



June 3, 2022

Mr. Ronald Browder, Director Alameda County Department of Environmental Health 1131 Harbor Bay Parkway Alameda, California 94502-6577

Dear Mr. Browder:

During July 2021 through June 2022, CalEPA and the state program agencies conducted a performance evaluation of the Alameda County Department of Environmental Health Certified Unified Program Agency (CUPA). The CUPA evaluation included a remote assessment of administrative documentation, review of regulated facility file documentation, and California Environmental Reporting System data.

Upon completion of the evaluation, a preliminary Summary of Findings report was developed to identify various findings: program deficiencies with corrective actions, incidental findings with resolutions and program observations and recommendations. The report also includes examples of outstanding Unified Program implementation. Enclosed, please find the final Summary of Findings report.

Based upon review and completion of the performance evaluation, CalEPA has rated the CUPA's overall implementation of the Unified Program as satisfactory with improvement needed.

To demonstrate progress towards the correction of program deficiencies and incidental findings identified in the final Summary of Findings, the CUPA must submit an Evaluation Progress Report within 60 days from the date of this letter (August 5, 2022), and every 90 days thereafter. Evaluation Progress Reports are required to be submitted to CalEPA until all deficiencies and incidental findings identified have been acknowledged as corrected or resolved. Each Evaluation Progress Report must be submitted to the CalEPA Team Lead, Kaeleigh Pontif, at Kaeleigh.Pontif@calepa.ca.gov.

Thank you for your continued commitment to the protection of public health and the environment through the implementation of the Unified Program.

To ensure the CUPA Performance Evaluation process is as effective and efficient as intended, I kindly request the included evaluation survey to be completed and returned to Melinda Blum within 30 days. If you would like to have specific comments remain anonymous, please indicate so on the survey.

If you have any questions or need further assistance, please contact Melinda Blum at Melinda.Blum@calepa.ca.gov.

Air Resources Board • Department of Pesticide Regulation • Department of Resources Recycling and Recovery • Department of Toxic Substances Control Office of Environmental Health Hazard Assessment • State Water Resources Control Board • Regional Water Quality Control Boards

Mr. Ronald Browder Page 2

Sincerely,

Jason Boetzer, REHS Assistant Secretary

Local Program Coordination and Emergency Response

**Enclosures** 

cc sent via email:

Ms. Aileen Mendoza CUPA Manager Alameda County Department of Environmental Health 1131 Harbor Bay Parkway Alameda, California 94502-6577

Ms. Emily Hoe Supervising Hazardous Materials Specialist Alameda County Department of Environmental Health 1131 Harbor Bay Parkway Alameda, California 94502-6577

Mr. Muhammed Khan Alameda County Department of Environmental Health 1131 Harbor Bay Parkway Alameda, California 94502-6577

Ms. Cheryl Prowell
Supervising Water Resource Control Engineer
State Water Resources Control Board
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Mr. Tom Henderson Engineering Geologist, UST Unit Coordinator State Water Resources Control Board P.O. Box 2231 Sacramento, California 95812-2231

Ms. Maria Soria Environmental Program Manager Department of Toxic Substances Control 700 Heinz Avenue, Suite 210 Berkeley, California 94710-2721 Mr. Ronald Browder Page 3

## cc sent via email:

Mr. Ryan Miya
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Mr. James Hosler, Chief CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Ms. Jennifer Lorenzo Senior Environmental Scientist (Supervisor) CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Mr. Sean Farrow Environmental Scientist State Water Resources Control Board P.O. Box 2231 Sacramento, California 95812-2231

Mr. Matt McCarron Senior Environmental Scientist, Specialist Department of Toxic Substances Control 700 Heinz Avenue, Suite 210 Berkeley, California 94710-2721

Mr. Glenn Warner Senior Environmental Scientist, Specialist CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Ms. Mary Wren-Wilson Environmental Scientist CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Mr. John Paine Unified Program Manager California Environmental Protection Agency Mr. Ronald Browder Page 4

cc sent via email:

Mr. John Elkins Environmental Program Manager California Environmental Protection Agency

Ms. Melinda Blum Senior Environmental Scientist, Supervisor California Environmental Protection Agency

Ms. Elizabeth Brega Senior Environmental Scientist, Supervisor California Environmental Protection Agency

Mr. Garett Chan Environmental Scientist California Environmental Protection Agency

Ms. Kaeleigh Pontif Environmental Scientist California Environmental Protection Agency





# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

**CUPA: Alameda County Department of Environmental Health** 

Evaluation Period: July 2021 through June 2022

**Evaluation Team Members:** 

• CalEPA Team Lead: Kaeleigh Pontif

• DTSC: Matthew McCarron

• Cal OES/CalEPA\*: Garett Chan

State Water Board: Jessica Botsford,

Sean Farrow

• CAL FIRE-OSFM: Glenn Warner,

Mary Wren-Wilson

This Final Summary of Findings includes:

- Program deficiencies
- Incidental findings requiring resolution
- Program observations and recommendations
- Examples of outstanding program implementation

The findings contained within this evaluation report are considered final.

Based upon review and completion of the evaluation, the Unified Program implementation and performance of the CUPA is considered satisfactory with improvement needed.

Questions or comments regarding this evaluation should be directed to the CalEPA Team Lead:

# Kaeleigh Pontif

CalEPA Unified Program Phone: (916) 803-0623

E-mail: Kaeleigh.pontif@calepa.ca.gov

The CUPA is required to submit an Evaluation Progress Report 60 days from the receipt of this Final Summary of Findings Report, and every 90 days thereafter, until all deficiencies and incidental findings have been acknowledged as corrected or resolved.

Each Evaluation Progress Report must be submitted to the CalEPA Team Lead and must include a narrative stating the status of correcting each deficiency and resolving each incidental finding identified in this Final Summary of Findings Report.

Evaluation Progress Report submittal dates for the first year following the evaluation are:

1<sup>st</sup> Progress Report: August 5, 2022 3<sup>rd</sup> Progress Report: February 13, 2023 4<sup>th</sup> Progress Report: May 15, 2023

\*Effective July 1, 2021, oversight of the Hazardous Materials Release Response Plans and Inventory and the California Accidental Response Prevention Program transitioned from Cal OES to CalEPA.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **DEFICIENCIES REQUIRING CORRECTION**

Program deficiencies identify specific aspects regarding inadequate implementation of the Unified Program. The CUPA must complete the corrective action indicated to demonstrate sufficient implementation of the Unified Program as required by regulation or statute.

