

GSA Office of the Administrator

November 9, 2020

Ms. Catherine McMullen Chief of the Disclosure Unit U.S. Office of the Special Counsel 1730 M Street, NW Washington, D.C. 20030-4505

Dear Ms. McMullen:

On behalf of Administrator Emily Murphy, per the delegation dated July 31, 2019, this letter is the General Service Administration's ("GSA") response to the U.S. Office of Special Counsel ("OSC") letter dated July 10, 2019. The OSC letter recites the allegations of a third party that, primarily during the period from 2002-2015, "GSA officials may have engaged in conduct that constitutes gross mismanagement, a gross waste of funds, an abuse of authority, and a substantial and specific danger to public health" in GSA's Region 6, Heartland Region ("Region 6"). The allegations relate to the Goodfellow Federal Center ("Goodfellow"), which is a federally owned and operated facility in St. Louis, Missouri.

The OSC letter outlines numerous allegations regarding the conditions at Goodfellow and, more generally, the adequacy of the national Occupational Safety and Health Program and the Environmental, Health, Safety and Fire Protection ("EHSF") Programs. The allegations include the following:

- Region 6 conducted duplicative studies and thus wasted money on the studies.
- Region 6 was aware of contamination since at least 2002.
- Region 6 did not take appropriate action in response to studies.
- Region 6 did not notify tenants of environmental hazards until a few years ago.
- Region 6 failed to restrict access to potentially hazardous areas.
- Region 6 failed to install warning signs.
- Current Region 6 management created the issues.
- GSA failed to properly respond to previous GSA Office of Inspector General ("OIG") audits.
- GSA does not have a sufficient occupancy permit program to avoid incompatible occupancies.
- GSA continues to have an inadequate environmental management program.

The referral also referenced the findings of the OIG's March 15, 2019 Audit of Environmental Issues at the Goodfellow Federal Complex in St. Louis, Missouri (Report Number A170027/P/6/R19002) ("OIG Audit").

Because the allegations were wide-ranging and raised complex industrial hygiene and environmental management issues, GSA entered into an inter-agency agreement with the U.S. Department of Health and Human Service's Federal Occupational Health ("FOH") to ensure an independent comprehensive investigation. FOH reviewed over 1,000 documents, conducted multiple interviews, and visited Goodfellow as part of the investigation. Based on the referral letter, FOH derived 19 lines of inquiry and determined that most of them had merit.¹ See attached Federal Occupational Health, Final Report, Investigation Pertaining to Whistleblower Allegations about the Goodfellow Federal Center and Officials at GSA Region 6 (May 19, 2020) ("FOH Report"). As a result, the Commissioner for the Public Buildings Service ("PBS") delegated to a senior management official the functions and authorities to review and determine the appropriate action(s), if any, to be taken as a result of the findings in the FOH report. The planned actions identified by the management official include mandatory annual training for all employees in facilities management and the PBS Regional Commissioners. The appropriate critical elements in the performance plans for select facilities management positions and the PBS Regional Commissioners will also be amended to include the proper abatement of hazards in accordance with 29 CFR 1960.34(a)(6).

In addition, given that the OSC letter cited the OIG Audit, I asked the OIG to conduct an implementation review and determine whether the PBS Central Office and PBS Region 6 sufficiently addressed the deficiencies and recommendations identified in the OIG Audit, and whether the agency had properly implemented the Corrective Action Plan ("CAP") approved by the OIG. The OIG found the CAP sufficient, with one exception: PBS Region 6 did not sufficiently implement part of the CAP by failing to share all environmental studies with occupants in a timely manner. As a result, PBS Region 6 updated the Goodfellow Federal Center Environmental Reading Room² to respond to the OIG's findings, and PBS Central Office is in the process of drafting national guidance regarding notification requirements to affected building occupants of studies conducted in the following program areas: Occupational Safety and Health, Facility Safety & Health, Environmental, and Fire Protection.

In addition to the foregoing actions identified by the senior management official, the PBS Commissioner has directed the PBS Office of Facilities Management ("OFM") to conduct a comprehensive review of the EHSF program. As part of this effort, a number of initiatives have been completed or are underway. GSA Directives regarding EHSF matters have been issued or updated, and others are in process.³ EHSF program training has been provided to over 150 individuals, and several more EHSF training offerings are planned. These offerings are not only targeted for regional EHSF Program

¹ FOH found that the explosives stored in buildings in Region 6 did not constitute an undue risk. ² <u>https://www.gsa.gov/about-us/regions/welcome-to-the-heartland-region-6/buildings-and-facilities/missouri/goodfellow-federal-center/goodfellow-federal-center-environmental-reading-room</u>

³General Services Administration Occupational Safety and Health Program, GSA Order 5940.2 ADM (March 21, 2019), PBS Safety and Health Management, GSA Order 5940.3 (October 23, 2019), PBS Public Buildings Service (PBS) Fire Protection Program Policy, GSA Order PBS 5921.1 (January 2, 2020).

Managers, but also Facility Managers, Lease Administration Managers, operations and maintenance vendors, and PBS management.

PBS OFM has reviewed and updated the standard contract language for operation and maintenance and custodial contracts to require exposure control plans and building-specific hazard communication plan. The Facilities Standards for the Public Buildings Service ("P-100"), which establish design standards and performance criteria for public buildings, is currently under review for EHSF matters. A top priority for PBS in Fiscal Year 2021, which is included in performance plans for PBS senior executives, is to enhance the oversight of national risk management for the EHSF program by developing a comprehensive repository for all risk related items, expand training on risk management programs to a wider audience, develop an escalation and critical funding process, and create a culture of compliance and effective risk management.

Finally, as it specifically relates to Goodfellow, I would like to inform you that the Retention and Disposition Report ("RDR") has been approved by the PBS Commissioner, and the property is being prepared to be reported as excess to the needs of GSA. Plans are already in process to relocate existing tenants.

I have been briefed on the conduct of the investigation, and I have reviewed the results. I believe this report is thorough, and I believe it fulfills the requirements of 5 U.S.C. §1213. I agree with the conclusion that many of the allegations presented to OSC have merit, however, since 2016, and based on the above, I believe that PBS Region 6 and PBS Central Office have implemented corrective action to address these allegations and continue to work to improve the EHSF program at GSA. Furthermore, FOH noted that a "key finding was that little documentation was found that pointed to actual adverse health effects suffered by GSA personnel or regulatory violations or penalties." <u>See</u> page 17 of the FOH report. Although FOH did not identify any violation or apparent violation of law, rule or regulation, GSA takes these allegations very seriously and has implemented corrective action to address these allegations as previously outlined.

Thank you for bringing this matter to the attention of GSA. If I may be of any further assistance, please let me know at your earliest convenience, or you may also contact Katharine Healy who can be reached at 202-501-1830 or <u>katharine.healy@gsa.gov</u>.

Sincerely,

DocuSigned by: Robert Borden 043DF64876B5454

Robert Borden Chief of Staff



Federal Occupational Health 7700 Wisconsin Avenue, Suite 9360C Bethesda, Maryland 20814

FINAL REPORT

Investigation Pertaining to Whistleblower Allegations About the Goodfellow Federal Center and Officials at GSA Region 6



SUBMITTED TO: Robert Borden Chief of Staff General Services Administration 1800 F Street NW, Room 2031 Washington, DC 20405

SUBMITTED BY:

Program Manager, Environmental Health and Safety Services Federal Occupational Health, Program Support Center U.S. Department of Health and Human Services JFK Building, Room E-110, Government Center Boston, MA 02203

DATE: May 19, 2020

EXECUTIVE SUMMARY

Federal Occupational Health (FOH) performed an investigation pertaining to whistleblower allegations about the Goodfellow Federal Center and officials at General Services Administration (GSA) Region 6 as called for in a July 10, 2019, letter to the GSA Administrator from the U.S. Office of Special Counsel (OSC). Specifically, in this letter, the OSC summarized various allegations dealing with "gross mismanagement, gross waste of funds, abuse of authority, and a substantial and specific danger to public/employee health from environmental contamination" that may have occurred during 2002 to approximately 2015. The letter called for GSA to investigate these allegations and any related matters and to provide a report of findings to the OSC.

Through an interagency agreement, GSA tasked FOH with conducting a review of information relative to the allegations summarized in the OSC letter and to formulate independent conclusions concerning each of the questions listed in 19 Lines of Inquiry (LOIs) that FOH derived from the OSC letter.

This report provides FOH's conclusions relative to each of the LOIs along with the supporting rationale. Also, for completeness, information which could be considered 'contrary' or 'non-supporting' to the conclusion is also summarized, where judged applicable. FOH's conclusions as stated in this report have been based on the weight of evidence as derived from the review of many hundreds of documents provided by GSA, the whistleblower and other points of contact. In addition, FOH performed its own (limited) Internet search for information where deemed necessary to fill informational gaps. Finally, FOH's conclusions have also been based on information from interviews of the whistleblower and other knowledgeable GSA points of contact as well as a site walkthrough of the Goodfellow complex.

Overall, as reflected by the stated conclusions for each LOI, it is FOH's opinion that the allegations summarized in the OSC letter are substantiated and that the various whistleblower allegations of mismanagement, waste of funds, abuse of authority, and substantial and specific danger to public/employee health from environmental contamination did, in fact, occur from 2002 through about 2015. Over that period, Goodfellow/Region 6 management exhibited a pattern of ignoring numerous federal regulations, allowing unnecessary, continued and ongoing exposures to employees, tenants and contractors and failed to allocate the resources required to correct site deficiencies. Furthermore, over that period of time, Region 6 leadership did not take responsibility nor were they held accountable for these failures.

That being said, it is noted that little documentation could be found pointing to actual adverse consequences resulting from these failures such as harmful health effects suffered by GSA personnel from exposures or regulatory violations resulting in formal citations or penalties. No OSHA citations were issued to GSA relating to conditions/work activities at Goodfellow over the study period. Similarly, no documentation was reviewed of environmental-related citations, fines or clean-up orders from the U.S. EPA, state or local regulators. Available injury and illness logs did not reflect excessive occurrences as compared to similar, typical workplaces. However, importantly, FOH notes that chronic health effects from exposures to site contaminants (such as lead or asbestos) that may have occurred over the study period may have long latency periods, or have resulted in health effects that were not, at the time, known to be work-related. Illnesses due

to toxic substance exposures may only show up later as medical payments on workers' health insurance plans or on death certificates (e.g. mesothelioma). Also, the low number of injury and illness cases for Goodfellow can be attributed to the fact that the Goodfellow OSHA log would include only recordable injuries and illnesses for GSA employees. Any injuries or illnesses for tenants or contractors (including O&M contractors) would be compiled on their own logs. This documentation was not available to FOH.

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I. INTRODUCTION

Federal Occupational Health (FOH) was provided a copy of a letter dated July 10, 2019, issued to the Administrator of the General Services Administration (GSA) from the U.S. Office of Special Counsel (OSC) regarding OSC File No. DI-19-3713. In this letter, the OSC summarized various whistleblower allegations concerning officials at GSA Region 6 and the Goodfellow Federal Center and stated that "gross mismanagement, gross waste of funds, abuse of authority, and a substantial and specific danger to public/employee health from environmental contamination" may have occurred during 2002 to approximately 2015. The letter called for GSA to investigate these allegations and any related matters and to provide a report of findings to the OSC. The OSC letter further states that the OSC will review the GSA report for sufficiency and reasonableness and that following OSC's review, copies of the report would then be sent to the President and congressional oversight committees along with the whistleblower's comments and any OSC comments and recommendations.

In response to GSA's request for support, FOH provided a proposal outlining the scope and costs associated with an FOH investigation of the allegations summarized in the OSC letter. It was proposed that FOH review documents and conduct interviews as deemed necessary to formulate independent conclusions concerning each of the questions listed in about 19 Lines of Inquiry (LOIs). Based on initial discussions with GSA points of contact and as reflected in the proposal, FOH's investigation was to focus on reviewing information in about 500 documents which had been previously compiled by GSA. In addition, as proposed, FOH's effort was to include interviews of several key points of contact, including the whistleblower.

GSA accepted the FOH proposal and a project team was formed with personnel from FOH and WorkWell Associates, Inc. (WWA), a long-time support contractor to FOH.¹ Efforts were begun in December 2019, by a team comprised of Environmental Health and Safety (EH&S) experts working under the direction of FOH's Project Leader, **Sector**, CIH, Associate Director, Environmental Health and Safety Services, Federal Occupational Health, Program Support Center, U.S. Department of Health and Human Services. The team included senior WWA professionals including **CH**, CIH, **Sector**, B.Ch.E. (CIH 1976-1998), **Sector**, M.S., CPC, and **Sector**, MS, CSHM.

II. METHODOLOGY

At the start of the project, FOH solicited from GSA the previously compiled documents for review. These documents were received by FOH on a thumb drive provided by Industrial Hygienist, GSA, PBS/Office of Facilities Management, Facility Risk Management Division (PMG). The thumb drive contained four separate folders named:

- "2002-2019 Region 6 Reading Room docs";
- "2010 and prior Region 6 archive docs";

¹ WWA is a consulting firm incorporated in 2003 which specializes in environmental, health and safety (EH&S) services. WWA has extensive experience with FOH and GSA and has provided major, multi-year support to the Department of Justice OSC dealing with whistleblower allegations at other federal facilities.

- "2018 Region 6 Goodfellow OIG Audit"; and
- "2019 New GSA Safety & Health Policies".

Within the four folders were additional subfolders and sub-sub-folders in which about 750 individual files were contained. The files consisted of various .pdf documents (zipped and unzipped) including:

- EH&S testing reports and data;
- Training records;
- Job hazard analysis forms;
- Respiratory protection program records (fit testing, medical clearance reports, etc.);
- Engineering reports (underground storage tanks, PCBs in transformers, etc.);
- Newspaper articles; and
- Inspector General reports and backup information.

In addition, over the course of the project, FOH conducted its own (limited) search for pertinent information to provide additional background and context especially where it appeared that informational gaps were present. Over 100 additional files/documents were obtained from other sources including:

- Office of the Inspector General website; and
- Emails with file attachments from the whistleblower and other contacts.

In total, more than 1000 documents were reviewed in order to inform the findings compiled in this report. While some documents were considered more important than others (and the degree of review varied accordingly), all the gathered documents were reviewed. A listing of the names of these files, folders and/or documents is provided in the appendices to this report. The actual documents themselves, where feasible, have been maintained separately and are being temporarily stored on a WWA Dropbox account.² FOH's efforts to track files, folders and document names and to archive the actual documents themselves is intended to both substantiate how FOH arrived at its conclusions and to also facilitate efforts by others should they wish to evaluate the information on their own. From the overall library of documents, Figure 1, below, provides a listing of key documents cited in this report.

² This Dropbox account can be accessed with a password. Contact or for more information.

Figure 1. Key Documents Cited in this Report



Information was also obtained from observations made during an on-site walkthrough of the Goodfellow site on February 6, 2020. The walkthrough was performed by FOH's and a second and seco

Finally, important information was obtained from interviews and correspondence with various points of contact in addition to the whistleblower. Figure 2 identifies these contacts.

Figure 2. Points of Contact Providing Information to FOH

Goodfellow whistleblower. OSHA Compliance Officer for three years prior to
working at GSA. Hired by GSA's in 2010 as "Occupational Safety
and Health Specialist" for Region 6 PBS/Office of Facilities Management. He has
held the same position until the present. He is also the Chief Steward for AFGE
Local 236 – Heartland Region.
Former GSA Region 6 Industrial Hygienist. Current GSA Industrial Hygienist with
PBS/Office of Facilities Management, Facility Risk Management Division (PMG)
Former GS14 Iowa Field Office Director over the GSA Region 6 Iowa buildings.
Current GS13 GSA Region 6 Electrical Engineer. Mr. Dwyer's job is to review
construction projects for compliance with electrical regulations/codes/policy.
Current Building Manager in GSA Region 7, New Orleans. Former facility
operations specialist at the Bannister Federal Complex in Kansas City.
Current GSA Occupational Safety and Health Manager.
Former Region 6 Industrial Hygienist and OSH committee member. (Retired)
Region 6 Public Building Service (PBS) Commissioner. Mentioned as a past
member of the 'Board of Directors'.
Facilities Management Division Director. Mentioned as a past member of the
'Board of Directors'.
*One additional individual was interviewed who wanted to remain anonymous

The information provided by documents, interviews, correspondence and the site visit was evaluated so that FOH's opinion could be formulated for each of the 19 LOIs in question. The FOH team used professional judgement to weigh contradictory, alternate or inconsistent information and to ultimately formulate its conclusions for each LOI. The rationale for each FOH conclusion is documented in this report by citing specific informational sources and/or detailing excerpts from the relevant documents, i.e., "supporting rationale." In addition, where there appeared to be information that did not support FOH's overall conclusion for a given LOI, this too was summarized ("non-supporting rationale"). *Section II, Findings Summary*, identifies each of the 19 LOIs investigated along with the FOH's conclusion for each. More detailed supporting rationale (and non-supporting rationale, if applicable) is found in *Appendix I, Lines of Inquiry, Conclusions and Supporting/Non-Supporting Rationale*. The file names of the approximately 1000 documents used to inform FOH's conclusions are provided in *Appendix II, List of Information Sources: Names of Files, Folders and/or Documents*. The actual documents themselves, where feasible, have are being temporarily stored on a WWA Dropbox account.³

In general, the following rules of thumb were adopted by FOH for this project:

- FOH's philosophy was not to necessarily take whistleblower complaints and assertions as 'factual' or as 'evidence'. Rather, a compelling weight of sources of information was necessary before FOH would decide on an assertion's veracity and render a conclusion.
- The supporting rationale listed for an LOI's conclusion does not include every document or piece of information used. Especially if a preponderance of information pointed in one direction, FOH did not feel it necessary to continue to document all the available rationale.

for more

³ This Dropbox account can be accessed with a password. Contact information.

- FOH formed its conclusions from what could be termed a qualitative "meta-analysis" of data points represented by "a pooling" of the information in the documents and from the interviews/correspondence with contacts.
- The document review consisted of two phases. The first was essentially a 'key word' search using various search engines (Windows, Apple, Drop Box) to identify information in the 1000 or so documents which could be considered pertinent to the LOI being researched. The second type of review involved a full or partial reading of documents to identify whether any additional information in a given document could be useful to the FOH team. As mentioned previously, some documents were scrutinized more than others. For example, multiple reports of data from similar, repeated testing might not all have been reviewed closely.

III. FINDINGS SUMMARY

A summary of FOH's findings is presented in this section. These findings are based on the review of hundreds of documents as well as interviews of the persons identified in Figure 2, above, and other information. Each of the 19 LOIs is provided along with FOH's Conclusion pertinent to these LOIs. The rationale behind the stated conclusion for each LOI can be found in Appendix I (along with any key non-supporting information which was also weighed).

As summarized in Figure 3, *Time Line of Major Activities*, significant GSA activities pertinent to FOH's investigation occurred from 1998 through 2018. Even though some of these activities occurred outside the focus period of FOH's investigation (i.e., 2002 to about 2015), these activities are noted since they provide context to the LOI conclusions.

December 1998	Contact from Corps of Engineers alerting site to likely subsurface contamination
January 24, 2002	Marc Enviro Services: Phase I Environmental Site Assessment
November 2003	SCS Engineers: Environmental Site Investigation Report Buildings 102, 103, 104, and 112
March 2006	GSA OIG Review of the PBS Environment Program Management
November 21, 2006	Geotechnology: Phase 1 Environmental Site Assessment
August 2008	SCS Engineers: Combined Facility Preliminary Assessment/Site Inspection
August 2008	SCS Engineers: PA/SI Addendum 1: Interim Lead Wipe Sampling and Assessment Report, Buildings 102, 103 E, 103 F, 104, & 104 F
February 2009	Occu-Tec: Lead Air and Dust Wipe Investigation, Buildings – 102, 103, 103D, 104, 104E, 105, 105E, 105F, and 110
December 2010	Terracon: File Review & Summary of Site Conditions
December 2010	GSA OIG: Review of Health and Safety Conditions at the Bannister Federal Complex
June 2013	Tetra Tech: Occupational Exposure Evaluation
October 2014	2014 Occupational Safety & Health Report – Annual Building Survey Report.
March 2015	GSA OIG: PBS's Identification and Management of Environmental Risks Needs Improvement
December	E-mail from whistleblower to GSA OIG to open an investigation.
22, 2015	Regional safety specialist and industrial hygienist filed separate
January 2016	complaints with the GSA OIG and OSHA on safety issues in Region 6
April 2016	Whistleblower letter to congressman
June 2016	NIOSH: Health Hazard Evaluation Report, HHE 2016-0152
June 2016	Global Environmental, Inc.: Testing and cleaning in Building 104
July 2016	Occupational Health and Safety Administration, Notice of Unsafe or Unhealthful Working Conditions
October 9, 2018	AFGE Letter to Senators - Retaliation for Fraud, Waste and Abuse by GSA Region 6 PBS Senior Managers
October	AFGE Letter to Senators - Continued Fraud, Waste and Abuse by Region 6 PBS Senior Manager -
15, 2018	Focus on Fire Protection

Figure 3. Timeline of Major Activities

Presented below is each of the 19 LOIs together with FOH's derived Conclusion. See Appendix 1 for additional details for each LOI including supporting rationale for each Conclusion.

<u>Line of Inquiry #1</u>: Were GSA officials in Region 6 and at Goodfellow aware of potential environmental contamination at Goodfellow since at least 2002?

FOH Conclusion: GSA officials in Region 6 and at Goodfellow were aware of both potential and actual environmental contamination at Goodfellow since at least 2002.

<u>Line of Inquiry #2</u>: What actions, if any, did GSA officials take to notify GSA employees, contractors and tenant agencies about environmental contamination and chemical/exposure hazards in the workplace?

FOH Conclusion: There was no substantial action taken to notify GSA employees and tenant agencies of hazards present on the Goodfellow complex site prior to 2016. However, there is evidence of some limited notifications made to maintenance and janitorial contractors in 2015. FOH also concludes that some information provided in 2016 communications to employees was misleading and written to downplay the issue communicated. While site management might have argued that these communications were worded in a manner so as not to unduly alarm employees, tenants and contractors, it is FOH's opinion that the wording was inaccurate and overtly misleading. There is additional anecdotal evidence from interviews that confirm a pattern of suppressing or downplaying risk communications.

Line of Inquiry #3: Was access restricted to contaminated areas? When?

FOH Conclusion: There is evidence that some warning signs were posted at entrances to contaminated basements in 2015; however there was no/little documentation that actual access to contaminated areas was restricted in any significant way prior to 2016.

<u>Line of Inquiry #4</u>: Were recommendations found in assessment reports to mitigate and/or prevent contamination or exposures properly considered (e.g. engineering controls, warning signs, restricted access, PPE, medical surveillance)?

FOH Conclusion: Recommendations to mitigate and/or prevent contamination or exposures were found in assessment reports. While many assessments listed analytical results only, many reports did include recommendations for engineering and administrative controls, personal protective equipment and/or medical surveillance. In general, FOH considers the recommendations in these reports to be appropriate based on the findings presented. However, given the fact that there is little documentation that hazard abatement actions were generally made in a timely manner between 2002 and about 2015, FOH's conclusion is that GSA officials did not properly consider these report recommendations.

<u>Line of Inquiry #5</u>: Were recommendations to mitigate and/or prevent contamination or exposures promptly and effectively followed by GSA, as appropriate?

FOH Conclusion: Recommendations to mitigate contamination and/or prevent exposures were not promptly or effectively implemented by GSA prior to 2016.

<u>Line of Inquiry #6</u>: To what extent did GSA PBS take action to address environmental, safety and health shortcomings identified in GSA OIG reports (pertaining to other GSA facilities) and improve its environmental risk management policies nationwide, to include Region 6 and Goodfellow? Have policies and procedures been finalized, adopted and effectively implemented?

FOH Conclusion: There is no documentation that, prior to 2016, GSA PBS had significantly improved its environmental risk management policies and environmental management systems nationwide as a result of shortcomings identified in GSA OIG reports pertaining to other GSA facilities (e.g. Bannister). The GSA OIG first noted deficiencies in PBS Environmental Program Management in 2000; these were largely uncorrected in 2006. Safety and environmental management systems deficiencies found in the 2010 GSA OIG report of health and safety conditions at the Bannister Federal Complex were also found in the 2015 report on PBS's environmental risk management practices. Further, the same deficient environmental management system, which resulted in failures to correct site contamination, is evident at both Goodfellow and the Bannister Federal Complex. [This Conclusion applies to the period of FOH's review, i.e., "2002 to about 2015". There is documentation that some improvements were made starting in 2016 (and again in 2019).]

<u>Line of Inquiry #7</u>: Were conflicts of interest apparent in terms of those persons performing the assessments, interpreting the findings, or recommending corrective measures?

FOH Conclusion: FOH found no evidence of conflict of interest with respect to consultants and contractors who performed the assessments, interpreted the findings, or recommended corrective measures.

<u>Line of Inquiry #8</u>: Were conflicts of interest apparent in terms of those persons providing resources/budget for implementation of corrective actions, and managing their implementation? Are conflicts of interest apparent insofar as those currently responsible for correcting past failures are the same individuals who were responsible for creating the failures and subsequently neglecting to correct them, despite assurances otherwise?

While some of those in management who are currently responsible for correcting past failures are the same individuals who at some point in time neglected to correct them, no conclusive documentation was reviewed that proves that there was any significant, wrongful, purposeful motivation for personal gain (financial or otherwise). Often those in management who created the failures by neglecting corrective actions and compliance with federal regulations were predecessors to the current management team. While FOH does not find an apparent conflict of interest⁴, it does find significant pattern of ongoing,

⁴ FOH is interpreting the term "conflict of interest" in its common usage in describing an ethical/situational conflict of interest. Wikipedia provides as a widely used definition: "A conflict of interest is a set of circumstances that creates a risk that professional judgement or actions regarding a primary interest will be unduly influenced by a secondary interest." Primary

self-perpetuating management defects including a lack of oversight by and requirements/orders from the GSA central office, the site/region's deficient environmental management systems, their management culture and history of non-compliance, "group think", a disbelief/discounting of the opinions and recommendations of subject matter experts, absent or overtly misleading hazard communication and a poor performance incentive system (especially with Tenant Satisfaction Surveys being the major metric for evaluating management performance). Several GSA contacts indicated that the Tenant Satisfaction Survey tended to work as a perverse incentive for GSA officials to not identify, communicate or correct workplace hazards due to the perceived potential for tenant awareness of such environmental, safety and health issues to lessen tenant satisfaction and thereby negatively affect GSA officials' performance reviews. Satisfaction might be impacted by, for example, tenant concerns about impacts to their employees' perception of safety, morale, and potential impacts to tenant space and productivity.

Line of Inquiry #9: Were tests and studies duplicative, unnecessary or wasteful?

FOH Conclusion: While some repeat sampling and studies were necessary to better define risks/exposures over time and/or to define where remediation was necessary, the weight of the data support the conclusion that there were a substantial number of studies that were duplicative and unnecessary and, therefore, wasteful. The resources that were expended for duplicate and unnecessary studies would have, if diverted for use in site remediation, reduced site contamination and helped prevent employee, contractor, tenant and visitor exposures to site contaminants.

<u>Line of Inquiry #10</u>: When the GSA/Goodfellow management was made aware of environmental contamination and/or potential community or workplace exposures, which federal regulations (EPA, OSHA, others) were in place such that, if complied with, contamination/exposures would likely not have occurred or would have been mitigated?

