Management Review
<b>ISO 14001 STANDARD:</b>		<b>NO</b>	<b>PARTIAL</b>
<p>Top management, shall review the organization's EMS, at planned intervals, to ensure its continuing suitability, adequacy, and effectiveness.</p> <p>Reviews shall include <b>assessing opportunities</b> for improvement and the need for changes to the EMS, including the environmental policy, objectives and <b>targets</b>.</p> <p>Records of the management reviews shall be retained.</p> <p><b>Inputs to management reviews shall include</b></p> <ul style="list-style-type: none"> <li>a) results of internal audits <b>and evaluations of compliance with legal requirements and with other requirements to which the organization subscribes,</b></li> <li>b) <b>communication(s) from external interested parties, including complaints,</b></li> <li>c) <b>the environmental performance of the organization,</b></li> <li>d) <b>the extent to which objectives and targets have been met,</b></li> <li>e) <b>status of corrective and preventive actions,</b></li> <li>f) <b>follow-up actions from previous management reviews,</b></li> <li>g) <b>changing circumstances, including developments in legal and other requirements related to its environmental aspects, and</b></li> <li>h) <b>recommendations for improvement.</b></li> </ul> <p><b>The outputs from management reviews shall include any decisions and actions related to possible changes to the environmental policy, objectives, targets and other elements of the EMS, consistent with the commitment to continual improvement.</b></p>			X
<b>FACILITY IMPLEMENTATION OF STANDARD:</b>			
<p><b>Discussion:</b> The Management Review for C-AD/SMD for 2007 was performed within schedule. Objectives and targets issued also in 2007 for FY 2008, as identified in OPM 14.1.</p> <p><b>Major Nonconformance:</b></p> <p><b>Minor Nonconformance:</b></p> <p><b>Observation:</b></p> <p><b>Opportunity for Improvement:</b></p> <p><b>Noteworthy Practice:</b></p>			
<b>EXISTING PROCEDURES AND DOCUMENTATION (LIST):</b> OPM 1.10.1, 14.1, SBMS Environmental Subject Area, 2007 Record of Decision & Management Review.			
<b>COMMENTS:</b> None			
<b>Suggested lines of inquiry in future assessments:</b>			
<b>EVALUATION:</b>			
X	MEETS REQUIREMENT	MINOR NONCONFORMANCE	MAJOR NONCONFORMANCE
<b>OPTIONAL AUDITOR QUESTIONS:</b>			
<p>Has the top management performed a documented review of the EMS on a periodic basis?</p> <p>Does the review address the system's continued suitability, the system's adequacy, the system's effectiveness, the system's possible need to change its policy, the system's possible need to change its objectives and other elements of the EMS in light of the audit results, continual improvement, etc., the system audit as required in 4.5.4, and the Nonconformances and Corrective and Preventive Action?</p> <p>Is there a record of decision which outlines actions for the coming year?</p>			

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Organization: C-AD/SMD

Date: 2/14/08

Lead Auditor: R. Savage / J. Montalto

**EMPLOYEE/CONTRACTOR QUESTIONS (Implementation/Activity based review)**

- Policy: How do you know your organization cares about the environment? (e.g., how do they demonstrate?)
- How do you know what the organization's environmental policy is?
- What are the key commitments in the environmental policy and what do they mean to you? How do they relate to your job?
- How could your job impact the environment?
- What kind of general and on-the-job training have you received on the environmental hazards/impacts associated with your work?
- How would you avoid a negative impact to the environment (i.e., what controls are in place to prevent)?
- What are the consequences of not following controls (negative) and what are the benefits of improved personal performance?
- How can you contribute to your unit's environmental programs (e.g., recycling?)
- Does your organization have any specific environmental goals? What is your role in achieving them?
- What would you do in case of an environmental emergency (e.g. spill)
- How do you find out about new requirements?
- What are your roles, responsibilities and authorities with regard to the environment?
- What kinds of environmental records are you responsible for managing?

**SENIOR MANAGEMENT/OPERATIONS MANAGER QUESTIONS**

- Policy: What are the key commitments in the environmental policy and what do they mean to you?
- What activities in your organization have the potential to impact the environment, and what are the potential impacts?
- What do you see as the consequences of poor environmental management?
- What do you see as the benefits of a strong, effective EMS and good environmental management?
- What are the organization's highest level goals related to the environment?
- What do you see as your role in the EMS?
- How do you ensure that enough resources are provided for the EMS to be successful?
- How do you communicate your environmental stewardship expectations to managers, employees? The public?
- At the annual EMS Management review, what information do you need to determine the adequacy and effectiveness of the EMS?
- Based on what you have seen to date of the EMS, what do you see as strengths? Areas for improvement?

**APPLICATION OF EMS TO COMPLIANCE ASSURANCE**

Select a set of compliance areas (e.g., air compliance, waste management), including some that have been a problem and some that have not, and some that are managed at the corporate level and some that are managed by the line.

- Are applicable legal requirements understood?
- Have goals been established to address problems?
- Are practices consistent with documented operational control procedures?
- Is monitoring of performance conducted?
- Are adequate measures taken to prevent recurrence of noncompliance?

**OTHER DOCUMENTS REVIEWED (NOT ALREADY LISTED ABOVE):**

**PERSONNEL INTERVIEWED (LIST NAME, TITLE , ORGANIZATION):**

Brookhaven National Laboratory  
ISO 14001 EMS Assessment

Organization: C-AD/SMD

Date: 2/14/08

Lead Auditor: R. Savage / J. Montalto

**CATEGORIZATION OF FINDINGS:**

- **Nonconformance:** Objective evidence exists that a requirement has not been addressed (intent), a practice differs from the defined system (implementation) or the system is not effective (effectiveness). numbering system: ISO 14001 clause - date of audit (month year) – sequential number. For example, the first nonconformance with clause 4.3.2, identified on 8/22/01 would be numbered 4.3.2-0801-01.
  - **Major nonconformance:** A system element is missing, or there is evidence that a system element is not implemented or not effective. Multiple minor nonconformances may be grouped together as a major if they are all examples of the same type of nonconformance.
  - **Minor nonconformance:** A single observed discrepancy in the system, with evidence that the overall system is defined, implemented, and effective.
- **Observation:** Not a nonconformance, but something that could lead to a nonconformance if allowed to continue uncorrected, or an existing condition without adequate supporting evidence to verify that it constitutes a nonconformance.
- **Opportunity for Improvement/Recommendation:** A suggested means of accomplishing an activity, fulfilling the intent of a procedural requirement, or improving the efficiency or effectiveness of the EMS. It is not a nonconformance or observation. A recommendation involves an element that meets the minimum ISO 14001 requirements, but could bring that element of the EMS to the next level, as part of continual improvement.
- **Noteworthy Practice:** Performance that exceeds expectations in terms of efficiency and/or effectiveness and provides a model for others to follow. A noteworthy practice is a positive condition or strength.

