**EPA REGION 8 QUALITY MANAGEMENT PLAN REVIEW CROSSWALK**

**CIO 2105-S-01 (S-1)**

This crosswalk is used to review Quality Management Plans (QMPs) submitted to the EPA Region 8 Quality Assurance Branch for review under the EPA Quality Policy and Procedure Order 2105 (current version) and/or ASQ/ANSI E4-2014 (current version), *Quality Management* S*ystems for Environmental Information and Technology Programs*. Items from this checklist are discussed in detail in the *EPA Quality Management Plan Standard CIO 2105-S-01* (S-1)and *EPA Environmental Information Quality Policy CIO 2105* (current versions), <https://www.epa.gov/quality/quality-program-directives>. Consult these resources for more information on the items below.

The QMP must include all required elements of the S-1 Standard, which are listed in this crosswalk (this crosswalk only includes elements for non-EPA organizations). It must also include all figures, attachments, and appendices (e.g., SOPs, forms, etc.). Cited directives and regulations provided within this document are for clarity and convenience (i.e., EPA QA/S-1 section number or CIO 2105 section number). Please ensure that directives(s), regulation(s), requirement(s), and language are adhered to when updating the QMP and crosswalk.

This crosswalk is a controlled document. Do not modify the crosswalk format or document type. Information in the “Elements” column within the crosswalk describe requirements and may not be modified.

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| **QMP PREPARER MUST COMPLETE AS PART OF THE SUBMISSION** | | | | | | | | | | |
| **New/Revised and Annual Review QMP and Crosswalk Requirements:** | | | | | | | | | | |
| **New/Revised QMP** – QMPs have a period of applicability of up to 5 years from the date of EPA Regional QA Manager (RQAM) approval. Newly developed QMPs must go through the complete review process in order to receive approval. QMPs that have reached the end of their period of applicability must undergo a full revision by the QMP Preparer and then go through the complete EPA review process in order to receive approval. In addition, if there are significant changes to the project, the QMP must undergo a full revision by the QMP Preparer and then go through the complete EPA review process in order to receive approval, even if the period of applicability has not yet expired.  **Annual Review** – A QMP must be reviewed at least annually by the QMP Preparer to confirm its suitability and evaluate its effectiveness for the project.    **Crosswalk Requirements** – This crosswalk will remain with the QMP for the entire period of applicability. The primary crosswalk is used to document the full review of the New or Revised QMP, including comments, responses, and resolution. The Annual Review Crosswalks in **Attachment 1** are used to document each annual review of the QMP. Further instructions are provided in Attachment 1. | | | | | | | | | | |
| **QMP Prepared For:**  *(Check appropriate box)* |  | **GRANT RECIPIENT**  2 CFR 1500.12 |  | **CONTRACTOR**  48 CFR 46 | |  | **INTERAGENCY AGREEMENT (IA)** | |  | **Other (list):** |
| **Organization:**  *(grant recipient, contractor, EPA AO, EPA Program, other)* |  | | | | **Organization Point of Contact (POC):**  *(Name, Title, Email)* | | |  | | |
| **Document Title:** |  | | | | **QMP Preparer:**  *(If different than Organization POC)* | | |  | | |
| **Document Version and Date:** |  | | | | **Contract, Grant, or IA Number:** | | |  | | |
| **QMP Period of Applicability:** | Up to 5 years from the date of RQAM Approval | | | | **EPA PO / COR:**  *(Name, Email)* | | |  | | |
| **Documents to be submitted with the QMP and Crosswalk:** | | | | | | | | | | |
| A QMP written by a Grant Recipient, EPA, or Federal Partner must include for review:   * Work Plan (WP) / Statement of Work or Scope of Work (SOW) / Program Plan (PP) / Research Proposal (RP) * Funding mechanism | | | | | AQMP written by Contractor must include for review:   * Copy of Task Order Work Assignment/SOW * Reference to electronic copy of the contractor’s approved QMP * Copy of Contract SOW * Copy of EPA Court Order, if applicable | | | | | |