FOH Conclusion: At the time GSA/Goodfellow management was made aware of environmental contamination and/or potential community or workplace exposures, there were numerous federal regulations in place that, if complied with, would have helped prevent or mitigate exposures. In particular, if personal exposure monitoring, hazard assessments (e.g., job hazard analyses) and training was performed in accordance with applicable lead, asbestos, hazard communication, and other standards during contractors' and maintenance employees' work in basements, tunnel crawl spaces beginning in 2002 (or earlier), it would likely have led to a more timely use of stringent protective controls including personal protective equipment, engineering/administrative controls and medical screening to monitor workers' health over time. Corrective actions should have been initiated within 30 days of receipt of environmental reports that

interest refers to the principal goals of the profession or activity, such as the protection of clients, the health of patients, the integrity of research, and the duties of public officer. Secondary interest includes personal benefit and is not limited to only financial gain but also such motives as the desire for professional advancement, or the wish to do favors for family and friends. These secondary interests are not treated as wrong in and of themselves, but become objectionable when they are believed to have greater weight than the primary interests. There is no attempt to ascribe any legal connotation to this phrase. Per FOH's agreement with GSA and the Statement of Work for this effort, FOH is not providing information that would be construed as a legal opinion.

indicated contamination or hazardous conditions. For the most part, abatement of environmental contamination, requirements for personal protective equipment usage, training, and medical surveillance for lead and asbestos exposed employees did not begin until 2016.

Line of Inquiry #11: Were explosives stored in GSA facilities that house childcare centers? Type? Risk posed?

FOH Conclusion: Explosive materials were stored in GSA facilities that housed childcare centers. However, FOH agrees with OSHA's determination that the explosive materials stored in buildings in Region 6 did not constitute an undue risk. The explosives in question were canine explosive detection training aids that were stored in a locked magazine in a locked room. However, the "optics" of the perceived risk of storing these materials in the same building as a childcare center, could, on balance, bias towards considering this an incompatible occupancy. [It should be noted that these materials were brought into Region 6 buildings without notification to occupational safety and health staff or an evaluation of whether an incompatible occupancy could exist.]

<u>Line of Inquiry #12</u>: What are GSA policies concerning restricting explosives in federal buildings (pursuant to 41 CFR 102-74.435)? Has an occupancy permit program been effectively implemented to avoid incompatible occupancies (pursuant to 29 CFR 1960.34.(a)(7))? What policies/procedures were instituted by GSA to prevent improper handling/storage of explosives and otherwise mitigate risk?

FOH Conclusion: Since January of 2012, GSA has had a policy on explosives on federal property. Since October of 2015, GSA has had a policy on Fire, Safety and Health (FSH) Space Evaluation (which was instituted after whistleblower complaints were made to the GSA OIG in early 2015). There was no documentation found about Region 6-wide communication or enforcement of these policies or whether they have been implemented to eliminate an incompatible occupancy. In the absence of any such documentation, FOH concludes that an occupancy permit program and policies/procedures to mitigate risk from handling/storage of explosives were not effectively implemented over the investigation period (2002 to about 2015).

<u>Line of Inquiry #13</u>: What assurances did responsible Region 6 management officials make regarding the improvement of the region's fire/life safety programs? To what extent was any meaningful improvement made?

FOH Conclusion: For the period under review (2002 to about 2015) FOH found no documentation of explicit assurances that Region 6 management made regarding improving the region's fire/life safety programs. In the absence of any such documentation, FOH concludes that no significant assurances were made. Similarly, other than regional safety staff efforts to initiate corrective actions and encourage program improvements, there was little documentation showing that meaningful improvements were made in fire and life safety programs during this time frame. There was, however, documentation of many individual findings of non-conformances with fire and life safety code requirements

that remained uncorrected. It is also noted that, on many occasions, there were nonconformances with the requirements of PBS-P100 Facilities Standards for the Public Buildings Service (P100) by not requesting Certificates of Occupancy from the Regional Fire Protection Engineer. A draft Fire Protection Program was reported to be issued in 2018 and in place by 2019.

<u>Line of Inquiry #14</u>: Are other potentially serious environmental or safety and health conditions apparent that have not been identified by Office of Special Counsel correspondence?

FOH Conclusion: There are other potentially serious environmental or safety and health conditions that have not been identified by Office of Special Counsel correspondence, namely:

- Electrical Vault Safety: Safety issues in the vaults in Goodfellow Buildings 104 and 110 have not been addressed. (To date, no funding has been allocated for this work.)
- Mothballed/abandoned building(s) (e.g., Buildings 102 and 102D) have been abandoned without undergoing any (significant) remediation by simply boarding up doors and windows and restricting access. Both the environmental and safety/health liabilities and potential for future exposures will remain until this is permanently addressed.
- Incomplete site evaluation: Multiple facility spaces that contain air/soil/water/surface contamination have not been properly evaluated to determine the amount/toxicity/extent of the hazards involved and actions required to protect federal agency tenants, GSA employees, contractors, vendors, and visitors.
- Uncharacterized exposures exist from non-ionizing radiation risks associated with building roof antennas.
- Undiscovered existing, long-term, or latent health effects: FOH believes that past exposures to site contaminants (e.g. lead, asbestos, mercury, cadmium and others) could have caused or may cause in the future adverse health effects in employees, contractors or tenants (e.g. mesothelioma in employees exposed to asbestos) or developmental issues in children who were in childcare in building 104. In addition, since no effective policies were identified by FOH regarding decontaminating personal items prior to leaving the workplace or precautions associated with laundering clothes, contamination was likely brought home by workers and could have resulted (or result in the future) in adverse health effects among family members.

<u>Line of Inquiry #15</u>: Were any federal or state regulators involved in or consulted with on any of the Goodfellow studies or investigations?

FOH Conclusion: FOH found no evidence that any federal or state regulators were involved in or consulted with on any of the Goodfellow studies or investigations. (While there have been documented OSHA investigations and citations, FOH does not consider these as "involved in or "consulted with".) <u>Line of Inquiry #16</u>: Was the testing and methodology adequate to characterize the nature of the contamination and resultant exposures? Did the methodology use approved methods? Were adequate analytical sensitivities achieved?

FOH Conclusion: In general, when sampling and analysis for environmental-type contaminants were performed, appropriate methodology with adequate analytical sensitivities and quality control was employed. Even if there would have been some analytical deficiencies, the vast amount of environmental data provided ample evidence for significant site-wide environmental contamination.

While the vast majority of testing (sampling and analysis) was for <u>environmental</u> contamination, there was little or no data found by FOH that characterized personal occupational exposures. In particular, no personal monitoring for contaminant concentrations in breathing zones was performed during work activities that would tend to disturb contaminated soils/materials. Therefore, no exposure data was compiled which could be directly compared to occupational exposure limits such as 8-hour time weighted average (TWA) OSHA Permissible Exposure Limits or ACGIH Threshold Limit Values (TLVs). This resulted in personnel working in contaminated basements and crawl spaces (prior to 2016) without adequate knowledge of the hazards, safe practices training, personal protective equipment and medical screening. [Note: FOH understands that for the period of review, Operation and Maintenance (O&M) personal were contractors (not direct employees of GSA) and that the contractor management (not GSA) would have had the responsibility to conduct personal monitoring for those employees doing maintenance, repairs, and other work in basements, tunnels or crawl spaces where asbestos, lead and other toxic contaminants were present. While this is true, it is also true that prior to 2000 (exact date uncertain) there were GSA O&M employees ("green shirts") who performed these functions and for whom exposure monitoring/personal monitoring should have occurred. Also, when O&M was outsourced to contractors, it would have been incumbent on GSA to inform the O&M contractor (and any other contractors working in contaminated areas) of the hazards present and their responsibility to conduct personal monitoring and, more generally, to comply with all applicable federal regulations. (Even if contract language included statements requiring conformance with federal regulations, it would have also been a responsibility of GSA contract management personnel to assure that *contract conditions were met.)*]

<u>Line of Inquiry #17</u>: Was testing data interpreted properly (were appropriate benchmarks used? Were the testing locations appropriate? Was testing frequency adequate, etc.)?

FOH Conclusion: FOH concludes that, for the most part, data from contracted studies were interpreted properly and that appropriate benchmarks (e.g. regulatory limits) were used. However, for lead dust surface contamination or surfaces, the GSA national office has expressed their policy that 200 μ g/ft2 (micrograms per square foot) for floors is the appropriate reference standard for lead dust surface contamination while GSA Region 6 has held the position that the HUD clearance standard of 40 μ g/ft2 was generally appropriate (especially for building 104E which, for several years in the past, housed the site childcare facility). Under 41 CFR 102: Federal Property Management Regulations System – Federal Management Regulation, CFR §102-80.30 requires federal agencies to: Abate lead-based paint found in accordance with U.S. Department of Housing and Urban Development (HUD) Lead-Based Paint Guidelines. [FOH note: While section 102-80.30 refers to requirements when lead-based paint is present in federal buildings, it was inferred that the requirement to abate to HUD Guidelines would apply equally to the metallic/particulate lead contamination found on the Goodfellow site.]

<u>Line of Inquiry #18</u>: Were contamination plumes and any resultant human exposure adequately delineated?

FOH Conclusion: There was a great deal of testing that dealt with environmental contamination and these data substantiate that there was significant site-wide contamination. Sampling was conducted in occupied areas, basements, and crawl spaces; in sediments, surface soils, subsurface soils, groundwater, water, surface wipes, bulk surface dust, and interior concrete cores. However, due to the large footprint of the site, the many buildings, and the site history, there remain contaminated facility spaces that have not been properly evaluated to determine the extent of the hazards and actions required to protect occupants and employees.

There are no data that characterized occupational exposures using personal monitoring. While there is documentation that, before 2016, O&M employees worked in contaminated basements and crawl spaces without being informed of the hazards or how they could protect themselves, there was no measurement of these exposures.

<u>Line of Inquiry #19</u>: Was detected contamination adequately assessed in terms of impact on different categories of human receptors (e.g., adults, children, pregnant women, immuno-compromised) and the type of workplace encountered (e.g., office, industrial, residence, cafeteria, childcare)?

FOH Conclusion: Detected environmental contamination was generally not assessed in terms of impact on different categories of human receptors (e.g., adults, children, pregnant women, immuno-compromised). Sampling for contamination was conducted in office spaces, industrial areas (e.g. basements and crawl spaces) and the cafeteria and childcare buildings. While some testing was conducted in Building 104E (which housed the site childcare center), it was considered to be inadequate to fully evaluate any exposures/risks to children.

Notwithstanding FOH's findings that mismanagement, waste of funds, abuse of authority, and substantial and specific danger to public/employee health from environmental contamination did in fact occur from 2002 through about 2015, little documentation was found that pointed to actual adverse health effects of GSA personnel and/or regulatory violations or penalties. No OSHA citations were issued to GSA relating to conditions/work activities at Goodfellow during the period studied. Similarly, no documentation was reviewed of environmental-related citations, fines or clean-up orders from the U.S. EPA, or state and local regulators. FOH's review of Goodfellow

OSHA injury and illness logs showed that, for the years when log information was available to FOH (i.e., 2002-2009), only one recorded injury was tabulated. It is noted that OSHA did issue citations at Goodfellow on July 1, 2016. These violations were categorized as "Serious" and specified non-compliances dealing with unguarded elevator fly wheels, unsafe machine guarding, electrical hazards, lack of measuring/monitoring associated with lead, lead accumulation, and a lack of compliance with hazard communication regulations (dealing with lead). Appendix III provides a chart entitled "Summary of OSHA Injury and Illness Recordable Cases for the Goodfellow Federal Complex" along with the 2016 OSHA citation.

Regarding the review of Goodfellow OSHA injury and illness logs, FOH notes that OSHA logs for GSA Region 6 were available from 2002 through 2009 and there were no logs in the document files from 2010 to the present. All but one of the cases from 2002-2009 were for other locations in Region 6 (mostly Kansas City). The one case for Goodfellow was for a fall in 2009.

Importantly, the low numbers reflected may be attributed to the fact that the Goodfellow OSHA log would include only recordable injuries and illnesses for GSA employees. Any injuries or illnesses for tenants or contractors (including O&M contractors) would be compiled on their own logs. In an interview with the whistleblower, FOH confirmed that his recollection was that the majority of historical injuries at the Goodfellow complex were trips and falls. He further confirmed his recollection that there is nothing on the OSHA logs that reflects chronic or acute health effects due to site contaminants. FOH notes that chronic health effects from exposures to site contaminants (such as asbestos) that may have occurred over the investigation period may have long latency periods, or have resulted in health effects that were not, at the time, known to be work-related. Illnesses due to toxic substance exposures may only show up in records years later as medical insurance payments on workers' health insurance plans or as a cause of death on a death certificate (e.g. mesothelioma).

IV. CONCLUSIONS

Overall, as reflected by the stated conclusions for each LOI, it is FOH's opinion that the various whistleblower assertions concerning officials at GSA Region 6 and the Goodfellow Federal Center which alleged mismanagement, a waste of funds, abuse of authority, and substantial and specific danger to public/employee health from environmental contamination did, in fact, occur from 2002 through about 2015. Over that period, Goodfellow/Region 6 management exhibited a pattern of ignoring numerous federal regulations, allowing unnecessary, continued and ongoing exposures to employees, tenants and contractors and failed to allocate the resources required to correct site deficiencies. Furthermore, over that period of time, Region 6 leadership did not take responsibility nor were they held accountable for these failures.

That being said, a key finding was that little documentation was found that pointed to actual adverse health effects suffered by GSA personnel or regulatory violations or penalties. No OSHA citations were issued to GSA relating to conditions/work activities at Goodfellow over the study period. Similarly, no documentation was reviewed of environmental-related citations, fines or clean-up orders from the U.S. EPA, state or local regulators.

V. LIMITATIONS

This investigation was performed in accordance with an agreed upon statement of work which defined and limited the scope and level of effort. The findings, interpretations, and conclusions in this report may in part be based on representations by others which have not been verified. Nothing in this report should be construed as offering a medical or legal opinion.

APPENDICES

- APPENDIX 1: Lines of Inquiry, Conclusions and Supporting/Non-Supporting Rationale
- APPENDIX 2: List of Information Sources: Names of Files, Folders and/or Documents
- APPENDIX 3: Summary of OSHA Injury and Illness Recordable Cases-Goodfellow Federal Complex

APPENDIX 1

Lines of Inquiry, Conclusions and Supporting/Non-Supporting Rationale

[Note: Text in *italics* is directly quoted from excerpts of the referenced documents. Text in **bold** brings attention to information which FOH believes directly supports the FOH Conclusion for the respective Line of Inquiry.]

<u>Line of Inquiry #1</u>: Were GSA officials in Region 6 and at Goodfellow aware of potential environmental contamination at Goodfellow since at least 2002?

FOH Conclusion:

GSA officials in Region 6 and at Goodfellow were aware of both potential and actual environmental contamination at Goodfellow since at least 2002.

Supporting Rationale:

- There are numerous documents (most of which deal with asbestos, radon, PCBs and mold) that address contamination or exposures going back to the 1980s.
- In a 1998 email from the GSA Region 6 Industrial Hygienist to the St. Louis West Field Office Director he reports: *I was contacted recently by a Corps of Engineers (COE) guy* (*Internet) indicating they are in the process of organizing environmental responsibility for the 4300 complex (and nearby property) under the BRAC (Military Base Realignment and Closure) program with Atcom moving out.* **Interestingly, the COE is fairly convinced** *there's subsurface contamination at this location...* and *Working with the COE we will eventually (like was done at the Bannister complex with DOE and COE) define areas of responsibility on the Goodfellow complex and ultimately any area deemed GSA responsibility will fall under us for investigation/remediation.*
- The first comprehensive study to describe actual and potential contamination at the Goodfellow site is the Phase 1 Environmental Site Assessment (conducted in 2002 by Marc Enviro Services). It reported the following recognized environmental conditions (REC).
 - The historical SLOP operations on the Site have been investigated by EPA Region VII and a request by EPA will be made in the near future for the GSA to environmentally investigate contamination at the Site. The SLOP facility used considerable volumes of hazardous materials between 1941 and 1944 to fabricate Caliber .30 and Caliber .50 ammunition. Processing issues associated with the manufacturing of the ammunition at the Site include copper, lead, steel, zinc, brass, solvents, acid baths, oil lubrication of cartridges, lubricant cooling in cutting processes, petroleum hydrocarbons, PCBs, lacquer sealant, bullets, primers, and propellants. Solid waste generated included waste oil, metal shavings, wastewater, lead dust, weep (lead waste), any of the aforementioned non-specification raw materials, and flawed ammunition. This historical usage of the Site has not been fully investigated to determine if contamination occurred and to what extent it may have occurred.
 - Powder Storage was located south of Buildings 102, 103, 104, & 105. These propellant storage buildings were removed in the late 1970s during a major renovation of the property where parking lots and streets were constructed.

Approximately 3' to 4' of soil was disturbed in some locations. No off-site disposal of soil was discovered. The buildings were reportedly disposed of off-Site. Evidence that sampling and environmental investigations were conducted prior to demolition of the Powder Storage structures was not found. It is unknown whether explosive residues or propellant materials may have existed in the storage areas prior to building demolition. It is unknown whether grading of the property following removal of the Powder Storage buildings might have contributed to the spreading of explosive residuals over larger areas at the Site.

- The movement of metal shavings from the buildings at the Site, into the transportation containers, and across the Site for transportation to recycling facilities off-Site occurred. The metal shavings were suspected of being contaminated with lubricating oils and possible PCB containing oils. Railroad tracks had exposed soil between the ties causing a potential for releases into the Site. Potential contaminates include PCBs, petroleum hydrocarbons, and metals.
- Many processes occurred in the ammunition production, which would generate wastewater. Considerable washing of cartridges, cleaning of equipment, and cleaning of the facilities generated waste waters with the potential to carry copper, lead, steel, zinc, brass, solvents, acid bath waters, oil lubrication for cartridges, lubricants used in cutting processes, petroleum hydrocarbons, PCBs, lacquer, and explosive residuals into the combined sewer system. The sewer system was constructed in the 1940s and included brick lined manholes. Considerable risks existed for infiltration and ex-filtration through the drain lines and manholes in the sewer system. Sediments were observed in the manholes at the Site. Sediments in the sewer system, soil near the drainage system, and potentially groundwater could be contaminated. Sediment in the sewer system, if cleaned, could be impacted with hazardous characteristics or be classified as listed waste due to past operations at the Site.
- The Lead Shop Building 112 (presently labeled Building 103 F) was used to smelt previously used or discarded lead in order to recycle the material. The blocks of lead were then reused in the bullet production processes. Exhaust outlets existed on the building's southwest corner.
- The electrical Sub Stations Buildings 108 A, 108 B, and 208 B were used for transformers and switchgear. PCB oils were used prior to the 1960s in the electrical equipment on the Site. The buildings have sumps, some of which were verified to be earth lined. Liquid and floatable materials were observed in the sumps in Building 108 A. Evidence from drawings show the 4" oil drain line terminated in the Transformer Room sumps, which had earth floors. All of the Sub Stations are constructed with a similar design.
- The adjoining SLOP and SLAAP facilities were more active in production of munitions than the Site. Based on historical sources, the adjoining facilities had a greater potential to create recognized environmental conditions, as compared to the Site, because the adjoining SLOP and SLAAP facilities treated hazardous waste by destroying munitions components, stored large volumes of hazardous materials, processed explosives into ammunition components, operated ammunition production facilities over a longer period, operated large production facilities that surrounded the Site, and processed large volumes of hazardous materials. The

types of hazardous materials used included copper, lead, steel, zinc, brass, solvents, acid baths, oil lubrication for cartridges, lubricant cooling for cutting processes, petroleum hydrocarbons, PCBs, PAHs, VOCs, lacquer sealant, bullets, primers, and propellants. The adjoining SLOP and SLAAP facilities are sufficiently close to the Site where localized subsurface barriers may greatly impact groundwater direction. Information is not available on localized groundwater direction in the vicinity of the Site and would be required in order to determine how adjoining properties may have impacted the Site.

- The historical operations at the adjoining industrial facility located at 4200 Goodfellow Boulevard included a manufacturing facility, farm sales, and a fork truck business. The operations, which started in 1932, are suspected of utilizing metals, solvents, and petroleum hydrocarbons. Groundwater is suspected to flow down-gradient to the east or toward Building 110 on the Site.
- The Indoor Shooting Range, in the south end of Building 105's basement, was observed with debris and sand inside of the receiving bins for the eight bays. Sand was observed on the floor behind the bins and outside of the shooting gallery structure on the floor. High water level marks appeared on the base of the shooting structure. A clean up of the lead and debris was not conducted prior to abandonment of the shooting range. Fluctuating water levels may have spread the lead dust. Lead contamination may be present on components of the gallery, receiving bins, gallery debris, and the basement floor.
- The natural gas valves and controls located on the southeast corner of the Site are unprotected near the Site's southwest corner chain link fence. A vehicular collision or purposeful breaching of the natural gas station is a risk to the Site.
- The 20,000-gallon and 600-gallon underground storage tanks at the Site were installed in 1998 and appear to have state of the art environmental protections built into the containment system. Records were not observed showing maintenance of the fuel system, testing of the system, or registration of the 20,000-gallon tank with MDNR. The 20,000-gallon UST should be registered with MDNR. Tier II reporting, periodic UST integrity testing, and periodically maintenance to the manufacturer's standards would protect the Site from future non-compliance and environmental risks.
- Tunnels connect the major buildings on the Site and cross north, east, and south to other SLAAP and SLOP areas. The tunnels were used as a utility conduit for various carrier pipelines. The historical use of each and every line and the potential hazardous materials they carried could not be determined. The vast system of tunnels and the associated utility pipes in each tunnel is a concern. Whether the lines carried petroleum or possibly PCB containing oils at earlier periods is unknown. An inventory of all currently unused utility pipes should be conducted to ensure they are fully investigated verifying that contents are known.

[Reference: 2002 Marc Enviro Services Phase I Environmental Site Assessment, 4300 Goodfellow Boulevard, St. Louis, MO 63120, MES Project No. MES-01-2001-0042]

• A Phase 1 Environmental Site Assessment (ESA) by Geotechnology dated 11/21/2006 identified the following recognized environmental conditions (REC) associated with the subject property: (1) The property is listed in the SPILLS database for a leaking tank

line/valve in 1998. An Environmental Data Resources, Inc. (EDR) report noted removal of three diesel USTs. MDNR issued an NFA letter for two USTs (8,000-gallon diesel and 550-gallon waste oil) on 4/13/99. One 20,000-gallon UST remains in use approximately 200 feet northeast of Building 102. (2) Former use as the SLOP beginning in 1941 may have released contaminants including heavy metals such as lead, VOCs, solvents, petroleum hydrocarbons, and PCBs. Identified areas of concern included historical use of Building 102 D as a photo lab (1970s to 1988), absence of off-site disposal records for potentially-impacted soil removed during demolition of propellant storage buildings and in parking lot / street construction (late 1970s), and use of on-site rail lines for transporting metal shavings potentially contaminated with lubricating oils or PCB containing oils. Non-REC conditions identified include: (1) historical use of transformers containing PCB oils, (2) neighboring facilities with environmental issues or industrial activities that could impact soil and groundwater, and (3) chemical containers in the Building 110 maintenance shop. This Phase 1 ESA duplicates much of what was covered by the Marc Enviro Phase 1 ESA conducted in 2002 (see above). [Reference: Final Report, Phase I Environmental Site Assessment, Federal Records Center, 4300 Goodfellow Boulevard, St. Louis, MO 63120, Prepared for Westin E.I.D., Prepared by Geotechnology Inc., November 21, 2006, Project No. 0847601.51DA. Note: Westin E.I.D. is a professional architectural services firm located in St. Louis, MO. It is unclear to FOH who at Goodfellow or Region 6 were the ultimate recipients of this report.

- A 2008 SCS Engineers combined preliminary assessment/site assessment report characterized and evaluated significant site sources, characterized and evaluated significant pathways, evaluated releases and targets exposed to contamination, collected sufficient field data to support the Hazard Ranking System (HRS) and allowed for the completion of an EPA Preliminary Ranking Evaluation Score (PREscore) to be done at a later date, if appropriate. Site activities included soil boring and sample collection, groundwater sample collection, collection of wipe samples, collection of sump water and sediment samples, collection of tunnel water and sediment samples, collection of storm sewer inlet sediment samples, sampling of various waste trenches, vaults, and pits related to site historical use, indoor ambient air monitoring. The report concludes: On the basis of the sampling results and the pathway assessments, the primary contaminants and areas of concern are PCBs in subsurface soil and groundwater near Buildings 108A and 108B; PAHs and metals, particularly lead and arsenic, in abandoned process piping and nearby soil and sediment in Buildings 102, 103F, and 105; and the potential for high dust lead concentrations identified within Buildings 102, 102D, 102E, 103, 103D, 103E, 103F, 104, 104E, 104F, 105, 105E, 105F, 110, 115, and the utility tunnel complex. [Reference: Combined Facility Assessment/Site Inspection Report, Saint Louis Federal Center, 4300 Goodfellow Boulevard, Saint Louis, Missouri, August 2008, SCS Engineers]
- In 2010, PBS contracted for a file review and summary of site conditions at Goodfellow that summarized the results of prior environmental studies of the complex. The study (the Terracon report) reviewed nine prior reports with the objective to summarize in one document past environmental work at the facility and the major environmental issues that remain. Specifically, the GSA desired a document that summarizes the residual contamination issues at the facility. [2010 File Review & Summary of Site Conditions. Former St. Louis Ordnance Plant, 4300 Goodfellow Boulevard, St. Louis, Missouri, Project No. 15107048 by Terracon Consultants, Inc.]

- In 2013 GSA requested that *Tetra Tech characterize occupational risks at the GFC* (Goodfellow Federal Complex) *that may be attributed to onsite legacy contamination associated with former ordnance plant operations.* **Tetra Tech reviewed 100** *environmental reports associated with GFC, and evaluated potential occupational exposures to GSA associates, construction contractors, custodial contractors, operation and maintenance contractors, tenants, and visitors at the GFC.* [Reference: Occupational Exposure Evaluation, General Services Administration, Goodfellow Federal Complex, St. Louis, Missouri, Contract Number GS10F0076K, Order Number GS-06P-10-GX-A-0030/GS-P-06-11-GX-5201, by Tetra Tech, June 2013.]
- Multiple surveys/studies were commissioned by GSA Region 6 Environmental Program Managers between 2002 and 2013. Although the majority of the reports/studies suggested action be taken to protect the safety and health of federal complex personnel working in contaminated spaces (particularly operations and maintenance, GSA facilities operations personnel, and construction workers) no substantial action prior to 2015 by GSA Region 6 Management was taken to inform or protect them. [Note from Appendix A -Contamination in referenced document. [Reference: 2014 Occupational Safety & Health Report (conducted by GSA Building Services Branch) – Annual Building Survey Report.]
- In a 3/5/2020 telephone interview with the then Region 6 Industrial Hygienist it was stated that all major study reports (e.g. the Marc Enviro Phase 1 Site Assessment, and others noted above in Figure 1, Key Documents Cited in this Report) were typically *sent up through the chain of command; from the Building Management Office to the Service Center/Field Office and then to the Regional Office.* He indicated that often after the upward communication of assessments/study reports all he heard was *crickets.*
- In a 4/13/2020 telephone interview with the former director of the Iowa Field Office who was assigned for over a year as Safety and Environmental Program Manager at Goodfellow, he indicated that on one occasion after reviewing reports and observing asbestos contamination at the Goodfellow complex, he went directly to both the Region 6 Public Building Service (PBS) Commissioner and the Goodfellow Service Center Director to describe the very serious situation with asbestos and stated that something needed to be done. No action was taken. [Note: This former director of the Iowa Field Office was brought in to Goodfellow to evaluate safety and environmental programs and conditions at the site and to either validate or disprove prior site and region safety and industrial hygiene inspection findings and recommendations (which were either not believed or not taken seriously by management).]
- In a 4/20/2020 telephone FOH interview with a point of contact who wishes to remain unnamed and not be described by his/her current or former position, he/she stated that prior to 2016 he/she attended **project meetings with management attendees where site contamination was discussed**.
- In a 4/28/2020 telephone interview with the current Region 6 PBS Commissioner, he stated that the 2013 OSH Report by Terracon was contracted for and reviewed by the then Facilities Management Division Program Manager. He indicated that he did not understand why, after the 2013 OSH report was issued, no actions were taken on the findings and recommendations in the report.

