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May 26, 2005

FILE NO.: 163.1202
REPLY TO: New York

Charles Zafonte
Multimedia Enforcement Coordinator
United States Environmental Protection Agency
Compliance Assistance & Program Support Branch
Division of Enforcement & Compliance Assistance
USEPA - Region 2
290 Broadway
New York, New York 10007

Re: St. Charles Hospital and Rehabilitation Center

On behalf of St. Charles Hospital and Rehabilitation Center ("St. Charles") located in Port Jefferson we enclose a copy of St. Charles Environmental Audit Disclosure Report (the "Report") which is based upon the audit conducted on March 4, 2005. In addition, this letter is submitted to advise the Environmental Protection Agency ("EPA") of the status of St. Charles remediation efforts concerning the findings set forth in the Report and to ask for additional time to complete certain remediation. St. Charles has already taken steps to address many of the issues, but requires the additional time to ensure that they meet the regulatory requirements. The table below corresponds to citations in the Report.

Environmental Audit Disclosure Report

St Charles Hospital & Rehabilitation Center
Port Jefferson, New York

RCRA-02-2005-0873

Submitted to:

Region 2
Environmental Protection Agency

Privileged & Confidential. Prepared at the direction of counsel, Garfunkel, Wild & Travis, P.C.

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Executive Summary

Marsh USA Inc. ("Marsh") conducted a multi-media environmental compliance audit on behalf of St. Charles Hospital & Rehabilitation Center ("St. Charles") in conformance with the Facility Audit Agreement signed between St. Charles and EPA Region 2.

Marsh was given complete access to all areas, records and files at St. Charles and full cooperation and support from all St. Charles staff who were interviewed. St. Charles management staff who retained Marsh to conduct this audit consistently demonstrated their willingness and intent for an impartial and objective evaluation. Although several findings of non-compliance are identified in this report, it is important to put them in the proper perspective.

- To conform to the required level of detail in the regulations, many subfindings are documented in the report so that clear and precise corrective actions could be identified.
- None of the findings identified in this report represent an imminent or significant hazard to the environment or to hospital staff or patients.
- Several of the findings of non-compliance result from the same root cause such as lack of effective recordkeeping and lack of written procedures to carry out certain environmental tasks.
- No evidence of willful neglect or misconduct (relative to environmental compliance) by any person at St. Charles was observed or uncovered.

Once the findings in this report are corrected, St. Charles should establish a process to monitor ongoing compliance. St. Charles should be commended for clearly demonstrating its commitment to environmental management by conducting this self-audit in cooperation with EPA Region 2. With continued emphasis on correcting the findings in this report and to maintaining compliance in the future, St. Charles will be among the environmental leaders in the healthcare industry in New York.

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Introduction

This document is the Environmental Audit Disclosure Report that includes the results of an environmental audit conducted at St. Charles by Marsh. The audit was conducted on March 3-4, 2004 under an audit agreement between EPA Region 2 and St. Charles. The scope of the audit included all buildings and facilities at the main hospital at 200 Belle Terre Road, Port Jefferson, New York as well as the following remote facilities:

Table 1 – St. Charles Remote Facilities

ST CHARLES WOMENS HEALTH SOURCE SC HOSP & REHAB

2100 Middle Country Road		Centereach NY 11720	NYR000063362 11000454864 1
Whitman Plaza, 1895 Walt Whitman Road		Melville, NY 11747	11000 45 27 362 NYR000027706
77 Route 112	7424604	Patchogue, NY 11772	? 11000 9481774
3 Technology Drive, Suite 400	7424606	East Setauket, NY 11733	? 11000 9482238
806 East Main Street		Riverhead NY 11901	7424607
3279 Veteran's Highway	NYR000091082	Ronkonkoma, NY 11779	11000 456545 3
260 Middle Country Road, Suite 208		Smithtown, NY 11787	7424609
201 IU Willets Road	7424610	Albertson, NY 11507	11001177773