The suggested next step is to review the report, prioritize the findings, and develop a strategy for addressing them, and track them in a system. Follow up on Nonconformances and Observations that have not already been adequately addressed is expected. **Note that corrective action shall be applied to the identified concern/issue. Preventive action shall be extend to all areas where similar nonconformances may exist and as applicable.**

Tracking high priority Opportunities for Improvement/Recommendations to closure is also suggested.

ISO 14001 Clause	Major Non-conformance	Minor Non-conformance	Observation or OFI	Meets Requirement	Noteworthy Practice
General Requirements				X	
Environmental Policy			X	X	
Environmental Aspects (Hazards)				X	
Legal & Other Requirements				X	
Objectives, Targets & Programmes			X	X	
Resources, Roles, Responsibility & Authority				X	
Competence, Training & Awareness				X	
Communication				X	
Documentation				X	
Control of Documents				X	
Operational Control				X	
Emergency Preparedness/Response				X	
Monitoring & Measurement				X	
Evaluation of Compliance				X	
Nonconformity, Preventive and Corrective Action				X	
Control of Records				X	
Internal (EMS) Audit				X	
Management Review				X	
<b>TOTAL</b>			<b>2</b>	<b>18</b>	

OFI = Opportunity for Improvement



## **OHSAS 18001**

### **Occupational Health and Safety Assessment Series**

#### **Internal Audit Line Organization Checklists**

### **Controlled Forms**

Preparation Date: 01/30/08

Status: Final Rev 0

**HP80.7**



Registered to  
OHSAS 18001

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>	Auditor: <b>R. Savage/ J. Montalto</b>			
Element: <b>4.1</b>	Title: <b>General Requirements</b>					
OHSAS 18001 STANDARD: <i>The organization shall establish, document, implement, maintain and continually improve an OSH management system in accordance with the requirements of this OHSAS Standard and determine how it will fulfill these requirements. The organization shall define and document the scope of its OH&amp;S management system.</i>		Major Non-Compliance	Minor Non-Compliance	OFl	Meets Requirement	
<b>1. Does the organization rely on any documentation other than the Site OH&amp;S Program? If so, is it compatible with site program, up-to-date, approved, etc?</b> <u> X </u> Web site <u> X </u> OSH or OHSAS Program Description Observed State:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>2. What personnel are assigned by the organization to implement the program within their operations?</b> OSH Management Representative assigned? <u> Yes </u>  Staffing for ESH funded by the organization: <u> Yes </u> FTE  Other ESH staff assigned to organization: RCD <u> X </u> EWMSD <u> X </u> SHSD <u> X </u> other _____  Other evidence:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>3. What evidence is there the program was maintained and continually improvement of their implementation of the OSH management system within the last year? Such as:</b> <u> N </u> Risk Assessments updated on schedule <u> Y </u> Objectives developed and implemented <u> Y </u> Program modified after negative events <u> Y </u> Worker Feedback implemented Observed State: 2007 Risk Assessment report not issued presently.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PROCEDURES AND DOCUMENTATION REVIEWED:						
OPM 1.10.4						
COMMENTS:						
OPM 1.10.4 identifies OH&S Management System Program in accordance with OHSAS 18001 Subject Area requirements.						
FINDING:						

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>	Auditor: <b>R. Savage/ J. Montalto</b>				
Element: <b>4.2</b>	Title: <b>OH&amp;S Policy</b>						
<p>OHSAS 18001 STANDARD: <i>Top management shall define and authorize the organization's OH&amp;S policy and ensure that within the defined scope of its OH&amp;S management system it:</i></p> <p>a) is appropriate to the nature and scale of the organization's OSH risks;  b) includes a commitment to prevent injury and ill health and continual improvement in OH&amp;S management and OH&amp;S performance;  c) include a commitment to at least comply with current applicable legal requirements and with other requirements to which the organization subscribes that relate to its OH&amp;S hazards;  d) provides the framework for setting and reviewing OH&amp;S objectives;  e) is documented, implemented and maintained;  f) is communicated to all persons working under the control of the organization with the intent that they are made aware of their individual OSH obligations;  g) is available to interested parties; and  g) is reviewed periodically to ensure that it remains relevant and appropriate to the organization.</p>				Major Non-Compliance	Minor Non-Compliance	OFI	Meets Requirement
<p>1. <b>Is the ESSH Policy posted in prominent locations within the organization?</b> <u>Yes</u></p> <p><i>Does the organization maintain a list of the locations where "official" copies are posted? [If not, this is an OFI unless another mechanism is used.]</i></p> <p><i>Examine at least three locations: Were any "un-controlled" copies of policy voluntarily posted by employees? If so, were they up-to-date?. Were "controlled" copies up-to-date?</i></p> <p>Location 1: <u>C-AD Lobby</u> <u>Y</u> Policy up-to-date <u>N</u> Finding:  Location 2: <u>SMD Lobby</u> <u>Y</u> Policy up-to-date <u>N</u> Finding:  Location 3: <u>C-AD Chair Office</u> <u>Y</u> Policy up-to-date <u>N</u> Finding:</p>				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>2. <b>What mechanisms has the organization used to communicate to all persons [working under the control of the organization] their individual OSH obligations?</b> <u>Scheduled forums &amp; awareness initiatives.</u></p> <p><i>How is the ESSH policy made available to interested parties?</i> <u>C-AD web site, SBMS web site.</u></p> <p>Observed State: <u>Employees will receive training prior to the 2008 audit.</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>3. <b>Is there demonstrable knowledge of OSH policy by persons working in the organization?</b>  Question at least persons: <i>Were they knowledgeable of the location of the Policy? Where they comfortable recalling the major components of the Policy? Are they able to relate the Policy to a context that is meaningful to them? Did they offer any potential improvements to the Policy?</i></p> <p>Worker 1: <u>All Employees Require</u> <u>Y</u> Policy up-to-date <u>Knowledgeable</u>  Worker 2: <u>Awareness Training</u> <u>Y</u> Policy up-to-date <u>Knowledgeable</u>  Worker 3: <u></u> <u>Y</u> Policy up-to-date <u>Knowledgeable</u></p> <p>Observed State: <u>Additional reminder training required prior to scheduled OHSAS 2008 Audit</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>4. <b>Does the organization have a mechanism in place to convey the essence of the Policy to contractors, guest, visitors, etc., as applicable? If no, is one needed?</b>  Observed State: <u>Yes, posted on C-ad web page &amp; identified in OPMs.</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>5. <b>Does the organization have contacts with other interested parties to which the policy should be made available? Does the organization have a mechanism in place to convey the Policy?</b>  Observed State: <u>C-AD / SMD personnel support BNL mission.</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PROCEDURES AND DOCUMENTATION REVIEWED:							



OHSAS 18001 OSH Internal Audit  
Audit Year: 2008

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COMMENTS:

FINDING:

Organization: C-AD / SMD		Date: 2/14/08	Auditor: R. Savage/ J. Montalto		
Element: <b>4.3.1</b>	Title: <b>Planning For Hazard Identification, Risk Assessment and Risk Control</b>				
<p>OHSAS 18001 STANDARD: <i>The organization shall establish, implement and maintain procedure(s) for the ongoing identification of hazards, risk assessments, and determination of necessary control measures. These procedure(s) for hazard identification and risk assessment shall take into account...[omitted, see item 1]</i></p> <p><i>The organization's methodology for hazard identification and risk assessment shall: a.) be defined with respect to its scope, nature and timing to ensure it is proactive rather than reactive; b.) provide for the identification, prioritization and documentation of risks and the implementation of controls, as appropriate.</i></p> <p><i>For the management of change, the organization shall identify the OH&amp;S hazards and OH&amp;S risks associated with changes in the organization, the OH&amp;S management system, or its activities, prior to introduction of such changes.</i></p> <p><i>The organization shall ensure the results of these assessments are considered when determining controls.</i></p> <p><i>When determining controls, or considering changes to existing controls, consideration shall be given to reducing the risks according to the following hierarchy:... [omitted, see item 4] .</i></p> <p><i>The organization shall document and keep the results of the identification of hazards, risk assessments, and determined controls up-to-date.</i></p> <p><i>The organization shall ensure that the OH&amp;S risks and determined controls are taken into account when establishing, implementing and maintaining its OH&amp;S management system.</i></p>		Major Non-Compliance	Minor Non-Compliance	OFI	Meets Requirement
<p>1. <b>Does the organization use a methodology of documenting risk assessment and control other than that described in SBMS OHSAS 18001 Program ?</b> ___ No <u> X </u> Yes. <b>If Yes, does the system take into account:</b> a.) routine and non-routine activities; b.) activities of all personnel having access to the workplace (including contractors and visitors);c.) human behavior, capabilities and other human factors ;d.) identified hazards origination outside the workplace capable of adversely affecting the health and safety of persons under the control of the organization within the workplace; e.) hazards created in the vicinity of the workplace by work-related activities under the control of the organization; f.) infrastructure, equipment and materials at the workplace, whether provided by the organization or others; g.) changes or proposed changes in the organization, its activities or materials; h.) modifications to the OH&amp;S management system ,including temporary changes, and their impacts on operations, processes, and activities; i.) any legal obligations relating to risk assessments and implementation of necessary controls; j.) the design of work areas, processes, installations, machinery/equipment, operating procedures and work organization, including their adoption to human capabilities.</p> <p>Observed State:</p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>2. <b>Are the line organizations Risk Assessments up-to-date? Do they cover current full scope of operations; routine and non routine activities; all personnel and all facilities?</b></p> <p>Observed State: <u>Risk Assessments for 2008 are on schedule &amp; will be completed as required.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>3. <b>Have changes occurred in the organization's facilities or operations that necessitated a change in the risk assessments? Were they up-to-dated to cover the scope of the change?</b></p> <p>Observed State: <u>No major changes to organization that affects risk assessments.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>4. <b>Did the organization observe the hierarchy of controls (i.e.: a.) elimination; b.) substitution; c.) engineering controls; d.) signage/warning and/or administrative controls; e.) personal protective equipment) when determining controls within risks assessments and other planning documents?</b></p> <p>Observed State: <u>All risk assessments take into account operating OPMs, work controls, admin &amp; engineering controls when preparing these documents.</u></p> <ul style="list-style-type: none"> <li>▪ Document reviewed:</li> <li>▪ Document reviewed:</li> <li>▪ Document reviewed:</li> </ul>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<p>5. <i>Are operational controls in place and working as specified?</i> Observed State: <u>Yes, in accordance with OPM requirements.</u></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>6. <i>What is the mechanism to inform contractors/interested parties of relevant operational controls applying to them?</i> Observed State: <u>Work Controls Program</u></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>PROCEDURES AND DOCUMENTATION REVIEWED: OPM 2.8</p>				
<p>COMMENTS:</p>				
<p>FINDING:</p>				

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>	Auditor: <b>R. Savage/ J. Montalto</b>		
Element: <b>4.3.2</b>	Title: <b>Legal and other Requirements</b>				
<p>OHSAS 18001 STANDARD: <i>The organization shall establish, implement and maintain a procedure[s] for identifying and accessing the legal and other OSH requirements that are applicable to it. The organization shall ensure that these applicable legal requirements and other requirements to which the organization subscribes are taken into account in establishing, implementing and maintaining its OH&amp;S management system. The organization shall keep this information up-to-date. The organization shall communicate relevant information on legal and other requirements to persons working under its control, and other relevant interested parties.</i></p>		Major Non-Compliance	Minor Non-Compliance	OPI	Meets Requirement
<p>1. <b>Is someone (or more than one) within the organization designated to keep current on requirements?</b> What is the method: <input checked="" type="checkbox"/> SBMS Subscription <input checked="" type="checkbox"/> Other: <u>OSHA Publications Web Site</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>2. <b>How are requirements communicated to all interested parties?</b> Observed State: <u>Via C-AD Web Site, SBMS Subscription Service, Forums, Newsletters, E-mails.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>3. <b>Does the line organization serve as the SBMS SME, BNL Authority Having Jurisdiction, or otherwise serve as the BNL Subject Matter Expert for any OH&amp;S hazard?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes: <b>If yes, what procedures have been established for identifying and accessing the legal and other OSH requirements that are applicable to BNL.</b> Observed State: <u>See Below</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>4. <b>If yes to 1, Are the procedures being implemented at a sufficient interval to ensure the legal and other OSH requirements are up-to-date?</b> . <u>Yes, 3 year review.</u> Observed State: <u>Unless a safety issue is identified where-as OPM updated ASAP.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>5. <b>If yes to #1: What are the mechanism to communicate relevant information on legal and other requirements to persons working under its control, and other relevant interested parties?</b> Observed State: <u>See Above.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>PROCEDURES AND DOCUMENTATION REVIEWED:</p> <p>OHSAS SBMS Subject Area, OPMs 1.10.4, 1.5 series, 1.12, 2.28, 8.17.2, 13.6.1, 13.6.1.a, 13.7.1, 14.30, OSHA Web Site.</p>					
<p>COMMENTS:</p>					
<p>FINDING:</p>					

