



# REGION XII

## COUNCIL OF GOVERNMENTS

### Solid Waste Environmental Management System



#### **DMASWA Metropolitan Area Solid Waste Agency (DMASWA) 3<sup>rd</sup> Party Environmental Management System Audit (Full Audit)**

The Region XII Council of Governments (COG) Audit Team conducted a third party Environmental Management System (EMS) audit of Dubuque Metropolitan Area Solid Waste Agency (DMASWA) on September 27, 2016. This was DMASWA's seventh EMS audit. As required, this was a full audit. The Scope of the Audit may be found on page 3 on the *EMS 3rd Party Audit Results* Form. The COG Audit Team included Shelene Codner (lead auditor), Fred Kesten and Evan Sinnott. Leslie Goldsmith from the Iowa Department of Natural Resources Financial and Business Assistance Section was present to observe the audit. John Foster, Agency Administrator/EMR and Bev Wagner, Core Team Member/Education Coordinator were present and participated in the audit on behalf of DMASWA. The audit was conducted from approximately 9:30 a.m. to 1:00 p.m. at DMASWA's Landfill located at 14501 Highway 20, Dubuque, IA 52002. The Internal Audit, Objectives and Targets were received for auditor review prior to the audit and as requested by the audit team. Additional required audit documentation was prepared, organized and ready for review upon arrival.

Individual organizations that require additional technical assistance or training based on the findings of this audit should contact Leslie Goldsmith, Iowa Department of Natural Resources, (515) 725.8319, [leslie.goldsmith@dnr.iowa.gov](mailto:leslie.goldsmith@dnr.iowa.gov).

The following observations were noted during the Audit:

- DMASWA has implemented a directional sign plan. As observed by audit team members, multi-colored directional signs have been placed in key areas along the roadways at the landfill to direct incoming traffic to the proper unloading areas. Staff members reported that this has assisted in increasing productivity and turnaround times for area haulers, residents and others utilizing the services provided at the landfill.

- DMASWA's Regional Collection Center (RCC) is currently closed. As reported by staff members, DMASWA has been working with Waste Commission of Scott County in hosting Household Hazardous Waste drop off events in meeting the current needs of customers within their service area. As reported by staff members, events were held in June and September of this year. Staff members stated that they are working directly with the department in reopening the RCC.
- DMASWA has completed the Education Pavilion and accompanying educational displays. Built on one of the highest points of the landfill's footprint, the pavilion overlooks all operations taking place at the landfill, in addition to offering a unique view of outlying areas. The working displays include solar panels and a wind generator. The wind generator is utilized to operate the public address system during touring events and activities. In addition, signage within the pavilion includes an educational model detailing the various layers of a landfill cell, an aerial map designating outlying points of interest and information regarding the operation of the landfill gas flare.
- DMASWA staff members reported that an Open House event is being held at the Landfill on October 13, 2016. As stated by staff, the purpose of this event is to educate the public regarding the function of fully integrated solid waste management systems and the various services offered by DMASWA.
- DMASWA staff members reported that they've had some challenges with two objectives, specifically the Green Vision Education Objective and the Greenhouse Gas Objective. Challenges are due to the fact that a large sponsor (Trailhead Energy) outside of their fence line has dropped out of both projects. Staff reported that they are currently reassessing the respective programs and determining next steps in moving forward in these particular areas.

## EMS 3<sup>rd</sup> Party Audit Results Form

**Scope/Facility:** This was a full external audit. The scope of the External EMS Audit included all Elements. The Audit was held at the auditee's landfill facility. John Foster (Agency Administrator/EMR) and Bev Wagner (Core Team Member/ Education Coordinator) represented DMASWA.

**Auditors:** Shelene Codner (Lead Auditor), Evan Sinnott (Auditor), Fred Kesten (Auditor), Leslie Goldsmith (Observer)

**Descriptions for Finding(s):**

**Met Requirements** = Satisfied Standard fully

**Partially Met Requirements** = DNR staff will monitor progress until the next fiscal year audit when the Element will be reviewed

**Did Not Meet Requirements** = The Lead Auditor will state what is required to satisfy the Finding

**Commendable** = Went beyond the Standard with innovation, effort

**Opportunity for Improvement** = No changes are required, but are suggested

**Date:** September 27, 2016

Iowa EMS Element Number and Description		Audit Results/Findings from Internal Audit		
Number	Description	Evidence	Finding(s)	Iowa EMS Reference
1	Environmental Policy Statement	Reviewed Environmental Policy Statement and associated procedure. Interviewed EMR, Education Coordinator and other staff members.	<b>Met Requirements</b>	
2	Environmental Aspects and Impacts	Reviewed Aspects and Impacts and associated procedure. Interviewed EMR, Education Coordinator	<b>Opportunity for Improvement:</b> As reported by EMR, all staff members have input regarding Aspects and Impacts. DMSWA utilizes a logic model in determining significant activities. The logic model encompasses a limited scope in its	

