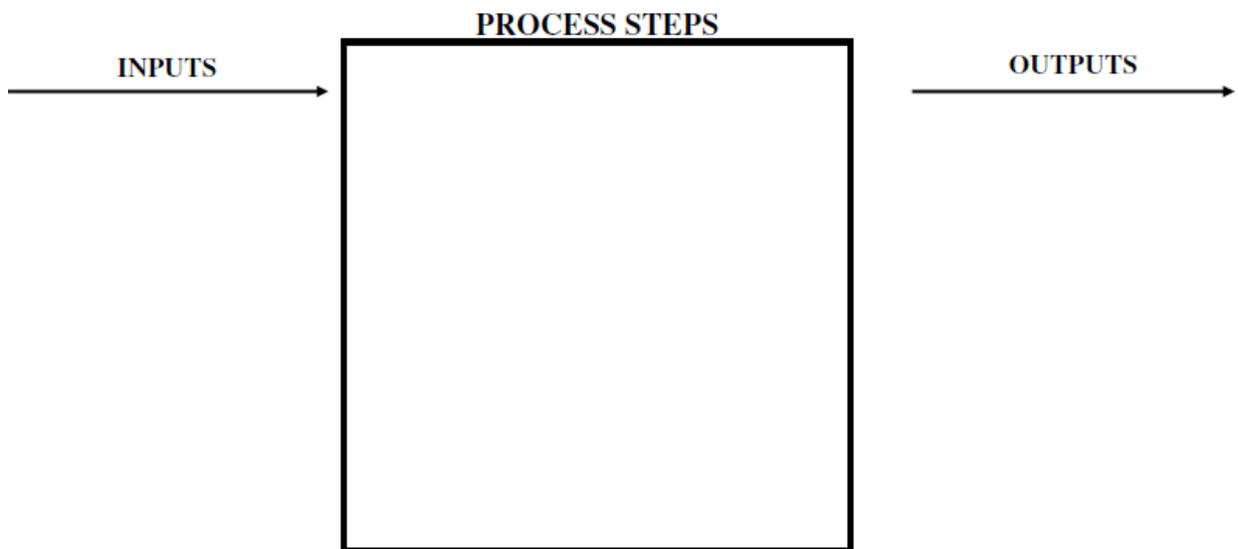


WORKSHOP: ENVIRONMENTAL ASPECTS

INSTRUCTIONS:

- Choose an example site/operations.
- List the environmental aspects (by input and output) for the key activities/processes.
- Identify the associated environmental impacts.
- Rank the aspects/impacts for significance using the criteria provided.

Major Activity / Operation: _____



Environmental Aspects/Impacts Scoring Criteria

	Frequency/ Occurrence (F)	Severity (S)	Regulatory (R)	Community Concern (C)
5	Ongoing or Daily	Severe/Catastrophic - Very harmful or potentially fatal	Regulated activity. Federal, state or local rules and regulations apply	High - Public outcry or lawsuits.
4	Weekly	Severe - Harmful but not potentially fatal	Likely to be regulated in future by federal, state, or local agency.	Serious - Serious community concern, political or activist inquiries, intense negative media.
3	Monthly	Moderate - Somewhat harmful	Industry, corporate, voluntary, or other non-regulatory requirements apply.	Moderate - Moderate community concern, some media coverage.
2	Quarterly	Mild - Little potential for harm	Best management practice (BMP) applies.	Minor - Some community concern, but very minor.
1	Annually or less	Harmless - No potential for harm	No requirements apply.	Little or No Concern - Community is ambivalent or unconcerned OR the community supports the activity.

Impact Categories

- AQ** Impact to Air Quality
- LQ** Impact to Land Quality
- WQ** Impact to Water Quality
- NR** Impact to Natural Resources
- HH** Impact to Human Health

WORKSHOP: AUDIT FOR OBJECTIVE EVIDENCE

The objective of this workshop is to evaluate the audit situations encountered and determine if a non-conformity exists. If not enough information has been provided to make a determination whether or not there is a nonconformity, what questions would you ask to obtain the necessary objective evidence?

1. When talking with the environmental management representative (EMR), the auditor asked how the EMS is reviewed to ensure its continuing suitability and effectiveness. The EMR responded that they conduct a management review meeting with the President's staff annually. The auditor requested documentation regarding the last review meeting. The EMR had to get the information from his files and returned with the EMS Review Report which was dated 3 weeks prior to the date of the audit.

