

Multi-Media Inspection Report Castle Point VA Medical Center Wappingers Falls, NY June 21, 2022



Written by:

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ECAD-CAPSB-CAS USEPA R2

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Approved by:

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Chief - Compliance Assurance Section
ECAD-CAPSB-CAS USEPA R2

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MULTI-MEDIA INSPECTION REPORT

U.S. Environmental Protection Agency, Region 2
Enforcement and Compliance Assurance Division
290 Broadway, 21st floor
New York, New York 10007-1866

Locational Information:

Facility Name: Castle Point VA Medical Center
Facility Address: 41 Castle Point Road, Wappingers Falls, NY, 12590
Latitude & Longitude: 41.538471, -73.958478

Environmental Sensitivity Information:

Potential EJ Concerns: No (See Appendix B: EJScreen Report)
Potential Flood-Prone Area: No (See Appendix C: Flood Map)
Sole Source Aquifer: No (See Appendix D: Sole Source Aquifer Map)

Sector Information:

Federal Facility: Yes
SIC Code: 8062 (General Medical and Surgical Hospitals)
NAICS Codes: 62211(General Medical and Surgical Hospitals)

ICIS & other Program ID Codes as appropriate:

FRS: 110000603268
ICIS Air: 3602700037
RCRA: NY8360007282

Inspection Information:

Date of Inspection: June 21, 2022
Inspector(s): Erin Floto; Carlos Colombani

Facility Representative(s):

Name	Title	Phone	Email
Larry Johnson	Safety and Transportation Program Manager	(845)831-2000 ext 215469	Larry.Johnson11@va.gov
Jonathan Oelsner	Industrial Hygienist		

Corrections/Updates for EPA Databases: None.

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1. INTRODUCTION

The Region 2 Office of the Environmental Protection Agency (EPA) inspected the Castle Point Veterans Affairs Medical Center in Wappinger Falls, New York to evaluate their stationary sources and hazardous waste management programs under the Clean Air Act (CAA) and Resource Conservation and Recovery Act (RCRA), respectively.

EPA inspectors Ms. Erin Floto (CAA stationary sources) and Mr. Carlos Colombani (RCRA hazardous waste) arrived at the facility on June 21, 2022, at 10:00AM. We presented EPA credentials to Jonathan Oelsner, Industrial Hygienist, and offered in- and out-briefings and the opportunity to claim confidential business information. We were led into a small conference room where we explained the reason for the multi-media inspection (MMI) and what to expect as it was conducted. We informed them the MMI would include a visual walkthrough of their boiler room; selected emergency generators; solvent cleaning locations; hazardous waste central accumulation area (HWCAA); satellite accumulation areas (SAA); and universal waste storage area. Following the walkthrough, an MMI report will be written, and a copy provided to them. We also let them know a request for all pertinent CAA stationary sources and hazardous waste records will be emailed to them following the inspection to minimize contact due to COVID-19 precautions.

2. FACILITY TOUR

Following an in-briefing in the Safety Office and a discussion over logistics of the facility tour, it was decided that both the CAA stationary source and RCRA hazardous waste groups would visit the main hospital together to see three (3) SAAs and solvent cleaning operations. Thus, we first inspected the microbiology and histology laboratories. At the microbiology laboratory, a container storing hazardous waste was marked with several dates. The dates listed on the label were December 22, 2020; February 20, 2021; April 9, 2021; and February 17, 2022 (See Photo #0308). At the histology laboratory, a container storing hazardous waste was dated February 2, 2022 (See Photo #0309).

Following the two (2) laboratories, we visited the pharmacy SAA. A standalone locker had an 8-gallon COVIDIEN container of insulin vials labeled as hazardous waste with a date of June 3, 2019 (See Photo #0310). The facility representative stated the container was mislabeled since it was determined that the insulin vials were not hazardous waste and proceeded to remove the label from the container. All the hazardous waste containers at the SAAs were labeled with the words "hazardous waste" and a description of its content and were near or at the point of generation.

We then went as a group to the solvent cleaning operations. The facility's solvent cleaning is conducted in a sterile environment, so the doors are locked to outside access. To enter the actual cleaning space, a sterile outfit is required to be put on. The facility uses industrial washers and sinks with several different types of solvent cleaning solutions. The facility stores their solvents and cleaning agents in a closet outside of the area, so Ms. Floto was able to get photos regarding the types of products they use. The facility uses several Prolystica brand detergent and enzymatic cleaners. Additionally, they use Surgistain for stainless steel products; Intercept for a neutral pH

detergent for medical instruments; and Rapicide disinfectant using trisodium phosphate. When asked how the products are used, the two workers stated that they follow the concentration levels stated on the bottle and safety data sheets (SDS) when working with the products. There were no concerns with how the solvents were being stored.

