EPA Audit Policy Initiative:

The Healthcare Sector



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Overview

EPA's Audit Policy (including discussion of audit agreements)

Audit Initiatives

EPA Region 2's Healthcare Sector Initiative



Integrated Strategy

Provide environmental assistance to healthcare facilities.

 Encourage healthcare facilities to perform voluntary compliance audits and enter into corporate audit agreements.

http://www.epa.gov/region02/capp/cip

Conduct inspections and take enforcement, if necessary.



Elements of an Environmental Initiative

- Identifying Sectors for Regulatory Attention
- Cooperation with State Agencies
- ComplianceAssistance
 - Mailings
 - Workshops
 - Internet information

- ComplianceIncentives
 - Self-audit/Selfdisclosure policies
 - Reduced inspections
 - Favorable publicity
- Targeting
- Enforcement

Current & Past Regional and HQ Self-Audit Initiatives

- University/College R1, R2, R9
- Chemical Industry R1
- Healthcare R2
- POTW/MOM R4
- Wetlands R4
- Minimills R5
- EPCRA 313 cap R5
- Continuous Release R7
- Rock Crushers R7

- TSCA (VADEN) HQ
- Pork Producers HQ
- Telecom HQ
- TSCA 8a HQ
- Industrial Org Chem HQ (& Regs)
- Airlines HQ



Environmental Assistance

- Held twelve regulatory and pollution prevention workshops.
- Establish focus groups in NY, NJ, & Caribbean
- Develop compliance assistance tools http://www.epa.gov/region02/healthcare



EPA Region 2 Audit Initiatives

Colleges and Universities

Healthcare

Basis for Healthcare Initiative

- A high rate of noncompliance has been identified at healthcare facilities.
- Significant environmental releases have been identified at healthcare facilities.
- Healthcare facilities have received relatively little attention from environmental regulatory agencies, when compared to similar institutions.
- "Level playing field" for healthcare facilities.

Basis for Healthcare Initiative

- Source of toxic chemicals such as phthalates, and persistent, bioaccumulative toxics (e.g., mercury and dioxin);
- Generators of a wide variety of hazardous wastes;
- Produce two million tons of solid waste;
- Contribute to air pollution (e.g., smog, air toxics, depletion of ozone layer); and
- Not complying with environmental requirements.



Goals

- Hospitals will comply with environmental requirements.
- Hospitals will develop Environmental Management
 Systems http://www.epa.gov/region02/erns
- Mercury-containing waste will be eliminated from the hospital waste stream by 2005.
- The volume of all hospital waste generated will be cut in half by 2010.



Audit Policy

- EPA issued a Voluntary Audit Policy in 1995 to encourage regulated entities to voluntarily discover, disclose, correct, and prevent violations of federal environmental requirements.
- EPA Region 2's Audit Website http://www.epa.gov/region02/capp/cip



Purpose of the Audit Policy

- To enhance protection of human health and the environment by encouraging regulated entities to voluntarily discover, disclose, correct and prevent violations of federal environmental requirements.
- As incentive, EPA will forgo all <u>gravity-based</u> (non-economic benefit) penalties when the regulated entity satisfies <u>all policy conditions</u>.



The violation was identified voluntarily.



- The violation was discovered through:
 - an environmental audit; or
 - an environmental management system. http://www.epa.gov/region02/ems

(75% reduction possible otherwise)



Promptly disclose violations in writing to EPA (within 21 days of discovery)

In Region 2, send to:

Regional Administrator, EPA Region 2 c/o Compliance Assistance Section 290 Broadway New York, New York 10007-1866



Must promptly correct violations (usually within 60 days).

Correcting the violation includes remediating any environmental harm associated with the violation, as well as implementing steps to prevent a recurrence of the violation.



The Policy Excludes:

 Violations that result in serious actual harm or present an imminent hazard to public health, safety, or the environment

Repeat violations (within three years)



The Policy Excludes:

Violations identified through any legally mandated monitoring or sampling requirement prescribed by statute, regulation, permit, judicial/administrative order or consent agreement.



The Policy Excludes:

Violations that are part of a pattern of similar violations across a multi-facility organization within the past five years.

 Criminal violations of individuals (entities generally exempt).



Audit Agreements

• Audit agreements allow EPA and the 'company' to reach mutually acceptable terms regarding schedules for conducting the audit, and disclosing and correcting any violations discovered.



Steps to Negotiate an Audit Agreement

- Contact EPA for current model agreement.
- Submit commitment letter.
- EPA responds with a "low inspection priority" letter.
- Submit draft agreement.
- EPA discusses comments, if any, with facility.
- Draft agreement developed for final review.
- Final agreement signed.