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| **EPA QA REVIEWER MUST COMPLETE AS PART OF THE REVIEW** | | | |
| *All submissions and responses must be tracked in this Crosswalk. Information in blue and green are the suggested approach to ensuring that each review process is independently tracked.* | | | |
| **EPA QA Reviewer:**  *(Name, Email)* |  | **EPA QA\_ID #:** |  |
| **Date Received for QA Review:** | 1st Review: MM/DD/YYYY  2nd Review: MM/DD/YYYY | **Date Review Completed:** | 1st Review: MM/DD/YYYY  2nd Review: MM/DD/YYYY |
| **EPA QA Branch Approving Official:** *(Name, Email)* | Mary Goldade, Regional QA Manager (RQAM) and QA Branch Manager  [goldade.mary@epa.gov](mailto:goldade.mary@epa.gov) | **QMP Approval Date:** | MM/DD/YYYY |
| **Funding Mechanism and Other Documents:** | | | |
| interagency agreement  / contract  / grant  / court order  / Other  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / NA | | WP/SOW/TO/PP/RP Date: |  |
| Funding Amount $ |  | Performance Period: |  |
| QA document consistent with WP/ SOW/TO/PP/RP? | Yes  / No  / NA | All attachments included? | Yes  / No  / NA |

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| **FOR THE QMP PREPARER AND EPA QA REVIEWER** |
| **Crosswalk Instructions for New QMPs:** |
| * If an element is not applicable, an explanation must be provided in the QMP and in the Comments column of the crosswalk. * The “**Organization’s QMP Section”** column in the crosswalk must be completed by the QMP Preparer and must reference the precise location(s) in the QMP that addresses that specific element. * Processes may either be described or referenced in the QMP; all references must be readily accessible within the organization ***and*** provided in or as attachments to the QMP. * “**EPA Notes**” are notes, recommendations, or observations that may improve the QMP; they are not directives and do not require compliance. “**EPA Comments**” require the author to address for compliance with the EPA QMP Standard (S-1). * An “NA” in the Acceptable column signifies agreement that the element is not applicable and the reason is included and appropriate. * In addition to addressing concerns in the Summary of EPA Comments (below), the organization must also respond to the issues identified in the Comment column under “**Organization Response (date)**.” An authorized EPA QA reviewer will respond to the revision(s) under “**EPA Resolved (date)**.” |
| **Summary of EPA Comments** *(highlight significant concerns/issues)***:** |
| 1. EPA Comment:   Organization Response (date):  EPA Resolved (date):   1. EPA Comment:   Organization Response (date):  EPA Resolved (date): |