## 1. DEFICIENCY:

The CUPA is not inspecting each Hazardous Waste Generator (HWG) facility once every three years, per the inspection frequency established in the Inspection and Enforcement (I&E) Plan.

Review of facility files, inspection, violation and enforcement information, also known as compliance, monitoring, and enforcement (CME) information from the California Environmental Reporting System (CERS) from October 1, 2018, through September 30, 2021, indicates:

• 497 of 1,357 (37%) HWG facilities were not inspected once every three years.

NOTE: A "stay at home" order was issued by Alameda County on March 17, 2020, in response to the COVID-19 pandemic. For purposes of this evaluation, 49% of the time period evaluated occurred before March 17, 2020. Prior to March 17, 2020, in order to meet the required inspection frequency for the time period evaluated, 665 HWG facilities would need to be routinely inspected. CERS indicates 577 of 665 (87%) routine HWG inspections were conducted. After March 17, 2020, while the "stay at home" order was in effect, in order to meet the required inspection frequency for the time period evaluated, 692 HWG facilities would need to be routinely inspected. CERS indicates 283 of 692 (41%) routine HWG inspections were conducted.

NOTE: CERS indicates there are nine CERS IDs that have duplicate inspections noted before and after the March 17, 2020, "stay at home" order was issued. The duplicate inspections are either multiple postings on one day or several routine inspections.

# **CITATION:**

California Code of Regulations (CCR), Title 27, Section 15200(a)(3)(A) [DTSC]

## CORRECTIVE ACTION:

By the 1<sup>st</sup> Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each HWG facility is inspected once every three years. The action plan will include, at a minimum:

 An analysis and explanation as to why the inspection frequency for the HWG program is not being met. Factors to consider include existing inspection staff resources and how many facilities each inspector is scheduled to conduct each year.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

## **DEFICIENCIES REQUIRING CORRECTION**

- A spreadsheet exported from the CUPA's data management system or CERS, identifying each HWG facility that has not been inspected once every three years. For each HWG facility listed, the spreadsheet will include, at a minimum:
  - Facility name,
  - o CERS ID, and
  - o date of the last routine inspection.
- A schedule to inspect those HWG facilities, prioritizing the most delinquent inspections to be completed prior to any other HWG inspection.
- Future steps to ensure that all HWG facilities will be inspected once every three years.

By the 2<sup>nd</sup> Progress Report, the CUPA will, if necessary, revise the action plan based on feedback from DTSC. The CUPA will provide the revised action plan to CalEPA.

By the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CaIEPA with an updated spreadsheet.

By the 5<sup>th</sup> Progress Report, the CUPA will have inspected each HWG facility once every three years.

## 2. DEFICIENCY:

The Permit to Operate does not reflect issuance under the Unified Program Facility Permit (UPFP).

Additionally, the Underground Storage Tank (UST) operating permit, which is required to be issued under the UPFP, is inconsistent with CCR, Title 23, Division 3, Chapter 16 (UST Regulations) and Health and Safety Code (HSC) Division 20, Chapter 6.7 requirements, and is missing provisions required by UST Regulations or HSC.

Review of UST operating permits finds:

- The Permit to Operate is inconsistent with UST Regulations and HSC requirements as it states it is the property of the Alameda County Department of Environmental Health, however, the State Water Board has the authority to take enforcement actions against the owner or operator apart from the CUPA, therefore, the Permit to Operate is not the sole property of the CUPA.
- The following required provisions are missing:
  - Monitoring requirements
  - o CERS IDs
  - UST tank IDs

NOTE: CalEPA is obtaining a legal interpretation to determine whether or not the "Permit to Operate" title is sufficient as it does not reflect issuance as a UPFP.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

## **DEFICIENCIES REQUIRING CORRECTION**

## CITATION:

HSC, Chapter 6.7 CCR, Title 23, Sections 2712(c) and (i) CCR, Title 27, Sections 15110(q), 15190(b) and 15190(h) [CalEPA, State Water Board]

## CORRECTIVE ACTION:

If it is determined the "Permit to Operate" title must be changed to "Unified Program Facility Permit" and/or if it is determined the "Permit to Operate" must reflect issuance under a UPFP, the CUPA will provide CalEPA with a revised Permit to Operate template.

By the 1<sup>st</sup> Progress Report, the CUPA will provide CalEPA with a revised Permit to Operate template that includes a revised UST operating permit template that is consistent with UST Regulations and HSC.

By the 2<sup>nd</sup> Progress Report, the CUPA will, if necessary, amend the revised Permit to Operate template and/or UST operating permit template, based on feedback from the State Water Board, and will provide the amended templates to CalEPA. If no amendments are necessary, the CUPA will begin to issue the revised Permit to Operate template and/or UST operating permit, and will provide CalEPA with five UST operating permits, issued to UST facilities using the revised Permit to Operate template and/or UST operating permit template.

By the 3<sup>rd</sup> Progress Report, if amendments to the revised Permit to Operate template and/or UST operating permit templates were necessary, the CUPA will begin to issue the amended Permit to Operate template and/or UST operating permit template, and will provide CalEPA with five UST operating permits issued to UST facilities using the amended Permit to Operate template and/or UST operating permit template.

### 3. DEFICIENCY:

The CUPA is not consistently following up and documenting return to compliance (RTC) information in CERS for Aboveground Petroleum Storage Act (APSA) tank facilities cited with violations.

Review of CERS CME information indicates there is no documented RTC for the following violations:

Fiscal Year (FY) 2020/2021

• 78 of 192 (41%) violations

FY 2019/2020

42 of 162 (26%) violations

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

## **DEFICIENCIES REQUIRING CORRECTION**

### CITATION:

HSC Chapter 6.11, Section 25404.1.2(c)
HSC, Chapter 6.67, Section 25270.4.5(a)
CCR, Title 27, Sections 15185(a) and (c) and 15200(a) and (e)
[OSFM]

## **CORRECTIVE ACTION:**

By the 1<sup>st</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a sortable spreadsheet obtained from the CUPA's data management system or CERS containing each APSA tank facility with open violations (no RTC) between July 1, 2018, through June 30, 2021. The spreadsheet will include the following information for each APSA tank facility listed:

- Facility name;
- CERS ID;
- Inspection and violation dates;
- Scheduled RTC date:
- Actual RTC date (when applicable);
- RTC qualifier; and
- In the absence of obtained RTC, a narrative of the appropriate enforcement taken by the CUPA.