Iowa EMS Element Number and Description		Audit Results/Findings from Internal Audit		
Number	Description	Evidence	Finding(s)	Iowa EMS Reference
			<p>current form. The system appears to lack objectivity and an integrated ranking methodology in identifying <i>significant</i> activities.</p> <p>While a logic model can be a helpful tool in mapping and reaching objectives and targets (following the identification of aspects and significant impacts), the model itself is not inclusive in determining what those aspects and impacts are.</p> <p>Despite the fact that the program areas selected for logic model mapping include those required by Iowa's EMS program, the limited focus of the model can result in the unintentional omission of other activities taking place within the organization's fence line.</p> <p>While the model is not inclusive in identifying all activities, it is extremely detailed in identifying targets (categorized as "activities" in logic model mapping). While multiple targets are identified within the model, they are not ranked. Therefore, it appears that equal priority is given to all targets</p>	

Iowa EMS Element Number and Description		Audit Results/Findings from Internal Audit		
Number	Description	Evidence	Finding(s)	Iowa EMS Reference
			simultaneously. This can prove challenging to those who have been tasked with the responsibility of those specific activities in implementation and accurate and timely documentation.	
3	Legal and Other Requirements	Reviewed Legal and Other documentation and associated procedure. Interviewed EMR, Education Coordinator	<b>Met Requirements</b>	
4	Objectives and Targets	Reviewed Objectives and Targets. Interviewed EMR, Education Coordinator	<p><b>Partially Met</b></p> <p>It appears that Objectives and Targets have been set in all six required component areas. However, some of the objectives and targets appear to be delayed indefinitely due to operational challenges.</p> <p>As a result this necessitates either modification or initiation of new objectives within the scope of these specific program areas. For example the Project entitled <i>CESQG (Conditionally Exempt Small Quantity Generator)</i></p>	Is continuous improvement being achieved? Iowa Code 455J.4(2) Did the organization meet Targets set? IAC 567-111.

Iowa EMS Element Number and Description		Audit Results/Findings from Internal Audit		
Number	Description	Evidence	Finding(s)	Iowa EMS Reference
			<p><i>Expansion</i> has an objective that specifically outlines expanding access to the RCC to match the facilities operating hours.</p> <p>Considering the RCC is currently nonoperational, documented objectives and targets should directly align with actual objectives and targets. As reported by staff, current objectives in this area involve working towards reopening the facility or, as an alternative, offering Household Hazardous Materials Collection events.</p> <p>In addition, the quantifiable goal of increasing the number of CESQG's utilizing the facility and the subsequent target date are no longer valid due to current operational challenges.</p> <p><b>Opportunity for Improvement</b></p> <p>Staff reported that they use a layered system of document management. Within this system each level of documentation provides more specific detail regarding individual objectives. As observed by audit team members,</p>	

Iowa EMS Element Number and Description		Audit Results/Findings from Internal Audit		
Number	Description	Evidence	Finding(s)	Iowa EMS Reference
			<p>the layered system is somewhat challenging in obtaining needed information regarding continuous improvement.</p> <p>It appears this system is challenging for staff to maintain, which is reflected in the documentation by the fact that progress, target dates and completion dates are not consistent within each of the respective layers.</p> <p>In addition, as documentation changes previous verbiage is not removed but rather stricken from the current version represented by a line drawn through the verbiage. While there is value in historical information, this practice creates a challenge in locating needed information within the current versions of the documentation.</p>	

Iowa EMS Element Number and Description		Audit Results/Findings from Internal Audit		
Number	Description	Evidence	Finding(s)	Iowa EMS Reference
5	Action Plan	Reviewed Action Plans in spreadsheet. Interviewed EMR, Education Coordinator	<b>Opportunity for Improvement</b>  While specific action plans can be identified in provided documentation, the layered documentation system creates a challenge in obtaining needed information in determining progress and completion with regard to specific action items.	
6	Key Resources and Additional Needs	Reviewed provided documentation and interviewed EMR, Education Coordinator.	<b>Met Requirements</b>	
7	Communication/Training/Awareness	Reviewed provided documentation, Interviewed EMR, Education Coordinator	<b>Met Requirements</b>	

Iowa EMS Element Number and Description		Audit Results/Findings from Internal Audit		
Number	Description	Evidence	Finding(s)	Iowa EMS Reference
8	Monitoring and Measurement	Reviewed Provided Documentation and Procedure. Interviewed EMR, Education Coordinator	<b>Met Requirements</b>	
9	Assessment	Reviewed provided Internal Audit documentation and Procedure. Interviewed EMR, Education Coordinator	<b>Met Requirements</b>	
10	Reevaluation and Modification	Reviewed provided Internal Audit documentation and Procedure. Interviewed EMR, Education Coordinator and other onsite staff.	<b>Opportunity for Improvement</b>  In onsite interviews with staff it appears that reevaluation and modification to the program is ongoing and is reflective of current operations. However, documentation didn't always provide evidence of this practice and the subsequent activities outlined through the reevaluation and modification process.	