**Date last modified/updated:** Click here to enter a date. **Internal audit:** Click here to enter a date.

**Who last modified/updated:** Click here to enter text. **Management review:** Click here to enter a date.

1. Develop and implement a process for taking corrective action at your organization.

☒ Our established process for corrective action addressed all of the following elements:

* Control and correct the immediate situation
* Evaluate the impacts of the nonconformity
* Determine the cause of the nonconformity
* Act to eliminate the cause
* Review the effectiveness of the action taken
* Retain records
1. Define roles, responsibilities and authorities for the various steps in the corrective action process.

| ☒ | We have assigned responsibility for managing the corrective action system to:  | Energy Team Leader |
| --- | --- | --- |

We have communicated roles, responsibilities and expectations for the corrective and preventive action system across the facility to relevant personnel. The following responsibilities may be delegated, but the manager of the corrective action system (assigned above) is responsible for ensuring all three of these activities occur and that appropriate records are retained:

| ☒ | The individual assigned to conducting cause analysis is: | Energy Team Leader |
| --- | --- | --- |
| ☒ | The individual assigned to conducting investigations is: | Energy Team Leader |
| ☒ | The individual assigned to act is: | Manager of affected department where corrective/preventative action may be needed |

*We have assigned the following roles and responsibilities:*

| Our **employees** understand they are responsible for: |
| --- |
| ☒ | Identifying actual and potential nonconformities in their work areas. | Confirmed as part of communication by General Manager to all staff |
| ☒ | Informing appropriate supervisory personnel | Confirmed as part of communication by General Manager to all staff |
| ☒ | Making any immediate corrections | Confirmed as part of communication by General Manager to all staff |

| Our **internal auditors** understand they are responsible for: |
| --- |
| ☒ | Determining if nonconformities exist in the EnMS | Confirmed as part of Internal Audit training |
| ☒ | Informing appropriate supervisory personnel | Confirmed as part of Internal Audit training |
| ☒ | Making any immediate corrections | Confirmed as part of Internal Audit training |

1. Train employees on types of problems and nonconformities to be addressed through implementing the corrective action process.

☒ We have implemented our process for corrective and preventive action and have ensured that all necessary training for identifying and responding to significant deviations in energy performance is provided

Process for corrective and preventive action developed and approved by the Energy Team on 8/7/2021. Training of all staff on the process conducted on 8/13/2021.

☒ We have established criteria for what shall be considered a significant deviation and have detailed below:

| Yes. Criteria for determining a significant deviation in performance are defined in the Energy Measurement Plan Worksheet, including:* Chillers: >10% of annual average based on temperature
* Boilers: predictive model based on outside air temps
* Kitchen equipment: Full load equipment performance outside specs by >10%
 |
| --- |

☒ We have established processes for identifying and addressing existing and potential problems or nonconformities regarding the 50001 Ready system and have detailed below:

| Our process for identifying and addressing existing & potential problems or nonconformities regarding our EnMS consists of the following:* Control and correct the immediate situation if necessary.
* Evaluate the impacts of the nonconformity.
* Determine the cause of the nonconformity.
* Act to eliminate the cause.
* Review the effectiveness of the action taken.
* Retain records.
 |
| --- |

☒ We will investigate and provide an appropriate response for all significant deviations of key characteristics identified and record results of the response in the following table:

| **Identified deviations and non-conformities** | **Impact** | **Cause** | **Response** | **Effectiveness of action taken** | **Responsible person** | **Date corrected** |
| --- | --- | --- | --- | --- | --- | --- |
| Increase in month-over-month electricity use per occupied room | Risk to miss key EnPI target | Outside air temperatures are contributing factor to higher electricity use  | Develop model and EnPI to incorporate outside air temperatures | Model under development | Director of Engineering | Click here to enter a date. |
| Natural gas consumption for boiler has increased by 15% | Higher energy use & utility costs; increased carbon emissions | Intake air duct not functioning properly | Repair damper on the intake air duct | Good. Damper now functions properly and natural gas consumption has gone down | Director of Engineering | 10/7/21 |
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*The following worksheets will assist your team in tracking corrective actions and preventative actions.*

