

Agricultural Research Service Environmental Management System Declaration of Conformance Protocol

Purpose: This document establishes the protocol for Environmental Management System (EMS) Declaration of Conformance within the Agricultural Research Service (ARS).

Background: Executive Order (E.O.) 13423, "Strengthening Federal Environmental, Energy, and Transportation Management," which supersedes E.O. 13148, requires "appropriate facilities," to develop and implement an EMS by December 2008. ARS Headquarters, Area Offices and Locations have been designated "appropriate facilities" and are required to have an EMS in place.

An important component of a successful EMS is declaration of conformance, which is a public statement that a facility conforms to nationally accepted standards. Declaring conformance of an EMS can help assure stakeholders, the general public, and surrounding communities, of our commitment to sound environmental management. Additionally, many States have recognition programs that provide increased regulatory flexibility for facilities with an EMS.

Policy: It is ARS policy that each facility declares that their EMS conforms to the International Standards Organization (ISO) 14001 standard. Facilities in non-conformance will develop an action plan and correct the deficiency(s) in a timely manner.

Roles and Responsibilities: EMS roles and responsibilities are in ARS Manual 230.0M, "Safety, Health, and Environmental Management Program." Additional EMS guidance can be found in the "ARS EMS Implementation Guide". Both documents are located at the ARS Administrative and Financial Management webpage at <http://www.afm.ars.usda.gov/>.

ARS Standards: The Agency has developed the Declaration of Conformance Protocol and attached Checklist to assist Locations in conforming to the ISO 14001 standard.

To utilize ARS' Declaration of Conformance Checklist, Auditor(s) will have received, at a minimum, basic EMS training. Auditors should respond "yes", "no" or indicate "not applicable" under the Comments column. Auditors should provide the source(s) of information used for answering each question. If the facility answers "no" to a question, milestones for correcting the deficiency should be developed in the "Corrective Actions with Milestones" sections provided. Corrective actions should be completed no later than July 1st of each year following the annual EMS declaration of conformance. The EMS Declaration of Management Review form at the end of the checklist should then be completed, summarizing the findings of the EMS audit. The Senior Management Official at the facility (e.g., Research Leader, Center Director, etc.) will review the checklist and sign the EMS Declaration of Management Review form.

Other Standards: Facilities desiring to declare conformance using other methods are acceptable as long as the requirements are at least as stringent as ISO standards.

Reporting: Annually, each facility will report on the EMS declaration of conformance activities that have taken place during the past calendar year. Locations will provide a copy of the ARS EMS Declaration of Management Review to the Area Office. Areas will consolidate the information into a summary report for the Facilities Division, Safety, Health and Environmental Management Branch (SHEMB). SHEMB will consolidate the Area information into the overall Agency report for the Department. Additionally, each Area will provide a follow-up report to FD, SHEMB, by July 30th of each year indicating the status of corrective actions at each of its facilities.

Evaluation: SHEMB and Area Offices will utilize the information to develop a plan for providing assistance, conducting higher level audits, and enacting system improvements.

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SECTION 1. Maintaining a Policy of Commitment to Environmental Excellence

QUESTION:	YES	NO	Source of Y/N Conclusion			Comments
			Document	Interview	Personal Observation	
1.1 Has the Location developed an EMS policy statement specific to its mission and environmental activities?	X					
1.1.1 Does the policy statement contain, at a minimum, a commitment to environmental compliance, pollution prevention and conservation practices, and continual improvement?	X					
1.2 Has the policy statement been signed by the current Senior Management Official at the Location?	X					
1.3 Is the policy statement reviewed annually and updated if necessary?	X					
1.4 Have efforts been made to communicate the policy statement to employees and contractors at the Location?	X					
1.5 Is the policy statement available to the public (e.g., by posting on a bulletin board in a publicly accessible location or posted to the Location web page)?	X					

Corrective Action with Milestones. For each question marked "No" above, please reference the question number and provide a description of the corrective action(s) to be taken along with the anticipated completion date(s).