The CUPA will prioritize follow-up actions with each facility based on the level of hazard present to public health and the environment.

By the 3<sup>rd</sup> Progress Report and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with three APSA tank facility records, as requested by OSFM, that include RTC documentation, or a description of the appropriate enforcement taken by the CUPA.

### 4. DEFICIENCY:

The CUPA is not inspecting each facility subject to Hazardous Materials Business Plan (HMBP) requirements at least once every three years.

Review of CERS CME information, facility file information, and additional information provided by the CUPA finds:

• 510 of 2,092 (24%) facilities subject to HMBP requirements were not inspected within the last three years.

## CITATION:

HSC, Chapter 6.95, Section 25511(b) [CalEPA]

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **DEFICIENCIES REQUIRING CORRECTION**

# **CORRECTIVE ACTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each facility subject to HMBP requirements is inspected at least once every three years. The action plan will include, at minimum:

- An analysis and explanation as to why the triennial compliance inspection requirement for the HMBP Program is not being met. Existing inspection staff resources and the number of facilities scheduled to be inspected each year are factors to address in the explanation.
- A spreadsheet exported from the CUPA's data management system or CERS, identifying each HMBP facility that has not been inspected within the last three years. For each HMBP facility listed, the spreadsheet will include, at minimum:
  - Facility name;
  - o CERS ID; and
  - Date of the last inspection
- A schedule to inspect those HMBP facilities, prioritizing the most delinquent inspections to be completed prior to any other HMBP inspection based on risk.
- Future steps to ensure that all HMBP facilities will be inspected at least once every three years.

By the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an updated spreadsheet.

By the 5<sup>th</sup> Progress Report, the CUPA will have inspected each HMBP facility at least once in the last three years.

## 5. DEFICIENCY:

The CUPA is not consistently ensuring RTC is obtained within 60 days or is not consistently following up and documenting RTC information in CERS for UST testing or leak detection violations.

Review of CERS CME information for the following FYs finds the following testing and leak detection violations did not obtain RTC within 60 days:

FY 2020/2021: 130 of 343 (38%)FY 2019/2020: 143 of 365 (39%)

• FY 2018/2019: 197 of 457 (43%)

Review of CERS CME information finds the following examples of testing and leak detection violations did not obtain RTC within 60 days:

 CERS ID 10460557: Violation dated March 25, 2019, for failure of the monitoring system to shut down the pump or stop flow when a leak is detected with no documented RTC in CERS.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

## **DEFICIENCIES REQUIRING CORRECTION**

- CERS ID 10238653: Violation dated June 25, 2020, for failure to maintain secondary containment with no documented RTC in CERS.
- CERS ID 10639660: Violation dated August 1, 2019, for failure comply with overfill prevention equipment requirements with no documented RTC in CERS.
- CERS ID 10189763: Violation dated June 9, 2021, for failure to install or maintain a liquidtight spill container with no documented RTC in CERS.

Note: The examples provided above may not represent all instances of this deficiency and only include testing and leak detection violations.

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

## CITATION:

HSC, Chapter 6.7, Section 25288(d) [State Water Board]

# **CORRECTIVE ACTION:**

By the 1st Progress Report, the CUPA will review and revise the I&E Plan or other applicable procedure, to ensure establishment of a process for UST inspection staff to document follow-up actions and applied appropriate enforcement taken by the CUPA within 60 days. The CUPA will provide CalEPA with the revised I&E Plan, or other applicable procedure.

By the 2nd Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended I&E Plan or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised I&E Plan or other applicable procedure. The CUPA will provide training documentation to CalEPA, which at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the revised I&E Plan or other applicable procedure.

By the 3rd Progress Report, if amendments to the I&E Plan or other applicable procedure were necessary, the CUPA will train UST inspection staff on the amended I&E Plan or other applicable procedure. The CUPA will provide training documentation to CalEPA, which at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended I&E Plan or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with UST facility records for five UST facilities, as selected by the State Water Board, that include RTC or documentation of applied appropriate enforcement.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **DEFICIENCIES REQUIRING CORRECTION**

# 6. DEFICIENCY:

The CUPA's UST closure letter does not document in sufficient detail whether UST permanent closure complies with UST Regulations and HSC.

Review of UST facility files finds the following:

- CERS ID 10653076: The letter provided by the CUPA to the owner or operator does not cite closure complies with UST Regulations, Section 2672 and HSC, Section 25298
- CERS ID 10405192: The letter provided by the CUPA to the owner or operator does not cite closure complies with UST Regulations, Section 2672 and HSC, Section 25298

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

## **CITATION:**

HSC, Chapter 6.7, Section 25298(c) CCR, Title 23, Section 2670 and 2672 [State Water Board]

## **CORRECTIVE ACTION:**

By the 1st Progress Report, the CUPA will review and revise the UST closure procedure or other applicable procedure, to ensure the establishment of a process, which will include at a minimum, how the CUPA will:

 Document in sufficient detail the owner or operator has demonstrated to the satisfaction of the CUPA that UST closure complies with UST Regulations and HSC.

The CUPA will provide the developed or revised UST closure procedure, or other applicable procedure to CalEPA.

By the 1st Progress Report, the CUPA will review and revise the UST closure letter template for sites with and without contamination, if separate letters are issued for those scenarios, to include citations to UST Regulations, Section 2672 and HSC, Section 25298.

By the 2<sup>nd</sup> Progress Report, if amendments to the revised UST closure procedure or other applicable procedure and/or UST closure letter template are necessary, based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended UST closure procedure or other applicable procedure and/or UST closure letter template. If no amendments to the revised UST closure procedure or other applicable procedure and/or UST closure letter template are necessary, the CUPA will train UST inspection staff on the revised UST closure procedure and/or UST closure letter template. The CUPA will provide training documentation to CalEPA, which at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the revised UST Closure procedure and/or UST closure letter template.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

## **DEFICIENCIES REQUIRING CORRECTION**

By the 3<sup>rd</sup> Progress Report, if amendments to the revised UST closure procedure or other applicable procedure and/or UST closure letter template were necessary, the CUPA will train UST inspection staff on the amended UST closure procedure and/or UST closure letter template. The CUPA will provide training documentation to CalEPA, which at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended UST closure procedure and/or UST closure letter template.