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>		Auditor: <b>R. Savage/ J. Montalto</b>			
Element: <b>4.3.3</b>	Title: <b>Objectives and program(s)</b>						
<p>OHSAS 18001 STANDARD: <i>The organization shall establish, implement and maintain documented OH&amp;S objectives, at relevant functions and levels within the organization. Objectives shall be measurable, where practicable, and consistent with the OH&amp;S policy, including the commitments to the prevention of injury and ill health, to compliance and other requirements to which the organization subscribes, and to continual improvement.</i></p> <p><i>When establishing and reviewing its objectives, an organization shall take into account the legal requirements and other requirements to which the organization subscribes, and its OSH risks. It shall also consider its technological options, its financial, operational and business requirements, and the views of interested parties.</i></p> <p><i>The organization shall establish, implement, and maintain a program[s] for achieving its objectives. Program[s] shall include at a minimum: a.) designation of responsibilities and authority for achieving objectives at relevant functions and levels of organizations; and b.) the means and time frame by which the objectives are to be achieved.</i></p> <p><i>The program[s] shall be reviewed at regular and planned intervals and adjusted as necessary, to ensure that the objectives are achieved.</i></p>				Major Non-Compliance	Minor Non-Compliance	OFI	Meets Requirement
<p>1. <b>Are organization level Objectives established and at what frequency?</b> <u>Yearly</u></p> <p><i>Is there a documented frequency to review status of objectives? (other than SBMS)</i> Observed State: <u>Program defined in OPM procedures.</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>2. <b>Are the Objectives measurable, where practicable? Are they consistent with the site level objectives, OH&amp;S policy, including the commitments to the prevention of injury and ill health, to compliance and other requirements to which the organization subscribes, and to continual improvement?</b></p> <p>Observed State: <u>Yearly objectives are reviewed for practicability and revised if required.</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>3. <b>Has the organization implemented a program[s] for achieving its objectives? Does it include a.) designation of responsibilities and authority for achieving objectives; and b.) means and time frame by which the objectives are to be achieved.</b></p> <p>Observed State: <u>Yes, OPMs listed below.</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>4. <b>How are objectives made known to the employee/guests that are supposed to achieve them?</b></p> <p>Observed State: <u>Yes, objectives posted on C-AD web page.</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>PROCEDURES AND DOCUMENTATION REVIEWED:</p> <p>OPM 1.10.4, 14.30, 1.10, 13.10.1, Self Assessment Plan.</p>							
<p>COMMENTS:</p>							
<p>FINDING:</p>							

Organization: C-AD / SMD		Date: 2/14/08	Auditor: R. Savage/ J. Montalto		
Element: <b>4.4.1</b>	Title: <b>Resources, roles, responsibility, accountability and authority</b>				
<p>OHSAS 18001 STANDARD: <i>Top management shall take ultimate responsibility for OH&amp;S and the OH&amp;S management system. Top management shall demonstrate its commitment by:</i></p> <p><i>a.) ensuring the availability of resources essential to establish, implement, maintain and improve the OH&amp;S management system,</i></p> <p><i>b.) defining roles, allocating responsibilities and accountabilities, and delegating authorities, to facilitate effective OH&amp;S management; roles, responsibilities, accountabilities, and authorities shall be documented and communicated.</i></p> <p><i>The organization shall appoint a member[s] of top management with specific responsibility for OH&amp;S, irrespective of other responsibilities, and with defined roles and authority for: a.) ensuring that the OH&amp;S management system is established, implemented and maintained in accordance with this OHSAS standard; b.) ensuring that reports on the performance of the OH&amp;S management system are presented to top management for review and used as a basis for improvement of the OH&amp;S management system.</i></p> <p><i>The identity of the top management appointee shall be made available to all persons working under the control of the organizations.</i></p> <p><i>All those with management responsibility shall demonstrate their commitment to the continual improvement of the organization.</i></p> <p><i>The organization shall ensure that persons in the workplace take responsibility for aspects of OH&amp;S over which they have control, including adherence to the organization's applicable OH&amp;S requirements.</i></p>		Major Non-Compliance	Minor Non-Compliance	OFI	Meets Requirement
<p>1. <b>Top management has provided resources essential to establish, implement, maintain and improve the OH&amp;S management system within the organization?</b> Observed State: <u>Yes, OH&amp;S structure properly addressed and has management support.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>2. <b>Top management has defined roles, allocating responsibilities and accountabilities, and delegating authorities, to facilitate effective OH&amp;S management; roles, responsibilities, accountabilities, and authorities shall be documented and communicated.</b> Observed State: <u>Yes, OPM 1.10 &amp; 1.10.4.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>3. <b>A member of top management with specific responsibility for OH&amp;S is appointed? That role has defined roles and authority for the OH&amp;S management system.</b> Observed State: <u>Yes, ESSH Department Chair.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>4. <b>The top management representative has presented reports to top management for review and used as a basis for improvement of the OH&amp;S management system. How frequently and by what format are the reports made?</b> Observed State: <u>Reports identified &amp; posted on C-AD web page.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>5. <b>The identity of the top management appointee is available to all persons working under the control of the organization.</b> Observed State: <u>Yes</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>6. <b>Describe how those with management responsibility have demonstrated their commitment to the continual improvement of the organization.</b> Observed State: <u>Bi weekly meetings that provide staff with priorities that emphasize continual improvement.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>7. <b>Describe instances in which persons in the workplace have taken responsibility for aspects of OH&amp;S over which they have control, including adherence to the organization's applicable OH&amp;S requirements.</b> Observed State: <u>ESHQ team involvement during management review processes and performing daily OH&amp;S tasks.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

PROCEDURES AND DOCUMENTATION REVIEWED:

COMMENTS:

FINDING:

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>	Auditor: <b>R. Savage/ J. Montalto</b>		
Element: <b>4.4.2</b>	Title: <b>Competence, training and awareness</b>				
<p><b>OHSAS 18001 STANDARD:</b> <i>The organization shall ensure that any person[s] under its control performing tasks that can impact on OH&amp;S is [are] competent on the basis of appropriate education, training or experience, and shall retain associated records.</i></p> <p><i>The organization shall identify training needs associated with its OH&amp;S risks and its OH&amp;S management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records.</i></p> <p><i>The organization shall establish, implement, and maintain procedure[s] to make persons working under its control aware of: a.) the OSH consequences, actual or potential, of their work activities and the OSH benefits of improved personal performance; b.) their roles and responsibilities in importance in achieving conformity to the OSH policy and procedures and to the requirements of the OSH management system, including emergency preparedness and response requirements (see 4.4.7); c.) the potential consequences of departure from specified operating procedures.</i></p> <p><i>Training procedures shall take into account differing levels of: a.) responsibility, ability, language skills and literacy; and b.) risk.</i></p>		Major Non-Compliance	Minor Non-Compliance	OPI	Meets Requirement
<p>1. <b>How does the organization ensure that persons are competent to perform tasks that impact OH&amp;S?</b> [appropriate education, training or experience] Where are these records retained? Observed State: <u>Training analysis are performed and training is provided to achieve assigned tasks.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>2. <b>How does the organization identify training needs associated with its OH&amp;S risks and its OH&amp;S management system?</b> Observed State: <u>Involvement of management, supervisor and employee to determine training needs required to perform assigned tasks.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>3. <b>How does the organization provide training or take other action to meet OH&amp;S risks and its OH&amp;S management system training needs, evaluate the effectiveness of the training or action taken, and retain associated records?</b> Observed State: <u>Training needs are achieved by written, hands on, and work planning tasks. Records are maintained.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>4. <b>How has the organization implemented procedure[s] to make persons working under its control aware of: a.) the OSH consequences, actual or potential, of their work activities and the OSH benefits of improved personal performance; b.) their roles and responsibilities in importance in achieving conformity to the OSH policy and procedures and to the requirements of the OSH management system, including emergency preparedness and response requirement; c.) the potential consequences of departure from specified operating procedures.</b> Observed State: <u>OPMs clearly describe policies and work tasks.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>5. <b>How do organization level training procedures take into account differing levels of: a.) responsibility, ability, language skills and literacy; and b.) risk?</b> Observed State: <u>Depends on employees JTAs, education, and experience.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PROCEDURES AND DOCUMENTATION REVIEWED:					
COMMENTS:					
FINDING:					

