

October 22, 2024

Mr. Mario Kalson, Director
Humboldt County Department of Health and Human Services
Environmental Health Division
100 H Street, Suite 100
Eureka, California 95501-0480

Dear Mr. Kalson:

During October 2023, through July 2024, CalEPA and the Unified Program state agencies conducted a performance evaluation of the Humboldt County Department of Health and Human Services Environmental Health Division Certified Unified Program Agency (CUPA). The CUPA evaluation included a remote assessment of administrative documentation, review of regulated facility file documentation, California Environmental Reporting System information, and oversight inspections.

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 acknowledgement of accomplishments and challenges, as well as 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 resolution of incidental findings identified in the final Summary of Findings report, the CUPA must submit an Evaluation Progress Report approximately 60 days from the date of this letter. Thereafter, the CUPA will submit each subsequent Evaluation Progress Report to CalEPA in accordance with the specified date provided in the Evaluation Progress Report response, until all deficiencies and incidental findings identified have been acknowledged as corrected or resolved by each issuing state agency. An Evaluation Progress Report template will be provided by the CalEPA Team Lead. Each Evaluation Progress Report must be submitted to the CalEPA Team Lead, Timothy Brandt, via email at Timothy.Brandt@calepa.ca.gov, or uploaded to the established SharePoint website.

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, at Melinda.blum@calepa.ca.gov. 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.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jason Boetzer".

Jason Boetzer
Deputy Secretary
Local Program Coordination and Emergency Response

Enclosure

cc sent via email:

Ms. Maje Hoyos
Hazardous Materials Unit Supervisor
Humboldt County Department of Health and Human Services
Environmental Health Division
100 H Street, Suite 100
Eureka, California 95501-0480

Mr. Matthew Swoveland, REHS
Senior Hazardous Materials Specialist
Humboldt County Department of Health and Human Services
Environmental Health Division
100 H Street, Suite 100
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Mr. Tom Henderson
UST Leak Prevention Unit and
Office of Tank Tester Licensing Manager
State Water Resources Control Board

Ms. Julie Pettijohn
Environmental Program Manager
CUPA Enforcement Branch
Department of Toxic Substances Control

Mr. Mario Kalson
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cc sent via email:

Ryan Miya, Ph.D.
Senior Environmental Scientist, Supervisor
Department of Toxic Substances Control

Ms. Jennifer Lorenzo
Senior Environmental Scientist, Supervisor
CAL FIRE - Office of the State Fire Marshal

Ms. Kaitlin Cottrell
Environmental Scientist
State Water Resources Control Board

Ms. Magnolia Busse
Environmental Scientist
State Water Resources Control Board

Mr. Pheleep Sidhom
Environmental Scientist
Department of Toxic Substances Control

Ms. Denise Villanueva
Environmental Scientist
CAL FIRE - Office of the State Fire Marshal

Mr. John Paine
Unified Program Manager
California Environmental Protection Agency

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. Garrett Chan
Environmental Scientist
California Environmental Protection Agency

Mr. Mario Kalson
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cc sent via email:

Mr. Tim Brandt
Environmental Scientist
California Environmental Protection Agency

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

CUPA: Humboldt County Dept. of Health & Human Services Environmental Health Division

2023 Evaluation Assessment: October 2023 to July 2024

Timeframe Evaluated: July 1, 2018, through June 30, 2023

Evaluation Team Members:

- **CalEPA Team Lead:** Timothy Brandt
- **DTSC:** Pheleep Sidhom
- **CalEPA:** Garrett Chan
- **State Water Board:** Magnolia Busse
- **CAL FIRE-OSFM:** Denise Villanueva

This Final Summary of Findings includes:

- Accomplishments, Examples of Outstanding Implementation, and Challenges
- Deficiencies requiring correction
- Incidental findings requiring resolution
- Observations and recommendations

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 improvements needed.

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

Tim Brandt
CalEPA Unified Program
Phone: (916) 323-2204
E-mail: timothy.brandt@calepa.ca.gov

The CUPA is required to submit the first Evaluation Progress Report 60 days from receipt of the Final Summary of Findings Report. Thereafter, the CUPA will submit each subsequent Evaluation Progress Report to CalEPA in accordance with the specified date provided in the Evaluation Progress Report response. For each identified deficiency and incidental finding, the CUPA must complete the corrective action and resolution as indicated to demonstrate sufficient implementation of the Unified Program as required by regulation or statute. The Evaluation Progress Report process will continue until all deficiencies and incidental findings have been acknowledged as corrected or resolved by each issuing Unified Program state agency.

Each Evaluation Progress Report must be submitted to the CalEPA Team Lead via email at timothy.brandt@calepa.ca.gov, or uploaded to the established SharePoint website. A narrative stating the status of correcting each deficiency and resolving each incidental finding identified in this Final Summary of Findings Report, and any applicable supporting documentation must be included in each Evaluation Progress Report.

The submittal date for the 1st Evaluation Progress Report is **January 6, 2025**.

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

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

ACCOMPLISHMENTS, CHALLENGES, AND EXAMPLES OF OUTSTANDING IMPLEMENTATION

Various accomplishments, outstanding efforts, and challenges that impact and/or enhance the overall ability of the CUPA to implement the Unified Program. Recognition of aspects such as response to local emergency declarations and statewide recovery efforts, which illustrate the accomplishments and challenges the CUPA manages in the efforts to continue implementation of the Unified Program.

1. HAZARDOUS WASTE GENERATOR (HWG) PROGRAM IMPLEMENTATION:

Since the 2018 CUPA Performance Evaluation, the CUPA has successfully ensured over 90% of the facilities regulated under the HWG Program within the jurisdiction of the CUPA have been inspected once every three years, amidst the hindrance, restrictions, and disruptions caused by the Coronavirus (COVID-19). The CUPA is encouraged to continue working to meet the HWG Program inspection frequencies established in the Inspection and Enforcement (I&E) Plan.

2. ABOVEGROUND PETROLEUM STORAGE ACT (APSA) PROGRAM IMPLEMENTATION:

Since the 2018 CUPA Performance Evaluation, the CUPA met the mandated inspection frequency for APSA tank facilities with 10,000 gallons or more of petroleum. The CUPA ensured APSA tank facilities annually submitted a tank facility statement, or a Hazardous Materials Business Plan (HMBP) in lieu of a tank facility statement, to the California Environmental Reporting System (CERS). The CUPA also successfully obtained a high rate of return to compliance (RTC) for APSA tank facilities that were cited with violations since the conclusion of the 2018 CUPA Performance Evaluation.

3. 2018 CUPA PERFORMANCE EVALUATION INCIDENTAL FINDING RESOLVED:

In conducting the assessment for the 2023 CUPA Performance Evaluation, the following Incidental Finding previously identified as partially resolved upon closure of the 2018 CUPA Performance Evaluation is now considered resolved and no longer requires further action:

The CUPA is not consistently reporting the number of UST inspections conducted.

Due to the late issuance of the 2018 Final Summary of Findings and delay in commencing the subsequent Progress Report process, there was insufficient time for the review of inspection, violation, and enforcement information, also known as compliance, monitoring, and enforcement (CME) information and the Semi-Annual UST Program Report (Report 6). Review of Report 6 for consecutive reporting periods finds the CUPA is consistently reporting the number of UST inspections conducted.

4. CUPA STAFFING ISSUES AND COVID-19 PANDEMIC RESPONSE:

Starting in 2018, the CUPA encountered persistent staffing shortages that have limited the ability to fully implement all Unified Program elements. Staffing shortages arose as a result of staff departures, medical leave, reassignment of staff in response to the COVID-19 pandemic, modified inspections and workload as a result of the COVID-19 pandemic, and performance management issues. The challenges resulting from the pandemic that began in 2020 had largely started to dissipate by the beginning of 2022. By the beginning of 2023, the CUPA had successfully filled all vacant inspector positions and returned to full operational capacity.

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FINAL SUMMARY OF FINDINGS REPORT

5. EMERGENCY RESPONSE AND DISASTER RECOVERY:

The CUPA maintains a 24-hour On-Call program to receive notification of and provide response to hazardous materials related emergencies that arise within the county. Types of emergencies that have occurred over the last several years have included, but were not limited to, responses to potential biological/chemical threats, multiple illegal butane honey oil (BHO) laboratories, petroleum spills, illegal HAZMAT dumping, and several tanker trucks overturning.

The CUPA also provides support to local and regional wildfire response efforts when necessary. In 2020, the CUPA responded to requests for aid from Trinity County to assist in response and recovery efforts for the August Complex Fire.

6. TRAINING AND ASSISTANCE PROVIDED TO BUSINESS OPERATORS:

In addition to implementing the Unified Program, the CUPA provides training and assistance to business operators, including:

- Providing a kiosk in the CUPA office where business operators lacking the equipment or ability to generate a CERS submittal can receive assistance with this. In a rural county, access to computers and/or the internet is often limited, and maintaining a kiosk for regulated business operators further assists the regulated community. Additionally, the CUPA offers CERS submittal assistance to business operators via Microsoft Teams.
 - Hosting an annual, open doors “CERS Training” workshop (Workshop) every February, to review how to make a CERS submittal and relevant regulatory updates and facility best practices. The Workshop includes one-on-one CERS appointments where business operators who would like help can meet with a CUPA inspector for a tutorial. The Workshop is virtual and in-person at a library, which may be perceived as being less intimidating than coming into the CUPA office.
 - During the 2023 Workshop, representatives of World Oil Environmental Services, the most frequently hired company locally picking up used oil and antifreeze, presented best practices for management of used oil, antifreeze, and fuel.
 - Presentation topics from the 2023, 2022, 2021, and 2020 Workshops included annual recertification in CERS, Assembly Bill 1429 implementation and regulatory updates affecting CERS, the CERS website and requirements, CERS best practices, COVID procedures, the CalEPA Unified Program State Surcharge increase, and various hazardous waste topics including Treated Wood Waste, management of Photovoltaic Modules, and the EPA ID and Electronic Verification Questionnaire (eVQ) System.
 - The CUPA presents one-off meetings to discuss topics including employee training, tracking of hazardous waste, childhood lead poisoning prevention, and regulatory updates.
 - The CUPA hosted a workshop where participants obtained hands-on experience using a fire extinguisher, performing simulated spill cleanup, and labeling hazardous waste; participants learned about incompatibles and observed the demonstration of a chemical reaction between incompatibles.
 - The CUPA plans to host a Generator Improvement Rule update meeting on August 1, 2024.
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CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

A program deficiency is considered a major deviation in implementation of the Unified Program from the expected standards set forth in statute or regulation. Commonly identified as a systemic problem in implementation of one or more program elements, a deficiency is likely to have an impact on the safety and protection of human health and the environment. Program deficiencies identify specific aspects regarding implementation of the Unified Program.

1. DEFICIENCY:

The 2020 area plan is missing required elements and contains outdated information.

Review of the 2020 area plan finds the following required elements are missing:

- Pre-emergency Planning
 - Provisions for pre-incident surveys of business sites by first responders for the purpose of site familiarization, if deemed necessary by the administering agency, as required by [CCR, Title 19, Section 5020.3\(a\)](#).
- Provisions for training of emergency response personnel in the following areas:
 - Emergency procedures for first response to a release or threatened release of hazardous materials, to include pesticide drift exposure incidents as required by [CCR, Title 19, Section 5020.5\(a\)\(1\)](#) and [5020.1\(c\)](#).
 - Health and safety procedures for response personnel, as required by [CCR, Title 19, Section 5020.5\(a\)\(2\)](#).
 - Use of emergency response equipment and supplies, as required by [CCR, Title 19, Section 5020.5\(a\)\(3\)](#).
 - Procedures for access to mutual-aid resources, as required by [CCR, Title 19, Section 5020.5\(a\)\(4\)](#).
 - Identification of medical facilities capable of providing treatment appropriate for hazardous material incidents, to include pesticide drift exposure incidents, as required by [CCR, Title 19, Section 5020.5\(a\)\(5\)](#).
 - Evacuation plans and procedures, as required by [CCR, Title 19, Section 5020.5\(a\)\(6\)](#).
 - Monitoring and decontamination procedures for emergency response personnel and equipment, as required by [CCR, Title 19, Section 5020.5\(a\)\(7\)](#).
 - First-aid procedures for hazardous material incidents, including pesticide exposure, as required by [CCR, Title 19, Section 5020.5\(a\)\(8\)](#).
 - Procedures for informing the public during emergencies, as required by [CCR, Title 19, Section 5020.5\(a\)\(9\)](#).
 - Psychological stress that may be encountered during disaster operations, as required by [CCR, Title 19, Section 5020.5\(a\)\(10\)](#).
- Provisions for documenting personnel training.
 - Provisions for joint field or table-top exercises, with affected organizations, with voluntary participation of business representatives, as required by [CCR, Title 19, Section 5020.5\(b\)\(2\)](#).
- Public Safety and Information
 - Provisions for informing business personnel and the affected public of safety procedures to follow during a release or threatened release of a hazardous material as required by [CCR, Title 19, Section 5020.6\(b\)](#).

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- Procedures, developed in consultation with the County Agricultural Commissioner, to notify residents of a pesticide drift exposure incident and a procedure to assist in the coordination of an evacuation, if deemed necessary by emergency response personnel, as required by [CCR, Title 19, Section 5020.6\(c\)](#).
- Designation of responsibility for the coordinated release of safety information to the public and to the local Emergency Broadcast System, as required by [CCR, Title 19, Section 5020.6\(e\)](#).
- Provisions for evacuation plans that provide for:
 - centralized coordination of information with local law, fire, public health, medical, and other emergency response agencies as required by [CCR, Title 19, Section 5020.6\(g\)\(2\)](#).
 - properties of hazardous materials, such as quantity, concentration, vapor pressure, density, and potential health effects as required by [CCR, Title 19, Section 5020.6\(g\)\(4\)](#).
 - possible release scenarios, as required by [CCR, Title 19, Section 5020.6\(g\)\(5\)](#).
 - facility characteristics, topography, meteorology, and demography of potentially affected areas, as required by [CCR, Title 19, Section 5020.6\(g\)\(6\)](#).
 - ingress and egress routes and alternatives as required by [CCR, Title 19, Section 5020.6\(g\)\(7\)](#).
 - location of medical resources trained and equipped for hazardous material response as required by [CCR, Title 19, Section 5020.6\(g\)\(8\)](#).
 - mass-care facilities, reception areas, and sheltering as required by [CCR, Title 19, Section 5020.6\(g\)\(9\)](#).
 - procedures for post-emergency period population recovery as required by [CCR, Title 19, Section 5020.6\(g\)\(10\)](#).
- Supplies and Equipment
 - Provisions for regular testing, if applicable, and proper maintenance of emergency response equipment under the direct control of the county or city, as the case may be, as required by [CCR, Title 19, Section 5020.7\(b\)](#).

Review of the 2020 area plan finds the following required element is outdated:

- 2020 Introduction file – The “Hazardous Materials Area Plan Crosswalk” contains outdated citations referring to [CCR, Title 19, Article 2, Sections 5020.1 through 5020.8](#).

CITATION:

HSC, Chapter 6.95, Section 25503(c)

CCR, Title 19, Article 2, Sections 5020.1 through 5020.8.

[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will certify to CalEPA that a complete review of the area plan has been conducted and any necessary revisions have been made. Upon review of the area plan, the CUPA will ensure all required elements are present, and that emergency contact information is current. The CUPA will provide CalEPA with the reviewed and revised area plan.

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2. DEFICIENCY:

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

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

- FY 2023/2022
 - 15 of 47 (32%)
- FY 2022/2021
 - 12 of 47 (26%)
- FY 2021/2020
 - 8 of 74 (11%)

CITATION:

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

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review the I&E Plan or other applicable procedure, to ensure a process has been established for UST inspection staff to document:

- Follow-up actions applied by the CUPA to ensure RTC is achieved by UST facilities within 60 days;
- RTC in CERS for facilities that obtain RTC; and
- any applied enforcement.

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, or other applicable procedure 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 minimum, will include the date training was conducted, 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 3rd 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 requested by the State Water Board, that include RTC or documentation of applied appropriate enforcement.

3. DEFICIENCY:

The CUPA has not established all Unified Program administrative procedures.

Established Unified Program administrative procedures have components that are incomplete.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

The following Unified Program administrative procedure has not been established:

- Data Management
 - Collection, retention, and management of electronic data and documents in compliance with CCR, Title 27, Section 15185.
 - The CUPA shall collect, retain, and manage information needed to implement the Unified Program. Though review of facility information in CERS finds the CUPA is processing CERS submittals in a timely manner, a written procedure for processing submittal elements has not been established.

The following administrative procedures have components that are incomplete:

- Records maintenance
 - Identification of the records maintained
 - CUPA Self-Audit reports are not identified.
 - Archive procedures
 - The Records Maintenance procedure stipulates that it only applies to physical records and does not apply to electronic records. Procedures for archiving electronic records are not included.
- Responding to requests for information from the public, from government agencies with a legal right to access the information, or from emergency responders, including methods to prevent the release of confidential and trade secret information.
 - The Information Request Response procedures adequately outline the process for receipt and response of a Public Records Act (PRA) request; however, the process for responding to information requests from government agencies with a legal right to access the information or from emergency responders are not addressed.
- Providing the Hazardous Material Release Response Plan (HMRRP) information to emergency response personnel and other appropriate government entities in accordance with HSC, Section 25504(c).
 - The HMBP/HMRRP forwarding procedure only addresses administrative duties specific to the CUPA Office Assistant. It does not include a procedure for how HMBP/HMRRP information access will be provided to emergency response personnel and other appropriate government entities.

CITATION:

CCR, Title 27, Sections 15180(e) and 15185
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with the developed and revised Unified Program administrative procedures that adequately incorporate all required components.

By the 2nd Progress Report, if revisions and/or amendments to the developed and/or revised Unified Program administrative procedures, are necessary based on feedback from CalEPA, the CUPA will provide CalEPA with the revised and/or amended Unified Program administrative procedures. If no revisions and/or amendments are necessary, the CUPA will train CUPA personnel on the developed and/or revised Unified Program administrative procedures. The CUPA will provide training documentation to CalEPA, which at minimum will include the date training was conducted, an outline of the training conducted and a list of CUPA personnel in

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attendance. Once training is complete, the CUPA will implement the developed and/or revised Unified Program administrative procedures.

By the 3rd Progress Report, if revisions and/or amendments to the developed and/or revised Unified Program administrative procedures were necessary, the CUPA will train CUPA personnel on the revised and/or amended Unified Program administrative procedures. The CUPA will provide training documentation to CalEPA, which at minimum will include the date training was conducted, an outline of the training conducted and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the revised and/or amended Unified Program administrative procedures.

4. DEFICIENCY:

Required components of the I&E Plan are missing, inaccurate or incomplete.

Review of the I&E Plan finds the following component is missing:

- Provisions for ensuring the CUPA has sampling capability and ensuring the analysis of any material shall be performed by a state certified laboratory pursuant to HSC, Chapter 6.5, Section 25198.
 - Page 8: Conducting sampling is mentioned, however sampling capabilities and use of a certified lab are not discussed.

Review of the I&E Plan finds the following components are incomplete:

- Procedures governing the annual review of the I&E Plan are not discussed.
 - The cover page has a “review schedule” section, however no review frequency is identified. The revision date on the I&E Plan provided for review is 2017. The I&E Plan shall at a minimum be reviewed annually by the CUPA.
- Provisions for addressing complaints, including but not limited to the receipt, investigation, enforcement, and closure of a complaint.
 - Page 5: The I&E Plan states, “Complaints are investigated within three days of report being received by CUPA; urgent complaints are investigated within one day of receiving the report.” Procedures for discussing receipt, enforcement, and closure of a complaint were not included.
- Coordination and timely notification of appropriate prosecuting agencies.
 - Page 7: A timeline for notification of prosecuting agencies is not included.

Note: This deficiency was identified in the 2018 CUPA Performance Evaluation regarding incomplete provisions for a graduated series of enforcement relative to the actions to be initiated based on the severity of the violation. Though during the Evaluation Progress Report process the CUPA provided proposed text that adequately described the enforcement options to be applied when a facility fails to obtain RTC for minor, Class II and Class I violations based on the severity of the violation, the deficiency was not considered corrected. Review of the I&E Plan provided for the 2023 CUPA Performance Evaluation finds the proposed text provided during the Evaluation Progress Report process has been incorporated and provisions for a graduated series of enforcement are considered complete and meet the requirements of CCR, Title 27, Section 15200(a).

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CITATION:

CCR, Title 27, Section 15200(a)
[CalEPA, DTSC]

CORRECTIVE ACTION:

During the evaluation, the CUPA provided a revised procedure for addressing complaints, which adequately addresses receipt, enforcement, and closure of complaints. The revised closure procedure for addressing complaints needs to be incorporated into the I&E Plan directly, or by reference.

By the 1st Progress Report, the CUPA will revise the I&E Plan to adequately incorporate and correctly address all required components, including the date of revision. The CUPA will provide the revised I&E Plan to CalEPA.

By the 2nd Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from CalEPA and/or DTSC, the CUPA will provide the amended I&E Plan to CalEPA. If no amendments are necessary, the CUPA will train CUPA personnel on the revised I&E Plan. The CUPA will provide training documentation to CalEPA, which at minimum will include the date training was conducted, an outline of the training conducted and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the revised I&E Plan.

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

5. DEFICIENCY: CORRECTED DURING EVALUATION

The CUPA is not submitting Quarterly Surcharge Transmittal Reports to CalEPA within 30 days after the end of each fiscal quarter (FQ) when state surcharge revenues are remitted.

The following Quarterly Surcharge Transmittal Reports were not received by the required due date:

- FY 2020/2021
 - 1st FQ: Due October 30, 2020, submitted December 14, 2020
- FY 2021/2022
 - 1st FQ: Due October 30, 2021, submitted December 18, 2021
 - 2nd FQ: Due January 30, 2022, submitted March 15, 2022
 - 4th FQ: Due July 30, 2022, submitted September 26, 2022
- FY 2022/2023
 - 1st FQ: Due October 30, 2022, submitted December 2, 2022
 - 2nd FQ: Due January 30, 2023, submitted February 16, 2023

Note: A revised Quarterly Surcharge Transmittal Report template reflecting the increases in state surcharges effective July 1, 2021, and July 1, 2023, is available at: https://calepa.ca.gov/wp-content/uploads/sites/6/2023/10/SURCHARGE-TRANSMITTAL-REPORT_20231019-ADA-1.pdf. The current state surcharge amounts are available at: <https://calepa.ca.gov/unified-program-home/cupa-state-surcharges/>.

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CITATION:

CCR, Title 27, Section 15250(b)(1) and (2)
[CalEPA]

CORRECTIVE ACTION: COMPLETED

During the Evaluation, the CUPA submitted Quarterly Surcharge Transmittal Reports for the first, second, and third fiscal quarters of FY 2023/2024. All three reports were submitted prior to the mandated deadline and utilized the current template.

This Deficiency is considered corrected.

6. DEFICIENCY: CORRECTED DURING EVALUATION

The UST operating permit, issued as the “Underground Storage Tank Operating Permit” is missing information required by UST Regulations and HSC.

Review of UST operating permits finds the following required information is missing:

- Permit conditions citing applicable laws/permit conditions.
 - The UST operating permit and permit conditions must reference the following applicable citations:
 - HSC, Division 20, Chapter 6.7, Sections 25280-25296; and 25298-25299.6
 - CCR, Title 23, Division 3, Chapter 16, Sections 2610-2717.7

CITATION:

HSC, Division 20, Chapter 6.7, Sections 25284, 25285, and 25286
CCR, Chapter 16, Division 3, Chapter 16, Section 2712
CCR, Title 27, Section 15190(h)
[CalEPA, State Water Board]

CORRECTIVE ACTION: COMPLETED

During the evaluation, the CUPA provided a revised permit template, which included all required components. Following approval of the template from the State Water Board, the CUPA provided the Underground Storage Tank Operating Permit to five UST facilities using the revised template.

This Deficiency is considered corrected.

7. DEFICIENCY: CORRECTED DURING EVALUATION

The CUPA is not ensuring each stationary source in the California Accidental Release Prevention (CalARP) Program reviews and updates the Risk Management Plan (RMP) at least once every five years.

Review of information provided by the CUPA finds:

- 4 of 16 (25%) stationary sources in the CalARP Program have not updated the RMP at least once in the last five years.

CITATION:

CCR, Title 19, Section 5070.11(a)(1) and (b)(1)
[CalEPA]

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CORRECTIVE ACTION: COMPLETED

During the evaluation, the CUPA provided evidence of updated RMPs for three stationary sources and initiated enforcement in response to a stationary source that has not provided an updated RMP. This Deficiency is considered corrected.

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

An incidental finding is considered a minor deviation in implementation of the Unified Program from the expected standards set forth in statute or regulation. Commonly identified as a minor issue that may be problematic in implementation of one or more program elements, an incidental finding is not likely to have an impact on the safety and protection of human health and the environment.

1. INCIDENTAL FINDING:

The CUPA is not consistently including all observations, citations, and corrective action documentation for each violation cited, nor the factual basis for alleging each violation cited in HWG inspection reports.

Review of HWG inspection reports, CERS CME information and Notices of Violation finds inadequate or improper documentation of cited violations for the following facilities:

- CERS ID 10019926: inspection report dated May 10, 2022.
 - Class II violation for exceeding the Hazardous Waste (HW) accumulation time limit includes the following observation, "Onsite hazardous waste has exceeded 270 days stored onsite."
 - The observation does not include a description of the initial accumulation date, the number of containers in violation, nor a description of the containers (ex: size, location, contents).
 - Class II violation for improper labeling of HW containers includes the following observation, "Observed multiple drums and buckets of waste oil without labels."
 - The observation does not describe the number, size, nor location of the containers.
- CERS ID 10020445: inspection report dated April 26, 2022.
 - Class II violation for failure to accumulate HW in a container that is in good condition includes the following observation, "Waste stored in in Old Physical Science Lab storage closet was in cardboard boxes."
 - The observation does not describe the number, size, nor contents of the containers.
- CERS ID 10021516: inspection report dated June 4, 2021.
 - Minor violation for improper labeling of HW containers includes the following observation, "During site inspection, observed waste drums missing hazardous waste labels."
 - The observation does not include a description of the number of containers in violation nor a description of the containers (ex: size, location, contents).

Note: It is not necessary to revise the HWG inspection reports for the facilities identified as examples above. The examples provided above may not represent all instances of this Incidental Finding.

CITATION:

HSC, Chapter 6.5, Section 25185(c)(2)(A)
[DTSC]

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RESOLUTION:

During the evaluation, the CUPA ensured HWG Program inspectors received inspection report writing training to include observations, factual basis, citations, and corrective actions for each violation cited in an HWG inspection report by reviewing:

- the Elements of a Violation Training; and
- the following DTSC HWG fact sheets and information:
 - DTSC Hazardous Waste Generator Requirements Fact Sheet (<https://dtsc.ca.gov/hazardous-waste-generator-requirements-fact-sheet/>).
 - Accumulating Hazardous Wastes at Generator Sites (<https://dtsc.ca.gov/accumulating-hazardous-wastes-at-generator-sites/>).
 - The language of HSC, Section 25185(c)(2)(A) (https://leginfo.legislature.ca.gov/faces/codes_displayText.xhtml?lawCode=HSC&division=20.&title=&part=&chapter=6.5.&article=8).

The CUPA will provide CalEPA with a statement that training had been conducted on July 1, 2024.

By the 2nd Progress Report, and with each subsequent Progress Report until considered resolved, the CUPA will provide CalEPA with an inspection report citing at least one HWG violation, for three HWG facilities, as requested by DTSC, that have been inspected after training has been completed and within the last three months. Each inspection report will contain observations, citations, corrective actions, and the factual basis for each violation cited to correctly identify and classify each observed HWG violation.

2. INCIDENTAL FINDING:

The CUPA is not consistently ensuring HMBP submittals are thoroughly reviewed and contain all applicable required elements before being accepted in CERS.

Review of 14 HMBP CERS submittals provided by APSA tank facilities in lieu of a tank facility statement finds the following 3 were accepted with missing or incomplete required elements:

- CERS ID 10330927:
 - Site map submitted on February 27, 2023, and accepted on March 1, 2023
 - Missing emergency response equipment and emergency shutoff
- CERS ID 10331248:
 - Site map submitted on February 23, 2023, and accepted on March 1, 2023
 - Missing emergency response equipment and emergency shutoff
- CERS ID 10932403:
 - Site map submitted on July 17, 2023, and accepted on August 2, 2023
 - Missing adjacent street(s), evacuation staging area, and emergency response equipment

CITATION:

HSC, Chapter 6.67, Section 25270.6(a)(2)

California Fire Code (CFC), Chapter 50, Sections 5001.5.1 and 5001.5.2, and Appendix H [OSFM]

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RESOLUTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each future HMBP submittal is thoroughly reviewed and contains all applicable required elements before being accepted in CERS. The action plan will include steps to follow-up with APSA tank facilities having an HMBP submittal reviewed and not accepted due to identified missing or incomplete elements, when an HMBP was provided in lieu of a tank facility statement.

By the 2nd Progress Report, the CUPA will train personnel on the steps in the action plan. The CUPA will provide CalEPA with a statement that training has been conducted.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a narrative update on the implementation of the action plan.

By the 4th Progress Report, the CUPA will ensure each APSA tank facility has annually submitted a complete HMBP to CERS, when an HMBP is provided in lieu of a tank facility statement, or the CUPA will have applied enforcement.

3. INCIDENTAL FINDING:

The CUPA is not conducting complete annual UST compliance inspections.

Review of annual UST compliance inspection reports, associated testing and leak detection documents, and CERS information finds:

- non-compliance was not observed, and a violation not issued in CERS for the following:
 - CERS ID 10020310
 - 2022 and 2023 Spill Containment Testing Report forms have identified spill containment as not meeting minimum capacity of 5 gallons and requirement replacement. No violation was issued in CERS or recorded in the 2022 and 2023 Routine Inspection Reports.
 - 2017 Secondary Containment Testing Report has all sensors passing on the Summary of Test Results, but further test documents have failures for UDC #1-2, UDC #3-4, UDC #9-10 and UDC #11-12. No violation was issued in CERS.
 - CERS ID 10020562
 - 2023 Secondary Containment Testing was late. No violation was issued in CERS.
- the following UST construction and inspection discrepancies
 - CERS ID 10020430
 - 2021-2023 Monitoring System Certification Forms and Spill Containment Testing Report Forms had the incorrect CERS ID listed.
- the following UST inspection documents are missing:
 - CERS ID 10020823
 - August 10, 2021, Spill Containment Testing Report Form.
 - CERS ID 10020181
 - 2023 Secondary Containment Testing Report Form.

Note: The examples provided above may not represent all instances of this Incidental Finding.

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CITATION:

HSC, Chapter 6.7, 25280.1(f), 25284.1, 25284.2, 25290.2(e), 25291(c) & 25292(d)
CCR, Title 23, Division 3, Chapter 16, 2635(b), 2635(c), 2635 (d), 2636(a), 2636(f), 2637 & 2665
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will provide CalEPA with an analysis and explanation as to why complete annual UST compliance inspections are not consistently conducted. The analysis and explanation will include, at minimum:

- Discussion of what procedures and tools may be needed to consistently conduct complete annual UST compliance inspections and correctly report UST information to CERS
 - e.g. identifying areas of the annual UST compliance inspection checklist that can be improved (refer to the California CUPA Forum Board “UST Inspection Checklist,” at <https://calcupa.org/inspection-checklist/index.html>);
- Plan to address all reasons why complete annual UST compliance inspections are not consistently conducted;
- Identification of the types of frequency of raining needed to consistently conduct complete UST compliance inspections, identify non-compliance, and ensure CME information is reported to CERS.

By the 2nd Progress Report, based on the findings identified in the CUPA’s analysis and explanation, the CUPA will review and revise the I&E Plan, or other applicable procedure, to ensure, the establishment of a process for:

- Conducting annual UST compliance inspections when UST inspection staff are on-site to witness the monitoring system certification and visually inspect all UST required components;
- Conducting annual UST compliance inspections when UST inspection staff are not on-site and cannot witness the monitoring system certification and visually confirm all UT requirements are met;
- Review and following-up with UST testing and leak detection documents submitted by UST owners or operators as part of the annual UST compliance inspection;
- Documenting and reporting observed noncompliance in annual UST compliance inspection reports and in CERS;
- Reviewing the annual UST compliance inspection checklist for thoroughness to capture citations in accordance with UST Regulations, HSC, and the Unified Program violation library in CERS;
- Accurate U.S. Environmental Protection Agency Technical Compliance Rate (TCR) reporting.

The CUPA will provide CalEPA with the revised I&E Plan, or other applicable procedure. The CUPA will contact the State Water Board for any assistance needed.

By the 3rd Progress Report, if amendments to the revised I&E Plan, or other applicable procedure, are necessary based on the 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

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minimum will include the date training was conducted, 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 4th Progress Report, if amendments to the revised 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 minimum, will include the date training was conducted, 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.

4. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA is not ensuring each APSA tank facility that is not conditionally exempt prepares a Spill Prevention, Control, and Countermeasure (SPCC) Plan.

Review of CERS CME information between July 1, 2020, and June 30, 2021, finds the following APSA tank facility was cited with a violation for failure to prepare an SPCC Plan and there is no documented RTC.

- FY 2020/2021: CERS ID 10810663, inspection dated November 12, 2020

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)
[OSFM]

RESOLUTION: COMPLETED

Based on the recently accepted Hazardous Materials Inventory submittal in CERS (submitted March 27, 2024), the facility now stores less than 1,320 gallons of petroleum and the aboveground petroleum storage tank at the facility is not a tank in an underground area. Therefore, this facility is no longer regulated under APSA and is not required to prepare an SPCC Plan.

This Incidental Finding is considered resolved.

5. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA is not consistently classifying APSA Program violations properly.

Review of facility files and CERS CME information between July 1, 2021, and June 30, 2023, finds the following non-minor violation was classified as a minor violation:

- Not having, or failure to prepare, an SPCC Plan was cited as a minor violation. Facilities that operate without an SPCC Plan present a significant threat to human health or the environment and may benefit economically from noncompliance either by reduced costs or by competitive advantage. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3). In addition, classifying a violation for not having an SPCC Plan as minor is inconsistent with, and less stringent than, the U.S. Environmental Protection Agency (EPA).

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- FY 2021/2022
 - CERS ID 10884136: inspection dated March 4, 2022
- FY 2022/2023
 - CERS ID 10899604: inspection dated July 14, 2022
 - CERS ID 10810663: inspection dated March 8, 2023

Note: The Federal SPCC rule is not delegated to any state. APSA requires consistency and compliance with the SPCC rule for SPCC Plan preparation and implementation, as well as consistency with Federal enforcement guidance.

CITATION:

HSC, Chapter 6.11, Sections 25404(a)(3) and 25404.2(a)(3)-(4)

HSC, Chapter 6.67, Sections 25270.4.1(c), 25270.4.5(a), and 25270.6(a)(2)

CCR, Title 27, Section 15200(a) and (e)

[OSFM]

RESOLUTION: COMPLETED

During the evaluation, the CUPA conducted trainings on minor violations as defined in HSC, Chapter 6.11, Section 25404(a)(3), and how to properly classify violations during inspections.

This Incidental Finding is considered resolved.

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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:

The information below is a summary of the overall implementation of the HWG Program and the CUPA's hazardous waste related activities based upon review of policies and procedures, CERS CME information, facility file information, information provided by the CUPA and Self-Audit Reports between October 1, 2020, and September 30, 2023:

- CERS reflects 595 regulated HWG facilities, including 7 Resource Conservation and Recovery Act (RCRA) Large Quantity Generators (LQGs), and 1 Tiered Permitted (TP) facility within the jurisdiction of the CUPA.
- The three-year inspection frequency for all HWG Program facilities is currently being met.
- The two-year inspection frequency for all TP facilities is currently being met.
- CERS reflects the CUPA conducted 765 total HWG inspections.
 - The CUPA conducted 757 "Routine" HWG inspections, of which 650 (86%) had no violations cited and 107 (14%) had at least one violation cited.
 - In the 107 "Routine" inspections conducted having at least one violation, 143 total violations were cited, consisting of:
 - 0 Class I violations,
 - 29 (20%) Class II violations, and
 - 114 (80%) minor violations.
 - The CUPA conducted 8 "Other" HWG inspections, of which 6 (75%) had no violations cited and 2 (25%) had at least one violation cited.
 - In the 2 "Other" inspections conducted having at least one violation cited, 4 total violations were cited, consisting of:
 - 0 Class I violations,
 - 2 (50%) Class II violations, and
 - 2 (50%) minor violations.
- The CUPA has ensured RTC for 129 of 147 (88%) violations cited.
- The CUPA completed a separate formal enforcement action for two different facilities with hazardous waste related violations having a cumulative total penalty amount of \$729,102.00.
- Inspection reports indicate consent to inspect was requested prior to the inspection, however inspection reports do not always contain detailed comments that note the factual basis of cited violations.

RECOMMENDATION:

Continue with the three-year HWG inspection frequency and applied enforcement efforts in addition to generating quality inspection reports. The efforts of the CUPA to conduct hazardous waste inspections on a three-year frequency are applauded. Conducting inspections frequently

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leads to better compliance rates and helps to ensure that hazardous waste is adequately being managed.

2. OBSERVATION:

As of May 21, 2024, the CERS reporting requirement is currently set as “APSA Applicable” for 150 tank facilities. The CUPA’s data management system identifies 145 APSA tank facilities.

- 140 APSA tank facilities are identified in both CERS and the CUPA’s data management system.
- 10 tank facilities identified as “APSA Applicable” in CERS are not identified as APSA tank facilities in the CUPA’s data management system. Some of these facilities are likely not APSA regulated.
- Five tank facilities identified as APSA tank facilities in the CUPA’s data management system are not identified in CERS as APSA tank facilities.

RECOMMENDATION:

Determine if each facility identified as “APSA Applicable” in CERS and not identified as an APSA tank facility in the CUPA’s data management system should be regulated under APSA.

Determine if each facility identified as an APSA tank facility in the CUPA’s data management system and not identified as “APSA Applicable” in CERS should be regulated under APSA.

Complete the reconciliation of the APSA Program information in the CUPA’s data management system with CERS to ensure all APSA tank facilities are consistently identified in the CUPA’s data management system and in CERS.

- If a facility is not subject to being regulated under APSA, the APSA reporting requirement should be set to “APSA Not Applicable” in CERS and the facility should not be identified as an APSA tank facility in the CUPA’s data management system.
 - If a facility is subject to being regulated under APSA, the APSA reporting requirement should be set to “APSA Applicable” in CERS and the facility should be identified as an APSA tank facility in the CUPA’s data management system.
-

3. OBSERVATION:

During the evaluation, the CUPA provided a revised I&E Plan, dated September 16, 2024, which is different than the I&E Plan initially provided for the evaluation, and different than the I&E Plan previously provided with a date of September 26, 2018.

The I&E Plan dated September 16, 2024, contains information that may benefit from improvement.

- The date of the I&E Plan (September 16, 2024) is automatically changed to the current date the file is electronically opened and viewed. This does not reflect a static date that the I&E Plan was last reviewed and updated.
- There are several outdated guidance documents and inactive hyperlinks throughout the document.
- Page 11: Replace “AST” with “APSA”

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- Page 16, Inspection Frequency Table: Mandated APSA inspections apply to facilities storing 10,000 gallons or more of petroleum.
- Page 33: Plan references, “UPA’s policy,” for non-minor violations in terms of RTC, however there is no inclusion of the “UPA policy” within the I&E Plan.
- Page 52: Referral to the State Water Board for AST violations is no longer valid. Remove “and AST” within the statement at the top regarding referrals to the State Water Board. Replace “AST” with “APSA” in the first sentence under “referral to US EPA.”
- Page 53, Enforcement Table 1: Replace “AST” with “APSA.” Notice to comply applies to all program elements including APSA, and criminal case also applies to APSA.
- Page 53, Enforcement Table 2: Replace “AST” with “APSA.”
- Page 54: In the program specific enforcement authorities, under APSA citations, add HSC, Sections 25270.12.1 and 25270.12.5. Delete the two sentences that are not applicable to APSA Program enforcement.
- Page 68: Replace “Aboveground Storage Tank” with “APSA.” Delete the phrase “which shall be established by the Secretary for Environmental Protection,” regarding the APSA basic inspector training program.

RECOMMENDATION:

Update the I&E Plan as indicated above.

4. OBSERVATION:

The Self-Audit Reports for FYs 2020/2021, 2021/2022, 2022/2023 contain information that may benefit from improvement.

- “Aboveground Storage Tank” should be changed to APSA to be consistent with statute.
- Update the “Uniform Fire Code and Inventory Requirements” to HMMP/HMIS requirements.
- Update the “California Fire Code” to include HMMP/HMIS requirements for clarity or replace with HMMP/HMIS requirements.

RECOMMENDATION:

Ensure future Self-Audit Reports address the above observations.

5. OBSERVATION:

The CUPA is not consistently ensuring UST related information in CERS is accurate and complete. Review of CERS UST facility submittals finds the CUPA is accepting inaccurate or incomplete information.

Review of the UST Facility/Tank Data Download report obtained from CERS on January 9, 2024, finds:

- 8 of 27 (30%) continuous vacuum, pressure, or hydrostatic (VPH) Systems with Periodic Enhanced Leak Detection testing identified as “Yes.” The following are examples:
 - CERS ID 10020697
 - CERS ID 10166891
 - CERS ID 10330753

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RECOMMENDATION:

Continue to conduct detailed review of CERS submittals to ensure construction and testing information is accurate and complete.

6. OBSERVATION:

Review of CERS finds 5 UST facilities have single-walled components which require permanent closure by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05.

- CERS ID 10020109
- CERS ID 10020181
- CERS ID 10020310
- CERS ID 10020421
- CERS ID 10020430

Note: The examples provided above may not represent all instances of this observation.

RECOMMENDATION:

Provide verbal and written reminders to all applicable UST owners/operators regarding the December 31, 2025, deadline for permanent closure of single-walled USTs.

7. OBSERVATION:

The CUPA is accepting inaccurate or incomplete UST information in CERS.

Review of UST compliance inspection reports, associated testing and leak detection documents and CERS information finds the following tank construction and testing discrepancies:

- CERS ID 10020802
 - Monitoring System Certification Form Line Leak Detector is inconsistent with what is reflected in CERS.
- CERS ID 10020421
 - 2023 Monitoring System Certification Form Line Leak Detector is inconsistent with what is reflected in CERS.
- CERS ID 10020562
 - International Code Council (ICC) UST Compliance Inspector Certification expiration date is missing for the technician from the Annual Monitoring System Certification Form and Spill Containment Testing Report Form.
- CERS ID 10469716
 - 2022 and 2023 Monitoring System Certification Forms and Spill Containment Forms are missing the CERS ID.
 - 2020 Overfill Prevention Equipment Inspection Forms are missing the CERS ID.
 - 2023 and 2023 Secondary Containment Testing Report Forms are missing the CERS ID.
- CERS ID 10020562
 - 2023 Secondary Containment Testing Report Form is missing the CERS ID.
- CERS ID 10020805
 - 2022 Overfill Prevention Equipment Inspection Form is missing the CERS ID.

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- CERS ID 10020823
 - 2022 Overfill Prevention Equipment Inspection Form is inconsistent with what is reflected in CERS.
- CERS ID 10020802
 - 2023 Overfill Prevention Equipment Inspection Form is inconsistent with what is reflected in CERS.

Note: The examples provided above may not represent all instances of this Observation.

RECOMMENDATION:

Continue to conduct detailed review of testing documentation to ensure information is accurate and complete and consistent with what is reflected in CERS. Reject forms that require correction or are incomplete.

8. OBSERVATION:

The annual CalARP Performance Audit Report for FYs 2020/2021, 2021/2022, and 2022/2023 have an inaccurate element.

The following element is inaccurate:

- A summary of the personnel years (PYs) necessary to directly implement, administer, and operate the CalARP Program.
 - The CalARP Performance Audit Report summarizes personnel in the terms of a Full Time Equivalent (FTE) rather than PYs. CCR, Title 19, Section 5150.5(b)(7) requires the personnel time dedicated to CalARP Program implementation be summarized in PYs.

RECOMMENDATION:

With the annual CalARP Performance Audit for FY 2023/2024, ensure all elements required by CCR, Title 19, Section 5150.5 are addressed, including a summary of the personnel and PYs necessary to directly implement, administer, and operate the CalARP Program.

9. OBSERVATION:

On March 26, 2024, a UST oversight inspection was conducted during the annual monitoring system certification (AMC), and the spill containment testing at CERS ID 10020565, a fueling facility with a regular stand-alone UST and premium and a compartmented diesel UST. Two service technicians, and a facility operator were also on site.

The inspector was knowledgeable, performing a thorough review of required onsite documentation and performed visual inspection of sumps, spill buckets, under dispenser containment (UDC), and observed line leak detector testing.

Prior to the inspector arriving at the facility, the spill buckets had been filled. The spill bucket onset of water was properly cited on the inspection report and documented in CERS. Additionally, the inspector left comments on the inspection report and in CERS to verify Red Jacket testing calibration exemption and notes for next inspection.

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Review of the AMC and Spill Containment testing results identified L4 and L5 Regular and Premium/Diesel Annular sensors as model 0794380-208. The sensors are correctly identified in CERS as sensor model 794380-420. 208 sensor models cannot be used for annular space monitoring.

RECOMMENDATION:

Continue to conduct detailed review of testing documentation to ensure information is accurate and complete and consistent with what is reflected in CERS. Reject forms that require correction or are incomplete.

10. OBSERVATION:

On April 23, 2024, oversight inspections were conducted at two Small Quantity Generator (SQG) facilities (CERS ID 10020655 and CERS ID 10020991), each with a separate CUPA inspector.

Prior to the inspections, each inspector demonstrated thorough pre-inspection preparation, including using CERS to gather information on the activities and hazardous waste shipments of each facility inspected, and to generate follow-up questions to address with the facility operator. Other information reviewed in CERS included the Facility Site Map, address, and contact information, and whether Submittals and other information were current and accurate. Each inspector reviewed facility files maintained by the CUPA, including the last inspection in Accela, to verify facility information, previous violations, and return to compliance information. One inspector possessed historical knowledge about the facility and facility operator. Inspectors routinely review additional resources including the DTSC Hazardous Waste Tracking System, EnviroStor, GeoTracker, ParcelQuest, the Humboldt County WebGIS and database, Google Earth, CalOES reports, and the Lost Coast News. Overall, the pre-inspection preparation was detailed and appropriate for the nature of the facilities being inspected.

During the inspection at CERS ID 10020655, the inspector asked for and obtained consent before beginning the inspection. During the inspection at CERS ID 10020991, the inspector did not ask for nor obtain consent before beginning the inspection; consent was granted the week before when scheduling the inspection. At each facility, each inspector established rapport with facility operators and asked several open-ended questions to better understand facility operations. The inspectors explained HWG requirements, as appropriate, to help educate the facility operators. A full walkthrough of both facilities was conducted, and the inspectors investigated all areas where hazardous waste was generated and managed. The appropriate documents required of SQG facilities were reviewed, and documents that were not available for review were noted as violations. The violations observed during each inspection were verbally reviewed with the facility operator prior to leaving the facility. The inspectors did not provide a written summary of violations or summary of observations to the facility operator at the conclusion of each inspection. The inspectors returned to the office to prepare an inspection report, which was then provided to the facility by email. Overall, the inspections were handled professionally and were conducted in a timely manner.

The CUPA inspectors demonstrated knowledge of hazardous waste topics including lead-acid batteries, used oil, antifreeze, and oil filters, training and disposal documentation requirements, emergency equipment, and general HWG Program requirements including EPA IDs, labeling, accumulation time, container requirements, and housekeeping. The violations cited in the inspection report for CERS ID 10020655 contain the inspector's observations, corrective actions,

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and the violation classification. The “General” CERS violation number was used to cite two violations in the inspection report for CERS ID 10020655. The violations cited in the inspection report for CERS ID 10020991 contain the inspector’s observations and the violation classification. The violations cited in the inspection report for CERS ID 10020991 do not contain corrective actions; return to compliance was obtained for the violations cited during the inspection. The violations cited in each of the inspection reports did not contain citations.

RECOMMENDATION:

Deliver a written summary of violations to the facility operator as soon as possible after an inspection is conducted; HSC, Chapter 6.5, Section 25185(c)(1) requires the delivery of a written summary of violations to the facility operator at the conclusion of each inspection, prior to leaving the site. Replace yes-no questions with open-ended questions to obtain more details about facility operations. Continue to review CERS, facility files maintained by the CUPA, and additional resources, to prepare for inspections. Obtain consent before beginning inspections and maintain rapport with facility operators. Continue to conduct full walkthroughs of facilities, review appropriate documents, and review violations observed with the facility operator.

Continue writing detailed inspection reports that include all factual basis of the violation and properly cite noted violations. The “General” or “General-Local Ordinance” CERS violation number should not be used to cite HWG Program violations when a more specific or appropriate CERS violation number is available. Corrective action language (i.e. language describing what must be done for the facility to obtain RTC) should be prescriptive and clearly describe what must be done for the facility to obtain RTC, including how corrective action documentation should be provided for RTC consideration.

11. OBSERVATION:

On June 25, 2024, a CalARP oversight inspection was conducted at CERS ID 10020538. The inspector was prepared for the inspection and reviewed relevant information prior to arriving at the facility. The inspector was knowledgeable, established rapport with the facility operators, requested and reviewed the most current RMP information, toured the entire site, and effectively communicated technical information to the facility operators.

On June 26, 2024, an HMBP oversight inspection was conducted at CERS ID 10020259 and at CERS ID 10886941. The inspector was well prepared for the inspection and reviewed relevant information prior to arriving at each facility. The inspector established rapport with the facility operators, toured the entire site, verified inventory, and emergency response plan information and training on site, and effectively communicated technical information to the facility operators. The inspector identified and disclosed all observed violations for each inspection.

RECOMMENDATION:

Continue to conduct thorough CalARP and HMBP inspections.

12. OBSERVATION:

Existing references to citations in CCR, Title 19, Division 2, Chapters 4 and 4.5 in administrative procedures, standard operating procedures and other documents associated with the HMBP and CalARP Programs may be outdated.

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Effective July 22, 2021, Assembly Bill 148 (Chapter 115, Statutes of 2021), transferred the oversight responsibility of the HMBP and CalARP Programs from the California Governor's Office of Emergency Services (Cal OES) to CalEPA.

As a result, on March 6, 2024, the Office of Administrative Law (OAL) approved a rulemaking package submitted by CalEPA to amend and relocate portions of CCR, Title 19, Division 2, Chapters 4 and 4.5 into a new Division (Division 5). The rulemaking does not materially alter any requirement, right, responsibility, condition, prescription, or other regulatory element. The final regulatory text for the rulemaking package revising the citations is available as follows:

- For HMBP Program requirements: https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/19-CCR-Div-5-Ch-1-Final_Underline_Strikeout.pdf
- For CalARP Program requirements: https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/19-CCR-Div-5-Ch-2-Final_Underline_Strikeout.pdf

RECOMMENDATION:

Update any applicable policies, procedures, or other documents to reflect the new citation references to CCR, Title 19 for the HMBP and CalARP Programs using the “regulatory crosswalk” developed by CalEPA, as Guidance Document 24-01, available at:

- <https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/Guidance-Document-24-01-Regulatory-Crosswalk-for-HMBP-and-CalARP-Title-19-Changes.pdf>