2. The auditor then looked at a list of the identified significant environmental aspects that the EMR had previously provided. The auditor asked to look at the solvent usage aspect which was identified for the foil cleaning activities. He requested that they go out into the facility and look at the operation. The EMR hesitantly agreed, "Maybe we can talk with Ken Jones, the laminating line supervisor." Upon entering the cleaning area and meeting Ken Jones, the auditor asked how the foil cleaning is accomplished. Ken was eager to demonstrate the batch cleaning process that is used. The auditor asked Ken how often the solvent is replaced. Ken replied that it is changed out following each coil run. The auditor then asked Ken, "If I was a new employee, where would I go to find out how often to change the solvent?" Ken smiled and showed him the operating procedure for the cleaning line. The auditor then asked Ken to show him where in the procedure the information regarding solvent change out is listed. Ken looked through the procedure, but could not find where the information was mentioned.

3. The auditor then asked the EMR about the aspect of bulk storage of chemicals. The auditor wanted to know who is in charge of receiving the chemicals that are stored in the tanks. The EMR said, "We can meet Jim Boykin of Receiving." Prior to heading to the Tank Storage Area, the auditor asked to see the MSDSs for all of the chemicals stored there. On the way to the storage area, the auditor briefly reviewed the MSDSs. The auditor and the EMR arrived at the Tank Storage Area. The auditor was introduced to Jim Boykin who explained the process for the transfer of chemicals. Jim mentioned that the newest tank contains the C172 solvent. The auditor noted that C172 solvent was not in the MSDS he was given and was not on the aspect list. The EMR explained that they had started using C172 solvent after the aspect list was developed.

4. The auditor then asked what happens if there is a release during the filling of any storage tank. Jim Boykin explained exactly what he would do in such an event. The auditor then asked Jim what he would do differently since the tank contained C172 solvent. Jim said he didn't think he had to do anything different, but he wasn't sure. The auditor asked Jim where he could find this information. Jim mentioned that it might be in the Emergency Response Plan, but that he didn't think it had been updated.

5. Then the auditor showed Jim the list of environmental aspects. He asked Jim if there are any objectives and targets established for the storage of chemicals. Jim said that he wasn't aware of any objectives and targets. He went on to explain that the above ground storage tanks (ASTs) had been installed to mitigate any potential problems that could be caused by the underground storage tanks (UST). Jim said that as far as he knew, these tanks were as good as they get, so he didn't really see what other objectives they could have. The EMR mentioned that although they had considered the tank area a high priority and a significant environmental aspect, and had set objectives to improve the secondary containment capacity, management had not approved the program to develop secondary containment in the area. The auditor asked if the objectives and targets were re-evaluated when the new tank was added. The EMR said that they had not set any more objectives since the other ones had not yet been approved.

6. The auditor then asked the EMR how the facility ensures that the pipes, which carry the chemicals from the tanks to the facility, do not leak? The EMR responded that the pipes were tested and inspected at the facilities semi-annual shutdown. The auditor asked when the last inspection was. The EMR responded that they would have to go see the maintenance records. They walked to the Maintenance Department where they met with Mike Hinkley. Mike showed the inspection and testing records to the auditor. The inspection had occurred in December, three months prior to the audit.

7. While in the Maintenance Department, the auditor asked Mike Hinkley if he could take a look at the procedure that encompasses this inspection. Mike handed the auditor a copy of a procedure which was marked as revision 3. The auditor asked Mike if there were any changes to this procedure due to the installation of the new solvent tank. Mike mentioned that there had been changes made. He looked through the auditor's copy of the procedure to show him the changes, but then he said, "Oh yeah, they aren't in that copy. The changes are here in this copy." Mike then handed the auditor a procedure which was marked as revision 4.

8. Then the auditor asked Mike if he knew about the potential consequences of departing from the procedures. Mike explained that there are a great number of safety concerns to be considered. Mike mentioned that he had been OSHA trained. The auditor thanked Mike for his time and asked the EMR to show him the training record. The auditor and the EMR went to Human Resources, where the records are kept. There they looked at Mike's file and found that he was OSHA trained, but that he had not received any other training. While in Human Resources, the auditor asked to look at Jim Boykin's training record. Jim, also, was only OSHA trained.

9. The EMR and the auditor returned to the conference room. The auditor noticed that the procedure for the identification of legal and other requirements included the identification of these requirements by a subcontractor. The auditor asked how this is implemented on a continuous basis. "For example," he said, "What if a new law is passed, or if the facility undergoes a modification that changes its legal requirements?" The EMR responded by showing the auditor the part of the procedure that addresses the timing of the review of the facility's legal and other requirements.

10. The auditor then looked back to the list of environmental aspects. He asked to look at the lamination lines. The EMR said that they would page Ken Jones and meet him at Laminator #7. Ken explained the laminating process to the auditor. The auditor asked Ken if he knew any of the objectives of the Environmental Policy. Ken responded that one of the objectives was to prevent pollution.

11. Then the auditor asked Ken how the Environmental Policy relates specifically to the lamination operation. Ken stated that the EHS department had identified the disposal of used rags as an environmental aspect and that they had developed a program to facilitate the separation of used rags from the refuse. He said that as a part of that program, he had specific objectives that he had to meet by a certain date.