| **Element** | **Organization's QMP Section *(Completed by QMP Author*)** | **Acceptable (Yes/No/NA) (*Completed by EPA QA Reviewer)*** | **Comments**  ***(Completed by QMP Author and EPA QA Reviewer*)** |
| --- | --- | --- | --- |
| **1. Title Page (S-1 Section 5.B.1, Page 5):** | | | |
| 1. Name of the document includes “Quality Management Plan” |  |  |  |
| 1. Date of QMP preparation |  |  |  |
| 1. Name of the organization |  |  |  |
| 1. Title or identification reference number of the extramural agreement, if applicable |  |  |  |
| 1. Period of performance/applicability |  |  |  |
| 1. Version control information |  |  |  |
| **2. Approval Page (S-1 Section 5.B.2, Pages 5-6):** | | | |
| 1. Organization’s QA Manager (QAM) |  |  |  |
| 1. Organization’s senior manager |  |  |  |
| 1. Manager(s) organizationally between the QAM and senior manager |  |  |  |
| 1. EPA RQAM or designee |  |  |  |
| 1. Additional EPA signature(s) as specified by the EPA organization sponsoring the work |  |  |  |
| **3. Organization's Quality Statement (S-1 Section 5.B.3, Page 6):** | | | |
| 1. Importance of quality in its environmental information operations (EIO) |  |  |  |
| 1. General objectives and goals of the QMP |  |  |  |
| 1. Description of management and staff responsibilities for implementing the QMP |  |  |  |
| 1. Organization’s commitment to quality management principles and practices |  |  |  |
| 1. Resource allocation for the organization’s Quality Program |  |  |  |
| **4. Organizational Chart (S-1 Section 5.B.4, Page 6):** | | | |
| 1. Identifies all components of the organization, including organizational position |  |  |  |
| 1. Lines of communication and authority |  |  |  |
| 1. The QAM and QA staff lines of reporting, including both to supervisors and to senior management |  |  |  |
| 1. All areas of the organization conducting EIO |  |  |  |
| 1. Visual independence of the QAM and quality staff from groups conducting direct EIO |  |  |  |
| **5. Roles, Responsibilities and Authorities (S-1 Section 5.B.5, Pages 6-7):** | | | |
| *Quality Assurance Manager (QAM)* |  |  |  |
| 1. Describes the QAM's responsibilities and authority |  |  |  |
| 1. Delegation of authority for management of the Quality Program |  |  |  |
| 1. Describes the QAM's specific duties |  |  |  |
| 1. If applicable, states that redelegation of QAM duties is allowable |  |  |  |
| 1. Describes redelegation of procedures/processes from the QAM to others within the organization, or to states, tribes, and territories, if applicable |  |  |  |
| 1. States the QAM's authority to conduct independent oversight of the organization’s Quality Program |  |  |  |
| 1. Describes the QAM's independence from EIO |  |  |  |
| 1. Notes whether the QAM is full or part-time and, if part-time, that the QAM will remain independent of EIO covered in the QMP |  |  |  |
| 1. The QAM reports to senior managers having executive leadership for the organization; if the senior manager does not directly supervise the QAM, the QAM has authority to access and discuss quality-related issues with the senior manager outside of their direct supervisory chain, as necessary |  |  |  |
| *Operations Manager (Program Manager)* |  |  |  |
| 1. Identifies the operations manager(s)/ program manager(s) responsible for EIO |  |  |  |
| 1. Describes the operation manager's responsibilities and authority |  |  |  |
| 1. Describes the operation manager's independence from QA activities and the QAM |  |  |  |
| *Senior Manager* |  |  |  |
| 1. Describes the senior manager's executive authority for the organization, managers, QA staff, technical staff, and others involved EIO and implementing the QMP |  |  |  |
| **6. Technical Activities and Programs Supported by the QMP (S-1 Section 5.B.6, Page 7):** | | | |
| 1. Identifies all parts of the organization (by name) to which the QMP applies, and this information correlates to the organizational chart |  |  |  |
| 1. Identifies and describes all programs conducting EIO |  |  |  |
| 1. Describes all technical activities involving EIO |  |  |  |
| 1. Describes how programs will integrate QA/QC procedures and QAPPs into all its EIO |  |  |  |
| **7. Conformance with Policies, Procedures, Standards, and Regulations (S-1 Section 5.B.7, Pages 7-8):** | | | |
| 1. Identifies EPA policies, procedures, standards, and regulations pertinent to EIO |  |  |  |
| 1. Identifies all internal organization procedures, processes, and SOPs pertinent to EIO |  |  |  |
| 1. Describes all quality-related terms and conditions and requirements specified in extramural agreement(s) (e.g., contracts, grant agreements, interagency agreements, and MOUs) and their implementation |  |  |  |
| **8. QA Field Activities (S-1 Section 5.B.8, Page 8):** | | | |
| 1. Applicable field procedures for conducting EIO are described, referenced, and confirmed |  |  |  |
| **9. Computer Hardware and Software (S-1 Section 5.B.9, Page 8):** | | | |
| 1. Describes or references the internal processes the organization will use to satisfy the requirements in the current versions of:  * EPA CIO 2122-P-03 Enterprise Architecture IT Standards Procedure ([link](https://www.epa.gov/irmpoli8/office-mission-support-policies-itim-program-management)) * EPA CIO 2104 IT/IM directive Policy Software Management and Piracy Policy ([link](https://www.epa.gov/irmpoli8/office-mission-support-policies-itim-program-management)) * EPA CIO 2104-P-01 Software Management and Piracy Procedure ([link](https://www.epa.gov/irmpoli8/office-mission-support-policies-itim-program-management)) |  |  |  |