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>	Auditor: <b>R. Savage/ J. Montalto</b>		
Element: <b>4.4.3</b>	Title: <b>Communication, participation and consultation</b>				
<p>OHSAS 18001 STANDARD: 4.4.3.1 <i>Communication: With regards to its OH&amp;S hazards and OH&amp;S management system, the organization shall establish, implement, and maintain procedure[s] for: a) internal communication among the various levels and functions of the organization; b.) communication with contractors and other visitors to the workplace; c.) receiving, documenting, and responding to relevant communication from external interested parties.</i></p> <p>4.4.3.2 <i>Participation and consultation: The organization shall establish, implement, and maintain a procedure[s] for: a.) The participation of workers by their: appropriate involvement in hazard identification, risk assessment and determining controls; appropriate involvement in incident investigations; involvement in the development and review of OH&amp;S policies and objectives; consultation where there are any changes that affect their OH&amp;S; representation on OH&amp;S matters. Workers shall be informed about their participation arrangements, including who is their representative[s] on OH&amp;S matters; b.) Consultation with contractors where there are changes that affect their OH&amp;S. The organization shall ensure that, when appropriate, relevant external interested parties are consulted about pertinent OH&amp;S matters.</i></p>		Major Non-Compliance	Minor Non-Compliance	OHI	Meets Requirement
<p>1. <b>Does the organization implement a procedure[s] for internal communication among the various levels and functions of the organization, communication with contractors and other visitors to the workplace; receiving and responding to relevant communication from external interested parties?</b> Observed State: <u>WOSH Committee (OPM) developed to address internal/external OSHA concerns within C-AD/SMD facility.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>2. <b>Does the organization implement a procedure[s] for participation of workers in hazard identification, risk assessment and determining controls; incident investigations; OH&amp;S policies and objectives; changes that affect their OH&amp;S?</b> Observed State: <u>OPMs developed around (focused) on complying with 10CFR851 requirements for worker participation.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>3. <b>Does the organization implement a procedure[s] for consultation with contractors where there are changes that affect their OH&amp;S?</b> Observed State: <u>Yes, work controls program OPM 2.8, 2.29.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>4. <b>Does the organization ensure that, when appropriate, relevant external interested parties are consulted about pertinent OH&amp;S matters?</b> Observed State: <u>Program in place per SBMS subject Area and OPMs.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>PROCEDURES AND DOCUMENTATION REVIEWED:</p> <p>OPMs 1.10.3, 1.10.4, 2.12, 9.8.1, 9.4.2, 2.28, 2.29, SBMS Subject Area, and SMD OPM 2.12.</p>					
<p>COMMENTS:</p>					
<p>FINDING:</p>					

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>	Auditor: <b>R. Savage/ J. Montalto</b>		
Element: <b>4.4.4</b>	Title: <b>Documentation</b>				
OHSAS 18001 STANDARD: <i>The OH&amp;S management system documentation shall include: a.) the OH&amp;S Policy and objectives; b.) description of the scope of the OH&amp;S management system; c.) description of the main elements of the OH&amp;S management system and their interactions, and reference to related documents; d.) documents, including records, required by this OHSAS Standard; and e.) documents, including records, determined by the organization to be necessary to ensure the effective planning, operation and control of processes that relate to the management of its OH&amp;S risks.</i>		Major Non-Compliance	Minor Non-Compliance	OPI	Meets Requirement
1. <b>Does the organization maintain OH&amp;S management system documentation for the following? Record location of the document/record: <u>Yes</u></b>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> a. <b>Description of the <u>scope</u> of the OH&amp;S management system for its organization</b> ( <input checked="" type="checkbox"/> or does it fit within the SBMS scope) ( <b>BOTH</b> )		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> b. <b>Description of the main elements of the OH&amp;S management system and their interactions, and reference to related documents</b> ( <input checked="" type="checkbox"/> or does it fit with the SBMS Subject Area) ( <b>BOTH</b> )		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. <b>Documents &amp; records required by this OHSAS 18001 Standard, such as</b>					
<input checked="" type="checkbox"/> <b>Hazard List</b>					
<input checked="" type="checkbox"/> <b>Risk Assessments</b>					
<input checked="" type="checkbox"/> <b>Objectives</b>					
<input checked="" type="checkbox"/> <b>Management Reviews</b>					
					<u>Meets Requirements</u>
d. <b>Documents &amp; records necessary to ensure the effective planning, operation and control of processes that relate to the management of its OH&amp;S risk</b>					
<input checked="" type="checkbox"/> <b>Controlled Document Postings</b>					
					<u>Posted on C-AD / SMD Web Pages.</u>
<input checked="" type="checkbox"/> <b>Record Storage location</b> (or does it use Foremost only)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> <b>Monitoring Records</b>					
PROCEDURES AND DOCUMENTATION REVIEWED:					
OPM 1.2, 1.4 series, 1.10.4, 13.4.1, R2A2, JRA/FRA Listing.					
COMMENTS:					
FINDING:					

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>	Auditor: <b>R. Savage/ J. Montalto</b>			
Element: <b>4.4.5</b>	Title: <b>Control of Documents</b>					
<p>OHSAS 18001 STANDARD: <i>Documents required by the OH&amp;S management system and by this OHSAS Standard shall be controlled. Records are a special type of document and shall be controlled in accordance with the requirements given in 4.5.4.</i></p> <p><i>The organization shall establish, implement and maintain procedure[s] to: a) approve documents for adequacy prior to use; b) review and update as necessary and re-approve documents; c) ensure that changes and the current revisions status of documents are identified; d.) ensure that relevant versions of applicable documents are available at points of use; e.) ensure that documents remain legible and readily identifiable; f.) ensure that documents of external origin determined by the organization to be necessary for the planning and operation of the OH&amp;S management system are identified and their distribution controlled, and g.) prevent the unintended use of obsolete documents and apply suitable identification to them if they are retained for any purpose.</i></p>		Major Non-Compliance	Minor Non-Compliance	OPI	Meets Requirement	
<p>1. <b>Does the organization approve documents for adequacy prior to use and review, update as necessary and re-approve document?.</b> Observed State: <u>3 year review cycle. OPM chapters found under review are tracked until completed.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>2. <b>Does the organization ensure that changes and the current revisions status of documents are identified? (example: track changes, margin bars, italics, or part of the document that reviews changes.)</b> Observed State: <u>OPMs reviewed by responsible parties prior to issuance.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>3. <b>Does the organization ensure that relevant versions of applicable documents are available at points of use?</b> Observed State: <u>All OPMs on web site and (2) hard copies maintained in QA department and Operations Control Room</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>4. <b>How does the organization ensure that documents remain legible and readily identifiable?</b> Observed State: <u>Reviewed by administrative staff to ensure OPMs are maintained properly.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>5. <b>Are OH&amp;S documents external origin identified and their distribution controlled?</b> Observed State: <u>Yes, see item 3 above.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>6. <b>How does the organization prevent the unintended use of obsolete documents and apply suitable identification to them if they are retained for any purpose (ie. Stamped "obsolete" or other suitable wording)?</b> Observed State: <u>Stamped on cover of OPMs. Users must ensure OPMs in use agree with Web Site Directory.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
PROCEDURES AND DOCUMENTATION REVIEWED:						
OPM 1.4 series, 1.2, 10.1, 13.4.1, JRA / FRA listing.						
COMMENTS:						
FINDING:						