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SECTION 2. Considering environmental impacts when making policy, planning, purchasing, and operating decisions.

QUESTION:	YES	NO	Source of Y/N Conclusion			Comments
			Document	Interview	Personal Observation	
2.1 Has the facility established a written procedure to identify its significant environmental aspects and impacts?	X					
2.2 Has the facility identified and/or reevaluated its significant environmental aspects and impacts this calendar year?	X					

Corrective Action with Milestones. For each question marked "No" above, please reference the question number and provide a description of the corrective action(s) to be taken along with the anticipated completion date(s).

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SECTION 3. Identifying and Complying with Pertinent Requirements in Federal, State, and Local Laws and Regulations; Permits; Department of Agriculture and ARS Policies and Procedures; and Industry Codes That We Must Adhere To

QUESTION:	YES	NO	Source of Y/N Conclusion			Comments
			Document	Interview	Personal Observation	
3.1 Does the facility have a written procedure to identify and access applicable regulatory requirements, policies, and standards?	X					Through area office
3.2 Are applicable legal and other requirements (e.g., Departmental guidance, ARS P&Ps, FAR, and Executive Orders) taken into account as part of the implementation and maintenance of the facility's EMS?	X					

Corrective Action with Milestones. For each question marked "No" above, please reference the question number and provide a description of the corrective action(s) to be taken along with the anticipated completion date(s).

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SECTION 4. Developing Annual Goals, Objectives, and Targets to Advance Our Program Performance in Terms of Both Regulated and Unregulated Impacts

QUESTION:	YES	NO	Source of Y/N Conclusion			Comments
			Document	Interview	Personal Observation	
4.1 Has the facility developed measurable annual goals and objectives?	X					
4.1.1 Are the goals and objectives documented and based in part on: <ul style="list-style-type: none"> • Significant environmental impacts associated with facility and research-related operations; • Deficiencies noted by employees discovered during day-to-day monitoring activities; • Regulatory issues and trends discovered during internal and external inspections, reviews, or audits; • Pollution prevention and conservation initiatives; and/or, • Agency-wide emphasis programs, including the new sustainable practices goals in Section 2 of Executive Order 13423. 	X					
4.1.2 Have goals and objectives been approved and endorsed by the Senior Management Official at the facility?	X					
4.2 Have the goals and objectives been prioritized based on guidance in the ARS EMS Implementation Guide or some other prioritization method the facility has developed?	X					
4.3 Have responsibilities for goals and objectives been assigned?	X					
4.4 Have milestones for completion been established?	X					
4.5 Is progress towards achieving milestones reviewed periodically and documented?	X					

Corrective Action with Milestones. For each question marked "No" above, please reference the question number and provide a description of the corrective action(s) to be taken along with the anticipated completion date(s).

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SECTION 5. Requesting the Necessary Resources to Successfully Carry Out Our Goals, Objectives, and Targets

QUESTION:	YES	NO	Source of Y/N Conclusion			Comments
			Document	Interview	Personal Observation	
5.1 Has an individual been delegated authority and assigned overall responsibility for the EMS (i.e., EMS Coordinator) by the Senior Management Official at the facility?	X					
5.2 Has an EMS Committee been established by the Senior Management Official at the facility?	X					
5.3 Has the establishment of the EMS Coordinator and EMS Committee been documented in writing via ARS Form 309 or through some other means?	X					
5.4 Has the EMS Committee met on a recurring basis (i.e., not less than three times per year)?	X					
5.5 Has the Senior Management Official at the facility dedicated other resources (e.g., financial, materials, equipment) to support the facility's EMS efforts?	X					
5.6 As necessary, has the facility requested, through the Annual Resource Management Plan (ARMP) budget process, funding and resources needed to: prevent or correct human health issues; prevent or clean up environmental releases; correct compliance issues or violations; ensure continued compliance with new regulatory requirements; and, support pollution prevention, conservation initiatives, including resources for the new sustainable practices goals in Section 2 of EO 13423, and other projects that will enhance the overall environmental program?	X					
5.7 Where environmental projects have been identified in the ARMP High Priority Requirements List (HPRL), has the compliance status been identified in the project narrative, and for pollution prevention and conservation projects, has a cost payback period or the environmental benefits been included in the project narrative, to ensure they receive appropriate consideration.	X					

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SECTION 5. Requesting the Necessary Resources to Successfully Carry Out Our Goals, Objectives, and Targets

Corrective Action with Milestones. For each question marked "No" above, please reference the question number and provide a description of the corrective action(s) to be taken along with the anticipated completion date(s).