Non-supporting Information:

- As part of this LOI, the question is asked whether GSA officials in Region 6 and at Goodfellow were aware of potential environmental contamination at Goodfellow since at least 2002. While there is clear evidence that numerous reports were available documenting actual or potential environmental contamination, there was not always evidence (i.e. report transmittal memos or emails) that the above-referenced reports and notices were communicated to or received by officials in a timely manner. That is, putting aside the verbal statements from the 3/5/2020 telephone interview with the then Region 6 Industrial Hygienist and the 4/13/20 telephone interview with the former director of the Iowa field office cited above, reports obtained by FOH often did not reflect the specific GSA report recipients or their title/position.⁵
- In a 4/21/2020 telephone interview with the current Facilities Management Division Director, he stated that while he generally had knowledge of historical asbestos and lead based paint issues, he was unaware of the reports/studies on environmental contamination until the whistleblower brought them to light and elevated the concerns in 2015.
- Similarly, in a 4/28/2020 telephone interview with the current Region 6 PBS Commissioner, he stated that while he generally had knowledge of historical asbestos and PCB issues (PCBs in transformers), he was unaware of the reports/studies on environmental contamination until they were brought to light September of 2015.

<u>Line of Inquiry #2</u>: What actions, if any, did GSA officials take to notify GSA employees, contractors and tenant agencies about environmental contamination and chemical/exposure hazards in the workplace?

FOH Conclusion:

There was no substantial action taken to notify GSA employees and tenant agencies of hazards present on the Goodfellow complex site prior to 2016. However, there is evidence of some limited notifications made to maintenance and janitorial contractors in 2015.

FOH also concludes that some information provided in 2016 communications to employees was misleading and written to downplay the issue communicated. While site management might have argued that these communications were worded in a manner so as not to unduly alarm employees, tenants and contractors, it is FOH's opinion that the wording was inaccurate and overtly misleading. There is additional anecdotal evidence from interviews that confirm a pattern of suppressing or downplaying risk communications.

Supporting Rationale:

• Contaminated spaces have not been properly posted or communicated to warn employees, tenants, visitors, or contractors of the hazards present. Interviews revealed St. Louis West Field Office managers, field office and regional construction project managers, and regional contracting officers were unaware of facility contamination issues prior to

⁵ 'Officials' are loosely defined by FOH as GSA stakeholders and decision-makers with the authority and budget to effect corrective actions. Unless determined otherwise, for the purpose of this investigation, FOH has assumed that the person who contracted for a given report was the same person who received the report, and that that person is to be considered an official by virtue of his/her ability to contract for the study.

putting together this report. There was no warning signage posted in any contaminated spaces. Field office employee interviews revealed many of the new field office personnel were unaware of any contamination related safety or health issues in the facilities on the complex or any precautions that needed to take when entering contaminated spaces... Regional and field office managers also stated they have not communicated or incorporated the contamination issue to contractors, particularly the Operations and Maintenance Contractor responsible for operating the facilities on the complex. A quick review of several major renovation projects completed within the past five years in facilities with contamination issues revealed project scopes of work did not contain information concerning contaminants or any actions required to protect worker and building tenant safety and health. [Reference: Occupational Safety & Health Report.]

- Multiple surveys/studies were commissioned by GSA Region 6 Environmental Program Managers between 2002 and 2013. Although the majority of the reports/studies suggested action be taken to protect the safety and health of federal complex personnel working in contaminated spaces (particularly operations and maintenance, GSA facilities operations personnel, and construction workers) no substantial action prior to 2015 by GSA Region 6 Management was taken to inform or protect them. [Reference: 2014 Occupational Safety & Health Report (conducted by GSA Building Services Branch) – Annual Building Survey Report, including Appendix A – Contamination.]
- On July 1, 2016, OSHA notified GSA of unsafe working conditions at the Goodfellow complex. Along with other violations, OSHA reported that GSA failed to comply with:
 - 29 CFR 1910.1200(h)(2)(ii): The employer did not provide information to the employees on operations in their work area where hazardous chemicals were present.
 - 29 CFR 1910.1200(h)(2)(iii): The employer did not provide information to the employees as to the location and availability of the written hazard communication program, and material safety data sheets required by 29 CFR 1910.1200.
 [Reference: United States Department of Labor, Occupational Health and Safety Administration, Notice of Unsafe or Unhealthful Working Conditions, Issued to General Services Administration, 4300 Goodfellow Boulevard, St. Louis, Missouri. Inspection Number 1120691, Issued July 1, 2016] Subsequent to this 2016 OSHA Notice, PBS took corrective action to address the citations. These included informing tenants of the hazards, limiting access to some spaces, installing warning signs, and establishing a public electronic reading room for the various studies of the complex. [Reference: February 27, 2017 and July 24, 2018 responses from PBS to OSHA Progress Report -OSHA Inspection Number 1120691]
- In November of 2015, the Region 6 occupational safety and health specialist, when finalizing a report, emailed the GSA industrial hygienist asking, *I am finalizing the Goodfellow report with the contamination findings. Is anyone aware of any projects done to mitigate the contamination in the buildings at Goodfellow. Did we do anything about the lead dust above the suspended ceilings? In researching this issue, I came across another report from OCCU-TEC that had lead wipe samples that showed an issue around window seals and such in office spaces. Did we mitigate any of that? I attached the report. If anyone has any information where we took any action it would be very helpful. I do not want to mis-characterize the magnitude of this issue and I only have access to a small amount of information on the K-drive since the safety folder of (the then industrial*

hygienist) [name redacted] has disappeared. I appreciate any assistance on this...thanks. The response included the following, I personally recall that for the lead dust in the crawlspace and beneath the cafeteria, the cafeteria crawlspace was abated (it had dust and actual lead ingots dating from WWII era), followed by final surface and air sampling, but I can't find any report on that. Leadership in the region was told for other basement, crawlspace areas that tested positive, either procedures had to be in place to access & work in those areas or they needed to be abated. I recall those discussions but don't recall what the regional leadership chose to do. Following this response, the Region 6 occupational health and safety specialist began notifications that there was lead in occupied space.

- [Reported in the second half of 2016] Goodfellow Federal Center Environmental Contamination GSA R6 has now placed strict controls on the contaminated spaces at Goodfellow. No one is allowed in these areas without a Site-Specific Safety Plan that addresses how the job at hand will be safely accomplished. Measures taken not only protect the employees performing the work, but any tenants/other personnel working in the area as well. A communications plan has been developed and the latest information can now be obtained from the GSA public web at http://www.gsa.gov/portal/content/212361. The Region has issued a Goodfellow Site Specific Safety Plan that has mandatory requirements for all GSA employees working at/visiting the site. OSHA has been monitoring the issue and the region has contracted for industrial hygiene oversight to ensure contractors are properly following their Site-Specific Safety Plans. [Reference: Regional Safety Committee Meeting Agenda July December 2016]
- In 2016 the GSA Region 6 Environmental Team began e-mail communications to employees dealing with site's environmental contamination, chemical exposures and indoor air quality. There were no records found of general employee communications prior to these.
 - o In a May 24, 2016 email, the GSA Region 6 Environmental Team reported on the availability of documents in the GSA Goodfellow reading room, (Goodfellow) Federal Center environmental conditions, current activities and planned activities. https://www.gsa.gov/cdnstatic/GSA Stakeholder Memo - Introduction.pdf [Note:_This employee communication includes the statement, The existence of contaminants at the Federal Center stems from building materials (asbestos tile, lead based paint, etc.) used during its construction and early ammunition manufacturing processes starting in 1941. FOH considers this statement to be overtly misleading and written to downplay the risks. The vast majority of contamination was, in fact, due to the deterioration of asbestos insulation as well as other contamination from metallic lead and other materials from ammunition manufacturing. More than 80 individual contaminants have been identified (including lead, arsenic, mercury, cadmium, hexavalent chromium, other heavy metals, asbestos, PCBs, volatile organic compounds (VOCs), and benzo(a)pyrenes). This communication also includes the statement Air samples collected within occupied areas of the buildings have thus far shown asbestos and lead below laboratory detection limits and have not posed exposure concerns for occupants. From the 2016 NIOSH Health Hazard evaluation: In 2016, air sampling for lead and asbestos in the crawlspaces did not detect either substance, but sampling was done while no work was being performed. The whistleblower has

asserted that when air sampling was conducted in occupied spaces there were, likewise, no ongoing activities that would have created dust in those spaces.]

- In a June 6, 2016 email, the GSA Region 6 Environmental Team reported on current activities, whether Goodfellow is a "superfund" site and CERCLA. <u>https://www.gsa.gov/cdnstatic/GSA_Stakeholder_Memo__Superfund.pdf</u>
- In a June 30, 2016 email, the GSA Region 6 Environmental Team reported on the OSHA investigation into lead and dust concentrations in building 104, the mechanical areas of Buildings 103, 104 and 105, and a NIOSH site visit and Health Hazard Evaluation.

https://www.gsa.gov/cdnstatic/GSA Stakeholder Memo - New Information.pdf

In a July 8, 2016 email, the GSA Region 6 Environmental Team reported on the OSHA citation report, actions already taken to address the citations, building 103, 104 and 105 mechanical areas update, a building 104 update and the difference between OSHA and NIOSH.
 https://www.gsa.gou/adaptetia/GSA_Stakeholder_Mama___Updates.pdf

https://www.gsa.gov/cdnstatic/GSA Stakeholder Memo - Updates.pdf

- In a July 15, 2016 email, the GSA Region 6 Environmental Team reported on additional building 104 sampling, the NIOSH letter, and the OSHA citation report. <u>https://www.gsa.gov/cdnstatic/GSA_Stakeholder_Memo_-</u> GEI and NIOSH Letter.pdf
- In a July 29, 2016 email, the GSA Region 6 Environmental Team reported on the NIOSH Health Hazard Evaluation, upcoming all-campus town hall meetings, a building 104 update and the OSHA citation report. https://www.gsa.gov/cdnstatic/GSA_Stakeholder_Memo_-____Town_Hall_Meetings.pdf
- In an August 12, 2016 email, the GSA Region 6 Environmental Team reported on progress on the town hall meetings, upcoming campus activities and a building 104 update.
 <u>Introduction.pdf</u>
- In a September 14, 2016 email, the GSA Region 6 Environmental Team reported on progress on the NIOSH Health Hazard Evaluation, OSHA report citations, indoor air and domestic water sampling, and investigation the outdoor environment. <u>https://www.gsa.gov/cdnstatic/GSA_Stakeholder_Memo_-</u> Indoor Air_Domestic Water_Soil and Groundwater Testing.pdf
- In a September 29, 2016 email, the GSA Region 6 Environmental Team reported on the NIOSH Health Hazard Evaluation report results, progress on the cleanup plan for building interiors, and indoor air and domestic water sampling. <u>https://www.gsa.gov/cdnstatic/GSA_Stakeholder_Memo_-____NIOSH_Final_Recommendations_Update_on_Building_Interiors_Cleanup_Plan_%281%29.pdf</u>
- In a November 30, 2016 email, the GSA Region 6 Environmental Team reported on HVAC testing, and indoor air quality. <u>https://www.gsa.gov/cdnstatic/GSA_Stakeholder_Memo_10.pdf</u>
- Other communications from the Region 6 Environmental Team continue into 2017 and beyond.
- Contract employees of ICE JV performed all maintenance work at the complex. This required routine entry into the crawlspaces, tunnels, and mechanical rooms; and work

above ceiling tiles. We were informed that, **until recently, these contractors were not fully informed of the conditions of the work.** Because of the nature of their work and potential exposures, we recommend that the employees performing maintenance each receive a medical evaluation consisting of a detailed occupational history and a baseline physical examination performed by an occupational medicine physician. [Reference: 2016 NIOSH Health Hazard Evaluation Report, HHE 2016-0152]

- Conversations from an unplanned, chance encounter with a site maintenance employee during FOH's 2/6/2020 site visit, indicated that before 2016 he worked without restrictions in Goodfellow building basements and crawl spaces **never having been informed of the contamination hazards that were present** and not wearing personal protection equipment.
- As rationale for the conclusion that 2016 communications to employees were, in part, misleading and written to downplay the issue communicated, the statement from a May 24, 2016 communication stated, *The existence of contaminants at the Federal Center stems from building materials (asbestos tile, lead based paint, etc.) used during its construction and early ammunition manufacturing processes starting in 1941* when, in fact, the vast majority of contamination was due to the deterioration of asbestos insulation, metallic lead and numerous other materials used in ammunition manufacturing. Also, the public electronic reading room, established after the July 1, 2016, OSHA citation ostensibly to communicate studies of the complex to stakeholders (i.e. employees, tenants, contractors, the union, the community) does not include many pertinent documents relative to site contamination and exposures that, in fact, exist in PBS files.
- As another example of communication that would mislead or downplay an issue, in a 4/17/2020 telephone interview with a former facility operations specialist at the Bannister Federal Complex he indicated that he was told on numerous occasions not to use the words "asbestos" or "ACM (asbestos containing materials)" but rather to use the words "natural mineral fiber". While this occurred at the Bannister Federal Complex it is consistent with misleading communications that occurred at Goodfellow and another symptom of a less than forthcoming culture in Region 6.
- An example of **discouraging frank communication about site contamination**, in a 4/20/2020 telephone interview, a point of contact who wishes to remain unnamed and not be described by his/her current or former position, stated that he/she was told by his/her management "Don't be the person who talks to tenants about issues and "Don't be the guy who talks to the media".
- In the same 4/20/2020 telephone interview, the point of contact who wishes to remain unnamed and not be described by his/her current or former position, stated that in early 2015 a member of the GSA Field Office Management Team assigned him/her to a project that involved entering basements and tunnels. He/she was not warned of the contamination hazards and wore no personal protective equipment. Shortly thereafter the employee found out that the management person who assigned him/her to the project was well aware of the contamination and hazards present.

Non-supporting Information:

• No significant non-supporting information was reviewed.

Line of Inquiry #3: Was access restricted to contaminated areas? When?

FOH Conclusion:

There is evidence that some warning signs were posted at entrances to contaminated basements in 2015; however there was no/little documentation that actual access to contaminated areas was restricted in any significant way prior to 2016.

Supporting Rationale:

- A study of environmental conditions completed in December 2010, identified serious contamination throughout the complex. [2010 File Review & Summary of Site Conditions. Former St. Louis Ordnance Plant, 4300 Goodfellow Boulevard, St. Louis, Missouri, Project No. 15107048 by Terracon Consultants, Inc.] In 2014, a PBS Regional Safety Specialist requested documentation related to contamination at the Goodfellow complex from a PBS regional management official but was not provided any of the relevant studies. The PBS Safety Specialist found the 2010 Terracon study on a Region 6 shared drive in September 2015. PBS subsequently initiated a review of other past studies that had similar findings and took some corrective actions. *These actions included placing warning signs at the entrances to contaminated basements and providing copies of environmental studies to maintenance and janitorial contractors at the complex. However, these steps were not comprehensive.* [Reference: GSA OIG PBS's Identification and Management of Environmental Risks Needs Improvement, Report Number A1310131/P/R/R/15003, March 20, 2015]
- In January 2016, a GSA employee filed a complaint with OSHA about the working conditions at the Goodfellow complex. [Reference: USDOL OSHA Notice of Alleged Safety or Health Hazards, Complaint # 1051686] This led to an OSHA investigation that focused on environmental hazards that could affect worker safety. On July 1, 2016, OSHA notified GSA of unsafe working conditions at the Goodfellow complex and identified seven violations, among them:
 - 29 CFR 1910.1020(e)(2)(i)(A)(l): A record which measures or monitors the amount of a toxic substance or harmful physical agent to which the employee is or has been exposed;

On or about 01/14/2016, the employer did not make measuring and monitoring records available for employees' review. The monitoring results showed presence of lead containing dust on surfaces where they worked; therefore exposing them to lead.

- 29 CFR 1910.1200(h)(2)(ii): The employer did not provide information to the employees on operations in their work area where hazardous chemicals were present.
- 29 CFR 1910.1200(h)(2)(iii): The employer did not provide information to the employees as to the location and availability of the written hazard communication program, and material safety data sheets required by 29 CFR 1910.1200.

[Reference: United States DOL, Occupational Health and Safety Administration, Notice of Unsafe or Unhealthful Working Conditions, Issued to General Services Administration, 4300 Goodfellow Boulevard, St. Louis, Missouri. Inspection Number 1120691, Issued July 1, 2016]

• During an unplanned, chance encounter with a site maintenance employee during FOH's 2/6/2020 site visit, the employee indicated that before 2016 he worked without restrictions in Goodfellow building basements and crawl spaces never having been

informed of the contamination that was present and not wearing personal protection equipment that would protect him.

Non-supporting Information:

• No significant non-supporting information was reviewed.

<u>Line of Inquiry #4</u>: Were recommendations found in assessment reports to mitigate and/or prevent contamination or exposures properly considered (e.g. engineering controls, warning signs, restricted access, PPE, medical surveillance)?

FOH Conclusion:

Recommendations to mitigate and/or prevent contamination or exposures were found in assessment reports. While many assessments listed analytical results only, many reports did include recommendations for engineering and administrative controls, personal protective equipment and/or medical surveillance. In general, FOH considers the recommendations in these reports to be appropriate based on the findings presented. However, given the fact that there is little documentation that hazard abatement actions were generally made in a timely manner between 2002 and about 2015, FOH's conclusion is that GSA officials did not properly consider these report recommendations.

Supporting Rationale:

- Numerous findings from a June 2013 Exposure Investigation by Tetra Tech made recommendations that pertain to occupant health:
 - Crawlspace and basement soil samples from Buildings 103 A/B/C and 104 E identified multiple PAHs concentrations exceeding EPA RSLs for industrial soil, MRBCA RBTLs for non-residential soil, and the IEPA background levels for MSAs. Although crawlspaces and basement areas without flooring are not regularly occupied, workers may occasionally enter these areas to address utility or other building maintenance issues. Recommendation is to implement engineering controls (e.g., capping, PPE requirements) and/or institutional controls (e.g., access restrictions) to prevent occupational exposure to and unauthorized disturbance or dispersion of basement/crawlspace contamination.

In Buildings 103 F (previous 112), 104 A/B/C/D, 105 A/B/C/D, 107, and 110, PCBs were detected in concrete core samples at concentrations exceeding the MRBCA Cleanup Level of 10 ppm. Exceedance factors were significant at Building 104 A/B/C (up to 657.5 times) and Building107 (up to 342.9 times).

Recommendation is to manage continued use and disposal of PCB-contaminated concrete in accordance with 40 CFR 761.30(p), including source removal, surface cleaning, coating or containment, and surface markings. In areas where contamination is identified and occupational exposure is anticipated, recommendation is to follow cleanup and containment actions with collection of indoor air samples for PCB analysis. Removal of PCB-contaminated concrete is prohibited unless disposal accords with 40 CFR 761.61 or 40 CFR 761.79 for

surfaces contaminated by spills, or 40 CFR 761.62 for manufactured porous surfaces.

- Past detections of Aroclor 1260 in Buildings 108 B crawlspace soil have exceeded the industrial RSL and MRBCA DTL. **Recommendation is to implement** engineering controls (e.g., capping, PPE requirements) and/or institutional controls (e.g., access restrictions) to prevent occupational exposure to and unauthorized disturbance or dispersion of basement/crawlspace contamination.
- In Buildings 103 A/B/C, 103 E, 104 E, and 104 F, lead in crawlspace or basement soil samples exceeded EPA RSLs for industrial soil and MRBCA RBTLs for non-residential soil. In Building 105 A/B/C/D, arsenic in crawlspace or basement soil samples exceeded EPA RSLs for industrial soil, MRBCA RBTLs for non-residential soil, and USGS-reported background levels for St. Louis County. Recommendation is to implement engineering controls (e.g., capping, PPE requirements) and/or institutional controls (e.g., access restrictions) to prevent occupational exposure to and unauthorized disturbance or dispersion of basement/crawlspace contamination.
- During the Occupational Exposure Evaluation of Buildings 102 E, 103 A/B/C, 103 D, 103 F (former112), 104 A/B/C/D, 105 A/B/C/D, 105 E, and 105 F, asbestos was detected in basement or crawlspace soil. Recommendation is to implement engineering or institutional controls to prevent occupational exposure to and the unauthorized disturbance or dispersion of basement/crawlspace contamination. Also recommended is revision of the asbestos management plans for these buildings to address asbestos in soil, and to implement and document containment, O&M, and response actions accordingly.
- During the Occupational Exposure Evaluation of Buildings 103 E, 104 E, and 104 F, asbestos was detected in basement or crawlspace soil. Recommendation is to implement engineering or institutional controls to prevent occupational exposure to and the unauthorized disturbance or dispersion of basement/crawlspace contamination. Develop asbestos management plans to address asbestos in soil at these buildings, and to implement and document associated containment, O&M, and response actions accordingly.

[Reference: Tetra Tech Occupational Exposure Evaluation, General Services Administration, Goodfellow Federal Complex, St. Louis, Missouri. Contract Number GS10F0076K, Order Number GS-06P-10-GX-A-0030/GS-P-06-11-GX-5201. June 2013]

The indication of lead concentrations in numerous dust wipe samples that exceeded the HUD clearance levels indicates that there are areas of significant settled lead dust in the affected buildings. However, at the time of the sampling, there was no apparent, obvious source of the lead in the settled dust. Although the lack of detectable concentrations of airborne lead in air samples indicates that there is no immediate threat to human health or the environment, OCCU-TEC would recommend appropriate cleaning procedures (i.e. High Efficiency Particulate Air (HEPA) vacuums, and wet-cleaning methods) in areas of elevated lead dust levels prior to activities that might disturb the settled dust. [Reference: Goodfellow Federal Center Lead Air and Dust Wipe Investigation, Buildings – 102, 103, 103D, 104, 104E, 105, 105E, 105F, and 110, 4300 Goodfellow Boulevard, St. Louis, Missouri 63120, OCCU-TEC Project No. 99006, February 16, 2009]
- A March 2009 follow-up assessment for lead conducted by a GSA industrial hygienist found *three areas with surface lead concentrations above 200 \mu g/ft2:*
 - o Building 103D, Floor 1, Mechanical Room
 - o Building 105F, Basement compressor area
 - o Building 110, Basement, Storage Room

The following recommendations were made: 1. Access to the three affected areas be restricted to authorized personnel whose job function requires them enter these spaces to perform their duties 2. Any individual entering these spaces should be informed of the presence of lead therein and should be further informed of the following hygiene practices to be observed during and after work is performed in these areas: a) Minimal disturbance of surfaces, especially those with visible dust on them (floors, horizontal surfaces). b) Minimization of contact of skin and clothing with surfaces through the use of gloves (when possible) and protective coveralls (removed and appropriately cleaned after use). c) No food in these areas and the strict observance of hand washing after work is completed in these spaces. 3. The contents of these spaces should not be removed until properly decontaminated using approved methods of cleaning. 4. No additional materials should be placed into these areas until the areas have been decontaminated. Should additional materials be placed in these areas, they must be considered to be contaminated. 5. Decontamination of these three areas, and their contents, utilizing proper procedures should be developed and implemented. [FOH notes that this report includes an addendum "Guidelines for Entry into Lead Contaminated Areas of 4300 Goodfellow" which states: Respirators are not required; however, gloves and coveralls should be worn when entering and performing work in these areas. FOH believes that, without conducting an initial determination under the OSHA lead standard or any personal monitoring during work in these spaces, that respirators should have been required.] [Reference: Surface Lead Assessment Follow Up for Selected Areas at The Federal Center 4300 Goodfellow St. Louis, Mo, March 11 and 12, 2009. Performed by GSA, MS IH Heartland Safety & Environmental Team 1500 East Bannister Road (6PFB) Kansas City, Mo 64131]

- Two findings from a November 2003 Site Investigation made recommendations that pertain to occupant health:
 - PCBs exceeding **TSCA Standards for high density human occupancy** were identified from three sample locations in the basement of Building 112. Soil sample concentrations of lead also exceeded MDNR CALM STCs in the basement of Building 112. Additional sampling of the crawl space soils is required to better define the contaminant concentrations at various depths. Recommendations for removal or encapsulation of impacted soils can be made following quantification of the contaminated areas.
 - Analysis of paint sampled in building 104 indicated elevated concentrations of lead. Wipe samples collected from overhead I beams in building 104 indicated elevated concentrations of mercury. Encapsulation of those areas with building materials, or removal of deteriorated surfaces, should mitigate a human health risk associated with these levels.

[Reference: Tetra Tech Environmental Site Investigation Report, Buildings 102, 103, 104 and 112, St. Louis Federal Center, 4300 Goodfellow Boulevard, St. Louis, Missouri. Report Number A170027/P/6/R19002. November 2003, File No. 02200070.19]

Non-Supporting Information:

• The March 2009 follow-up assessment for lead conducted by a GSA industrial hygienist (noted above) found *three areas with surface lead concentrations above 200 µg/ft2t*: This report includes an addendum "Guidelines for Entry into Lead Contaminated Areas of 4300 Goodfellow" which states: *Respirators are not required*; *however*, *gloves and coveralls should be worn when entering and performing work in these areas*. While this addendum is not in the recommendations section of the GSA industrial hygienist's report, FOH believes that, without conducting an initial determination under the OSHA lead standard or any personal monitoring during work (e.g., dust-producing activities) in these spaces, respirators should have been required. Therefore the protective measures to 'mitigate and/or prevent contamination or exposures' recommended in this GSA report are judged <u>not</u> to be properly considered since FOH believes they were not derived logically from the assessment.

[Reference: Surface Lead Assessment Follow Up for Selected Areas at The Federal Center 4300 Goodfellow St. Louis, Mo, March 11 and 12, 2009. Performed by GSA, MS IH Heartland Safety & Environmental Team 1500 East Bannister Road (6PFB) Kansas City, Mo 64131]

• The following reference indicates a remediation that was conducted due to a decommissioning (not as a result of a recommendation in a study): A Small Arms Firing Range (SAFR) Remediation Report, dated March 18, 2003, and prepared by SCS Engineers indicated that a small arms firing range was formerly located in the basement of Building 105. Approximately 36,000 square feet of the basement was under containment during the remediation in which 30 cubic yards of hazardous waste (bullet pit sand, water rinsate, rinsate filters, and miscellaneous material) were removed and disposed. Post-remediation confirmation wipe sampling indicated the remediation was successful. [Reference: 2010 File Review & Summary of Site Conditions. Former St. Louis Ordnance Plant, 4300 Goodfellow Boulevard, St. Louis, Missouri, Project No. 15107048 by Terracon Consultants, Inc.]

