

1. Keywords
2. Start Date: FY 02
End Date: FY 02
3. HQ Division:
4. Phase:
5. Program NO:
6. Survey Type: ECAS
7. INSTALLATION OR SOURCE OF INFORMATION (CITY & STATE OR COUNTY ARE ESSENTIAL)
HS - USA HEALTH SERVICES COMMAND
8. Authors:
9. ARLOC/Activity: 11933 001 - WALTER REED AMC
Location: WASHINGTON
State: DC
10. Project Control Number: ECAS WRAMC
11. Document Type: ENVIRONMENTAL COMPLIANCE ASSESSMENT (ECAS),
ENVIRONMENTAL COMPLIANCE REPORT, WRAMC, 29 APRIL – 10 MAY 2002



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
U.S. ARMY CENTER FOR HEALTH PROMOTION AND PREVENTIVE MEDICINE
5158 BLACKHAWK ROAD
ABERDEEN PROVING GROUND, MARYLAND 21010-5403

MCHB-TS-EHM

07 AUG 2002

MEMORANDUM FOR Commander, U.S. Army Medical Command, ATTN:
MCAF-E (Gilbert Gonzalez), Fort Sam Houston, TX 78234-6000

SUBJECT: Environmental Compliance Assessment System (ECAS),
Environmental Compliance Assessment Report, Walter Reed Army
Medical Center, Washington DC,
29 Apr - 10 May 2002

Ten copies of the subject report are enclosed. The Executive Summary is provided as Chapter 1 of the report. The point of contact for this report is Mr. Kenneth A. Mioduski, the team leader for the ECAS assessment at Walter Reed Army Medical Center. He may be reached at DSN 584-5226 or commercial (410) 436-5226. Additional comments or concerns may be directed to the undersigned at DSN 584-3652 or commercial (410) 436-3652.

FOR THE COMMANDER:

LINDA L. BAETZ
Program Manager
Hazardous and Medical Waste

Encl

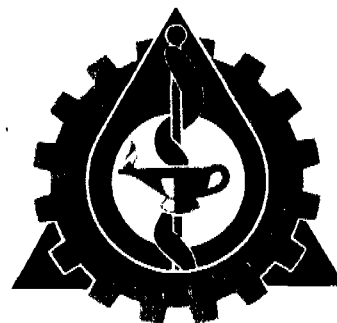
CF:

CDR, WRAMC, ATTN: D-SEE (w/encl)
CDR, USAEC, ATTN: SFIM-AEC-TIC (w/encl)
CDR, USACHPPM, DSA-N (w/encl)

ECAS

(Environmental Compliance Assessment System)

**ENVIRONMENTAL COMPLIANCE ASSESSMENT SYSTEM (ECAS)
EXTERNAL ASSESSMENT
WALTER REED ARMY MEDICAL CENTER
WASHINGTON, D.C.
29 APRIL – 10 MAY 2002**



Prepared by:
U.S. Army Center for Health Promotion and Preventive Medicine
Aberdeen Proving Ground, MD 21010-5403

Distribution limited to U.S. Government agencies only; protection of privileged information evaluating another command; Nov 01. Requests for this document must be referred to Commander, U.S. Army Medical Command, ATTN: MCHO-CL-W, 2050 Worth Road, Fort Sam Houston, TX 78234-6000.

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CHAPTER 1

EXECUTIVE SUMMARY

1.1 INTRODUCTION

The Environmental Compliance Assessment System (ECAS) Program supports the Total Army (Active Army, Army Reserve, and Army National Guard). The ECAS Program is centrally funded by Headquarters, Department of the Army (HQDA) and centrally managed by the U.S. Army Environmental Center (AEC). The HQDA established the ECAS program as a tool for assisting Army installation commanders in achieving, maintaining and monitoring environmental compliance.

The objective of the ECAS assessment at Walter Reed Army Medical Center (WRAMC) was threefold: (1) to provide a "snapshot in time" evaluation of the environmental compliance status; (2) to identify specific deficiencies as well as systemic weaknesses of the environmental program; and (3) to provide realistic suggested corrective actions that would help WRAMC achieve, maintain, and monitor environmental compliance. To accomplish this objective, the ECAS assessment team employed sampling strategies to obtain a representative view of WRAMC's activities and tenants. This Environmental Compliance Assessment Report (ECAR) should be used as a tool to implement WRAMC's continued commitment to improving environmental programs and complying with environmental laws and regulations.

A matrixed team comprised of military and civilian Army personnel from the U. S. Army Center for Health Promotion and Preventive Medicine (USACHPPM) and the contractor Horne Engineering Services, Inc. performed the onsite ECAS assessment during 29 April - 10 May 2002.

1.2 SUMMARY OF FINDINGS

This ECAR presents the findings and corrective actions developed during the assessment. A total of 96 findings were identified at WRAMC. Table 1-1 presents a summary of findings by media type, finding category, and finding class. No findings with immediate danger to the environment were found.

1.3 FOLLOW-UP ACTIVITIES

Walter Reed AMC Environmental Management Office personnel and MEDCOM now need to complete the Installation Corrective Action Plan (ICAP), a tracking system and funding strategy for the corrective actions contained in this ECAR. The purpose of the ICAP is to serve as a planning document for WRAMC and MEDCOM to use in funding and executing the selected corrective actions. The ICAP is intended to be a matrix format that lists findings, corrective actions, schedules, and required resources for correcting the deficiencies.

TABLE 1-1: WALTER REED ARMY MEDICAL CENTER - SUMMARY OF FINDINGS

INSTALLATION: WALTER REED AMC

FFID: DC-211621156

FISCAL YEAR: 2002

COMPLIANCE AREA	REGULATORY			MANAGEMENT			TOTAL
	I	II	HS	POS	III	HS	
Air Emissions	9	0	0	1	1	0	11
Cultural Resources	1	0	0	0	3	0	3
Hazardous Waste	17	0	0	0	1	0	18
Natural Resources	0	0	0	0	0	0	0
Environmental Impacts-NEPA	1	0	0	0	0	0	1
Environmental Noise	0	0	0	0			
Installation Restoration Program	0	0	0	0	0	0	0
Pollution Prevention	1	0	0	1	1	0	3
Program Management	0	0	0	0	9	0	9
Pesticides	0	0	0	0	12	0	12
POL Management	2	0	0	0	2	0	4
Solid Waste	9	0	0	0	4	0	13
Storage Tanks	2	0	0	0	1	0	3
PCB	0	0	0	0	0	0	0
Asbestos	1	0	1	1	1	0	3
Radon	0	0	0	0	0	0	0
Lead Based Paint	1	0	0	0	0	0	1
Wastewater	4	0	0	0	2	0	6
Water Quality	0	0	0	0	8	0	8
TOTAL	48	0	1	2	45	0	96

CHAPTER 2

BACKGROUND AND SCOPE

2.1 ENVIRONMENTAL COMPLIANCE ASSESSMENTS: GENERAL

2.1.1. Objectives. The ECAS evolved from the Department of the Army's recognition that Army installations needed assistance in complying with the vast array of environmental legislation. The objective of ECAS is to assist installation commanders in achieving, maintaining, and monitoring compliance with Federal, State, local, DOD, and Army environmental regulations. The ECAS process provides a framework for the installation to identify and track compliance deficiencies. As a result, an installation's overall environmental program can be developed or improved. Of great benefit to the installation is the fact that ECAS not only identifies deficiencies, but also provides suggested corrective actions and targets resources to implement solutions.

2.1.2. Roles and Responsibilities. The USAEC manages the ECAS program by developing budgets and the ECAS workplan, overseeing ECAS software development, providing tracking and trend analysis, and providing ECAS training. Army assessment teams, such as USACHPPM, and contracted environmental companies perform the onsite assessments and produce the ECARs. Since the second implementation round of ECAS, beginning in FY 95, major commands (MACOMs) have had an increased role in the ECAS assessment and the Installation Corrective Action Plan (ICAP) process. The MACOM and the installation select the corrective actions, negotiate schedules, and co-sign the ICAP.

2.2 BACKGROUND INFORMATION.

Geographic Location. The main post of Walter Reed Army Medical Center is located in Northern Washington DC between Rock Creek Park and Georgia Avenue near the Maryland and District of Columbia boundary. The installation also has two additional areas, the Forest Glen Annex (which house many support activities) and the Glen Haven Annex (a housing area). Both annexes are located in Montgomery County, Maryland.

Mission. The WRAMC provides medical care and treatment for members of all branches of the Armed Forces and their dependents. The WRAMC's mission has three facets: health care, education, and research. In addition to the medical center,

there are three tenant research facilities located on post. These facilities are the Walter Reed Army Institute of Research (WRAIR), the Armed Forces Institute of Pathology (AFIP), and the U.S. Army Institute of Dental Research (USAIDR).

2.3 THE ECAS ASSESSMENT TEAM.

A matrixed team comprised of military and civilian Army personnel from USACHPPM and MEDCOM performed the ECAS assessment at WRAMC.

Additionally, the team was augmented with one contract person from Horne Engineering Services, Inc. Table 2-1 contains a list of team members, their educational backgrounds, and their areas of responsibilities during the assessment.

2.4 THE ECAS ASSESSMENT PROCESS AT WALTER REED.

2.4.1 General. The ECAS team used the following protocols to develop findings during the assessment: the March 2002 TEAM Guide, the February 2002 Maryland supplement to the TEAM Guide, and the April 2002 Army supplement to the TEAM Guide. The Maryland Supplement was written by the USACE Construction Engineering Laboratory (CERL). Version 1.8 (January 1997) of the ECAS software was used to build the findings database to generate the corrective actions report contained in this ECAR.

2.4.2 Scoping Visit. The ECAS team leader, accompanied by a MEDCOM representative, conducted a scoping visit at WRAMC on 15 February 2002. The team leader met with FD environmental office personnel to define the scope of the onsite assessment. The team leader also made administrative and logistical arrangements, coordinated with selected activities, acquired background information, and determined the data management requirements.

2.4.3 Entrance Briefing. On 21 February 2002, the ECAS team leader met with the Garrison Commander and briefed the Environmental Overwatch Committee (EOC). The Garrison Commander, the Garrison Environmental Office (GEO) and tenant organizations were all present or represented at this briefing. The ECAS process (purpose, scope, and timelines) for the 2002 WRAMC ECAS were presented and discussed.

2.4.4 Onsite Assessment. During the onsite assessment (29 April - 10 May 2002), the team visited and inspected various activities and facilities, reviewed records, and interviewed

personnel in an effort to determine the compliance status of WRAMC. During this time, findings were developed and entered into a database using the ECAS software. The team provided daily updates to the environmental staff and concerned parties on the deficiencies found by the assessment team. Discrepancies were resolved through this process, which allowed interaction between the ECAS team, environmental staff, and personnel of the assessed organizations. The ECAS team met each afternoon to discuss the day's findings, exchange information, identify any problems encountered, and plan the schedule for the following day. The team leader performed quality control on all findings submitted by the team. Before leaving WRAMC, each team member briefed the GEO staff on the specific findings in the specific media areas they assessed.

TABLE 2-1. WALTER REED AMC ECAS ASSESSMENT TEAM

PERSONNEL	DEGREE	RESPONSIBILITY
Kenneth A. Mioduski, Environmental Scientist	B.A. Chemistry M.S. Applied Science (Environmental Engineering)	Team Leader
Carolyn Wyatt, USACHPPM Secretary	Undergraduate Studies - Computer Science	Administrative Support
Arthur Asaki Aquatic Biologist	B.S. Zoology	Natural Resources Management Environmental Impacts (NEPA)
Gilbert Gonzalez MEDCOM Representative	B.S. Civil Engineering M.S. Environmental Engineering	Environmental Program Management Pollution Prevention
Mary Grez Geohydrologist	B.S. Earth Science M.S. Environmental Science & Engineering	Solid Waste IRP
Deborah Hursh Environmental Protection Specialist	B.S. Mathematics	Environmental Program Management
Jennifer Keetley Environmental Scientist	B.S. Biology M.S. Environmental Science and Policy	Hazardous Waste Management Pollution Prevention Polychlorinated Biphenyls Lead Based Paint
2LT Randolph Leon Sanitary Engineer	B.S. Industrial Engineering	Water Quality
Julianne Mueller Senior Historical Preservation Specialist Horne Engineering Services, Inc	B.A. History M.A. Archeological History and Preservation	Cultural Resources Management
Ben Pagac Entomologist	B.S. Biology	Pesticide Management
Lisa Polyak Supervisory Environmental Engineer	B.S. Chemistry M.S. Chemical Engineering	Air, Radon, Asbestos
Kevin Russell Environmental Engineer	B.S. Chemical Engineering M.S. Environmental Engineering	Wastewater, Underground Storage Tanks, and Petroleum, Oils and Lubricants
William Sproul Environmental Engineer	B.S. Civil Engineering	Water Quality
Matthew Walter, Environmental Scientist	B.S. Microbiology	Hazardous Waste, Medical Waste PCBs, Used Oil, Pollution Prevention, LBP

2.4.5 Draft Findings Review. A Draft Report was produced at the end of the onsite assessment. At the end of each day, teams members went over their findings with the Team leader. These findings were summarized and briefed to the environmental office the following morning. As assessors completed their assigned areas of review, a Draft Findings Review meeting was held with the environmental office and key installation personnel. During these meetings, each ECAS finding was reviewed and discussed to include suggested corrective actions. The Draft Report, including any substantial changes made during the Draft Findings Review, was provided to the WRAMC Garrison Commander, GEO, and MEDCOM representative prior to the ECAS team's departure.

2.4.6 Exit Briefing. An exit briefing was given on 10 May 2002. The meeting was attended by representatives from most major organizations and tenants located on WRAMC. Key persons present at the outbrief were; COL Randal Treiber, Garrison Commander, Mr. Chuck Flippo, Chief, GEO, and LTC Wendell Moore, Chief, Directorate Safety and Environment. The ECAS team leader then presented a summary of the findings and discussed problem areas found during the ECAS assessment.

2.4.7 Draft Report Review and Comment Period. The WRAMC GEO and MEDCOM reviewed the draft report and provided comments to ECAS team leader. These were provided to each of the ECAS assessors who in turn reviewed and responded to accordingly. All comments were incorporated into the final ECAS database.

2.4.8 Installation Corrective Action Plan. The ICAP framework is provided (on disk and in hard copy) as Appendix C to WRAMC and MEDCOM for further development. The ICAP is a planning document that is used as a funding identifier and tracking system for the corrective actions specified in the ECAR. It can be developed in a database management software such as Dbase III or IV, Foxpro, Quattro Pro, Paradox, Lotus, etc. The ECAS software is capable of transferring the findings database into a generic data file that can be used by WRAMC. The WRAMC GEO may be requested periodically by MEDCOM to submit a report on the status of the ICAP.

2.4.9 Executive Summary. An executive summary was prepared and forwarded to the Chief of Staff for Installations and Management, Headquarters Department of the Army through MG Timboe, Commanding General WRAMC. The executive summary outlined the following: major environmental concerns; areas with the highest potential for enforcement, fines and/or penalties; strengths and weakness of the environmental program;

systemic problems; the most frequent finding root causes; and ECAS findings with corrective actions in excess of 100K.

2.5 SAMPLING STRATEGY AND SITES EVALUATED.

2.5.1 Sampling Strategy. Due to the number of laboratory and buildings located on WRAMC, ECAS team members did not visit all locations within a given building. Rather, team members focused on environmental significant operations located within the building and facility. Where the number environmental significant operations was great, ECAS team members reviewed operations within a given building/facility until either the ECAS assessor felt comfortable with how environmental operations were managed or until trends/patterns were observed. When necessary, the ECAS team used several WRAMC documents to develop a sampling strategy for the ECAS assessment. The 1998 ECAR was useful in determining organizations and locations previously identified with deficiencies. Finally, inspections of randomly chosen locations were performed to provide objectivity and representativeness.

2.5.2 Specific Sites Evaluated. Appendix B lists the buildings and activities evaluated by the ECAS team during the assessment. The codes represent the manual sections (media) covered by the team member's inspection.

2.5.3 Areas not Assessed. Environmental noise and Hazardous Materials were not assessed during this ECAS. Due to the type of activities and tenants found on WRAMC, the installation does not present or pose any significant environmental noise issues. Although noise complaints are received on occasion, these are an uncommon occurrence and are not typically of everyday operations. Hazardous Materials are no longer assessed under the ECAS program although observations may be made and presented to the GEO for action outside the ECAS program.

2.6 REFERENCES USED FOR COST ESTIMATES.

Lab Safety Supply, General Safety Catalog, September 1994.

Pig Catalog, New Pig Corporation, 1994.

Estimating Costs of Air Pollution Control Systems, Vataavuk, William M., and Robert Neveril, Chemical Engineering, October 6, 1980.

Cost Estimating for Major Process Equipment, Arkadie Pikulik and Hector E. Diaz, Chemical Engineering, October 10, 1977.

OAQPS Control Cost Manual, U.S. Environmental Protection Agency, Office of Air Quality Planning and Standards, Research Triangle Park, North Carolina, EPA 450/3-90-006.

Control Techniques for Volatile Organic Compound Emissions from Stationary Sources, U.S. Environmental Protection Agency, Office of Air Quality Planning and Standards, Research Triangle Park, North Carolina, EPA 453/R-92-018.

Means Facilities Construction Cost Data 1994, 9th Annual Edition, R.S. Means Company, Inc., Kingston, MA.

Means Heavy Construction Cost Data 1994, 8th Annual Edition, R.S. Means Company, Inc., Kingston, MA.

The Cost Digest: Cost Summaries of Selected Environmental Control Technologies, EPA 600/8-84-010, U.S. Environmental Protection Agency, October 1984.

Environmental Health and Safety Monitoring, 1995/96 Catalog, Mitchell Instrument Co., San Marcos, CA.

CHAPTER 3

WALTER REED AMC ECAS FINDINGS AND CORRECTIVE ACTIONS

This chapter contains the WRAMC findings developed by the assessment team during the onsite assessment. The corrective actions listed are those agreed to during the comment period that followed the onsite assessment and Draft Findings Review. Findings are listed in order by manual section number (or medium).

Findings are listed according to Class (or Category) in the following printouts. The definitions of Classes are:

Class I: Indicates current noncompliance with a Federal, State, or local environmental regulation, permit, compliance agreement, consent order, or NOV.

Class II: Indicates future noncompliance with a Federal, State, or local environmental regulation, permit, compliance agreement, or consent order. Usually used in the context of complying with a future regulatory deadline or meeting annual requirements (such as testing or training).

Class III: Indicates either noncompliance with Army regulations or DOD Directives, or a recommended good management practice in the absence of specific Federal, State, or local regulatory requirements.

Health/Safety: Regulatory criteria cited was an Occupational Safety and Health Act (OSHA) regulation, a National Fire Protection Act (NFPA) requirement, a Department of Transportation (DOT) regulations or State/District health and safety code. These findings are not generally eligible for environmental funding under the 1383 process.

Positive: Indicates that the installation had surpassed the regulatory requirements or that the installation had been proactive in meeting requirements or improving environmental programs.

3.1 AIR EMISSIONS MANAGEMENT

The Air Program at Walter Reed Army Medical Center (WRAMC) had experienced tremendous improvement since the last ECAS. The most obvious improvements included: 1) new operating permits for both the Main Post and Forest Glen campuses; 2) annual compliance certifications and emission statements conducted in an organized and timely manner; 3) office files re-established to contain the proper technical and regulatory correspondence; 4) shop level staff educated about individual compliance responsibilities; 5) recordkeeping systems instituted to support the terms of the permits; and 6) resolution of the majority of the outstanding noncompliance issues cited in the August 1999 Notice of Non-Compliance (NON) for the Main Post boiler plant.

There were four major areas of concern:

1. Recordkeeping was not always accomplished according to the terms of the operating permits for both Main Post and Forest Glen. In some cases records were not kept, and in others, the records that were kept did not accurately reflect the operation of the regulated equipment.
2. Class I Ozone Depleting Chemicals (ODCs) are restricted materials but were purchased and used in multiple shops throughout the installation. Quantities of carbon tetrachloride, methyl chloroform (1,1,1 trichloroethane) and R-12 appeared on the HAZMART material inventory. R-12 was purchased locally (not through the HAZMART) and used as a replacement refrigerant by contractor maintenance personnel at the hospital. There is a DOD-wide ban on procurement on all of these materials since they are Class I ODCs. They should not be purchased by the HAZMART or any other activity at WRAMC.
3. General conformity reviews were not performed at WRAMC. These reviews must be conducted for projects at both the Main Post and Forest Glen campuses since they were located in areas that had been designated nonattainment for the ozone National Ambient Air Quality Standard (NAAQS). Conformity reviews were required for any new project that had the potential to cause direct or indirect emissions of volatile organic compounds or nitrogen oxides.
4. WRAMC failed to resolve all of the compliance deficiencies cited in the August 1999 NON for the Main Post boiler plant. Although progress had been made on most of the deficiencies, several issues were still pending (i.e., compliance tests for

each of the boilers at the boiler plant). In addition, WRAMC never entered any formal agreement with the District of Columbia regarding a scope and timeline for resolution of the NON issues. Continued delays in fully resolving the terms of the NON will likely result in expanded compliance penalties for WRAMC.

The EPCRA program was managed in an effective manner. WRAMC was only required to file Section 312 (Tier II) reports, and they had done so in a timely manner for 2002. Section 313 reports (Form R) were not filed since there was no excursion of the applicable reporting thresholds.

A.2.1.US #1 I FEDERAL CORRECTIVE ACTION Air Emissions

FINDING ID: A-LP-03

MANUAL QUESTION NUMBER: A-002-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: The Title V permit issued to Main Post in July 2000 failed to include the general conformity rule (40 CFR 93 Subpart B). In addition, the following administrative changes must be added to the permit: 1) Specify how Walter Reed Army Medical Center (WRAMC) will demonstrate compliance with the general conformity rule (monitoring and recordkeeping practices); 2) update the list of generators to reflect losses (FE-201 through FE-206, FE-218, FE-228, FE-210, FE-212, FE-227) and new equipment acquisitions (6-1500kW units at the Hospital, 450kW unit at bldg 15, 600kW unit at bldg 54 West, 135kW unit at bldg 90); 3) delete the degreaser that was removed from WRAMC in August 2001.

CRITERIA: Title V permits must be timely, complete and accurate. In order to be complete, the permit must include all federally enforceable requirements which are applicable to the permittee. (40 CFR 70.5)

FINDING COMMENTS: Written notification has been provided to the District of Columbia for most of the equipment changes noted in the finding. The purpose of the finding is to ensure that these changes are also incorporated into the operating permit.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Amend the Title V permit to include all federally enforceable requirements and administrative changes pertaining to regulated emission sources at WRAMC. Estimated Cost: \$1,500 (20 labor hours)

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 1500

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: WRAMC disagrees with this finding as written: the permit was written by DC and approved by EPA. Inclusion of the general conformity rule in the permit is the responsibility of DC, not WRAMC. CHPPM: According to

regulations in 40 CFR 70.5, the burden of ensuring accurate permit content falls on the permit holder:

40 CFR 70.5(b) *Duty to supplement or correct application.*
Any applicant who...has submitted incorrect information in a permit application shall, upon becoming aware of such failure or incorrect submittal, promptly submit such supplemental facts or corrected information.

This requirement (and the concomitant burden on the source owner) was validated in a recent communication with a Title V permit officer from EPA (See email provided under separate cover).

A.2.2.US #1 I FEDERAL CORRECTIVE ACTION Air Emissions

FINDING ID: A-LP-04

MANUAL QUESTION NUMBER: A-002-002-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: Restricted Class I ozone depleting chemicals were purchased by the following activities: 1) HAZMART records indicated quantities of restricted materials [carbon tetrachloride (18.0 pounds), methyl chloroform (182.3 pounds), and R-12 (6.7 pounds)] had been purchased over the last 2 years. 2) In July 2001, the hospital maintenance contractor (J&J Maintenance) purchased 3 or 4 thirty pound cylinders of a restricted refrigerant (R-12) to repair a leak in a walk-in refrigerator. Procurement of Class I ODCs (which includes carbon tetrachloride, methyl chloroform and R-12) by DOD activities has been banned by Public Law 102-484 since 1993.

CRITERIA: Public Law 102-484, Section 326, prohibits the Army from letting contracts that require the use of Class I ODCs. This includes contracts for the servicing of air conditioning and refrigeration equipment and fixed fire suppression systems, as well as direct purchase of refrigerants and halons. Approvals may be granted only when an ODC alternative is not available, and such need has been approved by a General Officer or Senior Executive Service Member.

FINDING COMMENTS: Remaining equipment at WRAMC that uses R-12 as a refrigerant or Halon 1301 as a fire suppressant will have to be retrofitted or replaced in the near future due to the prohibition on procurement of Class I ODCs. Most of the HAZMART items that contain carbon tetrachloride and methyl chloroform appear to be solvents. Activities that use such materials should ensure that replacement products meet necessary military specifications and pollution prevention guidance.

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Cease procurement of carbon tetrachloride, methyl chloroform and R-12 unless waiver approval is obtained according to Army Acquisition Pollution Prevention Support Office criteria (see website www.aappso.com). Ensure language in future maintenance support contracts forbids the contractors from

purchasing R-12 or any restricted Class I ODC. The Directorate of Public Works Heating Ventilation and Air Conditioning Shop has a large stockpile of new R-12. Use this material or any other R-12 recovered from existing equipment at WRAMC to service Hospital needs. Estimated Cost: Negligible. 2) Plan to incrementally retrofit and replace all equipment that uses R-12. Refer to the installation ODC Management Plan (prepared in October 2000 by CHPPM) for equipment replacement information and costs.

CORRECTIVE ACTION TYPE: EQUIPMENT PROCUREMENT OR CHANGE
COST: 0
1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

A.2.5.US #1 I FEDERAL CORRECTIVE ACTION Air Emissions

FINDING ID: A-LP-11

MANUAL QUESTION NUMBER: A-002-005-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: Annual certifications provided to the District of Columbia for the installation Title V operating permit did not fully evaluate all of the State and Federal asbestos regulations. The annual certification must address all federally enforceable air regulations, including the asbestos National Emission Standard for Hazardous Air Pollutants (NESHAPs). Past certifications have not fully evaluated whether proper notification, emission control, air sampling, abatement practices, waste manifesting and disposal methods were being employed by asbestos abatement projects at the Main Post.

CRITERIA: Requirements for compliance certification include a certification of compliance with all applicable requirements. [40 CFR 70.5(c)(9) and 70.6(c)(5)]

FINDING COMMENTS: In order to certify the asbestos NESHAPs for the Title V operating permit, the air program manager will need to rely on information provided by the asbestos program manager.

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Ensure that future certifications evaluate all aspects of the asbestos NESHAP that pertain to Walter Reed Army Medical Center (WRAMC). Estimated Cost:\$4,000 (40 labor hours to establish the first evaluation). 2) Develop recordkeeping and monitoring procedures that meet the NESHAPs and provide a mechanism of accountability for the annual certification. Estimated Cost: \$10,000 (see corrective action for finding T2-LP-02).

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 10000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

A.3.1.DC #1 I STATE CORRECTIVE ACTION Air Emissions

FINDING ID: A-LP-01

MANUAL QUESTION NUMBER: A-003-001-DC

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: Conformity reviews had not been conducted on applicable projects as required by the general conformity rule. Both the Main Post and Forest Glen campuses are located in ozone nonattainment areas. Federal actions that emit pollutants for which the area has been designated nonattainment must have a general conformity review prior to commencement of the project. WRAMC must perform a general conformity review for all projects that emit volatile organic compounds and/or nitrogen oxides.

CRITERIA: Federal actions undertaken in a National Ambient Air Quality Standards nonattainment area must be evaluated to determine if they conform with the applicable State Implementation Plan. (20 DCMR 403; COMAR 26.11.26.09)

FINDING COMMENTS: Most projects that require a NEPA review must also have a general conformity review (this is one way to flag projects to accomplish the conformity review in the planning stage). Projects that should have received a conformity review include construction of the new fitness center at Main Post, and construction of the new fire station at Forest Glen.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Create a mechanism to capture projects (in the planning stage) so that a conformity review may be performed. Document results of the conformity review in writing and retain such records in Environmental office files. Estimated cost: 2-4 labor hours/review.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

A.3.1.MD #1 I STATE CORRECTIVE ACTION

Air Emissions

FINDING ID: A-LP-06

MANUAL QUESTION NUMBER: A-003-001-MD

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW

IFS FACILITY NUMBER: 00001

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: Directorate of Public Works (DPW) staff failed to provide operating data for the Forest Glen boilers and generators to the environmental office on a monthly basis despite multiple site visits and email reminders to do so. The air operating permit for the Forest Glen campus requires that nitrogen oxide emissions from boilers and generators be calculated on a monthly basis.

CRITERIA: The Permittee shall not allow the emissions from the facility to exceed 25 tons of NOx in any 12-month rolling period. (State of Maryland, Department of the Environment, Operating Permit 15-00983 issued January 17, 2001, Part C(3) - Operation) The Permittee shall not operate any engine generator more than 250 hours in any 12-month rolling period. (State of Maryland, Department of the Environment, Operating Permit 15-00983 issued January 17, 2001, Part C(4) - Operation) The Permittee shall calculate the Nox emissions for the facility on a monthly basis using emission factors or the equipment as appropriate and then calculate the NOx emissions over the previous 12-month period. (State of Maryland, Department of the Environment, Operating Permit 15-00983 issued January 17, 2001, Part D - Testing and Monitoring)

FINDING COMMENTS: The environmental office needs the data every month to calculate rolling 12-month averages required by the permit. They must verify on a monthly basis that permit limits for fuel consumption and hours of operation are not exceeded. DPW staff provided data from January, February and March 2002 to the environmental office during the assessment.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Provide operation data for the Forest Glen boiler and generators to environmental office personnel on a monthly basis as required by the permit. Estimated Cost: Negligible

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE
COST: 0
1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

A.3.2.DC #1 I STATE CORRECTIVE ACTION Air Emissions

FINDING ID: A-LP-02

MANUAL QUESTION NUMBER: A-003-002-DC

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: YES

LOCATION: DPW

IFS FACILITY NUMBER: 00015

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: Walter Reed Army Medical Center had failed to resolve all of the noncompliance issues cited in an August 1999 Notice of Non-Compliance (NON), Proposed Order and Consent Decree. The NON was issued for failure to operate the main boiler plant in compliance with District of Columbia air regulations. The Proposed Order cited 19 items to be rectified in order to return to a compliant status. Although WRAMC had done a good job resolving most (16-17) of the items, several (2-3) remain to be completed including compliance tests for all 4 boilers and a quality assurance plan for the continuous emission monitoring systems.

CRITERIA: Notice of Non-Compliance, Proposed Order and Consent Decree issued by Government of the District of Columbia, Department of Health, Environmental Health Administration, August 17, 1999

FINDING COMMENTS: WRAMC never signed the Consent Order or any other formal correspondence to promise compliance with the terms of the Proposed Order. In addition, it will be over three years since the NON was issued and WRAMC has not yet resolved all of the items of concern. This could be interpreted as a demonstration of bad faith or defiance on the part of WRAMC. The Garrison should proceed with all due haste to resolve any outstanding noncompliance at the boiler plant.

STATUS OF CORRECTION:

CORRECTIVE ACTION: The environmental office anticipates the completion of the boiler compliance tests by the end of CY02. DPW must ensure that the boilers are ready for these tests (scheduled maintenance should be complete, personnel should be available, back-up boilers are ready to provide supplemental heat to Main Post). The Garrison and MACOM must ensure availability of fiscal resources to purchase contractor services for the compliance tests, quality assurance plans, and whatever other services are necessary to close out the testing requirements ordered in the

Notice of Non-Compliance. Estimated Cost: \$100,000-200,000 (for compliance stack tests)

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 200000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: WRAMC strongly disagrees that this is a Class I finding as DC has informed WRAMC they will not bifurcate Proposed Orders by splitting out the penalty from the rest of the order. Therefore WRAMC could not do what the ECAS team cited us for. CHPPM: The purpose of the finding was to state that WRAMC had failed to achieve compliance with requirements that had been identified by the regulatory community in 1999. This continuing non-compliance constitutes a Class I ECAS finding. The failure to obtain a consent order or some other formal instrument committing WRAMC to corrective actions and associated timelines means that WRAMC is essentially unprotected from additional enforcement for "bad faith" in resolving the issues identified in 1999. This is a very serious situation and merits documentation under the ECAS process.

A.3.2.MD #1 I STATE CORRECTIVE ACTION Air Emissions

FINDING ID: A-LP-08

MANUAL QUESTION NUMBER: A-003-002-MD

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: WRAIR

IFS FACILITY NUMBER: 00503

FACILITY TYPE: R&D LABS & TEST FACILITIES

FINDING DESCRIPTION: The maintenance contractor (J&J Maintenance) at WRAIR failed to keep the necessary records of generator operating hours as required by the Maryland operating permit. Contractor staff did keep partial records of generator use for maintenance testing, but the data logs contained no information of generator use for emergencies or load shedding operation.

CRITERIA: The Permittee shall not operate any engine generator more than 250 hours in any 12-month rolling period. Permittee shall keep the following records...operating schedules and production data. [State of Maryland, Department of the Environment, Operating Permit issued January 27, 2001, Part C Operation, paragraph (4); Part E Recordkeeping and Reporting, paragraph (2b)]

FINDING COMMENTS: J&J Maintenance kept good records of boiler fuel use and had been keeping records of generator use based upon (erroneous) guidance provide by previous environmental office staff.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Ensure that records of generator operation for all generators at bldgs 503 and 511 reflect maintenance exercises as well as any other use of the generators. Each generator set has a mechanical counter that shows hours of operation. Maintenance staff should record the counter reading at the beginning and end of each month to determine the amount of time that the generator was used. Hourly usage should be measured and not estimated based upon operator recollection. Estimated cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

A.3.3.DC #1 I STATE CORRECTIVE ACTION Air Emissions

FINDING ID: A-LP-07

MANUAL QUESTION NUMBER: A-003-003-DC

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: HOSPITAL-FACILITY MAINTENANCE OFFICE

IFS FACILITY NUMBER: 00002

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: Service personnel for the hospital maintenance contractor (J&J Maintenance) failed to keep records necessary to meet terms of the Title V operating permit: 1) operating hours for the generator in bldg 7; 2) paint use at the hospital.

CRITERIA: For surface painting operations Permittee will maintain records showing: 1) names of chemicals in solvents and coatings; 2) volatile organic compound content in weight percent; 3) quantity of solvents in pounds/hour; 4) number of hours solvents were applied each day. (Walter Reed Army Medical Center, Final Title V Operating Permit, Permit #004, Section F Recordkeeping Requirements, paragraph 4) Permittee must keep a log of date and time generators are operated and type and quantity of fuel used. (Walter Reed Army Medical Center, Final Title V Operating Permit, Permit #004, Section B Emission Units, paragraph 3b Emergency Generators)

FINDING COMMENTS: J&J Maintenance painting staff had been keeping proper records of paint usage until a recent personnel change. Supervisors were aware of recordkeeping requirements and had planned to make necessary corrections.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Keep records of generator operation and paint/solvent consumption as required by the District of Columbia Title V operating permit. Establish a recordkeeping template to facilitate shop personnel ability to keep the necessary records. Forward records to environmental office monthly. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

A.3.3.MD #1 I STATE CORRECTIVE ACTION Air Emissions

FINDING ID: A-LP-10

MANUAL QUESTION NUMBER: A-003-003-MD

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW

IFS FACILITY NUMBER: 00511

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: Fuel consumption data collected at the Forest Glen boiler plant (Building 511) was inaccurate and could not be used to meet air permit requirements. Boiler plant personnel recorded readings from 3 meters on the main natural gas line into the building, but had no knowledge of the volumetric units on the various meters. They were under the (erroneous) impression that the meters recorded in 1,000 cubic feet increments and had been reporting this information to the environmental office for permit calculations.

CRITERIA: Subpart Dc requires that the fuel usage in each of these five boilers be recorded daily. (State of Maryland, Department of the Environment, Operating Permit 15-00983 issued January 17, 2001, Part B(1)(c) Applicable Regulations)

FINDING COMMENTS: The natural gas meters on the individual boilers at Building 511 have been in place since June 2001. It is not clear why they have not been activated since the air permit requires daily fuel use to be recorded for each boiler individually. Measuring gas through the main gas line feeding the plant fails to meet the air permit recordkeeping specification.

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Activate the natural gas meters that have been installed on the individual boilers at Building 511 and record daily fuel use from these meters. Estimated Cost: \$1,000 (for contractor certification, activation of meter and training of boiler plant staff). 2) If individual meters cannot be used, contact the natural gas supplier who owns the meters on the main natural gas line to the boiler plant. Have them come to Building 511 and instruct plant personnel how to use the one of the main meters and verify the volumetric units associated with the chosen meter (i.e., 1,000 cubic feet, 100 cubic feet or 10 cubic feet). Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

A.2.1.AA #1 III ARMY/DOD CORRECTIVE ACTION Air Emissions

FINDING ID: A-LP-05

MANUAL QUESTION NUMBER: A-002-001-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW-HVAC

IFS FACILITY NUMBER: 00001

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: The Heating Ventilation and Air Conditioning (HVAC) staff sold excess R-12 to a local vendor in exchange for monetary credit which is prohibited by Army policy. R-12 is considered a mission critical material and may not be sold, traded or transferred from Army ownership. All R-12 that is excess to installation needs must be turned in to the DOD Chlorofluorocarbon (CFC) and Halon Reserve operated by the Defense Logistics Agency at the Defense Supply Center in Richmond, Virginia.

CRITERIA: All Class I ODCs installed in Army facilities must be recovered. ODCs must not be sold, traded, or otherwise transferred from Army ownership. All ODCs in non-sealed systems must be recovered when the system is retired. If the ODC is excess to local requirements it must be sent to the DOD CFC and Halon Reserve (Memo from DAIM-ED-P2, 3 July 1997, subject: Elimination of Dependency on ODCs in Army Facilities).

FINDING COMMENTS: A hardcopy of the turn-in procedure for the DOD CFC and Halon Reserve was provided to environmental office staff for the DPW-HVAC personnel.

STATUS OF CORRECTION:

CORRECTIVE ACTION: In the future, recycle R-12 and retain it for use in other air conditioning and refrigeration equipment at WRAMC (see Finding A-LP-04: R-12 is needed at the Hospital). If excess capacity of R-12 is accumulated, turn in the excess R-12 to the DOD CFC and Halon Reserve. Estimated cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

A.2.3.AA #1 POSITIVE GMP CORRECTIVE ACTION Air Emissions

FINDING ID: A-LP-12

MANUAL QUESTION NUMBER: A-002-003-AA

FINDING CATEGORY: POSITIVE

FINDING TYPE: Positive

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: The Air Program had experienced tremendous improvement since the last assessment. The most obvious improvements included: 1) new operating permits for both the Main Post and Forest Glen campuses; 2) annual compliance certifications and emission statements conducted in an organized and timely manner; 3) office files re-established to include proper technical and regulatory correspondence; 4) shop level staff educated about individual compliance responsibilities; 5) recordkeeping systems to support the terms of the permits; and 6) resolution of the majority of the outstanding noncompliance issues cited in the August 1999 Notice of Non-Compliance for the Main Post boiler plant.

CRITERIA: Installations should go above and beyond statutory and regulatory compliance (MP) [Added January 1999].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION:

CORRECTIVE ACTION TYPE:

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.2 Cultural Resources Management

The Cultural Resources program at Walter Reed Army Medical Center had improved since the previous Environmental Compliance Assessment System (ECAS). The Integrated Cultural Resources Plan (ICRMP) was completed and a Programmatic Agreement (PA) to implement routine maintenance of historic resources had been prepared. Steps had been taken to provide the installation Cultural Resources Manager (CRM) with personnel necessary to complete the cultural resources workload. Measures had been implemented to ensure that the CRM was notified of all projects that affected historic resources early in the planning process. This resulted in all projects being reviewed, as required, under Section 106 of the National Historic Preservation Act in a timely fashion and that no projects were inadvertently not reviewed.

In spite of the improvements in WRAMC's cultural resources program, several issues remained. Although the ICRMP and PA had been prepared, neither had been signed or implemented. Completing this work would save the installation both time and money. This is a repeat finding for the third time.

The CRM needed additional training. Recently, Section 106 was revised to allow for compliance with that regulation to be combined with compliance with the National Environmental Policy Act. Attending a seminar in how to combine these regulations would provide the CRM with an understanding of how to prepare cost effective scopes of work for contractors who prepare compliance documents for the installation.

Finally, the installation cultural resources files, specifically as they pertain to Section 106 compliance, were not in order. Relevant correspondence was missing, thus making it difficult to ascertain the compliance status of the project. In addition, no system had been developed to track this status. The recent Section 106 correspondence generated by the installation was often incomplete and unclear, causing unnecessary delays and work for the program.

This assessment included only the Main Post and did not include the Forest Glen section.

C.5.2.US #1 I FEDERAL CORRECTIVE ACTION Cultural Resources

FINDING ID: CR-JM-02

MANUAL QUESTION NUMBER: C-005-002-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW

IFS FACILITY NUMBER: 00001

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: The installation did not have a Programmatic Agreement (PA) to expedite Section 106 coordination for routine maintenance of historic resources.

CRITERIA: Prior to the start of a new undertaking, Federal agencies are required to take into account the effects of the undertaking on historic properties (36 CFR 800.1(a), 800.1(c), 800.3, 800.4(b) through 800.4(d), 800.5, and 800.6) [Revised October 1999].

FINDING COMMENTS: The PA would expedite Section 106 coordination at WRAMC, specifically for routine maintenance of the historic resources at the Main Post. Getting it completed is critical so that the ICRMP which directs the management of the installation's historic resources can be implemented, thus potentially saving the post both time and money.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Complete the review of the PA, staff it, and append it to the Integrated Cultural Resources Management Plan. Estimated Cost: negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

C.1.2.AA #1 III ARMY/DOD CORRECTIVE ACTION Cultural Resources

FINDING ID: CR-JM-04

MANUAL QUESTION NUMBER: C-001-002-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW

IFS FACILITY NUMBER: 00001

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: The project files for Section 106 coordination were incomplete. They did not include all of the review correspondence. Therefore, it was difficult to ascertain the status of the projects and answer questions such as if the Section 106 coordination had been completed or if the project was on hold or had it been dropped. Furthermore, some of the Section 106 correspondence prepared by the installation was not detailed enough to result in expeditious decisions by the agencies to whom the letters were sent.

CRITERIA: Management and organization of paperwork, materials, and personnel should be done in a manner that prevents noncompliance and recurrence of noncompliance, precludes/minimizes regulatory enforcement actions (including warning letters, etc.) promotes good public relations, and addresses systemic weaknesses in the overall operation of the program (MP).

FINDING COMMENTS: A filing and administrative staff member was recently hired. One of her specific responsibilities is to develop and maintain the files by tracking Section 106 projects. The Cultural Resources Manager needs additional professional cultural resources assistance now that she has been promoted to Acting Installation Planner and has less time to complete her cultural resources duties.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Place dated and signed copies of all letters leaving the office, as well as copies of all responses in the relevant project files. Add copies of relevant emails. Develop a tracking system to log the status of Section 106 projects. Document when letters are sent, when responses are received, and when the project is completed as a result of received responses or as a result of consultation ending because responses were not received or were received with concurrence to the post's

assertions. Estimated Cost: Negligible. Hire an experienced cultural resources specialist to assume the responsibilities of the installation Cultural Resources Manager. Estimated Cost: \$80,000/year.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 80000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

C.1.3.AA #1 III ARMY/DOD CORRECTIVE ACTION Cultural Resources

FINDING ID: CR-JM-03

MANUAL QUESTION NUMBER: C-001-003-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW

IFS FACILITY NUMBER: 00001

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: The Cultural Resources Manager (CRM) needed training in new regulations which allow for Section 106 coordination to be combined with National Environmental Policy Act (NEPA) reporting.

CRITERIA: Personnel assigned duties in cultural resources are required to have the appropriate knowledge, skills, professional training, and education to carry out their responsibilities (DODI 4715.3, para D1(j) and AR 200-4, para 1-9b) [Revised December 1997].

FINDING COMMENTS: The Cultural Resources Manager (CRM) has extensive experience in this field. However, she has not been trained in recent changes in the National Historic Preservation Act which would help her expedite her job as both the CRM and the NEPA manager. It would also save the installation money in that fewer reports would have to be prepared to comply with two required regulations once the CRM understood how to combine them.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Enroll the CRM in a combined Section 106/NEPA seminar. Estimated Cost: \$500.

CORRECTIVE ACTION TYPE: TRAINING

COST: .500

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

C.1.6.AA #1 III ARMY/DOD CORRECTIVE ACTION Cultural Resources

FINDING ID: CR-JM-01

MANUAL QUESTION NUMBER: C-001-006-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW

IFS FACILITY NUMBER: 00001

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: The Integrated Cultural Resources Management Plan (ICRMP) was not signed and distributed to the offices that deal with the installation's cultural resources. The ICRMP was not implemented as a result.

CRITERIA: ICRMPs are required to contain information needed to make appropriate decisions about cultural resources management (DODI 4715.3, para D3(c) and Enclosure 7; AR 200-4, para 4-1 and 4-2) [Revised April 1999].

FINDING COMMENTS: The ICRMP was completed some time ago, but was not staffed. A Programmatic Agreement (PA) covering routine actions was to be appended to the Plan. The PA was still being reviewed at the time of the assessment. As soon as it is completed and signed, it will be added to the ICRMP, which will then be staffed and distributed. It is expected that all this will be completed by the end of the fiscal year.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Staff and distribute the ICRMP as soon as possible. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.3 Hazardous Materials Management

This media was not assessed during this Environmental Compliance Assessment System (ECAS).

3.4 Hazardous Waste Management

The Hazardous Waste (HW) program at Walter Reed Army Medical Center (WRAMC) program was deficient in several areas. Roles and responsibilities for managing the HW program were not clearly defined within the Garrison Environmental Office (GEO). Various duties were assigned to 5 separate people, which often prevented continuity of management. Regulatory issues were not tracked and conveyed to other members of the program or HW generators throughout the installation causing systemic problems throughout post.

The major hazardous waste generators on Main Post and Forest Glen include the Armed Forces Institute of Pathology (AFIP), the WRAMC, and the Walter Reed Army Institute of Research (WRAIR). Personnel at these facilities receive minimal support from GEO in providing training, characterizing waste streams, generating standard operating procedures (SOPs), providing guidance, or in performing waste turn-in.

Major issues included failure to characterize waste and improper management of 90-day HW accumulation areas. Improper 90-day site management was especially significant because the District of Columbia (DC) had not incorporated the satellite accumulation provision into their regulations, thereby requiring all accumulation sites to be managed as 90-day sites. Garrison environmental office personnel were unaware of the more stringent requirements associated with these sites. Consequently, all generators on main post failed to achieve full compliance with all applicable regulations stated in DC Municipal Regulation 4202.7. These included annual documented HW training, specific job descriptions for HW personnel that incorporate hazardous waste duties, properly conducting weekly inspections, and having a site-specific contingency plan.

HW.2.1.US #1 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-MW-09

MANUAL QUESTION NUMBER: HW-002-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: Five individuals signing regulated medical waste manifests at Walter Reed Army Institute of Research and Armed Forces Institute of Pathology had not received any training on certifying hazardous material shipments.

CRITERIA: Persons employed by a hazmat employer who prepare hazardous materials for transportation are considered hazmat employees (49 CFR 171.8). Hazmat employee training shall include the following: 1) General awareness/familiarization training; 2) Function Specific Training; 3) Safety Training (49 CFR 172.704).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Ensure all personnel signing hazardous material shipping papers receive initial training on certifying hazardous material shipments and refresher training on a biennial basis. Estimated Cost: Negligible. 2) Only allow those individuals currently certified to sign manifests. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: TRAINING

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.10.1.US #1 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-JK-03

MANUAL QUESTION NUMBER: HW-010-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

TENANT NAME: WRAIR, VET CLINIC

FINDING DESCRIPTION: Expired pharmaceuticals were being disposed of as regulated medical waste (RMW). Once pharmaceuticals became expired they were being placed in the sharps containers. This is an issue because some pharmaceuticals become a hazardous waste once they expire (specifically epinephrine).

CRITERIA: Generators of solid waste must determine if the wastes are hazardous wastes (40 CFR 261.3, 261.4(b), 261.21 through 261.24, and 262.11) [Revised January 2000, Revised October 2001, Revised January 2002].

FINDING COMMENTS: This was observed at WRAIR (bldg 511) and the Veterinary Clinic (bldg 156).

STATUS OF CORRECTION:

CORRECTIVE ACTION: Keep pharmaceutical stocks to a minimum to minimize having excess pharmaceuticals expire on the shelf. Do routine inspections of the pharmaceutical stocks and either use the pharmaceuticals before the expiration date or return to vendor prior to expiration. Estimated Cost: Negligible. If pharmaceuticals have expired, identify those that are designated as hazardous waste and manage appropriately. Provide pharmacy personnel with a list of those pharmaceuticals that become HW upon expiration. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: This listed WRAIR, but should only have applied to VET CLINIC. The only ACTUAL violation was observed at the VET CLINIC. CHPPM: Although expired pharmaceuticals were not seen in the sharps containers, the person escorting us through the WRAIR vet facility mentioned that some pharmaceuticals were disposed of in the sharps containers and others were sent back to the manufacturer.

HW.10.1.US #2 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-JK-06

MANUAL QUESTION NUMBER: HW-010-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: R&D LABS & TEST FACILITIES

TENANT NAME: WRAIR, WRAMC, AFIP

FINDING DESCRIPTION: Waste solutions from the Enzyme Linked Immunosorbent Assay (ELISA) processors and other processors located throughout the laboratories were being discharged down the drain without being characterized. Some of these solutions may contain thimerosal which contains mercury as well as other reagents.

CRITERIA: Generators of solid waste must determine if the wastes are hazardous wastes (40 CFR 261.3, 261.4(b), 261.21 through 261.24, and 262.11) [Revised January 2000, Revised October 2001, Revised January 2002].

FINDING COMMENTS: This was observed in the following laboratories: WRAIR (Bldg 503)- GW57, 3M66; WRAMC (Bldg 2)- 2B42, 2B44, 2B72, and 7816, AFIP (Bldg 54)- 2002, and DCI (Bldg T-2).

STATUS OF CORRECTION:

CORRECTIVE ACTION: Characterize the waste solutions from the processors throughout the laboratories using the Toxicity Characteristic Leaching Procedure (TCLP) to determine whether it is a hazardous waste. If it is determined to be hazardous, collect and manage it properly in an accumulation area. Ensure personnel are trained on the proper management of this waste stream throughout the laboratories. Estimated Cost: \$100/sample.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 100

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.10.1.US #3 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-JK-08

MANUAL QUESTION NUMBER: HW-010-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: Used antifreeze and used oil that are being recycled were not being characterized by the Garrison Environmental Office or the contractors prior to being picked up for recycling. Additionally, used oil and Engine Brite Heavy Duty Engine Cleaner mixtures were not characterized. Used fuel filters and oil water separator sludge and sediment were also not characterized prior to disposal.

CRITERIA: Generators of solid waste must determine if the wastes are hazardous wastes (40 CFR 261.3, 261.4(b), 261.21 through 261.24, and 262.11) [Revised January 2000, Revised October 2001, Revised January 2002].

FINDING COMMENTS: This was observed at the following buildings: DOL Motorpool 605, AAFES Service Station 164, DPW Maintenance 602 and 603, Auto Skills Center 82, and 54 HW storage bunker.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Characterize all waste streams. For those waste streams that are determined to be hazardous, manage and dispose of as hazardous waste. Estimated Cost: \$100/sample.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.10.1.US #4 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-MW-01

MANUAL QUESTION NUMBER: HW-010-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: WRAIR

IFS FACILITY NUMBER: 00503

FACILITY TYPE: R&D LABS & TEST FACILITIES

FINDING DESCRIPTION: Spent chemicals generated throughout Walter Reed Army Institute of Research (WRAIR) laboratories were not properly characterized at the point of generation as required by 40 CFR 261 of the Resource Conservation and Recovery Act (RCRA). Procedures were established in which all chemical wastes were initially classified as hazardous while accumulated at satellite accumulation points, but were later re-characterized once the wastes were transferred to the bunker. Facility personnel estimated approximately 70% of the wastes initially accumulated as hazardous at the satellite accumulation points were subsequently downgraded to non-RCRA. This practice was not consistent with RCRA regulations, which require wastes to be immediately characterized when they meet definition of solid waste described in 40 CFR 261.

CRITERIA: Generators of solid waste must determine if the wastes are hazardous wastes (40 CFR 261.3, 261.4(b), 261.21 through 261.24, and 262.11) [Revised January 2000].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Characterize waste properly at the point of generation and manage accordingly. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: WRAIR/NMRC do not believe that this should have been addressed as a Class I issue. The fact is that we remove the ability for someone to dump something down the drain or toss in the trash by putting these things in what we have defined as "satellite accumulation areas". No waste leaves the facility that is improperly classified. CHPPM: Finding remains a Class I. Wastes must be properly characterized

at the point at which they become solid wastes as described in 40 CFR 261. Wastes cannot be accumulated as "hazardous", and subsequently re-classified as non-hazardous.

HW.10.1.US #5 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-MW-04

MANUAL QUESTION NUMBER: HW-010-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DOL

IFS FACILITY NUMBER: 00178

FACILITY TYPE: HOUSING & COMMUNITY FACILITIES

FINDING DESCRIPTION: Expired flammable wastes were stored in a flammable cabinet outside of building 178, and a lead acid battery was observed on the ground. The wastes appeared to be abandoned and needed to be characterized since they have the potential to exhibit hazardous characteristics.

CRITERIA: Generators of solid waste must determine if the wastes are hazardous wastes (40 CFR 261.3, 261.4(b), 261.21 through 261.24, and 262.11) [Revised January 2000].

FINDING COMMENTS: Lead acid batteries are not recycled at Walter Reed and are therefore subject to full regulation under Subpart C of the Resource Conservation and Recovery Act.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Characterize flammable wastes in accordance with 40 CFR 261. Manage lead-acid batteries as hazardous wastes for lead (D008) and cadmium (D006). Ensure building personnel are trained on proper waste turn-in procedures. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.55.1.US #1 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-JK-02

MANUAL QUESTION NUMBER: HW-055-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: WRAIR

IFS FACILITY NUMBER: 00503

FACILITY TYPE: R&D LABS & TEST FACILITIES

TENANT NAME: WRAIR

FINDING DESCRIPTION: The 90-day Hazardous Waste (HW) storage area at the Walter Reed Army Institute of Research (WRAIR) did not have a site specific contingency plan.

CRITERIA: Generators may accumulate hazardous waste onsite for 90 days or less without a permit or interim status provided they meet certain conditions (40 CFR 262.34(a)(2), 262.34(a)(3), 262.34(b), 265.52, and 265.53) [Reviewed October 2001]. There must be a plan for the facility which includes: a description of the arrangements made with local police, fire department, and emergency response teams; a list of names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinator; a list of all emergency equipment at the facility; and an evacuation plan. This plan must be maintained at the facility.

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Write a site specific contingency plan for the HW storage area and maintain a copy on site. Estimated Cost: Negligible. 2) Update the Installation Spill Contingency Plan to include this site and maintain a copy at this site at all times. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.55.1.US #2 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-JK-05

MANUAL QUESTION NUMBER: HW-055-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00515

FACILITY TYPE: TRAINING BLDGS, RANGES, COURSES, TROOP OPNS

FINDING DESCRIPTION: The following discrepancies were noted at the 90-day hazardous waste storage area: weekly inspections were not being conducted and documented and the fire suppression system was not being inspected on a regular basis. The last inspection records available were from June 2001.

CRITERIA: Generators may accumulate hazardous waste onsite for 90 days or less without a permit or interim status provided they meet certain conditions (40 CFR 262.34(a)(2), 262.34(a)(3), 262.34(b), 265.33, and 265.174) [Reviewed October 2001].

FINDING COMMENTS: Starting 1 Jul 2002, the fire department will tag all fire extinguishers and fire suppression systems to document inspections.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Conduct and document weekly inspections of the hazardous waste storage area even when there is no waste stored at the bunker. Ensure the fire department inspects the fire suppression system on a regular basis and document this inspection to ensure it is operational. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE
COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.55.1.US #3 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-JK-04

MANUAL QUESTION NUMBER: HW-055-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: The 90-day hazardous waste storage areas were not being properly managed to include the following: missing weekly inspections; missing site specific contingency plans; lack of trained personnel; incomplete training records and job descriptions; unlabeled waste containers; waste containers without accumulation start dates; and not retaining weekly inspections for the required three years.

CRITERIA: Generators may accumulate hazardous waste onsite for 90 days or less without a permit or interim status provided they meet certain conditions (40 CFR 262.34(a)(2), 262.34(a)(3), 262.34(b), 265.16, and 265.51) [Reviewed October 2001]. These conditions include: trained personnel; weekly inspections; site specific contingency plan; containers labeled with the words Hazardous Waste and the accumulation start date; and proper record management.

FINDING COMMENTS: This was observed at the following rooms at WRAMC (bldg 2) : 2B55, 2B41, 2B44, 2B81, Dentac, and 7816 and the following rooms at AFIP (bldg 54): 2102, 2106, 2002, 2012, 2014, 2082, 2062.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Designate a point of contact for each site whose job description reflects this duty. Ensure he/she receives and maintains records of all hazardous waste management training. At a minimum, this training should address paperwork requirements, proper container management, and waste turn-in procedures. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.55.1.US #4 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-JK-09

MANUAL QUESTION NUMBER: HW-055-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: AFIP

IFS FACILITY NUMBER: 00054

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: The 90-day hazardous waste storage areas throughout the Armed Forces Institute of Pathology (AFIP) were not being properly managed to include the following: missing weekly inspections; missing site specific contingency plans; lack of trained personnel; incomplete training records and job descriptions; unlabeled waste containers; waste containers being stored over 90 days; and not retaining weekly inspections for the required three years.

CRITERIA: Generators may accumulate hazardous waste onsite for 90 days or less without a permit or interim status provided they meet certain conditions (40 CFR 262.34(a)(2), 262.34(a)(3), 262.34(b), 265.16, and 265.51) [Reviewed October 2001]. These conditions include: trained personnel; weekly inspections; site specific contingency plan; containers labeled with the words Hazardous Waste and the accumulation start date; and proper record management.

FINDING COMMENTS: This was observed at all accumulation areas, including the J&J Maintenance.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Designate a point of contact for each site whose job description reflects this duty. Ensure he/she receives and maintains records of all hazardous waste management training. At a minimum, this training should address paperwork requirements, proper container management, and waste turn-in procedures. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: TRAINING

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.55.1.US #5 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-MW-03

MANUAL QUESTION NUMBER: HW-055-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: WRAMC

IFS FACILITY NUMBER: 00054

FACILITY TYPE:

FINDING DESCRIPTION: The 90-day accumulation site in building 54 was not operating in full compliance with Federal regulations. A container of waste (tracking number 0817) was marked with a accumulation start date of April 2001, and adequate aisle space was not maintained to allow for the unobstructed movement of spill response equipment. In addition, weekly inspections were not properly performed, and containers of waste were stacked in an unsafe manner due to the lack of available space.

CRITERIA: Generators may accumulate hazardous waste onsite for 90 days or less without a permit or interim status provided they meet certain conditions (40 CFR 262.34(a)(2), 262.34(a)(3), and 262.34(b)).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Additional storage space for waste must be established to alleviate the congested conditions. Facility personnel must be more thorough in conducting weekly inspections at the site. Individual containers must all be carefully examined to ensure all wastes are appropriately marked, dated, and removed within the designated time frames. Estimated Cost: \$20,000 for 2 additional storage connexes.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 20000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.55.1.US #6 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-MW-07

MANUAL QUESTION NUMBER: HW-055-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: AFIP

IFS FACILITY NUMBER: 00054

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: Waste formalin was improperly managed at several locations at AFIP. All generators had been instructed to manage the waste as non-hazardous; however, a review of several MSDSs indicated some lab personnel were using a formalin solution with a flash point below 140 degrees Fahrenheit. This characteristic classifies the waste as an ignitable hazardous waste.

CRITERIA: Generators may accumulate hazardous waste onsite for 90 days or less without a permit or interim status provided they meet certain conditions (40 CFR 262.34(a)(2), 262.34(a)(3), and 262.34(b)).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Determine which labs are using formalin solutions with low flash points and instruct personnel to accumulate the waste as hazardous waste. Estimated Cost: Negligible. 2) Ensure only formalin with a high flash point is procured. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.55.1.US #7 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-MW-08

MANUAL QUESTION NUMBER: HW-055-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: WRAMC

IFS FACILITY NUMBER: W-1

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: A temporary 90-day hazardous waste accumulation site was briefly utilized in 1999 for the accumulation of wastes overflowing from bunker 54; however, the site had never been formally closed in accordance with 40 CFR 261.

CRITERIA: Generators may accumulate hazardous waste onsite for 90 days or less without a permit or interim status provided they meet certain conditions (40 CFR 262.34(a)(2), 262.34(a)(3), and 262.34(b)).

FINDING COMMENTS: The site was located on the first level of the Rambaugh parking garage. Previous records indicated that approximately fifty 55-gallon drums were stored at the site, and that many of the drums were rusted, dented, and without caps.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Garrison environmental personnel should coordinate with the District of Columbia in determining how to perform closure on the site to ensure hazardous waste decomposition products are not released to the ground or surface waters. This may be achieved by either performing an administrative closure, or by conducting limited sampling. Estimated Cost: \$5,000.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 5000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.55.1.US #8 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-MW-10

MANUAL QUESTION NUMBER: HW-055-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: Mercury-containing fluorescent lamps were improperly managed throughout the installation. Containers of lamps were not marked with accumulation start dates while at the point of generation and were not labeled with the words "hazardous waste". In addition, containers were not kept closed, weekly inspections were not performed, and personnel managing the sites had not received documented training as required.

CRITERIA: Generators may accumulate hazardous waste onsite for 90 days or less without a permit or interim status provided they meet certain conditions (40 CFR 262.34(a)(2), 262.34(a)(3), and 262.34(b)).

FINDING COMMENTS: This was observed at the trailer outside building 40, building 53, building 15, building 1 and J & J Maintenance located at building 2.

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Manage all generator accumulation areas as 90-day sites in accordance with 40 CFR 262.34. Estimated Cost: Negligible. Or: 2) Manage lamps as universal waste in accordance with 40 CFR 273.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.75.1.US #1 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-JK-07

MANUAL QUESTION NUMBER: HW-075-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW STRUCTURAL MAINTENANCE

IFS FACILITY NUMBER: 00601

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: There were no procedures in place for management of used materials returned to the paint shop Hazmart. Consequently, used materials downgraded to waste were not being characterized and disposed of properly. Additionally, personnel did not have hazardous waste management training.

CRITERIA: Generators may accumulate as much as 55 gal of hazardous waste or 1 qt of acutely hazardous waste in containers at or near any point of initial generation without complying with the requirements for onsite storage if specific standards are met (40 CFR 262.34(c)) [Reviewed October 2001].

FINDING COMMENTS: Items that were being returned and mismanaged included paint and paint related materials.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Establish a hazardous waste accumulation site and train personnel in appropriate waste management procedures to include waste characterization, container labeling, and waste turn-in procedures. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.75.1.US #2 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-MW-05

MANUAL QUESTION NUMBER: HW-075-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ARTS & CRAFTS

IFS FACILITY NUMBER: 00163

FACILITY TYPE:

FINDING DESCRIPTION: Six containers of waste acetic acid, two containers of photographic fixer, several containers of thinners, and lead/selenium residues from a glass staining activity were accumulated at the Arts and Crafts shop, but were not managed as hazardous wastes as required by Subtitle C of the Resource Conservation and Recovery Act.

CRITERIA: Generators may accumulate as much as 55 gal of hazardous waste or 1 qt of acutely hazardous waste in containers at or near any point of initial generation without complying with the requirements for onsite storage if specific standards are met (40 CFR 262.34(c)).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Establish a satellite site for the accumulation of these wastes. Provide hazardous waste awareness training to generators. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.130.3.US #1 I FEDERAL CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-MW-06

MANUAL QUESTION NUMBER: HW-130-003-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: R&D LABS & TEST FACILITIES

FINDING DESCRIPTION: At the Armed Forces Institute of Pathology, effluent from four silver recovery units maintained by ECO-Tech was improperly discharged to the sanitary sewer. Test results dated 2002 indicated the effluent was a hazardous waste. In addition, effluent from several silver recovery units at Walter Reed Army Institute of Research (WRAIR) was discharged to the sanitary sewer without proper characterization.

CRITERIA: A restricted waste may be land disposed only if the constituent concentrations in the waste or waste treatment residue meet applicable treatment standards, or if the waste is treated using a specified treatment technology or equivalent treatment method (40 CFR 268.2(f) and 268.40 through 268.43).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Collect effluent from those recovery systems which are discharging the silver above 5.0 ppm. Manage the effluent in accordance with Subpart F of 40 CFR 266. Continue to monitor the effluent from the other units by conducting annual characterizations. Coordinate with contractors about the feasibility of altering the maintenance schedule on the units. This may facilitate compliance by making the units more effective in removing the silver. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

HW.2.1.US #1 III ARMY/DOD CORRECTIVE ACTION Hazardous Waste

FINDING ID: HW-JK-01

MANUAL QUESTION NUMBER: HW-002-001-US

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: TRAINING BLDGS, RANGES, COURSES, TROOP OPNS

FINDING DESCRIPTION: The individuals assigned to sign hazardous waste manifests at the Walter Reed Army Institute of Research (WRAIR) and the Garrison Environmental Office (GEO) had not received approved Department of Defense (DOD) training.

CRITERIA: Personnel who only certify HW shipments must successfully complete an approved HAZMAT certification course from a DOD school. There are two approved courses: Hazardous Waste Management and Manifesting Course offered by the Army Corps of Engineers or Transportation of Hazardous Material/Waste for DOD offered by DLA. DODR 4500.9-R, Part 2, chapter 204 (Sep 2001).

FINDING COMMENTS: One person within GEO has received all necessary training.

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Train the individuals as required. Estimated Cost: Negligible. Or 2) Remove all untrained individuals from the manifest signing responsibilities and designate the one person in GEO that has received the proper DOD training to sign all manifests. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: TRAINING

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.5 Natural Resources Management

The Master Planning Branch of the Directorate of Public Works had the responsibility for all plans, including natural resources plans at Walter Reed Army Medical Center (WRAMC). A position was needed to manage the National Environmental Policy Act (NEPA) duties, which include natural resources as well as cultural resources duties. Management and conservation of natural (and cultural) resources may not be contracted out (DODI 4715.3.D.1.m). The draft Integrated Natural Resources Management Plan should be adopted, even though it is not required for WRAMC. The draft INRMP was comprehensive and virtually finished, needing only to address comments and operational changes made as a result of the attacks of September 11, 2001. It was advantageous to WRAMC to have this plan in place.

3.6 Environmental Impacts

For approximately two years since the previous Environmental Compliance Assessment System (ECAS) audit in April 1999, the Walter Reed Army Medical Center Garrison Environmental Office had not been notified of projects that may have had environmental or cultural resource impacts. In the past year, the Environmental Overwatch Committee had been formed and all projects, except small repairs and those covered by other Categorical Exclusions, were required to be submitted by work order. A work order review group evaluated these projects weekly. This process will be improved further by requiring the inclusion of an environmental checklist that will alert the Garrison Environmental Office of projects requiring environmental review. The request for command approval of this requirement had been initiated.

An environmental impact analysis had not been performed on the Landscape Management Plan, which also needed to be updated. The Landscape Development Plan from 1994 should be updated and include recommendations from the draft Integrated Natural Resources Management Plan including, but not limited to, the cessation of planting exotic trees in favor of native trees and plants. It should also follow recommendations and requirements in AR 200-3. There should be emphasis on low maintenance, indigenous plants at the large majority of locations. Special plantings at important cultural landscape features of the community used for ceremonial purposes are permitted to be authorized. The Environmental Assessment of the master plan for the main post was virtually complete, but could not be finalized and signed until the master plan was signed. The Environmental Assessment of the Integrated Natural Resources Management Plan (INRMP) should be signed as soon as the INRMP is signed. The files for environmental review of projects were in need of organization and the results of all environmental review and approval should be documented in writing.

01.2.1.US #1 I FEDERAL CORRECTIVE ACTION Environmental Impacts

FINDING ID: 01-AA-01

MANUAL QUESTION NUMBER: 01-002-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW-MASTER PLANNING

IFS FACILITY NUMBER: 00001

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: The landscape management plan did not have an environmental impact analysis as required of facility management plans.

CRITERIA: Facility management plans (such as the landscape management plan) require an environmental impact analysis (32 CFR 651.10).

FINDING COMMENTS: The requirement for environmental impact analysis for facility management plans such as the landscape management plan was clarified in AR 200-2, which was finalized as part of the Code of Federal Regulations on March 29, 2002.

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Update the landscape management plan and perform an environmental impact analysis in-house, or 2) contract out the update of the landscape management plan and environmental impact analysis. Estimated Cost: \$30,000. In either case, incorporate recommendations and requirements from applicable plans and regulations.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 30000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.7 Environmental Noise

This media area was not assessed during this Environmental Compliance Assessment System (ECAS).

3.8 Installation Restoration Program

The Installation Restoration Program (IRP) was well managed by the Garrison Environmental Office. IRP projects were actively addressed through document research, remediation actions, studies, and negotiation with the State of Maryland and/or District of Columbia as necessary. There were four active IRP projects. Inquiries were to be made within FY 02 to assess the level of public interest in establishing a Restoration Advisory Board (RAB). During the assessment, additional potential source areas were being investigated through the Preliminary Assessment/Site Inspection process.

3.9 Pollution Prevention

A Pollution Prevention Plan had been developed for Walter Reed Army Medical Center in 1999. The plan established implementation goals for each of the main activities. However, the plan had not been effectively implemented. The largest waste streams on the installation included alcohols, xylenes, formalin, antifreeze, mercury lamps, lead acid batteries, and nickel cadmium batteries.

Facility personnel continued to manifest these wastes off site to a treatment facility despite the fact that they could be easily recycled. Only the Armed Forces Institute of Pathology (AFIP) had taken the initiative to procure equipment needed for solvent reclamation, which routinely saved over \$20,000 per year in purchase and disposal costs.

04.5.2.US #1 I FEDERAL CORRECTIVE ACTION Pollution Prevention

FINDING ID: 04-MG-10

MANUAL QUESTION NUMBER: 04-005-002-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: SUPPLY & STORAGE FACILITIES, LOGISTICS

FINDING DESCRIPTION: Requirements for purchasing EPA designated and comprehensive procurement guideline (CPG) items were not being incorporated into contracts for construction and purchasing. Motorpools were not purchasing designated vehicular products such as re-refined lubricating oils, coolants, and retreaded tires.

CRITERIA: Pollution prevention initiatives are required to be considered in all plans, drawings, work statements, specifications, or other product descriptions (EO 13101, Section 401) [Revised July 1999].

FINDING COMMENTS: During the assessment, the contracting office indicated that they would distribute a list of required AP clauses to all contracting personnel for incorporation into future contracts.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Obtain Affirmative Procurement (AP) training for all individuals responsible for developing and administering contracts and plans for construction, maintenance, or for other activities that involve purchasing materials and supplies. Develop a method for assessing Affirmative Procurement activities and compliance. Estimated Cost: \$400.

CORRECTIVE ACTION TYPE: TRAINING

COST: 400

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

O4.1.14.AA #1 III ARMY/DOD CORRECTIVE ACTION Pollution Prevention

FINDING ID: O4-JK-01

MANUAL QUESTION NUMBER: O4-001-014-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: The pollution prevention plan had not been effectively implemented. At the time of the assessment, lead acid batteries and used fluorescent light bulbs were being managed and disposed of as hazardous waste instead of being managed as universal waste and recycled.

CRITERIA: Installations are required to establish a Pollution Prevention Program to implement the Pollution Prevention Plan (AR 200-1, para 10-3a(2) and 10-2c) [January 1997].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Take advantage of the less stringent management requirements of the universal waste rule and manage these wastes accordingly. Although Maryland has not adopted the universal waste rule, the District of Columbia has adopted it. Managing these wastes as universal waste will minimize management requirements, disposal costs, and reporting requirements. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

O4.2.1.US #1 POSITIVE GMP CORRECTIVE ACTION Pollution Prevention

FINDING ID: O4-MW-01

MANUAL QUESTION NUMBER: O4-002-001-US

FINDING CATEGORY: POSITIVE

FINDING TYPE: Positive

EXISTING NOV: NO

LOCATION: AFIP

IFS FACILITY NUMBER: 00054

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: Personnel at the Armed Forces Institute of Pathology had instituted a recycling program for hazardous wastes generated at the facility. All waste alcohol and xylene generated in the building was transferred to the Office of Safety Management where it was recycled and subsequently re-issued. This practice has saved the Institute over \$20,000 per year in purchase and disposal costs.

CRITERIA: Facilities are required to comply with all applicable Federal regulatory requirements not contained in this checklist (a finding under this checklist item will have the citation of the applied regulation as a basis of finding).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Investigate the feasibility of receiving waste alcohols and xylenes from Walter Reed Army Medical Center for recycling. Continue to investigate other potential pollution prevention opportunities. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.10 Program Management

The Garrison Environmental Office continued to improve, but this was not evident from the number of deficiencies that were identified during the installation Environmental Compliance Assessment System (ECAS). A reason for this may be because of the installation's recent changes in personnel and management.

The Installation Commander recently signed an environmental policy that demonstrated Command emphasis for environmental awareness. Improvements in communication between the Department of Public Works (DPW) and the Garrison Environmental Office (GEO) resulted in better coordination of required projects. Improvements in operating procedures and plan implementation would also provide uniform guidance for information transfer and program oversight.

Emphasis on training should continue to enhance program management and promote installation environmental compliance. There were still some challenges with staffing, but these are continuously being addressed. Internal disputes that had impeded the effectiveness of the GEO had decreased.

05.1.2.AA #1 III GMP CORRECTIVE ACTION Program Management

FINDING ID: 05-DH-06

MANUAL QUESTION NUMBER: 05-001-002-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: The organization of the GEO was not structured to best utilize GEO staff members. Some staff had responsibilities for many unrelated media areas rather than concentrating their efforts in one particular area.

CRITERIA: Management and organization of paper work, materials, and personnel should be done in a manner that prevents noncompliance and recurrence of noncompliance, precludes/minimizes regulatory enforcement actions (including warning letters, etc.), promotes good public relations, and addresses systemic weaknesses in the overall operation of the program (MP).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Restructure the organization of staff and reassign media responsibilities so that staff can become proficient in specific areas. Some examples reorganization include: 1) Developing 2 teams, a compliance team and a conservation team and distributing media areas accordingly. 2) Dividing staff responsibilities into 3 major teams; air, water & RCRA. The air team would be responsible for all air medias to include asbestos, radon, EPCRA & Ozone Depleting Substances. The water team would be responsible for wastewater, stormwater & drinking water. The RCRA team would be responsible for hazardous waste (RCRA-C) and storage tanks, spill plans (RCRA-I) and lead based paint. Additional unrelated media areas (noise, PCBs, pesticides) would be distributed among the teams. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

05.1.2.AA #2 III GMP CORRECTIVE ACTION Program Management

FINDING ID: 05-DH-08

MANUAL QUESTION NUMBER: 05-001-002-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DIRECTORATE OF CONTRACTING

IFS FACILITY NUMBER: T-020

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: The I.M.P.A.C credit card handbook did not address the environmental impacts of purchasing hazardous materials (HMs). Consequently, many credit card holders purchased HMs without the knowledge of the Garrison Environmental Office.

CRITERIA: Management and organization of operations, materials, and personnel should be done in a manner that prevents noncompliance and recurrence of noncompliance, precludes/minimizes regulatory enforcement actions (including warning letters, etc.) (MP).

FINDING COMMENTS: The DOC indicated that if GEO provided them with an SOP they would add it to their credit card holder handbook. Currently, the only requirement when purchasing a HM is to provide the DOC with a copy of the Material Safety Data Sheet for the HM.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Work with the Directorate of Contracting (DOC) to develop standard operating procedure (SOPs) for the purchase of hazardous materials (HMs) with I.M.P.A.C cards. Policies to consider include: prohibiting the purchase of HMs using credit cards; requiring that all HMs be processed thru the Hazardous Substance Materials System (HSMS) for bar-coding. Estimated Cost: Negligible

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

05.1.14.AA #1 III ARMY/DOD CORRECTIVE ACTION Program Management

FINDING ID: 05-DH-05

MANUAL QUESTION NUMBER: 05-001-014-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: The Interservice Support Agreements (ISAs) did not address specific environmental responsibilities between the tenant activities and the Garrison Environmental Office (GEO). The only environmental issue that was addressed in the ISAs was the disposal of hazardous and medical waste and it was done very generally (i.e. comply with all state and federal regulations).

CRITERIA: Host installations are required to prepare Inter/Intraservice Support Agreements (ISA) for tenants (AR 200-1, para 1-29b) [January 1997].

FINDING COMMENTS: A copy of a MOA between the Fort Belvoir Environmental Office and the tenant activities on Fort Belvoir was provided to the WRAMC GEO to use as a template.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Develop a Memorandum of Agreement (MOA) to the Interservice Support Agreements. The MOA should specifically detail what responsibilities the tenants and the GEO have regarding environmental management. Examples include requiring tenant activities to: notify the GEO of any changes in hazardous wastestreams, submit requests to the GEO for sampling or testing, and notify the GEO and the Directorate of Public Works (DPW) of any construction, renovation or modification to property prior to beginning the project. This is particularly important since tenant activities now have their own Facility Management Branches and many projects are contracted out without the knowledge of the GEO or the DPW. Estimated Cost: Negligible

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

05.7.5.AA #1 III GMP CORRECTIVE ACTION Program Management

FINDING ID: 05-DH-04

MANUAL QUESTION NUMBER: 05-007-005-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: Maintenance and construction projects were occasionally performed without prior notification to the Garrison Environmental Office (GEO).

CRITERIA: If a project relates to new developments and new or modified activities, products, or services, programs should be amended where relevant to ensure that environmental management applies to such projects (MP) [Added April 1999].

FINDING COMMENTS: Examples of this lack of coordination included the purchase of a new generator by a tenant organization and numerous asbestos abatement projects being performed without prior notification to the GEO.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Re-staff the environmental impact checklist and implement as expeditiously as possible. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

05.8.8.AA #1 III ARMY/DOD CORRECTIVE ACTION Program Management

FINDING ID: 05-DH-02

MANUAL QUESTION NUMBER: 05-008-008-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: The Walter Reed Army Medical Center (WRAMC) Garrison Environmental Office (GEO) did not have a full-time person on staff knowledgeable in air regulations to manage the air program. A member of the U.S. Army Center for Health Promotion and Preventive Medicine (USACHPPM) air program had been detailed to the GEO on a part-time basis to manage the WRAMC air program with assistance from GEO staff. However, personnel from the GEO should be managing the program with periodic assistance from USACHPPM when needed.

CRITERIA: Each installation is required to request sufficient staffing to perform the required environmental compliance activities (AR 200-1, para 1-27a(3)) [January 1997].

FINDING COMMENTS: WRAMC had received a Notice of Violation and possible fines from the District of Columbia (DC) for air violations. It is imperative that the GEO have their own full time person on staff to manage the program and work with DC regulators.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Hire an additional employee with experience and/or knowledge of air regulations. In the meantime, ensure that the GEO person currently assigned to work in the air program receives appropriate training and is given sufficient time specifically dedicated to working with the USACHPPM air person. Estimated Cost: \$ 125,000/year.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 125000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

O5.9.1.AA #1 III ARMY/DOD CORRECTIVE ACTION Program Management

FINDING ID: O5-DH-03

MANUAL QUESTION NUMBER: O5-009-001-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: The Walter Reed Army Medical Center (WRAMC) Garrison Environmental Office (GEO) did not have a written policy for training opportunities/requests within the GEO.

CRITERIA: The organization should identify its training needs (MP)

[Added April 1999].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Develop a GEO training policy which details what training is required for GEO staff members (i.e. asbestos certification, HAZWOPER) and what types of training may be requested. Include required environmental training costs in the Environmental Program Requirements (EPR) submissions. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: TRAINING

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

05.10.1.AA #1 III GMP CORRECTIVE ACTION Program Management

FINDING ID: 05-DH-09

MANUAL QUESTION NUMBER: 05-010-001-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: There was no mechanism for disseminating information to worker-level personnel at tenant and host activities regarding environmental issues or changes in policy/procedures.

CRITERIA: With regard to its environmental aspects the organization should establish and maintain procedures for internal communication between the various levels and functions of the installation (MP) [Added April 1999].

FINDING COMMENTS: Environmental information (primarily at the management level) was presented at the Environmental Overwatch Committee meetings, but the meetings were not attended by personnel at the worker-level.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Establish a method to communicate information essential to environmental compliance to appropriate personnel at tenant and host activities. This includes changes in federal regulations such as the Universal Waste Rules and changes in Walter Reed Army Medical Center policies such as the management of used oil as a hazardous waste to recyclable used oil. One method might be maintaining a list of all unit environmental points of contact (especially hazardous waste generators) and sending updates/changes thru e-mail. Estimated Cost: Negligible

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

O5.16.7.AA #1 III ARMY/DOD CORRECTIVE ACTION Program Management

FINDING ID: O5-DH-07

MANUAL QUESTION NUMBER: O5-016-007-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: The Garrison Environmental Office (GEO) Installation Corrective Action Plan (ICAP) was not current. Findings from the 1999 Environmental Compliance Assessment System (ECAS) were in the ICAP, but there was no documentation of their current status.

CRITERIA: Installations are required to develop a management plan to correct the deficiency identified in an external assessment (AR 200-1, para 15-9b(5)) [January 1997].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Complete as much of the 1999 ICAP as possible and ensure that the current ICAP is completed within the prescribed timeframe. Determine which findings require minimal effort or administrative corrections and address those immediately. Determine the root cause for any systemic findings and develop long term plans for correction. Manage the ICAP as a living document that is updated as corrective actions are completed. Estimated Cost: Negligible

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

05.20.1.AA #1 III ARMY/DOD CORRECTIVE ACTION Program Management

FINDING ID: 05-DH-11

MANUAL QUESTION NUMBER: 05-020-001-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: Environmental Compliance Officers (ECOs) were not appointed at any of the installation tenant or host activities/units.

CRITERIA: Installation commanders are required to appoint Environmental Compliance Officers (ECOs) at appropriate organizational levels to ensure that required compliance actions take place (AR 200-1, para 1-27a(15)).

FINDING COMMENTS: ECOs should be appointed at the lowest possible organizational level. For example, each lab in the hospital should have an ECO as opposed to having one ECO for the entire hospital.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Direct tenants and host activities to appoint in writing designated ECOs at each area where there are environmental considerations. Ensure that ECOs have received proper training to perform their duties in an environmentally responsible manner. Estimated Cost: Negligible

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3. 11 Pesticide Management

The Walter Reed Army Medical Center (WRAMC) Pest Management Program implements integrated pest management (IPM) technologies emphasizing environmentally friendly procedures and minimizing reliance on the use of chemical pesticides. Correcting the following findings will improve the WRAMC pest management program. The Installation Pest Management Plan (IPMP) needs to be updated to accurately reflect the programmatic elements and enhance its usefulness. The operational aspects of pesticide storage including record keeping and inspection warrant closer attention. The documentation of pest management activities on required forms (DD Forms 1532-1) is also needed. Quality assurance documentation of contract pest management services by the Quality Assurance Evaluator/Installation Pest Management Coordinator is required. Although the DPW Pest Management Facility conforms to regulatory standards, attention should be given to maintenance and upkeep of in-place environmental safeguards such as the outdoor hardstand (secondary containment). The pest management self-help program for housing occupants can be improved by providing supplemental guidance to users and by complying with the Major Command Pest Management Consultant guidance on carrying appropriate materials. There is an ongoing need for AAFES personnel to be vigilant in the appropriate handling of retail pesticides including segregated display to ensure environmental and human health protection.

PM.1.4.AA #1 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-01

MANUAL QUESTION NUMBER: PM-001-004-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW - GROUNDS AND PAVEMENT

IFS FACILITY NUMBER: 00602

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: The Installation Pest Management Plan (IPMP) was out of date. The IPMP had outdated/erroneous information (e.g., wrong phone numbers, not current certification for pest management personnel, unspecified QAE functions) and had not been reviewed and approved by appropriate activities (e.g., Pest Management Coordinator; Chief, DPW; Chief, Preventive Medicine, Chief, Environmental Division; MEDCOM Pest Management Consultant; Garrison Commander, Installation Commander).

CRITERIA: Each Army installation must have a comprehensive Installation Pest Management Plan (IPMP) (DODI 4150.7, para 5.3.22.1, Enclosure 4, para E4.1.2; AR 200-5, para 1-11c, 1-11i(1), 2-5b, AR 200-5, para 1-11c, 1-11i(1), 2-5b, 2-6, 2-14c(3) and 2-15d(2)) [Revised April 2000, Citation Revised January 2001, Revised October 2001].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Review, update, and submit for approval the Walter Reed Army Medical Center IPMP. Estimated Cost: Negligible (in-house) \$10,000 (contracted-out).

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 10000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.1.7.AA #1 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-09

MANUAL QUESTION NUMBER: PM-001-007-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: COMMISSARY

IFS FACILITY NUMBER: 00162

FACILITY TYPE:

TENANT NAME: COMMISSARY

FINDING DESCRIPTION: The contract for pest management at the commissary had not been reviewed or approved by the Medical Command Pest Management Consultant (PMC). Regulations require that all pest management contracts be reviewed and approved by the PMC prior to submission for bid.

CRITERIA: Contracts for installation pest management services are required to be managed according to certain parameters (DODI 4150.7, Enclosure 4, para E4.1.5.2.3 and E4.1.5.2.4; AR 200-5, para 1-11i(3), 1-11i(8), 1-11i(9), 2-14) [Revised April 2000, Revised October 2001].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Maintain contact with Defense Commissary Agency (DECA) regional headquarters to determine when contract changes are planned and arrange for the forwarding of contract specifications to the MEDCOM PMC for review/approval. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.1.7.AA #2 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-11

MANUAL QUESTION NUMBER: PM-001-007-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE:

FINDING DESCRIPTION: A pest management quality assurance evaluator (QAE) was assigned but did not adequately document QAE activities nor have complete copies of contracts [including performance work statements (PWS), pesticide labels, and material safety data sheets] for pest management services at the Walter Reed Army Institute of Research (WRAIR; Bldg 503) and at the commissary (Bldg 162). Familiarity with contract specifications is essential to properly evaluate and document contractor performance.

CRITERIA: Contracts for installation pest management services are required to be managed according to certain parameters (DODI 4150.7, Enclosure 4, para E4.1.5.2.3 and E4.1.5.2.4; AR 200-5, para 1-11i(3), 1-11i(8), 1-11i(9), 2-14) [Revised April 2000, Revised October 2001].

FINDING COMMENTS: Evidence suggesting a lack of quality assurance of pest management services at the commissary was the presence of an ultra violet/sticky board fly trap located in the commissary warehouse overflowing with dead insects. This indicated a lack of scheduled servicing/board replacement. Furthermore, poor trap placement allowed the spilling of dead insects onto a drinking fountain located directly below it.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Obtain complete copies of contracts (including PWS, pesticides to be used, pesticide labels, and MSDS) for pest management services at the commissary and WRAIR. Document QAE evaluations of contractual pest management services at the commissary. Guidance for implementing QAE planning/documentation is available in Armed Forces Pest Management Technical Information Manual No. 39, DoD Guide Performance Work Statement for Pest Control Services, Quality Assurance Guide, February 1997. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.1.8.AA #1 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-07

MANUAL QUESTION NUMBER: PM-001-008-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW - PAVEMENT AND GROUNDS

IFS FACILITY NUMBER: 00601

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: The Directorate of Public Works (DPW) Self-Help warehouse carried and distributed an inappropriate/unapproved pesticide for use by family housing occupants; Vigro Weed & Feed, 27-2-5 (EPA Reg. 228 281-587).

CRITERIA: Self-help pest management program using Command Consultant-approved pesticides must be available for use by housing occupants to control minor infestations of household pests (DODI 4150.7, para. 5.3.22.3 and Enclosure 4, para E4.1.8.9.3; AR 200-5, para 1-4b(4)(c), 2-8b(6), 2-10f, and 2-15) [Revised April 1998, Citation Revised January 2001].

FINDING COMMENTS: Only one bag of product was on-hand and could, therefore, be applied by certified DPW Grounds Maintenance personnel, in lieu of disposal/turn-in, if an appropriate Walter Reed Army Medical Center site were identified.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Contact the Environmental Hazardous Waste Coordinator and Pest Management Coordinator for possible appropriate use by Department of Defense certified personnel or turn-in to the Defense Logistics Agency Materials Return Program or Defense Reutilization & Marketing Office (DRMO). Estimated Cost: Negligible (if an appropriate use is found on post).

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.1.8.AA #2 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-12

MANUAL QUESTION NUMBER: PM-001-008-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW - FAMILY HOUSING

IFS FACILITY NUMBER: 01933

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: Written guidance or training in the use of pesticide products were not distributed with self-help pest management products.

CRITERIA: Self-help pest management program must be available for use by housing occupants to control minor infestations of household pests (DODI 4150.7, para. 5.3.22.3 and Enclosure 4, para E4.1.8.9.3; AR 200-5, para 1-4b(4)(c), 2-8b(6), 2-10f, and 2-15) [Revised April 1998, Citation Revised January 2001].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Provide, to family housing occupants, written guidance or training on the use of pesticide products distributed through self-help to maximize program effectiveness. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.5.3.AA #1 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-05

MANUAL QUESTION NUMBER: PM-005-003-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW - GROUNDS AND PAVEMENT

IFS FACILITY NUMBER: 00602

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: N-95 (formerly HEPA) respirator cartridges were not available to pest management personnel for use during rodent control activities for protection from hantavirus.

CRITERIA: The requisition, use, maintenance, and disposal of personal protective equipment and will meet specific requirements (DOD Instruction 4150.7, Enclosure 4, para E4.1.6.4; AR 40-5, para 10-14; AR 11-34, para 3-5b(2), 3-5b(3); AR 200-5, para 2-13; AR 385-10; and AFPMB TIM No. 14) [Revised April 2000, Revised October 2001].

FINDING COMMENTS: Human hantavirus infections have been documented in several eastern states including Virginia. One of the rodent species that can carry it (*Peromyscus leudcopus*) is present on Walter Reed Army Medical Center properties. Pest management workers have an increased occupational risk of being exposed to rodent-borne hantaviruses. Protective equipment that includes appropriate respirators and cartridges should be available to pest management personnel.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Coordinate with the Occupational Health Office in acquiring N-95 respirator cartridges for use during rodent control activities. Estimated cost: \$100/year.

CORRECTIVE ACTION TYPE: EQUIPMENT PROCUREMENT OR CHANGE

COST: 100

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.10.2.AA #1 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-13

MANUAL QUESTION NUMBER: PM-010-002-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: AAFES

IFS FACILITY NUMBER: 00161

FACILITY TYPE: HOUSING & COMMUNITY FACILITIES

FINDING DESCRIPTION: Pesticides for sale in the Army Air Force Exchange Service (AAFES) Home and Garden Shop retail facility were not segregated by type. Retail shelves were arranged with intermingled fertilizers, insecticides, herbicides, and fungicides. To avoid consumer confusion and potential misuse, insecticides, herbicides, fungicides and fertilizers should be segregated by type.

CRITERIA: Pesticides for sale in post exchanges and commissaries must meet specific restrictions (AR 40-5, para 10-4h).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Segregate fertilizers, insecticides, herbicides, and fungicides by type on AAFES Home and Garden Store retail shelves. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.40.1.AA #1 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-06

MANUAL QUESTION NUMBER: PM-040-001-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW - GROUNDS AND PAVEMENT

IFS FACILITY NUMBER: 00602

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: DD forms 1532-1, Pest Management Maintenance Records (or equivalent forms), are required to document all pest management activities, but have not been used by Walter Reed Army Medical Center (WRAMC) pest management personnel.

CRITERIA: Specific records are required to be kept as a part of the pest management process (DODI 4150.7, para 5.3.22.7, Enclosure 4, para E4.1.10; AR 200-5, para 1-8b,1-9d,1-11f,1-11i(4), 2-2b(3)(b), 2-10, 2-14e, and 2-15d) [Revised June 1998, Revised April 2000, Revised October 2001].

FINDING COMMENTS: The DD-Forms 1532-1 are designed to record pest management measures, by site, for all installation building, structures, or lands. A separate form should be on file for each WRAMC building/facility and should serve as a historical document of all pest management activities performed. This has been a recurrent shortcoming of the WRAMC Pest Management Program (e.g., ECAS - March 1993; USACHPPM Report 16-61-0512-92, 6-10 January 1992).

STATUS OF CORRECTION:

CORRECTIVE ACTION: Maintain DD-Forms 1532-1 (or electronic equivalent) to accurately document all WRAMC Pest Management Activities. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.45.4.AA #1 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-02

MANUAL QUESTION NUMBER: PM-045-004-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW - GROUNDS AND PAVEMENT

IFS FACILITY NUMBER: 00602

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: Pesticides stored in the herbicide and insecticide room of the Pest Management Shop (Bldg 602) were not inspected monthly.

CRITERIA: Storage facilities for pesticides must meet specific structural and operating requirements (DODI 4150.7, Enclosure 4, para E4.1.6.2 and MIL-HDBK 1028-8A, para 3.1.4.1.2; AR 200-5, para 2-11c(1)) [Citation Revised April 2000, Revised October 2001].

FINDING COMMENTS: The lack of monthly inspection was evidenced by the lack of an accurate written inventory of stored pesticide products as well as the presence of older stock which should be used before newer stock. A factor apparently hindering complete monthly pesticide inspection was the existence of locked cabinets containing pesticides which were, in turn, located within the locked insecticide and herbicide storage rooms of the Pest Management Shop (Bldg 602). These cabinets were required by external inventory requirements, yet pest management personnel purportedly did not have keys for them.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Inspect all stored pest management products monthly. Furthermore, keep an accurate and updated written inventory of all stored pesticides and use older stocked items before newer stock is used. Estimated Cost: Negligible

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.45.26.AA #1 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-04

MANUAL QUESTION NUMBER: PM-045-026-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW - GROUNDS AND PAVEMENT

IFS FACILITY NUMBER: 00602

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: An accurate inventory of stored pesticides was not available or posted on the outside of the pest management facility.

CRITERIA: Pesticide management facilities must meet specific requirements about signs (DODI 4150.7, Enclosure 4, para E4.1.6.2; MIL-HDBK 1028-8A, para 3.8; AR 200-5, para 2-11c(1)) [Citation Revised April 2000].

FINDING COMMENTS: It is also recommended that the pesticide inventory be provided periodically to Fire, Safety, and Environmental officials.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Maintain a complete and accurate pesticide inventory which includes as a minimum: trade name, chemical name, % active ingredient, EPA Reg. Number, container size, and quantity of containers. It is also helpful to indicate the pesticide label signal words as indicators of relative toxicity. Post the inventory on the outside of the pest management facility. Estimated Cost: Negligible

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.45.31.AA #1 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-08

MANUAL QUESTION NUMBER: PM-045-031-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW - GROUNDS AND PAVEMENT

IFS FACILITY NUMBER: 00602

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: The outdoor hardstand used for filling truck-mounted pest management equipment was structurally inadequate. The secondary containment system had cracks in the curb and the liquid-impervious sealant was chipped/peeling.

CRITERIA: Outdoor hardstands and parking aprons for vehicles must meet specific standards (DODI 4150.7, Enclosure 4, para E4.1.6.2; MIL-HDBK 1028-8A, para 3.4.8; AR 200-5, para 2-11c(1)) [Citation Revised April 2000].

FINDING COMMENTS: Failure to maintain pesticide mixing/filling facilities could risk environmental contamination due to spilled pesticides.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Repair the cracks and re-seal the outdoor hardstand with an epoxy sealant. Estimated Cost: \$300.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 300

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PM.55.5.AA #1 III ARMY/DOD CORRECTIVE ACTION Pesticide

FINDING ID: PM-BP-03

MANUAL QUESTION NUMBER: PM-055-005-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW - GROUNDS AND PAVEMENT

IFS FACILITY NUMBER: 00602

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: The following pesticides stored in the DPW Pest Management Shop (Bldg 602) had no foreseeable use at Walter Reed Army Medical Center: Carbaryl 4L, 43%, (EPA Reg 34704-447) - one 2.5 gallon container; 3346 WP Fungicide, 50% Dimethyl, 4 4-0.phenylenebis (EPA 1001-63) - three and a half 2 lb. bags.

CRITERIA: Installation pest management programs are to be managed to ensure pesticides do not become hazardous waste (DODI 4150.7, Enclosure 4, para E4.1.6.3 and AR 200-5 para 2-11d) [Citation Revised June 1998, Revised April 2000].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Report all excess or unserviceable pesticides to the Installation Hazardous Waste Coordinator. Excess pesticides should be turned in to the Defense Logistics Agency Materials Return Program or transferred to the Defense Reutilization and Marketing Office (DRMO). Carefully plan pesticide orders and quantities to avoid future disposal issues. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.12 Petroleum, Oils, and Lubricants

Walter Reed Army Medical Center (WRAMC) had a Spill Prevention, Control, and Countermeasures (SPCC) plan that was formally approved 19 Feb 2002. The previous SPCC plan was not updated as required by 1998. The SPCC plan addressed all potential spill sites. Spill response materials (absorbents and dry sweep) were available at all potential spill sites. Historically, spill response training was not conducted, but the new SPCC plan set a schedule for implementing training twice per year. Spill response procedures were not posted, but personnel generally possessed knowledge of the proper POL spill response.

PO.10.1.US #1 I FEDERAL CORRECTIVE ACTION POL

FINDING ID: PO-KR-01

MANUAL QUESTION NUMBER: PO-010-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: The Garrison Environmental Office did not have a Facility Response Plan (FRP). The FRP was required because there was more than 1,000,000 gallons of total oil storage capacity on the installation and because of location, a spill could reach sensitive environments. For instance, one 30,000-gallon and one 20,000-gallon aboveground storage tank were located about 50 feet upgradient from a storm drain. If the total installation oil storage capacity was less than 1,000,000 million gallons, then a FRP would not be required.

CRITERIA: Non-transportation related onshore facilities that, because of location, could reasonably be expected to cause substantial harm to the environment by discharging oil into or on the navigable waters or adjoining shoreline are required to prepare and submit a facility response plan to the Regional Administrator according to specific parameters (40 CFR 112.20(a)(1) through 112.20(a)(3), 112.20(e) through 112.20(h), and Appendix C) [Revised January 1999, Citation Revised July 2000].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: (1) Reduce the total oil storage capacity below 1,000,000 gallons, which would require the removal of about 26,000 gallons of capacity. Estimated Cost: \$10,000. Or, (2) Prepare a FRP. Estimated Cost: \$30,000.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 10000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: This finding is incorrect; WRAMC does not meet the conditions requiring an FRP. Our installation has two Federal ID numbers reflecting the fact that Main Post and Forest Glen are several miles apart (not contiguous) and in different states. In the eyes of EPA and

State regulators, therefore, we have two facilities, not one.
Neither of our two facilities stores 1,000,000 gallons of fuel.
CHPPM: Walter Reed is operated as one facility, with one command
structure, and one Directorate of Public Works.

PO.65.6.US #1 I FEDERAL CORRECTIVE ACTION POL

FINDING ID: PO-JK-01

MANUAL QUESTION NUMBER: PO-065-006-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: Containers used to collect used oil were not properly labeled and were not closed.

CRITERIA: The label USED OIL must be clearly marked on containers used to store used oil and fill pipes used to transfer used oil into underground storage facilities (40 CFR 279.22(c)) [Reviewed March 2000].

FINDING COMMENTS: This was observed at AAFES building 164, DPW buildings 15, 48, and 1 and J & J Maintenance Area located behind building 2 and J & J Maintenance generator pits located underneath building 1.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Label all containers used to collect used oil from vehicles with the words "Used Oil". Keep containers closed except when adding or removing waste. Ensure all personnel understand used oil management procedures. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: OPERATIONAL OR PROCEDURAL CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PO.5.8.AA #1 III ARMY/DOD CORRECTIVE ACTION POL

FINDING ID: PO-KR-02

MANUAL QUESTION NUMBER: PO-005-008-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: There were no spill procedures posted at any petroleum, oil, and lubricants (POL) storage areas.

CRITERIA: Written procedures on spill response are required at potential spill sites (AR 200-1, para 3-3d(1)) [January 1997].

FINDING COMMENTS: There were no posted spill response procedures at the following buildings: 54, 164, 178, 500, 501, 503, 508, 510, 511, 512, 606, 605.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Post spill response procedures (such as those contained in the Spill Prevention, Control, and Countermeasures Plan) at all POL storage and handling areas. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

PO.55.1.US #1 III FEDERAL CORRECTIVE ACTION POL

FINDING ID: PO-KR-03

MANUAL QUESTION NUMBER: PO-055-001-US

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: BOILER PLANT

IFS FACILITY NUMBER: 00015

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: There was no method to prevent drive-off before the fuel lines have been disconnected at the fuel unloading area for the Boiler Plant's two 400,000-gallon diesel heating oil storage tanks.

CRITERIA: Onshore tank car and tank truck loading/unloading racks should meet specific structural standards (40 CFR 112.7(e)(4)(ii) and 112.7(e)(4)(iii)) [Revised October 1998]. An interlocked warning light, physical barrier, or warning signs should be provided in loading/unloading areas to prevent vehicular departure before complete disconnect of flexible or fixed transfer lines.

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Place signs that warn drivers not to leave the fuel unloading area without disconnecting the fuel lines.
Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.13 Solid Waste Management

The solid waste management program was in a period of transition from the Environmental Office to the Directorate of Public Works (DPW). The DPW administered the contract for all recycling, and for all solid waste pickup except for at the Glen Haven Housing area. The solid waste contract for Glen Haven continued to be administered by the Environmental Office until the contract expired in February 2003.

The Integrated Solid Waste Management Plan (ISWMP) written in 1998 was too general to be useful. The plan did not address existing waste streams and management practices at WRAMC. Most of the solid waste issues, such as improper storage of waste cooking grease, piling of bulk wastes near dumpsters, improper scrap tire management, and unpermitted dumping at the leaf disposal area, could be addressed through development of a site-specific ISWMP. The ISWMP should be viewed as a tool to document, improve, and streamline the solid waste management program at WRAMC.

Regulated Medical Waste (RMW) was generated throughout the hospital and all research laboratories at the Walter Reed Army Medical Center (WRAMC). Segregation of waste at the points of generation was poor as many non-infectious wastes were observed in red bags. At the time of the assessment, the installation did not have a RMW disposal contract in place. Pick-ups were made bi-weekly by a contractor that was paid by credit card. A new contract for the North Atlantic region was in the process of being put out for bid.

SO.2.1.DC #1 I STATE CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MG-01

MANUAL QUESTION NUMBER: SO-002-001-DC

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW-WORK COORDINATOR BRANCH

IFS FACILITY NUMBER: 00001

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: During this assessment, trash and putrescible liquid residue beneath the Building 1 breakaway dumpster and compactor appeared to have accumulated over a long period of time. The wastes constituted a nuisance and were likely to provide food, harborage, and/or breeding places for insects and rodents. The breakaway dumpster at Building 1 was reportedly vulnerable to spillage due to the design of the mechanism: when the dumpster was taken away to be emptied, residue caught between the stationary compactor and the removable dumpster could fall on the ground. Additionally, liquids were squeezed from the refuse and spilled onto the ground during compacting. It was also possible for rainwater to flow into the solid waste enclosure and create standing water mixed with waste residue. The solid waste contract indicated that the areas around solid waste containers must be kept free of wastes.

CRITERIA: All solid wastes shall be stored and containerized for collection in a manner that will not provide food, harborage, or breeding places for insects or rodents, or create a nuisance or fire hazard (21 DCMR, Section 700.4).

FINDING COMMENTS: There is a breakaway Dumpster at Building 54. The Building 54 unit was observed to be relatively clean and neat, with no liquids and very little debris beneath the compactor. This unit was recently cleaned, and the kitchen is prohibited from disposing of liquid wastes and grease into the compactor.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Enforce the solid waste contract, ensuring that wastes are picked up around solid waste collection containers on a regular basis. Clean the ground surface beneath the dumpster and compactor. Replace the breakaway dumpster/stationary compactor system with an integrated dumpster/compactor unit that will be less likely to leak. Prohibit disposal of liquid wastes into the compactor and dumpster. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.2.1.MD #1 I STATE CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MG-02

MANUAL QUESTION NUMBER: SO-002-001-MD

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW-ROADS AND GROUNDS

IFS FACILITY NUMBER: NA

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: The leaf disposal area had been reportedly used for disposal of construction and demolition waste since the 1970s, and was not designed or operated in accordance with requirements for a sanitary landfill so it constituted an unpermitted system of refuse disposal and an open dump. Items disposed of into the area included fencing, concrete, road cleaning waste, bags of trash, and lampposts and fixtures, in addition to large quantities of natural wood waste and leaves. Leaves, construction/ demolition debris, and trash were still being deposited at the site although the area was graded, planted with grass, and concrete barriers were erected to prevent vehicular access. The site did not have a permit of refuse disposal. State of Maryland requirements for operation and design of a land clearing debris landfill or rubble landfill were not fulfilled for the site.

CRITERIA: "Open dump" means a land disposal site which is operated after the effective date of these regulations and is not designed or operated in accordance with the requirements for a sanitary landfill in these regulations (COMAR 26.04.07.02(19)). A person may not: (a) Construct or operate a system of refuse disposal for public use without first obtaining a valid permit issued under these regulations, ... (b) Cause, suffer, allow, or permit the construction or operation of an unpermitted system of refuse disposal on his or her property (COMAR 26.04.07.03.B(1)). Solid waste may not be disposed of by any person in an open dump. A person may not cause, suffer, allow, or permit open dumping on his property (COMAR 26.04.07.03.B.(4)).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Coordinate with the State of Maryland to determine the appropriate course of action for this site. It is likely that the entire pile must be removed and disposed of properly. To prevent future dumping at the site, trees and shrubs should be planted to camouflage the entrance to the area

and signs should be erected to indicate that dumping is prohibited. Estimated Cost: \$20,000.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 20000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.2.1.MD #2 I STATE CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MG-11

MANUAL QUESTION NUMBER: SO-002-001-MD

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: The Army-Air Force Exchange System (AAFES) service station (Bldg 164) and the Directorate of Public Works (DPW) yard (Bldg 601) were not managing scrap tires in accordance with state requirements. The service station regularly accumulated more than 51 scrap tires on a biweekly basis and the DPW yard accumulated 60-70 tires over the course of about 2 years; neither facility had secondary scrap tire collection facility licenses. The tires at the service station and DPW yard were being stored outside in the weather and contained rain water which could harbor mosquito infestation. The DPW yard exceeded 90-day limitations for tire accumulation.

CRITERIA: These regulations apply to all persons engaged in the storage, collection, or hauling of scrap tires (COMAR 26.04.08.01). A secondary scrap tire collection facility means a facility where 51 - 1,500 scrap tires are accumulated on site at any one time (COMAR 26.04.08.02.B.(23)). A secondary scrap tire collection facility is required to have a license issued by the Department. All scrap tires received at the facility shall be transferred by means of a scrap tire hauler only to an approved facility (COMAR 26.04.08.04.B.(3)). A person may not store scrap tires in the State unless the person demonstrates that, within 90 days of the time that the person stores the scrap tires, the scrap tires will be transferred to any facility within the scrap tire recycling system established by the Service (COMAR 26.04.08.03.D(4)). A person may not store or collect scrap tires in a manner which will likely create a nuisance or be conducive to insect or rodent infestation (COMAR 26.04.08.03.A).

FINDING COMMENTS: Note additional scrap tire requirements: A scrap tire hauler license is required for haulers transporting more than five scrap tires annually. Additionally, scrap tires must be transported to a licensed scrap tire collection or recycling facility. Organizations that collect scrap tires must ensure that the scrap tire hauler is properly licensed, and organizations transporting scrap tires to another collection site

or recycling site must ensure that the collection or recycling site is licensed.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Ensure that scrap tires are removed before 51 tires are accumulated at any time. Alternatively, obtain a secondary scrap tire collection facility license for each site where more than 51 scrap tires will be accumulated at any time on the installation. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.5.1.DC #1 I STATE CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MG-03

MANUAL QUESTION NUMBER: SO-005-001-DC

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW-WORK COORDINATION BRANCH

IFS FACILITY NUMBER: MULT

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: Bulky wastes such as furniture, pallets, and equipment were placed next to the dumpsters at buildings 40 and 41. Trash was present on the ground beneath and beside the dumpsters.

CRITERIA: All solid wastes shall be stored and containerized for collection in a manner that will not provide food, harborage, or breeding places for insects or rodents, or create a nuisance or fire hazards (21 DCMR, Section 700.3). No person shall deposit, throw, or place or cause to be deposited, thrown or place any solid waste in any alley, street, catch basin, or other public space, or into the Potomac River or other waters in the District, or onto any premise under the control of others. (21 DCMR, Section 700.4).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Establish a protocol for notifying the responsible department when bulk wastes need to be picked up for proper disposal. Distribute information to each building/department so that employees are aware of bulk pickup notification procedures. Notify workers that dumping of bulk items near Dumpsters is prohibited. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.5.1.DC #2 I STATE CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MG-05

MANUAL QUESTION NUMBER: SO-005-001-DC

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MOLOGNE HOUSE

IFS FACILITY NUMBER: 00020

FACILITY TYPE: HOUSING & COMMUNITY FACILITIES

FINDING DESCRIPTION: Waste cooking grease was stored improperly. The grease was stored in a 55-gallon drum, three loosely covered five-gallon cooking pots, and four plastic-wrapped boxes on the loading dock behind the Mologne House kitchen. The containers were not secured to prevent animals from getting into them. A coating of spilled grease was observed on the concrete surrounding the containers and extending over the edge of the loading dock into a trench drain. The total square footage of grease coating exceeded 20 square feet of surface.

CRITERIA: All solid wastes shall be stored and containerized for collection in a manner that will not provide food, harborage, or breeding places for insects or rodents, or create a nuisance or fire hazard (21 DCMR, Section 700.3). No person shall deposit, throw, or place or cause to be deposited, thrown or placed any solid waste in any alley, street, catch basin, or other public space, or into the Potomac River or other waters in the District, or onto any premise under the control of others (21 DCMR, Section 700.4).

FINDING COMMENTS: The Building 54 Cafe had a contract in place for the vendor to pick up used cooking grease at the same time that new cooking oil is delivered on a regular basis. The used grease at this particular facility was stored in closed, clean containers in an area segregated from food preparation activities.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Clean the loading dock and trench drain behind the Mologne House. Survey all of the food service facilities to assess their methods for grease disposal. Assist food service facilities with acquiring and maintaining contracts for grease removal and disposal. Require the facilities to comply with state requirements for storage and disposal of waste grease. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT
COST: 0
1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.5.1.MD #1 I STATE CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MG-06

MANUAL QUESTION NUMBER: SO-005-001-MD

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: HOUSING & COMMUNITY FACILITIES

FINDING DESCRIPTION: The Bowling Alley kitchen and AAFES snack shop were improperly disposing of kitchen grease. The Bowling Alley kitchen (Bldg 162) was reportedly disposing of grease into the Dumpsters. The AAFES snack shop (Bldg 161) could not adequately describe their procedures for grease disposal. Neither facility had a contract for grease disposal. The environmental office has prohibited disposal of grease into Dumpsters. Grease disposed of into dumpsters is nearly impossible to keep from spilling or leaking, attracts vectors, and is an odor nuisance.

CRITERIA: A person may not engage in solid waste handling in a manner which will likely create a nuisance; be conducive to insect and rodent infestation or the harboring of wild dogs or other animals; pollute the air; cause a discharge of pollutants to waters of the State...; impair the quality of the environment; or create other hazards to the public health, safety or comfort as may be determined by the approving authority. (COMAR 26.04.07.03.A).

FINDING COMMENTS: The Building 54 Cafe had a contract in place for the vendor to pick up used cooking grease at the same time that new cooking oil was being delivered on a regular basis. The used grease at this location was stored in closed, clean containers in an area segregated from food preparation activities.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Survey all of the food service facilities to assess their methods for grease disposal. Assist food service facilities with acquiring and maintaining contracts for grease removal and disposal. Require the facilities to comply with state requirements for storage and disposal of waste grease. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.5.1.MD #2 I STATE CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MG-07

MANUAL QUESTION NUMBER: SO-005-001-MD

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: GLEN HAVEN

FACILITY TYPE: HOUSING & COMMUNITY FACILITIES

FINDING DESCRIPTION: Bulky wastes were inappropriately piled at many locations near trash cans and outside of garages at Glen Haven. Trash was scattered on the ground in common areas and near the trash can storage areas. Sanitation workers were observed picking up large items placed near trash cans during waste pickup, but bulky items such as furniture and smaller items such as loose trash were not picked up from the ground. The Handbook for Community Housing Indicated that bulk collection was on the last Thursday of every month. There was no provision in the handbook for unscheduled bulk pick-up, such as when families moved out of housing. The handbook prohibited litter and stated that occupants were responsible for grounds maintenance and care.

CRITERIA: A person may not engage in solid waste handling in a manner which will likely create a nuisance; be conducive to insect and rodent infestation or the harboring of wild dogs or other animals; pollute the air; cause a discharge of pollutants to waters of this State....; impair the quality of the environment; or create other hazards to public health, safety, or comfort as may be determined by the approving authority (COMAR 26.04.07.03.A).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Enforce the solid waste contract for the Glen Haven housing area, requiring workers to pick up all litter and trash from the garbage can storage areas during waste removal. Require residents to police the common grounds and pick up trash on a regular basis. Residents should also be responsible for properly packaging refuse in bags so it cannot spill out of containers, and for placing refuse in garbage cans rather than littering. Remind residents not to place bulky items outside for disposal except during scheduled pick-up times. Allow residents to schedule pickup of bulky wastes if necessary, such as after moving into the neighborhood or before moving out. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.8.3.MD #1 I STATE CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MG-04

MANUAL QUESTION NUMBER: SO-008-003-MD

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW-WORK COORDINATION BRANCH

IFS FACILITY NUMBER: MULT

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: Bulk waste, refuse, pallets, and other items were observed near 6 of the 11 Dumpsters inspected during the assessment. The ground surface beneath the Dumpster at the AAFES service station was stained with oil.

CRITERIA: A person may not engage in solid waste handling in a manner which will likely create a nuisance; be conducive to insect and rodent infestation or the harboring of wild dogs or other animals; pollute the air; cause a discharge of pollutants to waters of this state unless otherwise permitted under Environment Article; impair the quality of the environment; or create other hazards to the public health, safety or comfort as may be determined by the approving authority. (COMAR 26.04.07.03.A).

FINDING COMMENTS: Site-specific information: Building 178-mattress set behind Dumpster. Arts and Crafts Center Dumpster has trash beneath it. Commissary loading dock and compactor have loose trash on the ground. AAFES service station Dumpster is coated with oil inside and there is oil residue on the ground. The PX has countertops and stacks of pallets adjacent to the Dumpsters.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Enforce the solid waste collection contract, ensuring that loose trash and debris is picked up from the ground on a regular basis. Prohibit disposal of used oil into the Dumpster at the AAFES service station and post a sign informing customers of where they can appropriately dispose of used oil. Remove contaminated soil from beneath the Dumpster and pave the Dumpster pad to prevent future contamination. Formulate a plan for collection and disposal of bulk wastes and inform workers of how they can properly dispose of bulk wastes when needed.
Estimated Cost: \$5,000

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 5000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.110.1.MD #1 I STATE CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MW-02

MANUAL QUESTION NUMBER: SO-110-001-MD

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: INST

IFS FACILITY NUMBER: INST

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: Regulated medical waste was managed in red bags without sufficient thickness. All regulated medical waste generated at Walter Reed Army Institute of Research (WRAIR), Walter Reed Army Medical Center (WRAMC), and AFIP was placed in red bags with a thickness of 1.5 mm. This practice is not consistent with State Regulations, MEDCOM Regulation 40-35, and WRAMC Regulation 40-2 which all require red bags to be a minimum of 3mm in thickness.

CRITERIA: Specific regulations apply to the packaging of special medical wastes (COMAR 26.13.12.05.A).

FINDING COMMENTS: It should be noted that double bagging of 1.5 mm bags does not meet the requirements.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Modify language in waste disposal contract to ensure red bags with a 3mm thickness are provided. Estimated Cost: Negligible

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.1.3.AA #1 III ARMY/DOD CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MG-08

MANUAL QUESTION NUMBER: SO-001-003-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: The Integrated Solid Waste Management Plan (ISWMP) written in Dec 1998 did not document actual procedures, techniques, or practices used to manage solid waste at the installation. The ISWMP did not adequately address the site-specific waste stream (i.e. the yard waste management section did not address leaf disposal, and there was no description of bulky waste disposal procedures). There was misinformation in the plan (i.e. pallets were not taken to DRMO; they were taken to the New Cumberland Army Depot, and the DRMO was not actively involved in the recycling program at the installation level). Requirements included in the plan were not being met by Environmental Office personnel (i.e. the plan required the Environmental Office to provide a summary of Affirmative Procurement activities; and no qualified recycling program was developed or implemented).

CRITERIA: Installations are required to establish local procedures and responsibilities for the execution of the waste management program and have an Integrated Solid Waste Management Plan (ISWMP) (AR 200-1, para 5-2b and 5-10b(1); AR 420-49, para 3-2b and 3-2c)) [Revised April 1999].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Revise the ISWMP so that it documents the actual procedures, techniques and practices used to manage solid waste at this particular installation. Ensure that the document is detailed enough to include practices for disposal, contact names, and phone numbers as necessary for items such as bulky wastes, pallets, or other specific items that may need attention outside of the normal waste pick-up schedule. Disseminate this information to individual buildings, employees, and residents so that people know how to properly dispose of wastes. If there are new procedures that the Environmental Office would like to include in the ISWMP, ensure that there are plans for implementing those procedures on a realistic schedule.
Estimated Cost: \$10,000

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE
COST: 10000
1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.2.1.AA #1 III ARMY/DOD CORRECTIVE ACTION Solid Waste

FINDING ID: SO-JK-01

MANUAL QUESTION NUMBER: SO-002-001-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: There was no written contingency plan for the regulated medical waste (RMW) disposal. Since the primary contractor defaulted on the RMW contract there was no contract in place and the installation was forced to pay by credit card for each individual pick up. The installation was paying 12 cents more a pound plus a pick up fee for disposal.

CRITERIA: All medical treatment facilities will write detailed contingency plans for regulated medical waste disposal in case the primary means of disposal becomes inoperable. These plans will be revised and updated frequently (yearly at least). Contingency plans will meet all local and State regulations. MEDCOM Reg 40-35, Nov 1999

FINDING COMMENTS: Coordinate with all major RMW generators to ensure their needs are met in the contract such as frequency of pick up, loading of waste into truck, and thickness of the red bags (3 millimeters).

STATUS OF CORRECTION:

CORRECTIVE ACTION: Ensure contingency plans for the regulated medical waste contract currently being written are included. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

SO.2.1.AA #2 III ARMY/DOD CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MW-01

MANUAL QUESTION NUMBER: SO-002-001-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: Wastes were improperly managed as regulated medical wastes at Walter Reed Army Institute of Research (WRAIR) and Walter Reed Army Medical Center. Large amounts of disposable gloves, packing materials, and paper were observed in red bags throughout these facilities. These items do not meet the criteria for regulated medical wastes based on the language in WRAIR Policy Letter 96-117 (Waste Disposal) and MEDCOM Regulation 40-35 (Management of Regulated Medical Waste) and therefore should be managed as general trash.

CRITERIA: Non-regulated Medical Waste is defined as waste which is produced as a direct result of patient diagnosis, treatment, or therapy. Included in this category are items such as dressings, bandages, swabs, used disposable drapes, gloves, gowns, masks, empty used specimen containers and gauze that does not contain blood or blood products. (WRAIR Policy Letter 96-117) and (MEDCOM Regulation 40-35)

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Safety Office personnel should ensure that waste segregation is addressed in the monthly bloodborne pathogens training classes. In addition, signs illustrating proper segregation practices should be posted at each accumulation point, and collection points should be periodically monitored to ensure compliance. Estimated Cost: Negligible. 2) Modify the existing language in their policy letter to reflect current practices. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: It stated that WRAIR/NMRC are tossing items in the RMW containers that would not be RMW, i.e.

gloves. WRAMC and the tenants have made a conscious decision to err on the side of caution by encouraging staff to place non-RMW into RMW receptacles if that helps ensure that no RMW will be inadvertently be discarded into the solid waste stream as non-RMW. The fines that result from improper disposal of RMW are costlier than the extra disposal costs that we pay for disposing of some non-RMW as RMW. CHPPM: Medical Waste management plans for the facility incorporated the language in MEDCOM Regulation 40-35. Should the facility decide to encourage staff to place non-RMW into RMW receptacles, this practice must be incorporated in to the plan. It should be noted that funds to dispose of non-RMW as RMW may not necessarily be available from MEDCOM in the future.

SO.25.2.AA #1 III ARMY/DOD CORRECTIVE ACTION Solid Waste

FINDING ID: SO-MG-09

MANUAL QUESTION NUMBER: SO-025-002-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: There was no written Qualified Recycling Program (QRP). The DPW implemented a recycling program for white paper, cans, bottles, newspapers, and other recyclables in offices and in the housing area. The recycling coordinator had plans for increasing recycling awareness and participation as the program was developed. However, the level of participation was poor, and commingled trash and recyclables were observed in many of the recycling containers and in Dumpsters. Recycling of some specific items was addressed in the Pollution Prevention Plan (1997), but the plan did not qualify as a QRP. The Integrated Solid Waste Management Plan required that a QRP be developed and implemented.

CRITERIA: Installations are required, where cost effective, to establish recycling programs and procedures (AR 200-1, para 5-10b(8), DODI 4715.4, para E7(e) and F2(c)(3)) [February 1997].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Develop and implement a QRP in accordance with AR 420-49 para 3-3. A QRP will document procedures for segregating and collecting specific materials for recycling and methods for maintaining fiscal accountability of recycling funds. Increase recycling awareness and participation through education and designating area coordinators with support from the garrison. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.14 Storage Tanks

Aboveground storage tanks (ASTs) had proper secondary containment. Eight of the nine underground storage tanks (USTs) at the Forest Glen Annex in Maryland met all Federal and state requirements. Seven of the eight USTs at Main Post in the District of Columbia (DC) also met all Federal and DC requirements. UST leak detection systems and high level alarms were sounding at the Forest Glen Motor Pool and the Walter Reed Army Medical Center, respectively.

The Garrison Environmental Office (GEO) lacked a recordkeeping system to identify UST closures and corrective actions. There was no way to verify UST closure status because GEO personnel could not confirm whether reports were filed with the appropriate authorities.

ST.60.1.US #1 I FEDERAL CORRECTIVE ACTION Storage Tanks

FINDING ID: ST-KR-01

MANUAL QUESTION NUMBER: ST-060-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: TRANSPORTATION MOTOR POOL

IFS FACILITY NUMBER: 00605

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: The leak detection system was inoperable for the underground storage tank (UST) piping at the Motor Pool (Bldg 605). The piping sump was filled with water and the leak detection probes were moved from their regular position to avoid the water, but would not be able to detect a leak in the new position.

CRITERIA: New and existing USTs and piping are required to provide a method, or combination of methods of release detection (40 CFR 280.10(c), 280.10(d), 280.40(a), and 280.40(d)) [June 1997, Revised March 2000].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Pump out the piping sump, reposition the probes, and investigate the cause of the frequent alarms to ensure that the piping and the sump are not leaking. Estimated Cost: \$60,000.

CORRECTIVE ACTION TYPE: EQUIPMENT PROCUREMENT OR CHANGE

COST: 60000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

ST.75.1.DC #1 I STATE CORRECTIVE ACTION Storage Tanks

FINDING ID: ST-KR-02

MANUAL QUESTION NUMBER: ST-075-001-DC

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: WRAMC

IFS FACILITY NUMBER: 00002

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: The high level alarm on the 20,000 gallon diesel emergency generator tank was inoperable. The alarm was sounding constantly and could not be shut off.

CRITERIA: USTs that store fuel for use by an emergency power generator must meet certain UST requirements (20 DCMR, Section 5505 and 6000.16.) [Revised March 2000].

FINDING COMMENTS: Operators were not aware that the alarm was related to a high level in the tank.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Repair the alarm and ensure that it is kept in proper working order. Estimated Cost: \$1,000.

CORRECTIVE ACTION TYPE: EQUIPMENT PROCUREMENT OR CHANGE

COST: 1000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

ST.1.2.AA #1 III ARMY/DOD CORRECTIVE ACTION Storage Tanks

FINDING ID: ST-MG-01

MANUAL QUESTION NUMBER: ST-001-002-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: At least 17 underground storage tanks (USTs) were removed since 1997, and documentation of tank removal and soil cleanup results for those tanks were available in the Environmental Office. There was no evidence that the reports were submitted to the appropriate authorities (State of Maryland or District of Columbia) for final closure status. There was also no recordkeeping system to verify the actual number of tanks that have been removed or remediated at the installation.

CRITERIA: Management and organization of paperwork, materials, and personnel should be done in a manner that prevents noncompliance and recurrence of noncompliance, precludes/minimizes regulatory enforcement actions (including warning letters, etc.) promotes good public relations, and addresses systemic weaknesses in the overall operation of the program (MP).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Conduct a thorough review of UST records, and determine the present status of every tank. The environmental office indicated that records may have been packed away. If records are not available for each tank through final closure, obtain necessary records from the appropriate authority (State of Maryland or District of Columbia). Submit reports to the appropriate authority to seek closure if necessary. Estimated Cost: negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.15 Polychlorinated Biphenyls (PCBs)

All known PCB and PCB contaminated transformers have been removed. All documentation with regards to manifests and destruction notices were maintained and available for review. The only PCB containing items remaining on the installations are light ballast, which are removed during remodeling and maintenance and repair operations. These ballasts were turned into the Garrison Environmental Office (GEO) 90-day storage bunkers prior to disposal.

3.16 ASBESTOS

The Asbestos Management Program had several deficiencies. The most serious was the lack of central coordination of the contracting of asbestos abatement projects. The installation had to annually certify that all of the federal asbestos regulations (National Emission Standards for Hazardous Air Pollutants (NESHAPs) were being met (as a condition of the Title V air permit). These standards included notification to regulatory authorities, control of asbestos emissions, proper abatement technology, licensing of abatement technicians, management of asbestos wastes, and manifesting of asbestos wastes. There was no way to determine whether the terms of the NESHAPs were being met since abatement contracts were managed by individual activities and tenants, and coordination with the environmental office on these issues was inconsistent.

Specific deficiencies included:

1. Asbestos waste manifests were not tracked and retained.
 2. Contract specifications on asbestos abatement contracts were not reviewed to ensure that they contained proper regulatory citations for the applicable state and federal requirements.
- The Asbestos Management Team did not appear to be effective in assisting the Asbestos Installation Coordinator with meeting the goals of the Asbestos Management Plan, and ensuring compliance with the NESHAPs.

T2.2.1.US #1 I FEDERAL CORRECTIVE ACTION Asbestos

FINDING ID: T2-LP-01

MANUAL QUESTION NUMBER: T2-002-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: There was no centrally managed repository for asbestos waste shipment records, and receipt of manifests from the ultimate disposal site could not be verified. Federal asbestos regulations required: 1) the asbestos waste generator to contact the disposal site within 35 days if the waste manifest was not returned to the generator; and 2) the asbestos waste generator to notify the regional Environmental Protection Agency (EPA) office if the waste manifest was not provided by the disposal site within 45 days. Neither of these requirements were accomplished on a routine basis.

CRITERIA: Where a copy of the waste shipment record is not received by the waste generator within 35 days, contact the disposal site owner to determine status of the shipment. Report in writing to the EPA Regional office if a copy of the waste shipment record is not received within 45 days. Retain a copy of all waste shipment records for at least 2 years. Make available for inspection all records required under this section [40 CFR 61.150(d)(3), (4), (5) and (6)]

FINDING COMMENTS: Abatement projects are not centrally managed or executed and this complicates the task of centralizing recordkeeping. Project managers for renovation projects that involve asbestos abatement need to coordinate more closely with the Installation Asbestos Coordinator. It is possible that manifests are being returned from the disposal site as required, but there is no way to determine this with current recordkeeping procedures.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Establish a Command policy to require all asbestos abatement project managers at the installation to provide a copy of both the outgoing waste manifest (with generator and transporter information) and the completed waste manifest (with disposal site signatures) to the Garrison Environmental Office. Track outgoing manifests to ensure that the disposal site provides the necessary final certification. Execute

notification to the disposal site and the Regional EPA as necessary for manifests that are not returned in a timely manner. Retain copies of all manifests in a central repository to facilitate retrieval and inspection. Estimated Cost: \$5,000 (to write the Command policy, staff it and establish a tracking mechanism).

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE
COST: 5000
1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

T2.2.1.AA #1 III ARMY/DOD CORRECTIVE ACTION Asbestos

FINDING ID: T2-LP-02

MANUAL QUESTION NUMBER: T2-002-001-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: There was no way to determine whether the installation was meeting goals established by the Asbestos Management Plan (AMP). In particular, the AMP charges the Asbestos Installation Coordinator (AIC) with ensuring notification of regulatory agencies, tracking manifests, obtaining necessary permits, review of abatement specifications, review of all construction work orders with potential to impact asbestos containing materials, and multiple other responsibilities. Due to a lack of centralized review and recordkeeping there was no way to determine whether these responsibilities were being properly executed.

CRITERIA: An Asbestos Management Plan will be developed and executed by the Asbestos Management Team (AMT). (AR 200-1, Chapter 8-3)

FINDING COMMENTS: The AMT met regularly and did accomplish some of the tasks outlined in the AMP. However, asbestos abatement projects still occurred without the knowledge and oversight of the AIC.

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Establish a log to track accomplishment of AMP goals for individual asbestos abatement projects. Ensure that asbestos project managers provide documentation for notification, licensing, emission control, air sampling, waste manifesting and other related correspondence to the AIC. Record accomplishment of necessary tasks in the tracking system log. Retain the log as historical documentation of accomplishment of AMP and asbestos regulatory requirements. Estimated Cost: \$10,000 (to establish an automated database and begin data entry for asbestos reports in the Garrison Environmental Office central files). 2) Provide Command emphasis to ensure that AMT has proper membership and operates to accomplish the goals of the AMP. Ensure that members of the AMT have sufficient authority and aptitude to ensure that information flows efficiently between their organization and the AMT. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 10000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: WRAMC disagrees with this finding, as it applies to an old contract that is no longer in effect.

T2.1.2.AA #1 HS GMP CORRECTIVE ACTION Asbestos

FINDING ID: T2-LP-03

MANUAL QUESTION NUMBER: T2-001-002-AA

FINDING CATEGORY: HEALTH/SAFETY

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: There was no centralized mechanism to ensure that all asbestos abatement contracts included the proper regulatory citations. An Asbestos Abatement Specification for a Task Order Contract let in January 1998 failed to contain the proper citations for District of Columbia and Maryland regulations governing asbestos abatement activities.

CRITERIA: Management and organization of paperwork, materials, and personnel should be done in a manner that prevents noncompliance and recurrence of noncompliance, precludes/minimizes regulatory enforcement actions (including warning letters, etc.), promotes good public relations, and addresses systemic weaknesses in the overall operation of the program (MP).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Establish standardized text citing all appropriate regulatory requirements pertaining to asbestos abatement contracts let by the installation and its tenants.
Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: 1

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.17 RADON

The Radon Program appeared to be effective. A Radon Management Plan was prepared in June 1999. As part of this plan, radon testing was conducted at select locations throughout the installation. Radon levels at Mologne House and Borden Pavilion (Building 6) exceeded the 4 picoCurie/liter (pCi/L) action threshold (but were less than 20 pCi/L). These areas were retested in July 2001 and all levels were below the 4 pCi/L level.

3.18 Lead-Based Paint

A contractor prepared a Lead Based Paint (LBP) management plan for the installation in 1999. The plan was extremely generic and did not address key issues such as providing a list of personnel which make up the LBP team, designating the program team leader, identifying where lead hazard assessments had been performed, or provide a summary of the assessment results. In addition, the definitions of LBP hazards listed in the plan were not consistent with the definitions listed in 40 CFR 745.

Walter Reed had performed risk assessments for the housing on main post and Glen Haven in the mid 1990's. The results indicated that LBP hazards did exist at the eight pre-1960 houses located on main post. One Class I finding was written during the Environmental Compliance Assessment System (ECAS) as Directorate of Public Works personnel were unable to produce copies of LBP disclosure statements issued to residents in these units as required under 40 CFR 745.100.

One issue of concern that was observed during the assessment was related to the on-going process of privatizing the housing department. Since Title X has specific provisions for LBP in federally owned target housing that is transferred, it was recommended that installation personnel coordinate with Office Department of Environmental Programs (ODEP) and the Army Environmental Center (AEC) to determine if the privatization is considered a "transfer" for the purpose of complying with this rule. Should this act be considered a transfer, the installation would be required to either conduct the abatement, or have the responsibility assumed by the transferee.

T4.10.1.US #1 I FEDERAL CORRECTIVE ACTION Lead Based Paint

FINDING ID: T4-MW-01

MANUAL QUESTION NUMBER: T4-010-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW-FAMILY HOUSING

IFS FACILITY NUMBER: 00011

FACILITY TYPE: HOUSING & COMMUNITY FACILITIES

FINDING DESCRIPTION: Copies of Lead-based Paint (LBP) disclosure statements issued to residents of target housing could not be produced during the assessment. These statements are required under 40 CFR 745.110 and must contain the following elements: a lead warning statement; statement from the lessor disclosing the presence of LBP; any additional information concerning the known LBP hazard; a list of records/reports pertaining to LBP hazards that have been provided to the resident, and a statement by the lessee indicating the above items have been received.

CRITERIA: The facility is responsible for informing lessees of target housing (see definitions) of the presence of any known LBP and/or LBP hazards according to specific parameters (40 CFR 745.100, 745.101, 745.107, 745.113(b), and 745.113(c)) [Revised June 1998].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Provide the disclosure documents as specified in 40 CFR 745.100. Ensure records are retained for a time period of three years. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.19 Wastewater Management

The wastewater program was far better and more conscientiously managed than during previous Environmental Compliance Assessments due to a change in personnel. This should aid in future compliance.

Walter Reed Army Medical Center (WRAMC) consistently met all of its discharge permit requirements, except for mercury and pH. There was a consent agreement with the District of Columbia Water and Sewer Authority (WASA) for mercury that established timelines for elimination of mercury discharges. WRAMC was in compliance with the terms and conditions of the consent agreement. There was also a compliance directive from the Maryland Washington Suburban Sanitary Commission (WSSC) which required continued permit compliance during the process of eliminating the source of the pH excursions. WRAMC was in the planning stages for construction of a neutralization tank for pH.

WRAMC's storm water program was still forming. A draft Storm Water Pollution Prevention Plan (SWPPP) was written but had not been finalized nor implemented.

Some instances of chemicals and medical waste being discharged to the storm water collection system continued. These discharges must be diverted to the sanitary sewer to maintain compliance with the WASA and WSSC discharge permits.

Discharges of sodium azide solutions to laboratory sinks could produce explosive reactions with metal pipes or joints, or metal solutions.

WA.10.1.US #1 I FEDERAL CORRECTIVE ACTION Wastewater

FINDING ID: WA-KR-05

MANUAL QUESTION NUMBER: WA-010-001-US

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: WRAMC

IFS FACILITY NUMBER: 00002

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: There was an unpermitted wastewater discharge to a storm drain from power-washing regulated medical waste transportation carts and storage containers with germicide. The carts were washed on the hospital loading dock.

CRITERIA: Point source discharges are required to have either a state NPDES or a Federal NPDES permit if located in states without an USEPA-approved NPDES permit program (40 CFR 122.1(b), 122.21(c)(2)(i) through 122.21(c)(2)(iv), and 122.41(a)) [Revised October 1999, Revised July 2000, Revised October 2001].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Wash the carts inside the hospital in a location that discharges to the sanitary sewer. Estimated Cost: Negligible. Or, 2) Install a valve in the storm drain so that wash water may be routed to the sanitary sewer and storm water runoff is routed to the storm water drainage system. Estimated Cost: \$5,000.

CORRECTIVE ACTION TYPE: EQUIPMENT PROCUREMENT OR CHANGE

COST: 5000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: WRAMC disagrees with this finding. Actual discharge to a storm sewer was not conducted. Loading dock drains were re-routed to the sanitary sewer after the 1999 ECAS.

WA.10.1.US #2 I FEDERAL CORRECTIVE ACTION Wastewater

FINDING ID: WA-KR-09

MANUAL QUESTION NUMBER: WA-010-001-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: AUTO SKILLS CENTER

IFS FACILITY NUMBER: 00082

FACILITY TYPE: MAINTENANCE FACILITIES

FINDING DESCRIPTION: Floor washing soap and floor wax was discharged to a storm drain at the Auto Skills Center (Bldg 82) without a permit. A janitorial contractor mopped and waxed the floors then dumped the mop bucket full of soap and floor wax to the storm drain in the front of the building.

CRITERIA: Point source discharges are required to have either a state NPDES or a Federal NPDES permit if located in states without an USEPA-approved NPDES permit program (40 CFR 122.1(b), 122.21(c)(2)(i) through 122.21(c)(2)(iv), and 122.41(a)) [Revised October 1999, Revised July 2000, Revised October 2001].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Discharge wastewaters to the sanitary sewer system. Estimated Cost: Negligible. Train janitorial contractors on environmental policies and procedures. Estimated Cost: \$5,000.

CORRECTIVE ACTION TYPE: TRAINING

COST: 5000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WA.10.3.US #1 I FEDERAL CORRECTIVE ACTION Wastewater

FINDING ID: WA-KR-08

MANUAL QUESTION NUMBER: WA-010-003-US

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: There was no final Storm Water Pollution Prevention Plan (SWPPP). A draft SWPPP had just been prepared dated 25 April 2002, but was not signed, finalized, nor implemented. The SWPPP was required to be completed by 1 December 1998.

CRITERIA: Certain discharges of stormwater are required to be permitted (40 CFR 122.26(a), 122.26(c), 122.26(d), 122.26(g)(1) and 122.41(a)) [Revised January 2000, Revised July 2000]. The permittee shall develop and implement a SWPPP for each facility covered by this permit. (General Discharge Permit for Storm Water Associated with Industrial Activities, No. 97-SW-0694, Part IV.B.)

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Finalize and implement the SWPPP and obtain approval and signature of the Commander. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WA.35.1.MD #1 I STATE CORRECTIVE ACTION Wastewater

FINDING ID: WA-KR-03

MANUAL QUESTION NUMBER: WA-035-001-MD

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: YES

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: Pretreatment discharge authorization permit limits for pH were exceeded on eight occasions in 2001 during sampling at the Walter Reed Army Institute of Research (WRAIR), Bldg 503. The pH was out of compliance both above and below the allowable range. The Washington Suburban Sanitary Commission (WSSC) issued a notice of violation number 5296 on 3 Oct 2001 for pH non-compliance.

CRITERIA: Industrial users must meet specific pretreatment requirements (COMAR 26.08.08.02C).

FINDING COMMENTS: A compliance directive from the WSSC required a plan to control pH. The pH control plan concluded that the glassware wash process was the source of the high and low pH. A neutralization tank was determined to be the required corrective procedure. The compliance directive stated that Walter Reed was required to maintain compliance with the terms and conditions of its Discharge Authorization Permit number 08091.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Continue to implement the pH control plan and construct a neutralization tank. Estimated Cost: \$400,000.

CORRECTIVE ACTION TYPE: EQUIPMENT PROCUREMENT OR CHANGE

COST: 400000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WA.35.3.DC #1 I STATE CORRECTIVE ACTION Wastewater

FINDING ID: WA-KR-07

MANUAL QUESTION NUMBER: WA-035-003-DC

FINDING CATEGORY: CLASS I

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: ADMINISTRATIVE, COMMUNICATION FACILITIES

FINDING DESCRIPTION: Wastewater monitoring for the consent agreement was conducted at manhole #24 which was different than stated in the consent agreement (manhole #25). The sample point for wastewater compliance was changed through an approved National Pollutant Discharge Elimination System (NPDES) permit appeal on 21 Feb 2002, but the sample point was not changed on the consent agreement. The two documents refer to the same subject, but did not identify the same sample location. The sample point location on the NPDES discharge permit was changed for ease in sampling.

CRITERIA: Industrial users must meet monitoring requirements (21 DCMR, Sections 1508.4, 1508.5, and 1511.1) [Revised July 1997].

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Modify the consent agreement to list manhole #24 as the compliance sample location. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WA.35.1.DC #1 III STATE CORRECTIVE ACTION Wastewater

FINDING ID: WA-KR-06

MANUAL QUESTION NUMBER: WA-035-001-DC

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: MULT

IFS FACILITY NUMBER: MULT

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: Sodium azide solution was discharged to the wastewater collection system. The sodium azide was part of the daily calibration and cleaning process for a Coulter Counter in the hematology/oncology laboratory at Walter Reed Army Medical Center and a Ventana processor in the immunology lab at the Armed Forces Institute of Pathology. Sodium azide could react with lead, copper, or brass pipes or joints, or with metal containing laboratory solutions, and form a highly explosive compound (lead or copper azide).

CRITERIA: Industrial users must meet permitting requirements (21 DCMR, Sections 1502.1, 1502.2, and 1506.1(a), (b), and (d)). Pollutants that create a fire or explosion hazard in the wastewater system shall not be introduced into the wastewater system, including any liquids, solids, or gases, which by reason of their nature or quantity are, or may be, sufficient either alone or by interaction with other substances to create a fire or explosion or to injure in any other way the wastewater system or the process or operation and maintenance of the wastewater system. (Wastewater Discharge Permit No. 045-4, Part IV, 1.A).

FINDING COMMENTS: The pretreatment requirements were applicable at the discharge to the Water and Sewer Authority wastewater system, not inside buildings or laboratories. It was unlikely that explosive conditions would exist in WASA's collection system due to dilution from a number of other sources. However, sodium azide discharge could cause dangerous conditions within the building or laboratories.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Contain the sodium azide solution and characterize it to determine if it is a hazardous waste, if it is a hazardous waste then dispose of it accordingly, otherwise dispose of it as a non-regulated waste. Estimated Cost: \$1,000.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT
COST: 1000
1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

3.20 WATER QUALITY MANAGEMENT

Walter Reed Army Medical Center's (WRAMC) Main Post and Forest Glen Annex purchased its drinking water from the Washington D.C. Water and Sewer Authority (WASA) and Washington Suburban Sanitary Commission (WSSC) respectively. WRAMC and Forest Glen were classified as purchased water systems and were not subject to District of Columbia, State of Maryland, or federal drinking water regulations, however many Army regulations and good management practices apply.

The following program deficiencies may directly impact on water quality resulting in potential contamination or a lack of installation water supply: the lack of a cross-connection control/backflow prevention program, the lack of a water resource management plan (WRMP) (used in time of emergency), the lack of implementation of the unidirectional distribution system flushing plan, and lack of procedures for disinfection of repaired mains and mains for new construction.

Additional areas that required correction included: the development of an emergency response notification SOP for alerting personnel during times of emergencies (would be a part of the WRMP), water distribution system maps needed to be updated, and the therapy pool records for the last two years were not available for review.

WQ.1.4.AA #1 III ARMY/DOD CORRECTIVE ACTION Water Quality

FINDING ID: WQ-RL-04

MANUAL QUESTION NUMBER: WQ-001-004-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW ENGINEERING PLANS AND SERVICES

IFS FACILITY NUMBER: 00011

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: Installation water distribution system maps had not been updated since 1989.

CRITERIA: The installation should prepare and keep current water supply distribution system maps (MP) [Revised April 1999]. Accurate and complete water supply distribution system maps should be prepared and kept current (AR 420-49, para 4-5a).

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Review the water distribution system maps and perform an update to include changes from new construction, renovation, demolition and all other modifications. Estimated Cost: \$50,000.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 50000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WQ.1.5.AA #1 III ARMY/DOD CORRECTIVE ACTION Water Quality

FINDING ID: WQ-RL-03

MANUAL QUESTION NUMBER: WQ-001-005-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: The installation did not have an emergency response notification Standing Operating Procedure (SOP) for use in response to drinking water emergencies resulting from natural or man-made disasters.

CRITERIA: Installations are required to have an SOP for alerting personnel in national or local emergencies or times of actual or anticipated noncompliance (AR 420-49, para 4-4b and 4-4d) [Revised April 1999]. Personnel and organizations connected to the installation water supply will be notified of any actual or anticipated noncompliances with water quality standards. Noncompliance may include excessive contaminant levels as well as inadequate surveillance procedures or frequencies.

FINDING COMMENTS: It was stated that a notification roster SOP was developed, however a copy was not available for review.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Develop an emergency response notification SOP for alerting personnel during times of emergencies. Ensure the SOP clearly defines the responsibilities of key individuals during an emergency. The notification roster should be incorporated into the Water Resource Management Plan. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WQ.1.8.AA #1 III ARMY/DOD CORRECTIVE ACTION Water Quality

FINDING ID: WQ-RL-07

MANUAL QUESTION NUMBER: WQ-001-008-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: The installation lacked a comprehensive water resource management plan (WRMP).

CRITERIA: Installations are required to prepare a Water Resources Management Plan (AR 200-1, para 2-6b) [January 1997]. The Installation WRMP will include an emergency contingency plan and an effective water conservation program that addresses water re-use, water metering, and landscape management. The WRMP may be a part of the Installation Utilities Management Plan. (AR 420-49, para 4-3).

FINDING COMMENTS: The WRMP must include a water supply emergency contingency plan that addresses water provisions during times of man-made or natural disasters.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Develop a WRMP in accordance with (IAW) the American Water Works Association, Manual 19, and AR 420-49, paragraph 4-3. Include current per capita water demands (workers and residents), industrial demands (cooling systems, boilers, restaurants, etc), fire protection demands, and current distribution system supply capacities IAW Military Handbook (MIL-HDBK)-1005/7A, Chapter 2. Determine requirements for distribution system upgrades and incorporate them into the WRMP. Estimated Cost: \$15,000

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 15000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WQ.1.10.AA #1 III ARMY/DOD CORRECTIVE ACTION Water Quality

FINDING ID: WQ-RL-05

MANUAL QUESTION NUMBER: WQ-001-010-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW-UTILITIES

IFS FACILITY NUMBER: 00011

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: Repaired and newly constructed distribution system mains were not disinfected prior to being placed back into service.

CRITERIA: DPW personnel are required to disinfect new and repaired water mains, storage tanks, wells, and equipment under certain circumstances (AR 420-49, para 4-7b) [Added April 1999]. Before reactivation, new water distribution systems, extensions to existing systems, any valved section of such extension, or any replacement of the water distribution system shall be properly disinfected. Prior to disinfection, the system will be thoroughly flushed.

FINDING COMMENTS: There are multiple activities involved with this program including, DPW utilities, job order contracting; Corp of Engineers and PVNTMED SVC.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Disinfect repaired and newly constructed water distribution mains in accordance with Army Technical Manual 5-660. Develop a tracking system to ensure disinfection is accomplished and that Preventive Medicine Service (PVNTMED SVC) is made aware of each project involving new construction and repairs to water mains. The PVNTMED SVC is responsible for bacteriological analysis prior to opening service. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WQ.1.11.AA #1 III ARMY/DOD CORRECTIVE ACTION Water Quality

FINDING ID: WQ-RL-01

MANUAL QUESTION NUMBER: WQ-001-011-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: ENVIRONMENTAL OFFICE

IFS FACILITY NUMBER: 00011

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: The installation had not implemented a Cross-Connection Control Plan (dated 1998) including the installation, annual inspection, testing and maintenance of backflow prevention devices. A systematic survey for potential cross-connections was completed in 1999 but was missing. Without this survey the cross-connection control plan could not be implemented.

CRITERIA: Installations are required to have a cross-connection control program (AR 420-49, para 4-7k) [Added April 1999].

FINDING COMMENTS: The cost of installing all the necessary new backflow prevention devices and repositioning the existing ones was estimated using information from the original draft cross-connection control plan. Funding to execute this project has been requested in the EPR submissions since FY 1997, but the required funding is still not available.

STATUS OF CORRECTION:

CORRECTIVE ACTION: 1) Request additional copies of the cross-connection survey from the contractor who completed it. Once the survey is obtained, expedite the execution of the existing plan. Estimated Cost: \$600,000; 2) Provide training to personnel to become certified in the installation, inspection, and testing of backflow prevention devices. Estimated Cost: \$2,000/person; and 3) Perform annual inspections, testing and maintenance. Estimated Cost: \$120,000.

CORRECTIVE ACTION TYPE: CORRECTIVE PROJECT

COST: 600000

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WQ.1.12.AA #1 III ARMY/DOD CORRECTIVE ACTION Water Quality

FINDING ID: WQ-RL-02

MANUAL QUESTION NUMBER: WQ-001-012-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: DPW-UTILITIES

IFS FACILITY NUMBER: 00011

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: Flushing procedures did not incorporate the undirectional methodology provided in the flushing plan (dated 1999).

CRITERIA: Installations are required to flush distribution systems as necessary to remove accumulated debris (AR 420-49, para 4-7c) [Added April 1999].

FINDING COMMENTS: Fire Department personnel perform flushing operations on the distribution system each October. The Garrison Environmental Office personnel must support this effort by providing oversight to ensure flushing is performed in accordance with the plan.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Implement the installation flushing plan as it is written. This plan includes the closing of appropriate valves to generate required scouring velocities in the line(s) feeding the opened hydrant. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WQ.1.14.AA #1 III ARMY/DOD CORRECTIVE ACTION Water Quality

FINDING ID: WQ-RL-08

MANUAL QUESTION NUMBER: WQ-001-014-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: WRAMC

IFS FACILITY NUMBER: 00002

FACILITY TYPE: HOSPITAL & MEDICAL FACILITIES

FINDING DESCRIPTION: Physical therapy pool operators only monitored for pH and chlorine twice a day, did not test for total alkalinity, and did not maintain two years of records.

CRITERIA: The operation, maintenance, and repair of swimming pools will be done according to the standards outlined in TM 5-662 and TB MED 575 (AR 420-49, para 4-13) [Revised April 1999]. Chlorine residuals and pH are determined at least every two hours when the pool is in use. Records for pH and chlorine are maintain for at least two years. The pool operator must perform and document a test for alkalinity at least weekly. (AR 40-5, para 12-6.b.(3), TB MED 575, para 9-2.b.)

FINDING COMMENTS:

STATUS OF CORRECTION:

CORRECTIVE ACTION: Coordinate with Preventive Medicine Service to get the proper training on how to perform alkalinity test and to determine the proper test kit that should be used. Redesign the form used to record chlorine residual and pH results to include monitoring at least every two hours. Maintain records for at least two years. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: TRAINING

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

WQ.1.15.AA #1 III ARMY/DOD CORRECTIVE ACTION Water Quality

FINDING ID: WQ-RL-06

MANUAL QUESTION NUMBER: WQ-001-015-AA

FINDING CATEGORY: CLASS III

FINDING TYPE: Negative

EXISTING NOV: NO

LOCATION: PVNTMED

IFS FACILITY NUMBER: 00001

FACILITY TYPE: UTILITIES & GROUND IMPROVEMENTS

FINDING DESCRIPTION: Preventive Medicine Service (PVNTMED SVC) did not have the required inspection logs for the last two years of operation for the physical therapy pool.

CRITERIA: PVNTMED personnel are required to perform specific duties in relationship to swimming pools and swimming areas (AR 40-5, para 12-6b) [Revised April 1999]. Operational logs are required to be maintained for two years.

FINDING COMMENTS: The former WRAMC ESO did not have procedures in place to perform pool inspections. At the time of the assessment, the PVNTMED SVC ESO had established procedures to record and maintain pool inspection information in an organized manner. The PVNTMED SVC personnel perform pool inspections every week for all the required parameters and are keeping the records in a log book.

STATUS OF CORRECTION:

CORRECTIVE ACTION: Maintain records of pool inspections for a period of two years. Estimated Cost: Negligible.

CORRECTIVE ACTION TYPE: ADMINISTRATIVE OR POLICY CHANGE

COST: 0

1383 PROJECT NUMBER:

CORRECTIVE ACTION COMMENTS: WRAMC: Concur.

APPENDIX A

GLOSSARY OF ACRONYMS

AAFES	Army and Air Force Exchange Service
ACHP	Advisory Council on Historic Preservation
AR	Army Regulation
AST	Aboveground Storage Tank
CAA	Clean Air Act
CDC	Child Development Center
CERCLA	Comprehensive Environmental Response, Compensation, and Liability Act
CFC	Code of Federal Regulations
CG	Commanding General
CRM	Cultural Resources Management
CWA	Clean Water Act
DOL	Directorate of Logistics
DA	Department of Army
DPCC	Discharge Prevention, Containment and Countermeasure
DPW	Directorate of Public Works
ECAS	Environmental Compliance Assessment System
ECS	Equipment Concentration Site
ENMP	Environmental Noise Management Plan
EPA	Environmental Protection Agency
EPSD	Engineering Plans and Services Division
FOTW	Federally-Owned Treatment Works
FRP	Facility Response Plan
GEO	Garrison Environmental Office
GSA	General Services Administration
HAZCOM	Hazard Communication
HPP	Historic Preservation Plan
HQDA	Headquarters Department of the Army
HW	Hazardous Waste
H/S	Health and Safety
ICAP	Installation Corrective Action Plan
ICUZ	Installation Compatible Use Zone
IFS	Integrated Facility System
INRMP	Integrated Natural Resources Management Plan
INST	Installation
IPMC	Installation Pest Management Coordinator
IPMP	Installation Pest Management Plan
IRP	Installation Restoration Program
ISCP	Installation Spill Contingency Plan
ISR	Installation Status Report
ITAM	Integrated Training Area Management
LBP	Lead-Based Paint

MACOM	Major Command
MEDDAC	Medical Activity
MP	Management Practice
MSDS	Material Safety Data Sheet
MULT	Multiple
NEPA	National Environmental Policy Act
NFA	No Further Action
NHPA	National Historic Preservation Act
NJDEP	New Jersey Department of Environmental Protection
NOV	Notice of Violation
NPDES	National Pollutant Discharge and Elimination System
NPL	National Priorities List
NR	Natural Resource
OSHA	Occupational Safety and Health Administration
OWS	Oil Water Separator
PAI	Pounds of Active Ingredient
PAO	Public Affairs Office
PCB	Polychlorinated Biphenyls
POC	Point of Contact
POL	Petroleum, Oils, and Lubricants
POTW	Publicly-Owned Treatment Works
PVNTMED	Preventive Medicine
PX	Post Exchange
RCRA	Resource Conservation and Recovery Act
RMW	Regulated Medical Waste
SDWA	Safe Drinking Water Act
SHPO	State Historic Preservation Office
SOP	Standard Operating Procedure
SPCCP	Spill Prevention, Control, and Countermeasure Plan
SWPPP	Storm Water Pollution Prevention Plan
TCLP	Toxicity Characteristic Leaching Procedure
TEAM GUIDE	The Environmental Assessment and Management Guide
TPH	Total Petroleum Hydrocarbons
TSCA	Toxic Substances Control Act
TSDF	Treatment, Storage and/or Disposal Facility
USACERL	U.S. Army Construction Engineering Research Laboratory
USACHPPM	U.S. Army Center for Health Promotion and Preventive Medicine
USAEC	U.S. Army Environmental Center
USAMEDDAC	U.S. Army Medical Department Activity
USARC	U.S. Army Reserve Command

UST	Underground Storage Tank
VOC	Volatile Organic Compound
WRAMC	Walter Reed Army Medical Center
WTP	Water Treatment Plant
WWTP	Wastewater Treatment Plant

APPENDIX B
SPECIFIC FACILITIES VISITED

Facility Name	Bldg Number	Media Area	Finding Number
DPW	00001	A, HW, PO, O4, T1, O5, WQ, PM	A-LP-06, PO-JK-01, HW-MW- 10, WQ-RL-04
DPW - Utilities	00001	A	
DPW HVAC shop	00001	A	A-LP-05
DPW Master Planning	00001	A, CR, NR, O1, PM	CR-JM-01, CR-JM-02, CR-JM- 03, CR-JM-04
Dumpster	00001	SO, O3	SO-MG-01
Garrison Commander	00001	O5	
J & J Maintenance	00001	HW, PO, O4, T1	HW-MW-10
Judge Advocate General	00001	O5	
Preventive Medicine	00001	O5, WQ	WQ-RL-06
Resource Management Division	00001	O5	
DENTAC	00002	A	
J & J Maintenance	00002	HW, PO, O4, T1, A	PO-JK-01, HW-MW-10, A-LP- 04
WRAMC	00002	A, WA, ST, PO, HW, PO, O4, T1	HW-JK-04, HW-JK-06, HW-MW- 02, SO-MW-01, SO-MW-02
WRAMC - FMB	00002	A	A-LP-04, A-LP-07

Facility Name	Bldg Number	Media Area	Finding Number
WRAMC - Physical Therapy Pool	00002	WQ	WQ-RL-08
WRAMC - Radiology	00002	A	
DPW	00011	HW, PO, O4, T1	T2-MW-01
DPW - Utilities	00011	WQ	WQ-RL-05
DSHE - Safety	00011	O5	
Garrison Environmental Office	00011	A, HW, PO, O4, T1, NR, O1, WQ, WA, ST, PO, O5, SO, O3	A-LP-01, A-LP-03, A-LP-11, A-LP-12, T2-LP-01, T2-LP-02, O4-JK-01, HW-JK-01, SO-JK-01, O1-AA-01, WA-KR-01, WA-KR-02, WA-KR-03, WA-KR-04, PO-KR-01, WQ-RL-01, WQ-RL-02, WQ-RL-03, WQ-RL-07, O5-DH-01, O5-DH-02, O5-DH-03, O5-DH-04, O5-DH-05, O5-DH-06, O5-DH-07, O5-DH-09, O5-DH-11, SO-MG-08, SO-MG-09
DPW Boiler Plant	00015	A, HW, PO, O4, T1	A-LP-02, PO-JK-01, HW-MW-10
DPW Roads and Grounds	00016	PM, NR, O1, HW, PO, O4, T1	
Mologne House	00020	SO, O3	SO-MG-05
Dumpster	00040	SO, O3	SO-MG-03
Old WRAIR Bldg	00040	HW, PO, O4, T1	HW-MW-10
Dumpster	00041	SO, O3	SO-MG-03
DPW Chiller Plant	00048	HW, PO, O4, T1	PO-JK-01

Facility Name	Bldg Number	Media Area	Finding Number
DPW Chiller Plant	00049	HW, PO, O4, T1	
J & J Maintenance	00053	HW, PO, O4, T1	HW-MW-10
AFIP	00054	HW, PO, O4, T1, O5	HW-JK-06, HW-JK-09, HW-JK-04, O4-MW-01, HW-MW-06, HW-MW-07, HW-MW-09
HW Storage Bunker	00054	HW, PO, O4, T1	HW-JK-08, HW-MW-03
AFIP	00058	SO, O3	
Auto Skills Shop	00082	HW, PO, O4, T1	HW-JK-08
Dumpster	00083	SO, O3	
DPW Grounds	00084	NR, O1, PM	
Dumpster	00091	SO, O3	
Forest Glen Fire Department	00121	PM	
Veterinary Clinic	00156	HW, PO, O4, T1, WA, ST, PO	HW-JK-03
AAFES PX	00161	SO, O3, PM	SO-MG-04, PM-BP-13
AAFES Snack Shop	00161	SO, O3	SO-MG-06
Bowling Alley	00162	SO, O3	SO-MG-06
Commissary	00162	SO, O3, PM	SO-MG-04, PM-BP-09, PM-BP-11

Facility Name	Bldg Number	Media Area	Finding Number
Arts and Crafts Center	00163	HW, PO, O4, T1, SO, O3	HW-MW-05, SO-MG-04
AAFES Service Station	00164	A, SO, O3, WA, ST, PO, HW, PO, O4, T1	SO-MG-04, SO-MG-11, SO-MG-13, PO-JK-01, HW-JK-08
DOL Receiving	00178	HW, PO, O4, T1, WA, ST, PO	HW-MW-04
DOL Warehouse	00178	WA, ST, PO	
Dumpster	00178	SO, O3	SO-MG-02
WRAIR	00501	WA, ST, PO	
WRAIR	00503	A, O5, PM, WA, ST, SO, O3, HW, PO, O4, T1	HW-JK-01, HW-JK-02, HW-JK-06, SO-MW-01, SO-MW-02, HW-MW-01, HW-MW-02, HW-MW-09, A-LP-08, PM-BP-11
WRAIR	00508	HW, PO, O4, T1, WA, ST, PO	SO-MW-02
AFIP Tissue Repository	00510	HW, PO, O4, T1, WA, ST, PO	SO-MW-02
Forest Glen Boiler Plant	00511	A	A-LP-10
WRAIR - Veterinary	00511	HW, PO, O4, T1, WA, ST, PO	HW-JK-03, SO-MW-02
WRAMC	00512	HW, PO, O4, T1, WA, ST, PO	SO-MW-02
Forest Glen - Hazardous Waste Bunker	00515	WA, ST, PO, HW, PO, O4, T1	HW-JK-05
DPW - Self Help Warehouse	00601	PM	PM-BP-07
DPW Maintenance	00601	HW, PO, O4, T1	HW-JK-07

Facility Name	Bldg Number	Media Area	Finding Number
DPW Pest Management Shop	00601	WA, ST, PO, PM	
DPW Small Engine Repair Shop	00601	WA, ST, PO	
DPW Yard	00601	SO, O3	SO-MG-11
DPW Maintenance Warehouse	00602	HW, PO, O4, T1, WA, ST, PO	HW-JK-08
DPW Pest Management Shop	00602	PM	PM-BP-01, PM-BP-02, PM-BP-03, PM-BP-04, PM-BP-05, PM-BP-06, PM-BP-08
DPW Maintenance	00603	HW, PO, O4, T1	HW-JK-08
Motor Pool	00605	WA, ST, PO, SO, O3, HW, PO, O4, T1	ST-KR-01, HW-JK-08
Fabric Care Facility	00606	HW, PO, O4, T1, WA, ST, PO	
Glen Haven Self Help	01933	PM	PM-BP-12
Forest Glen	N/A	NR, O1	
Glen Haven Housing	N/A	SO, O3, NR, O1	SO-MG-07
Leaf Dump	N/A	SO, O3	SO-MG-04
DCI	T-020	HW, PO, O4, T1	HW-JK-06, SO-MW-02
Directorate of Contracting	T-020	O5	O5-DH-08
Dumpster	T-020	SO, O3	

Facility Name	Bldg Number	Media Area	Finding Number
Rambaugh Parking Garage	W-001	HW, PO, O4, T1	HW-MW-08

APPENDIX C

DRAFT INSTALLATION CORRECTIVE ACTION PLAN (ICAP)

This appendix contains the ICAP framework, provided on disk and in hard copy to WRAMC and MEDCOM for further development. The purpose of the ICAP is to be a planning document for WRAMC and MEDCOM to use as a funding identifier and tracking system for executing the corrective actions specified in the ECAR. The ICAP is intended to be a matrixed format listing findings, corrective actions, schedules and required resources for correcting the deficiencies.

Version 1.8 of the ECAS software and the ECAS Version 1.4a User's Guide are being provided to WRAMC with this report. Walter Reed AMC can continue to develop the ICAP using the ECAS software, or the ICAP can be developed in a database management software such as Dbase III or IV, Foxpro, Quattro Pro, Paradox, Lotus, etc. The ECAS software is capable of transferring the findings database (provided on disk as DETR2.ZIP) into a generic data file. See Chapter 9, "Database Administration", in the User's Guide for more information on transferring the ECAS database to a commercial database software program.