Advantages of Audit Agreements

- "Low inspection priority" designation
- More time to disclose and correct violations
- Other flexibility can be built into agreement to meet needs
- Single point of contact for all environmental regulatory issues
- Partnering with EPA can result in good publicity



- St. Francis Hospital (the first Healthcare facility to sign)
- New Island Hospital
- Northern Westchester Hospital
- Wyckoff Heights Medical Center
- Bronx-Lebanon Health Center
- Musculoskeletal Transplant Hospital
- Mount Sinai Hospital & School of Medicine



- Rockefeller University Hospital
- St. Joseph's Hospital
- NY Presbyterian Hospital
- Winthrop University Hospital
- Mount Sinai Hospital
- Staten Island University Hospital
- St. Barnabas Hospital, NY
- Montefiore Medical Center



- Maimonides Hospital
- Normet
- St. Barnabas Health Care System, NJ
- St. Clare's Hospital
- Samaritan Hospital



- Alice Hyde Medical Center
- Columbia Medical Center
- Riverside Health Care System
- NYU and NYU Hospital Center
- UHS de Puerto Rico
- Meridian Hospital Corporation



Healthcare Facilities

- 24 Audit Agreements with healthcare facilities have already been signed.
- 17 healthcare facilities with Audit Agreements have submitted the results of their audits.
- In addition, 12 healthcare facilities have voluntarily disclosed violations under the Audit Policy.



Why Bother Self-Reporting? A Cost/Benefit Analysis

- Increased attention from Government if self-report
- We know you are there. More likely to get attention if don't report.
- Potential for economic benefit penalties
- Penalty much lower than would be assessed through enforcement. Limits circumstances under which EPA will prosecute criminally.



Why Bother Self-Reporting? — A Cost/Benefit Analysis

- Audit costs money
- Cost of conducting audit is much less than cost of paying penalties.
- May lose federal grants, contracts, and other funds if enforcement occurs.
- Bad publicity affects fundraising.



Why Bother Self-Reporting? — A Cost/Benefit Analysis

Must fix violations on a monitored schedule

 Periodic auditing can identify and correct problems before they become serious

- Must request and receive approval for extensions
- Auditing can identify wasted resources

Must implement measures to prevent recurrence Get a good night's sleep knowing that things are working as desired



Enforcement

- Unannounced inspections have been conducted at nine healthcare facilities in the Region, seven of which were found to be substantially out of compliance.
- Unannounced inspections will continue at hospitals (both single and multi-media).
- Appropriate enforcement will be taken from notice of violation to criminal prosecution.
- Implementation of a supplemental environmental project may reduce penalties. http://www.epa.gov/region02/p2/sep.htm



How to Disclose

Submit disclosure under the Audit Policy, in writing within 21 days of discovery.

or

 Submit disclosures pursuant to deadlines in a negotiated auditing agreement.



Common Violations — Hazardous Waste

- Improper or lack of HW labeling.
- No or improper weekly inspections of HW storage/satellite areas.
- Open containers of HW.
- Improper disposal of chemotherapy drugs.
- Failure to perform or improper HW determinations.
- No or inadequate HW manifests.



Common Violations — Hazardous Waste

- Improper management of mercury-containing wastes, expired pharmaceuticals, paints, etc.
- Lack of a contingency plan.
- Lack of or inadequate training of employees in HW management.
- Improper consolidation of wastes from nearby facilities.
- Failure to upgrade/close USTs by 12/22/98.
- Malfunctioning leak detection systems.



Common Violations – Air

- Failure to use properly trained and accredited asbestos personnel.
- Failure to notify EPA of asbestos removal projects and to keep required documentation/records.
- Failure to properly dispose of asbestos debris.



Common Violations – Air

- Failure to close parts washer lids when not in use.
- Failure to include spray paint booths and parts degreasers in air permit.
- Failure to maintain required records on refrigerant/air conditioning equipment.



Common Violations - Water

- No permit for wastewater discharges.
- No or inadequate secondary containment for storage tanks.
- Improper disposal down floor drains.
- No Spill Prevention, Control and Countermeasure Plan.



Common Violations – Lead Paint

 Failure to notify residents of lead paint in building or lack of knowledge of any lead hazard.

Failure to provide EPA's pamphlet, "Protect Your Family from Lead in Your Home."



Steps to Achieving and Maintaining Compliance

Ensure commitment from top management

Commit sufficient resources

Implement an Environmental Management System (EMS)



Steps to Achieving and Maintaining Compliance

Conduct periodic environmental compliance audits

Join Hospitals for a Healthy Environment http://www.h2e-online.org



EPA Region 2 Contacts

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For More Information

Visit our websites:
http://www.epa.gov/compliance/incentives/auditing/auditagree.html
http://www.epa.gov/region02/capp/cip/

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What's next?

Continue to focus on healthcare facilities

Continue to look at colleges and universities