<u>Line of Inquiry #5</u>: Were recommendations to mitigate and/or prevent contamination or exposures promptly and effectively followed by GSA, as appropriate?

FOH Conclusion:

Recommendations to mitigate contamination and/or prevent exposures were not promptly or effectively implemented by GSA prior to 2016.

Supporting Rationale:

• There was no documentation found that the recommendations from the March 2009 followup assessment for lead conducted by a GSA industrial hygienist noted in LOI #4 (above) were ever implemented. (See LOI #4 for additional details about what their recommendations were.) [Reference: Surface Lead Assessment Follow Up for Selected Areas at The Federal Center 4300 Goodfellow St. Louis, Mo, March 11 and 12, 2009. Performed by GSA, **Barrene MS** IH Heartland Safety & Environmental Team 1500 East Bannister Road (6PFB) Kansas City, Mo 64131]

- In November of 2015 the Region 6 occupational safety and health specialist, when finalizing a report, emailed the GSA/PBS/FMSP industrial hygienist asking, *I am finalizing* the Goodfellow report with the contamination findings. Is anyone aware of any projects done to mitigate the contamination in the buildings at Goodfellow. Did we do anything about the lead dust above the suspended ceilings? In researching this issue, I came across another report from OCCU-TEC that had lead wipe samples that showed an issue around window seals and such in office spaces. Did we mitigate any of that? I attached the report. If anyone has any information where we took any action it would be very helpful. I do not want to mis-characterize the magnitude of this issue and I only have access to a small amount of information on the K-drive ... I appreciate any assistance on this...thanks. The response included the following: I personally recall that for the lead dust in the crawlspace and beneath the cafeteria, the cafeteria crawlspace was abated (it had dust and actual lead ingots dating from WWII era), followed by final surface and air sampling, but I can't find any report on that. Leadership in the region was told for other basement, crawlspace areas that tested positive, either procedures had to be in place to access & work in those areas or they needed to be abated. I recall those discussions but don't recall what the regional leadership chose to do. Following this response, the Region 6 occupational safety and health specialist began notifications that there was lead in occupied space. [Reference: November 2015 email from the Region 6 occupational safety and health specialist to the GSA/PBS/FMSP industrial hygienist.]
- From the Occu-Tech report noted in LOI #4 above: OCCU-TEC would recommend appropriate cleaning procedures (i.e. High Efficiency Particulate Air (HEPA) vacuums, and wet-cleaning methods) in areas of elevated lead dust levels prior to activities that might disturb the settled dust. FOH found no documentation that the buildings with lead-containing settled dust were cleaned.
- In a 9/29/2016 communication to employees the GSA Region 6 Environmental Team reports: Progress on the Cleanup Plan for Building Interiors: GSA recently contracted Terracon Consultants, Inc., to create a campus-wide remedial action plan to address lead dust and other known contaminants in building interiors. This plan will provide GSA with recommended methods and time frames for cleaning impacted areas like basements, crawl spaces, mechanical rooms and drop-ceiling cavities. Beginning in early October 2016, the contractor will tour each building and conduct additional wipe sampling in the heating, ventilation and air conditioning system. GSA's onsite field office will coordinate contractor access with tenant management. GSA expects to receive the complete remedial action plan by early 2017. FOH notes that these basements, crawl spaces, mechanical rooms and drop-ceiling cavities are among the most highly contaminated building areas and, through 2016 and into 2017, still have not been remediated.
- In a 1/24/2020 telephone interview with the whistleblower he indicated that it was common practice when requests were made for facilities/refurbishment funds, that only half of the requested amount was approved and it was the OSH requirements, fire protection/life safety, and accessibility that was cut out.
- In a 3/5/2020 telephone interview with the then Region 6 Industrial Hygienist it was stated that reports (e.g. the Marc Enviro Phase 1 Site Assessment and other reports noted in Figure 3 above) were typically *sent up through the chain of command; from the Building*

Management Office to the Service Center/Field Office and then to the Regional Office. He indicated that often after the upward communication of assessments/study reports all he heard was *crickets*. In addition, any recommendations to spend money on remediation/corrective actions most always resulted in *pushback*. This corroborates documentation from the interview with the whistleblower.

- In a 4/13/2020 telephone interview with the former director of the Iowa Field Office who was assigned for over a year as Safety and Environmental Program Manager at Goodfellow, he indicated that on one occasion after reviewing reports and observing asbestos contamination at the Goodfellow complex, he went directly to both the Region 6 Public Building Service (PBS) Commissioner and the Goodfellow Service Center Director to describe the very serious situation with asbestos and stated that something needed to be done. No action was taken. [Note: This former director of the Iowa Field Office was brought in to Goodfellow to evaluate safety and environmental programs and conditions at the site and to either validate or disprove prior site and region safety and industrial hygiene inspection findings and recommendations (which were either not believed or not taken seriously by management).]
- In a 4/16/2020 telephone interview with a former Region 6 industrial hygienist he indicated that that Region 6 management could easily authorize up to \$250,000 for additional studies and that many of the newer and repeated studies were in that price range, but when asked by management what it would cost to do a major asbestos renovation project he reported back an estimated cost of \$14 million. He further reported that the annual renovation budget for all of Region 6 was \$20 million and that management would not request those funds from GSA and suffer the resulting negative attention.
- In a 4/17/2020 telephone interview with a former facility operations specialist at the Bannister Federal Complex he indicated that in (approximately) 2013 he was asked to be part of a "Peer to Peer" review at the Goodfellow site. The "Peer to Peer" review was similar to what had been a MARS review (Management Analysis and Review System). At the end of his review week he submitted a large list of findings to the Building Management Specialist for Region 6 who was in charge of MARS and participated in an out brief of his findings. At the out brief meeting, the former facility operations specialist stated that the then Field Office Director over the St. Louis West field office "became livid", "flipped a gasket" and pleaded/implored him to alter his report to change/delete the issues/problems he had found (which he did not do). Nevertheless, when the final report was issued several weeks later it had been largely redacted and expunged of relevant findings.
- In a 4/28/2020 telephone interview with the current Region 6 PBS Commissioner, he indicated that *he did not understand why, after the 2013 OSH report was issued* (Occupational Exposure Evaluation, Goodfellow Federal Complex, St. Louis, Missouri, by Tetra Tech, June 2013) *no actions were taken on the findings and recommendation in the report*. He indicated that this report was contracted for and reviewed by the then Facilities Management Division Program Manager.

Non-supporting Information:

• In the 3/5/2020 telephone interview with the then Region 6 Industrial Hygienist it was stated that there was some complex-wide asbestos abatement in basements and crawl spaces in the late 1980's. FOH found no records to support this assertion but, according to the interviewee, this might be due to the abatement contractor retaining their own records,

or because of an archaic GSA paper file recordkeeping system. FOH notes that even if there was some site-wide asbestos remediation, there were clearly significant amounts of asbestos materials still present on the site.

 A 2012 OCCU-TEC report documents asbestos insulation removal from the basement crawl space in Building 107. [Reference: Asbestos Abatement Closeout Report – Goodfellow - Building 107 St. Louis MO (MO0602AF) October 23, 2012

<u>Line of Inquiry #6</u>: To what extent did GSA PBS take action to address environmental, safety and health shortcomings identified in GSA OIG reports (pertaining to other GSA facilities) and improve its environmental risk management policies nationwide, to include Region 6 and Goodfellow? Have policies and procedures been finalized, adopted and effectively implemented?

FOH Conclusion:

There is no documentation that, prior to 2016, GSA PBS had significantly improved its environmental risk management policies and environmental management systems nationwide as a result of shortcomings identified in GSA OIG reports pertaining to other GSA facilities (e.g. Bannister). GSA OIG first noted deficiencies in PBS Environmental Program Management in 2000; these were largely uncorrected in 2006. Safety and environmental management systems deficiencies found in the 2010 GSA OIG report of health and safety conditions at the Bannister Federal Complex were also found in the 2015 report on PBS's environmental risk management practices. Further, the same deficient environmental management system that resulted in failures to correct site contamination is evident at both Goodfellow and the Bannister Federal Complex. [This conclusion applies to the period of FOH's review, i.e., "2002 to about 2015". There is documentation that some improvements were made starting in 2016 (and again in 2019).]

Supporting Rationale:

• In March of 2006 GSA OIG conducted a Review of the PBS Environment Program Management Report Number A050040/P/4/R06003. This report references an earlier study and states, *The OIG audit of the environmental management program conducted in 2000 recommended the agency develop reporting procedures, performance measures, or other methodologies to ensure the Environment Program is effectively implemented in the regions. The agency's response to the recommendation was that a national EMS was being developed that would incorporate each of the suggested components and would be completed in 2000. This was not done; however, in 2003 the Denver Federal Center (DFC) EMS pilot project was initiated and was used as the basis for the development of the national framework. The EMS was not completed until five years after it was originally planned. We are concerned with the minimal progress achieved in EMS implementation since our 2000 audit.*

[Reference: GSA OIG 2006 Review of the PBS Environment Program Management, Report Number A050040/P/4/R06003, March 28, 2006]

• [GSA OIG] has previously reported on serious concerns over the management of PBS's environmental program. For example, in November 2010, [GSA OIG] issued a report entitled, Review of A170027/P/6/R19002 Health and Safety Conditions at the Bannister

Federal Complex, Kansas City, Missouri. This report noted: **PBS** did not always take appropriate steps to protect the health and safety of the occupants at the Complex when presented with evidence of potential hazards. In addition, PBS environmental personnel provided incorrect and misleading information in response to questions about the environmental conditions at the Complex. PBS personnel also did not have a clear understanding of environmental responsibilities pertaining to the GSA-controlled portion of the Complex and did not adequately document or maintain files related to health and safety conditions at the Complex.

- In response to the 2010 report findings, PBS stated that it was 'currently organizing and cataloging all historical tests conducted within GSA-managed space.' In addition, PBS agreed with the audit recommendations and stated it was developing an action plan that outlines clear responsibilities within the safety and environmental group. However, during the course of our audit of the Goodfellow complex, [GSA OIG] found continued deficiencies in the manner in which PBS documented and maintained information related to the environmental hazards at the complex. For example, as noted previously, a PBS regional management official did not provide a June 2013 study that detailed environmental hazards throughout the complex to a PBS Regional Safety Specialist. The environmental staff found this study in 2015, but PBS did not fully address the hazards identified in the study until after OSHA began its investigation in 2016. [Reference: GSA OIG Audit of Environmental Issues at the Goodfellow Federal Complex in St. Louis, Missouri. Report Number A170027/P/6/R19002. March 15, 2019]
- In March 2015, GSA OIG issued a report on PBS's environmental risk management practices, which identified deficiencies in PBS's policies and procedures. Among other things, GSA OIG reported that PBS 'did not have formal policy in place governing the conduct and use of environmental compliance audits, and environmental management practices were inconsistently implemented across PBS regional offices due to a lack of policy.' These deficiencies prevented PBS from effectively monitoring and overseeing environmental risks across its portfolio of buildings. In response to the report, PBS stated that it would update its national policies to provide guidance on environmental risks. [Reference: GSA OIG Audit - PBS's Identification and Environmental Improvement. Management of Risks Need Report Number A130131/P/R/R15003. March 20, 2019] To date, FOH understands that the primary policy is still in draft form. FOH has no evidence that this policy has been finalized or issued.
- In March 2017, GSA OIG issued an implementation review of the management actions taken in response to the recommendations contained in PBS's Identification and Management of Environmental Risks Need Improvement, Report Number A130131/P/R/R15003 (dated March 20, 2015) as noted in the bullet above. The implementation review determined that PBS has taken appropriate corrective actions to address the recommendations... and.... determined that no further action is necessary. [Reference: GSA OIG Implementation Review of Action Plan PBS's Identification and Management of Environmental Risks Need Improvement. Report Number A130131/P/R/R15003. Assignment Number A17008. March 6, 2017]

Non-supporting Information:

From the last bullet above: The implementation review determined that PBS has taken appropriate corrective actions to address the recommendations... and.... determined that no further action is necessary. [Reference: GSA OIG Implementation Review of Action Plan - PBS's Identification and Management of Environmental Risks Need Improvement. Report Number A130131/P/R/R15003. March 6, 2017] This review determined that PBS has taken appropriate corrective actions to address the recommendations....., however, FOH notes that a corrective action plan (CAP) response to the GSA OIG Audit of Environmental Issues at the Goodfellow Federal Complex in St. Louis, Missouri [Report Number A170027/P/6/R19002 dated March 15, 2019] shows that corrective actions for management system findings were addressed in late 2019. This casts some doubt on the accuracy of the 2017 determination.

<u>Line of Inquiry #7:</u> Were conflicts of interest apparent in terms of those persons performing the assessments, interpreting the findings, or recommending corrective measures?

FOH Conclusion:

FOH found no evidence of conflict of interest with respect to consultants and contractors who performed the assessments, interpreted the findings, or recommended corrective measures.

Supporting Rationale:

• No conflicts of interest were apparent from the document search or interviews, including discussions with the whistleblower. [Note: FOH did not consider it to be a conflict of interest for a contractor/consultant to make recommendations in a report that might lead to additional work.]

Non-Supporting Information:

• No significant non-supporting information was reviewed.

<u>Line of Inquiry #8</u>: Were conflicts of interest apparent in terms of those persons providing resources/budget for implementation of corrective actions, and managing their implementation? Are conflicts of interest apparent insofar as those currently responsible for correcting past failures are the same individuals who were responsible for creating the failures and subsequently neglecting to correct them, despite assurances otherwise?

FOH Conclusion:

While some of those in management who are currently responsible for correcting past failures are the same individuals who at some point in time neglected to correct them, no conclusive documentation was reviewed that proves that there was any significant, wrongful, purposeful motivation for personal gain (financial or otherwise).⁶ Often those in management who created the failures by neglecting corrective actions and compliance with federal regulations were predecessors to the current management team. While FOH does not find an apparent conflict of interest, it does find significant pattern of ongoing, self-perpetuating management defects including a lack of oversight by and requirements/orders from the GSA central office, the site/region's deficient environmental management systems, their management culture and history of non-compliance, "group think", a disbelief/discounting of the opinions and recommendations of subject matter experts, absent or overtly misleading hazard communication and a poor performance incentive system (especially with Tenant Satisfaction Surveys being the major metric for evaluating management performance). Several GSA contacts indicated that the Tenant Satisfaction Survey tended to work as a perverse incentive for GSA officials to not identify, communicate or correct workplace hazards due to the perceived potential for tenant awareness of such environmental, safety and health issues to lessen tenant satisfaction and thereby negatively affect GSA officials' performance reviews. Satisfaction might be impacted by, for example, tenant concerns about impacts to their employees' perception of safety, morale, and potential impacts to tenant space and productivity.

Supporting Rationale:

- Except for allegations and formal complaints by the whistleblower, there is no mention of conflicts of interest in the information provided to FOH.
- From 2002 to about 2015, personnel referenced in whistleblower complaints and other site management held key positions with the authority and responsibility to correct site deficiencies. Some of these individuals who are currently responsible for correcting past failures are the same individuals who neglected to correct them. Historically, the Region 6 management team (the current team as well as predecessors to the current team) has consistently failed to remediate site contamination, comply with numerous federal requirements and prevent unnecessary exposures to lead, asbestos and other toxic substances. These individuals had responsibilities for budgeting and allocating resources as well as managing the implementation of corrective actions.
- In general, it seems that management's inclination was to not spend very large sums of money to remediate contamination that would bring negative attention to the organization, site and region. Rather, management would opt to maintain high tenant satisfaction survey results by not communicating hazards to tenants and therefore possibly receive higher performance review ratings. Over time, this behavior could be reinforced throughout the management chain and become in conflict with the primary responsibilities of remediating environmental contamination, complying with federal regulations and protecting the health and safety of employees, tenants, contractors and visitors.

⁶ FOH is interpreting the term "conflict of interest" in its common usage in describing an ethical/situational conflict of interest. Wikipedia provides as a widely used definition: "A conflict of interest is a set of circumstances that creates a risk that professional judgement or actions regarding a primary interest will be unduly influenced by a secondary interest." Primary interest refers to the principal goals of the profession or activity, such as the protection of clients, the health of patients, the integrity of research, and the duties of public officer. Secondary interest includes personal benefit and is not limited to only financial gain but also such motives as the desire for professional advancement, or the wish to do favors for family and friends. These secondary interests are not treated as wrong in and of themselves, but become objectionable when they are believed to have greater weight than the primary interests. There is no attempt to ascribe any legal connotation to this phrase. Per FOH's agreement with GSA and the Statement of Work for this effort, FOH is not providing information that would be construed as a legal opinion.

- In the letter dated July 10, 2019, issued to the Administrator of the General Services Administration (GSA) from the U.S. Office of Special Counsel (OSC) regarding OSC File No. DI-19-3713, the OSC summarizes various whistleblower allegations including one concerning officials at GSA Region 6 and the Goodfellow Federal Center. The OSC letter states that, *many of the individuals currently responsible for correcting these failures are the same individuals who were responsible for both creating the failures and subsequently neglecting to correct them, despite assurances otherwise.*
- GSA OIG reports document deficient environmental management systems in GSA Region 6 and Goodfellow since 2000. [Audit of PBS' Environmental Management Program, Report Number A995196/P/H/R00008, February 16, 2000; 2006 GSA OIG Review of the PBS Environment Program Management, Report Number A050040/P/4/R06003, March 28, 2006; 2010 GSA OIG Review of Health and Safety Conditions at the Bannister Federal Complex, Kansas City, Missouri, Report Number A170027/P/6/R19002; GSA OIG Audit - PBS's Identification and Management of Environmental Risks Need Improvement. Report Number A130131/P/R/R15003. March 20, 2015].
- In a 4/13/2020 telephone interview with the former director of the Iowa Field Office who was assigned for over a year as Safety and Environmental Program Manager at Goodfellow, he indicated that on one occasion after reviewing reports and observing asbestos contamination at the Goodfellow complex, he went directly to both the Region 6 Public Building Service (PBS) Commissioner and the Goodfellow Service Center Director to describe the very serious situation with asbestos and stated that something needed to be done. No action was taken. [Note: This former director of the Iowa Field Office was brought in to Goodfellow to evaluate safety and environmental programs and conditions at the site and to either validate or disprove prior site and region safety and industrial hygiene inspection findings and recommendations (which were either not believed or not taken seriously by management).]
- In a 4/17/2020 telephone interview with a former facility operations specialist at the Bannister Federal Complex he indicated that in (approximately) 2013 he was asked to be part of a "Peer to Peer" review at the Goodfellow site. The "Peer to Peer" review was similar to what had been a MARS review (Management Analysis and Review System). At the end of his review week he submitted his findings to the Building Management Specialist for Region 6 who was in charge of MARS and participated in an out brief of his findings. At the out brief meeting, the former facility operations specialist stated that the then Field Office Director over the St. Louis West field office "became livid", "flipped a gasket" and pleaded/implored him to alter his report to change/delete the issues/problems he had found (which he did not do). Nevertheless, when the final report was issued several weeks later it had been largely redacted and expunged of relevant findings. [FOH notes that this is consistent with the region's management culture, their history of non-compliance, "group think" and an institutional understanding that management did not want to hear bad news.]
- An example of **discouraging frank communication about site contamination**, in a 4/20/2020 telephone interview, a point of contact who wishes to remain unnamed and not be described by his current or former position, stated that **he was told by his management** "Don't be the person who talks to tenants about issues" and "Don't be the guy who talks to the media". [FOH notes that this is consistent with the region's management culture,

their history of non-compliance, "group think" and an institutional understanding that management did not want tenants and other stakeholders to hear bad news.]

Non-supporting Information:

• No significant non-supporting information was reviewed.

Line of Inquiry #9: Were tests and studies duplicative, unnecessary or wasteful?

FOH Conclusion:

While some repeat sampling and studies were necessary to better define risks/exposures over time and/or to define where remediation was necessary, the weight of the data support the conclusion that there were a substantial number of studies that were duplicative and unnecessary and, therefore, wasteful. The resources that were expended for duplicate and unnecessary studies would have, if diverted for use in site remediation, reduced site contamination and helped prevent employee, contractor, tenant and visitor exposures to site contaminants.

Supporting Rationale:

- The first comprehensive study to describe actual and potential contamination at the Goodfellow site is the Phase 1 Environmental Site Assessment conducted in 2002 by Marc Enviro Services. (Findings of this study are summarized in Line of Inquiry #1, above.)
- Another Phase 1 Environmental Site Assessment (ESA) was performed in 2006. The • Geotechnology report dated 11/21/2006 identified the following recognized environmental conditions (REC) associated with the subject property: (1) The property is listed in the SPILLS database for a leaking tank line/valve in 1998. An Environmental Data Resources, Inc. (EDR) report noted removal of three diesel USTs. MDNR issued an NFA letter for two USTs (8,000-gallon diesel and 550-gallon waste oil) on 4/13/99. One 20,000-gallon UST remains in use approximately 200 feet northeast of Building 102. (2) Former use as the SLOP beginning in 1941 may have released contaminants including heavy metals such as lead, VOCs, solvents, petroleum hydrocarbons, and PCBs. Identified areas of concern included historical use of Building 102 D as a photo lab (1970s to 1988), absence of offsite disposal records for potentially-impacted soil removed during demolition of propellant storage buildings and in parking lot / street construction (late 1970s), and use of on-site rail lines for transporting metal shavings potentially contaminated with lubricating oils or PCB containing oils. Non-REC conditions identified include: (1) historical use of transformers containing PCB oils, (2) neighboring facilities with environmental issues or industrial activities that could impact soil and groundwater, and (3) chemical containers in the Building 110 maintenance shop. This Phase 1 ESA duplicates much of what was covered by the Marc Enviro Phase 1 ESA conducted in 2002. [Reference: Final Report, Phase I Environmental Site Assessment, Federal Records Center, 4300 Goodfellow Boulevard, St. Louis, MO 63120, Prepared for Westin E.I.D., Prepared by Geotechnology Inc., Project No. 0847601.51DA. Note: Westin E.I.D. is a professional architectural services firm located in St. Louis, MO.] It is unclear who the ultimate recipient was at GSA.
- A 2010 file review and summary of site conditions completed in December 2010, identified serious contamination throughout the complex. [2010 File Review & Summary of Site

Conditions. Former St. Louis Ordnance Plant, 4300 Goodfellow Boulevard, St. Louis, Missouri, Project No. 15107048 by Terracon Consultants, Inc.]

- An August 2008 study documented the presence of lead materials in buildings 103D, 105F, and 110. Environmental studies of the buildings conducted in March 2009 and June 2013 identified concentrations of lead that exceeded GSA's acceptable criteria. Similarly, tests of the complex's building that housed the childcare center were conducted in November 2003, March 2006, and August 2008, and identified the presence of lead paint and excessive lead levels. [Goodfellow Federal Center Lead Air and Dust Wipe Investigation, Buildings 102, 103, 103D, 1Reference: 04, 104E, 105, 105E, 105F, and 110, 4300 Goodfellow Boulevard, St. Louis, Missouri 63120, OCCU-TEC Project No. 99006, February 16, 2009; 2010 File Review & Summary of Site Conditions. Former St. Louis Ordnance Plant, 4300 Goodfellow Boulevard, St. Louis, Missouri, Project No. 15107048 by Terracon Consultants, Inc; Occupational Exposure Evaluation, General Services Administration, Goodfellow Federal Complex, St. Louis, Missouri, Contract Number GS10F0076K, Order Number GS-06P-10-GX-A-0030/GS-P-06-11-GX-5201, by Tetra Tech, June 2013.]
- The information previously presented in Figure 3, Timeline of Major Activities, shows numerous studies, GSA OIG reports and whistleblower and union complaints. From 2002 through 2016, Region 6 contracted and paid for over 30 studies estimated to cost over \$1.9 million that evaluated environmental contamination at the Goodfellow complex. The studies clearly indicated that there was significant contamination throughout the complex and many of studies duplicated much of what was in previous studies. These studies identified over 80 individual contaminants including lead, arsenic, other heavy metals, asbestos, PCBs, volatile organic compounds (VOCs), and benzo(a)pyrenes. Despite the evidence found in these numerous studies, there was little done to correct deficiencies related to site contamination and subsequent exposures. *PBS's approach of conducting* duplicative studies instead of taking action to remediate the hazardous contamination or prevent access to contaminated areas endangered the health of people at the complex and wasted taxpayer money. [Reference: GSA OIG Audit of Environmental Issues at the Goodfellow Federal Complex in St. Louis, Missouri. Report Number A170027/P/6/R19002. March 15, 2019]
- In an interview with the whistleblower on 1/8/2020, it was alleged that GSA management's slow response (or failure) to take actions to correct/remediate contamination and exposure conditions was due to cost. He further asserts that this was consistent with a culture that pervaded not just Region 6, but all of GSA.
- In a 4/16/2020 interview with a former Region 6 industrial hygienist he indicated that that **Region 6 management could easily authorize \$250,000 for additional studies and that several of the newer and repeated studies were in that price range**, but when asked by management what it would cost to do a major asbestos renovation project he reported back an estimated cost of \$14 million. He further reported that the annual renovation budget for all of Region 6 was \$20 million and that management would not request those funds from GSA and suffer the resulting negative attention.
- In a 4/21/2020 telephone interview with the current Facilities Management Division Director, when asked to describe the thought process that went into doing all of additional studies, he indicated that he was not involved in that decision making and that there were different branch managers and directors (who made those decisions) back then.

Non-supporting Information:

 PCBs exceeding TSCA Standards for high density human occupancy were identified from three sample locations in the basement of Building 112. Soil sample concentrations of lead also exceeded MDNR CALM STCs in the basement of Building 112. Additional sampling of the crawl space soils is required to better define the contaminant concentrations at various depths. Recommendations for removal or encapsulation of impacted soils can be made following quantification of the contaminated areas. This recommendation for additional sampling is to better define the risk and would not be considered duplicative. [Reference: Tetra Tech Environmental Site Investigation Report, Buildings 102, 103, 104 and 112, St. Louis Federal Center, 4300 Goodfellow Boulevard, St. Louis, Missouri. Report Number A170027/P/6/R19002. November 2003, File No. 02200070.19]

<u>Line of Inquiry #10</u>: When the GSA/Goodfellow management was made aware of environmental contamination and/or potential community or workplace exposures, which federal regulations (EPA, OSHA, others) were in place such that, if complied with, contamination/exposures would likely not have occurred or would have been mitigated?

FOH Conclusion:

At the time GSA/Goodfellow management was made aware of environmental contamination and/or potential community or workplace exposures, there were numerous federal regulations in place that, if complied with, would have helped prevent or mitigate exposures. In particular, if personal exposure monitoring, hazard assessments (e.g., job hazard analyses) and training was performed in accordance with applicable lead, asbestos, hazard communication, and other standards during contractors' and maintenance employees' work in basements, tunnel crawl spaces beginning in 2002 (or earlier), it would likely have led to a more timely use of stringent protective controls including personal protective equipment, engineering/administrative controls and medical screening to monitor workers' health over time. Corrective actions should have been initiated within 30 days of receipt of environmental reports that indicated contamination or hazardous conditions. For the most part, abatement of environmental contamination, requirements for personal protective equipment usage, training, and medical surveillance for lead and asbestos exposed employees did not begin until 2016.