After leaving the main hospital, the groups split up to look at the CAA stationary source and RCRA hazardous waste locations, respectively. Erin Floto was accompanied by Mr. Harris to do the CAA stationary sources portion of the inspection. Carlos Colombani was accompanied by Mr. Oelsner to do the RCRA hazardous waste portion of the inspection.

Clean Air Act Stationary Sources

The CAA stationary source group went to the Boiler Room. The facility has three dual-fired boilers. Boiler 3 is considered their “summer boiler” and was currently running at the time of the inspection. The facility representative stated that the boilers are primarily run using natural gas but due to hospital regulations, they also are oil-fired using No. 2 fuel oil that is tested monthly. The facility also may be requested to go off natural gas due to state requests.

Additionally, we visited three of the 14 emergency generators at the facility due to the sprawling campus. These generators were chosen at random. We visited the Boiler Room generator located in Building 35 (EE#59092), the generator in Building 88 (EE#61572), and the generator in Building 9 (EE#38763). The generators are fueled by low-sulfur diesel fuel. The facility provided a bill of lading confirming the sulfur percentage in the fuel is compliant with the facility’s permit.

RCRA Hazardous Waste

The RCRA hazardous waste group proceeded to visit Building 76, also known as the “Waste Shed” and/or the HWCAA, where the hazardous waste and universal waste are being stored in two (2) different rooms. At the hazardous waste room, there was one (1) container marked as hazardous waste storing alcohols and flammables that was not labeled with its accumulation start date (See Photo #0337). The HWCAA had no telephone or hand-held device that could be used to summon emergency assistance when needed. Also, there were no fire suppression capabilities (i.e., sprinkler system) present. The room did have a full spill-kit container readily available.

The universal waste room was storing two (2) boxes of used bulbs that were open (See Photo #0348). In addition, there was one (1) opened box containing broken used bulbs (See Photo #0350). Adjacent to Building 76, there was a maintenance shop storing a 55-gallon drum of used oil properly labeled.

3. RECORD REVIEW

On June 28, 2022, EPA requested, via email, records pertaining to the stationary sources and hazardous waste programs under the CAA and RCRA, respectively.

Clean Air Act Stationary Sources

For the CAA stationary source record review, EPA (Ms. Erin Floto) requested records related to the facility's boilers, emergency generators, equipment containing ozone depleting substances (ODSs), and solvent cleaners. Additionally, records were requested for recent abatement activities as a screening tool.

Boilers

VA Castle Point provided boiler tuning reports dated May 2020, August 2020, May 2021, and November 2021. The tuning in 2020 was performed by contractor A.B.L.E Company, Inc. while the 2021 tuning was conducted by contractor Caldaia Controls with the following results:

- The May 2020 tuning report noted 29 failed tests on the boilers and boiler plant equipment.
- The August 2020 tuning report noted 28 failed tests on the boilers and boiler plant equipment.
- The May 2021 tuning report stated that Caldaia Controls was unable to perform semi-annual boiler safety device testing, combustion tuning or instrumental calibration on Boiler 1 because it was offline, locked out & tagged out. Additionally, the report noted eight failed tests on Boiler 2, 10 failed tests for Boiler 3, and one failed test for other boiler plant equipment along with many deficiencies for Boilers 2 and 3.
- The November 2021 tuning report did state that Boiler 2 passed all tests and addressed the deficiencies noted in the previous May 2021 tuning report. However, Boiler 3 had six failed tests (different from the failed May 2021 tests) and five notes/comments that were deficiencies but did not rise to the level of a failed test. Moreover, there were five failed tests on other boiler plant equipment.

EPA is requesting more information on what items have been fixed or are scheduled to be repaired following the November 2021 tuning report. Please see Section 7, "Requested Information".

In addition to the tuning records, EPA requested NO_x calculations per their permit. There were no recorded exceedances in the time period requested.

Generators

The facility was able to provide the monthly run tests for all three generators, which showed that the facility had several jumps in time related to the record engine hours. For example, between 2-25-19 and 3-25-19 the facility has a discrepancy of 0.1 hour and between 5-28-19 and 6-24-19 there is a discrepancy of 0.3 hours for the generator EE#38763 in Building 9. There are other examples in all generator records given. While this is fine for a monthly log because the generator may have been used in emergency status between maintenance tests, such as a power outage, the facility must maintain a log with the reason the emergency generator is being used.

Additionally, the facility should be keeping a log of total hours run to ensure that the generator is within the maximum allowed run time (maintenance or emergency) for each unit. The facility does appear to have a March 2022 generator run time and hours ran within their NOx calculations spreadsheet. This should be done for all months. Thus, please see Section 7, “Requested Information” below for EPA’s request for 2019-2021 generator logs with emergency use justifications.

