Deficiency Status Report 1

March 21, 2007

CUPA Name: Kern County Environmental Health
Evaluation Date: December 13 and 14, 2006

Next Status Report Due: June 12, 2007

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Deficiencies and Corrective Actions

1. **Deficiency:** The CUPA is not implementing their Fee Accountability Program in accordance with the law. The CUPA does not know approximately how much revenue it needs to collect adequate fees to cover the implementation costs of the Unified Program.

   CUPA Corrective Action #1: Kern County Environmental Health Services Department provides for many programs (including CUPA). The Department manages its budget as a whole rather than operating multiple sub-budgets. See attached report for a breakdown of the CUPA portion of the Environmental Health Services Department budget.

2. **Deficiency:** The CUPA is unable to document that all facilities that have received a notice to comply citing minor violations have returned to compliance within 30 days of notification.

   CUPA Corrective Action #1: The CUPA staff has implemented the *Logging and Tracking Violations* feature of Envision by Decade Software within the FY06/07. This feature allows for businesses that have outstanding violations that have not been abated within the 30 day period, to show up on the inspector's Field Inspection System (FIS) "To Do List". The intention of the CUPA is to perform re-inspections when self certifications are not received or significant violations are identified for all outstanding violations. In addition, CUPA staff will enter the complied on date in Envision to document the return to compliance date.

3. **Deficiency:** A review of the summary reports show that not all tiered permitting facilities have been inspected at least every three years.

   CUPA Corrective Action #1: Currently the program regulates 21 tiered permitting facilities. The tiered permitting facilities in each district have been identified and will be given the highest priority because of the activity being conducted at these businesses. A special effort to monitor the completion of the required number of inspections will be implemented.

4. **Deficiency:** The CUPA is not inspecting UST facilities annually.

   CUPA Corrective Action #1: It is the CUPA's goal to complete 100% of the mandated UST routine inspection beginning with the FY6/07. The program intends to meet this goal through program planning and hiring new staff. The program has doubled the number of UST inspections in the second quarter of FY06/07 versus the first quarter of FY06/07. This increase can be partially contributed to the change in program protocol to have an inspector at every UST annual monitoring certification conducting a concurrent routine inspection.

5. **Deficiency:** The CUPA is allowing UST facilities to operate with expired operating permits.

   CUPA Corrective Action #1: UST facilities were issued permits that will expire in 2011 which meets the regulatory requirement of renewal every five years. The CUPA's program goal is to meet the inspection requirements each year and issue UST permits in accordance with the regulatory time frames

6. **Deficiency:** UST facility files reviewed either lacked plot plans, or the plot plans did not contain all the required elements. The plot plans were missing the location of ATG, sump, UDC, monitoring panel, and/or sensor.

   CUPA Corrective Action #1: The UST construction and modification permit requires plans and as-builts showing the location of equipment to be installed. Prior to each annual inspection staff are required to review the facility plan and determine compliance with existing site auxiliary equipment during the inspection. If a plot plan does not exist the owner is required to submit one within 30 days. The plot plan submitted with the annual monitoring certification will also be reviewed for accuracy and utilized to meet this requirement.

7. **Deficiency:** File research indicated that there have been numerous notices of violations for UST facilities that have not been followed up on or corrected.

   For example: Fire Station 32 and 71

   CUPA Corrective Action #1: The goal of the program is to identify all outstanding violations and to bring those facilities into compliance. Program planning and increased staffing levels will enable the program to better achieve this goal. The program has also initiated an expedited administrative enforcement order process in an effort to bring recalcitrant violators into compliance. The Director has been in contact with County Fire to resolve the issue of out of compliance fire stations.

8. **Deficiency:** The CUPA has not established a CalARP dispute resolution procedure. The only dispute processes found in the CUPA SOPs were Hazardous Waste Generator/Tiered Permitting Inspections & Fee Dispute.

   CUPA Corrective Action #1: The Kern County CUPA has formulated and adopted a Resolution Procedure. See the attached policy addressing this issue.

9. **Deficiency:** The CUPA has not met the inspection frequency for the CalARP Program. The CUPA is not inspecting all stationary sources once every three years as required by law.

   CUPA Corrective Action #1: The program recognizes the extensive time expenditure required to meet the inspection frequency. The CalARP program has conducted 32 of 60 required routine inspections during the FY06/07. The CUPA will inspect 60 CalARP facilities (33% of the total CalARP inventory) by December 14, 2007. Thereafter, the CUPA will inspect 33% of the stationary sources by the end of each fiscal year. The program experienced a loss in personnel at the beginning of the fiscal year but a replacement staff member has been trained and should be able to make up the loss in inspection time. The CUPA is evaluating the need to allocate additional personnel to the CalARP program.