Supporting Rationale:

- 29 CFR 1960.34 (Basic Program Elements for Federal Employees OSHA)
 - 1960.34(a)(6): Abate unsafe or unhealthful conditions disclosed by reports, investigation or inspection within 30 calendar days or submit to the occupant agency's designated liaison official an abatement plan. Such abatement plan shall give priority to the allocation of resources to bring about prompt abatement of the conditions. (GSA shall publish procedures for abatement of hazards in the Federal Property Management Regulations—41 CFR part 101);
 - 1960.34(a)(2): *Provide space which*:
 - 1960.34(a)(2)(i) Meets any special safety and health requirements submitted by the requesting agency, and

- 1960.34(a)(2)(ii) Does not contain either serious hazards or serious violations of OSHA standards or approved alternate standards which cannot be abated;
- 41 CFR 102: Federal Property Management Regulations System Federal Management Regulation
 - 41 CFR §102-80.30 What are Federal agencies' responsibilities concerning lead? Federal agencies have the following responsibilities concerning lead in buildings:

(a) Test space for lead-based paint in renovation projects that require sanding, welding or scraping painted surfaces.

(b) Not remove lead-based paint from surfaces in good condition.

(c) Test all painted surfaces for lead in proposed or existing childcare centers.

(d) Abate lead-based paint found in accordance with U.S. Department of Housing and Urban Development (HUD) Lead-Based Paint Guidelines.

(e) Test potable water for lead in all drinking water outlets.

(f) Take corrective action when lead levels exceed the HUD Guidelines.

[FOH note: Section 102-80.30 refers to requirements when lead-based paint is present in federal buildings. It should be inferred that the requirement to abate to HUD Guidelines applies equally to the metallic lead contamination found in Goodfellow.]

• 41 CFR §102-80.55 Are Federal agencies responsible for managing the execution of risk reduction projects?

Yes, Federal agencies must manage the execution of risk reduction projects in buildings they operate. Federal agencies must identify and take appropriate action to eliminate hazards and regulatory noncompliance.

• 41 CFR §102-80.80 With what general accident and fire prevention policy must Federal agencies comply? Federal agencies must—

Comply with the occupational safety and health standards established in the Occupational Safety and Health Act of 1970 (Pub. L. 91-596); Executive Order 12196; 29 CFR part 1960; and applicable safety and environmental management criteria identified in this part; Not expose occupants and visitors to unnecessary risks; Provide safeguards that minimize personal harm, property damage, and impairment of Governmental operations, and that allow emergency forces to accomplish their missions effectively; Follow accepted fire prevention practices in operating and managing buildings; To the maximum extent feasible, comply with one of the nationally recognized model building codes and with other nationally recognized codes in their construction or alteration of each building in accordance with 40 U.S.C. 3312; and Use the applicable national codes and standards as a guide for their building operations.

- 29 CFR 1910 (OSHA Standards) including:
- The OSHA lead standard 29 CFR 1910.1025 (promulgated November 14, 1978). Includes the following:
 - 1910.1025(d)(2) Initial determination. Each employer who has a workplace or work operation covered by this standard shall determine if any employee may be exposed to lead at or above the action level. [FOH found no documentation that an

initial determination was made. If personal monitoring was conducted for lead when work was being performed in contaminated basements, tunnels or crawl spaces it is likely that the results would have resulted in a positive initial determine which would trigger other provisions of the standard including employee notifications, training, respiratory protection and medical surveillance.] Also, 1910.1025(h)(1) Surfaces. All surfaces shall be maintained as free as practicable of accumulations of lead.

- OSHA Asbestos Standard 29 CFR1910.1001 (originally promulgated in June of 1972 and amended to its current form in August of 1994). Includes the following:
 - 1910.1001(c)(1) Time-weighted average limit (TWA). The employer shall ensure that no employee is exposed to an airborne concentration of asbestos in excess of 0.1 fiber per cubic centimeter of air as an eight (8)-hour time-weighted average (TWA) as determined by the method prescribed in Appendix A to this section, or by an equivalent method.
 - 1910.1001(c)(2) Excursion limit. The employer shall ensure that no employee is exposed to an airborne concentration of asbestos in excess of 1.0 fiber per cubic centimeter of air (1 f/cc) as averaged over a sampling period of thirty (30) minutes as determined by the method prescribed in Appendix A to this section, or by an equivalent method.
 - 1910.1001(d)(1)(i) Determinations of employee exposure shall be made from breathing zone air samples that are representative of the 8-hour TWA and 30-minute short-term exposures of each employee.
 - 1910.1001(e)(1) Establishment. **The employer shall establish regulated areas** wherever airborne concentrations of asbestos and/or PACM are in excess of the TWA and/or excursion limit prescribed in paragraph (c) of this section.
 - 1910.1001(e)(2) Demarcation. Regulated areas shall be demarcated from the rest of the workplace in any manner that minimizes the number of persons who will be exposed to asbestos.
 - 1910.1001(e)(3) Access. Access to regulated areas shall be limited to authorized persons or to persons authorized by the Act or regulations issued pursuant thereto.
 - Numerous additional requirements including those for respiratory protection, protective work clothing, change rooms, communication of hazards, warning signs, housekeeping and medical surveillance.
- The OSHA Personal Protective Equipment Standard. 29 CFR1910.132 (current version issued April of 1994). Includes the following:
 - 1910.132(d)(1) The employer shall assess the workplace to determine if hazards are present, or are likely to be present, which necessitate the use of personal protective equipment (PPE). If such hazards are present, or likely to be present, the employer shall:
 - 1910.132(d)(1)(i) Select, and have each affected employee use, the types of PPE that will protect the affected employee from the hazards identified in the hazard assessment;
 - **1910.132(d)(1)(ii)** Communicate selection decisions to each affected employee; and,
 - 1910.132(d)(1)(iii) Select PPE that properly fits each affected employee.

• 1910.132(d)(2) The employer shall verify that the required workplace hazard assessment has been performed through a written certification that identifies the workplace evaluated; the person certifying that the evaluation has been performed; the date(s) of the hazard assessment; and, which identifies the document as a certification of hazard assessment.

Non-supporting Information:

- By the early 2000's any remaining GSA Central Office facility EHS&F (environmental, health, safety and fire protection) requirements had expired and the OSH Order had been reduced to a generic and ineffectual policy.
 - PBS P 5900.2C "GSA Safety and Environmental Management Program" dated August 2, 1988, contained the environmental, health, safety and fire protection (EHS&F) requirements for GSA as an owner/operator (a.k.a. "facility EHS&F") and the safety and health requirements for GSA as an employer (a.k.a. "OSH"). This was quite a comprehensive and lengthy document amounting to nearly 700 pages.
 - PBS P 5900.2C was cancelled ca. 1991 and replaced with interim guidance.
 - The EHS&F material was reduced significantly and issued as an Instructional Letter ca. 1992. During that time the occupational safety and health (OSH) requirements were extracted and re-issued as a PBS Order ADM P 5940.1 "GSA Occupational Safety and Health Program". The OSH Order was accompanied by a companion handbook titled "A Compendium of Occupational Safety and Health Procedures and Training Materials for GSA Managers and Supervisors".
 - In 1995 the extisting facility EHS&F material was subsumed into the "Property Management Business Practice Handbook" PBS P 5800.36A. This Order expired sometime in the 2000's (exact date uncertain).
 - ADM P 5940.1 was revised in 2003 without the "Compendium" as a smaller and less-specific PBS Order ADM 5940.1A. So, by the early 2000's any remaining GSA Central Office facility EHS&F requirements had expired and the OSH Order had been reduced to a generic and ineffectual policy.
 - Finally, in 2019, the OSH Order was re-issued as a specific and meaningful GSA Order as ADM 5940.2. Also in 2019, the facility EHS&F requirements were completely re-written into a comprehensive and specific PBS Order 5940.3.

<u>Line of Inquiry #11</u>: Were explosives stored in GSA facilities that house childcare centers? Type? Risk posed?

FOH Conclusion:

Explosive materials were stored in GSA facilities that housed childcare centers. However, FOH agrees with OSHA's determination that the explosive materials stored in buildings in Region 6 did not constitute an undue risk. The explosives in question were canine explosive detection training aids that were stored in a locked magazine in a locked room. However, the "optics" of the perceived risk of storing these materials in the same building as a childcare center, could, on balance, bias towards considering this an incompatible occupancy. [It should be noted that these

materials were brought into Region 6 buildings without notification to occupational safety and health staff or an evaluation of whether an incompatible occupancy could exist.]

Supporting Rationale:

- K9 Explosive Training Kits in Federal Buildings We discovered several federal law enforcement agencies have been storing high explosives in several of our buildings as part of their bomb dog training kits. GSA was not provided with complete information on exactly what is being stored, the quantity of material being stored, and exactly where and how the materials are being stored. OSHA concluded an inspection on this issue and found the explosives were properly stored and in compliance with all applicable regulations. This item is closed. (This concern was first raised in 2013.) [Reference: Regional Safety Committee Meeting Agenda, July December 2016]
- From the OSHA website: OSHA 29CFR 1910.109(b)(1) 'General hazard.' No person shall store, handle, or transport explosives or blasting agents when such storage, handling, and transportation of explosives or blasting agents constitute an undue hazard to life.
- FOH confirmed with the whistleblower that the only "high explosives" materials referred to in his complaint were canine explosion detection training aids and that they were stored in a locked magazine in a locked room. More specifically, the whistleblower complaint stated that explosive materials were stored in GSA facilities that house childcare centers in both the Richard Bolling Federal Building in Kansas City, Missouri and the Robert A. Young Federal Building in St. Louis, Missouri. In a 2/6/2020 interview, he indicated that "explosives" referred to canine explosive detection training aids and that these were of the type that could explode if detonated. There was no allegation of explosives storage at the childcare facility at Goodfellow. During the 2/6/2020 site visit the whistleblower also indicated that the explosive storage magazine was not explosion proof (based on his research on the manufacturer's web site) even though the law enforcement staff that controlled the canine training aids said the magazine was required, only that the materials be stored in a manner that does not present an undue hazard to life.
- In 2013, Region 6 occupational safety and health staff became aware that several federal law enforcement agencies have been storing canine explosive detection training aids in several buildings. Attempts were made to determine what explosives were stored, their quantities and how they were stored. [Reference: End-of Year 2013 Regional OSH Committee Meeting Minutes] In 2016 OSHA concluded an inspection on this issue and found the explosives were properly stored and in compliance with all applicable regulations. [Reference: End-of Year 2016 Regional OSH Committee Meeting Minutes]
- In June of 2015, GSA OIG in a response to a whistleblower complaint stated, *These incompatible tenant groupings (which in addition to explosives in buildings with childcare centers also included laboratories in building office space) place children, government employees, and visitors at risk of harm due to fires, explosions, leaks, or terrorism.* FOH believes that for canine explosive detection training aids, a greater/additional risk would be the loss of these materials to theft but, based on the OSHA response and knowledge of how these aids are controlled, the storage of the materials in a locked magazine in a locked room under the control of federal law enforcement seems appropriate and sufficient to mitigate that risk.

Non-supporting Information:

No significant non-supporting information was reviewed.

<u>Line of Inquiry #12:</u> What are GSA policies concerning restricting explosives in federal buildings (pursuant to 41 CFR 102-74.435)? Has an occupancy permit program been effectively implemented to avoid incompatible occupancies (pursuant to 29 CFR 1960.34.(a)(7))? What policies/procedures were instituted by GSA to prevent improper handling/storage of explosives and otherwise mitigate risk?

FOH Conclusion:

Since January of 2012, GSA has had a policy on explosives on federal property. Since October of 2015, GSA has had a policy on Fire, Safety and Health (FSH) Space Evaluation (which was instituted after whistleblower complaints were made to the GSA OIG in early 2015). There was no documentation found about Region 6-wide communication or enforcement of these policies or whether they have been implemented to eliminate an incompatible occupancy. In the absence of any such documentation, FOH concludes that an occupancy permit program and policies/procedures to mitigate risk from handling/storage of explosives were not effectively implemented over the investigation period (2002 to about 2015).

Supporting Rationale:

• There is currently a GSA Policy on Explosives on Federal Property:

49CFR §102-74.435 [dated January 12, 2012] - Policy concerning explosives on Federal property

No person entering or while on Federal property may carry or possess explosives, or *items intended to be used to fabricate an explosive or incendiary device, either openly or concealed, except for official purposes.* [Note: The storage of canine explosive detection training aids (first noted in 2013) is considered by FOH to be storage for "official purposes".]

• There is a GSA Policy on Fire, Safety and Health (FSH) Space Evaluation *PBS 1000.4 (original) October 9, 2015 PBS 1000.4 CHGE 1 February 2, 2016*

The purpose of this policy is to ensure that proposed potentially high risk uses of space within a GSA-controlled building and on GSA-controlled real property, do not pose an unacceptable risk to human health and safety, where such unacceptable risks are attributable to incompatibilities between occupant activities. To identify, assess, and mitigate potentially high risk uses, this policy establishes a fire, safety, and health space evaluation and authorization process. [It should be noted that the explosive materials referenced in Line of Inquiry #12 (above) were brought into region 6 buildings without notification of occupational safety and health staff or an evaluation of whether an incompatible occupancy existed. This GSA policy was instituted after whistleblower complaints were made to the GSA OIG.]

• In 29CFR1960.34 (Basic Program Elements for Federal Employees OSHA), section 1960.34(a)(7), dated October 21, 1980, states that GSA shall:

Establish an occupancy permit program which will regulate the types of activities and occupancies in facilities in order to avoid incompatible groupings, e.g., chemical or biological laboratories in office space. GSA shall seek to consolidate Federal laboratory operations in facilities designed for such purposes.

• Finally, Central Office is working on a policy that will allow federal law enforcement to continue to store high explosives in our federal buildings against OSHA 29 CFR 1910.109(b)(1} regulations. Currently, explosives have been allowed in all of our federal buildings even ones with childcare centers. Reportedly, the new policy will address only storage of explosives in bomb dog training kits and ignore all other agencies who may want to store explosives. [From 4/12/2016 whistleblower letter to Congressman]

Non-supporting Information:

• No significant non-supporting information was reviewed.

<u>Line of Inquiry #13:</u> What assurances did responsible Region 6 management officials make regarding the improvement of the region's fire/life safety programs? To what extent was any meaningful improvement made?

FOH Conclusion:

For the period under review (2002 - about 2015) FOH found no documentation of explicit assurances that Region 6 management made regarding improving the region's fire/life safety programs. In the absence of any such documentation, FOH concludes that no significant assurances were made. Similarly, other than regional safety staff efforts to initiate corrective actions and encourage program improvements, there was little documentation showing that meaningful improvements were made in fire and life safety programs during this time frame. There was, however, documentation of many individual findings of non-conformances with fire and life safety code requirements that remained uncorrected. It also noted that, on many occasions, there were non-conformances with the requirements of PBS-P100 Facilities Standards for the Public Buildings Service (P100) by not requesting Certificates of Occupancy from the Regional Fire Protection Engineer. A draft Fire Protection Program was reported to be issued in 2018 and in place in 2019.

Supporting Rationale:

- Safety surveys and other reports list numerous findings and recommendations that are related to fire and life safety codes. Follow up surveys often reported repeat/uncorrected items. By 2016 (the end of FOH's period of review), there were still many hundreds of items to be corrected.
- In January of 2010, Rolf Jenson & Associates conducted a Fire Safety Evaluation System Analysis at the Bolling Federal Building in Kansas City, Missouri. The report made numerous recommendations to address noncompliance with Chapter 39 of the 2009 Life Safety Code (LSC) for existing building occupancies.
- In October of 2015, Region 6 issued a Program Communique for a FY2016 Fire and Life Safety Program. This document outlined program objectives to be implemented beginning in FY 2016.

- Many renovated spaces within Region 6 have been occupied without the GSA Project Manager requesting a certificate of occupancy from the regional fire protection engineer. [Reference: 3/19/18 email from Region 6 Fire Protection Engineer to AFGE officials.]
- In March of 2018 GSA FPE issued a draft Fire Protection Program. It was reported to be implemented in 2019.

Non-supporting Information:

• No significant non-supporting information was reviewed.

<u>Line of Inquiry #14</u>: Are other potentially serious environmental or safety and health conditions apparent that have not been identified by Office of Special Counsel correspondence?

FOH Conclusion:

There are other potentially serious environmental or safety and health conditions that have not been identified by Office of Special Counsel correspondence, namely:

- Electrical Vault Safety: Safety issues in the vaults in Goodfellow Buildings 104 and 110 have not been addressed. (To date, no funding has been allocated for this work.)
- Mothballed/abandoned building(s) (e.g., Buildings 102 and 102D) have been abandoned without undergoing any (significant) remediation by simply boarding up doors and windows and restricting access. Both the environmental and safety/health liabilities and potential for future exposures will remain until this is permanently addressed.
- Incomplete site evaluation: Multiple facility spaces that contain air/soil/water/surface contamination have not been properly evaluated to determine the amount/toxicity/extent of the hazards involved and actions required to protect federal agency tenants, GSA employees, contractors, vendors, and visitors.
- Uncharacterized non-ionizing radiation risk/exposure from building roof antennas.
- Undiscovered existing, long-term, or latent health effects: FOH believes that past exposures to site contaminants (e.g. lead, asbestos, mercury, cadmium and others) could have caused or may cause in the future adverse health effects in employees, contractors or tenants (e.g. mesothelioma in employees exposed to asbestos) or developmental issues in children who were in childcare in building 104. In addition, since no effective policies were identified by FOH regarding decontaminating personal items prior to leaving the workplace or precautions associated with laundering clothes, contamination was likely brought home by workers and could have resulted (or result in the future) in adverse health effects among family members.

Supporting Rationale:

• Electrical vaults throughout the complex have numerous electrical hazards, fire and life safety hazards, trip/fall hazards, and lighting issues. Much of the electrical equipment has been poorly maintained and past its service life. . . electrical/fire hazard. A project correcting the issues in Building 103, 105, and 107 has been completed. **The issues in the**

vaults in Building 104 and 110 have not been addressed. [Reference: From: 02.2020 R6 OSH Hazard Abatement Log and FP&LS RAC II Correction Tracker]

This was confirmed in a 4/21/2020 telephone interview with the Facilities Management Division Director.

• Buildings 102 and 102 D have been mothballed and are no longer maintained or serviced by utilities pending demolition or complete renovation. According to GSA, building 102D should not be entered without a respirator equipped with proper filtration cartridges or supplied air because of mold issues. GSA requested no additional investigation at these buildings until their futures are determined. [Reference: Occupational Exposure Evaluation, General Services Administration, Goodfellow Federal Complex, St. Louis, Missouri, Contract Number GS10F0076K, Order Number GS-06P-10-GX-A-0030/GS-P-06-11-GX-5201, by Tetra Tech, June 2013.]

The "mothballing" of buildings 102 and 102D was confirmed in a 4/21/2020 telephone interview with the Facilities Management Division Director.

- Multiple facility spaces that contain air/soil/water/surface contamination have not been properly evaluated to determine the amount/toxicity/extent of the hazards involved and actions (i.e. ventilation, limited access, abatement, etc.) required to protect other federal agency occupants, GSA employees, contractors, vendors, and visitors. These spaces include multiple facility occupied spaces, basements, crawl spaces, utility tunnels, and the spaces above suspended ceiling tiles in occupied space. In addition, a proper hazard assessment has not been conducted to determine the personal protective equipment required to protect employees when entering contaminated spaces; and Contaminated spaces have not been properly posted or communicated to warn employees, tenants, visitors, vendors, or contractors of the hazards present. [Reference: 02.2020 R6 OSH Hazard Abatement Log and FP&LS RAC II Correction Tracker (1)]
- Regarding non-ionizing radiation risk/exposure from building roof antennas for the period from 2002 to about 2015, the 2016 Mid-Year Regional OSH Committee Meeting minutes include: Antennas on Building Roofs...transmitting antennas have become a big concern. We have discovered several transmitting antennas that pose significant health hazards to those accessing building roofs. We are requesting facility managers put together an inventory of all the antennas on your buildings with the appropriate information so we can properly account for and mitigate the risks associated with this hazard. We need to know the antenna location, who owns the antenna, is it a transmitter or receiver, and is any kind of spec sheet available for those antennas that transmit. We will be taking a closer look at your antennas during our safety surveys and taking some measurements. In the meantime, if you have transmitting antennas and need to work around them, please provide us an e-mail with the transmitting antenna operating frequency, wattage, and antenna gain so we can verify and/or calculate the safety zone that must be maintained. GSA Central Office is now engaged in this issue and is defining the requirements tenant agencies and leases will have to meet before antennas are allowed on the roof.
- [As documented in LOI #16 below] prior to 2000 (exact date uncertain) there were GSA O&M employees ("green shirts") who performed maintenance work in contaminated basements, tunnels and crawl spaces for whom exposure monitoring/personal monitoring was not conducted. Therefore, no exposure data was compiled which could be directly compared to occupational exposure limits such as 8-hour time weighted average (TWA) OSHA Permissible Exposure Limits or ACGIH Threshold Limit Values. This

resulted in personnel working in contaminated basements and crawl spaces (prior to 2016) without adequate knowledge of the risks, safe practices training, personal protective equipment and medical screening. Even when O&M was outsourced to contractors, it would have been incumbent on GSA to inform the O&M contractor (and any other contractors working in contaminated areas) of the hazards present and their responsibility to comply with applicable federal regulations which would include personal monitoring.

FOH believes that these past exposures to site contaminants (e.g. lead, asbestos, mercury, cadmium and others) could have caused or may cause in the future adverse health effects in employees, contractors or tenants (e.g. mesothelioma in employees exposed to asbestos) or developmental issues in children who were in childcare in building 104.

- FOH is also concerned that the medical surveillance process for employees desiring examinations relating to their past occupational exposures to asbestos or lead are biased towards blaming non-occupational sources of exposure for health effects that could be attributable to exposures at Goodfellow.
 - The medical surveillance questionnaire "Asbestos and Lead Exposure Heartland Region" (GSA. Add'l Questions FINALRev1 13Nov16) asks **two questions about GSA work history** (*Have you ever entered or worked in the basement, crawl spaces, or utility tunnels of Federal Center buildings*? and *Have you lifted ceiling tiles and / or performed any above ceiling work*?) and **17 questions about non-work related exposures** (e.g. *How old is your home*?, *Are you a hunter*? *Do you use indoor firing ranges, make your own shells, make fishing lures or sinkers, salvage scrap metal, weld or solder metals, remodel/renovate/paint homes, make pottery, make ceramic products, create metal arts, make jewelry make stained glass, participate in other types of crafts*? *Are you an artist, a painter, a sculptor*?)
 - In a 4/20/2020 telephone interview with a point of contact who wishes to remain unnamed and not be described by his/her current or former position, he/she stated he did some work in Goodfellow basements and tunnels in 2015 after which he/she developed a chronic cough and then had a chest x-ray which showed "some nodules in his/her lung". When the employee mentioned this to management, the employee was told it was because he/she was a shooter (implying non-occupational exposure to lead).

Non-supporting Information:

• There was no documentation found for any morbidity/mortality studies that would assess work/exposure related health effects.

<u>Line of Inquiry #15</u>: Were any federal or state regulators involved in or consulted with on any of the Goodfellow studies or investigations?

FOH Conclusion:

FOH found no evidence that any federal or state regulators were involved in or consulted with on any of the Goodfellow studies or investigations. (While there have been documented OSHA investigations and citations, FOH does not consider these as "involved in or "consulted with".)

Supporting Rationale:

Conclusion is based on the document review and interview with the whistleblower.

Non-supporting Information:

(Considered a result of OSHA "involvement" but not "consultation") Goodfellow Federal Center Environmental Contamination – GSA R6 has now placed strict controls on the contaminated spaces at Goodfellow. No one is allowed in these areas without a Site-Specific Safety Plan that addresses how the job at hand will be safely accomplished. Measures taken not only protect the employees performing the work, but any tenants/other personnel working in the area as well. . . . The Region has issued a Goodfellow Site Specific Safety Plan that has mandatory requirements for all GSA employees working at/visiting the site. **OSHA has been monitoring the issue and the region has contracted for industrial hygiene oversight to ensure contractors are properly following their Site-Specific Safety Plans.** [Reference: Heartland Regional OSH Committee 2016 Year-End Agenda]

<u>Line of Inquiry #16</u>: Was the testing and methodology adequate to characterize the nature of the contamination and resultant exposures? Did the methodology use approved methods? Were adequate analytical sensitivities achieved?

FOH Conclusion:

In general, when sampling and analysis for environmental-type contaminants were performed, appropriate methodology with adequate analytical sensitivities and quality control was employed. Even if there would have been some analytical deficiencies, the vast amount of environmental data provided ample evidence for significant site-wide environmental contamination.

While the vast majority of testing (sampling and analysis) was for environmental contamination, there was little or no data found by FOH that characterized personal occupational exposures. In particular, no personal monitoring for contaminant concentrations in breathing zones was performed during work activities that would tend to disturb contaminated soils/materials. Therefore, no exposure data was compiled which could be directly compared to occupational exposure limits such as 8-hour time weighted average (TWA) OSHA Permissible Exposure Limits or ACGIH Threshold Limit Values. This resulted in personnel working in contaminated basements and crawl spaces (prior to 2016) without adequate knowledge of the hazards, safe practices training, personal protective equipment and medical screening. [Note: FOH understands that, for the period of review, Operation and Maintenance (O&M) personal were contractors (not direct employees of GSA) and that the contractor management (not GSA) would have had the responsibility to conduct personal monitoring for those employees doing maintenance, repairs, and other work in basements, tunnels or crawl spaces where asbestos, lead and other toxic contaminants were present. While this is true, it is also true that prior to 2000 (exact date uncertain) there were GSA O&M employees ("green shirts") who performed these functions and for whom exposure monitoring/personal monitoring should have occurred. Also, when O&M was outsourced to contractors, it would have been incumbent on GSA to inform the O&M contractor (and any other contractors working in contaminated areas) of the hazards present and their responsibility to conduct personal monitoring and, more generally, to comply with all applicable federal regulations. (Even if contract language included statements requiring

conformance with federal regulations, it would have also been a responsibility of GSA contract management personnel to assure that contract conditions were met.)]

Supporting Rationale:

From a February 2009 Occu-Tec report dealing with <u>area</u> sampling: Air sampling for lead was conducted in each building included in the investigation. The air samples for lead analysis were collected on 37-millimeter (mm) cassettes with 0.8 micrometer (µm) mixed cellulose ester (MCE) filters using MSA Escort ELF battery powered air sampling pumps in accordance with National Institute for Occupational Safety and Health (NIOSH) sampling methods. Samples were collected for approximately two hours per sample at a flow rate of approximately 2 liters per minute. Air samples were submitted under chain-of-custody to EMSL Analytical, Inc. (EMSL) for analysis of lead according to NIOSH method 7082. EMSL is accredited by the American Industrial Hygiene Association (AIHA) Environmental Lead Laboratory Accreditation Program (ELLAP).
 [Reference: Goodfellow Federal Center Lead Air and Dust Wipe Investigation, Buildings – 102, 103, 103D, 104, 104E, 105, 105E, 105F, and 110, 4300 Goodfellow Boulevard, St.