ODSs

The facility has multiple units with a refrigerant charge capacity over 50 lbs. The exact number is unclear given the information provided (Please see Section 7, “Requested Information” below). Service on all units with refrigerants are maintained by maintenance staff at the facility. The facility provided EPA certifications for the maintenance staff and there were no concerns regarding the certifications. The facility uses R410A, R22, R12, R404A, R 4082, and R134A refrigerants at the facility. EPA requested maintenance records from 2019-2021. The facility was only able to provide a handwritten log, which contained one service in 2019 (9/20/2019) and service from 4/5/2020-5/5/2020 and no additional maintenance following that entry. To confirm this is all the facility has, EPA is requesting again the 2019-2021 refrigerant maintenance records (Please see Section 7, “Requested Information” below).

Asbestos

As part of a screening, EPA requested information regarding recent asbestos abatements. The facility has had multiple recent abatements. For each abatement, the facility provided me the requested asbestos abatement reports/notifications and certifications for the workers conducting the abatement. No concerns noted with the paperwork provided.

RCRA Hazardous Waste

Hazardous Waste Manifests and Land Disposal Restrictions (June 2019 through June 2022)

The facility provided three (3) years of hazardous waste manifests alongside its land disposal restrictions. Based on the review, it appears the facility is generating hazardous waste at the rate of a small quantity generator (SQG). The following manifests were in the New York State Department of Environmental Conservation (NYSDEC) database but were not provided by the facility: 017901250 JJK and 013205418 FLE, which were shipped on March 3, 2019, and September 30, 2019, respectively.

In addition, the following table lists manifests that were provided without the designated facility owner or operator signature to ensure the hazardous waste was received.

Manifest Tracking Number	Shipped Date
012163884 FLE	shipped on 7-2-2019
012163832 FLE	shipped on 7-2-2019
017901450 JJK	shipped on 12-9-2019
017903211 JJK	shipped on 3-19-2020

019853775 JJK	shipped on 6-17-2020
019853613 JJK	shipped on 9-17-2020
019856085 JJK	shipped on 12-2-2020
019856081 JJK	shipped on 3-4-2021
019856453 JJK	shipped on 6-9-2021
016606426 FLE	shipped on 9-22-2021
016606526 FLE	shipped on 12-19-2021
016606547 FLE	shipped on 3-2022 (date illegible)
016603281 FLE	shipped on 6-16-2022

Hazardous Waste Determinations

To determine if the insulin vials that were located in the Pharmacy SAA were hazardous waste, the facility provided a spreadsheet titled “Pharmaceutical Waste Classifications”. This document lists the product name, amount stored, and its primary EPA Code that should be used when shipped. For insulin, the spreadsheet lists the following products as containing m-Cresol (a preservative with waste code D024 for its toxicity): Humalog, Lantus, Levemir, Novolin, Symlin and Apidra.

HWCAA Weekly Inspections (June 2019 through June 2022)

The facility provided three (3) years of weekly inspections pertaining to its waste storage area. Although, at the time of the inspection, there was a container of hazardous waste in the HWCAA without an accumulation start date and no fire extinguisher available, none of the checklists provided had anything listed in the “comments and areas of concern” portion of the checklists and the sections titled “container marking”, and “maintenance” did not indicate concerns found.

Personnel Training

The personnel training documents that were received appear to cover hazardous materials regulations under the Department of Transportation (DOT) and not the hazardous waste management at the facility.

4. REGULATORY CONCERNS

Based on observations made during the walkthrough of the facility and/or a review of records provided to EPA by the facility afterwards, the regulatory concerns below were identified. Note that additional information is being requested in Section 7 to complete this evaluation. Once received, a review of the requested information may uncover other concerns.

REGULATORY, STATUTORY OR PERMIT REFERENCE	FIELD OBSERVATION
RCRA – Hazardous Waste	
<u>6 NYCRR Parts 372.2(a)(8)(iii)-(v):</u> May accumulate non-acute hazardous waste on-site up to and including 180 days unless treatment, storage, and disposal facility => 200 miles away then have up to and including 270 days.	At the Pharmacy SAA, there was a COVIDIEN 8-gallon container with insulin vials dated June 3, 2019. The container was marked hazardous waste. See Photo #0310. Note: Although the facility representative stated it was not during the walkthrough, an excel sheet provided after the inspection from the pharmacy that lists EPA waste codes confirms insulin as a hazardous waste. Therefore, the facility had accumulated hazardous waste on-site for approximately 1114 days at the time of the inspection.
<u>6 NYCRR Parts 372.2(a)(8)(i)(‘b’):</u>...the waste must be removed within 3 days to a central storage area or shipped off-site and the containers must be immediately marked with the date the volume limits were met	At the Microbiology Laboratory SAA, a container of hazardous waste was marked with several dates that included December 22, 2020; February 20, 2021; April 9, 2021; and February 17, 2022. See Photo #0308. At the Histology Laboratory SAA, a container of hazardous waste was dated February 2, 2022. See Photo #0309.
<u>6 NYCRR Part 372.2 (a)(8)(iii)(‘d’) & 373-1.1 (d)(1)(iii)(‘c’)(‘2’):</u> The date on which each period of accumulation begins is clearly marked and visible for inspection on each container	At the HWCAA Building 76, the Waste Shed, a container marked hazardous waste holding alcohols and flammables was not dated with an accumulation start date. See Photo #0337.
<u>6 NYCRR Parts 372.2 (a)(8)(iii)(‘d’) and 373-3.3(c)(3) and (d):</u> Facility must be equipped with portable fire extinguishers and fire control, spill control and decontamination equipment that are tested and maintained as necessary to assure their proper operation in time of emergency unless none of the hazards posed by waste handled at the facility could require such equipment.	The HWCAA had no fire extinguishers.
<u>6 NYCRR Parts 372.2 (a)(8)(iii)(‘d’) and 373-3.3(c)(2), (d), and I(2):</u> Must have a device, such as a telephone (immediately available at the scene of operations) or a hand-held two-way radio, capable of summoning outside emergency assistance that is tested and maintained as needed to assure its proper operation in time of emergency. If there is ever just one employee on the premises while the facility is operating, the device must be immediately accessible to that employee. Exception allowed if such a device is not needed given all the hazards posed by waste handled at the facility.	There was no phone nor a hand-held device at the HWCAA to summon emergency assistance if needed.