| **10. Information Quality Guidelines – *EPA Organizations Only* (S-1 Section 5.B.10, Pages 8-9)** | | | |
| **11. Organization Competence (S-1 Section 5.B.11, Page 9):** | | | |
| 1. Describes how the minimum requirements (i.e., technical skills, demonstrated knowledge, and documented experience) for personnel conducting EIO is determined |  |  |  |
| 1. Describes how personnel are evaluated for competency based on the requirements for the roles to confirm that these persons are competent based on appropriate knowledge, skills, education, training, and/or experience |  |  |  |
| **12. Personnel Training (S-1 Section 5.B.12, Page 9):** | | | |
| 1. Describes the process for determining training requirements and training needs |  |  |  |
| 1. Describes the roles of individual(s) responsible for defining, planning, reviewing, and documenting the training requirements |  |  |  |
| **13. Procurement of Items and Services (S-1 Section 5.B.13, Pages 9-11):** | | | |
| 1. For all procurements and extramural agreements, identifies the personnel responsible for ensuring that appropriate quality requirements are included and implemented and describes their roles, responsibilities, and authorities |  |  |  |
| 1. Describes the processes to ensure that appropriate quality requirements are included |  |  |  |
| 1. Includes reviewing and approving procurement and extramural documents (and any changes to these documents) prior to issuing the solicitation to ensure that the documents are accurate, complete, and contain EPA quality requirements |  |  |  |
| 1. Includes ensuring that the agreement(s) clearly documents how the supplier will address technical and quality requirements |  |  |  |
| 1. Includes ensuring that the agreement(s) clearly document the supplier’s responsibility for the Quality Program requirements |  |  |  |
| 1. Includes the procedures for verifying how the supplier will conform to the customer’s quality requirements |  |  |  |
| 1. Includes reviewing all applicable responses to solicitations to ensure that these documents satisfy all technical and quality requirements |  |  |  |
| 1. Includes providing evidence of the supplier’s capability to satisfy EPA Quality Program requirements, as defined in the extramural agreement or applicable Federal Regulations |  |  |  |
| 1. Includes ensuring that procured items and services are of acceptable quality, including the review of objective evidence of quality for applicable items and services furnished by suppliers and subcontractors, source selection, source inspections, supplier audits, and examination of deliverables |  |  |  |
| 1. Includes reviewing procedures for quality-related documentation, QMPs, or QAPPs from contractors |  |  |  |
| 1. Includes reviewing and approving QMP and QAPP procedures and criteria for delegations of EPA authority |  |  |  |
| 1. Includes ensuring that EPA quality-related contracting requirements, as defined by the Federal Acquisition Regulations |  |  |  |
| 1. Describes or references the procurement processes, including roles and responsibilities, for ensuring that sub-contractors and sub-grantees assigned to perform EIO comply with all quality requirements, as specified in the EPA extramural agreements |  |  |  |
| **14. Document and Record Processes (S-1 Section 5.B.14, Pages 11-12):** | | | |
| 1. Describes how the record management requirements are met, including the responsibilities and authorities of management and staff |  |  |  |
| 1. Identifies quality-related documents and records requiring management and control |  |  |  |
| 1. References EPA record retention schedules |  |  |  |
| 1. References program regulations, contract record requirements, and agreement records requirements for all EIO |  |  |  |
| 1. Describes the processes for handling quality-related documents and records to ensure their accessibility, protection from damage and deterioration, and means of retention, including roles and responsibilities for management and staff |  |  |  |
| 1. Describes measures for controlling the release, change, and use of planning documents and records and how technical guidance and planning documents (e.g., QAPPs, QMPs, SOPs, etc.) are prepared, reviewed, approved, issued, used, revised, tracked, and verified |  |  |  |
| 1. Describes or references processes and procedures for ensuring compliance with all statutory, contractual, and assistance agreement requirements for records from environmental programs and that provides adequate preservation of key records necessary to support the mission of the organization |  |  |  |
| 1. Describes procedures for establishing and implementing applicable chain of custody and confidentiality procedures for evidentiary records |  |  |  |
| 1. Describes how documents and records, including revisions, are reviewed for conformance with new requirements and with the terms and conditions of extramural agreements and are approved by authorized personnel before general use |  |  |  |
| 1. Describes or references the management process that ensures that documents and records accurately reflect completed work and/or fulfill statutory and contractual requirements, including any specific record keeping requirements defined in applicable EPA policies, procedures, standards, or regulations |  |  |  |