Louis, Missouri 63120, OCCU-TEC Project No. 99006, February 16, 2009]

• From a lead and mercury sampling report at the Goodfellow Childcare Center by Erio Consulting dated November 13, 2003. Lead Wipe Samples: The wipe samples were collected according to the HUD Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing (June 1995), Appendix 13.1 "Wipe Sampling for Settled Lead Contaminated Dust". Environmental Health Laboratory provided the wipe sample media, "Ghost Wipes". They meet the requirements of HUD and ASTM E 1792 "Standard Specification for Wipe Sampling Materials for Lead in Surface Dust". Lead in Air: The area samples were collected according to a modified NIOSH Method

Lead in Air: The area samples were collected according to a modified NIOSH Method No. 7082, Airborne Particulates for Lead. All samples were sent Environmental Health Laboratory, an accredited Industrial Hygiene laboratory located in Cromwell, Connecticut.

- There are numerous other studies that describe their environmental sampling and analysis methodology, analytical sensitivities, recovery factors and quality control. In general, they are considered to be reasonable and appropriate for the work that was done.
- Much of the GSA/OIG reporting and correspondence talk about "environmental" contamination and often muddle the distinction between environmental contamination (e.g. soil contamination, groundwater contamination, surface contamination) and any resultant workplace exposures.
- There were some studies that measured airborne concentrations using area monitoring techniques, but FOH could find no evidence of personal monitoring during work activities (using collection media or monitors in the employees breathing zone) which would have been a requirement for defining workplace/occupational exposures to show compliance with the lead, asbestos, and other standards. [Note: It has been brought to the attention of FOH that, for the period of review, Operation and Maintenance (O&M) personal were contractors (not direct employees of GSA) and that the contractor management (not GSA) would have had the responsibility to conduct personal monitoring for those employees doing maintenance, repairs, and other work in basements, tunnels or crawl spaces where asbestos, lead and other toxic contaminants were present. While this is true, it is also true that prior to 2000 (exact date uncertain) there were GSA O&M employees ("green shirts")

who performed these functions and for whom exposure monitoring/personal monitoring should have occurred. Also, when O&M was outsourced to contractors, it would have been incumbent on GSA to inform the O&M contractor (and any other contractors working in contaminated areas) of the hazards present and their responsibility to comply with federal regulations. (Even if contract language included statements requiring conformance with federal regulations, it would have also been a responsibility of GSA contract management personnel to assure that contract conditions were met.)]

Non-Supporting Rationale:

• No significant non-supporting information was reviewed.

<u>Line of Inquiry #17</u>: Was testing data interpreted properly (were appropriate benchmarks used? Were the testing locations appropriate? Was testing frequency adequate, etc.)?

FOH Conclusion:

FOH concludes that, for the most part, data from contracted studies were interpreted properly and that appropriate benchmarks (e.g. regulatory limits) were used. For lead dust surface contamination or surfaces, the GSA national office has expressed their policy that 200 µg/ft2 (micrograms per square foot) for floors is the appropriate reference standard for lead dust surface contamination while GSA Region 6 has held the position that the HUD clearance standard of 40 µg/ft2 was generally appropriate (especially for building 104E which, for several years in the past, housed the site childcare facility). Under 41 CFR 102: Federal Property Management Regulations System – Federal Management Regulation, CFR §102-80.30 requires federal agencies to: *Abate lead-based paint found in accordance with U.S. Department of Housing and Urban Development (HUD) Lead-Based Paint Guidelines*. [FOH note: While section 102-80.30 refers to requirements when lead-based paint is present in federal buildings, it was inferred that the requirement to abate to HUD Guidelines would apply equally to the metallic/particulate lead contamination found on the Goodfellow site.]

Supporting Rationale:

Results of the dust wipe samples collected in each building [Buildings – 102, 103, 103D, 104, 104E, 105, 105E, 105F, and 110] indicate that 29 of the 108 samples collected contained concentrations of lead above laboratory reporting detection limits. These concentrations ranged from 41 micrograms per square foot (µg/ft2) in sample #104-24W collected in Building 104 to 750 µg/ft2 in sample #102-8W collected in Building 102. In addition, one of the four dust wipe samples collected from Building 110 contained a reported concentration of 2,000 µg/ft2. Results of the remaining samples collected in Building 110 ranged from <90 µg/ft2 to 370 µg/ft2.

Although not specifically applicable in a federal office facility, EPA and United States Department of Housing and Urban Development (HUD) clearance standards may be used as a reference in evaluating the results. As per 24 CFR Part 35, the HUD clearance levels are 40 μ g/ft2 for floors, 250 μ g/ft2 for windowsills, and 400 μ g/ft2 for window wells. As illustrated above, 79 of the 108 dust wipe samples contained concentrations of lead that were below the EPA/HUD clearance standards. The indication of lead concentrations in numerous dust wipe samples that exceeded the HUD clearance levels indicates that there are areas of significant settled lead dust in the affected buildings. However, at the time of the sampling, there was no apparent, obvious source of the lead in the settled dust. Although the lack of detectable concentrations of airborne lead in air samples indicates that there is no immediate threat to human health or the environment, OCCU-TEC would recommend appropriate cleaning procedures (i.e. High Efficiency Particulate Air (HEPA) vacuums, and wet-cleaning methods) in areas of elevated lead dust levels prior to activities that might disturb the settled dust. [Reference: Goodfellow Federal Center Lead Air and Dust Wipe Investigation, Buildings 102, 103, 103D, 104, 104E, 105, 105E, 105F, and 110, 4300 Goodfellow Boulevard, St. Louis, Missouri 63120, OCCU-TEC Project No. 99006, February 16, 2009]

- Lead was detected at concentrations above the Missouri Risk-Based Corrective Action (MRBCA)post-abatement clearance level for nonresidential buildings standards of 200 µglft2 for floor surfaces (or approximately 0.021 mg/wipe) in 73 of 84 wipe samples collected in Buildings 102, 102D, 102E, 103, 103D, 103E, 103F, 104, 104F, 105, 105E, 105F, 110, 115, and the utility tunnel complex. Four wipe samples collected from Building 104E contained lead in excess of the HUD interim dust lead standard for floor surfaces of 40 µglft2 (or approximately 0.004mg/Wipe). Detected concentrations of lead in wipe samples collected from Building 104E ranged from 1,021µglft2to 1,207,700µglft2. Based on the concentrations of lead identified in the wipe samples, it is recommended that interim controls or permanent abatement be performed to reduce the potential dust-lead hazard within the child occupied day care facility located within Building 104E. Additionally, if any routine or non-routine maintenance work involves accessing the space below the buildings or above the suspended ceilings for an extended period of time, the work should be performed by workers who are trained and medically monitored in accordance with Occupational Health and Safety Act requirements (29 Code of Federal Regulations 1910 a11d 1926). Based on the concentrations of lead identified in the wipe samples, it is recommended that interim controls or permanent abatement be performed to reduce the potential dustlead hazard within the child occupied day care facility located within Building 104E. Additionally, if any routine or non-routine maintenance work involves accessing the space below the buildings or above the suspended ceilings for an extended period of time, the work should be performed by workers who are trained and medically monitored in accordance with Occupational Health and Safety Act requirements (29 Code of Federal Regulations 1910 alld 1926). [Reference: 2008 SCS Engineers, Combined Facility Assessment/Site Inspection Report, Saint Louis Federal Center, 4300 Goodfellow Boulevard, Saint Louis, Missouri, August 2008]
- In November of 2007, the Region 6 Safety and Environmental Team Leader contracted with OCCU-TEC for a Pre-Occupancy Safety & Environmental Assessment for USDA, Building 104, Federal Center, St. Louis, Missouri. The study included an asbestos reinspection, lighting measurements at newly installed workstations, a safety inspection of the area to be reoccupied per safety inspection items that were included in the task order, indoor air quality measurements for CO2, temperature and relative humidity, and an inspection of the HVAC units. Based on legacy operations in building 104, FOH believes that the assessment should have included testing for (at least) lead and cadmium contamination. [Reference: Pre-Occupancy Safety & Environmental

Assessment for USDA, Building 104, Federal Center, Saint Louis, Missouri, Contract No. GS-G6P-07-GXA-007, Project No, 17020 dated November 7, 2007]

41 CFR 102: Federal Property Management Regulations System – Federal Management Regulation.

- 41 CFR §102-80.30 What are Federal agencies' responsibilities concerning lead?
- Federal agencies have the following responsibilities concerning lead in buildings:
 - a. Test space for lead-based paint in renovation projects that require sanding, welding or scraping painted surfaces.
 - b. Not remove lead-based paint from surfaces in good condition.
 - c. Test all painted surfaces for lead in proposed or existing childcare centers.
 - d. Abate lead-based paint found in accordance with U.S. Department of Housing and Urban Development (HUD) Lead-Based Paint Guidelines, available by writing to HUD USER, P.O. Box 6091, Rockville, MD 20850.
 - e. Test potable water for lead in all drinking water outlets.
 - f. Take corrective action when lead levels exceed the HUD Guidelines.
 [FOH note: Section 102-80.30 refers to requirements when lead-based paint is present in federal buildings. It was assumed that the requirement to abate to HUD Guidelines applies equally to the metallic/particulate lead contamination found on the Goodfellow site.]
- From the whistleblower 4/12/16 complaint to Congressman Kevin Yoder:
- Building 104E was used as a child-care center for several years in the early 2000's and closed in 2009/2010. The building still tested positive for high lead dust levels in 2016. It also tested positive in 2008 for lead dust while it was still open. Referring to the results for building 104E as found in the 2008 SCS Engineers report on the Goodfellow Complex Environmental Contamination: The two highest results came from the first and second floor. The child-care center was on the first floor. Lead in the child care center was supposedly abated in 2003 and 2004; however, controls were never put into place to prevent contamination from other areas in the building from reaching the children; Region 6 checked the air a few times for lead and abated some lead paint but it appears they never tested for any of the other contaminants present on site; it appears **GSA did not test the HVAC air handlers for any contaminants nor did they have any procedures or controls to check the air during activities that could have stirred up the contamination in the building;** lastly, it appears Region 6 did not regularly monitor the center after 2004 to ensure it stayed uncontaminated.
- There has been a disagreement between the GSA central office and GSA Region 6 occupational safety and health management as to the appropriate reference benchmark for lead surface contamination. The GSA national office has expressed the policy that 200 µg/ft2 (micrograms per square foot) for floors is the appropriate reference standard for lead dust surface contamination. GSA Region 6 has held the position that the HUD clearance standard of 40 µg/ft2 was appropriate for all site locations (and incontrovertibly for building 104 which, in the past, housed the site childcare facility). 41 CFR 102: Federal Property Management Regulations System Federal Management Regulation 41 CFR §102-80.30 states: *Federal agencies have the following responsibilities concerning lead in buildings:*

(c) Test all painted surfaces for lead in proposed or existing childcare centers.

(d) Abate lead-based paint found in accordance with U.S. Department of Housing and Urban Development (HUD) Lead-Based Paint Guidelines.

(f) Take corrective action when lead levels exceed the HUD Guidelines.

[FOH note: Section 102-80.30 refers to requirements when lead-based paint is present in federal buildings. It should be inferred that the requirement to abate to HUD Guidelines applies equally to the metallic lead contamination found on the Goodfellow site.]

Non-Supporting Rationale:

- FOH notes that alternate, higher (less stringent) occupational exposure level guidelines exist for lead contamination limits on surfaces of industrial-type facilities (not considered applicable to child care facilities or offices). These alternate levels may allow for significantly <u>higher</u> concentrations than the 200 ug/ft² limit used by GSA. Also, OSHA does not provide clear-cut, quantitative regulatory requirements dealing with surface lead contamination. Although not specifically addressing General Industry, in a letter dated January 13. 2003, OSHA's Directorate of Compliance Programs indicated that the requirements of OSHA's standard for lead in the construction workplace (i.e., 29 CFR 1926.62) can be summarized and/or interpreted as follows:
 - a) All surfaces shall be maintained as 'free as practicable' of accumulations of lead.
 - b) The employer shall provide clean change areas for employees whose airborne exposure to lead is above the permissible exposure limit.
 - c) The employer shall assure that lunchroom facilities or eating areas are as free as practicable from lead contamination.
 - d) The OSHA Compliance Directive for the Interim Standard for Lead in Construction, CPL 2-2.58 recommends the use of HUD's initially proposed <u>decontamination</u> criteria of 200 ug/ft2 for floors in evaluating the cleanliness of change areas, storage facilities, and lunchrooms/eating areas.
 - e) In situations where employees are in direct contact with lead-contaminated surfaces, such as working surfaces or floors in change rooms, storage facilities and, of course, lunchroom and eating facilities, OSHA has stated that the Agency would not expect surfaces to be any cleaner than the 200 ug/ft2 level.
 - f) For other surfaces, OSHA has indicated that no specific level can be set to define how "clean is clean" nor what level of lead contamination meets the definition of "practicable." Specifically addressing contaminated surfaces like rafters, etc., OSHA has indicated that they must be cleaned (or alternative methods used such as sealing the lead in place), as necessary to "mitigate lead exposures". OSHA has indicated that the intent of this provision is to ensure that employers regularly clean and conduct housekeeping activities to prevent avoidable lead exposure, such as would potentially be caused by re-entrained lead dust. Overall, the intent of the "as-free-as-practicable" requirement is to ensure that accumulations of lead dust do not become sources of employee lead exposures. OSHA has stated that any method that achieves this end is acceptable. [Reference: January 13, 2003 OSHA Letter Interpretation. of See: http://www.osha.gov/pls/oshaweb/owadisp.show document?p table=INTERP RETATIONS&p id=25617]

Line of Inquiry #18: Were contamination plumes and any resultant human exposure adequately delineated?

FOH Conclusion:

There was a great deal of testing that dealt with environmental contamination and these data substantiate that there was significant site-wide contamination. Sampling was conducted in occupied areas, basements, and crawl spaces; in sediments, surface soils, subsurface soils, groundwater, water, surface wipes, bulk surface dust, and interior concrete cores. However, due to the large footprint of the site, the many buildings, and the site history, there remain contaminated facility spaces that have not been properly evaluated to determine the extent of the hazards and actions required to protect occupants and employees.

There are no data that characterized occupational exposures using personal monitoring. While there is documentation that, before 2016, O&M employees worked in contaminated basements and crawl spaces without being informed of the hazards and how they could protect themselves, there was no measurement of these exposures. [Note: It has been brought to the attention of FOH that, for the period of review, Operation and Maintenance (O&M) personal were contractors (not direct employees of GSA) and that the contractor management (not GSA) would have had the responsibility to conduct personal monitoring for those employees doing maintenance, repairs, and other work in basements, tunnels or crawl spaces where asbestos, lead and other toxic contaminants were present. While this is true, it is also true that prior to 2000 (exact date uncertain) there were GSA O&M employees ("green shirts") who performed these functions and for whom exposure monitoring/personal monitoring should have occurred. Also, when O&M was outsourced to contractors, it would have been incumbent on GSA to inform the O&M contractor (and any other contractors working in contaminated areas) of the hazards present and their responsibility to conduct personal monitoring and, more generally, to comply with all applicable federal regulations. (Even if contract language included statements requiring conformance with federal regulations, it would have also been a responsibility of GSA contract management personnel to assure that contract conditions were met.)]

Supporting Rationale:

- Multiple facility spaces that contain air/soil/water/surface contamination have not been properly evaluated to determine the amount/toxicity/extent of the hazards involved and actions (i.e. ventilation, limited access, abatement, etc.) required to protect other federal agency occupants, GSA employees, contractors, vendors, and visitors. These spaces include multiple facility occupied spaces, basements, crawl spaces, utility tunnels, and the spaces above suspended ceiling tiles in occupied space. [Reference: 02.2020 R6 OSH Hazard Abatement Log and FP&LS RAC II Correction Tracker (1)]
- In November of 2007 the Region 6 Safety and Environmental Team Leader contracted for a Pre-Occupancy Safety & Environmental Assessment for USDA in Building 104. The study included an asbestos re-inspection, lighting measurements at newly installed workstations, a safety inspection of the area to be reoccupied per safety inspection items that were included in the task order, indoor air quality measurements for CO2, temperature and relative humidity, and an inspection of the HVAC units. **Based on legacy operations**

in building 104, FOH believes that the assessment should have included testing for (at least) lead and cadmium contamination. FOH has concerns that other pre-occupancy assessments may have not requested testing for environmental contaminants that would be of concern for those spaces. [Reference: Pre-Occupancy Safety & Environmental Assessment for USDA, Building 104, Federal Center, Saint Louis, Missouri, by OCCU-TEC, Contract No. GS-G6P-07-GXA-007, Project No, 17020 dated November 7, 2007]

Non-Supporting Information:

• No significant non-supporting information was reviewed.

<u>Line of Inquiry #19</u>: Was detected contamination adequately assessed in terms of impact on different categories of human receptors (e.g., adults, children, pregnant women, immuno-compromised) and the type of workplace encountered (e.g., office, industrial, residence, cafeteria, childcare)?

FOH Conclusion:

Detected environmental contamination was generally not assessed in terms of impact on different categories of human receptors (e.g., adults, children, pregnant women, immuno-compromised). Sampling for contamination was conducted in office spaces, industrial areas (e.g. basements and crawl spaces) and the cafeteria and childcare buildings. While some testing was conducted in Building 104E (which housed the site childcare center), it was considered to be inadequate to fully evaluate any exposures/risks to children.

Supporting Rationale:

• See references in LOI #17 (above) to the testing results for building 104E which, from the early 2000s to 2008/2009 housed the facility childcare center.

Non-Supporting Information:

• No significant non-supporting information was reviewed.

APPENDIX 2

List of Information Sources: Names of Files, Folders and/or Documents

Goodfellow-Related Files and Folders Reviewed by FOH

2002-2019 Region 6 Reading Room Documents

2002-2019 Region 6 Reading Room docs

2002

2002_01_MARC_Phase_I_Environmental_Site_Assessment.pdf

2003

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eMail__Cost_Estimate_to_Abate_Lead_in_Day_Care__dtd_29_Dec_2003.pdf

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F_advising_them_to_abate_lead__dtd_8_Jan_2004.pdf InterimSI_Bldg103103D103E 6 4 2004.pdf SI_Bldgs108A108B_labreports 1 28 2004.pdf SI_Bldgs108A108BPreliminary 12 2004.pdf

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Building 103F.pdf Building 104.pdf Building_104E.pdf Building_104F.pdf Building 105.pdf Building_105E.pdf Building 105F.pdf Building_105L.pdf Building 106.pdf Building_107.pdf Building 110.pdf 2018 Drinking Water Sampling Results Drinking_Water_Testing_Report_for_GFC_Bldg_#115.pd f 2018_Drinking_Water_Sampling_Summary.pdf Drinking_Water_Testing_Report_for_GFC_Bldg_#102E.p df Drinking_Water_Testing_Report_for_GFC_Bldg_#103.pd Drinking Water Testing Report for GFC Bldg #103D.p df Drinking_Water_Testing_Report_for_GFC_Bldg_#103D_supplemental.pdf Drinking_Water_Testing_Report_for_GFC_Bldg_#103E.p df Drinking_Water_Testing_Report_for_GFC_Bldg_#103F.p df Drinking_Water_Testing_Report_for_GFC_Bldg_#104.pd f Drinking_Water_Testing_Report_for_GFC_Bldg_#104E.p df Drinking_Water_Testing_Report_for_GFC_Bldg_#104F.p df Drinking_Water_Testing_Report_for_GFC_Bldg_#105.pd f Drinking_Water_Testing_Report_for_GFC_Bldg_#105E.p df

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2019

Goodfellow Stakeholder Email 19 508 (2).pdf Bldg 105E Air Sampling Retest Report.pdf CERCLA Cleanup Process Diagram.pdf Goodfellow Stakeholder Email 15.pdf Safety_Data_Fact_Sheets.zip Xylene p.pdf 1, 1'-Biphenyl.pdf 1,2 Dichloroethylene.pdf 2,4 Dichlorophenol.pdf 2,4 Dintrotoluene.pdf 2,4-Dimethylphenol.pdf 2,6Dintrotoluene.pdf 2-Amino-4, 6-Dinitrotoluene.pdf 2-Methylnaphthalene.pdf 3-Nitroaniline.pdf 4-Clorophenyl Phenyl Ether.pdf 4-Nitrophenol.pdf 4-Nitrotoluene.pdf
Acenaphthene.pdf Acenaphthylene.pdf Acetone.pdf Acetophenone.pdf Anthracene.pdf Antimony.pdf Arsenic.p df Asbestos - Amosite, Chrysotile, Crocidolite.pdf Barium.p df Benz(a)Anthracene.p df Benzaldehyde.pdf Benzo(a)Pyrene.pdf Benzo(b)Fluoranthene.pdf Benzo(g,h,i)Perylene.pdf Benzo(k)Fluoranthene.pdf Beryllium.pdf Bis(2-ethylhexyl)Phthalate.pdf Butyl Benzyl Phthalate.pdf Cadmium.pdf Caprolactam.pdf Carbazole.pdf Carbon Disulfide.pdf Chromium.pdf Chrysene.pdf Copper.p df Cresols - 2-Methylphenol, 3-Methylphenol, 4-Methylphenol.pdf Cyanide.pdf Dibenzo(a,h)Anthracene.pdf Dibenzofuran.pdf Diethyl Phthalate.pdf

Di-n-Butyl Phthalate.pdf Di-n-Octyl Phthalate.pdf Fluoranthene - Benzo(j,k)Fluorene.pdf Fluorene.pdf Hexachlorocyclohexane, beta.pdf Indeno(1,2,3-cd)Pyrene.pdf Lead.pdf Mercury.pdf Methyl Ethyl Keytone.pdf Naphthalene.pdf Nitrobenzene.pdf N-Nitrosodiphenylamine.pdf Pentachlorophenol.p df Phenanthrene.pdf Phenol.p df Phosphorus.pdf Polychloronated Biphenyls (PCBs) -All 11 PCB Variants.pdf Pyrene.p df C:\Users\jmakf\Desktop\second folder frank 2\Safety_Data_Fact_Sheets.zip Selenium.pdf Silver.pdf Total Petroleum Hydrocarbons (TPH) - Gasoline, Diesel, Oil Range Organic Compounds.pdf Total Petroleum Hydrocarbons (TPH) 1 - Health Effects.pdf Trichloroethene.pdf Xylene m.pdf Xylene p.pdf Sampling Report for Bldg 104.pdf Sampling Report for 103D.pdf Sampling Report for Bldg 102E.pdf

Sampling Report for Bldg 103.pdf

APPENDIX 2

List of Information Sources: Names of Files, Folders and/or Documents

Goodfellow-Related Files and Folders

2010 and Prior Region 6 Archive Documents

2010 and prior Region 6 archive docs

Asbestos monthly regional

reports

1990 Sept monthly asbestos report.pdf 1985 Dec monthly asbestos report.pdf 1985 Nov monthly asbestos report.pdf 1986 April monthly asbestos report.pdf 1986 Aug monthly asbestos report.pdf 1986 Dec monthly asbestos report.pdf 1986 Feb monthly asbestos report.pdf 1986 Jan monthly asbestos report.pdf 1986 July monthly asbestos report.pdf 1986 Jun monthly asbestos report.pdf 1986 Mar monthly asbestos report.pdf 1986 May monthly asbestos report.pdf 1986 Nov monthly asbestos report.pdf 1986 Oct monthly asbestos report.pdf 1986 Sept monthly asbestos report.pdf 1987 Dec monthly asbestos report.pdf 1987 Feb Mar Apr monthly asbestos report.pdf 1987 Jan monthly asbestos report.pdf 1987 July monthly asbestos report.pdf 1987 May Jun monthly asbestos report.pdf 1987 Nov monthly asbestos report.pdf

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1987 Oct monthly asbestos report.pdf 1987 Sept monthly asbestos report.pdf 1988 April monthly asbestos report.pdf 1988 August monthly asbestos report.pdf 1988 Dec monthly asbestos report.pdf 1988 Jan monthly asbestos report.pdf 1988 July monthly asbestos report.pdf 1988 June monthly asbestos report.pdf 1988 March monthly asbestos report.pdf 1988 May monthly asbestos report.pdf 1988 Nov monthly asbestos report.pdf 1988 Oct monthly asbestos report.pdf 1988 Sept monthly asbestos report.pdf 1989 April monthly asbestos report.pdf 1989 Aug monthly asbestos report.pdf 1989 Dec monthly asbestos report.pdf 1989 Feb monthly asbestos report.pdf 1989 Jan monthly asbestos report.pdf 1989 July monthly asbestos report.pdf 1989 June monthly asbestos report.pdf 1989 March monthly asbestos report.pdf 1989 May monthly asbestos report.pdf 1989 Nov asbestos monthly report.pdf 1989 Oct monthly asbestos report.pdf 1989 Sept monthly asbestos report.pdf 1990 August monthly asbestos report.pdf 1990 Feb monthly asbestos report.pdf 1990 July monthly asbestos report.pdf 1990 June monthly asbestos report.pdf 1990 March asbestos monthly report.pdf 1990 May monthly asbestos report.pdf 1990 Nov monthly asbestos report.pdf 1990 Oct monthly asbestos report.pdf 1990 Sept monthly asbestos report.pdf Employee training, fit testing, monitoring

2007 St Louis safety training 2.pdf 1988 asbestos manager training class agenda.pdf 1988 GSA memo on EPA asbestos training.pdf 1989 asbestos O&M training roster St Louis.pdf 1989 asbestos training class roster.pdf 1989 Asbestos training records Redacted.pdf 1990 annual acm air monitoring and lead exposure in range.pdf 1990 asbestos IMP course agenda.pdf 1990 asbestos IMP training certificates.pdf 1990 asbestos IMP training class roster.pdf 1990 Asbestos training records Redacted.pdf 1990 letter to EPA on asbestos trained people.pdf 1990 regional asbestos O&M training schedule.pdf 1990 StL employee acm IMP training.pdf 1990 StL employee asbestos O&M training.pdf 1991 1992 back safety training Iowa St Louis Redacted.pdf 1991 1992 StL employee slip trip training Redacted.pdf 1991 1992 StL IA employee LOTO training_Redacted.pdf 1991 asbestos IMP refresher and respir fit test.pdf 1991 memo to CO on asbestos training.pdf 1991 Personal monitoring acm lead noise.pdf 1991 regional asbestos I MP refresher roster.pdf 1991 regional asbestos IMP refresher roster.pdf 1991 regional asbestos O&M procedures.pdf 1991 St Louis asbestos O&M training and fit testing.pdf 1991 St Louis asbestos training and resp fit testing part 2.pdf 1991 StL employee asbestos IMP training Redacted.pdf

1991 StL employee asbestos O&M

training_Redacted.pdf

1991 StL employee fall prevention

training_Redacted.pdf

1991 StL employee general safety training_Redacted.pdf

1991 StL employee OSH committee

training_Redacted.pdf

1991 StL employee powered lift training_Redacted.pdf

1992 Compressed gas safety training St

Louis_Redacted.pdf

1992 St Louis personnel acm monitoring.doc

1992 StL employee asbestos O&M

training_Redacted.pdf

1992 StL employee conf space training_Redacted.pdf

1992 StL employee confined space

training_Redacted.pdf

1992 StL employee eyewash training_Redacted.pdf

1992 StL employee general safety training_Redacted.pdf

1992 StL employee hazcom training_Redacted.pdf

1992 StL employee IAQ

training_Redacted.pdf

1992 StL employee LOTO training (2)_Redacted.pdf

1992 StL employee LOTO training_Redacted.pdf

1992 StL employee shower eyewash

training_Redacted.pdf

1992 StL employee welding training_Redacted.pdf

1993 asbestos awareness notice for custodial staff.pdf

1997 asbestos training certificates.pdf

2007 construction safety training.pdf

2007 St Louis OSH training (2007-0109).pdf

JSA and JHAs

2007 St Louis East FO JSA report.pdf

1997 Regional asbestos employee exposure reports various locations.pdf

2002_bldg110roof_4300.pdf

2006 Kansas City South Field Office JHA emails.pdf

2006 KC North field office JSA safety

report.pdf

2007 JSA for Kansas Field Office report.pdf

2007 KC South Field Office JHA emails.pdf

2007 KC South Field Office Safety JSA report.pdf

2007 Nebraska FO JSA report.pdf

OSH and SEM

surveys

2000 various Mo buildings SEM survey email.pdf 1988-1990 regional SEM and asbestos survey docs.pdf

