



ISO 14001:2004
 OHSAS 18001:2007
 Surveillance Audit

Closing Meeting
 Brookhaven National Laboratory
 Upton, NY
 June 20, 2008



Introductions

- # Thanks!!!
- # NSF E/OSH MS Audit Team

Ken Clayman, Lead Auditor
 Briana Sprague, Team Auditor

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Closing Meeting

- # Statement of Confidentially
 - *NSF-ISR ensures that the details of all client activities are maintained in the strictest confidence and are never revealed to any outside party without written direction.*
- # Assessment criteria:
 - ISO 14001:2004
 - OHSAS 18001:2007

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Surveillance Audit Purpose

- # Continue to work with BNL as a partner to evaluate conformance to the ISO 14001:2004 requirements
- # Continue to work with BNL to evaluate conformance to the OHSAS 18001:2007 requirements (Transition Evaluation)
- # Review ongoing Maintenance of the EMS and OSHMS
- # Review progress made toward achieving objectives and targets, as well as new objectives established

Surveillance Audit Purpose

- # Determine extent and type of continual improvements achieved within the two systems
- # Make a decision regarding the ongoing registration of the EMS and OSHMS, as well as the upgrade of the OSHMS to the 2007 version of the Standard.

System Scope Statement

Confirmation of BNL EMS Scope Statement

“Facilities, experiments and operations managed by Brookhaven Science Associates at Brookhaven National Laboratory in accordance with the Environmental Management System.”

System Scope Statement

Confirmation of BNL OHSAS Scope Statement

"Health, safety risks associated with operations at Brookhaven National Laboratory in Upton, NY."

Audit Accomplishments

- # Reviewed maintenance of implemented systems and their effectiveness in a representative sample of Lab areas
- # Reviewed progress toward achievement of FY08 Objectives/Targets, completion of FY07 O/Ts in some cases
- # Confirmed that the systems have been audited and management took the time to review suitability, adequacy & effectiveness of the systems.

Recommendation 1

Based on the evidence collected and our evaluation of this evidence, the Audit Team **Recommends Continued Registration**, for the BNL EMS to ISO 14001:2004 Standard; Responses to the Corrective Action Requests issued are required within 30 days.

Recommendation 2

Based on the evidence collected and our evaluation of this evidence, the Audit Team **Recommends Continued Registration and Upgrade**, for the BNL OSHMS included in the Scope, to the OHSAS 18001:2007 specification; Response to the Corrective Action Requests issued is required within 30 days.

Continual Improvements & System Strengths

- # Management Review – Good evidence of a rigorous review of the system leading to continual improvement direction by Lab Management.
- # JRA Pamphlets in Plant Engineering – Refrigeration/ AC Group
- # Safety Management Plan in F&OD-ESHTQ – Good start to improving communications and focus on safety issues
- # Machine Shop in B815 - EENS

Continual Improvements & System Strengths

- # Project Coordination Office – Processes that include several reviews that look at ESH issues and incorporate them into building design and construction (inclusive of LEED requirements)
- # Fuel Receiving Facility near Chill Water Plant
- # Enthusiasm of support organizations for innovative pollution prevention and environmental community outreach activities.
- # Consideration of LEED Gold rating for upcoming new construction

Continual Improvements & System Strengths

- # Improvement teams have formed across organizations to identify strategies for job hazardous analysis/ESR, EHS Coordinator Team, etc.)
- # Innovative solution of using cafeteria/food waste to improve wastewater treatment.
- # Top Management commitment evident with attendance and engagement with process.

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Definitions for Findings

- # **Method of Non-Conformance (N/C) Reporting:**
 - **Major N/C:** Evidence indicates Organization did not address requirements of the standard or a significant system breakdown is present (single indication or accumulation of "minors").
 - **Minor N/C:** Evidence indicates that the issue is "isolated" and does not indicate a system breakdown.
 - **Opportunities for Improvement:** Could become N/C if not addressed & will look for system positives as well.
- # **NSF's Policy – "No Surprises" – Maintained throughout the work period.**

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Audit Results

- # 0 Major Nonconformities
- # 2 Minor Nonconformities
- # 3 Opportunities for Improvement
- # All previous NCs/CARs were successfully closed during this visit (from RA last May)

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Non-Conformities

- ✦ JRAs – Risk Factors – For Hazards evaluated to have risk that fall into the “Substantial” category (61-80), must have documented Remedial Action Program. None found for one such item in F&OD (JRA-EM-STREETVALVE-02)
- ✦ EWMSD: Procedure No. WM-SOP-425 requires that hazardous waste is transported through the radiation detection truck monitor prior to storage in Building 855. Observed PCB waste drum picked up on 6/18/08 was not transported through this detection monitor prior to storage in Building 855.

Opportunities for Improvement

- ✦ Internal Communications – OSH MS – Consider additional methods for communications of MS information (performance measures, O/Ts, etc.) to the general employee population as opposed to just upper management.

Opportunities for Improvement

- ✦ Site Wide: Consider capturing quality improvement and community involvement goals with positive ESH impacts when setting future objectives and targets.
- ✦ CMS/C-Division: Consider using a bar code reader to simplify check out of chemicals in the stock room.

Responding to Findings

- # Since the 2 nonconformities are minor, you are required to respond within 30 calendar days
- # Provide results of root cause investigation and corrective/preventive action plan(s)
- # Transmit to Lead Auditor (Ken)
- # OFIs do not require formal response – but will be reviewed if submitted.

Regulatory Compliance and E/OSH MS Audit

- # This has been an assessment of the EMS and OSHMS, not a Regulatory COMPLIANCE audit
 - The purpose was to evaluate the ability of the EMS/OSHMS to achieve regulatory compliance and deal effectively with Noncompliant issues.

Regulatory Compliance and E/OSHMS Audit

- # Regulatory Compliance and EMS/OSHMS Auditing
 - > The team is satisfied that the system covers all regulatory issues that apply to BNL's environmental aspects and/or OSH hazards
 - > The audit team has relevant legislative knowledge
 - > We evaluated if the systems achieved regulatory compliance by examining objective evidence of EMS/OSHMS activities regarding applicable regulations – monitoring/measurement, CAPAs, etc.
 - > The system activities can provide early warning of N/C re: licenses, permits & applicable legislation
 - > We are satisfied that records of N/C incidents are recorded & that actions taken in accordance with EMS/OSHMS requirements

Closing Meeting

- EMS/OSHMS Surveillance Reports
 - Full report transferred at the end of this audit period
- Corrective Action Process
 - Required on all N/C write-ups with submission to Lead Auditor within 30 calendar days (Minor NCs only)
- Surveillance/Reassessment Audits
 - Currently established as an annual (1x per year) event – Next visit will occur around the same time in June 2009 as this year (exact dates TBD). This will be a true surveillance ONLY of both systems.

Q & A

Questions?.....

Remarks by BNL...

CONGRATULATIONS!!!

Thanks for everything....