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SECTION 6. Making Personnel Aware of Their Environmental Roles and Responsibilities, Providing Appropriate Training, and Holding Employees Accountable for Their Performance and Actions, Including Recognizing Them for Outstanding Performance

QUESTION:	YES	NO	Source of Y/N Conclusion			Comments
			Document	Interview	Personal Observation	
6.1 Do the EMS Coordinator and other key personnel who have a critical role in carrying out the facility's EMS have environmental duties in their performance plan? "Key" personnel may include employees who must adhere to environmental regulations through licenses, training, etc. Examples could include: Incinerator Operators, Pesticide Applicators, Wastewater Treatment Operators, and Water System Operators.	X					
6.2 Are the performance ratings of the EMS Coordinator and other key personnel who have a critical role in carrying out the facility's EMS based in part on their environmental duties?	X					
6.3 Is there a written procedure in place to ensure that employees receive EMS awareness training?	X					
6.4 Have current and newly hired employees received EMS awareness training?	X					
6.5 Does the facility have a written procedure to identify environmental training requirements/needs for each position at the facility?	X					
6.6 Are environmental training requirements/needs documented and tracked via Individual Development Plans (IDPs), ARS Form 48, or equivalent?		X				
6.7 Has completed environmental training been documented?	X					

Corrective Action with Milestones. For each question marked "No" above, please reference the question number and provide a description of the corrective action(s) to be taken along with the anticipated completion date(s).

6.6 EMS is a required training and not left to an optional IDP. However, training records are kept to ensure that everyone at this location is trained annually.

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SECTION 7. Effectively communicating with employees, partners, stakeholders, customers, and the general public, our commitment to the environment and soliciting their input in developing and achieving our goals and objectives.

QUESTION:	YES	NO	Source of Y/N Conclusion			Comments
			Document	Interview	Personal Observation	
7.1 Does the facility have a procedure for communicating reportable events (e.g., fatalities, environmental spills, external regulatory inspections or NOVs, etc.) within the organization (i.e., to the Senior Manager at the facility and the next higher level of management)?	X					This should go through the LAO office.
7.2 Does the Location have an Occupant Emergency Plan or COOP that establishes procedures to identify and respond to emergency situations?	X					
7.3 Does the facility periodically test and document such emergency procedures?		X				
7.4 Does the facility have a documented procedure on dealing with communications (e.g., local community concerns, FOIA requests, regulatory agency requests, etc.) from external parties?	X					This should go through the LAO office.

Corrective Action with Milestones. For each question marked "No" above, please reference the question number and provide a description of the corrective action(s) to be taken along with the anticipated completion date(s).

7.3 The facility should have emergency testing for fires, etc. but this hasn't happened in some time.

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SECTION 8. Routinely Monitoring Our Environmental Operations and Conducting Periodic Inspections, Audits, and Reviews to Ascertain That We Meet Applicable Standards and to Evaluate Our Program Effectiveness

QUESTION:	YES	NO	Source of Y/N Conclusion			Comments
			Document	Interview	Personal Observation	
8.1 Does the facility maintain procedures for monitoring and measuring operations of significant environmental impacts (e.g., energy usage, water usage, toxic and hazardous materials usage, etc.)?	X					
8.2 As required by Agency policy, has the facility conducted an annual compliance inspection (e.g., ARS Inspection/Abatement Program) that includes an environmental component in the current fiscal year?	X					Performed during the annual safety inspection, by the CDSO.
8.3 Have written report(s) of compliance inspections / audit findings been provided to the Senior Management Official at the facility?	X					

Corrective Action with Milestones. For each question marked "No" above, please reference the question number and provide a description of the corrective action(s) to be taken along with the anticipated completion date(s).