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>	Auditor: <b>R. Savage/ J. Montalto</b>			
Element: <b>4.4.6</b>	Title: <b>Operational Control</b>					
<p>OHSAS 18001 STANDARD: The organization shall determine those operations and activities that are associated with identified hazard(s) where the implementation of controls is necessary to manage the OH&amp;S risks. This shall include the management of change.</p> <p>For those operations and activities, the organization shall implement and maintain: a) operational controls, as applicable to the organization and its activities; the organization shall integrate those operational controls into its overall OH&amp;S management system; b.) controls related to purchased goods, equipment and services; c.) controls related to contractors and other visitors to the workplace; d.) documented procedures, to cover situations where the absence could lead to deviations from the OH&amp;S policy and the objectives; e.) stipulated operating criteria where their absence could lead to deviations from the OSH policy and the objectives.</p>		Major Non-Compliance	Minor Non-Compliance	OPI	Meets Requirement	
<p>1. <b>Does the organization have program[s] to implement:</b></p> <p><input checked="" type="checkbox"/> a) <b>operational controls, as applicable to the organization and its activities; the organization shall integrate those operational controls into its overall OH&amp;S management system; Yes per requirements.</b></p> <p><input checked="" type="checkbox"/> b.) <b>controls related to purchased goods, equipment and services;</b> <u>Purchase orders are reviewed by QA prior to issuance.</u></p> <p><input checked="" type="checkbox"/> c.) <b>controls related to contractors and other visitors to the workplace;</b> <u>In accordance with procedure.</u></p> <p><input checked="" type="checkbox"/> d.) <b>procedures to cover situations where the absence could lead to deviations from the OH&amp;S policy and the objectives; Yes, as required.</b></p> <p><input checked="" type="checkbox"/> e.) <b>stipulated operating criteria where their absence could lead to deviations from the OSH policy and the objectives.</b></p> <p>Observed State: <u>Seven minor OSHA concerns were observed (see attachment) within ERL. Issues identified and will be tracked in ATS until corrected.</u></p>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>2. <b>How do organization OH&amp;S programs include the management of change?</b> Observed State: <u>In accordance with SBMS Subject Area requirements.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>3. <b>Are relevant procedures and requirements communicated to the appropriate suppliers and contractors (are operational controls in place and working as expected)?</b> Observed State: <u>Yes, via work controls subject area requirements.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>PROCEDURES AND DOCUMENTATION REVIEWED:</p> <p>SBMS work controls subject area, OPM 2, 8 &amp; 13 series, Risk Analysis Records.</p>						
<p>COMMENTS:</p>						
<p>FINDING: <u>See Above.</u></p>						

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>	Auditor: <b>R. Savage/ J. Montalto</b>		
Element: <b>4.4.7</b>	Title: <b>Emergency preparedness and response</b>				
<p>OHSAS 18001 STANDARD: <i>The organization shall establish, implement and maintain procedure[s]: a.) to identify the potential for emergency situations, b.) to respond to such emergency situations. The organization shall respond to actual emergency situations and prevent or mitigate adverse OH&amp;S consequences. In planning its emergency response the organization shall take account the needs of relevant interested parties, e.g. emergency services and neighbors. The organization shall also periodically test its procedure(s) to respond to emergency situations, where practicable, involving relevant interested parties as appropriate. The organization shall periodically review and, where necessary, revise its emergency preparedness and response procedure(s), in particular after periodic testing and after the occurrence of emergency situations.</i></p>		Major Non-Compliance	Minor Non-Compliance	OFI	Meets Requirement
<p>1. <b>Has the organization established, implemented and maintained procedures (more than Emergency Services /division and SBMS) to identify the potential for emergency situations and to respond to such emergency situations.</b> Observed State: <u>Yes, as required by OPM 3.0.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>2. <b>Did the organization conduct any documented test of its response to emergency situations?</b> <b>Date/Title:</b> Observed State: <u>Yes, two emergency drills in C-AD (6/07 &amp; 10/07) &amp; one drill in SMD (8/07).</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>3. <b>Did the exercises involve relevant interested parties as appropriate?</b>  <input checked="" type="checkbox"/> Emergency Services  <input checked="" type="checkbox"/> Safeguards and Security  <input type="checkbox"/> Other:  Observed State: <u>Facility Emergency Personnel.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>PROCEDURES AND DOCUMENTATION REVIEWED:</p> <p>OPM 3.0, 10.1, SBMS Subject Area.</p>					
<p>COMMENTS:</p>					
<p>FINDING:</p>					

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>		Auditor: <b>R. Savage/ J. Montalto</b>			
Element: <b>4.5.1</b>	Title: <b>Performance measurement and monitoring</b>						
<p>OHSAS 18001 STANDARD: <i>The organization shall establish, implement, and maintain a procedure(s) to monitor and measure OSH performance on a regular basis. These procedures shall provide for: a.) both qualitative and quantitative measures, appropriate to the needs of the organization; b.) monitoring of the extent to which the organization's OSH objectives are met; c.) monitoring the effectiveness of controls (for health as well as safety); d.) proactive measures of performance that monitor compliance with the OSH programs, controls, and operational criteria; e.) reactive measures of performance to monitor ill health, incidents (including accidents, near-misses, etc.) and other historical evidence of deficient OSH performance; f.) recording of data and results of monitoring and measurement sufficient to facilitate subsequent corrective and preventive action analysis.</i></p> <p><i>If equipment is required to monitor or measure performance, the organization shall establish and maintain procedures for the calibration and maintenance of such equipment, as appropriate. Records of calibration and maintenance activities and results shall be retained.</i></p>				Major Non-Compliance	Minor Non-Compliance	OFI	Meets Requirement
<p>1. <b>Has the organization implemented procedure(s) to monitor and measure OSH performance on a regular basis (both qualitative and quantitative measures sufficient to facilitate subsequent corrective and preventive action analysis) for:</b></p> <p><input checked="" type="checkbox"/> <b>OSH objectives</b></p> <p><input checked="" type="checkbox"/> <b>Effectiveness of controls</b></p> <p><input checked="" type="checkbox"/> <b>Compliance with the OSH programs, controls, and operational criteria</b></p> <p><input checked="" type="checkbox"/> <b>Monitor ill health, incidents (including accidents, near-misses, etc.) and other historical evidence of deficient OSH performance</b></p> <p>Observed State: <u>OPMs and SBMS Subject Area addresses M&amp;TE Program.</u></p>				□	□	□	☒
<p>2. <b>Is equipment required to monitor or measure performance covered by procedures for the calibration and maintenance?</b></p> <p>Observed State: <u>9 leak detectors found out of calibration within vacuum group. All detectors were immediately taken out of service and calibrated. No O.O.T. conditions noted.</u></p>				□	☒	□	□
<p>3. <b>Are records of calibration and maintenance activities and results properly retained?</b></p> <p>Observed State: <u>Yes, as required. M&amp;TE records are maintained by C-AD calibration lab.</u></p>				□	□	□	☒
<p>PROCEDURES AND DOCUMENTATION REVIEWED:</p> <p>OPMs 1.10.4, 1.10.4.a, 13.8.2, OPMs 1, 8, 9, 10 &amp; 13 series, SBMS Subject Area.</p>							
<p>COMMENTS:</p>							
<p>FINDING:</p>							