12. Then the auditor asked Ken what training he had received. Ken replied that he had been OSHA trained. The auditor again went to Human Resources and checked the records. Ken had been OSHA trained, but he had not received the required refresher course. While in Human Resources, the auditor asked the EMR to review the procedure of how training needs are identified. The EMR said that they require all employees to be OSHA trained. Beyond that they do not have any other mandatory training requirements.

13. The EMR and the auditor returned to the conference room. The auditor asked to see documentation of external communication. The EMR retrieved a file of all external communication. The auditor reviewed the file and asked about a letter that was addressed to Jim Boykin in Receiving. The letter was from a trucking company. It expressed concern about access to the storage tanks and difficulty in maneuvering the trucks. The auditor noted that there was no response letter in the file. The EMR said that they had not responded to the letter because there was nothing they could do about the situation.

14. While reviewing the list of objectives and targets that were developed for each of the environmental aspects, the auditor asked, “How do you implement these objectives and targets?” The EMR responded that he was in charge of the implementation. The auditor asked, “Well, how do the people on the floor know about the specific objectives and targets?” The EMR responded that there is an environmental program for each significant aspect. The way the programs work is that a team is formed to deal with the aspect. The team develops its schedule and assigns responsibility for execution of the work.

15. The auditor asked who is responsible for handling and investigating nonconformances. The EMR responded that she had been doing that but she recently delegated the task to a team of people. The auditor then asked to again review the procedure that defines responsibility for nonconformance and corrective action. The auditor noted that the procedure still defined the responsibility for investigating the nonconformance as belonging to the EMR.

WORKSHOP: CORRECTIVE ACTIONS – ARE THEY APPROPRIATE?

Please review the following corrective actions and state why or why not they are appropriate for the issues raised. Also, try to identify an appropriate Preventive Action for each.

CORRECTIVE ACTION REQUEST (CAR)	
DATE: 03/22/13	NCR NO: CAR1
NONCONFORMITY STATEMENT (to be completed by initiator): While auditing the ACME Aluminum Company, the management representative indicated that solvent C172 was not identified on the solvent aspect list because solvent C172 use commenced after the aspect list was developed. Information pertaining to environmental aspects that it has identified must be kept up-to-date. This is a nonconformity with ISO 14001, Section 4.3.1.	
IMMEDIATE FIX (to be completed by auditee or person responsible): Get MSDS sheets for C172.	
ROOT CAUSE (to be completed by auditee or person responsible): Procedure for identifying environmental aspects did not account for new chemicals.	
CORRECTIVE ACTION (to be completed by auditee or person responsible): Add C172 to aspects list.	
PREVENTIVE ACTION:	

CORRECTIVE ACTION REQUEST (CAR)	
DATE: 03/22/13	NCR NO: CAR2
NONCONFORMITY STATEMENT (to be completed by initiator):	
<p>While auditing the ACME Aluminum Company, the maintenance department indicated that Revision 4 was the latest version of the inspection procedure. Revision 3 of the documented procedure for chemical pipe inspection and testing was available for use and not marked as obsolete. An organization shall promptly remove all obsolete documents from all points of issue and use, or otherwise ensure against unintended use. This is a nonconformity with ISO 14001, Section 4.4.5.</p>	
IMMEDIATE FIX (to be completed by auditee or person responsible):	
<p>Get rid of the obsolete version of the procedure.</p>	
ROOT CAUSE (to be completed by auditee or person responsible):	
<p>Mike kept the old version of the procedure as his own copy because he referenced it often.</p>	
CORRECTIVE ACTION (to be completed by auditee or person responsible):	
<p>Add Mike to the list of recipients of controlled copies of the procedure.</p>	
PREVENTIVE ACTION:	

CORRECTIVE ACTION REQUEST (CAR)	
DATE: 03/22/13	NCR NO: CAR3
NONCONFORMITY STATEMENT (to be completed by initiator):	
<p>While auditing the ACME Aluminum Company, the management representative indicated that the organization had not responded to written communication from a trucking company concerning the maneuverability of trucks in the AST area. An organization shall establish and maintain procedures for receiving, documenting, and responding to relevant communication from external interested parties. This is a nonconformity with ISO 14001, Section 4.4.3.</p>	
IMMEDIATE FIX (to be completed by auditee or person responsible):	
N/A	
ROOT CAUSE (to be completed by auditee or person responsible):	
<p>Trucking company is always complaining about everything and, therefore, the MR had decided not to respond to them anymore.</p>	
CORRECTIVE ACTION (to be completed by auditee or person responsible):	
<p>Respond to the trucking company that there is nothing they can do about the situation.</p>	
PREVENTIVE ACTION:	