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SECTION 9. Correcting Identified Deficiencies in a Timely Manner and Taking Appropriate Steps to Prevent Their Recurrence

QUESTION:	YES	NO	Source of Y/N Conclusion			Comments
			Document	Interview	Personal Observation	
9.1 Does the facility have a written procedure for ensuring that deficiencies are corrected?	X					
9.2 Have deficiencies been corrected in a timely manner or has a corrective action plan been developed for long-term improvements?	X					
9.3 Have corrective actions been documented?	X					
9.4 Do the findings identify the root cause of deficiencies and the procedures/actions needed to prevent recurrence?	X					

Corrective Action with Milestones. For each question marked "No" above, please reference the question number and provide a description of the corrective action(s) to be taken along with the anticipated completion date(s).

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SECTION 10. Clearly Documenting and Reporting the Progress and Achievements Related to This Policy

QUESTION:	YES	NO	Source of Y/N Conclusion			Comments
			Document	Interview	Personal Observation	
10.1 Has measurable EMS performance information been identified, collected, and provided to allow the Senior Management Official to carry out an annual EMS review?	X					The EMS Coordinator collects the data and writes the report which is submitted to the Senior Management Official.
10.2 Does the Senior Management Official at the facility annually evaluate the progress made on implementing the EMS?	X					
10.3 Did the Senior Management Official at the facility respond to recommendations for continual improvement and are the Senior managers aware of any external EMS communications, including complaints?	X					
10.4 Does the facility have a written record and document control system explaining where EMS documents will be legible, kept, maintained/updated, stored?	X					

Corrective Action with Milestones. For each question marked "No" above, please reference the question number and provide a description of the corrective action(s) to be taken along with the anticipated completion date(s).

ARS Environmental Management System Declaration of Management Review Form v2008

Facility Information. Tifton, GA Location: Crop Protection and Management Research Unit, Crop Genetics and Breeding Research Unit, and Southeast Watershed Research Unit

Facility Name: _____

City: Tifton State: GA Zip Code: 31794

Type of Audit. Please check only one:

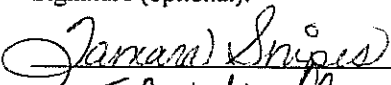
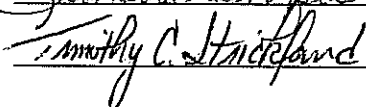
1st party. An internal evaluation conducted by the participants within the scope of the EMS under consideration (e.g., EMS Coordinator, EMS committee members, etc.)

2nd party. An independent evaluation conducted by reviewers from outside the scope of the EMS under consideration (e.g., other Agency personnel, Contractors, Regulators, etc.) has determined the EMS is / is not in conformance.

3rd party. An independent evaluation conducted by an American National Standards Institute – Registrar Accreditation Board. This formal process is conducted in conformance with ISO 14001 Standards (i.e., for facilities that elect to use this standard.) This results in the facility being fully ISO 14001 certified.

A 2nd party audit has not yet been conducted; therefore, conformance cannot be declared.

Reviewer(s):

Name (print):	Title:	Signature (optional):
<u>Tamara Snipes</u>	<u>Chemist/EMS Coordinator</u>	
<u>Dr. Timothy C. Strickland</u>	<u>Location Coordinator</u>	
_____	_____	_____
_____	_____	_____

Corrective Actions. For each question answered “No” in the above checklist, please list the question number for the deficiency and the anticipated corrective action date (e.g., Q 6.1 - 05/01/06). Deficiencies should be corrected by no later than July 1st.

Attestation: As the Senior Management Official, I certify that I have reviewed the information that is being submitted and determined that it is complete, factual, and accurate.

Name (print): _____ Title: _____ Signature: _____