Corrective Action/Preventive Action Request (CAR/PAR) Form

| **EnMS CORRECTIVE ACTION/PREVENTIVE ACTION REQUEST** |
| --- |
| TRACKING NUMBER: CAR-2021-02-02 |
| Type (check one): | ☒ Corrective Action | ☐ Preventive Action |
| Source (check one): | ☐ Internal Audit Finding☐ Monitoring and Measurement☐ Energy Assessment☒ Legal Noncompliance ☐ Noncompliance with Other Requirement Subscribed To☐ External Audit☐ Management Review☐ Other (specify): | ☐ Employee Suggestion☐ Management Review☐ Data Analysis☐ Other (specify): |
| Date:9/12/21 | Issued by:Energy Team Leader |
| Response Due Date:10/17/21 | Issued to:Director of Engineering |
| *Description* of the problem (for corrective action) or opportunity (for preventive action):Evidence:Our hotel was not in compliance with Local Law B to pursue periodic energy auditsRequirement:Local Law B mandates that buildings over 50,000 gross square feet undergo periodic energy audit and retro-commissioning measures.Statement of Nonconformity:Our hotel was due for an ASHRAE Level II energy audit to be conducted in 2021, which has not been conducted or scheduled.  |

| ***Investigation and Action****This section to be completed by the affected department manager.* |
| --- |
| Root cause of the actual or potential problem: (How/Why did this happen?)Due to staff changeover within the Engineering Team and reduced staffing levels to lead and coordinate RFP and energy auditing process with an outside engineering firm, the lack of prioritizing an energy audit to comply with Local Law B was viewed as an acceptable risk of noncompliance. |
| Action needed? ☒ Yes ☐ No |
| Correction (fix now) with completion dates:Energy audit for the hotel to be coordinated and conducted in early 2022 to meet the requirements of our extension request due to staffing challenges and COVID considerations. |
| Corrective Action (to prevent recurrence) or Preventive Action (to prevent occurrence) to be taken:A corrective action of properly documenting the Local Laws and action items that are necessary for compliance is a result of this effort. Documentation will help ensure a broader cross-section of staff are aware of the requirements and built into a proactive schedule will help ensure compliance with this Local Law remains a priority (and is scheduled). |
| Estimated completion date:4/30/22 | Extended completion date (if applicable):Click here to enter a date. |
| Reason for time extension:Click here to enter text. |
| Reviewed by: Director of Engineering | Date:1/28/22 |
| *This section to be completed by the affected dept. manager - after action is completed.* |
| Action completed by: Director of Engineering | Date completed:6/30/22 |

| ***Follow-Up and Closure****This section is to be completed by issuer after action is completed.* |
| --- |
| Results of action taken:Energy audit completed June 2022 |
| Was the action effective? ☒ Yes ☐ No Explain:Audit brings our property into compliance with Local Law. |
| Results reviewed by:Energy Team Leader | Date closed:8/31/2022 |
| Did this CAR/PAR result in changes to EnMS documents? ☐ Yes ☒ No |
| If yes, which document(s) was (were) changed? Click here to enter text. |

Corrective Action/Preventive Action Request (CAR/PAR) Tracking Log

| **CAP/PAR #** | **Source\*** | **Assigned to:** | **Title/Description** | **Issue Date** | **Due Date** | **Extension** **Due Date**  | **Closed?****(Y/N)** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| CAR2021-02-02 | IA | Director of Engineering | Meet requirements of Local Law B | 9/12/21 | 6/30/22 | Click here to enter a date. | Y |
| PAR2021-02-01 | IA | Assistant General Manager | Proactive update of People & Legal Requirements | 2/19/22 | 7/31/22 | Click here to enter a date. | N |
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\*Source:

IA = Internal Audit

EnA = Energy Assessment

ExA = External Audit

LN = Legal Noncompliance

MM = Monitoring and Measurement

MR = Management Review

ON = Noncompliance with Other Energy Requirement Subscribed To

O = Other

Top Management Approval

| ☐ | Date approved: | Click here to enter a date. |
| --- | --- | --- |
| ☐ | Who approved: | Click here to enter text. |

Comments

Click here to enter text.