The scope of the audit included an evaluation of compliance with the following federal regulatory programs applicable at St. Charles:

I. Air Programs (CAA)
II. Water Programs (CWA)
III. Pesticide Programs (FIFRA)
IV. Solid and Hazardous Waste (RCRA)
V. Hazardous Substances and Chemical, Environmental Response, Planning and Community Right-to-Know (CERCLA)
VI. Toxic Substances (TSCA)

The audit also included compliance with applicable New York State counterparts to the federal EPA environmental regulations and applicable Suffolk County laws and regulations. Audit findings identified in each of these program areas are presented in this disclosure report. Many regulatory areas were examined and determined to be not applicable at St. Charles. These are also noted in the report.

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Audit Process

Marsh conducted the audit under the direction of Kelly R McKinney, PE. Steven Galeotti, ARM of Marsh assisted him. The audit process consisted of a review of applicable environmental records and documentation for the three-year period prior to the date of the audit. Visual inspection of St. Charles operations and activities was conducted as were interviews with knowledgeable hospital staff, including the following personnel:

Gail Donheiser, RN, Risk Management
Carmella Gassick, Housekeeping
Chris Caponegro, Engineering
Harry Radenberg, Engineering
Dante Latorre, Quality
John Geary, Safety & Security
Mary Hotaling, Laboratory, GSHMC
Ronald Carella, Laboratory
Jim O'Connor, Administration
Craig L. Smestad, MD, Medical Director
Nicolette Fiore-Lopez, Nursing Administration
John Chumas, Laboratory
Laura Beck, Rehabiliation Network
Jack Kann, Pharmacy
John O'Neil, Radiology
Dan Murphy, Biomed

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Audit Findings

I. Air Programs

Air emission sources at St. Charles include three boilers. The two main boilers have heat input ratings of 20 million British Thermal Units per hour (MMBtu/hr) and operate on natural gas and No. 2 fuel oil. A smaller stand-by boiler has a heat input rating of 9 MMBtu/hr and operates on No. 2 fuel oil. Other emission sources include four emergency power generators that operate on diesel fuel. A former air emission source in the utility plant, a 670 kilowatt (kW) duel fuel engine generator with heat recovery boiler, is off-line and is reportedly planned for removal.

The main air conditioning/refrigeration units at St. Charles are four lithium bromide absorption chillers. Lithium bromide is a non-ozone depleting substances (ODS) and is not regulated by EPA under its Protection of Stratospheric Ozone standard 40 CFR Part 82. Smaller refrigeration units, one or more of which may contain greater than 50 pounds of chlorofluorocarbon (CFC) refrigerant charge, and thus would be regulated under 40 CFR 82, are present throughout the facility. St. Charles does not operate a medical/infectious waste incinerator and does not use ethylene oxide (EtO) for sterilization.

Programs	Findings
40 CFR Part 52 Sect 21 PSD	Not Applicable
40 CFR Part 60 NSPS	Not Applicable
40 CFR Part 61 NESHAPS Subpart M	No Findings
40 CFR Part 62 Subpart HHH Hospital/Medical Infectious Waste Incinerator	Not Applicable
40 CFR Part 63 National Emission Standards for Hazardous Air Pollutants	Not Applicable
40 CFR Part 68 Chemical Accident Prevention	Not Applicable
40 CFR Part 70 State Operating Permits	1 Finding
40 CFR Part 82 Protection of Stratospheric Ozone	1 Finding

