



LOS ANGELES FIRE DEPARTMENT

RALPH M. TERRAZAS
FIRE CHIEF

June 22, 2015

BOARD OF FIRE COMMISSIONERS
FILE NO. 15-068

TO: Board of Fire Commissioners

FROM:  Ralph M. Terrazas, Fire Chief

SUBJECT: CERTIFIED UNIFIED PROGRAM AGENCY (CUPA) UPDATE AND
DEFICIENCY PROGRESS REPORT

FINAL ACTION:	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Corrections	<input type="checkbox"/> Withdrawn
	<input type="checkbox"/> Denied	<input type="checkbox"/> Received & Filed	<input type="checkbox"/> Other

SUMMARY

As of the date of submission of this report, the Bureau of Fire Prevention & Public Safety has yet to receive the feedback report from the CalEPA as it pertains to the CUPA Progress Report initially submitted on April 23, 2015.

Many changes have been made over the previous months as outlined below to improve the efficiency of the CUPA Program and return all identified deficiencies to a compliant status.

RECOMMENDATION

That the Board:
Receive and file this report.

DISCUSSION

The following action items have been implemented:

- As of January 1, 2015, the Underground Storage Tank (UST) Inspection Program and the Hazardous Materials Inspection Program have been separated to allow Inspectors who possess the International Code Council Certification (ICC) to focus solely on UST inspections and Inspectors who do not possess this certification to focus on hazardous materials inspections. This policy has positively affected the efficiency of the Inspectors assigned to the Environmental Unit.
- Effective January 28, 2015, CUPA implemented the use of Envision Connect Remote (ECR). This new technology has allowed Inspectors the ability to

conduct all facets of the inspection from the “field” ultimately creating a more streamlined process with improved efficiency.

- Unit Supervision has improved the scheduling of Inspector workloads. The new policy has eliminated duplicate scheduling and led to greater productivity.
- The number of ICC certified members assigned to the Environmental Unit has increased as a result of additional members passing the required examination process. Total ICC Inspectors certified is nine from a previous five.
- Staffing in the Environmental Unit (Inspectors assigned to CUPA) has also been increased to a total of 14 Inspectors from a previous 12. This was done to meet the needs of the Unit as identified in a CUPA analysis.
- Data “clean up” completed April 15, 2015, by CUPA personnel along with Management Information Systems (MIS) Division personnel will provide an accurate perspective into the progress made.

CONCLUSION

While the CalEPA Evaluation Team (evaluation team) originally estimated that the Los Angeles Fire Department (LAFD) would be in receipt of its feedback in 5-6 weeks from submission date on April 23, 2015, we have yet to receive it. We have been in communication with evaluators in an effort to stay on track with the remediation process. We have been informed that while progress has been made, many of the deficiencies will remain for a minimum time period of one year while the LAFD CUPA and evaluation team work in a collaborative effort to return the LAFD CUPA Program to full compliance. The next progress report is due July 23, 2015.

Board report prepared by Kenneth S. Miller, Captain II, Bureau of Fire Prevention & Public Safety.

Attachment

City of Los Angeles Fire Department
CERTIFIED UNIFIED PROGRAM AGENCY
Program Improvement Agreement
Deficiency Progress Report 1

EVALUATION DATE(S):	July 29, 2014 – July 31, 2014				
CUPA:	City of Los Angeles Fire Department				
Post-EVALUATION TEAM MEMBERS:	CalEPA Team Lead	DTSC	Cal OES	SWRCB	CAL FIRE - OSFM
	Katrina Valerio	Asha Arora Ari Erman, Ph.D	Edward Newman	Laura Fisher Sean Farrow	Denise Gibson Jenna Yang
Deficiencies Pending	19				
Deficiencies Corrected					
Next Update Due by	April 23, 2015				

To complete the evaluation process when a Program Improvement Agreement has been issued, the CUPA is required to submit Deficiency Progress Reports directly to the CalEPA Assistant Secretary for Local Programs and Emergency Response at the following address:

CalEPA
Unified Program
Attn: Assistant Secretary for Local Programs and Emergency Response
P.O. Box 2815
Sacramento, CA 95812

Each Report shall explain the CUPA's progress towards correcting each identified deficiency. Deficiency Progress Reports are due quarterly until all deficiencies are determined by Assistant Secretary to be corrected. The update schedule for the first year is listed below. Questions or comments regarding this evaluation should be directed to the attention of the CalEPA Evaluation Team Lead:

Katrina Valerio
Phone: (916) 323-2204
Fax: (916) 319-7177
E-mail: Katrina.Valerio@calepa.ca.gov

<p>The CUPA is required to submit a Deficiency Progress Report every 90 days until all deficiencies have been acknowledged as corrected.</p> <p>Each Deficiency Progress Report must include a narrative stating the progress toward correction of <u>all</u> deficiencies identified in the Summary of Findings evaluation report.</p>	<p>Deficiency Progress Report submittal dates for the first year of updates are as follows:</p> <p style="text-align: center;">Update 1: April 23, 2015 Update 2: July 23, 2015 Update 3: October 23, 2015 Update 4: January 23, 2016</p>
--	---

Each Deficiency Progress Report must be submitted to the CalEPA.