| 1. The maintenance of records includes defining requirements and responsibilities for record transmittal, distribution, retention, retention schedules, protection, preservation, traceability, disposition, and retrieval |  |  |  |
| 1. Identifies or references the accomplishment for disposing of quality-related records in accordance with regulatory requirements or schedules |  |  |  |
| **15a. PDCA Model – PLAN (S-1 Section 5.B.15a, Page 12):** | | | |
| 1. Describes (or references SOPs that describe) the processes for determining systematic planning and the development of acceptance or performance criteria to perform EIO |  |  |  |
| 1. Describes the use of a systematic planning process for EIO based on the scientific method |  |  |  |
| 1. Elements of the systematic planning approach include the following: |  |  |  |
| 1. Identification and involvement of the project manager, sponsoring organization and responsible official, project personnel, stakeholders, scientific experts, etc. |  |  |  |
| 1. Project goal, objectives, and questions and issues to be addressed |  |  |  |
| 1. Project schedule, resources (including budget), milestones, and any applicable requirements (e.g., regulatory requirements, contractual requirements) |  |  |  |
| 1. Identification of the type of information needed and how the information will be used to support the project’s objectives |  |  |  |
| 1. Determination of the quantity of information needed and specification of performance criteria for measuring quality |  |  |  |
| 1. Description of how, when, and where the information will be obtained (including existing information) and identification of any constraints on information collection |  |  |  |
| 1. Specification of needed QA and QC activities to assess the quality performance criteria (e.g., QC samples for both the field and laboratory, audits, technical assessments, performance evaluations, sensitivity analysis of models, etc.) |  |  |  |
| 1. A description of how the acquired information will be analyzed, evaluated (e.g., QA review, validation, verification), and assessed against its intended use and the quality performance criteria |  |  |  |
| 1. Describes the QAPP planning and documentation process, including organization-specific requirements by project-type |  |  |  |
| **15b. PDCA Model - DO (Implementation) (S-1 Section 5.B.15b, Pages 12-13):** | | | |
| 1. Describes how the organization will implement the work processes to ensure that EI is of known and documented quality, scientifically valid, legally defensible, and appropriate for the intended use |  |  |  |
| 1. General processes are identified and described for: |  |  |  |
| 1. Documentation of implementation procedures (e.g., reference methods, SOPs) |  |  |  |
| 1. Testing and evaluation of procedures to confirm their acceptable performance |  |  |  |
| 1. The work being performed according to approved plans |  |  |  |
| 1. Deviations and waivers from approved procedures |  |  |  |
| 1. Use of measurement and testing equipment and models |  |  |  |
| 1. Use of EI obtained from other sources |  |  |  |
| 1. Integrity of samples and EI |  |  |  |
| 1. Performance monitoring |  |  |  |
| 1. Describes management controls for the release, change, and use of implementation of quality program documentation (i.e., necessary approvals, specific times, and points for implementing changes, removal of obsolete documentation from work areas, and verification that the changes are made as prescribed) |  |  |  |
| 1. Describes the process for identifying the need for procedures and controlled documents (e.g., SOPs, checklists, templates, forms, etc.) |  |  |  |
| 1. Describes the process for developing SOPs and the procedures for using SOPs |  |  |  |
| 1. Describes the process by which SOPs are reviewed for initial and subsequent use, approved, distributed, revised, and rescinded |  |  |  |
| **15c. PDCA Model - CHECK (Assessment and Oversight) (S-1 Section 5.B.15c, Pages 13-16):** | | | |
| 1. Describes management’s commitment and approach to assessing its Quality Program (e.g., data quality assessments; quality program assessments; Quality Program Management Reviews; peer, technical, and readiness reviews; performance evaluations; technical system audits; laboratory competency assessments; and surveillances) |  |  |  |
| 1. Describes the process for planning, conducting, and documenting assessments at least annually |  |  |  |
| 1. Describes the qualifications of the personnel conducting the assessments, including:  * how real or perceived conflicts of interest are avoided * no direct involvement or responsibility for the work being assessed, except for self-assessments |  |  |  |
| 1. Describes management's responsibility for the selection of assessors, defining acceptance criteria, approving assessment/audit procedures and checklists, and identifying goals |  |  |  |
| 1. Describes how senior management annually reviews, assures, and documents the Quality Program to confirm its continuing suitability, adequacy, and effectiveness |  |  |  |
| 1. The management review process includes:  * delegation * the status of actions from previous management reviews * changes in external and internal issues that are relevant to the Quality Program * information on Quality Program performance, including trends in nonconformities and corrective actions, assessment results, and opportunities for improvement * suitability of internal processes and SOPs * outputs of the management review include decisions related to continual improvement opportunities and any need for changes to the Quality Program |  |  |  |