Citation	Description of Non-Compliance	Corrective Action

CITATION	FINDING	CORRECTIVE ACTION	STATUS
1. 6 NYCRR Part 201, Article 19 Title V Facility Permit ID 1-4722-00557/00006	Current and valid Title V Air Facility Permit for St. Charles is unavailable. Expiration date of available permit document is 10/06/2004.	Contact New York State Department of Environmental Conservation (DEC) to determine status of current permit. Ensure current permit description does not include inactivated sources and does include all active sources at the facility.	**Corrective action complete.** St. Charles received confirmation from the DEC that the renewal application was received in 2004 and the current Title V is valid while the application is under review.
2. 40 CFR 82.156(i)	St. Charles has not determined the quantity and location of CFC containing appliances containing over 50 pounds of Class I or II refrigerants.	Conduct an inventory of on-site air conditioning and refrigeration systems and establish CFC status of each.	**Corrective action complete.** St. Charles has identified that it has no CFC containing appliances containing over 50 pounds of Class I or II refrigerants at St Charles. It is in the process of preparing an inventory of all of its appliances that contain less than 50 pounds of CFCs.
3. 40 CFR 144.11 Prohibition of unauthorized injection	Direct discharges from building equipment include non-contact cooling water from three cooling towers into the on-site discharge basin and boiler blowdown from the stand-by boiler into an on-site dry well. These discharges are prohibited by federal underground injection control program requirements.	Recommend St Charles discontinue discharges or obtain State Pollutant Discharge Elimination System (SPDES) permit approval to allow such discharges.	St. Charles has identified that is needs to get approval from the Suffolk County Sewage to allow for a change to its SPDES permit. It is in the process of discussing this issue with Town officials. St. Charles requests until July 30, 2005 to complete its discussions with the Town and submit the required paperwork to the State.

CITATION	FINDING	CORRECTIVE ACTION	STATUS
4. 40 CFR 280.20(e)(6)	USTs are not properly labeled.	Provide a conspicuously displayed and permanently affixed label to the fill ports of the USTs with the following information: • Manufacturer's statement that says "This tank conforms to 6 NYCRR Part 614" • The standard of design by which the tank was manufactured • The petroleum products and percentages of volume of petroleum additives which may be stored permanently and compatibility with the tank, or reference to a list available from the manufacturer which identifies products compatible with all tank materials • The year in which the tank was manufactured • The dimensions, design and working capacity and model number of the tank • The name of the tank manufacturer	St. Charles has identified its USTs and requests until June 30, 2005 to label them.
5. 40 CFR 261.11 and 6 NYCRR 371.1 (d) and (e)	There is no procedure to identify and segregate hazardous solid and liquid wastes from non-hazardous wastes at St. Charles. Examples of uncharacterized waste include chemotherapeutic chemicals generated in the pharmacy and waste fluorescent lamps and certain battery types in some areas of the hospital and at the Rehabilitation Centers..	Establish a procedure for identification of solid and liquid waste streams at St. Charles and segregation of RCRA hazardous from non-hazardous wastes at all generation points in the hospital.	St. Charles is in the process of identifying its waste streams and requests until July 30, 2005 to complete the process.