1. DEFICIENCY:	CORRECTIVE ACTION:
<p>The CUPA is not inspecting all underground storage tanks (UST) facilities annually.</p> <ul style="list-style-type: none"> Fiscal Year (FY) 12/13, the CUPA inspected 66% of its regulated facilities; FY 11/12, the CUPA inspected 69% of its regulated facilities; FY 10/11, the CUPA inspected 48% of its regulated facilities. <p>This deficiency was also cited in 2009, but considered corrected during the update reporting process.</p>	<p>By April 23, 2015, the CUPA will perform a thorough analysis of the UST element of the unified program and conclude the reasons why the annual compliance inspection requirement is not being met. This analysis shall include discussion on existing staffing resources and how many inspections each inspector is capable of conducting annually. This analysis should be submitted to CalEPA with a plan for addressing all the reasons why the annual compliance inspections are not being met, and how the annual compliance inspection frequency will be met by October 23, 2015.</p> <p>By April 23, 2015, the CUPA shall identify those USTs that have not been inspected in the last year or for multiple years, and prioritize those inspections to be completed prior to any other annual compliance inspection. By July 23, 2015, the CUPA shall inspect those USTs that have not been inspected in the last year or for multiple years.</p>

Deficiency Progress Update 1:

CUPA has performed a thorough analysis of the UST element of the unified program to determine needed resources to meet the annual compliance inspection frequency.

The survey to estimate inspection time, including documents review and follow up for all facility types, was distributed to all ICC certified inspectors and collected. The data was referred to statistician for required analysis and the report "UST Inspection Workload Analysis" was created (Attachment 1). CUPA is in a process of implementing the report findings and right-sizing the current staffing levels.

CUPA has identified 581 UST's facilities that have not been inspection in the last year or multiple years and prioritized the annual compliance inspections for these overdue facilities.

The following action items were taken by the Fire Marshal in an effort to move CUPA and specifically this deficiency towards 100% compliance.

- A data "clean up" was conducted to ensure accurate metrics
- In March 2015 four members were returned to full duty, transferred into, or detailed for a period of time to CUPA with an emphasis on UST inspections.
- Five members assigned to CUPA and six total passed a "pencil paper" ICC Exam administered on March 31st. This raises our number of ICC Inspectors to 11 which will have an immediate positive impact on our inspection totals.

Evaluation Team Response:

2. DEFICIENCY:	CORRECTIVE ACTION:
<p>The CUPA is not requiring facilities to submit UST testing and leak detection documents as required by Chapter 6.7 of the Health and Safety Code (Statute) and Title 23, Chapter</p>	<p>From this point forward, in accordance with Statute and Regulation, the CUPA will require owners and operators to submit the appropriate UST testing and leak detection documents. In accordance with Statute and Regulation,</p>

<p>16 of the California Code of Regulations (Regulation).</p> <p>The following documents, which are required to be submitted within 30 days of testing, were not found in facility files, California Environmental Reporting System (CERS), or Envision.</p> <ul style="list-style-type: none"> • Secondary containment testing; • Tank and line integrity tests; • Monitoring certifications; • ELD certifications. <p>Twenty-eight facility files were reviewed by SWRCB and the file numbers were provided to the CUPA in the preliminary summary of findings.</p> <p>Interviews with CUPA staff confirmed that the CUPA does not actively require appropriate testing and leak detection documents to be submitted, or to be submitted within the 30 day timeframe.</p>	<p>the CUPA will also require owners and operators to comply with timely submittal of these documents.</p> <p>By April 23, 2015, the CUPA will develop outreach program materials and submit them to CalEPA for approval. In the submittal to CalEPA, the CUPA will outline how and when it will provide the outreach materials to the regulated community (both owners/operators and testers). The outreach materials must explain the requirement to submit the appropriate UST testing and leak detection documents in the timeframe required by Statute and Regulation.</p> <p>By July 23, 2015, the CUPA will have completed the distribution of the outreach materials so that the regulated community is notified of the requirements to submit appropriate UST testing and leak detection documents. The CUPA shall send CalEPA a final copy of the outreach program materials and a list of businesses the materials were sent to.</p> <p>This Deficiency will be considered corrected once there is consistent documentation over a one-year period that shows the appropriate documents are being submitted, submitted in a timely manner, reviewed by International Code Council (ICC) certified staff, and retained by the CUPA.</p>
---	---

Deficiency Progress Update 1:

On January 15, 2015, an outreach letter was sent to all UST facilities owners/operators regarding CERS reporting requirements and other required documentation:

"The following documents are required to be submitted to CUPA within 30 days of testing/inspection:

- Monitoring System Annual Certification
- Spill Bucket Testing Report
- Secondary Containment Testing Report
- Tank Integrity Test Report
- Line Integrity Test Report
- Enhanced Leak Detection Test Report
- Temporary Closure Tank Liquid Sampling Results
- Unauthorized Release Report (**within five working days**)".

Prior to mass mailing, the outreach letter (Attachment 2) was sent to CalEPA for review and the comments were taken into consideration in the final letter.

Since January 15, 2015, the 699 UST CERS submittals were received, out of 2,805; as of 4/16/15.