1994-2011 Regional SEM and OSH Survey

Deficiencies.xlsx

1995 Goodfellow OSH survey memo.pdf

1995 Multiple Mo buildings SEM survey findings.pdf

1997 Goodfellow childcare OSH survey memo.pdf

1998 St Louis SEM survey

email.pdf

1998 st louis various locations SEM surveys email.pdf

1999 several Mo locations SEM survey email.pdf

2000 Goodfellow OSH survey memo.pdf

2000_0053_MO0606_IH_Survey.zip

2000_00

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OSHA Hazard Communication Standard.doc **OSHA Hazard Communication Standard.htm** OSHA ppe standard.doc OSHA ppe standard.htm printplant.doc printplant.htm sig.jpg 2000 0053.zip 2000 0053.pdf Photos from Goodfellow.pdf 2001 Goodfellow OSH survey memo (2).pdf 2001 Goodfellow OSH survey memo.pdf PCB documents 2004-14722-39ae 1989 Goodfellow PCB disposal certs.pdf 1981 Goodfellow PCB transformer repair memo.pdf 1983 Goodfellow PCB inspection list.pdf 1985 Goodfellow PCB removal docs.pdf 1986 Goodfellow PCB evaluation study.pdf 1986 Goodfellow PCB IG report.pdf 1986 Goodfellow PCB inspection report.pdf 1987 Goodfellow boiler plant PCB removal.pdf 1987 Goodfellow complex PCB removed memos.pdf 1987 Goodfellow PCB disposal docs.pdf 1987 Goodfellow PCB docs.pdf 1987 Goodfellow PCB transformer inventory.pdf 1987 goodfellow PCB waste manifest.pdf 1987 Goodfellow PCB waste transport document.pdf 1987-1988 Goodfellow complex PCB transformer project.pdf 1987-1988 Goodfellow list of PCB transformers.pdf 1987-1988 Goodfellow PCB destruction certs.pdf 1987-1988 Goodfellow PCB tracking.pdf 1987-1988 Goodfellow transformer removal list.pdf

1987-1989 Goodfellow PCB lists.pdf 1987-1990 Goodfellow PCB memos.pdf 1988 Goodfellow PCB disposal cert.pdf 1988 Goodfellow PCB docs.pdf 1988 Goodfellow PCB removal project docs.pdf 1988 goodfellow PCB waste manifest.pdf 1988 Goodfellow transformer replacement project.pdf 1989 Goodfellow PCB memo.pdf 1989 Goodfellow PCB waste manifests.pdf 1990 Bldg 107 wood block floor PCB test results.pdf 1990 Goodfellow MDNR PCB letter.pdf 1990 Goodfellow memo on PCB wood block floor.pdf 1990 Goodfellow PCB data and memo.pdf 1990 Goodfellow PCB disposal cert.pdf 1990 Goodfellow PCB removal doc.pdf 1990 Goodfellow PCB status memo.pdf 1990 MO0609AF letter to DVA re PCB project.pdf 1995 Goodfellow PCB cleanup docs.pdf 1995 Goodfellow PCB oil test result.pdf 1997 Goodfellow switchgear PCB project safety plan.pdf 1997 Goodfellow switchgear transformer PCB replacement project.pdf Project listing and 1984 Goodfellow complex asbestos air sampling (2004-0157)

2002_0089_MO0603_IAQ.xls

1988 Regional radon testing documents (2004-0141)

SameTime notes with Unfried dtd 24 Jun 2003.pdf

1988 radon programstart memo.pdf

1989_Radon_7th_Cherry_ColumbiaMo.pdf

1989 Radon 207 AdamsJeffCityWeldon.pdf

1989_Radon_405S_Tucker_StLouis.pdf

1989 Radon 631WMain JeffCity.pdf

1989 radon 1312Ave NorfolkNe.pdf

1989_Radon_6800farly_OP_KS.p

files

df 1989_radon_8068Reeder_Rd.tif 1989_radon_9240TroostUSDA.p df 1989_radon_14792W99_lenexaKs.pdf 1990 Radon COstatus memo.p df 1990 radon USPS above4 list.p df 1990Radon_LeaseList_above4.p df 1991_radon__Ne_memo_status.pdf 1991 Radon 209Adams JeffCity TribuneCo.pdf 1991 Radon allbldgs above4list.pdf 1991 Radon epa locations.pdf 1991_Radon_gladstonelease.pdf 1991 Radon la retestmemo.pd 1991 Radon leases above4.pdf 1992_Radon_7070SpringSt_Omaha.pdf 1992 radon 12351 96terrLenexa.pdf 1992_radon_Albright_HughesstudyonUSPS.pdf 1992 radon lowa memo re mitigation.pdf 1993_radon_7070SpringOmaha_samplelocale.pdf 1993 Radon memo100%done.p df 1993 Radon memofromCO 100%completion.pdf 1993 radon Ne mitigation memo.pdf 1993_radon_PHS_lease_retests. pdf 1993 Radon retestresults SSALocations.pdf 1991 MO0618AF DOD mold project (2004-0159) 2001 0098 FSES.doc 1991_4300mold_bldg110.pdf 2001 MO0602AF Fire Safety Survey (2001-0098) 2001_0098_FireSurvey_Bldg107.zip

2001 0098 FireSurvey Bldg107.doc 2001 0100 FSES MO0606.doc 2001 MO0606AF Fire safety survey (2001-0100) 2001_0101_FSES_MO0609.doc 2001 0100 FireSafetySurvey bldg103.doc 2001 MO0609AF Fire safety survey (2001-0101) 2001 0101 FireSafetySurvey bldg104.doc 2001_0099_FSES_MO0610.doc 2001 MO0610AF Fire safety survey (2001-0099) 2001_0102_FSES_MO0612.doc 2001 0099 FireSurvey Bldg104E.doc 2001 MO0612AF Fire safety survey (2001-0102) USDA FSA Environmental letter.doc 2001_0102_FireSurvey_bldg105.doc 2002 MO0618AF asbestos roofing project (2002-0014) 2002 0014 2.doc 2002_0014_1.xls 2002_0014_ACM_specs_Bldg110_roof.zip 2002_0014_ACM_specs_Bldg110_roof.doc 2008 0206dpix0025.JPG 2002_4300_bldg110_roof.pdf 2002 4300 PLM.pdf 2003 MO0606AF IAQ testing project (2003-0056) 2004 Bldg103 mold.xls 2001 Goodfellow SEM survey memo.pdf Bldg 103 Goodfellow Drawings.zip FLR-02A.DWG FLR-02B.DWG FLR-02C.DWG FLR-02D.DWG FLR-01A.DWG FLR-01B.DWG FLR-01C.DWG

FLR-01D.DWG Labresults after ERA cleaning 1 2005.pdf Bldg 103 Mold Sampling Summary.doc Bldg103 AirQuality Summary.d ос Bldg103 May2004.xl S Bldg103 Sept2004.xl eMail re Mold in Bldg 103, dtd 10 Sep 2003.pdf EAA Analytical Report re GSA Goodfellow Bldg 103 Re-Testing, dtd 9 Sep 2003.xls EAA Analytical Report re GSA Goodfellow Bldg 103 Testing, dtd 28 Jul 2003.xls ERA report fafter cleaning testing.doc Goodfellow Bldg 103 IAQ report dtd 14 Aug 2003.pdf Goodfellow Bldg 103 TVOC Results.pdf 2003 MO0610AF paint cleanup project (2003-0070) Contract Dox QuanTem asbestos sample results report.pdf ERA_CCR_listing.pdf ERA PROPOSAL.pdf eMail re Cost Estimate for completing JHAs, dtd 7 Feb 2007.pdf 2003 MO0610AF lead Hg sampling in childcare report.pdf Cleanup SCOPE OF WORK.doc eMail re Day Care Problem, dtd 23 Sep 2003.pdf EHL e C0314948 (Goodfellow Lead-Mercury), dtd 14 Oct 2003.xls Erio Report 15 Nov 2003.pdf eMail re results of sampling in Day Care Center, dtd 15 Oct 2003.pdf eMail to 6PEC-F advising them to abate lead, dtd 8 Jan 2004.pdf eMail re Goodfellow Day Care Lead Paint Project, dtd 8 Dec 2003.pdf eMail, Cost Estimate to Abate Lead in Day Care, dtd 29 Dec 2003.pdf 2003 MO0612AF USDA mold testing project (2003-0040) Initial Sampling Report.xls Mold testing results from Lowrey.pdf

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OSHA ppe standard.doc OSHA ppe standard.htm printplant.doc printplant.htm sig.jpg 1998 MO0618AF basement flood project (2000-0044).zip 1998_bldg110_4300_IAQ_report.doc 1998 Bldg110 4300 mold summary.doc 1998 IAQ 4300 bldg110 mold.pdf 2000 0044.xls 2000 0044.zip 2000 0044 4300 bldg 110 flood - susan carter summary.doc 2000_0044.doc 2000 0044 1.doc lab report page 2.tif lab report cover letter.tif lab report page 1.tif 1999 Goodfellow complex USPS enviro questions (2004-0164).doc 1999 Goodfellow complex UST closure (2003-0035).zip 1999 UST Closure at Bldg 3, 4300 Goodfellow, St Louis.zip UST Closure rpt dtd 16 Oct 1998 re Bldg 103, 4300 Goodfellow.pdf MDNR ltr dtd 13 Apr 1999 re Final Closure of UST at Bldg 103 4300 Goodfellow.pdf Photos of new UST for Bldg 103, 4300 Goodfellow, St Louis.pdf Missouri Statement of Closure form (App J of UST Closure Guidance Document).pdf GSA ltr to MDNR dtd 5 Oct 1998 re correcting UST registration data.pdf 2000 MO0618AF IAQ mold test (2000-0069).pdf 2000 MO0618AF DFAS mold concerns (2004-0165).pdf 2001 Goodfellow Complex fire alarm project (2001-0079).doc

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employees.pdf 1986 regional memo on asbestos.pdf 1987 CO memo on EPA MOU for asbestos.pdf 1987 MO0603AF MO0606AF asbestos air sample results.pdf 1989 CO memo to regions on IAQ os air requirements.pdf 1989 Dec month asbestos reporting memo.pdf 1989 St L memo to region on asbestos labeling.pdf 1990 asbestos critical elements.pdf 1990 asbestos special cleaning O&M.pdf 1990 CO and regional memos on Lead drinking water coolers.pdf 1990 CO draft memo on asbestos communication.pdf 1990 CO to region info on refrigerant dangers.pdf 1990 memo on asbestos critical elements review.pdf 1990 Monthly asbestos project report.pdf 1990 Regional written respiratory protection program.pdf 1991 CO memo on asbestos tenant communication.pdf 1991 draft CO memo on asbestos program mgrs.pdf 1991 EPA notice of asbestos trained persons.pdf 1991 Goodfellow memo to VA on IAQ testing.pdf 1991 monthly asbestos report.pdf 1991 St Louis Field office memo to region on disposing chemicals.pdf 1992 CO memo to regions on acm ust and radon baseline data request.pdf 1992 GSA EPA regional mtg on CERCL responsibilities.pdf 1992 MO0609AF NE0051ZZ asbestos release episodes.pdf 1992 regional memo to field offices on acm communication.pdf 1993 CO memo to regions on acm O&M requirements.pdf 1993 CO memo to regions on acm prealteration assess and communication.pdf

Appendix 2

1993 CO memo to regions on acm program tracking.pdf 1993 Goodfellow complex quarterly acm communication.pdf 1993 Goodfellow IAQ survey tunnels mold.pdf 1993 memo to DCD requesting project acm comm info.pdf 1993 Ne Ks St Louis guarterly acm project communication reports.pdf 1993 Regional listing of building asbestos.pdf 1993 Regional memo to field offices requiring acm communication rpts.pdf 1993 Regional quarterly report to CO on all acm in bldgs.pdf 1993 St Louis acm project communication.pdf 1993 St Louis acm project report.pdf 1993 St Louis acm project tracking.pdf 1993 St Louis FO quarterly acm comm report.pdf 1993 St Louis guarterly acm comm report.pdf 1993 St Louis guarterly acm communication.pdf 1994 CO memo to regions new OSHA acm construction stds.pdf 1994 regional memo on vat floor buffing air levels.pdf 1995 Goodfellow OSH survey memo.pdf 1995 MO0610AF SEM survey findings.pdf 1995 MO0620AF SEM survey findings.pdf 1995 MO0628AF SEM survey findings.pdf 1996 memo to St Louis field office on UST testing.pdf 1997 CO memo to regions on acm records retention.pdf 1997 MO0610AF OSH survey memo.pdf 1998 Bldg 103 UST closure report.pdf 1998 CO FOIA letter on Enviro contaminated sites nationwide.pdf 1998 Goodfellow childcare safety inspection.pdf 1998 Goodfellow generator project site safety health plan.pdf 1998 Goodfellow meeting with MDNR DOD.zip

1998 Internal emails on meeting and GSA role.pdf

1997 Corps MDNR GSA meeting attendee list.pdf

1997 Fax from Corps on meeting logistics.pdf

1997 Letter from MDNR to Army on enviro assessment re BRAC.pdf

2002 Phase I ESA report.doc

1998 Goodfellow St Louis Mo UST

memos.pdf

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1998 St Louis SEM survey

email.pdf

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1999 Goodfellow complex UST project specs.pdf

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1999 St Louis OSH survey summary

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2001 regional memo on review of old Army reports.pdf

2001 regional OSH report.pdf

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2002 Bldg 105 surface wipe results for all enviro

agents.pdf

002 Goodfellow safety survey findings.pdf

002 MO0606AF accident

email.pdf

2002 MO0606AF emergency generators email.pdf

002 MO0606AF UST registration form.pdf 2002_0014_MO0618AF roof felt acm removal project.zip

> 2002_0014_ACM_specs_Bldg110_roof.doc 2002_4300_bldg110_roof.pdf 2002_4300_PLM.pdf 2002_bldg110roof_4300.pdf ReadThisFirst.txt 2002_0014_1.xls 2002_0014_2.doc

2008_0150 MO0609AF lead air sampling pump data.pdf

2003 Goodfellow st louis UST email.pdf

2003 Goodfellow UST fee form to City.pdf

2003 Letter to USDA re relocation and safe levels.pdf

2003 MO0606AF UST letter to DISA.pdf

2004 Goodfellow complex MDNR letter on USTs.pdf

2004 Goodfellow emergency response Tier II contacts.pdf

2004 Goodfellow UST tank registration cert.pdf

2004 MO0606AF UST letter from MDNR.pdf

2005 MO0606AF UST tightness test

results.pdf

2005 MO0606AF UST tracer testing docs.pdf

2006 Goodfellow UST fee paid to MDNR.pdf

2007 Goodfellow childcare safety email.pdf

2007 MO0606AE UST inspection.pdf

APPENDIX 2

List of Information Sources: Names of Files, Folders and/or Documents

Goodfellow-Related Files and Folders Reviewed by FOH

2018 Region 6 Goodfellow OIG Audit

2018 Region 6 Goodfellow OIG Audit

CAP Action Step Submittals part 1.zip CAP Recommendation 001 Action Step 001 10 25 2019.zip PBS 5940 Safety and Health Management Policy (10 23 2019).pdf Appendix A - PBS 5940.3 Companion PBS Desk Guide (10 23 2019).pdf Email documenting distribution of new policy 10 25 2019.pdf CAP Recommendation 001 Action Step 002 10_31_2019.zip Policy 5940_3 Training Slides 10_22_2019.pptx Distribution email with training announcement 10 23 2019.pdf New Policy 5940 3 Training Attendee List 10 2019.docx CAP Recommendation 002 Action Step 002 4_9_2019.pdf CAP Recommendation 001 Action Step 003 5 28 2019.pdf CAP Recommendation 001 Action Step 004 10 22 2019 .docx CAP Recommendation 002 Action Step 001 3 21 2019.pdf CAP Recommendation R003 1 2 3 4 R004 1 R005 1 R006 1 5 31 2019.zip Goodfellow Stakeholder Email 15.pdf BA61 Studies Tracking Process 12.14.2018.docx **Env Report Filing** structure.docx GF CM report Week of 03192019.pdf GF GSA SSSP Revision 6 07-27-2018.docx GF online reading room table of contents.pdf **Goodfellow SSSP Review** Log.xlsx CAP Recommendation R005 Action Step 002 10 17 19.pdf CAP Recommendation R004 Action Step 002 10 17 2019.pdf CAP Recommendation R004 Action Step 003 10 17 2019.pdf CAP Action Step Submittals part 1 2

CAP Recommendation 001 Action Step 001 10 25 2019.zip PBS 5940 Safety and Health Management Policy (10 23 2019).pdf Appendix A - PBS 5940.3 Companion PBS Desk Guide (10 23 2019).pdf Email documenting distribution of new policy 10_25_2019.pdf CAP Recommendation 001 Action Step 002 10 31 2019.zip Policy 5940 3 Training Slides 10 22 2019.pptx Distribution email with training announcement 10 23 2019.pdf New Policy 5940 3 Training Attendee List 10 2019.docx CAP Recommendation 002 Action Step 002 4 9 2019.pdf CAP Recommendation 001 Action Step 003 5 28 2019.pdf CAP Recommendation 001 Action Step 004 10 22 2019 .docx CAP Recommendation 002 Action Step 001 3_21_2019.pdf CAP Recommendation R003 1_2_3_4 R004 1 R005 1 R006 1 5 31 2019.zip Process 12.14.2018.docx GF GSA SSSP Revision 6 07-27-2018.docx Goodfellow SSSP Review Log.xlsx GF CM report Week of 03192019.pdf Goodfellow Stakeholder Email 15.pdf GF online reading room table of contents.pdf **Env Report Filing** structure.docx CAP Recommendation R005 Action Step 002 10 17 19.pdf CAP Recommendation R004 Action Step 002 10 17 2019.pdf CAP Recommendation R004 Action Step 003 10_17_2019.pdf A170027 - Goodfellow Final Report.pdf CAP Action Step Submittals part 1.zip CAP Recommendation 001 Action Step 001 10 25 2019.zip PBS 5940 Safety and Health Management Policy (10 23 2019).pdf Appendix A - PBS 5940.3 Companion PBS Desk Guide (10 23 2019).pdf Email documenting distribution of new policy 10 25 2019.pdf CAP Recommendation 001 Action Step 002 10 31 2019.zip Policy 5940 3 Training Slides 10 22 2019.pptx Distribution email with training announcement 10 23 2019.pdf

New Policy 5940 3 Training Attendee List 10 2019.docx CAP Recommendation 002 Action Step 002 4 9 2019.pdf CAP Recommendation 001 Action Step 003 5 28 2019.pdf CAP Recommendation 001 Action Step 004 10_22_2019 .docx CAP Recommendation 002 Action Step 001 3 21 2019.pdf CAP Recommendation R003 1_2_3_4 R004 1 R005 1 R006 1 5 _31_2019.zip Goodfellow Stakeholder Email 15.pdf BA61 Studies Tracking Process 12.14.2018.docx Env Report Filing structure.docx GF CM report_Week_of_03192019.pdf GF GSA SSSP Revision 6 07-27-2018.docx GF online reading room table of contents.pdf Goodfellow SSSP Review Log.xlsx CAP Recommendation R005 Action Step 002 10_17_19.pdf CAP Recommendation R004 Action Step 002 10 17 2019.pdf CAP Recommendation R004 Action Step 003 10 17 2019.pdf CAP Recommendation R006 Action Step 002 10 17 2019 part 2.zip Sample RCRA Permit Site Project Communique.pdf Appendix A - R06 OSH Hazard Survey Checklist.pdf Appendix A - R06 OSH Program Cklst.pdf Appendix B - R06 Survey Report Abatement Worksheet Format.pdf Appendix B - R06 Survey Report Format.pdf Appendix B - R06 Tenant Insp Cvr Ltr and Rpt.pdf Appendix B - R6 Construction Survey Report Format.pdf Appendix C - R06 Abatement Plan Template.pdf Attachment A - Asbestos Work Permit.pdf Attachment A - Lead Work Permit.pdf Attachment B - Periodic Surveillance of ACM Form.xlsx Attachment B - Pre-Alterations Assessment Record - Fillable.pdf Attachment C - Pre-Alt Assessment SOW for LBP.pdf Attachment C - Tenant Asbestos Notification Letter Example.pdf Attachment D - Pre-Alt Assessment SOW for ACM.pdf

Attachment E - Record of Pre-Alteration Assessment - Fillable.pdf Attachment F - Fiber Release Episode and Response Action Report.pdf PBS_1000.1_Asbestos_Policy_-_Signed_on_March_25__2015.pdf R06 Asbestos Program.pdf **R06 Hazard Reporting** Policy.pdf R06 Hazardous Materials - Hazard Communication Program.pdf R06 Hearing Protection and Occupational Noise Exposure Control Program.pdf **R06 OSH Committee** Policy.pdf R06 OSH Facilities Survey Program.pdf R06 Radon Program.pdf R6 Env ReportTracking Spreadsheet.pdf R6 Environmental Studies and Reports Process.pdf R6 Investment Planning Process_ Framework & Guidance.pdf R6 Lead Management Program.pdf R6 OSH and FP&LS Funding Prioritization Guidance.pdf **R6 Radiation Safety** Program.pdf R6 Unanticipated (out of cycle) BA54 Project Inject Process.pdf Region 6 PBS Process for Health, Safety and Environmental Corrective Action and Disclosure.pdf Sample CERCLA RI Project Communique.pdf Goodfellow IG Audit (A170027) Overall CAP Tracking Sheet.xlsx

APPENDIX 2

List of Information Sources: Names of Files, Folders and/or Documents

Goodfellow-Related Files and Folders Reviewed by FOH

2019 New GSA S&H Policies

2019 New GSA S&H Policies

PBS 5940 S&H Management Policy (10_23_20) ADM 59402 GSA Occupational S&H Policy 3-21-2019 Appendix A PBS 5940.3 Companion PBS Desk Guide (10_23_2019)

APPENDIX 2

List of Information Sources: Names of Files, Folders and/or Documents

Goodfellow-Related Files and Folders Reviewed by FOH

Additional Documents Not Originally Provided by

Additional Docs Not Originally Provided by

GSA OIG PBS Env. Risk 2015-2017 .pdf GSA OIG Audit PBS Env. Risk Audit 2015 .pdf

From Jeff

New

2015.pdf

Letter Item 2.1 - GSA R6 IG Bannister Report 2010.pdf

Letter Item 2.3.1 - GF OSHA Complaint.pdf

Letter Item 2.3.1 - OSHA Complaint - GF Contamination Memerandom Sent 02-12-2016.pdf

Letter Item 2.3.2 - 05-2016 Misleading Communication To Federal Center Personnel.pdf

Letter Item 2.3.3 - 02-12-2016 E-mail String Setting Level and Disreguarding Pregnant Women.pdf

Letter Item 3.1 - GSA R6 OSHA Citations for 2006 Hardesty

Fatality.pdf

Letter Item 4.1 - 2016 GSA R6 Safety Committee Aenda Attachments OSHA - NIOSH.pdf

Letter Item 4.1 - 2016 GSA Region 6 Safety Committee Mid Year Agenda (1).pdf

Letter Item 4.1 - GSA R6 OSHA Citations for 2016 Goodfellow.pdf

Letter Item 4.2 - 2016 Building 104 Air Handler Heavy Metal Sampling Results (1).pdf

Letter Item 4.2 - 2016 Building 104 Air Handler Heavy Metal Sampling Results (2).pdf

Letter Item 4.2 - 2016 Building 104 Air Handler Heavy Metal Sampling Results (3).pdf

Letter Item 4.2 - 2016 Building 104 Air Handler Heavy Metal Sampling Results (4).pdf

Letter Item 4.2 - Additional 2016 Building 102E, 103 D, E, F, 106, 107 Air Handler Heavy Metal Sampling Results.pdf

Letter Item 4.2 - Additional 2016 Building 103 Air Handler Heavy Metal Sampling Results.pdf

Letter Item 4.2 - Additional 2016 Building 105 E, F, L Air Handler Heavy Metal Sampling Results.pdf

Letter Item 4.2 - Additional 2016 Building 110 Air Handler Heavy Metal Sampling Results.pdf

Letter Item 4.2 - Child Care Center - 2008 SCS Engeneers Report.pdf

Letter Item 4.2 - Child Care Center - 2016 Building 104E Air Handler Heavy Metal Sampling Results.pdf

Letter Item 4.3 - GSA R6 Safety Inspection (Building 107 Info) dtd Oct 2014.pdf

Letter Item 4.4 - 2016 Final NIOSH

Report.pdf

Goodfellow OSH Inspections - Third Email

Goodfellow OSH Inspections - Third Email\Goodfellow Electrical Vaults Appendix A.pdf Goodfellow Complex 4300 Goodfellow Boulevard Saf<u>ety Surv</u>ey dtd Oct 2012 - .pdf

2012 Goodfellow Safety Inspection Report and Complaint Fourth Email

2019 Goodfellow Federal Center Safety Survey Report Dtd August 2019.pdf

01-08-2013 Goodfellow Electrical Vault Study.pdf

06 -2018 Signed AFGE Ltr to GSA Administrator Fraud, Waste, and Abuse.pdf

2011 MO0605 4300 Goodfellow Boulevard Bldg 102E Safety Survey dtd Sep 2011.pdf

2012 MO0605 Goodfellow Complex, St Louis, Mo, Safety Survey, Dec 2012.pdf

2017 R9 Safety Findings MO0550 Goodfellow Complex appendix A (2).pdf

2018 R9 Safety Findings Goodfellow app

A.pdf

Email and Attachment Explaining Reason for 2016 Goodfellow OSHA and IG Complaint - Fifth

Email

02-12-2016 Email Explaining Why We Filed The OSHA Complaint.pdf 02-12-2016 Attachement to Email Explaing Why We Filed The OSHA

02-12-2016 Attachement to Email Explaing why we filed the OS Complaint.pdf

Saved Emails

Third	Saved Email.docx
Fifth	Saved Email.docx
First	Saved Email.docx
Fourth	_Email.docx
Second	Saved
Email <u>.docx</u>	_
Sixth	Saved Email.docx
Third	Saved Email Second Attachment.docx

2 20 2020 Additional Documents

Goodfellow Electrical Vaults - Issue Original Identified in 2012 - First in Batch #2

01-08-2013 Goodfellow Electrical Vault Study.pdf

03-30-2018 Goodfellow Vault Replacement Project

Communique.pdf

043020~1.PDF

04-02-2018 Goodfellow Vault Replacement Project

Communique.pdf

06-201~1.PDF

07-09-~1.PDF

FPE Comments to submittals.pdf

Goodfellow Electrical Vaults - Issue Original Identified in 2012 - Second in batch