| 1. Describes retaining the documented management reviews as evidence the management executed their due diligence responsibilities and have assured the data used in their EIO products and services are of appropriate quality |  |  |  |
| 1. Describes assessment frequency |  |  |  |
| 1. Describes how and by whom assessments of EIO are planned, conducted, evaluated, and documented |  |  |  |
| 1. Describes the processes by which management, in conjunction with the QAM, chooses an assessment tool, including performance measures, and the expected frequency of their application to EIO |  |  |  |
| 1. Describes routine oversight activities of sub-organization QMPs, if applicable |  |  |  |
| 1. Describes the processes for the planning, scheduling, response to changes, and implementation of assessments |  |  |  |
| 1. Describes responsibilities, levels of participation, and authorities for all personnel and staff participating in the assessment/audit process |  |  |  |
| 1. Describes how personnel conducting assessments have sufficient authority, access to programs and managers, access to documents and records, and organizational freedom to:  * identify quality issues * identify and cite noteworthy practices that may be shared with others to improve the quality of their operations products and services * propose recommendations for resolving quality issues * independently confirm implementation and effectiveness of solutions |  |  |  |
| 1. Describes how the level of competence, experience, and training necessary to ensure the capability of personnel conducting assessments are determined |  |  |  |
| 1. Describes how, when, and by whom actions shall be taken in response to the findings of the assessment/audit and determine the effectiveness of the response |  |  |  |
| 1. Describes roles and responsibilities of management and staff for documenting, reporting, and reviewing assessment results |  |  |  |
| 1. Describes the type of assessment findings (e.g., conformance, nonconformance, opportunity for improvement, commendation) that may be used and the appropriate response to each one |  |  |  |
| **15d. PDCA Model - ACT (Corrective Action and Improvements) (S-1 Section 5.B.15d, Page 16):** | | | |
| 1. Describes or references how corrective actions and improvements will be performed |  |  |  |
| 1. Describes or references how management responds to the results, nonconformances, findings, corrective actions, recommendations, etc., from assessments in a timely manner |  |  |  |
| 1. Describes how the appropriate response is promptly made when conditions needing corrective action are identified |  |  |  |
| 1. Describes how corrective actions include the identification of root causes or problems, determination of whether the problem is unique or has systemic implication, and actions to prevent recurrence |  |  |  |
| 1. Describes how follow-up actions for corrective actions shall be taken and documented to confirm the implementation and effectiveness of the response action |  |  |  |
| 1. Describes the processes for identifying and correcting common nonconformances found in different parts of the organization to ensure continual improvement. |  |  |  |
| **16. Dispute Resolution Process (S-1 Section 5.B.16, Page 16):** | | | |
| 1. Describes provisions for dispute resolution to include technical and management program disputes |  |  |  |
| 1. Describes or references the organization’s dispute resolution process to address issues pertaining to quality, such as QMP requirements, QA and QC procedures, nonconformances, findings, and corrective actions |  |  |  |
| 1. Describes how disputes, if encountered, because of assessments are addressed and by whom |  |  |  |
| **17. Continual Improvement (S-1 Section 5.B.17, Page 16):** | | | |
| 1. Describes how the organization will continually improve its Quality Program, including how staff at all levels are encouraged to identify and establish communications, identify process improvement opportunities, and identify issues |  |  |  |
| 1. Identifies the individual/role responsible for identifying, planning, implementing, and evaluating the effectiveness of quality improvement activities |  |  |  |
| 1. Describes the process to ensure continual improvement, including the roles and responsibilities of management and staff |  |  |  |
| **18. Data Review, Validation and Verification, and Data Usability Reporting (S-1 Section 5.B.18, Page 17):** | | | |
| 1. Describes the responsibilities and authorities of management and staff for data review, validation, and verification |  |  |  |
| 1. Describes or references general processes on how the organization conducts reviews, validation, and verification of EIO and for data usability reporting (specific project information shall be included in the QAPP) |  |  |  |
| 1. Describes the organizational process for the review of results involving EI to confirm that technical and quality objectives were met, including management and staff roles and responsibilities |  |  |  |
| 1. Describes the organizational process for the review of EI of undocumented quality for potential use |  |  |  |
| 1. Describes the organizational process for the review of EI collected previously for other purposes but being considered for new use |  |  |  |
| 1. Describes the organizational process for planning, implementing, and resolving peer review considerations |  |  |  |
| **END** | | | |