Evaluation Team Response:

3.	DEFICIENCY:	CORRECTIVE ACTION:
	The CUPA is not preparing an annual compliance inspection report for every UST inspection.	Beginning with the first quarterly progress report due April 23, 2015, and each quarterly progress report thereafter, the CUPA will provide copies of the previous quarter's

<p>The CUPA could not produce annual compliance inspection reports for all UST facilities reviewed by SWRCB.</p>	<p>UST annual compliance inspection reports. This reporting will continue until this deficiency is corrected.</p> <p>Clear written direction and procedures for managing UST inspections from start to finish, including electronic data and hard copy paperwork, as well as the identification of tools and resources to conduct adequate inspections are needed to maintain consistent UST inspection practices. Therefore, by April 23, 2015, the CUPA will develop and submit to CalEPA procedures for the management of inspection activities that specifically outline the roles of inspectors, office staff, and management.</p> <p>A few of noticeably absent CUPA policies and procedures for managing inspections observed during the evaluation, which should be included in this document, include;</p> <ul style="list-style-type: none"> • the deadline for preparation of the annual compliance inspection report, • the requirements for facility record keeping and document retention, • the requirements for review and follow up of submitted testing reports, • how to conduct inspections in those instances when staff can and cannot witness annual monitoring certifications, • the requirements for the renewal and issuance of operating permits. <p>All policies and procedures shall be in conformance with LG 159.</p> <p>By May 23, 2015, CalEPA will have the CUPA's UST inspection procedures reviewed and provide feedback to the CUPA.</p> <p>By June 23, 2015, the CUPA will make necessary amendments if needed to these procedures and submit to CalEPA for review and approval.</p> <p>By July 23, 2015, the CUPA will incorporate these policies and procedures into its Inspection & Enforcement Plan and begin implementation.</p> <p>By September 30, 2015, the CUPA will conduct its self-audit and submit the self-audit to CalEPA addressing the status of implementation of this corrective action and identify if any changes are needed.</p> <p>This Deficiency will be considered corrected once established policies and procedures are in place and UST inspection reports are shown to be consistently prepared for all inspections over a one-year period.</p>
--	---

Deficiency Progress Update 1:

CUPA has reorganized the inspection checklist to assist Inspectors in conducting complete inspections. Inspection Procedures have been developed to manage the inspection activities and to provide consistent inspection practices.

Envision Connect Remote (ECR) went live on 1/28/2015 to facilitate preparation of inspection reports and providing them to owners/operators on the day of inspection.

Attachment 3 provides copies of UST annual compliance inspection reports for January 1, 2015, through March 31, 2015.

Attachment 11 contains Management of Inspection Activities.

Evaluation Team Response:

4.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not collecting, tracking or accurately reporting SOC information on a semi-annual basis.</p> <p>The CUPA has received letters from SWRCB the last two (2) reporting periods because of late submittals.</p>	<p>From this point forward, the CUPA will report its SOC information to SWRCB within the given time period.</p> <p>The next report period for SOC information is due March 1, 2015.</p> <p>This deficiency will be considered corrected once the CUPA has successfully submitted semi-annual SOC reports on time for a one-year period.</p>

Deficiency Progress Update 1:

The software upgrade (ECR) and the revised checklist are now linked to provide an accurate SOC information through improved reporting and tracking system.

The March 1, 2015, due date for Report #6 was not met due to unavailability of staff at that time.

Evaluation Team Response:

5.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The annual UST compliance inspection is not always conducted in accordance with the requirements set forth in Statute or Regulation.</p> <p>File review and LA City Fire staff interviews indicate that staff is not always onsite to witness all aspects of the annual monitoring certification. When staff are not present during the annual monitoring certification staff fail to: (1) review the associated annual monitoring certificates which identify functionality testing, annual spill bucket testing, and/or secondary containment tests and note failures on the UST annual compliance inspection report, and (2) inspect the required subsurface elements of the UST system, as inspectors don't have access.</p>	<p>From this point forward, all annual UST compliance inspections shall be conducted in accordance with Statute and Regulation as explained in Local Guidance Letter (LG) 159. The CUPA will develop and submit to CalEPA procedures consistent with the description in LG 159 to implement the law. These policies and procedures are to be added to the document prepared for the corrective actions of Deficiency 3. For that reason; submittals, review, implementation, and self-audit time frames shall be the same as, and on the same timeline as, Deficiency 3.</p> <p>Using the annual inspection reports submitted quarterly under Deficiency 3 the SWRCB will randomly select UST inspection reports to review and request the CUPA to submit supporting documentation to determine whether or not the UST annual compliance inspections are being properly conducted. This review will continue until the</p>

	<p>deficiency is corrected.</p> <p>This Deficiency will be considered corrected when annual UST compliance inspections are consistently conducted in accordance with Statute and Regulation for a one-year period.</p>
--	--

Deficiency Progress Update 1:

CUPA has reorganized the inspection checklist to assist Inspectors in conducting complete inspections. Inspection Procedures, consistent with LG 159, have been developed to manage the inspection activities and to provide consistent inspection practices (Attachment 11).

Envision Connect Remote (ECR) went live on 1/28/2015 to facilitate preparation of inspection reports and providing them to owners/operators on the day of inspection.