CITATION	FINDING	CORRECTIVE ACTION	STATUS
6. 40 CFR 261.5(e) and 6 NYCRR 371.1 (f)(l)	There is no procedure in place to accurately confirm St. Charles hazardous waste generator status.	Establish a procedure to track the total amount of hazardous waste generated on a monthly basis from all generation points throughout St. Charles. Document the monthly generation of hazardous waste to continuously monitor and confirm RCRA hazardous waste generator status.	St. Charles is in the process of revising its current procedures in order to maintain hazardous waste manifests in one location. It requests until July 30, 2005 to put this new process into place.
7. 40 CFR 261.7(b)(2) and 6 NYCRR 371.1 (h)(1)(ii)	St. Charles does not have a process in place to ensure spent aerosol containers are completely empty of hazardous wastes prior to disposal as scrap metal.	Establish a procedure to puncture and empty the contents of aerosol containers prior to disposal as scrap metal.	**Corrective action complete**. It is our understanding that the EPA considers an aerosol can that is emptied by normal methods to be disposable as scrap metal (as compared to disposed of as hazardous waste). St. Charles has established a policy that all aerosol cans must be emptied by normal means before being disposed.
8. 40 CFR 262.23(a)(3) and 6 NYCRR 372.2 (b)(3)	St. Charles does not always send manifest copies to the generating state and receiving state.	Establish a procedure to distribute copies of the manifest as specified on the manifest form, postmarked within five (5) business days of the shipment date.	St. Charles is in the process of establishing a process for ensuring proper distribution of manifest copies and requests until June 30, 2005 to complete the process.
9. 40 CFR 262.34(a)(2) and 6 NYCRR 372.2 (a)(8)(i)(a)(2)	Hazardous waste containers stored in various locations throughout St. Charles (including satellite accumulation areas (SAAs) in the laboratory, the 180-day storage area, and the waste solvent drum at the parts washer in the shop) are not properly labeled with content identity and the words "Hazardous Waste".	Affix standard Hazardous Waste labels (showing contents and hazard information) to containers storing hazardous waste. Include content descriptions (e.g., "WASTE XYLENE") on labels.	St. Charles is in the process of affixing the required labels and requests until June 15, 2005 to complete this process.
10. 40 CFR 262.34(a) and 6 NYCRR 373-1.1 (d)(1)(iii)(c) (2)	The initial date of waste accumulation are not marked on hazardous waste containers.	Establish a procedure to clearly mark the initial date of waste accumulation on all hazardous waste containers to ensure that such waste is shipped off-site within 180 days.	St. Charles is in the process of appropriately labeling all of its waste containers and requests until June 30, 2005 to complete the process.

CITATION	FINDING	CORRECTIVE ACTION	STATUS
11. 40 CFR 262.34 (d)(5)(ii) and 6 NYCRR 372.2 (a)(8)(iii)(e)	The name of the Emergency Coordinator, telephone number and emergency procedures are not posted near a telephone at the 180-day storage area.	Post a sign or placard near a telephone at the hazardous waste accumulation area indicating the name and telephone number of the Emergency Coordinator, the location of fire extinguishers and spill control material and telephone number of the fire department, if St. Charles does not have a direct alarm.	St. Charles is in the process of preparing this sign and requests until June 30, 2005 to post it.
12. 40 CFR 262.40(c) and 6 NYCRR 372.2(c)(1)(iii)	St. Charles does not maintain sufficient records of waste analyses.	Establish a procedure to maintain records of any test results, waste analyses, or other determinations in accessible files for 3 years	The Hospital is in the process of establishing a process for maintaining documentation of waste determinations and requests until July 30, 2005 to complete the process.
13. 40 CFR 262.42(a) and 6 NYCRR 372.2 (c)(3)	St Charles does not comply with exception reporting requirements.	Establish a procedure to contact the transporter and/ or the owner of the designated facility in the event St. Charles does not receive a copy of the manifest with the handwritten signature of the owner or operator of the designated facility within 35 days of the date the waste was accepted by the initial transporter to determine the status of the hazardous waste. In addition, St. Charles procedures should include submittal of Exception Reports to the EPA Regional Administrator if it has not received a copy of the manifest with the handwritten signature of the owner or operator of the designated facility within 45 days of the date the waste was accepted by the initial transporter.	The Hospital is in the process of establishing a process for contacting transporters and/or designated facilities if manifests are not obtained and requests until July 30, 2005 to complete the process.
14. 40 CFR 265.16(a)(1) and 6 NYCRR 372.2 (b)(l)	Hospital staff who sign hazardous wastes manifests have not been officially designated and trained in the proper completion of hazardous wastes manifests and their responsibilities to certify the manifest is complete and accurate.	Establish a procedure to designate specific individuals to sign hazardous wastes manifests and provide training on proper completion of the manifests as specified in Appendix 30 of 6 NYCRR 372.	As part of Item #6 above, St. Charles is in the process of revising its procedures for handling hazardous waste on manifests and requests until July 30, 2005 to complete the process.