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>	Auditor: <b>R. Savage/ J. Montalto</b>			
Element: <b>4.5.2</b>	Title: <b>Evaluation of Compliance</b>					
<p>OHSAS 18001 STANDARD: 4.5.2.1 Consistent with its commitment to compliance, the organization shall establish, implement, and maintain a procedure(s) for periodically evaluating compliance with applicable legal requirements. The organization shall keep records of the results of the periodic evaluations. 4.5.2.2 The organization shall evaluate compliance with other requirements to which it subscribes. The organization may wish to combine this evaluation with the evaluation of legal compliance referred to in 5.4.2.1 or to establish a separate procedure(s).</p>		Major Non-Compliance	Minor Non-Compliance	OFI	Meets Requirement	
<p>1. <b>Has the organization implemented a procedure(s) for periodically evaluating compliance with applicable legal requirements?</b> Observed State: <u>OPM 13.10.1</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>2. <b>Evaluate the records of the results of the most recent set of periodic evaluations of compliance to legal requirements.</b> Observed State: <u>Two assessments performed in 2008 in accordance with OPM requirements.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<p>3. <b>Has the organization evaluated compliance with other requirements to which it subscribes? Evaluate the records of the results of the most recent set of periodic evaluations.</b> Observed State: <u>In accordance with OPM requirements.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
PROCEDURES AND DOCUMENTATION REVIEWED:						
OPM 13.10.1						
COMMENTS:						
FINDING:						

Organization: C-AD / SMD		Date: 2/14/08	Auditor: R. Savage/ J. Montalto		
Element: <b>4.5.3</b>	Title: <b>Incident investigations, Nonconformity, Corrective and Preventive Action</b>				
<p>OHSAS 18001 STANDARD:</p> <p>4.5.3.1: <i>Incident Investigation: The organization shall establish, implement and maintain a procedure(s) for record, investigate and analyze incidents in order to: a.) determine underlying OH&amp;S deficiencies and other factors that might be causing or contributing to the occurrence of incidents; b.) identify the need for corrective actions; c.) identify opportunities for preventative action; d.) identify opportunities for continual improvement; d.) communicate the results of such investigations. The investigations shall be performed in a timely manner. Any identified need for corrective action or opportunities for preventative action shall be dealt with in accordance with relevant parts of 5.4.3.2. The results of incident investigation shall be documented and maintained.</i></p> <p>4.5.3.2 <i>Nonconformity, Corrective Action, and Preventative Action: The organization shall establish, implement and maintain a procedure(s) for dealing with actual and potential nonconformities and for taking corrective actions and preventative actions. The procedure(s) shall define requirements for: a.) identifying and correcting nonconformity(ies) and tracking action(s) to mitigate their OH&amp;S consequence; b.) investigating nonconformity(ies), determining their cause(s) and taking actions in order to avoid the recurrence; c.) evaluating the need for action(s) to prevent nonconformity(ies) and implanting appropriate actions designed to avoid their occurrence; d.) recording and communicating the results of corrective actions(s) and preventative actions(s) taken; and e.) reviewing the effectiveness of corrective action(s) and preventative action(s) taken.</i></p> <p><i>Where the corrective action and preventative action identifies new or changed hazards or the need for new or changed controls, the procedure shall require that the proposed actions shall be taken through a risk assessment prior to implementation.</i></p> <p><i>Any corrective action or preventative action taken to eliminate the causes of actual or potential nonconformity(ies) shall be appropriate to the magnitude of problems and commensurate with the OH&amp;S risk(s) encountered.</i></p> <p><i>The organization shall ensure that any necessary changes arising from the corrective action and preventative action are made to the OH&amp;S management system documentation.</i></p>		Major Non-Compliance	Minor Non-Compliance	OPI	Meets Requirement
1. <b>Does the organization use their own procedure(s) for record, investigate and analyze incidents?( <u>X</u> rely on SBMS)?</b>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. <b>Is it effective to:</b>					
<input checked="" type="checkbox"/> a.) <b>determine underlying OH&amp;S deficiencies and other factors that might be causing or contributing to the occurrence of incidents;</b>					
<input checked="" type="checkbox"/> b.) <b>identify the need for corrective actions;</b>					
<input checked="" type="checkbox"/> c.) <b>identify opportunities for preventative action;</b>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> d.) <b>identify opportunities for continual improvement;</b>					
<input checked="" type="checkbox"/> e.) <b>communicate the results of such investigations.</b>					
3. <b>Were investigations performed in a timely manner? (Determine the timing of investigation[s])</b> Observed State: <u>Yes as scheduled.</u>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. <b>Were corrective actions or opportunities for preventative action determined?</b> Observed State: <u>Yes as stated on reports.</u>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. <b>How were the results of incident investigation documented and maintained?</b> Observed State: <u>Yes as required by ESHQ personnel.</u>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. <b>Were risk assessments conducted or revised as a result of incidents/events?</b> Observed State: <u>Not in 2008.</u>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<p>7. <i>Did the organization record any changes in their documented procedures resulting from corrective and preventative actions?</i> Observed State: <u>Yes as required by OPM</u></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>PROCEDURES AND DOCUMENTATION REVIEWED: C-AD OPM 9.4.1, 9.4.5, 10.1, SMD 2.2, SBMS Subject Area.</p>				
<p>COMMENTS:</p>				
<p>FINDING:</p>				