Evaluation Team Response:

6.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not fully implementing its Inspection and Enforcement (I & E) Plan. In many cases, CUPA inspectors are not completing an inspection report after each inspection and leaving a copy with the facility operator. CalEPA, Cal OES, and the SWRCB have observed that many facility files did not contain current inspection reports.</p> <p>The CUPA has recently moved from using a data entry inspection form summarizing inspections to issuing an inspection report to facilities. Due to the CUPA's low inspection frequency, most inspections reviewed contained only the data entry form and no inspection report clearly demonstrating factual basis of violations or observations.</p> <p>The CUPA appears to be beginning to remediate this deficiency.</p>	<p>Effective immediately, the CUPA will document all inspections using an inspection report for each program element.</p> <p>By April 23, 2015, the CUPA will provide to CalEPA a list of facilities that were inspected the first and second quarter of FY 2014/2015. The CUPA shall continue to submit quarterly lists until it is uploading its inspections to CERS. State evaluators will review the lists and will request copies of inspection reports from the lists, not otherwise provided under Deficiency 3.</p> <p>The CUPA will provide quarterly updates of its progress towards ensuring inspection reports are completed after each inspection until this deficiency is corrected. The deficiency will be considered corrected when all the state evaluators have agreed that the inspection reports are being completed. The state evaluators may perform an in-person review of the CUPA's records prior determining this deficiency is corrected.</p>

Deficiency Progress Update 1:

ECR went live on 1/28/2015 to facilitate preparation of inspection reports and providing them to owners on the day of inspection. The inspection reports are now being completed for all Program Elements.

ECR is the wireless software that handles inspection compliance, creates violations, as well as synchronizes with EC to provide a seamless transition from field data to server data. Inspection reports are created on site; exported to pdf format and either e-mailed or printed utilizing mobile printers.

Attachment 5 contains a list of facilities inspected in the first and second quarter of FY 2014/2015 (July 2014 – December 2014).

Evaluation Team Response:

7.	DEFICIENCY:	CORRECTIVE ACTION:
	The CUPA is issuing UST operating permits	From this point forward, the CUPA will only issue UST

	<p>to facilities that are not in compliance.</p> <p>File review indicates that UST inspectors in many cases are not reviewing annual monitoring certifications, secondary containment testing reports, or other testing and leak detection records. These testing reports and records often contain testing failures or leak test results that result in facility non-compliance, as well violations that would prohibit the UST operating permit from being issued. The CUPAs failure to conduct this proper document review resulted in UST operating permits being issued to facilities that are not in compliance.</p>	<p>operating permits to facilities that are in compliance with Statute and Regulations.</p> <p>By April 23, 2015, the CUPA will develop and submit to CalEPA policies and procedures to verify UST compliance with Statute and Regulations before issuing the permit to operate. These policies and procedures are to be added to the document prepared for the corrective actions of Deficiency 3. For that reason, submittal, review, implementation, and self-audit time frames shall be the same as and on the same timeline as Deficiency 3.</p> <p>Thirty days after the next UST operating permit issuance cycle the SWRCB will randomly select 30 UST facilities from CERS and provide the list to the CUPA. The CUPA will then submit to CalEPA copies of the facility files so that SWRCB can review and determine that UST operating permits are being issued to facilities that are in compliance.</p> <p>This Deficiency will be considered corrected after one successful permitting cycle where the CUPA has withheld the issuance of operating permits for facilities not in compliance or properly found all facilities to be in compliance.</p>
--	--	---

Deficiency Progress Update 1:

Management Information Services and Decade Software developed a script to not only flag the facilities with violations but to ensure that a permit is not generated nor issued to non-compliant facilities. Please see Attachment 14 for Billing and Collections Process and Procedures dated 6/10/2013, to be updated with current workflows.

Also with the ECR roll out and inspectors generating the NOV's directly through the ECR, CUPA has a better method identifying the facilities with open violations as well as following-up to either clear the violations and issue the permits or take further enforcement actions, if necessary.

Evaluation Team Response:

8.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not requiring UST facilities with testing and/or leak detection failures documented as part of monitoring certifications, secondary containment testing, and other testing of non-monitoring reports to return to compliance. In addition, a review of the submitted violation tracking spreadsheet provided by the CUPA manager shows that in many instances return to compliance is not occurring during annual compliance inspections.</p> <p>Our file review indicates that facilities have</p>	<p>From this point forward, the CUPA will;</p> <p>(1) review testing and leak detection reports and cite testing and leak detection failures as a violations,</p> <p>(2) require facilities to correct violations associated with testing and leak detection failures as identified both during inspections and review of testing and leak detection reports,</p> <p>(3) require facilities to re-test and demonstrate that compliance with Statute and Regulations has been met.</p> <p>By April 23, 2015, the CUPA will develop and submit to CalEPA policies and procedures for inspectors to verify</p>

	<p>been operating out of compliance for multiple years.</p>	<p>return to compliance for testing and or leak detection failures within the appropriate time frames. These policies and procedures are to be added to the document prepared for the corrective actions of Deficiency 3. For that reason, submittal, review, implementation, and self-audit time frames shall be the same as, and on the same timeline, as Deficiency 3.</p> <p>By January 23, 2016, and quarterly thereafter the SWRCB will review CERS for facilities with violations, and require the CUPA to submit necessary supplemental information to demonstrate how return to compliance was achieved.</p> <p>This Deficiency will be considered corrected when the CUPA has the above-referenced policies and procedures in place and consistently over a one-year period has reviewed testing and leak detection reports and appropriately cited violations for failures, required facilities to correct testing and leak detection violations, and required facilities to retest and demonstrate compliance when there has been a failure indicated in a testing or leak detection report.</p>
--	---	--

Deficiency Progress Update 1:

Software upgrades and revising the to-do list will assist in alerting inspectors of violations in need of inspections and re-inspections. The addition of the AEO program will reinforce compliance.