**ATTACHMENT 1**

**EPA REGION 8 QMP REVIEW CROSSWALK FOR ANNUAL REVIEWS**

[to be completed at least 60 days prior to the anniversary date of EPA RQAM]

**PURPOSE:**

The Annual Review Crosswalk is used to document annual QMP reviews conducted by non-EPA organizations, as well as concurrence with the annual review by the RQAM.

All non-EPA organizations are required to review their QMP at least annually to confirm its suitability and evaluate its effectiveness of the approved quality management practices. Although the approved QMP should be implemented as written, changes to Quality Program may be needed. Minor changes to the Quality Program throughout each year during the QMP’s period of applicability will be documented using this Annual Review Crosswalk.

If significant changes are made to the Quality Program that affect the performance of environmental information operations (EIO), the revised QMP, including all figures, attachments and appendices, must be submitted to EPA for review and re-approval. When significant changes are made, the revised QMP shall include a revision history page that briefly summarizes the changes made.

**Conditions required the revision and resubmittal of an approved QMP include**:

* Expiration of the QMP
* Significant changes in the organization’s mission or structure, such as in the delegation status of a program
* Re-organization of existing functions that affect programs covered in the QMP
* Change in the scope (i.e., statement of work or workplan) in the extramural agreement
* Corrective actions that significantly change the organization’s quality program

All personnel in the organization performing EIO covered by the scope of the QMP shall be notified of changes to the Quality Program and the QMP to keep them informed of the current requirements. This practice may also include contractors, subcontractors, and grantees, in accordance with the organization’s overall approved QMP.

The Annual Review Crosswalk is a controlled document. Do not modify the crosswalk format or document type.

**INSTRUCTIONS:**

QMPs have a period of applicability of up to 5 years from the date of RQAM or DAO approval. Attached is an Annual Review Crosswalk for years 2, 3, 4, and 5 of the 5-year period of applicability. For the Year 2 annual review, complete the page titled, “Annual Review Crosswalk - Year 2.” Follow the same process for each subsequent annual review until the end of the period of applicability.

This crosswalk with full review comments and resolutions, as well as each Annual Review Crosswalk, will remain with the QMP for its entire period of applicability.

***Note:*** *Maintain the original approved QMP intact (official PDF copy with all signatures). For minor changes to the approved QMP, the organization is responsible for ensuring all project personnel are made aware of the changes once EPA has concurred that the annual review is complete. EPA recommends that the organization make a copy of the Annual Review Crosswalk and attach it to the front of the approved QMP where it is highly visible to all personnel.*

Please submit the following to EPA when each annual review is complete:

* Complete Crosswalk documenting the original review comments and all Annual Review Crosswalks with the current year’s annual review information completed
* Original approved QMP with all signatures, attachments, and appendices
* Workplan, Research Plan, Program Plan, Statement of Work or Scope of Work, or Task Order Work Assignment

**ANNUAL REVIEW CROSSWALK – YEAR 2**

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| **To Be Completed by the QMP Preparer:** | | | | |
| Annual Review Completed By:  (*Name, Title, Contact Info*) | |  | Annual Review Completion Date: | MM/DD/YYYY |
| Attestation of the Annual Review: | | | | |
|  | Minor changes are documented in the table below. | | | |
|  | The QMP was reviewed, but no changes are necessary for the Quality Program. | | | |

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| **To Be Completed by the EPA QA Reviewer:** | | | | |
| QA Reviewer:  (*Name, Email*) | |  | Date Completed: | MM/DD/YYYY |
| Attestation of Annual Review: | | | | |
|  | The EPA QA Reviewer concurs no significant changes were made to the document and the annual review is complete. | | | |
|  | The EPA QA Reviewer concluded that significant changes were made to the document and a full review will be conducted. The QMP preparer has been contacted to make revisions to the QMP, identify the changes in a revision history page, and submit a new Crosswalk to EPA to initiate the review and approval process. | | | |