CITATION	FINDING	CORRECTIVE ACTION	STATUS
15. 40 CFR 265.174 and 6 NYCRR 379-3.9 (a)	Hazardous waste container accumulation area at St. Charles are not inspected weekly for leaks or corrosion.	Establish a procedure to conduct and document weekly inspections of containers located in hazardous waste storage areas throughout St. Charles.	St. Charles is in the process of establishing the procedure for weekly inspection of hazardous waste containers and requests until June 20, 2005 to complete the process.
16. 40 CFR 268.7(a)(1) and 6 NYCRR 371.1 (d) and (e)	St. Charles has not determined whether its hazardous waste is restricted from land disposal.	Establish a procedure to request from transporter completed forms that confirm that disposal methods comply with Land Disposal Restriction (LDR) program requirements for all hazardous waste generated. Maintain completed LDR forms in accessible files for 3 years.	As noted above, St. Charles is in the process of establishing a process for handling its hazardous waste manifests and related documentation and requests until July 30, 2005 to complete the process
17. 40 CFR 268.7(a)(3) and 6 NYCRR 372.2 (b)(2)(i)	Written confirmation from the designed treatment storage and disposal (TSD) facility that it is authorized and has the capacity to assure St. Charles that it will properly dispose of its hazardous waste is not available.	Obtain written confirmation from the TSD facility that it has EPA/NYSDEC authorization and capacity to properly dispose of hazardous waste from St. Charles.	As noted above, St. Charles is in the process of establishing a process for handling its hazardous waste manifests and related documentation and requests until July 30, 2005 to complete the process
18. 40 CFR 268.7(a)(3) and 6 NYCRR 372.2 (b)(2)(ii)	Written confirmation from the transporter that it is authorized to deliver hazardous waste from St. Charles to the designated TSD facility is not available onsite.	Obtain written confirmation from the transporter that it has EPA/NYDEC authorization to deliver hazardous waste from St. Charles to the designated TSD facility.	As noted above, St. Charles is in the process of establishing a process for handling its hazardous waste manifests and related documentation and requests until July 30, 2005 to complete the process
19. 40 CFR 273.6	St. Charles have not determined if it is a Small Quantity Handlers of Universal Waste or Large Quantity Handlers of Universal Waste.	Establish a procedure to track the amount of universal waste accumulated on-site to continuously monitor and confirm RCRA universal waste handler status.	St. Charles is in the process of establishing procedures to track its universal waste and requests until June 30, 2005 to complete the process.
20. 40 CFR 273.14(a),6 NYCRR 374-3.1(b)	At the Rehab Centers and some areas of the Hospital, waste fluorescent lamps and waste batteries are not stored in covered containers with required labels.	Recommend St. Charles establish a procedure to accumulate universal waste in covered and properly labeled (e.g., used lamps would be labeled **"Universal Wastes – Fluorescent Lamps"**, **"Used Lamps"** or **"Waste Lamps"**) containers.	St. Charles is in the process of educating its staff regarding the proper disposal of universal waste, and requests until June 30, 2005 to complete the process.

CITATION	FINDING	CORRECTIVE ACTION	STATUS
21. 40 CFR 273.14, 6 NYCRR 374.3.2(f)(3)	St. Charles has no procedure to record the initial date of accumulation of waste batteries to ensure they are not stored onsite for greater than one year.	Mark each container of universal waste with the initial date of accumulation. Develop a procedure to ensure universal waste is transported for off-site recycling within one year of initial date of accumulation using a qualified recycler with an EPA ID number.	St. Charles is in the process of establishing a procedure for transportation of universal waste and requests until June 30, 2005 to complete the process.
22. 40 CFR 273.14, 6 NYCRR 374-3.2(g)	St. Charles staff who handle universal waste (waste lamps, batteries, and mercury) have not been trained in proper handling and emergency response procedures.	Establish a procedure to train all staff who handle universal waste in proper handling and emergency response procedures.	St. Charles is in the process of educating its staff regarding the proper disposal of universal waste, and requests until June 30, 2005 to complete the process.
23. 40 CFR 355.30	St. Charles does not maintain a comprehensive facility-wide chemical inventory that documents quantities to determine if it has extremely hazardous substances (EHSs) above the threshold planning quantities (TPQs) which would require notification to the Local Emergency Planning Committee (LEPC), the New York State Emergency Response Commission (NYSERC) and the local fire department.	▪ Establish a procedure to maintain an annual chemical inventory that aggregates all individual department chemical inventories so that total quantities of chemicals onsite can be determined in pounds. ▪ Once the inventory of chemicals is known, determine if any extremely hazardous substances (EHS) are onsite above the chemical's threshold planning quantity shown in 40 CFR 355, Appendices A&B. ▪ If any EHSs above their TPQs are at St. Charles, submit a notification to NYSERC and the LEPC also providing the name of St. Charles emergency coordinator.	St. Charles is in the process of completing its chemical inventory and requests until July 30, 2005 to complete the process.