The appropriate procedures will be developed for inspectors to verify return to compliance for testing and leak detection failures within the required time frames.

Evaluation Team Response:

9.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not ensuring that businesses annually resubmit or certify their hazardous materials inventory information.</p> <p>Hazardous materials inventories are currently accepted through the CUPA's local reporting portal and through CERS.</p> <p>Out of the 21 files reviewed by OSFM, 20 files did not have an updated inventory.</p> <p>45% of facilities queried in CERS by Cal OES did not have an updated inventory.</p>	<p>By April 23, 2015, the CUPA will prepare and implement an action plan to address this deficiency. By July 23, 2015, the CUPA will provide a status on the action plan implementation.</p> <p>The CUPA will continue to provide quarterly updates of its progress towards ensuring facilities annually submit an updated inventory online. The deficiency will be considered corrected when 90 percent of the regulated businesses are in compliance. CalEPA, OSFM and/or Cal OES may require screenshots of the CUPA's portal, database, CERS or copies of inspection reports, notices of violation and/or return to compliance documentation or to perform an in person review of the CUPA's records prior to determining this deficiency corrected.</p>

Deficiency Progress Update 1:

On 2/15/2015 an outreach letter was sent to all participants in the program regarding electronic submittal of

hazardous materials information (Attachment 4):

"All businesses in the LAFD CUPA jurisdiction should have made electronic submittal to CERS for reporting year 2012 by now. Annual Hazardous Materials Inventory update for reporting year 2014 is due by **March 31, 2015.**"

2,620, out of 11,942, submission elements were submitted to CERS since (as of April 16, 2015).

Evaluation Team Response:

10.	DEFICIENCY:	CORRECTIVE ACTION:
	<p data-bbox="185 506 760 804">The CUPA's PA, the Los Angeles County Fire Department, is not meeting either its scheduled inspection frequency for the Resource Conservation and Recovery Act (RCRA) large quantity generators (LQGs), and small quantity generators (SQGs) as outlined in the CUPA's I & E Plan or the statutorily mandated frequency for the tiered permitting (TP) program.</p> <p data-bbox="185 842 760 1236">Prior to the evaluation, DTSC requested a list of all hazardous waste generator (HWG) facilities that had not been inspected within the last 3 years. During the evaluation, on July 30, 2014, the PA provided two additional lists for DTSC's review and for selection of hazardous waste generator oversight inspections. One list of 18 (12 LQGs and/ 6 TP facilities) and a second list of 905 SQGs. These lists indicated that these 923 facilities had not been inspected within the last three years.</p> <p data-bbox="233 1274 440 1304">TP/RCRA LQG:</p> <ul data-bbox="233 1310 760 1514" style="list-style-type: none">• Three out of six TP facilities had not been inspected in over four years.• One out of 12 RCRA LQGs had not been inspected in over six years.• Four out of 12 RCRA LQGs had not been inspected in over four years. <p data-bbox="233 1551 321 1581">SQGs:</p> <ul data-bbox="233 1587 651 1791" style="list-style-type: none">• Two out of 905 had not been inspected in over six years.• 108 out of 905 had not been inspected in over five years.• 313 out of 905 had not been inspected in over four years. <p data-bbox="185 1824 699 1923">Of the thirty four active files reviewed by DTSC, five of the facilities were not inspected in the last three years.</p>	<p data-bbox="797 506 1516 604">By January 23, 2016 the PA will have inspected all hazardous waste generators (HWG) that have not been inspected in the past three years.</p> <p data-bbox="797 642 1536 804">In the first progress report, provide an update on the total number of HWG facilities that need to be inspected and the total number HWG facilities inspected to date (3 prior months). In addition, please provide a list of facilities overdue for inspection with the progress report.</p> <p data-bbox="797 842 1528 1003">Please also submit in the subsequent quarterly progress reports to CalEPA an update on the number of RCRA LQG and TP facilities, and SQGs inspected and the total number HWG facilities inspected to date (3 prior months).</p> <p data-bbox="797 1041 1507 1272">The CUPA will continue to provide quarterly updates of its progress towards ensuring the PA meets its inspection frequency for HWG facilities until this deficiency is corrected. CalEPA and/or DTSC may require copies of inspection reports, or an in-person review of the CUPA's records prior determining this deficiency corrected.</p>

	<ul style="list-style-type: none"> • Story Building located at 610 S. Broadway #714, Los Angeles, was last inspected on 6/1/11. • Andrews International located at 455 N. Moss St., Valencia, was last inspected on 9/23/10. • SOS Petro/ Vic's Auto Repair located at 6621 Foothill Blvd., Tujunga, was last inspected on 7/8/10. • LA County Public Works located 809 Big Tujunga Canyon Rd., Tujunga was last inspected on 1/9/10. <p>National Diamond Laboratory located at 4650 Alger St. Los Angeles, was last inspected on 3/2/10.</p>	
--	---	--

Deficiency Progress Update 1:

The PA has been addressing the overdue inspection issue for several years as a normal part of their operational review. Due to significant numbers of retirements over the past several years and the time necessary to develop exams and fill those positions, as well as staff off for extended periods, the PA has seen an increase in the number of overdue inspections. In addition to inspection mandates, over the past four years, the PA has and continues to face the daunting task of implementing the California Electronic Reporting System (CERS) and associated requirements, including the use of an electronic Field Inspection System (FIS). This FIS required changes in work procedures and protocols, violation identification and documentation, and supervisory review. CERS requires CUPAs and regulated businesses to submit required program element information/reports electronically via the Internet. As a result of this mandate, inspectors have had to devote additional time and effort in assisting regulated businesses with compliance, especially for the approximately 17,587 regulated facilities outside of the City of Los Angeles, which impacted their productivity. As expected, implementation of the FIS reduced productivity as inspectors learned and became comfortable with new field equipment, protocols, and workflows. Finally, after exhaustive review, multiple errors have been identified in previous inspection data tracked by the PA and corrections made to ensure accurate identification of overdue facilities and inspection counts.

The PA currently has 1,334 HWG facilities due for inspection in the City of Los Angeles. Among these facilities, 14 tiered permitting (TP) and 17 RCRA-LQG facilities are overdue as of January 1, 2015. There are a total of 6,046 HWG facilities, which include 118 RCRA-LQG and 164 TP facilities. Between the dates of August 1, 2014, through March 26, 2015, 867 routine inspections were conducted at SQG, LQG, RCRA-LQG, and TP facilities. More specifically, 20 inspections were conducted at RCRA-LQG facilities, 33 inspections at TP facilities, and 814 inspections at SQG/LQG facilities. A current list of the 1,334 facility programs that are overdue for inspection has been provided as requested.

	Total facilities	Due for Inspection as of 1/1/2015	Inspections conducted from 8/1/2014 through 3/26/2015
Total HWG	6046	1334	867
SQG/LQG	5928	1303	814
RCRA-LQG	118	17	20
TP	164	14	33

The PA's plan to ensure that hazardous waste facilities are inspected at least once every three years includes the following elements and considerations:

- The PA will continue to hire new staff as soon as possible as allowed by County practices and requirements. The PA just completed training of seven new inspectors this month (13 last year) and

anticipates losing as many as 15 inspectors next year due to retirements. The training of new staff, which involves an eight week hazardous materials specialist “academy” (followed by close field mentoring), also adds to a decrease in staff productivity.

- The PA recognizes that with full staffing, it can and will meet all inspection mandates. However, when staff vacancies create a “backlog” of overdue inspections, “catching up” while new overdues are continually created presents a significant challenge. The PA has had several efforts looking at streamlining inspection activities, efficiencies in inspection processes, reassigning inspection type activities to other staff on a permanent basis, such as emergency operations staff when not “on duty”, and temporarily assigning inspection activity to other PA staff.
- The PA also has had several major efforts to identify unpermitted facilities as indicated (“no previous activity”) in the attached list of overdue facilities. While these efforts are necessary and “level the playing field” for the permitted facilities, it does add to the backlog of overdue inspections.
- The PA has reviewed and updated its monthly monitoring of inspections to ensure businesses are inspected once every three years.
- The PA has developed a monitoring and implementation plan to ensure that all high risk facilities are given inspection priority. For example, facilities which pose a lower risk, such as fire stations and cell sites, would be inspected at a later date.
- The PA is also exploring other options to address inspections of low-risk facilities as this program element has no statutory inspection frequency.
- The PA has developed a monitoring and implementation plan to ensure the oldest of the overdues, especially high risk facilities, are given priority.

There were a couple of errors that were noted in the summary by DTSC using the lists provided by the PA during the evaluation. They are as follows:

TP/RCRA LQG:

- One out of 12 RCRA LQGs had not been inspected in over six years.
This summary should have stated that one out of seven recyclers had not been inspected in over six years. There were no RCRA LQGs that had not been inspected in over six years on the provided list.
- Four out of 12 RCRA LQGs had not been inspected in over four years.
This summary should have stated that two out of eight RCRA LQGs and three out of seven recyclers had not been inspected in over four years.

The five facilities noted from the file review that had not been inspected within the last three years were all inspected during the month of March 2015. These inspection reports can be provided upon request. One of the facilities on the list, Andrews International, is located in Burbank, which is not in the jurisdiction of the City of Los Angeles.

PA is to submit quarterly reports to the CUPA on the progress of HWG inspections, including a list of facilities with overdue inspections.

The total number of HWG facilities that need to be inspected is, total number of HWG facilities inspected January 2015 through March 2015 is:

Attachment 6 contains list of facilities with overdue inspections.

Evaluation Team Response:

11.	DEFICIENCY:	CORRECTIVE ACTION:
	The CUPA is not certifying every three years that it has conducted a complete review of its Area Plan. The last revision is dated February 2009.	The CUPA has received a grant to revise this Area Plan the term of the grant is November 1, 2014 – September 30, 2015.

		By September 30, 2015, the CUPA shall submit a certified copy of the Area Plan Revision to CalEPA and Cal OES for review.
--	--	---

Deficiency Progress Update 1:

Activities to date: Collection of associated City and regional plans, documents, and policies including GIS mapping, as well as data on 5-year hazardous materials incident history.
Consultant's review of these documents..