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| **RECORD OF MINOR CHANGES MADE TO THE QUALITY PROGRAM** | | | |
| **QMP Section**  (*Completed by the QMP Preparer*) | **QMP Page Number(s)**  (*Completed by the QMP Preparer*) | **Full Description of Change(s)**  (*Completed by the QMP Preparer*) | **Comments**  (*Completed by the QMP Preparer and EPA QA Reviewer*) |
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**ANNUAL REVIEW CROSSWALK – YEAR 3**

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| **To Be Completed by the QMP Preparer:** | | | | |
| Annual Review Completed By:  (*Name, Title, Contact Info*) | |  | Annual Review Completion Date: | MM/DD/YYYY |
| Attestation of the Annual Review: | | | | |
|  | Minor changes are documented in the table below. | | | |
|  | The QMP was reviewed, but no changes are necessary for the Quality Program. | | | |

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| **To Be Completed by the EPA QA Reviewer:** | | | | |
| QA Reviewer:  (*Name, Email*) | |  | Date Completed: | MM/DD/YYYY |
| Attestation of Annual Review: | | | | |
|  | The EPA QA Reviewer concurs no significant changes were made to the document and the annual review is complete. | | | |
|  | The EPA QA Reviewer concluded that significant changes were made to the document and a full review will be conducted. The QMP preparer has been contacted to make revisions to the QMP, identify the changes in a revision history page, and submit a new Crosswalk to EPA to initiate the review and approval process. | | | |

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| **RECORD OF MINOR CHANGES MADE TO THE QUALITY PROGRAM** | | | |
| **QMP Section**  (*Completed by the QMP Preparer*) | **QMP Page Number(s)**  (*Completed by the QMP Preparer*) | **Full Description of Change(s)**  (*Completed by the QMP Preparer*) | **Comments**  (*Completed by the QMP Preparer and EPA QA Reviewer*) |
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**ANNUAL REVIEW CROSSWALK – YEAR 4**

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| **To Be Completed by the QMP Preparer:** | | | | |
| Annual Review Completed By:  (*Name, Title, Contact Info*) | |  | Annual Review Completion Date: | MM/DD/YYYY |
| Attestation of the Annual Review: | | | | |
|  | Minor changes are documented in the table below. | | | |
|  | The QMP was reviewed, but no changes are necessary for the Quality Program. | | | |

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| **To Be Completed by the EPA QA Reviewer:** | | | | |
| QA Reviewer:  (*Name, Email*) | |  | Date Completed: | MM/DD/YYYY |
| Attestation of Annual Review: | | | | |
|  | The EPA QA Reviewer concurs no significant changes were made to the document and the annual review is complete. | | | |
|  | The EPA QA Reviewer concluded that significant changes were made to the document and a full review will be conducted. The QMP preparer has been contacted to make revisions to the QMP, identify the changes in a revision history page, and submit a new Crosswalk to EPA to initiate the review and approval process. | | | |

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| **RECORD OF MINOR CHANGES MADE TO THE QUALITY PROGRAM** | | | |
| **QMP Section**  (*Completed by the QMP Preparer*) | **QMP Page Number(s)**  (*Completed by the QMP Preparer*) | **Full Description of Change(s)**  (*Completed by the QMP Preparer*) | **Comments**  (*Completed by the QMP Preparer and EPA QA Reviewer*) |
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**ANNUAL REVIEW CROSSWALK – YEAR 5**

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| **To Be Completed by the QMP Preparer:** | | | | |
| Annual Review Completed By:  (*Name, Title, Contact Info*) | |  | Annual Review Completion Date: | MM/DD/YYYY |
| Attestation of the Annual Review: | | | | |
|  | Minor changes are documented in the table below. | | | |
|  | The QMP was reviewed, but no changes are necessary for the Quality Program. | | | |

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| **To Be Completed by the EPA QA Reviewer:** | | | | |
| QA Reviewer:  (*Name, Email*) | |  | Date Completed: | MM/DD/YYYY |
| Attestation of Annual Review: | | | | |
|  | The EPA QA Reviewer concurs no significant changes were made to the document and the annual review is complete. | | | |
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| **RECORD OF MINOR CHANGES MADE TO THE QUALITY PROGRAM** | | | |
| **QMP Section**  (*Completed by the QMP Preparer*) | **QMP Page Number(s)**  (*Completed by the QMP Preparer*) | **Full Description of Change(s)**  (*Completed by the QMP Preparer*) | **Comments**  (*Completed by the QMP Preparer and EPA QA Reviewer*) |
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