REGULATORY, STATUTORY OR PERMIT REFERENCE	FIELD OBSERVATION
6 NYCRR Parts 372.2 (a)(8)(iii)(‘d’) and 373-3.3(c)(4): Facility must be equipped with water at adequate volume and pressure to supply water hose streams, foam producing equipment, automatic sprinklers, or water spray systems unless none of the hazards posed by the waste handled at the facility requires such water.	There were no fire suppression capabilities at the HWCAA.
6 NYCRR Parts 372.2(a)(8)(iii)(‘e’)(‘3’): Ensure that all employees are thoroughly familiar with proper waste handling and emergency procedures, relevant to their responsibilities during normal facility operations and emergencies.	The facility provided training records related to DOT’s Hazardous Materials regulations but not pertaining to hazardous waste management. Also, during the walkthrough the following observations were made that may indicate a lack of familiarity with proper waste handling and emergency procedures by employees: • At the Pharmacy SAA, a facility representative pulled off a hazardous waste label from a COVIDIEN 8-gallon container with insulin vials stating it was not hazardous waste even though later it was confirmed per an excel sheet listing EPA waste codes provided after the inspection from the pharmacy that it was. • The SAA at the Microbiology Laboratory had three (3) different accumulation start dates on the label. • The SAA at the Histology Laboratory had an accumulation date of February 2022. • The weekly inspection checklists that were provided did not list not having fire extinguishers available at the HWCAA in the comments and areas of concern section.
6 NYCRR Part 372.2(c)(1)(i): A generator must keep a copy of each complete manifest document as a record for at least three years from the date the waste was accepted by the initial transporter.	The following manifests were in NYSDEC’s database but were not provided by the facility: • 017901250 JJK shipped on 3-19-2019; and • 013205418 FLE shipped on 9-30-2019.
6 NYCRR Part 372.2(c)(1)(i): A generator must keep a copy of each complete manifest document as a record for at least three years from the date the waste was accepted by the initial transporter.	The following manifests provided by the facility were not signed by the receiving designated facility owner or operator: • 012163884 FLE shipped on 7-2-2019; • 012163832 FLE shipped on 7-2-2019; • 017901450 JJK shipped on 12-9-2019; • 017903211 JJK shipped on 3-19-2020; • 019853775 JJK shipped on 6-17-2020; • 019853613 JJK shipped on 9-17-2020; • 019856085 JJK shipped on 12-2-2020; • 019856081 JJK shipped on 3-4-2021; • 019856453 JJK shipped on 6-9-2021;

REGULATORY, STATUTORY OR PERMIT REFERENCE	FIELD OBSERVATION
	• 016606426 FLE shipped on 9-22-2021; • 016606526 FLE shipped on 12-19-2021; • 016606547 FLE shipped on 3-2022 (date illegible); and • 016603281 FLE shipped on 6-16-2022.
6 NYCRR Part 374-3.2(d)(4)(i): A small quantity handler of universal waste must contain any lamp in containers or packages that are structurally sound, adequate to prevent breakage, and compatible with the contents of the lamps. Such containers and packages must remain closed and must lack evidence of leakage, spillage or damage that could cause leakage under reasonably foreseeable conditions.	The universal waste shed had two (2) boxes of used bulbs that were open. See Photo #0348.
6 NYCRR Part 374-3.2(d)(4)(ii): A small quantity handler of universal waste must immediately clean up and place in a container any lamp that is broken and must place in a container any lamp that shows evidence of breakage, leakage, or damage that could cause the release of mercury or other hazardous constituents to the environment. Containers must be closed, structurally sound, compatible with the contents of the lamps and must lack evidence of leakage, spillage or damage that could cause leakage or releases of mercury or other hazardous constituents to the environment under reasonably foreseeable conditions.	The universal waste shed had one (1) opened box containing broken used bulbs. See Photo #0350.
CAA – Stationary Sources	
Pursuant to 40 CFR 82.166 (k) ... Owners/operators of appliances contained 50 or more pounds of refrigerant must keep servicing records, which document the date and type of service as well as the quantity of refrigerant added.	The facility appears to have missing records from 2019-2021 on refrigerant servicing records. There is only one recorded service in 2019, a month of service recorded in 2020, and no service recorded in 2021.
Pursuant to 40 CFR 60.4212 (b)... The owner or operator must keep records of the operation of the engine in emergency and non-emergency service through the non-resettable hour meter. The owner must record the time of operation on the engine and the reason the engine was in operation during that time.	The facility's generator records have jumps in time on all three generator records requested regarding the non-resettable hour meter with no reason given for its emergency use. The facility should also be recording the total run hours in a calendar year to ensure compliance with the maximum run hours allowed.