#2

Goodfellow Electrical Vaults Appendix A.pdf

GSA Region 6 OSH Committee Documents - Third in batch #2 2014 End Of Year OSH Committee Mtg Minutes.pdf

2014 Heartland OSH Committee End Of Year Agenda.pdf

2014 Heartland OSH Committee Mid Year Agenda.pdf

2014 Mid Year OSH Committee Mtg Minutes.pdf

December 2011 Heartland Safety OSH Committee Agenda.pdf

December 2011 Mtg

Minutes.pdf December 2012 Heartland OSH Committee Agenda.pdf December 2012 Mtg Minutes.pdf End of Year 2013 OSH Committee Mtg Minutes.pdf End of Year, 2013 Heartland OSH Committee Agenda.pdf July 2012 Heartland OSH Committee Agenda.pdf July 2012 Mtg Minutes.pdf June 2011 Heartland Safety OSH Committee Agenda.pdf June 2011 Mtg Minutes.pdf Mid Year 2013 Heartland OSH Committee Agenda.pdf Mid Year 2013 Mtg Minutes.pdf GSA Region 6 OSH Committee Documents - Fourth in batch #2 2015 Heartland OSH Committee Mid Year Agenda.pdf 2015 Heartland OSH Committee Year End Agenda.pdf 2015 Year End OSH Committee Mtg Minutes.pdf 2016 Heartland OSH Committee Mid Year Agenda (1).pdf 2016 Heartland OSH Committee Year End Agenda - Committee.pdf 2016 Mid-Year OSH Committee Mtg Minutes.pdf 2017 Mid Year OSH Committee Mtg Minutes.pdf 2017 OSH Committee Mid Year Agenda.pdf 2017 Year End OSH Committee Mtg Agenda.pdf 2017 Year End OSH Committee Mtg Minutes (2).pdf 2018 Mid Year OSH Committee Mtg Agenda.pdf 2018 Mid Year OSH Committee Mtg Minutes.pdf 2018 Year End OSH Committee Mtg Agenda.pdf 2018 Year End OSH Committee Mtg Minutes.pdf OSH Agenda Request Mid-Year 2015.pdf OSHA - NIOSH Attachments.pdf Goodfellow Contamination - Fifth in batch #2

email Goodfellow Contamination.docx

Goodfellow Federal Center Lead Air and Wipe Sampling Report_Occu-Tec rpt dtd 16 Feb 2009.pdf

Thanks (Goodfellow) - Sixth in batch #2

09.10.2018 Email to PBS Commisioner FMD Director and Supervisor.pdf

2019 Gusky

Report.pdf

Appendix A - R06 OSH Hazard Survey Checklist.pdf

Appendix A - R06 OSH Program Cklst.pdf

Appendix B - R06 Survey Report Abatement Worksheet Format.pdf

Appendix B - R06 Survey Report Format.pdf

Appendix B - R06 Tenant Insp Cvr Ltr and Rpt.pdf

Appendix B - R6 Construction Survey Report Format.pdf

Appendix C - R06 Abatement Plan

Template.pdf

Appendix D - OSH Inspection Checklist-Report for Leased

<u>Spaces.</u>docx

Performance Plan.pdf

Thanks Email.docx

MO0095_Safety Survey

Rpt_01.27.2017.xlsm

MO0095ZZ_CRMS Safety Survey Cklst-06.13.2019.xlsm

R06 OSH Facilities Survey Program.pdf

Risk Management Survey Analysis.pdf

Hazard Abatement - Correcting Safety Deficiencies - Seventh in

batch #2

022020~1.XLS

10.26.2016 Email From Cy Houston - Deficiency List.pdf

2018 Mid Year R6 Hazard Abatement Log Updated 08-10-2018.pdf

Email Hazard Abatement - Correcting Safety Deficiencies Email.docx MASTER~1.XLS

Restricted for use within FOH - do not disseminate further - Eight in batch #2"

A14013~1.PDF

Goodfellow Documents - Ninth in batch #2

1998_01Meeting re Environmental Remediation at Goodfellow.pdf2003 Document About Bldg 105doc
Goodfellow Documents - Tenth in batch #2

#2

First

03.04.2016 Email String with St. Louis GSA Project Manager.pdf email Goodfellow Documents.docx email.pdf \March 10, 2016 email from Stop Work JE Novack.pdf N1022168 Suspension of Work 2016.3.10.pdf Goodfellow Documents - Eleventh in batch Goodfellow Documents - Eleventh in batch #2 email Goodfellow Documents.docx 2018 Complaint For Fraud Waste and Abuse - Twelfth in batch #2 06-02-~1.PDF 07.25.2018 Signed Letter to Senators More Fraud, Waste and Abuse in Region 6.pdf 2306 Platform Study Excerpt.pdf 2018 Complaint For Fraud Waste and Abuse - Twelfth in batch #2\Aug - Nov 2014 2306 Bannister Safety Survey.pdf email 2018 Complaint for Fraud Waste and Abuse.docx GSA Citations from OSHA 2306 Platforms.pdf OM Contractor Citations.pdf 2 26 2020 Additional Documents 6P2CMB Fire and Life Safety Program Communique -Fire 6P2CMBTemplateProgramCommuniqueandActionPlan.docx Fire Protection Issue - Second Bolling FB Final.pdf **Fire Protection** Email.docx Bolling Issue - Third 12.2019 Accident Log.pdf

12.2019 Hazard Report Log.pdf

12.2019 Incident Report.pdf

Email Bolling Issue.docx Dec 2019 Haz Abate Log IA.docx Dec 2019 Haz Abate Log KCN.docx Dec 2019 Haz Abate Log

KCS.docx Dec 2019 Haz Abate Log KS.docx Dec 2019 Haz Abate Log NE.docx Dec 2019 Haz Abate Log SLE.docx Dec 2019 Haz Abate Log SLW.docx December 2019 Safety Program - Safety Committee Communique.pdf Fire Protection Issue - Fourth Email Fire Protection.docx Email String - Prevedel Stairs.pdf **Bolling Issue - Fifth** email Bolling Issue.docx Goodfellow Contamination -Sixth Email Goodfellow Contamination.docx E-mail Asking for GF Contam Abate -Response.pdf E-mail Asking If GF is Contaminated -.pdf Initial punch list of selected FireLife Safety findings - Seventh Email Initial punch list of selected FireLife Safety findings.docx FSIS Fire-Life Safety Audit Exit-brief-ML-2015.pdf Initial punch list of selected FireLife Safety findings - Seventh\ML AuditFindings Fire PunchList.xlsx USDA Lab in Building 105 Goodfellow - Safety Findings.pdf Goodfellow Lead Sampling by GSA Region 6 in 2009 - Eighth Email Goodfellow Lead Sampling by GSA Region 6 in 2009.docx Surface Lead Assessment, 4300 Goodfellow, St Louis, MO; GSA rpt dtd 7 Apr 2009.pdf GSA IG 2006 Report on GSA PBS Environmental Program - Nineth 2006 GSA IG Report Environmental Program.pdf ML Fire and Life Safety Audit Final Report - Executive Summary and Findings Table - Tenth Email ML Fire and Life Safety Audit.docx ML Fire-Life Safety Audit-ES-rev1.doc ML Fire-Life Safety Findings-2015[7].docx

MLFIRE~3.DOC

Requested ReviewComments Draft Fire Protection Program Manual - Eleventh

~1.DOC

DRAFT-Fire Protection Manual Review Comments-(03.08.18).xlsx

DRAFT-GSA Fire Protection Program Manual-(dwf-03.08.18).pdf

Fire Protection Issue - Twelfth

2019.09.04 PreFinal Report_FINAL.pdf

Email Fire Protection Issue.docx

MO0127, 601 East 12th Street, Kansas City Mo, Safety Survey March 2019.pdf Union Complaints I Filed Against Region 6 Leadership - Thirteenth

01.20.2015 E-mail 2P2 Fire System Testing.pdf

10.09.2018 Signed Retaliation Complaint.pdf

10-15-2018 Signed Fire Protection Complaint.pdf

Email Union Complaints Filed Against Region 6 Leadership.docx

GSA.gov Mail - Certificate of Occupancy Union Complaint.pdf

2 29 2020 Additional Documents

Goodfellow Federal Center - AFGE Local 236 Heartland Region - First

Goodfellow Federal Center - AFGE Local 236 Heartland Region Email.docx

Goodfellow Federal Complex R6 Deception--Revised Jan 24.docx

Goodfellow Documents - Second

10-15-2016 - Goodfellow Medical Screening Survey Sent to Employees 1.pdf

10-15-2016 - Goodfellow Medical Screening Survey Sent to Employees.pdf

2016 Building 104 Air Handler Heavy Metal Sampling Results (1).pdf

2016 Building 104 Air Handler Heavy Metal Sampling Results (2).pdf

2016 Building 104 Air Handler Heavy Metal Sampling Results (3).pdf

2016 Building 104 Air Handler Heavy Metal Sampling Results (4).pdf

Additional 2016 Building 102E, 103 D, E, F, 106, 107 Air Handler Heavy Metal Sampling Results.pdf

.pdf

Additional 2016 Building 103 Air Handler Heavy Metal Sampling Results.pdf

Additional 2016 Building 105 E, F, L Air Handler Heavy Metal Sampling

Results.pdf

Additional 2016 Building 110 Air Handler Heavy Metal Sampling Results.pdf

Feb 10, 2016, email to Goodfellow tenants from

GF tenant leadership briefing paper 5-5-

16.pdf

GSA_Stakeholder_Memo_-_Introduction.pdf

OSHARP~1.PDF OSHA Rpt 2016.9.23 Electrical - Machine Guarding Violations.pdf OSHA Rpt 2018.2.13 Fall Protection Platforms.pdf Union Complaints I Filed Against Region 6 Leadership - Third 01.20.2015 E-mail 2P2 Fire System Testing.pdf 10.09.2018 Signed Retaliation Complaint.pdf 10-15-2018 Signed Fire Protection Complaint.pdf GSA.gov Mail - Certificate of Occupancy Union Complaint.pdf Union Complaints Filed Against Region 6 Leadership Email.docx 2013 Email String Safety and Fire Protection Priorities - Fourth 2013 Email String Safety and Fire Protection Priorities.docx 2013 GSA.gov Mail - Fwd my FY14 National Office priorities.pdf 2015 Safety Program Guidance email.pdf Governance Board Communique (3).docx **Explosives in Federal Buildings - Fifth** 11.10.2015 Explosives Storage Policy - Request for Update by COB November 12, 2015.pdf 2015 email discussion Goodfellow lab - Re Response to OIG audit report.pdf Denny Occupancy Permit Requirements (@gsa.pdf Explosion in Federal Building.pdf Explosives in Federal Buildings Email.docx response to question.pdf Making Region 6 Managers Responsible -Sixth 11.2013 Email Supervisory OSH Responsibilities .pdf CRS spreadsheets -Seventh 2017 CRS MO0550 9700 Page Center.xlsx 2017 CRS MO0600 Goodfellow Complex.xlsx 2017 MO0600 Page Center appendix A.pdf CRS Spreadsheets Email.docx Inspection Reports for St. Louis West - Eighth FB app A.pdf 2018 2018 MO0550 Goodfellow app A.pdf

2018 MO0600 Prevedel app

A.pdf

Fire Protection Stuff - Nineth

07.25.2018 Signed Letter to Senators More Fraud, Waste and Abuse in Region 6.pdf

2012 email - Fire Protection Qualifications for Fire Protection Issue at Denny FB Lincoln NE.pdf

2015 email discussion Goodfellow lab - Re_ Response to OIG audit report.pdf

Fire Protection Stuff Email.docx

USDA Lab in Prevedel.pdf

FPLS Site Visit Report 7-24-2015.pdf

2019 Bolling Fire Document from last email - Tenth

2019.09.04 PreFinal Report_FINAL.pdf

APPENDIX 3 Summary of OSHA Injury and Illness Recordable Cases Goodfellow Federal Complex

Year	# of Cases	Job Description	Description
2002	0		
2003	0		
2004	0		
2005	0		
2006	0		
2007	0		
2008	0		
2009	1	Facility Operations Specialist	Fall off dock (DAWC)
2010	*	*	*
2011	*	*	*
2012	*	*	*
2013	*	*	*
2014	*	*	*
2015	*	*	*
2016	*	*	*

Summary of OSHA Injury and Illness Recordable Cases Goodfellow Federal Complex

*Information was not available to FOH

U.S. Department of Labor

Occupational Safety and Health Administration 1222 Spruce Street Room 9.104 Saint Louis, MO 63103 Phone: 314-425-4249 Fax: 314-425-4289



Notice of Unsafe or Unhealthful Working Conditions

To:

GENERAL SERVICES ADMINISTRATION 4300 Goodfellow Blvd Saint Louis, MO 63120

Inspection Number: 1120691 Inspection Date(s): 01/14/2016 - 06/30/2016 Issuance Date: 07/01/2016

Respond to: The Strategic Team Leader

Inspection Site:

4300 Goodfellow Blvd Saint Louis, MO 63120 The violation(s) described in this Notice is (are) alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given below

This Notice of Unsafe and Unhealthful Working Conditions (Notice) describes violations of the Occupational Safety and Health Act of 1970, the Executive Order 12196, and 29 CFR 1960, Basic Program Elements for Federal Employee Occupational Safety and Health Programs and Related Matters. You must abate the violations referred to in this Notice by the dates listed unless, within 15 working days (excluding weekends and Federal holidays) from your receipt of this Notice you request an Informal Conference with the US Department of Labor OSHA Area Office at the address shown above. Please refer to the enclosed publication "Federal Employer Rights and Responsibilities Following an OSHA Inspection" which outlines the appeals procedure for this Notice and which should be read in conjunction with this form.

Posting – The law requires that a copy of this Notice be posted immediately in a prominent place at or near the location of the violation(s) cited herein, or, if it is not practicable because the nature of the employer's operations, where it will be readily observable by all affected employees. This Notice must remain posted until the violation(s) cited herein has (have) been abated, or for 3 working days (excluding weekends and Federal holidays), whichever is longer.

Notification of Corrective Action – For each violation which you do not appeal, you must provide abatement certification to the Area Director of the OSHA office issuing the Notice and identified above. This abatement certification is to be provided by letter within 10 calendar days after each abatement date. Abatement certification includes the date and method of abatement. If the Notice indicates that the violation was corrected during the inspection, no abatement certification is required for that item. The abatement certification letter must

Notice of Unsafe and Unhealthful Working Conditions

Page 1 of 11

be posted at the location where the violation appeared and the corrective action took place or employees must otherwise be effectively informed about abatement activities. A template abatement certification letter is enclosed with this Notice. In addition, where the Notice indicates that abatement documentation is required, evidence of the purchase or repair of equipment, photographs or video, receipts, training records, etc., verifying that abatement has occurred is required to be provided to the Area Director.

Program Responsibilities - Section 19(a)(1) of the OSH Act requires the head of each Federal agency to comply with applicable occupational safety and health standards. The intent of this section and Executive Order 12196 is implemented through 29 CFR 1960.8(b). If you are cited for violations of applicable safety and health standards, you have also violated the program element 29 CFR 1960.8(b), which stipulates:

"The head of each agency shall comply with the Occupational Safety and Health Administration standards applicable to the agency."

Informal Conference – An informal conference is not required. However, if you wish to have such a conference you may request one with the Area Director within 15 working days after receipt of this Notice. As soon as the time, date, and place of the informal conference have been determined please complete the enclosed "Notice to Employees" and post it where the Notice is posted. During such an informal conference you may present any evidence or views you believe would support an adjustment to the Notice. In addition, bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far.

If you are considering a request for an informal conference to discuss any issues related to the Notice, you must take care to schedule it early enough to allow time to appeal after the informal conference should you decide to do so. Please keep in mind that a written letter of intent to appeal must be submitted by the Agency's National OSH Manager to the OSHA Area Director within 15 business days of your receipt of the OSHA Notice to request that OSHA's Regional Administrator review the case.

Inspection Activity Data – You should be aware that OSHA publishes information on its inspection and notice activity on the Internet under the provisions of the Electronic Freedom of Information Act. The information related to these alleged violations will be posted when our system indicates that you have received this notice. You are encouraged to review the information concerning your establishment at <u>www.OSHA.gov</u>. If you have any dispute with the accuracy of the information displayed, please contact this office.

Notice of Unsafe and Unhealthful Working Conditions

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NOTICE TO EMPLOYEES

An informal conference has been scheduled with the Occupational Safety and Health Administration (OSHA) to discuss the Notice of Unsafe or Unhealthful Working Conditions (Notice) issued on 07/01/2016. The conference will be held by telephone or at the OSHA office located at 1222 Spruce Street, Room 9.104, Saint Louis, MO 63103 on ______ at _____. Employees and/or representatives of employees have a right to attend an

informal conference.

Notice of Unsafe and Unhealthful Working Conditions

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CERTIFICATION OF CORRECTIVE ACTION WORKSHEET – FEDERAL AGENCIES

Inspection Number: 1120691

Agency Name: GENERAL SERVICES ADMINISTRATION Inspection Site: 4300 Goodfellow Blvd, Saint Louis, MO 63120 Issuance Date: 07/01/2016

Employer Instruction: List the specific method of correction for each item on the enclosed notices that does not read "Corrected During Inspection" and return to: U.S. Department of Labor – Occupational Safety and Health Administration, 1222 Spruce Street, Room 9.104, Saint Louis, MO 63103. Failure to submit a timely certification of corrective action may result in a notification to your agency DASHO.

Notice Number	and Item Number	was corrected on	
By (Method of Abatement):			

Notice Number ______ and Item Number _____ was corrected on ______ By (Method of Abatement):

Notice Number _____ and Item Number _____ was corrected on ______ By (Method of Abatement): _____

Notice Number _____ and Item Number _____ was corrected on ______ By (Method of Abatement): ______

Notice Number _____ and Item Number _____ was corrected on ______ By (Method of Abatement):

Notice Number _____ and Item Number _____ was corrected on ______ By (Method of Abatement):

I certify that the information contained in this document is accurate and that the affected employees and their representatives have been informed of the abatement.

Signature

Date

Title

NOTE: 29 USC 666(g) whoever knowingly makes any false statements, representation or certification in any application, record, plan or other documents filed or required to be maintained pursuant to the Act shall, upon conviction, be punished by a fine of not more than \$10,000 or by imprisonment of not more than 6 months or both.

POSTING: A copy of completed Corrective Action Worksheet should be posted for employee review.

Notice of Unsafe and Unhealthful Working Conditions

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Inspection Number: 1120691 Inspection Date(s): 01/14/2016 -06/30/2016 Issuance Date: 07/01/2016



Notice of Unsafe and Unhealthful Working Conditions

Company Name: GENERAL SERVICES ADMINISTRATION **Inspection Site:** 4300 Goodfellow Blvd, Saint Louis, MO 63120

The alleged violations below have been grouped because they involve similar or related hazards that may increase the potential for injury or illness.

Notice 1 Item 1a Type of Violation: Serious

29 CFR 1910.219(b)(1): Flywheel(s) with parts seven feet or less above floor(s) or platform(s) were not guarded in accordance with the requirements specified in 29 CFR 1910.219(b)(1)(i) through (b)(1)(iv):

a) On or about 01/14/2016, Building 104, elevator B16, flywheels located less than seven (7) feet from floor were not guarded. The condition exposed the employees to amputation hazard.

b) Building 105 elevator B16, flywheels located less than seven (7) feet from the floor were not guarded.

c) Building 105, elevator-B45, flywheels located less than seven (7) feet from the floor were not guarded.

d) Building 105F, elevator M-36, flywheels located less than seven (7) feet were not guarded.

Abatement certification and abatement documentation is required for this violation. The documentation should include written verification of abatement, applicable measurements or monitoring results, and photographs or videos which you believe will be helpful. The abatement certification sheet is enclosed with the citation(s).

ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM

Date by which Violation must be abated: 07/25/2016

See Pages 1 through 3 of this Notice for information on employer and employee rights and responsibilities. Notice of Unsafe and Unhealthful Working Conditions Page 5 of 11

Inspection Number: 1120691 Inspection Date(s): 01/14/2016 -06/30/2016 Issuance Date: 07/01/2016



Notice of Unsafe and Unhealthful Working Conditions

Company Name: GENERAL SERVICES ADMINISTRATION **Inspection Site:** 4300 Goodfellow Blvd, Saint Louis, MO 63120

Notice 1 Item 1b Type of Violation: Serious

29 CFR 1910.219(e)(3)(i): Vertical and inclined belts were not enclosed by a guard conforming to standards in paragraphs (m) and (o) of this section.

a) On or about 01/04/2016, in Building 104, the vertical belts running the elevator B-16, located less than seven (7) feet from the floor were not guarded.

b) Building 105, vertical belts running elevator B-16, located less than seven (7) feet from the floor were not guarded.

c) Building 105, vertical belts running elevator B-45, located less than seven (7) feet from the floor were not guarded.

d) Building 105F, vertical belts running elevator M-36, located less than seven (7) feet from the floor were not guarded.

Abatement certification and abatement documentation is required for this violation. The documentation should include written verification of abatement, applicable measurements or monitoring results, and photographs or videos which you believe will be helpful. The abatement certification sheet is enclosed with the citation(s).

ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM

Date by which Violation must be abated: 07/25/2016

See Pages 1 through 3 of this Notice for information on employer and employee rights and responsibilities. Notice of Unsafe and Unhealthful Working Conditions Page 6 of 11

Inspection Number: 1120691 Inspection Date(s): 01/14/2016 -06/30/2016 Issuance Date: 07/01/2016



Notice of Unsafe and Unhealthful Working Conditions

Company Name: GENERAL SERVICES ADMINISTRATION **Inspection Site:** 4300 Goodfellow Blvd, Saint Louis, MO 63120

Notice 1 Item 2 Type of Violation: Serious

29 CFR 1910.303(b)(1): Examination. Electric equipment was not free from recognized hazards that are likely to cause death or serious physical harm to employees.

a) On or about 01/14/2016, Building 104, 2nd floor equipment area, the electrical control cabinet for elevator B-16 was not covered exposing the employees to electrocution.

b) Building 105, 2nd floor equipment area, the electrical control cabinet for elevator B-16 was not covered exposing the employees to electrocution.

c) Building 105, 2nd floor equipment area, the electrical control cabinet for elevator B-45 was not covered exposing the workers to electrocution.

d) Building 105F, 2nd floor equipment area, the electrical control cabinet for elevator M-36 was not covered exposing the employees to electrocution.

Abatement certification and abatement documentation is required for this violation. The documentation should include written verification of abatement, applicable measurements or monitoring results, and photographs or videos which you believe will be helpful. The abatement certification sheet is enclosed with the citation(s).

Date by which Violation must be abated: 07/25/2016

See Pages 1 through 3 of this Notice for information on employer and employee rights and responsibilities. Notice of Unsafe and Unhealthful Working Conditions Page 7 of 11

Inspection Number: 1120691 Inspection Date(s): 01/14/2016 -06/30/2016 Issuance Date: 07/01/2016



Notice of Unsafe and Unhealthful Working Conditions

Company Name: GENERAL SERVICES ADMINISTRATION **Inspection Site:** 4300 Goodfellow Blvd, Saint Louis, MO 63120

Notice 1 Item 3 Type of Violation: Serious

29 CFR 1910.1020(e)(2)(i)(A)(1): A record which measures or monitors the amount of a toxic substance or harmful physical agent to which the employee is or has been exposed;

On or about 01/14/2016, the employer did not make measuring and monitoring records available for employees' review. The monitoring results showed presence of lead containing dust on surfaces where they worked; therefore exposing them to lead.

Abatement certification and abatement documentation is required for this violation. The documentation should include written verification of abatement, applicable measurements or monitoring results, and photographs or videos which you believe will be helpful. The abatement certification sheet is enclosed with the citation(s).

ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM

Date by which Violation must be abated: 07/25/2016

See Pages 1 through 3 of this Notice for information on employer and employee rights and responsibilities. Notice of Unsafe and Unhealthful Working Conditions Page 8 of 11

Inspection Number: 1120691 Inspection Date(s): 01/14/2016 -06/30/2016 Issuance Date: 07/01/2016



Notice of Unsafe and Unhealthful Working Conditions

Company Name: GENERAL SERVICES ADMINISTRATION **Inspection Site:** 4300 Goodfellow Blvd, Saint Louis, MO 63120

Notice 1 Item 4 Type of Violation: Serious

29 CFR 1910.1025(h)(1): All surfaces were not maintained as free as practicable of accumulations of lead.

On or about 01/14/2016, in GSA Buildings 103, 103F, 104 and 105F surfaces such as warehouses, staircases, air handling units, chiller rooms and file rooms were not kept clean of accumulation of lead containing dust.

Abatement certification and abatement documentation is required for this violation. The documentation should include written verification of abatement, applicable measurements or monitoring results, and photographs or videos which you believe will be helpful. The abatement certification sheet is enclosed with the citation(s).

ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM

Date by which Violation must be abated: 07/25/2016

See Pages 1 through 3 of this Notice for information on employer and employee rights and responsibilities. Notice of Unsafe and Unhealthful Working Conditions Page 9 of 11

Inspection Number: 1120691 Inspection Date(s): 01/14/2016 -06/30/2016 Issuance Date: 07/01/2016



Notice of Unsafe and Unhealthful Working Conditions

Company Name: GENERAL SERVICES ADMINISTRATION **Inspection Site:** 4300 Goodfellow Blvd, Saint Louis, MO 63120

The alleged violations below have been grouped because they involve similar or related hazards that may increase the potential for injury or illness.

Notice 1 Item 5a Type of Violation: Serious

29 CFR 1910.1200(h)(2)(ii): The employer did not provide information to the employees on operations in their work area where hazardous chemicals were present:

On or about 01/14/2016, the employer did not inform the workers of the presence of lead containing dust in workplace surfaces that they could come in contact with.

Abatement certification and abatement documentation is required for this violation. The documentation should include written verification of abatement, applicable measurements or monitoring results, and photographs or videos which you believe will be helpful. The abatement certification sheet is enclosed with the citation(s).

ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM

Date by which Violation must be Abated: 07/25/2016

See Pages 1 through 3 of this Notice for information on employer and employee rights and responsibilities. Notice of Unsafe and Unhealthful Working Conditions Page 10 of 11

Inspection Number: 1120691 Inspection Date(s): 01/14/2016 -06/30/2016 Issuance Date: 07/01/2016



Notice of Unsafe and Unhealthful Working Conditions

Company Name: GENERAL SERVICES ADMINISTRATION **Inspection Site:** 4300 Goodfellow Blvd, Saint Louis, MO 63120

Notice 1 Item 5b Type of Violation: Serious

29 CFR 1910.1200(h)(2)(iii): The employer did not provide information to the employees as to the location and availability of the written hazard communication program, and material safety data sheets required by 29 CFR 1910.1200:

On or about 01/14/2016, Buildings, 103, 103F, 104, 105, 105E, 110, their basements and Crowell spaces, where lead containing dust had settled on workplace surfaces, the employer did not disclose the availability of the written hazard communication program.

Abatement certification and abatement documentation is required for this violation. The documentation should include written verification of abatement, applicable measurements or monitoring results, and photographs or videos which you believe will be helpful. The abatement certification sheet is enclosed with the citation(s).

ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM

Date by which Violation must be abated: 07/25/2016

William McDonald, CSP

Area Director

See Pages 1 through 3 of this Notice for information on employer and employee rights and responsibilities. Notice of Unsafe and Unhealthful Working Conditions Page 11 of 11