With respect to facilities which have not been provided adequate UST closure documentation, the CUPA will use the revised or amended UST closure letter template and provide updated closure documentation upon request.

For the next two UST closures, or until considered corrected, the CUPA will provide CalEPA with the UST closure documentation demonstrating the CUPA's satisfaction of UST closure.

## 7. DEFICIENCY:

Review of CERS CME information and the CUPA's data management system from October 1, 2018, through September 30, 2021, indicates there is no documented RTC for the following HWG violations:

• 722 of 2500 (29%)

## CITATION:

HSC, Chapter 6.5, Sections 25110.8.5, 25117.6, and 25187.8(b) and (g) HSC, Chapter 6.11, Section 25404.1.2(c) CCR, Title 27, Sections 15185(a) and (c) and 15200(a) and (e) [DTSC]

## **CORRECTIVE ACTION:**

By the 1<sup>st</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a spreadsheet obtained from the CUPA's data management system or CERS that includes all open violations cited between October 1, 2018 – September 30, 2021, and progress made toward achieving RTC for each violation. At a minimum, the spreadsheet should include the following information for each HWG facility with open violations:

- Facility name;
- CERS ID;
- Inspection and violation dates;
- Scheduled RTC date:
- Actual RTC date (when applicable);
- RTC qualifier; and

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

## **DEFICIENCIES REQUIRING CORRECTION**

 In the absence of obtained RTC, a narrative of the appropriate steps or enforcement taken by the CUPA to ensure RTC.

By the 3<sup>rd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with three hazardous waste generator facility records, as requested by DTSC, that include documentation of RTC, or a narrative of the appropriate applied enforcement taken in the absence of RTC.

## 8. DEFICIENCY: Corrected During Evaluation

The CUPA is not ensuring all regulated businesses subject to HMBP reporting requirements annually submit a chemical inventory or a no-change certification to CERS.

Review of chemical inventories submitted to CERS by regulated businesses subject to HMBP reporting requirements finds:

• 214 of 2,092 (10%) regulated businesses have not submitted a chemical inventory (including site map) or no-change certification within the last 12 months.

## CITATION:

HSC, Chapter 6.95, Sections 25505(a) and 25508(a) [CalEPA]

## **CORRECTIVE ACTION: COMPLETED**

During the evaluation, an initial CERS CME report indicated 295 of 2,089 (14%) regulated businesses subject to HMBP reporting requirements had not submitted a chemical inventory or no-change certification within the last 12 months. A subsequent CERS CME report, generated after the Questions and Answers Meeting was held on January 20, 2022, indicated 214 of 2,092 (10%) regulated businesses subject to HMBP reporting requirements had not submitted a chemical inventory or no-change certification within the last 12 months. CalEPA considers this deficiency corrected. No further action is needed.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### INCIDENTAL FINDINGS REQUIRING RESOLUTION

Incidental findings identify specific incidents or activities regarding implementation of the Unified Program. Though incidental findings do not rise to the level of program deficiencies or inadequate implementation of the Unified Program, the CUPA must complete the resolution indicated as required by regulation or statute.

## 1. INCIDENTAL FINDING:

The CUPA is not inspecting each Tiered Permit (TP) facility within the first two years of operations and every three years thereafter.

Review of CERS CME information and additional information provided by the CUPA indicates during October 1, 2018, through September 30, 2021:

- 1 of 9 (11%) TP facilities were not inspected every three years after the initial inspection.
  - CERS ID 10002979: The last Conditionally Authorized inspection was completed on September 22, 2017.
- 3 of 9 (33%) required TP facilities were inspected as recently as October 2021.

## CITATION:

HSC, Chapter 6.5, Section 25201.4(b)(2) [DTSC]

### **RESOLUTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each TP facility is inspected at least once within the first two years of operation and every three years thereafter. The CUPA will have inspected CERS ID 10002979 and will provide the inspection report to CalEPA.

## 2. INCIDENTAL FINDING:

The CUPA is not inspecting each APSA tank facility that stores 1,320 gallons or more of petroleum at least once every three years for compliance with the Spill Prevention Control and Countermeasure (SPCC) Plan requirements of APSA in accordance with the I&E Plan.

Review of CERS CME information and information provided by the CUPA indicates:

• 75 of 181 (41%) APSA tank facilities storing less than 10,000 gallons of petroleum have not been inspected within the last three years.

Note: The CUPA meets the mandated triennial inspection requirement for APSA tank facilities storing 10,000 gallons or more of petroleum.

### CITATION:

HSC, Chapter 6.67, Section 25270.5(a) and (b) [OSFM]

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

## INCIDENTAL FINDINGS REQUIRING RESOLUTION

## **RESOLUTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each APSA tank facility is inspected at least once every three years for compliance with the SPCC Plan requirements of the CUPA's established APSA Program. The action plan will include at a minimum:

- A sortable spreadsheet exported from the CUPA's data management system or CERS, identifying each APSA tank facility that was not inspected within the last three years. For each tank facility listed, the spreadsheet will include, at a minimum:
  - Facility name,
  - o CERS ID,
  - Category of tank facility, such as 10,000 gallons or more, 1,320-9,999 gallons, tank in an underground area (TIUGA) with less than 1,320 gallons, and
  - o Date of the last routine inspection.
- A proposed schedule to inspect those tank facilities, prioritizing the most delinquent inspections to be completed prior to any other APSA inspection based on a risk analysis of all tank facilities (i.e., large volumes of petroleum, proximity to navigable water).
- Future steps to ensure each tank facility will be inspected at least once every three years.

By the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an updated spreadsheet.

By the 5<sup>th</sup> Progress Report, the CUPA will have inspected each APSA tank facility identified on the 1st Progress Report spreadsheet at least once every three years.

## 3. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA is not properly reviewing, processing, and authorizing each annual Onsite Hazardous Waste Treatment Notification for Permit By Rule (PBR) facilities with a Fixed Treatment Unit (FTU) within 45 calendar days of receiving it.

During the 45-day review process the CUPA must:

- Authorize operation of the FTU; or
- Deny authorization of the FTU in accordance with PBR laws and regulations; or
- Notify the owner/operator that the notification submittal is inaccurate or incomplete.

# **CERS CME information finds:**

- 3 of 10 (30%) PBR Onsite Hazardous Waste Treatment Notifications were not reviewed, processed, or authorized by the CUPA within 45 days of receipt.
  - CERS ID 10188521: notification submitted December 21, 2020, and Not Accepted on May 11, 2021
  - CERS ID 10188521: notification submitted February 21, 2020, and Not Accepted on May 11, 2021
  - CERS ID 10188521: notification submitted March 9, 2021, and Not Accepted on May 11, 2021

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### INCIDENTAL FINDINGS REQUIRING RESOLUTION

CERS data finds the following facility did not submit an Onsite Hazardous Waste Treatment Notification for PBR through the CERS activity page for 2020 or 2021, though the facility is conducting treatment of hazardous wastes:

CERS ID 10409590

Note: CERS ID 10676683 has a PBR inspection dated June 7, 2019, and CERS ID 10736272 has a PBR inspection dated May 28, 2019. No PBR submittals were received for either facility and the inspection type is likely incorrectly classified in both cases.

## CITATION:

CCR, Title 22, Section 67450.3(c)(1) and (d) [DTSC]

## RESOLUTION: COMPLETED

During the evaluation, on January 26, 2022, the CUPA held a discussion and training between the Senior Hazardous Materials Specialist (HMS) and the Manager responsible for the Hazardous Waste Program. The training included the importance of reviewing and acting upon CERS TP submittals promptly with a goal of within 30 days of notification, but no longer than 45 days after notification. On February 3, 2022, the inspector watched the TP Program training video available on the California Certified Unified Program Agency Forum Board website (<a href="https://www.youtube.com/user/orangetreeweb/videos">https://www.youtube.com/user/orangetreeweb/videos</a>). Currently, all TP facilities are assigned to a Senior Hazardous Materials Specialist (HMS), whom is also the lead for the Hazardous Waste Program.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

## **OBSERVATIONS AND RECOMMENDATIONS**

Observations and recommendations identify areas of Unified Program implementation that could be improved and provide suggestions for improvement. Though the CUPA is not required by regulation or statute to apply the recommendations provided, the CUPA would benefit in applying the recommendations provided to improve the overall implementation of the Unified Program.

## 1. OBSERVATION:

Review of overall implementation of the HWG Program, including policies and procedures, CERS CME information, facility file information, information provided by the CUPA and Self-Audit Reports for October 1, 2018, through September 30, 2021, is summarized below:

- CERS indicates 1,405 active HWG facilities, 17 Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) facilities, and 10 TP facilities.
  - During the Kick-off meeting held on August 25, 2021, the CUPA stated there are 1,357 regulated HWG facilities.
- The three-year inspection frequency for all HWG facilities is currently not being met.
- The CUPA performed 1,060 HWG inspections, including:
  - 886 routine inspections, of which 648 inspections (73%) had at least one violation cited.
  - o 174 other inspections, of which 15 inspections (9%) had at least one violation cited.
- In the 1,060 inspections performed, 2,509 total violations were issued, consisting of:
  - o 31 Class I violations,
  - 1,249 Class II violations, and
  - 1,229 minor violations.
    - 206 (17%) minor violations are one year past the scheduled RTC date.
- The CUPA completed a separate formal enforcement action for three different facilities with hazardous waste related violations resulting in a cumulative total penalty amount of \$30,598.81.
- Inspection reports contain detailed comments that note the factual basis of cited violations.
- The CUPA's web page contains very helpful information and various links to factsheets, regulations, and other regulatory agencies. The web page points to free training at the annual Unified Program training conference available for hazardous waste generators. The web page also includes a process for closure notification.

DTSC was unable to conduct oversight inspections due to Coronavirus (COVID-19) restrictions.

# **RECOMMENDATION:**

Continue with the three-year HWG inspection frequency as identified in the I&E Plan. Follow up with facilities that have not obtained RTC by the scheduled RTC date and apply appropriate enforcement for facilities that do not obtain RTC, per the I&E Plan. Ensure that complete and thorough inspections are conducted to identify all violations at HWG facilities.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### OBSERVATIONS AND RECOMMENDATIONS

# 2. OBSERVATION:

The I&E Plan contains information that is inaccurate or may benefit from improvement.

- Page 5: The inspection frequency table identifies a mandated APSA triennial frequency and identifies the CUPA inspection frequency as triennial. Per HSC, Section 25270.5(a), the mandated inspection frequency is at least once every three years for tank facilities that are required to prepare a SPCC Plan under APSA and have 10,000 gallons or more of petroleum. Unified Program Agencies (UPAs) are provided latitude in the APSA statute per HSC, Section 25270.5(b) to create an alternative inspection plan. The I&E Plan requires triennial inspections at APSA facilities storing less than 10,000 gallons of petroleum. The inspection frequency table could be improved to clearly identify the implementation of an alternative inspection plan.
- Page 8 Statutory Authority: It is more appropriate to reference HSC, Chapter 6.67, commencing with Section 25270 (in lieu of Section 25270.4.5) for violations of APSA, as enforcement can apply to any owner or operator of a tank facility who fails to prepare a SPCC Plan in compliance with HSC, Section 25270.4.5(a), to file a tank facility statement pursuant to HSC, Section 25270.6(a), to submit the fee required by HSC, Section 25270.6(b), or to report spills as required by HSC, Section 25270.8, or who otherwise fails to comply with the requirements of this chapter.
- Page 11: The Administrative Law Judge discussion may benefit from removal of the reference to HSC, Section 25270.5 after Chapter 6.95 as the reference to Chapter 6.67 (commencing with HSC, Section 25270) is sufficient.
- Page 15 Statutory Authority APSA violation AEO: In addition to HSC, Section 25404.1.1(a), include HSC, Section 25270.12.1 to identify the UPA's authority to impose an administrative penalty.

## RECOMMENDATION:

Update the I&E Plan as indicated above.

## 3. OBSERVATION:

The webpage <a href="https://deh.acgov.org/hazmat/apsa.page">https://deh.acgov.org/hazmat/apsa.page</a> contains information that is outdated or incorrect and may benefit from the suggested improvements:

# Program Updates:

 Replace the existing outdated link to the TIUGA Fact Sheet with the current link: https://osfm.fire.ca.gov/divisions/pipeline-safety-and-cupa/certified-unified-program-agency-cupa/aboveground-petroleum-storage-act/tank-in-an-underground-areatiuga/

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### OBSERVATIONS AND RECOMMENDATIONS

- Facilities Regulated under APSA:
  - o Include APSA tank facilities that are subject to the SPCC rule
- General Requirements:
  - o Next to the "Hazardous Materials Inventory", add 'including site map'
- Links and References Section:
  - Replace the link to the OSFM landing page with the OSFM APSA landing page: <a href="https://osfm.fire.ca.gov/divisions/pipeline-safety-and-cupa/certified-unified-program-agency-cupa/aboveground-petroleum-storage-act/">https://osfm.fire.ca.gov/divisions/pipeline-safety-and-cupa/certified-unified-program-agency-cupa/aboveground-petroleum-storage-act/</a>
  - Remove the document and link "Guide to Understanding Tanks in Underground Areas in the APSA Program"
  - Replace the existing outdated link to the TIUGA Fact Sheet with the current link: <u>https://osfm.fire.ca.gov/divisions/pipeline-safety-and-cupa/certified-unified-program-agency-cupa/aboveground-petroleum-storage-act/tank-in-an-underground-areatiuga/</u>
- Forms Section:
  - Replace the existing outdated Tier II Qualified Facility SPCC Plan Template link with the current link: <a href="https://osfm.fire.ca.gov/media/13bddwhw/calfire-osfm-tierii-spcc-plantemplate-05-2021-accessible.pdf">https://osfm.fire.ca.gov/media/13bddwhw/calfire-osfm-tierii-spcc-plantemplate-05-2021-accessible.pdf</a>
  - Replace the existing outdated Tank Facility Statement link with the current link: <a href="https://osfm.fire.ca.gov/media/bpgbb0px/reset-fillable-accessible-tank-facility-statement-form-25jan2021.pdf">https://osfm.fire.ca.gov/media/bpgbb0px/reset-fillable-accessible-tank-facility-statement-form-25jan2021.pdf</a>
  - Replace the existing Monthly Checklist for TIUGA Facility with Less than 1,320 Gallons of Petroleum link with the following:
     <a href="https://osfm.fire.ca.gov/media/cmojkmmj/apsa-tiuga-monthly-checklist-less-than-1320-gal.pdf">https://osfm.fire.ca.gov/media/cmojkmmj/apsa-tiuga-monthly-checklist-less-than-1320-gal.pdf</a>
- Frequently Asked Questions Section:
  - What is a SPCC Plan Not every APSA tank facility must prepare an SPCC Plan. A tank facility is not required to prepare an SPCC Plan under APSA if it meets certain conditions as described in HSC, Section 25270.4.5(b).
    - More appropriate wording could be, "The SPCC Plan is a plan that each tank facility subject to APSA must prepare and implement to prevent a discharge of oil, including petroleum, unless the tank facility is conditionally exempt from having to prepare an SPCC Plan."
  - What Type of SPCC Plan Should I Use
    - Plan type references "petroleum" when it should be "oil."
  - Is My Facility Exempt From APSA
    - Replace the question with "Is my facility exempt from preparing an SPCC Plan under APSA?"
    - Replace "conditionally exempt from completing and implementing an SPCC Plan" with "conditionally exempt from SPCC Plan preparation requirements."
    - The second bullet item should be "conduct daily visual inspections of ASTs" and "in compliance with Federal SPCC rules" should be removed.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

## **OBSERVATIONS AND RECOMMENDATIONS**

- What Type of SPCC Plan Can a TIUGA Use
  - Replace the question with "What type of SPCC plan can a TIUGA facility use?"
  - Correct the spelling of "Underground."

## RECOMMENDATION:

Update the webpage as indicated above.

### 4. OBSERVATION:

The CERS reporting requirement is currently set as "APSA Applicable" for 246 tank facilities. The CUPA's data management system identifies 234 APSA tank facilities.

- 230 APSA tank facilities are identified in both CERS and the CUPA's data management system.
- 16 tank facilities are reported as "APSA Applicable" in CERS but are not identified as APSA tank facilities in the CUPA's data management system.
  - Some of these facilities are likely not APSA regulated, and the CUPA should change the CERS APSA reporting requirement to "APSA Not Applicable" for each facility.
  - Some of these facilities are APSA regulated, and the CUPA should update the local data management system appropriately.
- Four facilities identified as APSA tank facilities in the CUPA's data management system are not in the CERS list of APSA facilities. The CUPA should determine if the facilities really are APSA facilities.
  - Those that are not should have the APSA reporting requirement set to "Not Applicable," and should not be identified as APSA tank facilities in the CUPA's data management system.
  - Those that are APSA regulated should have the APSA reporting requirement set to "Applicable."
- There are seven additional potential APSA facilities currently reported in CERS as "APSA Not Applicable" and not identified on the CUPA's list of APSA facilities. The CUPA should determine if the facilities really are APSA facilities, and if so, should update the local data management system and change the APSA reporting requirement to "Applicable."

## **RECOMMENDATION:**

Complete the reconciliation of the APSA Program information in the CUPA's data management system with CERS to ensure all APSA tank facilities are included in both systems.

## 5. OBSERVATION:

Multiple APSA tank facilities submitted a HMBP in lieu of a tank facility statement using the 2011 consolidated emergency response and training plans template, which contains obsolete information, including but not limited to the OSFM phone number.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### OBSERVATIONS AND RECOMMENDATIONS

The 2022 version of the consolidated emergency response and training plans template is the current template with the correct OSFM phone number.

# **RECOMMENDATION:**

Encourage each APSA tank facility that utilizes the consolidated emergency response and training plans template as part of the HMBP submittal, in lieu of the tank facility statement, to use the current 2022 template. The current template is available on the CalEPA website and will soon be available in CERS.

## 6. OBSERVATION:

Review of CERS finds the following USTs or UST systems as having single-walled components which require permanent closure by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05:

- CERS ID 10188327 (Tank IDs 1 4);
- CERS ID 10188921 (Tank IDs 1 3); and
- CERS ID 10401790 (Tank IDs T1 T2).

## **RECOMMENDATION:**

Continue to provide written and verbal reminders to all applicable UST facility owners or operators regarding the December 31, 2025, requirements for permanent closure of single-walled USTs. Consider providing written notification of the requirement to all applicable UST facility owners or operators. The written notification should inform facility owners or operators that in order to remain in compliance, owners or operators must replace or remove single-walled USTs by December 31, 2025. Additional information regarding single-walled UST closure requirements may be found at: <a href="https://www.waterboards.ca.gov/ust/single\_walled.html">https://www.waterboards.ca.gov/ust/single\_walled.html</a>.

Notify UST facility owners or operators that Replacing, Removing, or Upgrading Underground Storage Tanks (RUST) Program grants and loans are available to assist eligible small businesses with the costs necessary to remove, replace, or upgrade project USTs. More information on funding sources may be found at:

https://www.waterboards.ca.gov/water\_issues/programs/ustcf/rust.html.

## 7. OBSERVATION:

The information below is a comparison of the total number of regulated facilities within each Unified Program element as identified in the FY 2011/2012 Self Audit Report of Alameda County Department of Environmental Health with present-day circumstance and the degree to which the number of regulated facilities has increased, including the near 900 additional regulated facilities absorbed in January 2015, as the CUPA was designated by CalEPA to be the Unified Program regulatory agency for facilities within the City of Oakland. Today, the CUPA has jurisdiction of over 2,000 regulated facilities in the cities of Alameda, Albany, Castro Valley, Dublin, Emeryville, Newark, Oakland, Piedmont, San Lorenzo, Sunol, the unincorporated areas of

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### **OBSERVATIONS AND RECOMMENDATIONS**

Fremont, Hayward, Livermore, Pleasanton and San Leandro, and parts of Byron, Mountain House and Tracy.

The information is sourced from the following:

- CERS "Summary Regulated Facilities by Unified Program Element" report, generated on December 17, 2021;
- CERS "UST Inspection Summary Report (Report 6)," generated on December 17, 2021;
- Alameda County Department of Environmental Health CUPA Organizational Chart;
- Alameda County Department of Environmental Health FY 2020/2021 Self-Audit Report; and
- Alameda County Department of Environmental Health FY 2011/2012 Self-Audit Report
- Total Number of Regulated Businesses and Facilities:
  - o In FY 2011/2012: **1,084**
  - o Currently: **4,090**
  - An increase of 3,006 facilities
- <u>Total Number of Hazardous Materials Release Response Plan and Inventory (Business Plan) Regulated Businesses and Facilities:</u>
  - o In FY 2011/2012: 990
  - Currently: 2,098
  - o An increase of 1,108 facilities
- Total Number of Regulated Underground Storage Tank (UST) Facilities:
  - o In FY 2011/2012: 113
  - o Currently: 239
  - o An increase of 126 facilities
- Total Number of Regulated Underground Storage Tanks (USTs):
  - o In FY 2011/2012: **325**
  - o Currently: 604
  - An increase of 279 Underground Storage Tanks
- Total Number of Regulated Hazardous Waste Generator (HWGs) Facilities:
  - o In FY 2011/2012: **747**
  - o Currently: 1,403
  - o An increase of 656 facilities

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### OBSERVATIONS AND RECOMMENDATIONS

- Total Number of Regulated Household Hazardous Waste (HHW) Facilities:
  - o In FY 2011/2012: None specified
  - o Currently: 1
  - Comments: HHW Facilities were regulated under the Unified Program in FY 2011/2012, however no specific count was provided in the Self-Audit Report. The difference between the current and historic number of facilities cannot be determined at this time
- <u>Total Number of Regulated Tiered Permitting Facilities (Permit By Rule, Conditionally Authorized, Conditionally Exempt):</u>
  - o In FY 2011/2012: **10**
  - o Currently: 12
  - An increase of 2 facilities
- <u>Total Number of Regulated Resource Conservation and Recovery Act (RCRA) Large</u> Quantity Generator (LQG) Facilities:
  - o In FY 2011/2012: None specified
  - o Currently: 67
  - Comments: RCRA LQG Facilities were regulated under the Unified Program in FY 2011/2012, however no specific count was provided in the Self-Audit Report. The difference between the current and historic number of facilities cannot be determined at this time
- <u>Total Number of Regulated Risk Management Prevention Plan (RMPP) or California Accidental Release Prevention (CalARP) Program Facilities:</u>
  - o In FY 2011/2012: **10**
  - o Currently: 16
  - o An increase of 6 facilities
- Total Number of Regulated Aboveground Petroleum Storage Act (APSA) Tank Facilities:
  - o In FY 2011/2012: None specified
  - o Currently: 241
  - o Comments: The difference between the current and historic number of facilities cannot be determined at this time.

The information below is a comparison of the overall full-time equivalent (FTE) of CUPA personnel allocated to the implementation of the Unified Program as identified in the FY 2011/2012 Self Audit Report of Alameda County Department of Environmental Health with present-day circumstance and the degree to which allocated inspection and supervisory/management staff has increased. The information is sourced from the Alameda County Department of Environmental Health FY 2011/2012 Self-Audit Report and recent information provided by the CUPA.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### **OBSERVATIONS AND RECOMMENDATIONS**

- Inspection and other Staff
  - o In FY 2011/2012:
    - 7 staff working at 100% FTE, which equates to 7 FTEs
  - Currently:
    - 17 staff working at 100% FTE, which equates to 17 FTEs
- Supervisory and Management Staff
  - o In FY 2011/2012:
    - 1 Supervisor/Management staff at 100% FTE, which equates to 1 FTE
  - Currently:
    - 3 Supervisor/Management staff at 100% FTE, which equates to 3 FTEs

## **RECOMMENDATION:**

Continue to conduct the annual review and update of the fee accountability program to determine the necessary and reasonable costs to implement the Unified Program for each program element. The ability to apply each aspect of inspection, compliance, monitoring and enforcement for all Unified Program activities is not only vital to the success of the program, but it further ensures the protection of health and safety of the community and environment at large.

## 8. OBSERVATION

The continuing impact of the COVID-19 pandemic restrictions and loss of CUPA staff have significantly affected the implementation of the Unified Program, which attribute to some of the deficiencies and incidental findings identified during this CUPA Performance Evaluation.

# RECOMMENDATION

Continue to address the shortfalls in implementation of the Unified Program due to the impacts resulting from COVID-19 and loss of CUPA staff. Continue efforts to quickly and effectively fulfill vacant staff positions and train newly hired staff.

## 9. OBSERVATION

The CUPA completed HWG inspections at 15 facilities that have not yet created a CERS ID.

# RECOMMENDATION

Follow up with the 15 HWG facilities to ensure each has established a CERS ID. Apply appropriate enforcement to ensure compliance.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### **EXAMPLES OF OUTSTANDING PROGRAM IMPLEMENTATION**

Examples of outstanding program implementation highlight efforts and activities of the CUPA that are considered above and beyond the standard expectations for implementation of the Unified Program.

### 1. A PAPERLESS CUPA:

In 2015, the CUPA began electronic file management, which included digitizing its files and the incorporated City of Oakland inspection files, which consisted of over 200 large banker boxes of paper records received from the Oakland Fire Department. The CUPA utilizes an email clearinghouse to process UST facility notifications, complaints, CERS, CalARP, and enforcement correspondence. In 2017, the CUPA completed its migration into electronic file management. In 2018, Alameda County Department of Environmental Health redesigned the CUPA website. The CUPA is currently in the implementation phase of an electronic file management system that includes a portal for records review. The CUPA uses electronic systems such as online databases, laptops, and mobile phones for conducting inspections, and online platforms for holding meetings and providing trainings.

# 2. CalEPA SECRETARY'S AWARD RECIPIENT:

In 2018, the CUPA was awarded the CalEPA Secretary's Environmental Achievement Award and Outstanding Certified Unified Program Agency Award. This award highlights exceptional and outstanding success in the protection of human health, safety, and the environment.

The dedication, pride and extraordinary effort put forth by the management and staff of the CUPA have been essential to protecting the state's public health, public safety, and the environment.

In January 2015, CalEPA designated the CUPA as the regulatory agency with Unified Program responsibilities for the City of Oakland, which ultimately increased the workload of the CUPA and implementation of the Unified Program by approximately 900 additional regulated facilities.

The rapid response of the CUPA to assess and resolve serious violations identified at Unified Program regulated facilities within the City of Oakland during the assimilation process, while continuing implementation of the Unified Program for legacy facilities, is commendable. Dedicated CUPA staff invested significant time and resources to familiarize regulated facilities in Oakland with essential aspects of the Unified Program, including assisting facility operators with electronic submittals to CERS and completing routine inspections. As many inherited facilities within the City of Oakland had not been subjected to inspections or enforcement for many years, return to compliance presented an extreme challenge. The CUPA issued more than 800 Notices of Violation and referred 33 enforcement cases to the District Attorney.

Upon closure of the 2012 CUPA performance evaluation, no deficiencies were observed and the performance of the CUPA was identified as meeting, or exceeding, Unified Program standards. With the adoption of all regulated facilities in the city of Oakland in 2015, the triennial CUPA performance evaluation of the CUPA was deferred to allow sufficient time for completion of the transition and assimilation.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### **EXAMPLES OF OUTSTANDING PROGRAM IMPLEMENTATION**

Upon closure of the 2018 CUPA performance evaluation, the CUPA successfully accomplished the challenging management of additional facilities in the City of Oakland, while demonstrating exemplary inspection frequencies for all program elements, implementing necessary enforcement actions, maintaining an adequate fee accountability program, and submitting mandatory reports and information to CalEPA within required timeframes.

The CUPA set an outstanding example for other Unified Program Agencies through this excellent Unified Program performance and highlights the importance of establishing partnerships between the regulatory and regulated communities as well as among local and state government agencies. Such achievement demonstrates the CUPA's exemplary commitment to protecting public health, public safety, and the environment of our state.

## 3. PARTICIPATION AND TRAINING:

The CUPA continues to participate in regular Unified Program related meetings and has leadership position participation within the Technical Advisory Groups (TAGs) for each program element, the Alameda County District Attorney's (DA) Task Force, Alameda County Fire Chiefs and the Bay Area Regional CUPA Forum Board. CUPA staff are continually trained in areas of Unified Program implementation, including various courses attended during each annual Unified Program training Conference, annual certification in Hazardous Waste Operations and Emergency Response (HAZWOPER), and completion of Incident Command System (ICS) 100/200 and 700 training. Onboarding new CUPA inspection staff includes training on the overall CUPA program, as well as completion of the Basic Inspector Academy and preparation for International Code Council (ICC) California UST Inspector certification as well as APSA certification.

The CUPA hosted the California Governor's Office of Emergency Services (Cal OES) to provide training to CUPA staff on the CalARP program. The CUPA also hosted the Western States Project to provide inspector safety training to CUPA staff and the entire Alameda County environmental health department.

# 4. EFFORTS TO OBTAIN HMBP SUBMITTAL COMPLIANCE:

The CUPA conducted the following actions to assist regulated facilities with annually submitting or certifying an HMBP in CERS:

- Sent out a monthly reminder to each facility regarding the due date of the annual HMBP submittal in CERS;
- 2. Provided technical assistance and language translation to facilities for completion and submittal of HMBPs in CERS, including providing access to be able to complete and submit an HMBP utilizing a dedicated CERS kiosk at the Alameda County Department of

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# UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

#### EXAMPLES OF OUTSTANDING PROGRAM IMPLEMENTATION

Environmental Health office, or while at the facility during an inspection through the use of Microsoft Teams or smart phone; and

3. Provided CERS training to businesses in March and April 2019.

The CUPA has three Environmental Health Technicians (EHT) who are regularly trained, including a lead EHT who has over 14 years of experience in the Unified Program. The EHTs thoroughly review HMBP submittals daily in CERS to ensure each HMBP submittal contains all required elements. The EHTs provide correction instructions for HMBPs to facilities when submittals are not accepted in CERS. In addition, overall implementation of the HMBP program is led by two senior staff who also provide technical assistance.

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