5. SCREENING CONCERNS

No concerns were identified based on a screening for environmental, safety and health aspects.

6. ENVIRONMENTAL ASSISTANCE

Based on the observations made during the inspection, the facility should consider the following resources to increase their understanding and compliance with applicable environmental requirements and/or be aware of any upcoming compliance deadlines:

- Hazardous Waste EPA Homepage, <http://epa.gov/hw>
- Final Rule: Hazardous Waste Generator Improvements (2017), <https://www.epa.gov/hwgenerators/final-rule-hazardous-waste-generator-improvements>
- Hazardous Waste Generators, <https://www.epa.gov/hwgenerators>
- Management of Pharmaceutical Hazardous Waste, <https://www.epa.gov/hwgenerators/management-pharmaceutical-hazardous-waste>
- Ozone Protection Regulations, <https://www.epa.gov/ozone-layer-protection>
- New Source Performance Standards for Emergency Generators, <https://www.epa.gov/stationary-engines/fact-sheet-specifics-about-provisions-related>
- Healthcare Environmental Resource Center, <https://www.hercenter.org/index.php>
- Fed Center, the Federal government's home for comprehensive environmental stewardship and compliance assistance information for Federal facility managers and their agencies, <https://www.fedcenter.gov>

7. REQUESTED INFORMATION

Below are the documents and other relevant information that EPA requested to complete this compliance evaluation. Once received, the information will be reviewed.

- Service/repairs made or scheduled in response to November 2021 tuning report;
- 2019-2021 refrigerant maintenance records;
- Inventory of units using refrigerant with a capacity over 50 lbs.; and
- 2019-2021 generator logs with emergency use justifications

APPENDICES:

A: Photographs

B: EJ Screen

C: Flood Map

D: Sole Source Aquifer Map

Appendix A
Inspection Photos
VA Castle Point



Photo 0308
Microbiology Lab SAA

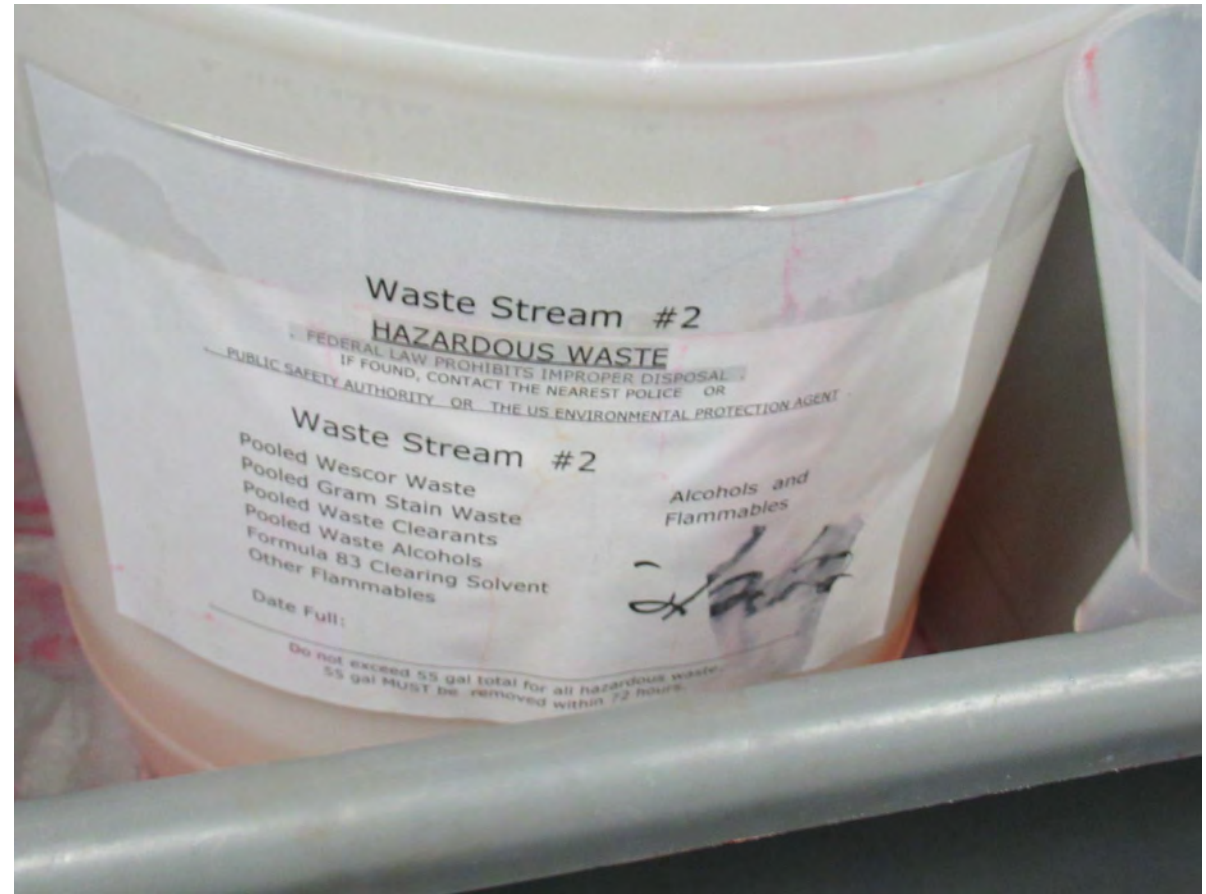


Photo 0309
Histology Lab SAA



Photo 0310
Insulin stored in container



Photo 0335
Hazardous waste containers

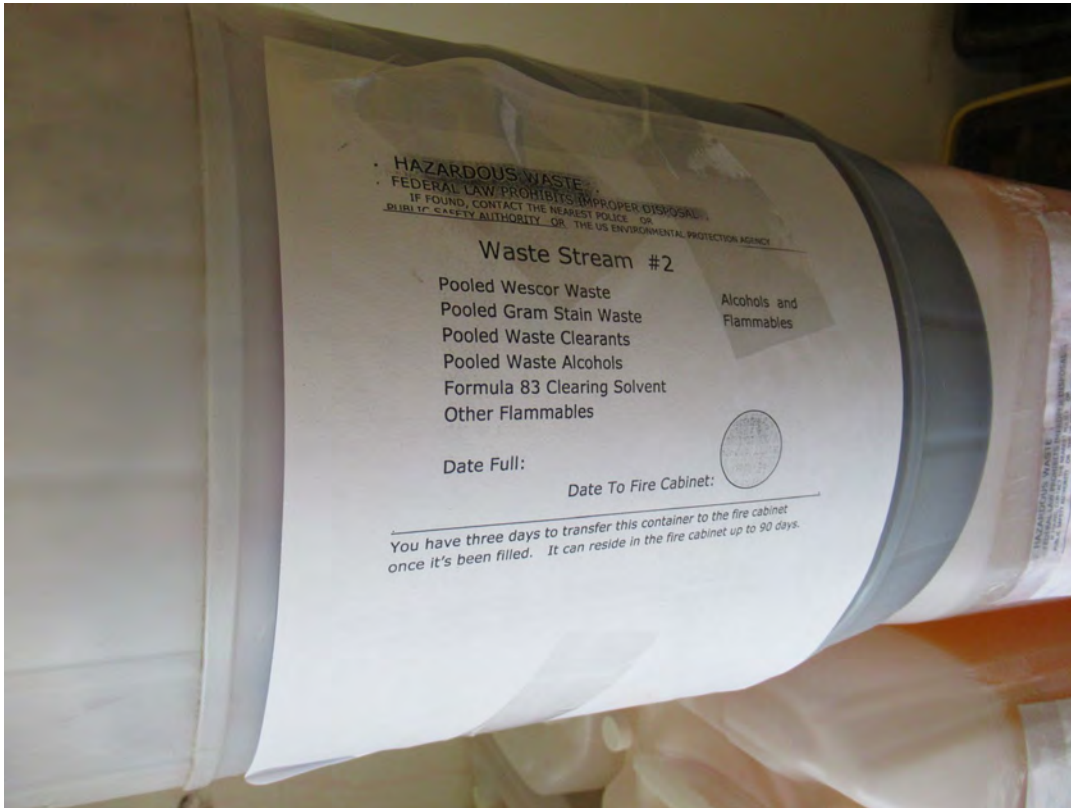


Photo 0337

Hazardous waste container with no accumulation start date



Photo 0348

Open container of used bulbs. Broken bulb.



