

CHAPTER 75-1 - ENVIRONMENTAL AUDIT PROCESS

75-1.1 PURPOSE

This chapter designates the *Environmental Auditing Protocol* as the guidance for the IHS in implementing the environmental audit process.

75-1.2 BACKGROUND

The audit and remediation process is intended to bring IHS facilities into compliance with Federal environmental laws, regulations, Executive Orders, and other applicable criteria related to the environment.

75-1.3 GUIDELINES

The *Environmental Auditing Protocol* (latest version is available at http://www.dfo.ihs.gov/com_work/env_docs/IHSEnvironmentalAuditProtocol.doc) shall be used as the basis of the environmental audit process. This protocol applies to all facilities that IHS owns or leases regardless of who operates them and all facilities that IHS operates regardless of who owns them. Other facilities may use the protocol if they so desire.

If guidance for a particular situation is not found in the *Environmental Auditing Protocol*, more specific guidance should be sought for that particular situation from a source with more specialized knowledge related to the particular issue. All findings resulting from the audit shall be entered into the appropriate tab within HFDS and coded with the correct deficiency code.

Each Area OEHE Director shall appoint an Environmental Audit Coordinator (EAC) to coordinate the environmental audit process within their Area. The EAC's name shall be forwarded to the Environmental Coordinator, Division of Facilities Operations, HQ. The HQ Environmental Coordinator must be notified any time the role is assigned to a new person. The EAC and the Area Environmental Management System (EMS) Coordinator will assure that the Audit Process is an integral component of the Area Environmental Stewardship Plan.

Facilities shall be audited on a five-year cycle. All facilities must have their initial audit completed by September 30, 2014. Areas shall complete, for each calendar year, audits for approximately 20 percent of the facilities within their Area in a manner that ensures that an audit of each facility is completed at least once every five years. The appropriate fields in HFDS shall be updated. These include, but are not limited to, the date of the last audit, the date of the next planned audit, and any findings.