Evaluation Team Response:

12.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not inspecting all of the Aboveground Petroleum Storage (APSA) tank facilities, which store 10,000 gallons or more of petroleum, at least once every three years.</p> <p>22 out of 207 APSA regulated facilities have been inspected in the last three years.</p>	<p>The CUPA will prepare and implement an action plan to address this deficiency. The CUPA is encouraged to prioritize its inspections based on the level of risk posed by each tank facility. The action plan will be submitted with the April 23, 2015, update.</p> <p>By April 23, 2015, the CUPA will submit a status of the CUPA's activities to correct this deficiency, including a list of the tank facilities and the dates the facilities were inspected. The CUPA will also send copies of 10 completed reports from recently inspected APSA facilities to CalEPA.</p> <p>The CUPA will continue to provide quarterly updates of its progress towards meeting its inspection frequency for APSA facilities until this deficiency is corrected. The deficiency will be considered corrected when at least 90 percent of the facilities have been inspected within three years. CalEPA and/or the OSFM may require copies of inspection reports, or an in-person review of the CUPA's records prior determining this deficiency corrected.</p>

Deficiency Progress Update 1:

The Los Angeles City Fire Department CUPA has identified 134 facilities that store 10,000 gallons or greater of petroleum. The LAFD CUPA prioritized the inspection of those facilities based on risk (volume of petroleum and proximity to navigable waters). During the fourth quarter of FY 2013/2014, 28 AST facilities were inspected.

The LAFD CUPA anticipates to have inspected over 100 facilities during the FY 2014/2015 and the remainder of the APSA facilities will be inspected during the first quarter of FY 2015/2016.

A list of APSA facilities inspected to date together with the copies of 10 recently completed inspection reports are provided in Attachment 7.

Evaluation Team Response:

13.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not ensuring full access to, and the availability of, the hazardous materials business plan information to its first responders.</p>	<p>By April 23, 2015, the CUPA will meet with its first responders and ensure that all business plan information from all sources (paper files, CERS, and Envision Connect) is provided to them in an agreed</p>

<p>The CUPA stores its business plan information in paper files, Envision data management system, and CERS. Only Envision Connect is readily available or accessible to the first responders on an annual basis. The CUPA submits a CD from Envision annually, but does not provide access or copies of hazardous materials business plan information from either the CUPA's paper file copies or CERS to its first responders.</p>	<p>upon timeframe and format.</p> <p>In addition, by April 23, 2015, the CUPA will provide a status of this deficiency, including a list of agencies, the meeting date(s), and confirmation that agreement has been reached regarding the timeframe and format for providing business plan information.</p>
---	---

The CERS system is now capable of providing access to Emergency Response module and the lead user for LAFD has been identified. The following procedures are still in place:

- 1) Inventory information will continue to be downloaded on a disc to be uploaded onto the MFC dispatch computer.
- 2) A 2nd disc will be provided to the HazMat Team for information purposes.
- 3) There will be an on-call Inspector who will be able to access any additional information that will be needed for any hazardous material spill/release.

Evaluation Team Response:

14.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not adequately evaluating its Participating Agency (PA) performance to ensure that LA County Fire Department PA meets the minimum requirements described in the Unified Program Application.</p> <p>Specifically, the CUPA did not review the PA's inspection frequency, compliance with the memorandum of understanding (MOU), request fee accountability documentation, or current I & E plan during the last PA audit.</p> <p>The CUPA reviewed only seven files out of 6,183 hazardous waste generator files. The CUPA did not diversify its review to cover each type of industry.</p> <p>The CUPA did not review any tiered permitting files. Los Angeles City, as a CUPA has the most amount of tiered permitting facilities in the state.</p>	<p>In November 2014, the CUPA underwent training in the basics of the Hazardous Waste Generator/Tiered Permitting Program to prepare the CUPA for future PA performance evaluations.</p> <p>By April 23, 2015, the CUPA will evaluate the PA's performance and take into consideration requirements of implementing the hazardous waste program and the MOU. The CUPA will submit its findings, as well as a copy of the CUPA's annual self-audit to CalEPA.</p>

Deficiency Progress Update 1:

For PA Evaluation and Preliminary Findings, see Attachment 8.

Evaluation Team Response:

15.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not ensuring that inspectors receive health and safety training required</p>	<p>By April 23, 2015, the CUPA will provide or ensure technical staff attends health and safety training. The</p>

	for CUPA technical staff.	CUPA will send certificates or a class roster and agenda demonstrating that staff attended/completed the training, and specifying the subject matter covered.
--	---------------------------	---

Deficiency Progress Update 1:

All inspectors have been extensively trained on the use of the required FIS, which ensures the consistent documentation of observations, the factual basis of violations, and the required corrective action to be taken. This training was held several times during the month of August 2014. Five samples of facility inspection reports from the North and Central offices have been provided as requested.

16-hour Health & Safety Training, provided by UCLA Education & Research Center, was completed by all members excluding three (IOD, SK, retiring) on January 6-7, 2015. For Class Roster, Agenda and Training Certificates see Attachment 9.