Photo 0350
Used Bulbs/Broken Bulb

EJScreen Report (Version 2.0)



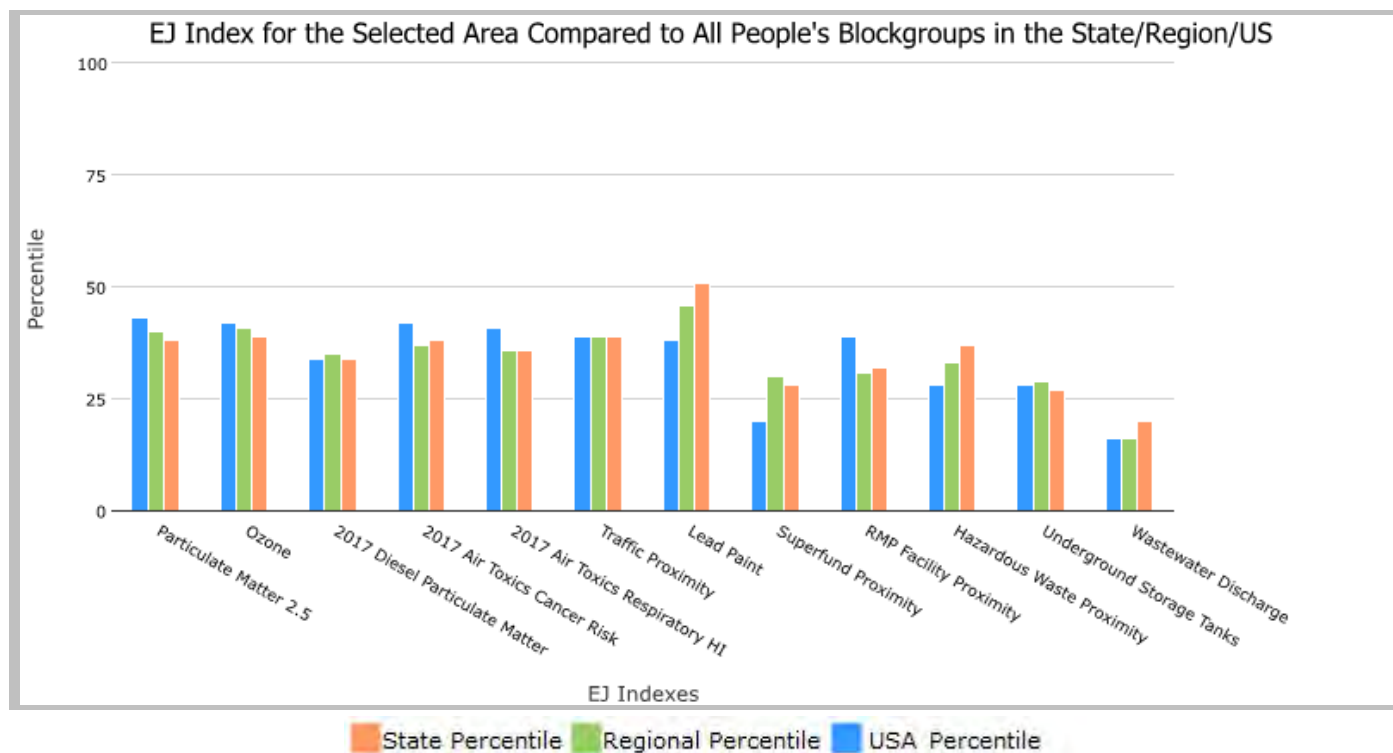
1 mile Ring Centered at 41.540418,-73.962214, NEW YORK, EPA Region 2

Approximate Population: 4,424

Input Area (sq. miles): 3.14

VA Castle Point - EJScreen Report - Appendix B

Selected Variables	State Percentile	EPA Region Percentile	USA Percentile
Environmental Justice Indexes			
EJ Index for Particulate Matter 2.5	38	40	43
EJ Index for Ozone	39	41	42
EJ Index for 2017 Diesel Particulate Matter*	34	35	34
EJ Index for 2017 Air Toxics Cancer Risk*	38	37	42
EJ Index for 2017 Air Toxics Respiratory HI*	36	36	41
EJ Index for Traffic Proximity	39	39	39
EJ Index for Lead Paint	51	46	38
EJ Index for Superfund Proximity	28	30	20
EJ Index for RMP Facility Proximity	32	31	39
EJ Index for Hazardous Waste Proximity	37	33	28
EJ Index for Underground Storage Tanks	27	29	28
EJ Index for Wastewater Discharge	20	16	16



This report shows the values for environmental and demographic indicators and EJSCREEN indexes. It shows environmental and demographic raw data (e.g., the estimated concentration of ozone in the air), and also shows what percentile each raw data value represents. These percentiles provide perspective on how the selected block group or buffer area compares to the entire state, EPA region, or nation. For example, if a given location is at the 95th percentile nationwide, this means that only 5 percent of the US population has a higher block group value than the average person in the location being analyzed. The years for which the data are available, and the methods used, vary across these indicators. Important caveats and uncertainties apply to this screening-level information, so it is essential to understand the limitations on appropriate interpretations and applications of these indicators. Please see EJSCREEN documentation for discussion of these issues before using reports.