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>		Auditor: <b>R. Savage/ J. Montalto</b>			
Element: <b>4.5.4</b>	Title: <b>Control of Records</b>						
<p>OHSAS 18001 STANDARD: <i>The organization shall establish and maintain records as necessary to demonstrate conformity to the requirements of its OH&amp;S management system and of this OHSAS Standard, and the results achieved. The organization shall establish, implement and maintain a procedure(s) for the identification, storage, protection, retrieval, retention and disposal of records. Records shall be and remain legible, identifiable and traceable.</i></p>				Major Non-Compliance	Minor Non-Compliance	OPI	Meets Requirement
<p>1. <b>Does line organization implement its own procedure(s) for the identification, storage, protection, retrieval, retention and disposal of records?</b> Observed State: <u>Yes see below.</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>2. <b>Are organization's OSH records legible, identifiable and traceable?</b> Observed State: <u>Yes as required.</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>3. <b>Are the records stored and maintained such that they are readily retrievable and protected against damage, deterioration or loss? (Evaluate at least three record locations/owners)</b> Observed State: <u>Yes as required.</u></p>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Location: <b>1<sup>st</sup> &amp; 2<sup>nd</sup> floor of C-AD Bldg. 911A.</b>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Location: <b>2<sup>nd</sup> floor of SMD Bldg. 902.</b>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Location:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>PROCEDURES AND DOCUMENTATION REVIEWED:</p> <p>OPM 1.1, 1.2, 1.4 series, 10.1, 13.4.1, 13.4.2, SBMS Subject Area, SMD 1.2.</p>							
<p>COMMENTS:</p>							
<p>FINDING:</p>							

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>		Auditor: <b>R. Savage/ J. Montalto</b>	
Element: <b>4.5.5</b>		Title: <b>Internal Audit</b>			
<p>OHSAS 18001 STANDARD: <i>The organization shall ensure that internal of the OH&amp;S management system audits are conducted at planned intervals to: a) determine whether or not the OSH management system: 1) conforms to planned arrangements for OSH management including the requirements of this OHSAS specification; 2) has been properly implemented and maintained; and 3) is effective in meeting the organization's policy and objectives; b) provide information on the results of audits to management.</i></p> <p><i>Audit program shall be planned, established. Implemented and maintained by the organization, based on the results of risk assessments of the organization's activities, and the results of previous audits.</i></p> <p><i>Audits procedure(s) shall be established, implemented, and maintained that address: a.) the responsibilities, competencies, and requirements for planning and conducting audits, reporting results, and retaining associated records; and b.) the determination of audit criteria, scope, frequency and methods. Selection of auditors and conduct of audits shall ensure objectivity and impartiality of the audit process.</i></p>		Major Non-Compliance	Minor Non-Compliance	OFI	Meets Requirement
<p>1. <b>Was the OHSAS 18001 internal audit of the OH&amp;S management system conducted at the planned interval? ( interval from last audit) <u>Yes, annually.</u></b></p> <p><b>Was information on the results of audits provided to management?</b> Observed State: <u>Yes, daily &amp; report.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>2. <b>Was the audit based on the results of risk assessments of the organization's activities, and the results of previous audit?</b> Observed State: <u>Yes as required.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>3. <b>Does the organization implement their own procedure[s] that address: a.) the responsibilities, competencies, and requirements for planning and conducting audits, reporting results, and retaining associated records; and b.) the determination of audit criteria, scope, frequency and method?</b> Observed State: <u>Yes, items / concerns identified with responsible person will be tracked until corrected.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>4. <b>Was the selection of auditors done in a manner to ensure objectivity and impartiality of the audit process?</b> Observed State: <u>Yes as required.</u></p>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>PROCEDURES AND DOCUMENTATION REVIEWED:</p> <p>SBMS Subject Area, OPM 13.10.1.</p>					
<p>COMMENTS:</p>					
<p>FINDING:</p>					

Organization: <b>C-AD / SMD</b>		Date: <b>2/14/08</b>		Auditor: <b>R. Savage/ J. Montalto</b>	
Element: <b>4.6</b>		Title: <b>Management Review</b>			
<p><b>OHSAS 18001 STANDARD:</b> <i>Top management shall review the organization's OH&amp;S management system, at planned interval, to ensure its continuing suitability, adequacy and effectiveness. Reviews shall include assessing opportunities for improvements and the need for changes to the OH&amp;S management system, including the OH&amp;S policy and OH&amp;S objectives. Records of the management reviews shall be retained</i></p> <p><i>Input to the management reviews shall include: a.) results of internal audits and evaluations of compliance with applicable legal requirements and with other requirements to which the organization subscribes; b.) the results of participation ad consultation; c.) relevant communication(s) from external interested parties, including complaints; d.) the OH&amp;S performance of the organization; e.) the extent to which objectives have been met; f.) status of incident investigations, corrective actions and preventative actions; g.) follow-up action from previous management reviews; h.) changing circumstances, including development in legal and other requirements related to OH&amp;S; and i.) recommendations for improvement.</i></p> <p><i>The outputs from the management reviews shall be consistent with the organization's commitment to continual improvement and shall include any decisions and actions related to possible changes to:</i> a.) OH&amp;S performance; b.) OH&amp;S policy and objectives; c.) resources; and d.) other elements of the OH&amp;S management system.</p> <p><i>Relevant outputs from the management review shall be made available for communication and consultation.</i></p>		Major Non-Compliance	Minor Non-Compliance	OPI	Meets Requirement
<b>1. Did the management reviews include:</b>					
<input checked="" type="checkbox"/>	<b>a.) results of internal audits and evaluations of compliance with applicable legal requirements and with other requirements to which the organization subscribes;</b>				
<input checked="" type="checkbox"/>	<b>b.) the results of participation ad consultation;</b>				
<input checked="" type="checkbox"/>	<b>c.) relevant communication(s) from external interested parties, including complaints;</b>				
<input checked="" type="checkbox"/>	<b>d.) the OH&amp;S performance of the organization;</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<b>e.) the extent to which objectives have been met;</b>				
<input checked="" type="checkbox"/>	<b>f.) status of incident investigations, corrective actions and preventative actions;</b>				
<input checked="" type="checkbox"/>	<b>g.) follow-up action from previous management reviews;</b>				
<input checked="" type="checkbox"/>	<b>h.) changing circumstances, including development in legal and other requirements related to OH&amp;S;</b>				
<input checked="" type="checkbox"/>	<b>i.) recommendations for improvement.</b>				
<b>2. Did the outputs from the management reviews include any decisions and actions related to possible changes to:</b>					
<input checked="" type="checkbox"/>	<b>a.) OH&amp;S performance;</b>				
<input checked="" type="checkbox"/>	<b>b.) OH&amp;S policy and objectives;</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<b>c.) resources;</b>				
<input checked="" type="checkbox"/>	<b>d.) other elements of the OH&amp;S management system.</b>				
<b>3. Were records of the management reviews retained?</b> Observed State: Yes and posted on C-AD web page.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>4. Were relevant outputs from the site level management review made available for communication and consultation?</b> Observed State: Yes and posted on web page.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
EXISTING PROCEDURES AND DOCUMENTATION (LIST):					
OPM 1.10.4, 14.30, C-AD / SMD management reviews					

COMMENTS:

FINDING: