


**U.S. DEPARTMENT OF JUSTICE
Federal Bureau of Prisons**



**PROGRAM STATEMENT
National Environmental Protection**

Approved by	 William K. Marshall III Director, Federal Bureau of Prisons
DPI	HSD
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Summary of Changes

<p><i>Program Statement Rescinded:</i></p> <ul style="list-style-type: none">▪ 1600.10 Environmental Management Systems (12/14/2007)▪ 1600.12 National Environmental Protection Policy (6/1/2017)
<p><i>Changes:</i></p> <ul style="list-style-type: none">▪ Incorporation of pertinent portions of Program Statement Environmental Management Systems, into this program statement.▪ Numerous changes to environmental compliance codes, standards, and regulations have been incorporated into this program statement.▪ Changes to the structure of the Occupational Safety and Health Branch.

1. PURPOSE AND SCOPE

- Provide a safe and healthy environment for staff and inmates to work and live.
- Provide oversight and examination of environmental issues.
- Develop strategies to manage the impact of environmental regulations and standards affecting the Federal Bureau of Prisons (Bureau).
- Ensure Bureau institutions comply with federal, state, and local environmental regulations; applicable National Fire Protection Association (NFPA); and applicable Executive Orders.
- Promote energy conservation, reduction in waste streams, water consumption, and environmental emissions by using environmentally friendly products, and educating staff and inmates regarding the need to protect the environment.
- Take a proactive role as an agency recognized for environmental awareness by implementing specific policies, procedures, programs, and activities at all Bureau-owned or -operated facilities. Institutions, UNICOR operations, and Central and Regional offices will implement

these policies and procedures, and initiate programs and activities specific to their location and operations.

The National Environmental Protection Section provides environmental guidance, regulatory interpretation, environmental training, and regulatory compliance audits for the Bureau and all Bureau-owned or -operated institutions.

The scope of this program statement is limited to environmental protection requirements dealing with environmental compliance, environmental protection, institution security, and responses to spills and similar emergencies.

This program statement applies to Bureau-owned or -operated institutions and UNICOR operations at Bureau institutions.

a. **Program Objectives.**

- Ensure the proper management and disposal of hazardous waste.
- Report unsafe, unhealthy, or environmentally detrimental conditions to staff or inmates.
- Conduct the investigation and correction of unsafe, unhealthy, or environmentally detrimental conditions, as appropriate.
- Ensure regular environmental compliance inspections/audits are conducted, as specified in this program statement.
- Continual improvement in energy conservation, solid waste reduction, recycling, environmentally friendly product use, prevention of pollution, and water and energy conservation practices.
- Reduce institutions' negative environmental impact.
- Identify, develop, initiate, and maintain environmental training programs.

b. **Institution Supplement.** None.

2. **ENVIRONMENTAL PROTECTION DUTIES**

a. **Central Office.**

- **Assistant Director (AD), Health Services Division (HSD)** is the designated Environmental Executive (EE) for the Bureau. They manage the Bureau's Environmental Compliance program and make the final determination on all environmental issues. The AD/EE is the Bureau liaison to the U.S. Department of Justice (DOJ) for all environmental issues.
- **Chief, Occupational Safety & Health Branch (COSH).** Reports to the AD, HSD on environmental issues.
 - Oversees the management of the Bureau's environmental programs.

- Oversees the Chief, Environmental Protection.
- Provides technical direction to Regional Safety Administrators (RSAs).
- Provides direction and guidance on environmental protection issues that require guidance and/or information beyond what is available at the institution or regional level, or have an impact on a nationwide program.
- Interprets this program statement and regulations.
- Serves as a technical resource for:
 - Emergency responses involving spills and similar emergencies.
 - Environmental protection programs.
 - Environmental protection initiatives.
- **Chief, Environmental Protection.** Reports to the COSH on environmental issues.
 - Oversees the daily operation of the Bureau's environmental protection program.
 - Manages the Bureau's environmental compliance and environmental training programs.
 - Provides technical direction to Safety Administrators (SAs) and RSAs when environmental compliance issues cannot be resolved at the institution level.
 - Provides technical assistance to the COSH when interpreting environmental policy and regulations.
 - Oversees the development and updates of this program statement to reflect current regulations.
 - Serves as a technical resource in the area of environmental compliance and protection.
 - Ensures the compilation of data regarding Bureau-wide environmental trends.
 - Ensures the effectiveness of environmental programs through monitoring program review findings, external regulator visits, and performance of technical assistance visits.
 - Ensures the monitoring and reporting of environmental protection data generated by institution personnel.
 - Ensures the development and implementation of a tracking system for environmental compliance findings.
 - Monitors environmental Notices of Violation (NOVs) and enforcement actions Bureau-wide.
 - Aids institutions in responding to NOVs.
 - Coordinates and performs environmental compliance technical assistance visits.
 - Ensures the development of and provide environmental compliance training.
 - Provides technical assistance to institutions, including reviewing institutional environmental plans, permits, reports, and documents.
 - Participates in institution technical assistance visits as the environmental subject matter expert.
- **National Environmental Protection Specialist (EPS).** Reports to the Chief, Environmental Protection, on environmental issues.

- Performs environmental technical assistance visits as the environmental subject matter expert.
- Develops and provides environmental compliance training.
- Compiles data regarding Bureau-wide environmental trends.
- Serves as the Bureau's environmental technical expert.
- Provides technical assistance to institutions, including reviewing institutional environmental plans, permits, reports, and documents.
- Aids institutions in responding to NOV's.
- **Regional Safety Administrator (RSA).** Reports to the Regional Director (RD) and COSH on environmental issues as they occur, in a timely manner.
 - Ensures the effectiveness of environmental programs in the region by monitoring program reviews and staff assistance visits at institutions.
 - Monitors reports and data generated by institution personnel.
 - In conjunction with the OSHB, provides guidance and technical assistance to institution environmental and safety compliance personnel and helps resolve problems that cannot be resolved at the institution level.
 - In conjunction with the OSHB, ensures institution compliance with U.S. Environmental Protection Agency (EPA) and other applicable federal, state, and local regulations.
 - Serves as the regional technical resource on emergency response procedures involving spills and similar environmental emergencies.
 - Ensures all NOV's received at Bureau institutions are promptly reported to the COSH and Chief, Environmental Protection within two business days of receipt.
 - Develops and monitors a recycling program for the Regional Office and provides guidance to institution SAs on expanding institution recycling programs.
 - Monitors NOV's to identify region-specific enforcement trends.
 - Provides quarterly written reports to the COSH and Chief, Environmental Protection on the following:
 - All environmental NOV's and corrective actions.
 - Status of corrective actions on environmental-related program review findings.
 - Status of corrective actions on environmental technical assistance visits.
- **Office of General Counsel (OGC).** Provides legal counsel relating to environmental laws, regulations, permits, and other requirements. Reviews responses to regulatory enforcement actions prior to submittal.
- **Federal Prison Industries (FPI).** Ensures it operates its factories, vocational training programs, and education programs in compliance with environmental laws, regulations, and requirements.

b. Institutions.

- **Warden. Must:**
 - Ensure compliance with federal, state, and local environmental regulations.

- Report to the RD on environmental issues as they occur in a timely manner.
- Ensure adequate Occupational Safety & Health Department (OSHD) staffing to administer the institution environmental protection program. At a minimum this includes a Safety Administrator and Safety Specialist.
- Ensure periodic inspections of workplaces by technically competent Bureau personnel, as allowed by laws and regulations.
- Ensure staff are not subject to restraint, interference, coercion, discrimination, or reprisal for exercising their rights under Executive Order 12196 (Occupational Safety and Health Programs for Federal Employees), 29 CFR 1960, or for participating in the Bureau's Environmental Protection Program.
- Ensure adequate environmental compliance training is provided to supervisory, safety, and collateral duty safety personnel, as well as all other institution personnel.
- **Safety Administrator (SA).** Reports to the institution Warden, RSA, and Chief, Environmental Protection Section on environmental issues as they occur, in a timely manner. They work at the department head level with other institution managers to achieve environmental protection goals. When policy and regulations are not specific, they exercise professional judgment to maintain an acceptable level of environmental protection at the institution. The SA must:
 - Oversee environmental compliance at their institution.
 - Ensure required environmental compliance records are maintained.
 - Perform annual program area inspections outlined within this program statement.
 - Assist departments in identifying environmental legal and other requirements.
 - Ensure environmental training resources are available to departmental staff.
 - Ensure environmental permits are obtained, implemented, and maintained where necessary.
 - Promote the reduction of water consumption, energy conservation, landfill waste diversion, and an overall reduction in negative environmental impact.
 - Ensure all NOVs received at the institution are promptly reported to the COSH and RSA within two business days of receipt.
 - Ensure all NOVs are promptly responded to after the appropriate internal review.
- **Environmental Program Specialist (EPS).** The institution EPS reports to the SA and assists in the implementation of the environmental protection program. They assist with:
 - Monthly environmental compliance inspections.
 - Annual environmental inspections.
 - Institution waste stream analysis.
 - Environmental training.
 - Reduction of negative environmental impact.
 - Institution environmental regulatory interpretation.
- **Recycling Technician.** Reports to the SA and assists with the implementation of the institution recycling program. They assist with:
 - Tracking landfill diversion numbers for quarterly reporting.
 - Tracking monies generated through the recycling program.

- Oversight and direct operations of the recycling inmate cadre.
- Developing training programs for the inmate cadre.
- Researching new recycling opportunities.
- **Other Safety Personnel.** Report to the SA and assist in the implementation of the institution's environmental protection program.
- **Safety Alternates.** If the institution SA is the only full-time OSHD staff member, the Warden must appoint at least one safety alternate to provide department coverage during the SA's absence.
 - The Warden at an institution with two or more full-time OSHD staff is highly encouraged to appoint one or more safety alternates.
- **Supervisors.** All supervisors must:
 - Ensure environmental procedures are followed.
 - Implement corrective actions for identified environmental issues.
 - Implement and document training on environmental compliance for inmates.
 - Ensure appropriate environmental training is provided and documented for detail supervisors and inmate workers.
 - Notify the SA regarding all contact with environmental regulators.
 - Ensure all required environmental permits and plan records are maintained in accordance with the permit or plan.
 - Ensure all required monitoring and reporting associated with environmental permits and plans are completed.
 - Ensure compliance with all environmental regulations applicable to their department.
 - Keep abreast of environmental regulatory changes within their area of responsibilities.
- **Staff.** All staff must:
 - Ensure all environmental procedures and protocols are followed.
 - Comply with this program statement.

3. ENVIRONMENTAL PROTECTION TRAINING REQUIREMENTS

The COSH, with input from the Chief, Environmental Protection, will review and recommend approval or disapproval of training waiver requests for environmental course equivalents. Recommended waivers will be approved by the AD, HSD and AD, Human Resources Management Division.

All requests to accept equivalent training must be submitted to the COSH in writing and accompanied by a copy of a current certification(s) or documentation of comparable prior training. A written response will be provided to all training equivalency approval requests.

The Chief, Environmental Protection must ensure the development of training-for-trainer (T4T) programs for environmental and safety compliance staff that include:

- Hazardous waste management
- Universal waste management
- Used oil management
- Underground storage tanks (USTs)
- Emergency Planning and Community Right-to-Know Act (EPCRA)
- Emergency spill plans
- Clean Air Act (CAA)

Safety staff complete the T4T classes outlined above and provide training at their duty stations. Safety staff must address state and local regulations, as well as the institution's specific requirements as part of their training.

a. **Safety Administrators (SA).** All SAs must complete the following training:

- Advanced Safety Management, SFT-0340-BXX
- Environmental Compliance T4T, to include the following:
 - Safety, T4T, Clean Air Act – BOP, SFT-0501-BXX
 - Safety, T4T, EPCRA – BOP, SFT-0502-BXX
 - Safety, T4T, Hazardous Waste Management – BOP, SFT-0503-BXX
 - Safety, T4T, Oil Management – BOP, SFT-0505-BXX
 - Safety, T4T, Emergency Response – BOP, SFT-0506-BXX
 - Safety, T4T, Underground Storage Tank – BOP, SFT-0507-BXX
 - Safety, T4T, Universal Waste Management – BOP, SFT-0508-BXX
- Waste Stream Determination, SFT-0509-GXX
- Department of Transportation (DOT) Hazardous Materials Transportation, SFT-0510-BXX
- **Additional Training.** If not previously completed, new SAs must complete all the courses for new Safety Specialists as identified in subsection c. of this section.

b. **Environmental Protection Specialist (EPS).** If not previously completed, each new EPS will complete the following training:

- **Environmental Compliance.** Environmental Compliance Boot Camp, SFT-0500-VXX
 - CAA
 - Ozone Depleting Substances (ODS)
 - Air Emissions Management
 - National Ambient Air Quality Standards (NAAQS)
 - Title V Permitting Program
 - New Source Performance Standards (NSPS)
 - Clean Water Act (CWA)
 - National Pollutant Discharge Elimination System (NPDES)
 - Spill Prevention, Control, and Countermeasures (SPCC) Plan

- Storm Water Pollution Prevention Plan (SWPPP)
- Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA)
- EPCRA
- Endangered Species Act (ESA)
- Resource Conservation and Recovery Act (RCRA)
 - Solid Waste
 - Hazardous Waste Management
 - Universal Waste Management
 - USTs
 - Used Oil Management
- Toxic Substances Control Act (TSCA)
- Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA)
- **Environmental Compliance T4Ts**
 - Safety, T4T, Clean Air Act – BOP, SFT-0501-BXX
 - Safety, T4T, EPCRA – BOP, SFT-0502-BXX
 - Safety, T4T, Hazardous Waste Management – BOP, SFT-0503-BXX
 - Safety, T4T, Oil Management – BOP, SFT-0505-BXX
 - Safety, T4T, Emergency Response – BOP, SFT-0506-BXX
 - Safety, T4T, Underground Storage Tank – BOP, SFT-0507-BXX
 - Safety, T4T, Universal Waste Management – BOP, SFT-0508-BXX
- **Waste Stream Determination** – SFT-0509-GXX
- **Department of Transportation (DOT) Hazardous Materials Transportation** – SFT-0510-BXX

c. **Safety Specialist.** If not previously completed, each new Safety Specialist will complete the following training:

- **Environmental Compliance:** Environmental Compliance Boot Camp, SFT-0500-VXX, covering the following topics:
 - CAA
 - ODS
 - Air Emissions Management
 - NAAQS
 - Title V Permitting Program
 - NSPS
 - CWA
 - NPDES
 - SPCC
 - SWPPP
 - CERCLA
 - EPCRA

- ESA
- RCRA
 - Solid Waste
 - Hazardous Waste Management
 - Universal Waste Management
 - USTs
 - Used Oil Management
- TSCA
- FIFRA
- **Environmental Compliance T4Ts:**
 - Safety, T4T, Clean Air Act – BOP, SFT-0501-BXX
 - Safety, T4T, EPCRA – BOP, SFT-0502-BXX
 - Safety, T4T, Hazardous Waste Management – BOP, SFT-0503-BXX
 - Safety, T4T, Oil Management – BOP, SFT-0505-BXX
 - Safety, T4T, Emergency Response – BOP, SFT-0506-BXX
 - Safety, T4T, Underground Storage Tank – BOP, SFT-0507-BXX
 - Safety, T4T, Universal Waste Management – BOP, SFT-0508-BXX

d. **Institution Hazardous Waste Storage Site Coordinator (HWSSC)** designees will complete the following training program prior to assuming their duties. The type of additional training required for the HWSSC depends on the hazardous waste generator status of the institution.

- **Large Quantity Generator (LQG) of Hazardous Waste**
 - Department of Transportation (DOT) Hazardous Materials Transportation, SFT-0510-BXX
 - Bureau's hazardous waste requirements
 - Emergency spill requirements, including:
 - In the event of a fire, call the fire department or attempt to extinguish it using a fire extinguisher.
 - In the event of a spill, contain the flow of hazardous waste to the extent possible, and as soon as is practicable, clean up the hazardous waste and any contaminated materials or soil.
 - In the event of a fire, explosion, or other release that could threaten human health outside the facility or when the Response Coordinator has knowledge that a spill has reached surface water, the Response Coordinator must immediately notify the National Response Center utilizing their 24-hour toll-free number, 800-424-8802. The report must include:
 - the name, address, and EPA Identification Number of the generator
 - date, time, and type of incident (e.g., spill or fire)
 - quantity and type of hazardous waste involved in the incident
 - extent of injuries, if any

- estimated quantity and disposition of recovered materials, if any
 - Safety, T4T, Hazardous Waste Management – BOP, SFT-0503-BXX
 - Federal and state hazardous waste labeling, handling, and storage requirements
 - Safety, T4T, Emergency Response – BOP, SFT-0506-BXX
- **Small Quantity Generator (SQG) of Hazardous Waste**
 - Department of Transportation (DOT) Hazardous Materials Transportation, SFT-0510-BXX
 - Bureau’s hazardous waste requirements
 - Safety, T4T, Hazardous Waste Management – BOP, SFT-0503-BXX
 - Federal and state hazardous waste labeling, handling, and storage requirements.
 - Safety, T4T, Emergency Response – BOP, SFT-0506-BXX
- **Very Small Quantity Generator (VSQG) of Hazardous Waste**
 - Department of Transportation (DOT) Hazardous Materials Transportation, SFT-0510-BXX
 - Bureau’s hazardous waste requirements
 - Safety, T4T, Hazardous Waste Management – BOP, SFT-0503-BXX
 - Federal and state hazardous waste labeling, handling, and storage requirements
 - Safety, T4T, Emergency Response – BOP, SFT-0506-BXX

e. **Safety Administrator (SA) Trainee.** SA Trainees must complete the following training:

- **Environmental Compliance T4Ts:**
 - Safety, T4T, Clean Air Act – BOP, SFT-0501-BXX
 - Safety, T4T, EPCRA – BOP, SFT-0502-BXX
 - Safety, T4T, Hazardous Waste Management – BOP, SFT-0503-BXX
 - Safety, T4T, Oil Management – BOP, SFT-0505-BXX
 - Safety, T4T, Emergency Response – BOP, SFT-0506-BXX
 - Safety, T4T, Underground Storage Tank – BOP, SFT-0507-BXX
 - Safety, T4T, Universal Waste Management – BOP, SFT-0508-BXX
- **Waste Stream Determination** – SFT-0509-GXX
- **Department of Transportation (DOT) Hazardous Materials Transportation** – SFT-0510-BXX
- **Additional Training.** If not previously completed, SA Trainees must complete all the courses identified for new Safety Specialists.

f. **Petroleum, Oil, and Lubricant (POL) Handling Personnel.** Personnel tasked with the handling and management of POLs must complete the following training:

- Safety, T4T, Oil Management – BOP, SFT-0505-BXX
- Institution SPCC plan training requirements, annually, if applicable

g. **Hazardous Waste Handling Personnel.** Personnel tasked with the handling of hazardous waste must complete the following training:

- Safety, T4T, Hazardous Waste Management – BOP, SFT-0503-BXX
- Any additional state requirements

4. GENERAL PERMITTING REQUIREMENTS

Where applicable, institutions must obtain institution-wide permits (NPDES, hazardous waste, air emissions, etc.).

In addition, a single EPA hazardous waste identification number must be obtained for contiguous facilities, including UNICOR operations, that are small or large quantity generators of hazardous waste. If required by the state or determined to be preferential, very small quantity generators of hazardous waste will also obtain EPA hazardous waste identification numbers.

5. INSTITUTIONAL ENVIRONMENTAL COMMITTEE

Institution Environmental Committee Membership. The Institution Environmental Management Committee must include department heads (including the SA, Facilities Manager, Food Service Administrator, Health Services Administrator, Business Administrator) and UNICOR representation.

The SA must chair the committee and designate a recorder to prepare minutes.

The committee must meet quarterly. The meeting may be held in conjunction with the Central Safety Committee quarterly meeting. At a minimum, the following topics must be reviewed and/or addressed:

- All environmental incidents
- All regulatory visits, whether external or internal
- Changes to environmentally related institution activities, services, and products
- New regulations impacting institution environmental compliance
- Annually, at a minimum, establish institution regulatory focus based on National Priorities
- Known institution environmental regulatory deficiencies (e.g., NOVs, monthly reports, etc.)
- Corrective actions taken regarding National Priorities and environmental regulatory deficiencies
- Necessary and completed environmental training
- Operational/program review reports

6. CONSTRUCTION AND RENOVATION PROJECTS

a. **Plan Review.** Prior to the start of new projects, plans for renovations, alterations, additions,

and new construction must be approved by the institution SA. The SA's review focuses on compliance with the environmental protection requirements in federal, state, and local regulations and Bureau policy.

Plans determined to be beyond the scope of the SA's expertise must be referred to the RSA and, if necessary, the Chief, Environmental Protection and COSH.

b. **Pre-Construction Meetings.** An OSHD representative must attend all pre-construction and job progress meetings to advise project staff on environmental protection issues, including obtaining required permits.

c. **Monitoring.** The SA must monitor construction projects to ensure compliance with storm water, air permitting, and any additional environmental requirements.

d. **Finalization.** On completion of construction projects, the SA must ensure all appropriate environmental permits were obtained and provided to the institution.

e. **UNICOR.** Plans for modifications to UNICOR operations and facilities must utilize the established OSHB checklist process prior to beginning operations. The SA will assist UNICOR in completing the checklist, as necessary. The completed checklist must be submitted to the OSHB, through the Industrial Hygienist, for a simultaneous review and approval by environmental, fire, and safety.

Changes to UNICOR operations must be reviewed and approved by the COSH.

7. EXTERNAL AGENCY COMMUNICATION

a. **Notification.** The SA ensures notification is made to the Chief, Environmental Protection section copying the Warden, Regional Director, and RSA on the communication when:

- An outside visit or inspection related to environmental protection is scheduled and/or conducted at their institution.
- There are EPA and/or state complaints.
- There are EPA and/or state regulatory inquiries.
- There are environmental spills.

b. **Reporting.** The SA must complete a Record of Contact (ROC) for all non-written external agency communication. A copy of any report (i.e., ROC, email, or hard-copy letter) must be forwarded to the COSH, RSA, and Chief, Environmental Protection within 48 hours of receipt.

8. CENTRAL OFFICE TECHNICAL ASSISTANCE VISITS

Requests for a technical assistance visit to address environmental protection issues must be submitted to the AD, HSD from the Warden, through the RD. Additionally, the Environmental Protection Section will conduct technical assistance visits based on perceived need, as funding allows.

9. ENVIRONMENTAL INCIDENT REPORTING

The Warden and SA must be immediately notified of all environmental incidents that may result in a NOV. The SA must notify the following within eight hours upon becoming aware of the incident:

- COSH
- Regional Director
- RSA
- Chief, Environmental Protection

10. PLUMBING

Design, construction, renovations, and maintenance of an institution plumbing system must meet applicable plumbing codes.

Backflow Prevention. Backflow prevention devices or assemblies must be installed in the potable water supply to prevent pollution or contamination from cross-connections, in accordance with federal, state, and local regulations. Each cross-connection will require a different type of backflow prevention device, appropriate to the degree of hazard, as dictated by state and local regulations. Non-testable backflow preventers will be installed wherever there is a low pollution hazard from the potential for contaminants to enter the drinking water system (e.g., threaded hose bibs, faucets, and sprayers with rings). If state regulations specify what constitutes a low pollution hazard, those regulations will be applied.

If there is no state or local regulatory guidance as to the type of backflow prevention device to use with varying degrees of hazard, default to the International Plumbing Code, International Code Council.

Backflow prevention assemblies must be tested by a certified tester at installation, repair, or relocation, and at least annually thereafter. Inspection is documented using a state-approved form. If a state form is not mandated, use the form provided by NFPA 25.

Annually, the SA reviews backflow assembly testing records to ensure each assembly was tested by a certified tester in accordance with federal, state, and local regulations.

11. WATER

Institution water used for drinking, sanitation, hygiene, cooking, ice making, and all other health and personnel needs must meet the National Primary Drinking Water Standards, per 40 CFR 141. Non-potable uses of water such as firefighting and cleaning of outdoor premises must be free from chemical, fecal matter, coliform, or other substances at levels that may create a hazard for staff, inmates, or visitors.

All institutions must maintain a current and accurate diagram of their potable and non-potable water distribution system. The water distribution system must be updated within 90 days of the completion of any diagrammatic changes to the system, excluding work such as repair and replacement of existing piping. Each institution must, by May 1 of every year, ensure it has a written program for water management and safety that reviews and incorporates all maintenance activities and changes to the water distribution system throughout the previous year. "Institution" refers to each individual institution. For example, if a location has a USP and a Camp, both institutions must have institution-specific written programs. Institution water system diagrams and written programs must be developed by the Facilities Manager, with the assistance of the SA, and reviewed by both every five years. Five years worth of diagrams and records must be maintained, to include inactive records. Program operation and maintenance is the responsibility of the Facilities Manager.

In the event an institution is required to provide water samples, they will be collected in accordance with federal, state, and local regulations. A state-certified laboratory must perform the analysis.

The written program must include:

- All reports and notifications for the previous five years from the institution's water supplier(s).
- Any required sanitary surveys and sampling protocols or other regulatory documentation, if the institution treats its drinking water. In general, most institutions distribute drinking water from a public water supplier without any water treatment by the institution and would be considered a consecutive water system.
- The frequency of collecting water samples.
- The respective staff positions required to collect samples, if applicable.
- The sample shipping coordination and communication procedures with the certified lab.
- Requirement to maintain all testing analysis results and provide any discrepancies, reported concerns, or potential NOV's to applicable individuals (i.e. Facilities Manager; appropriate institution Executive Staff; Chief, Environmental Protection).

The most updated version of the lead-line survey, to include notation of any distribution system changes made in the previous year.

Ensure staff have all required certifications for water collection and maintenance of the water system prior to the performance of any such tasks.

12. WASTEWATER DISCHARGES

- a. **Publicly Owned Sewage Treatment.** Since each institution is under the jurisdiction of a different water management authority, the SA must ensure the institution's sewage treatment arrangement meets local standards.
- b. **Bureau Owned Sewage Treatment.** If the institution operates an onsite sewage treatment plant, it must obtain a NPDES permit. The plant must be operated in accordance with the permit. The Facilities Manager, with assistance from the SA, must develop the program to meet permit requirements. Program operation and maintenance is the responsibility of the Facilities Manager. Annually, the SA must review the records associated with the permit.

13. INDUSTRIAL WASTEWATER

Industrial wastewater must not be discharged unless the proper permits are obtained from federal, state, or local authorities.

- a. **Point Source Discharge.** Point-source industrial wastewater discharges into a storm sewer, ditch, or other conveyance require either NPDES or a state discharge permit. Example: Discharging vehicle wash rack wastewater into a ditch.
- b. **Publicly Owned Treatment Works (POTW).** Discharges into a POTW require local or state permits or must meet certain regulatory requirements. Example: Wastewater discharged from a spray booth metal pretreatment process may require a state or local permit to discharge, but dental clinic waste discharges may be addressed in a specific regulation or code requiring installation and maintenance of a mercury trap/filter system.

All discharges, excluding domestic sewage, must be communicated to the POTW to ensure they are in compliance with local pretreatment standards. Department heads must provide the SA the chemical name and constituents, volume discharged, and frequency discharged from the pertinent departments and relay the information to the POTW. All new discharges must be communicated to the POTW prior to discharge. Communications regarding these discharges must be documented.

14. SOLID WASTE DISPOSAL

Refuse includes garbage, rubbish, and other putrescible and non-putrescible solid waste, except for solid and liquid waste discharged into the institution sanitary sewer system. Refuse must be

collected and removed as often as necessary to maintain sanitary conditions and avoid creating health hazards.

a. **Recycling.** Recycling rates must be tracked by the institution department running the recycling program and submitted to the SA for quarterly submission to the Chief, Environmental Protection, in accordance with DOJ data call requirements.

b. **Open Dumping.** Open dumping of solid waste is prohibited. Recyclable materials may be accumulated on site but must not be speculatively accumulated, in accordance with 40 CFR 261.1(c)(8). Items kept in the boneyard must be stored as though they have value.

c. **Transport of Solid Waste.** Facilities that transport solid waste to a landfill or other disposal site must have a written program approved by the Warden. The Facilities Manager must develop the program, which complies with 40 CFR 243.202 and includes:

- Identification of local, state, and federal regulations.
- Procedural guidance for compliance.
- Solid waste transport permit, if required by state or local regulation.
- Method for tracking the pounds of solid waste disposed via landfill, weight tickets from the landfill are preferred.

15. HAZARDOUS WASTE GENERATION, STORAGE, AND DISPOSAL

a. **Hazardous Waste Determination.** The SA, in conjunction with each department head, must perform an institution-wide hazardous waste determination for each waste stream generated in the institution using the waste stream determination guidance provided by the Environmental Protection Section. The documented waste stream determination must be kept by SA. The waste stream determination must be updated annually, with department heads completing the Annual Waste Stream Verification/Certification form for their department and providing it to the SA. Each new waste stream generated after the initial determination must be evaluated and documented. All required forms, as detailed in the waste stream determination process, are located on the Environmental Compliance page of the Bureau's intranet site.

b. **Hazardous Waste Handling, Labeling, and Storage.** The department head or factory manager must ensure proper handling, labeling, and storage of waste generated by their department or factory. Department heads and factory managers must ensure communication with the HWSSC and the timely transfer of hazardous waste to the storage site.

All hazardous waste generated by the institution must be disposed of through the institution's HWSSC. The HWSSC must track all shipments and complete a Uniform Hazardous Waste Manifest or electronic manifest for each shipment, if required.

c. **Hazardous Waste Pharmaceuticals.** Hazardous waste pharmaceuticals must be managed in accordance with applicable federal and state regulations, as well as Bureau policy, to include at a minimum:

- Creditable pharmaceuticals may be sent to a reverse distributor, if there is a reasonable expectation of the pharmaceutical being lawfully used for its intended purpose or reclaimed.
- Sewer disposal of hazardous waste pharmaceuticals is prohibited.
- Hazardous waste pharmaceuticals must be stored in closed containers.
- Acute and non-acute hazardous waste pharmaceuticals must be stored in separate, labeled containers.
- Non-creditable pharmaceuticals must be sent to a hazardous waste transport, storage, and disposal facility using a hazardous waste manifest transporter and hazardous waste manifest.
- A hazardous waste generation log must be maintained.

Additionally, if the state has adopted 40 CFR 266 Subpart P, the following must be implemented:

- Applicable institutions must submit the one-time notification that they are operating under 40 CFR 266 Subpart P. This must be completed by using the EPA Form 8700-12, Site Identification Form.
- Acute and non-acute hazardous waste pharmaceuticals may be stored in a single closed container.
- Non-creditable hazardous waste pharmaceuticals must be stored in a closed container labeled “Hazardous Waste Pharmaceuticals” with an accumulation time limit of one year.
- “PHARMS” is the waste code to be used on the hazardous waste manifest.

d. **Hazardous Waste Training.** The department head or factory manager must ensure training addressing the following topics is provided for all personnel handling hazardous waste:

- Applicable federal and state regulatory requirements
- Bureau hazardous waste requirements
- Institution-specific hazardous waste handling requirements
- Emergency spill response

Training documentation will be maintained within the Safety Department.

e. **HWSSC.** The Warden must appoint a department head from the department or factory that has the potential to generate the most hazardous waste as a HWSSC. The Warden must also appoint a secondary department head HWSSC to ensure coverage if the primary HWSSC is out of the institution. The appointments must be documented and maintained within the Safety Department.

The HWSSC must ensure proper labeling, handling, storage, manifesting, placarding, and pickup of waste from the hazardous waste storage site for shipment. The HWSSC must ensure hazardous waste is removed from the institution within the generator storage time limits. The more stringent of federal and state storage limits apply. The HWSSC must ensure all disposal activities meet federal, state, and Bureau requirements.

f. **Hazardous Waste Storage Site (HWSS).** HWSSs must meet the following requirements:

- Located away from high-traffic areas
- Enclosed on all sides, adequately ventilated, and equipped with secondary containment
- Entrances secured to prevent unauthorized entrance and posted with a sign reading “Danger – Unauthorized Personnel Keep Out,” as well as any required state and local postings
- Equipped with adequate fire extinguishers outside of the location
- Equipped with adequate absorbent materials for accidental spills
- Equipped with access to an eyewash station if the waste is corrosive
- Exterior is posted with name and telephone number of the HWSSC; location of fire extinguishers, spill equipment, and fire alarm; and telephone number of the fire department
- Used only for the storage of hazardous waste and associated spill-absorbent materials
- Any additional state and local hazardous waste storage requirements

There is no requirement for this to be a separate building. A designated flammable storage cabinet, with the proper labeling outlined above is sufficient.

g. **HWSS Inspection.** Each week, or more frequently if the generator status requires, the HWSSC must inspect the site and stored waste containers for integrity, corrosion, leaks, and deterioration according to industry standards. An inspection log must be kept with the HWSS.

Each month, a Safety staff member must inspect the hazardous waste storage site and any satellite storage sites for proper storage, signs, labeling, manifesting, and record keeping. Discrepancies must be reported in the monthly safety and environmental inspection report to the Warden. All recurring discrepancies must be presented at the Institution Environmental Management Committee for corrective and preventative action.

The SA must perform an annual review of the institution’s hazardous waste program. The mandatory Hazardous Waste Checklist, found on the Environmental Compliance page of the Bureau’s intranet site, is used to document the review. Documentation must be kept by the OSHD for at least four years.

h. **Tritium Exit Signs.** Tritium exit signs must be disposed in accordance with United States Nuclear Regulatory Commission (NRC) regulations. Tritium exit signs must be packaged, placard, and accompanied with a NRC Form 540, Uniform Low-Level Radioactive Waste Manifest – Shipping Paper, in accordance with DOT regulations. The signs must be transferred to a specific licensee, typically the manufacturer or distributor. Within 30 days of disposal, the SA must file a report with the NRC and their respective state that includes:

- Device manufacturer’s or distributor’s name, model number, and serial number
- Name, address, and license of the person receiving the device
- Date of transfer

Per 10 CFR 31.5(c)(3), reports must be sent to:

Director, Office of Nuclear Material Safety and Safeguards
ATTN: GLTS
U.S. Nuclear Regulatory Commission
Washington, D.C. 20555-0001

i. **Lead Contaminated Rags.** A waste determination must be conducted for all potentially lead-contaminated rags. Rags exceeding the lead hazardous waste threshold must be disposed of as hazardous waste. Rags must not be laundered on site.

16. UNIVERSAL WASTE GENERATION, STORAGE, AND DISPOSAL

The following must be managed, labeled, stored, and disposed of as universal waste:

- lamps: fluorescent, including green-tip fluorescent, high intensity discharge, neon, mercury vapor, high pressure sodium, metal halide
- batteries designed to receive, store, and deliver electricity
 - exception: lead-acid batteries handled and reclaimed under 40 CFR 266.80 and alkaline batteries, unless otherwise specified by state regulations
- mercury-containing equipment (e.g., thermostats, thermometers)
- pesticides, including unused commercial products and waste
- aerosol cans
 - damaged or leaking cans must be packaged according to state-specific waste requirements
- state specified universal wastes

a. **Universal Waste Survey.** The SA, with assistance from each department head, must survey the institution to identify and document universal waste streams. This survey must be incorporated in the institution waste stream determination. The survey must be updated annually, as part of the institution waste stream determination update.

b. **Universal Waste Handling, Storage, and Disposal.** Each department or factory that generates universal waste is responsible for handling, storage, and disposal. Documentation and generation volumes must be maintained by the SA.

Small Quantity Handlers (SQHs) of universal waste may accumulate less than 11,000 pounds on site at any one time. SQHs must dispose of the waste within one year and provide federal and state-specific training.

Large Quantity Handlers (LQHs) of universal waste may accumulate 11,000 pounds or more on site at one time. LQHs must obtain an EPA identification number, dispose of the waste within one year, keep shipping records, and provide training addressing staff responsibility, federal, and state-specific requirements.

In addition, the SA must identify state universal waste regulations that may be more stringent than federal, include other waste materials, as well as any differences in inspection requirements.

c. **Crushing Fluorescent Lamps.** Crushing fluorescent lamps is prohibited unless the state accepts crushed lamps as universal waste. Crushing equipment must be maintained according to state and manufacturer regulations. A waste determination must be conducted on filters associated with crushing equipment to ensure proper disposal.

d. **Universal Waste Inspections.** Monthly, an OSHD staff member must perform an institution-wide inspection of universal waste handling, storage, and recordkeeping. Discrepancies must be reported in the monthly safety and environmental report. All recurring discrepancies must be presented at the Institution Environmental Management Committee meeting for corrective and preventative action.

The SA must conduct an annual universal waste review using the mandatory Universal Waste Checklist, found on the Environmental Compliance page of the Bureau's intranet site. Documentation must be kept by the OSHD for at least four years.

17. MEDICAL WASTE GENERATION, STORAGE, AND DISPOSAL

Medical waste must be handled and stored in accordance with state and local regulations. OSHD staff must oversee the DOT Hazardous Materials training of Health Services staff responsible for signing medical waste disposal manifests.

18. USED OIL GENERATION, STORAGE, AND DISPOSAL

Used oil must be handled and stored in accordance with federal and state regulations. The department or factory that generates used oil is responsible for handling, storage, and recycling.

Department heads must ensure all personnel handling used oil have received used oil handling training.

Used oil containers must be kept secure and closed to prevent the disposal of unauthorized liquids within the containers.

Passive secondary containment of containers is required if an institution is a SPCC plan regulated facility and container has a capacity of 55 gallons or greater, or is required by state regulations.

Used oil generated by Bureau facilities must be recycled by a registered used oil contractor or used onsite by an approved burner. Land disposal is prohibited.

a. **Used Oil Filters.** If allowed by the state, used oil filters may be recycled as solid metal if the filter is hot-drained and not terneplated.

b. **Oily Rags.** Oily rags that are not dripping and are not potentially lead-contaminated may be disposed of via solid waste. They must be removed from the facility nightly and placed in an outdoor dumpster. Oily rags must not be laundered onsite; however, a rag service is permissible.

c. **Used Oil Inspections.** Monthly, the SA must ensure each area that generates used oil is inspected. Discrepancies must be reported in the monthly safety and environmental report. All recurring discrepancies must be presented at the Institution Environmental Management Committee meeting for corrective and preventative action.

Annually, the SA reviews the institution used oil program, using the mandatory Used Oil Checklist, found on the Environmental Compliance page of the Bureau's intranet site. Documentation must be kept by the OSHD for at least four years.

19. ABOVEGROUND STORAGE TANK (AST) MANAGEMENT

The SA, with assistance from the Facilities Manager, must survey the institution to identify ASTs, collecting the following information for each:

- Location
- Product stored in the AST
- Storage capacity, shell capacity denoted in gallons
- Description of secondary containment and leak detection equipment
- Maintenance and calibration requirements specified by the manufacturer
- Tank registration and operating permits required by the state

Survey results are kept permanently in the Facilities Department and OSHD and updated, as required.

- a. **ASTs Not in Use.** ASTs no longer in use must be drained, capped, signed, and closed in accordance with federal, state, and local regulations.
- b. **AST Training.** The SA, with assistance from the respective department head that operates an AST, must identify state regulatory requirements.

The SA, with the assistance of the Facilities Manager, must develop AST training addressing, at a minimum:

- Operation and maintenance of equipment to prevent discharges
- Discharge procedure protocols
- Applicable pollution control laws, rules, and regulations
- General facility operations
- Contents of the institution's SPCC plan, as specified within the SPCC plan
- Location of institution spill response materials

OSHD staff must address state and local AST regulations and SPCC plan requirements within the training.

- c. **AST Maintenance and Inspection.** The Facilities Manager must input AST maintenance and inspections requirements, per manufacturer, state, and SPCC requirements, into the computerized maintenance system and ensure maintenance is performed. The list of required inspection points must reflect those required in the SPCC plan. Documentation must be maintained for three years.

Monthly, the SA must ensure an institution-wide AST inspection is conducted. If the facility has a SPCC plan, inspections are conducted to meet SPCC requirements, using the checklists included within the plan. The checklists may be entered into the computerized maintenance system. Uncorrected discrepancies are reported in the monthly safety and environmental report. All recurring discrepancies must be presented at the Institution Environmental Management Committee meeting for corrective and preventative action.

Annually, the SA must review the institution AST program using the mandatory AST Checklist, found on the Environmental Compliance page of the Bureau's intranet site. Documentation must be kept by the OSHD for at least four years.

20. UNDERGROUND STORAGE TANK (UST) MANAGEMENT

- a. **UST Survey.** The SA, with assistance from the Facilities Manager, must conduct an

institution survey to document:

- Locations
- Product stored in UST
- Storage capacity, shell capacity denoted in gallons
- Date of each tank installation
- Tank and associated piping construction material
- Types of leak detection and spill control systems installed
- Maintenance and calibration requirements specified by the manufacturer
- Current tank registration and operating permits required by the state
- Status of all permit requirements and associated permit numbers

Results of the survey must be kept permanently in the Facilities Department and OSHD and updated as required.

b. **UST Training.** The SA, with assistance from personnel responsible for tank management, must identify federal and state UST regulations. They must meet with personnel responsible for tank management to explain regulatory requirements.

The SA, with assistance from the Facilities Manager, must determine the appropriate level of operation training for tank management personnel. State regulations must be consulted to determine operator training level, frequency of training, and record retention requirements. Institution tank management personnel must receive appropriate level tank operator training prior to assuming tank operation responsibilities.

c. **UST Inspections.** The SA must ensure a monthly inspection of USTs is completed using federal and state regulations. Uncorrected discrepancies must be reported in the monthly safety and environmental inspection report. Discrepancy resolutions must be documented. All recurring discrepancies must be presented at the Institution Environmental Management Committee meeting for corrective and preventative action.

Annually, the SA must review UST operations using the mandatory, UST Checklist, found on the Environmental Compliance page of the Bureau's intranet site. Documentation must be kept by the OSHD for at least four years.

d. **UST Records.** If the USTs are regulated, testing, inspection, and monitoring records must be maintained in accordance with 40 CFR 280 and 281, as well as state and local requirements. If the USTs are exempt from 40 CFR 280 and 281 and regulated under the institution's SPCC plan, testing, inspection, and monitoring records must be maintained in accordance with SPCC requirements.

21. EMERGENCY PLANNING AND COMMUNITY RIGHT-TO-KNOW ACT (EPCRA)

The SA must ensure institution compliance with EPCRA.

a. **Chemical Survey.** The SA must conduct an annual institution-wide chemical survey to document:

- Hazardous chemicals, as defined by the Occupational Safety and Health Administration (OSHA) in 29 CFR 1910.1200, stored at any one time, during a given calendar year, at or above the threshold of 10,000 lbs.
- Extremely hazardous substances stored at or above the threshold planning quantity (TPQ) at any one time, as listed in Appendices A and B to Part 355, Title 40.
- Chemicals listed in the Toxic Release Inventory (TRI), as listed in 40 CFR 372.65, whose release, throughout the calendar year, is equal to or exceeds 10,000 lbs. or its threshold quantity.

b. **EPCRA Reporting.** Based on the survey results, the following actions must be taken by the Safety Administrator:

- Submission procedures for all inventory and release reports vary by state. SAs must research their state-specific submission requirements.
- Annually by March 1, submit a Tier I or Tier II report for each hazardous chemical stored at any one time during the prior calendar year at or above 10,000 lbs.
- Submit a Safety Data Sheet (SDS) for each hazardous chemical stored at or above 10,000 lbs. and for each extremely hazardous substance stored at or above the TPQ. This is a one-time submission to the local fire department.
- Annually by July 1, submit a TRI Report for each chemical whose use is equal to or exceeds 10,000 lbs. during the prior calendar year or is equal to or exceeds the specific reporting threshold for chemicals of special concern listed in 40 CFR 372.28.
- Notify the Local Emergency Planning Commission of the existence of any extremely hazardous chemicals stored at the facility at or above the TPQ.
- Notify the State Emergency Response Commission the institution is subject to emergency planning.
- Incorporate into the institution spill plan specific emergency response procedures for each extremely hazardous chemical stored at or above the TPQ.

22. OZONE-DEPLETING SUBSTANCES (ODS)

a. **ODS Survey.** The SA and Facilities Manager must conduct a survey, which is updated annually, to determine:

- Location, size (lbs. of refrigerant), and description of refrigeration and comfort-cooling units that contain refrigerant.
- Location of halon fire extinguishing units.
- Location and description of equipment containing more than 50 lbs. of Class I or Class II ODS; e.g., chillers, food storage units.
 - Roster of all current and former Heating, Ventilating, and Air Conditioning (HVAC) and motor vehicle air conditioning technicians for the previous three years, including EPA-approved technician cards.
- Location of appliance disposal records for the previous three years.
- Location of equipment maintenance records.

The survey must be kept by the Facilities Department and OSHD.

b. **ODS Training.** The SA and Safety staff must receive training covering EPA regulatory and policy requirements concerning ODS. The Chief, Environmental Protection must ensure the development of the training program.

Staff must only service equipment on which they have been trained. Copies of staff refrigerant certifications must be kept with the ODS Survey. Inmate HVAC vocational trainees may service equipment containing ODS while under the supervision of certified staff.

c. **ODS Equipment.** The Facilities Manager must ensure proper equipment is procured for the recovery or recycling of ODS that complies with 40 CFR 82.158, and equipment certifications are forwarded to the Regional EPA for recovery or recycling ODS equipment. A copy of the certification statement must be kept in the Facilities Department.

Refrigerant recovery tanks must be properly maintained according to the manufacturers' specifications and in good condition with no signs of corrosion. Recovery tanks must be hydrostatically tested every five years.

d. **Equipment Containing 50 Pounds or More of ODS.** Staff who service equipment containing 50 pounds or more of Class I or Class II ODS must maintain the following records for at least four years. In addition, a contractor who provides such services for an institution must provide these records to Facilities Department staff responsible for maintenance:

- Name of staff or contractor who performed the service
- Date and type of service performed
- Quantity of refrigerant added to the unit
- Documentation that leak calculation was conducted, if refrigerant was added

The Facilities Manager must ensure appliances containing 50 lbs. or more of a Class I or Class II ODS are repaired within 30 days or removed from service when leak rate calculations meet or exceed the following threshold:

- 10% for comfort cooling appliances
- 20% for commercial refrigeration appliances
- 30% for industrial process refrigeration

Leak rate calculation logs must be maintained by appropriate Facilities staff and annually reviewed by the SA.

e. **Appliance Disposal.** The Facilities Manager must ensure appliances with Class I or Class II refrigerant are evacuated and labeled before being discarded. A record must be kept indicating date of evacuation, type of refrigerant evacuated, description of the appliance, and the EPA-approved refrigerant reclamation facility used to dispose of the recovered refrigerant.

f. **Refrigerant Inventory.** The Facilities Manager must ensure accurate inventory records are kept for four years from date of purchase for Class I or Class II refrigerants purchased by the institution. These records must include the name of the supplier and refrigerant purchase invoices.

g. **ODS Inspection.** The SA must ensure a monthly inspection of the ODS program is done. Uncorrected discrepancies must be reported in the monthly safety and environmental report. Discrepancy resolutions must be documented. All recurring discrepancies must be presented at the Institution Environmental Management Committee meeting for corrective and preventative action.

Annually, the SA must conduct a review of refrigerant and comfort cooling equipment and associated documentation using the mandatory ODS Checklist, found on the Environmental Compliance page of the Bureau's intranet site. Documentation must be kept by the OSHD for at least four years.

23. EMERGENCY SPILL PLANS

The SA must identify the spill plan requirements for the institution. They must ensure the development and maintenance of a written spill plan that complies with federal and state requirements. The plan is kept in the OSHD, Facilities Department, and Control Center.

The SA must establish who will be responding to spills and ensure those positions are included in each plan and training is conducted for those positions.

a. **SPCC Plan.** An institution required to develop a SPCC plan may use the SPCC plan as their emergency spill plan for POL. The SPCC must conform to 40 CFR 112 and all applicable state and local regulations.

b. **SPCC Plan Training.** SPCC training must be provided annually for all oil handling personnel and include all subjects listed below, as well as those designated by the plan itself.

- Operation and maintenance of equipment to prevent discharges
- Discharge procedure protocols
- Applicable pollution control laws, rules, and regulations
- General facility operations
- Contents of the institution's SPCC plan

c. **Emergency Spill Plan Training.** The Chief, Environmental Protection must ensure the development of a training course for Safety staff to provide general spill plan requirements and responses for the staff listed below. This training does not substitute for required annual SPCC plan training for oil handling personnel or UST operator training required by the state.

- UST and AST operators
- Staff designated to respond to hazardous material spills

Safety staff must address state and local regulations and the institution's specific requirements.

d. **Spill Response Drill.** Under the direction of the SA, the institution must conduct an annual spill response drill. The drill may be live action or tabletop. Personnel who respond to hazardous materials spills must be incorporated into the drill. The drill must be documented, including any associated corrective actions.

e. **Plan Review.** Annually or any time physical changes are made to POL storage sites or containers, the SA must review the institution spill plan and, if applicable, the SPCC plan, using the mandatory Emergency Spill Plan Checklist, found on the Environmental Compliance page of the Bureau's intranet site. All plan discrepancies must be rectified within six months of identification. Uncorrected discrepancies must be reported in the monthly safety and environmental report. Discrepancy resolutions must be documented. Recurring discrepancies must be presented at the Institution Environmental Management Committee meeting for corrective and preventative action. Documentation must be kept by the OSHD for at least four years.

24. CLEAN AIR ACT (CAA)

a. **Air Emissions Inventory.** The SA and Facilities Manager must conduct an Air Emissions

Inventory to identify all air emissions and determine if air permits are required. The Air Emissions Inventory must be updated every time new emissions equipment is added or removed from the institution. Associated permits must be modified as required within the permit.

b. **Air Permits.** The Facilities Department and other affected departments must provide the SA with copies of air emissions permits held by the institution, e.g., boiler operating permits, emergency generator permits, spray booth operating permits, and drying oven emission permits. The SA must review the permits and develop a compliance checklist for each emission source. To make such determinations, the SA will research state air emissions regulations and contact state regulatory authorities.

Pre-construction and construction permits may be required for construction and renovation projects involving an air emission source (e.g., new construction or renovations involving boilers, spray booths, or emergency generators). These requirements must be reviewed during the project planning stage. New equipment cannot be purchased, and designs are not finalized until permits are obtained.

The Safety Administrator must be informed of each construction or renovation project during the early planning stage. They inspect obtained permits, unless contract language specifies the contractor obtains the permits.

If permits are obtained by the contractor, a copy of the construction permit must be provided to the SA and Facilities Manager prior to equipment installation. If required, operational permits are obtained before the equipment is turned over to the Bureau and prior to equipment startup.

Title V of the CAA requires an institution-wide air emissions permit for facilities that are major sources of regulated pollutants and synthetic minor permits for lesser sources. The air emission inventory is used to determine permit applicability and requirements. Air emissions inventories must be kept indefinitely and revised when emission sources are added or removed.

c. **Air Emissions Source Inspection.** For institutions with an air permit, OSHD staff must inspect emission sources and associated records monthly to ensure compliance. Uncorrected discrepancies must be reported in the monthly safety and environmental report. Discrepancy resolutions must be documented. Recurring discrepancies must be presented at the Institution Environmental Management Committee meeting for corrective and preventative action.

Annually, the SA must review the air emissions permit program using required checklists. Documentation must be kept by the OSHD for at least four years.

25. ENVIRONMENTAL AWARENESS/POLLUTION PREVENTION

Bureau institutions, departments, and offices must promote pollution prevention, elimination of waste, and conservation. They are required to minimize waste generation through source reduction techniques and sound recycling practices.

In general, pollution prevention and waste elimination goals should include:

- Increase the diversion of nonhazardous solid waste from landfills
- Increase the diversion of construction and demolition materials and debris from landfills
- Divert an increasing percentage of compostable and organic materials from landfills
- Reduce printing paper use
- Purchase paper with 30% or greater post-consumer content
- Reduce potable water intensity
- Minimize the acquisition, use, and disposal of hazardous chemicals
- Substitute “green” replacements for cleaning chemicals
- Expand the use of integrated pest management
- Expand the implementation of acceptable alternative chemicals and processes
- Reduce the use of chemicals with negative environmental impact

Each facility must initiate a recycling program incorporating, at a minimum, these core items, if cost-effective:

- Cardboard
- Paper
- Plastic
- Metals
- Glass
- Used oil
- Lead-acid batteries
- Tires

a. **Green Purchasing.** Each Bureau-operated institution must implement the Bureau’s Green Purchasing Program. Information on the implementation of this plan can be obtained from the institution Business Administrator.

b. **Waste Minimization.** Each Bureau-owned or -operated facility must minimize waste generation and select the best available waste management method.

c. **Storm Water Management.** Storm water pollution and runoff must be addressed at each Institution in accordance with applicable federal and state regulations. Common sources of stormwater pollution include construction runoff, industrial material exposure, and municipal

source runoff. The SA and Facilities Manager must identify storm water pollutant sources and determine whether a storm water permit is required. Firing ranges must be maintained to ensure storm water is controlled and runoff does not leave the range area.

REFERENCES

Program Statements

None Referenced

Federal Statutes

Emergency Planning and Community Right-to-Know Act (EPCRA) of 1986, *42 U.S.C. § 11001 et seq. (1986)*

Clean Air Act (CAA), *42 U.S.C. § 7401 et seq. (1990)*

Clean Water Act (CWA), *33 U.S.C. § 1251 et seq. (1972)*

Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), *42 U.S.C. § 9601 et seq. (1980)*

Endangered Species Act (ESA), *16 U.S.C. § 1531 et seq. (1973)*

Resource Conservation and Recovery Act (RCRA), *42 U.S.C. § 6901 et seq. (1976)*

Toxic Substances Control Act (TSCA), *15 U.S.C. § 2601 et seq. (1976)*

Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA), *7 U.S.C. § 136 et seq. (1947)*

Federal Regulations

Hazard Communication, 29 C.F.R. § 1910.1200

Basic Program Elements for Federal Employee Occupational Safety and Health Programs and Related Matters, 29 C.F.R. Part 1960

Standards for recovery and/or recycling equipment, 40 C.F.R. § 82.158

Oil Pollution Prevention, 40 C.F.R. Part 112

Storage and Collection of Solid Waste, 40 C.F.R. § 243

Purpose and Scope of Hazardous Waste Regulations, 40 C.F.R. § 261

Hazardous Waste Pharmaceuticals, 40 C.F.R. 266 Subpart P

Spent Lead-Acid Batteries Being Reclaimed, 40 C.F.R. § 266.80

Standards for Universal Waste Management, 40 C.F.R. Part 273

Technical Standards and Corrective Action Requirements for Owners and Operators of Underground Storage Tanks (UST), 40 C.F.R. Part 280

Approval of State Underground Storage Tank Programs, 40 C.F.R. Part 281

Emergency Planning and Notification, 40 C.F.R. Part 355

Toxic Chemical Release Reporting: Community Right-to-Know, 40 C.F.R. § 372

Other References

Exec. Order No. 12196, 3 C.F.R. 12769 (February 26, 1980).

International Code Council. (2024). *International Plumbing Code*.

DOJ, Bureau, Human Resources Management Division, Learning and Career Development Branch, *Mandatory Training Standards*.

Other Forms

EPA Form 8700-12, Site Identification Form

NRC Form 540, Uniform Low-Level Radioactive Waste Manifest – Shipping Paper

ACA Standards

Performance-Based Standards and Expected Practices for Adult Correctional Institutions (5th Edition): 5-ACI-1A-04, 5-ACI-3B-02(M), 5-ACI-3B-05(M), 5-ACI, 5D-02(M), 5-ACI-5D-03(M), 5-ACI-7A-07(M)

Performance-Based Standards and Expected Practices for Adult Local Detention Facilities (5th Edition): 5-ALDF-1A-02(M), 5-ALDF-1A-05, 5-ALDF-1A-06(M), 5-ALDF-1C-11(M), 5-ALDF-5C-11(M), 5-ALDF-7D-01, 5-ALDF-7D-02

Standards for the Administration of Correctional Agencies, 2nd Edition: 2-CO-1A-06-1, 2-CO-4D-01

Records Retention Requirements

Requirements and retention guidance for records and information applicable to this program are available in the Records and Information Disposition Schedule (RIDS) on the Bureau's intranet site.