1 mile Ring Centered at 41.540418,-73.962214, NEW YORK, EPA Region 2

Approximate Population: 4,424

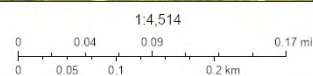
Input Area (sq. miles): 3.14

VA Castle Point - EJScreen Report - Appendix B



August 4, 2022

VA Castle Point - EJScreen Report - Appendix B



Esri, HERE, Garmin, GeoTechnologies, Inc., New York State, Maxar

Sites reporting to EPA	
Superfund NPL	0
Hazardous Waste Treatment, Storage, and Disposal Facilities (TSDF)	0

EJScreen Report (Version 2.0)



1 mile Ring Centered at 41.540418,-73.962214, NEW YORK, EPA Region 2

Approximate Population: 4,424

Input Area (sq. miles): 3.14

VA Castle Point - EJScreen Report - Appendix B

Selected Variables	Value	State Avg.	%ile in State	EPA Region Avg.	%ile in EPA Region	USA Avg.	%ile in USA
Pollution and Sources							
Particulate Matter 2.5 ($\mu\text{g}/\text{m}^3$)	7.38	7.9	34	8.03	28	8.74	18
Ozone (ppb)	39.2	41.6	16	41.8	11	42.6	27
2017 Diesel Particulate Matter* ($\mu\text{g}/\text{m}^3$)	0.247	0.646	33	0.558	<50th	0.295	50-60th
2017 Air Toxics Cancer Risk* (lifetime risk per million)	24	29	52	29	50-60th	29	50-60th
2017 Air Toxics Respiratory HI*	0.3	0.39	48	0.37	50-60th	0.36	<50th
Traffic Proximity (daily traffic count/distance to road)	85	870	21	840	21	710	30
Lead Paint (% Pre-1960 Housing)	0.1	0.55	6	0.46	14	0.28	39
Superfund Proximity (site count/km distance)	0.15	0.23	56	0.28	51	0.13	78
RMP Facility Proximity (facility count/km distance)	0.2	0.5	43	0.62	40	0.75	37
Hazardous Waste Proximity (facility count/km distance)	0.74	6.2	23	4.9	30	2.2	50
Underground Storage Tanks (count/km ²)	0.96	8.1	36	9.3	36	3.9	45
Wastewater Discharge (toxicity-weighted concentration/m distance)	0.017	3.9	62	2.3	64	12	73
Socioeconomic Indicators							
Demographic Index	28%	37%	47	41%	43	36%	46
People of Color	44%	44%	56	49%	51	40%	60
Low Income	12%	30%	22	32%	25	31%	19
Unemployment Rate	4%	5%	43	6%	39	5%	43
Linguistically Isolated	2%	8%	42	14%	37	5%	53
Less Than High School Education	7%	13%	37	13%	38	12%	42
Under Age 5	6%	6%	53	6%	55	6%	49
Over Age 64	13%	16%	37	16%	37	16%	41

*Diesel particulate matter, air toxics cancer risk, and air toxics respiratory hazard index are from the EPA's 2017 Air Toxics Data Update, which is the Agency's ongoing, comprehensive evaluation of air toxics in the United States. This effort aims to prioritize air toxics, emission sources, and locations of interest for further study. It is important to remember that the air toxics data presented here provide broad estimates of health risks over geographic areas of the country, not definitive risks to specific individuals or locations. Cancer risks and hazard indices from the Air Toxics Data Update are reported to one significant figure and any additional significant figures here are due to rounding. More information on the Air Toxics Data Update can be found at: <https://www.epa.gov/haps/air-toxics-data-update>.

For additional information, see: www.epa.gov/environmentaljustice

EJScreen is a screening tool for pre-decisional use only. It can help identify areas that may warrant additional consideration, analysis, or outreach. It does not provide a basis for decision-making, but it may help identify potential areas of EJ concern. Users should keep in mind that screening tools are subject to substantial uncertainty in their demographic and environmental data, particularly when looking at small geographic areas. Important caveats and uncertainties apply to this screening-level information, so it is essential to understand the limitations on appropriate interpretations and applications of these indicators. Please see EJScreen documentation for discussion of these issues before using reports. This screening tool does not provide data on every environmental impact and demographic factor that may be relevant to a particular location. EJScreen outputs should be supplemented with additional information and local knowledge before taking any action to address potential EJ concerns.

Appendix C: Federal Emergency Management Agency (FEMA) 100 Year Flood Zone and EPA's Region 2 Composite Flood Risk Layer

Facility Name: VA Castle Point



The facility is not located within a FEMA 100-year flood zone area.



The facility is not located within the EPA's Region 2 Composite Flood Risk potential risk area.

Appendix D: Sole Source Aquifer Map

Facility Name: VA Castle Point



The facility is not located within a Sole Source Aquifer area.