CITATION	FINDING	CORRECTIVE ACTION	STATUS
24. 40 CFR 370.21	St. Charles has not submitted to the LEPC, the NY State Emergency Response Commission (NYSERC) and the local fire department an MSDS for each hazardous chemical or a list of hazardous chemicals present on-site in amounts greater than 10,000 pounds. Similarly submissions have not been made for any EHSs in amounts greater than 500 pounds or their TPQs, whichever is lower.	Establish a procedure to submit copies of MSDSs or a list for hazardous chemicals present in excess of 10,000 pounds or EHSs present in excess of 500 pounds or the TPQ to the LEPC, NYSERC and the local fire department. **NYSERC contact:** State Emergency Management Office 1220 Washington Avenue, Building 22 Albany, NY 12226 Attention: Mr. Lee Battles **Suffolk County LEPC contact:** Fire Rescue/Emergency Services Yaphank Avenue PO Box 127 Yaphank NY 11980 Attention: Mr. Dave Fischler (631)852-4850, (631)852-4861 fax	St. Charles is the process of submitting the MSDS sheets for hazardous chemicals exceeding the stated limits. It requests until June 30, 2005 to complete the process.
25. 40 CFR 370.25	St. Charles has not submitted to the NYS Department of Environmental Conservation, NYSERC, LEPC and the local fire department TIER Two chemical inventory reports annually by March 1st for hazardous chemicals onsite in amounts greater than 10,000 pounds or EHSs present in excess of 500 pounds or the TPQ.	Establish a procedure to prepare and submit TIER Two chemical inventory reports annually by March 1st to the DEC, LEPC, NYSERC and the local fire department for any hazardous chemicals present in excess of 10,000 pounds or any EHSs present in excess of 500 pounds or its TPQ, whichever is lower. Fuel oil is above the 10,000-pound threshold quantity and must be reported on future TIER Two reports. **NYSDEC contact:** NYS Dept of Env Conservation Division of Environmental Remediation 625 Broadway Albany, NY 12230-7020 Attention: Mr. Ed Califano	St. Charles is in the process of preparing its TIER two forms and requests until June 30, 2005 to complete the process.

CITATION	FINDING	CORRECTIVE ACTION	STATUS
26. 40 CFR 761.20	St. Charles has not conducted an inventory of on-site transformers or capacitors (e.g., cogen transformer) to determine if they contain PCBs in regulated concentrations.	Conduct an inventory of on-site transformers or capacitors and establish PCB status. Transformers manufactured prior to July 2, 1979 (or date unknown) filled with fluid oil and which PCB concentration has not been established must be assumed to be PCB transformers. Label PCB transformers, register with EPA, and inspect for integrity every 3 months. Maintain records for the life of the transformer plus 3 years. In addition, stringent disposal and recordkeeping requirements apply in the event PCB transformers are disposed.	**Corrective action complete.** St. Charles has identified that none of its transformers contain PCBs.

Please confirm that these requests for extensions are acceptable to the EPA and do not hesitate to contact me if you have any questions or concerns.

Sincerely,

Stacey L. Gulick

Stacey L. Gulick