Evaluation Team Response:

16.	DEFICIENCY:	CORRECTIVE ACTION:
	In some cases, elements that are required by statute, such as factual basis of violations and corrective actions are not included in the Los Angeles County PA's HWG inspection reports provided to the facility.	By April 23, 2015, the PA will provide five examples of facility inspection reports from the North and Central offices that include all observations made at the facility, all alleged violations, the factual basis for the violations, code citations, and any corrective actions necessary.

Deficiency Progress Update 1:

All inspectors have been extensively trained on the use of the required FIS, which ensures the consistent documentation of observations, the factual basis of violations, and the required corrective action to be taken. This training was held several times during the month of August 2014. Five samples of facility inspection reports from the North and Central offices have been provided as requested.

For Facility Inspection reports see Attachment 10.

Evaluation Team Response:

17.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA and PA are not coordinating the annual review and update of the CUPA's fee accountability program and Inspection & Enforcement Plan (I & E Plan).</p> <p>The CUPA does not appear to be consulting and reaching consensus with the PA prior to making changes to the CUPA's I & E Plan that may affect program elements for which the PA is responsible. Although the CUPA reviewed its I & E Plan, implementation requirements for and changes relevant to the Hazardous Waste Program have not been incorporated.</p> <p>The CUPA's I & E Plan states the following on page 15, subsection g: HSC Chapter 6.5 Section 25192 <i>"Class I violations require that formal</i></p>	<p>By July 23, 2015, the CUPA will review its entire I & E Plan and update it as needed.</p> <p>By July 23, 2015, the CUPA, in coordination with its PA, will revise its I & E Plan to include the administration of the HWG/TP program element. If adopting LA County Fire Department's I & E Plan for the HWG programs the CUPA should at minimum incorporate by reference and keep the Plan onsite and available upon request.</p> <p>The CUPA will include an update of its fee accountability program with its annual self-audit report, due by September 30, 2015. The fee accountability program update will include a discussion of the necessary and reasonable costs of the hazardous waste program as implemented by the PA.</p>

enforcement action be taken according to the State Response Policy. Class II violations may be enforced by formal or informal enforcement actions. Minor violations require that a Notice to Comply be prepared pursuant to HSC Section 25187.8."

The Enforcement response policy is no longer valid since the penalty regulations became effective in 2001.

The CUPA's I & E Plans states the following on page 18:

"DTSC is currently reporting SNC information to the federal EPA from information submitted by CUPAs from the waste generator inspections."

DTSC is not reporting SNC information separately to EPA. Once CUPAs update its I & E information into CERS, the information will be uploaded to RCRAInfo (EPA's database) and EPA will be able to extract SNC information themselves.

The CUPA's I & E Plans says the following on page 20:

"A class I violation committed by a chronic or a recalcitrant violator, as provided in Section 25117.6 "

The correct section to cite is 25110.8.5.

page 4 section J:

Hazardous Waste Generator Inspection Program

"See L. A. County Fire Department Inspection and Enforcement Plan"

As noted above, LA City CUPA's I & E plan has adopted LA Co Fire Department's I & E plan by reference.

Appendix VI is missing inspection reports for the hazardous waste and tiered permitting programs.

Deficiency Progress Update 1:

The CUPA, in coordination with its PA, is in a process of revising the I & E Plan to include the administration of the HWG/TP program element and adopting LA County Fire Department's I & E Plan for the HWG programs. CUPA will incorporate PA's I & E Plan by reference and keep the CUPA's I & E Plan available upon request.

Evaluation Team Response:

18.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA was unable to demonstrate if they are investigating complaints referred by DTSC as stated in its I & E plan.</p> <p>On July 31, 2014, the CUPA was unable to demonstrate that DTSC referred complaints were investigated by the PA.</p>	<p>The CUPA will immediately start following its I & E plan and follow up with complaints referred by DTSC.</p> <p>By April 23, 2015, the CUPA will provide follow up documentation for the outcome of the following complaints referred by DTSC:</p> <ul style="list-style-type: none">• 14-0414-0208• 14-0314-0126• 13-0813-0609• 14-0114-0075• 13-1013-0675• 13-0413-0282• 12-0812-0465• 12-0112-0059

Deficiency Progress Update 1:

Complaint summary reports have been provided for the following:

14-0414-0208 – PA Report # CO0027829

14-0314-0126 – PA Report # SR0027460

13-0813-0609 – PA Report # CO0025750

12-0812-0465 – PA Report # CO0027881

12-0112-0059 – PA Report # CO0028045

The PA has not received the following complaints from the CUPA or DTSC:

13-1013-0675

13-0413-0282

The following complaint was referred back to DTSC since it was not under the PA's jurisdiction:

14-0114-0075

See Attachment 13.

Evaluation Team Response:

19.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA did not report quarterly inspection, violation, and enforcement information for each program element to CalEPA through the Decade Envision Connect local information management system or CERS.</p> <p>The CUPA did not report inspection, violation, and enforcement information for the entire 2013/2014 fiscal year by July 30, 2014.</p>	<p>The CUPA will prepare and implement an action plan to address this deficiency. The action plan will be submitted with the April 23, 2015 update.</p> <p>This deficiency will be considered corrected when the CUPA reaches the 90% percentile of inspection, violation, and enforcement information provided through the Decade Envision Connect local information management system or CERS for each program element.</p>

Deficiency Progress Update 1:

Pending the Cal/EPA response to LAFD letter dated February 25, 2015 (Attachment 12).
--

Evaluation Team Response:
