



Sewer System Management Plan Program Audit

*City of Woodland FY 2015 & FY 2016 SSMP
Internal Audit*

The City of Woodland is currently in compliance with all of the SSMP requirements as described in subsection D.13 of the General Waste Discharge Requirements (GWDR) for Sanitary Sewer Systems as described herein.

9/20/2016

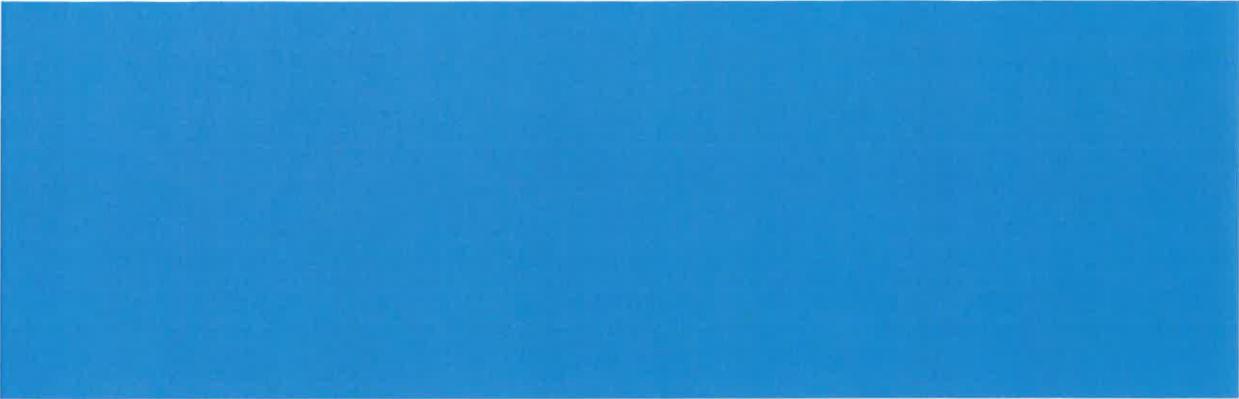
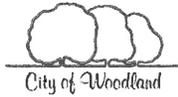


Table of Contents

<i>Summary of the SSMP Audit.....</i>	<i>3</i>
<i>Summary of the Performance Indicators.....</i>	<i>9</i>
<i>Performance Indicators.....</i>	<i>15</i>
<i>SSO Charts.....</i>	<i>106</i>
<i>SSMP Change Log.....</i>	<i>110</i>



Memorandum

To: Paul Navazio, City Manager and/or Greg Meyer, Director of Public Works

From: Tim Busch, Principal Utilities Civil Engineer

Date: 09/20/2016

Subject: SSMP Program Audit Cover Letter
Two-year SSMP Performance Review of FY 15 and FY 16

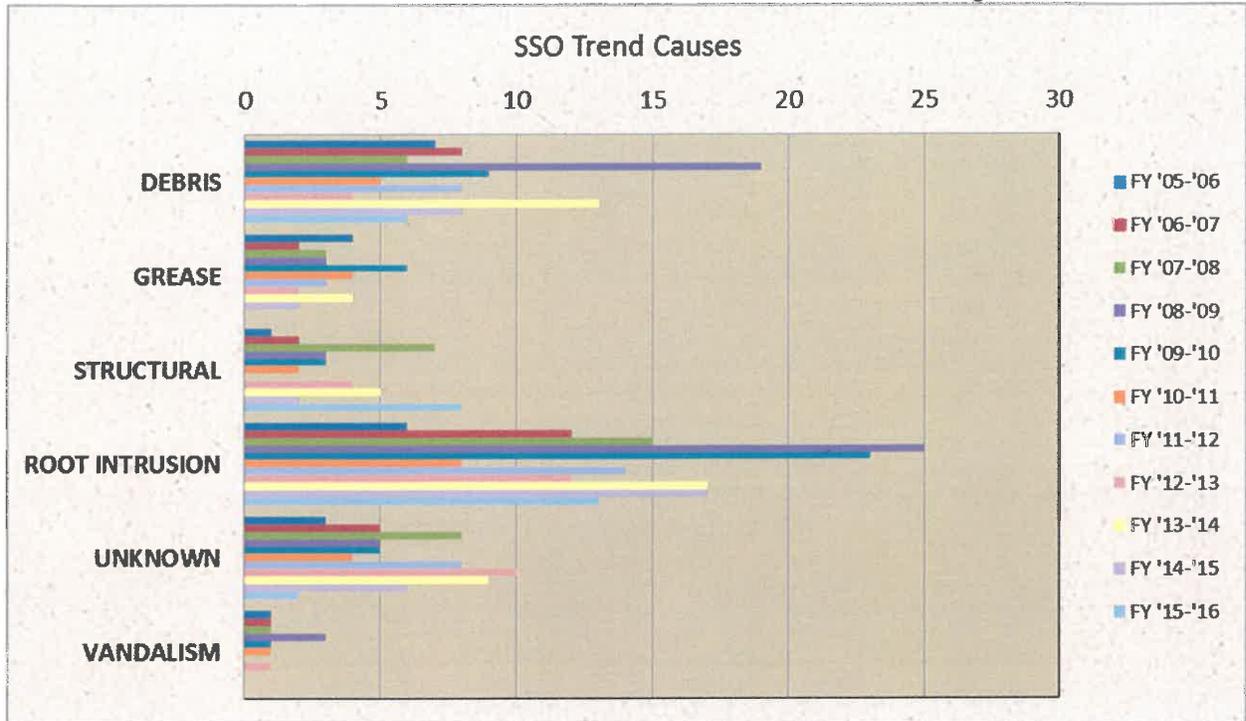
Regulatory Compliance

The City of Woodland is currently in compliance with all of the SSMP requirements as described in subsection D.13 of the GWDR.

Objectives

This memorandum summarizes the performance of the City of Woodland's Sewer System Management Plan (SSMP) for FY 14/15 and 15/16. The purpose of the SSMP is to provide a written framework for the management, operation, and maintenance programs executed by the City, with the ultimate goal of maintaining the level of service of the sewer collection system while minimizing sanitary sewer overflows (SSOs). This review is completed as part of the annual audit process described in sections ix and x of the City's SSMP. This process helps the SSMP document to evolve over time to address identified deficiencies in the management, operation, and maintenance of the sewer collection system. This memorandum summarizes the following information:

1. SSO history, describing the number and nature of SSOs over the past nine years.
2. Summary of progress of further development of the SSMP elements which have a plan and schedule for full implementation.
3. Summary of how many SSMP elements were implemented over last year.
4. Effectiveness of the implemented SSMP elements.
5. What SSMP elements are planned to be implemented next year.
6. Description of additions and improvements to the collection system over the last year.
7. Description of the additions and improvements to the collection system planned for the upcoming year.
8. Review of performance indicators and overall summary of the past fiscal year with proposed modifications for implementation in fiscal year 16/17 in areas in need of improvement.



SSO History

FY15-16

<u>Lateral SSO's</u>	<u>Main SSO's</u>	<u>SSO volume lateral</u>	<u>SSO volume Main</u>
16	0	1,221	0

FY14-15

<u>Lateral SSO's</u>	<u>Main SSO's</u>	<u>SSO volume lateral</u>	<u>SSO volume Main</u>
18	0	1,486	0

FY13-14

<u>Lateral SSO's</u>	<u>Main SSO's</u>	<u>SSO volume lateral</u>	<u>SSO volume Main</u>
27	1	2,628	675

FY12-13

<u>Lateral SSO's</u>	<u>Main SSO's</u>	<u>SSO volume lateral</u>	<u>SSO volume Main</u>
17	0	1,737	0

FY11-12

<u>Lateral SSO's</u>	<u>Main SSO's</u>	<u>SSO volume lateral</u>	<u>SSO volume Main</u>
20	0	1,419	0

The majority of SSO's are associated with lateral connections to the City System. Overall root intrusion and some debris are being addressed through root treatment program and public outreach. All SSO response is within 45 minutes of notification including after hours emergencies. A CCTV inspection is typically done of the pipes in the area within 1 day of the reported SSO. Documentation of investigations is available to view on GIS through IT Pipes inspections and Cityworks' work orders. For FY 16/17, the current root intrusion preventative maintenance program will change to lining the laterals which will be a cost effective and a more efficient use of staff time in reduction of SSOs in the City.

Progress on development of SSMP elements

The SSMP was reviewed and updated in 2015 as part of the required 5 year revision requirement by the SWRCB which was approved by council June 2015. Key elements that have changed through the amendments of the statewide general waste discharge order for sanitary sewer systems since 2009 are the SSO categories, reporting requirements, and public outreach which were incorporated in the revised SSMP.

The SSMP audit has identified some elements that need refinement in the frequency of data collection and type of data collected for both the utility maintenance workers and management staff. Some elements only need to be collected on an annual basis. Some new data needs to be collected to facilitate data collection for the SSMP and analysis of future needs. The SSMP audit has included a change log that is updated with the details of any changes/revisions to the SSMP's performance indicators based on the current O&M practices, input from key personnel, and any areas that need different methods of data collection.

How SSMP elements were implemented over last two years

The link between CCTV data and the rating system of the sewer system main lines shows on the GIS Utilities map for easy identification of structurally weak mains. In the meantime, there is ~ \$11.6M in the 4 year CIP plan for sewer and lateral repair/replacement. Not all of these projects are scheduled because current rates will not support them. The sewer rate study was completed at the end of FY 12/13 and the new sewer rates were effective as of 1/1/2014. A flat rate remains for residential all non-residential/institutional accounts are now on volumetric rates based on the winter average of water use. The initial sewer rate increase is approximately 13% but the annual adjustments will only be 9% through 2018.

A number of sewer mainline repairs were done the last 2 fiscal years because of problems identified through the CCTV program. The number of repairs completed greatly exceeds the number of repairs associated with SSO's. The majority of SSO's are associated with lateral connections to the City System. The problems are dominated by roots and Orangeburg pipeline failures. The City began a root treatment program in FY 9-10 and created a CIP Orangeburg Lateral Replacement Project.

There was a pipeline failure in Sycamore Ranch at the end of FY 10-11 that cost the City ~ \$350K to repair. The major problem appears to be settlement of the deep manholes. This pattern of problems indicates a need for modification of our standards with respect to installation of sewer projects in areas

of high groundwater and weak soils. Standards will be developed to reflect the need for analysis in future deep sewer development projects.

Effectiveness of the implemented SSMP elements

The CCTV program continues to find problems in main lines before a SSO occurs. The Operations crew keeps the Engineering department informed of pipeline failures, causes, and repairs. The Engineering department follows the City's purchasing policy to contract repair work that exceeds the operations crew's ability to perform. While the documentation and communication elements of the SSMP were not fully implemented due to staff changes and reorganization, the use of Cityworks and other software has helped in documenting the efforts of staff to meet the intent of the SSMP in reducing SSO's in the City.

What SSMP elements are planned to be implemented next year

Review and update standards to include an analysis of settlement of manholes in high groundwater areas. Evaluation and assignment based on the CCTV inspection through the CACIP module to bundle CIP work will be a priority in FY 16/17. With repair and reinstallation of the trunk line flow monitors, the gathering of dry and wet flow data from trunk lines to calibrate sewer model has continued through FY 13/14. While discussions with City Council and Infrastructure have not occurred to date, these discussions are planned for FY 14/15 to discuss and gather their support for new ordinances on lateral connections to mandate the installation of cleanouts behind the walk, and elimination of private Orangeburg laterals on repair of any lateral at the time a house is on sale.

The Beamer and Gibson trunk lines were cleaned and CCTV'd in the last quarter of FY 12/13. These two trunklines are the largest sewer assets that remained to be examined and evaluated. This information is driving prioritization of sewer line repair in FY 15/16. There are several large diameter repairs that have been identified with the parts of the Beamer trunk line rehab out to bid for construction in October 2016 but other parts of Beamer trunk line are being delayed to see if they need to be coupled with repairs on the other large diameter trunk lines.

Description of additions and improvements to the collection system over the last two years

The major accomplishments in CIP implementation of the FY 14/15 and FY15/16 were progress in model calibration, identification of system deficiencies for inclusion in the CIP Budget, the Douglass High School Sewer Replacement, CIP 15-14, Dog Gone Alley Water and Sewer Replacement, CIP 15-15, Kentucky Ave. Sewer Rehab, CIP 15-13, and Annual Water and Sewer Repair/Rehab Project, CIP 15-19. Project, CIP 15-14, replaced 575 feet of sewer gravity main that was responsible for multiple sewer issues in the last few years. Dog Gone Alley Water and Sewer Replacement Project, CIP 15-15, replaced 325 feet of sewer gravity main that had sags and breaks in the sewer main determined by CCTV evaluation. Kentucky Ave. Sewer Rehab, CIP 15-13, applied 160 feet of Cured-in-place liner on the Kentucky sewer trunk line which was 27" cast iron pipe that the sewer had deteriorated the original pipe. The Annual Water and Sewer Repair/Rehab Project, CIP 15-19 replaced 5,173 feet of 4" sewer laterals on Antelope St. that was responsible for repeat SSOs due to root intrusion.

The sewer crew did 50 spot repairs/replacements of sewer gravity mains and 3 manholes in FY 14/15 and FY 15/16 based on CCTV inspections which found structural failures in the mains and manholes. In FY 15/16, the crew successfully spot lined deep sewer gravity mains in the spring lake area that had major infiltration/intrusion of water which can lead to sink holes without damaging the roads and for a fraction of the cost to replace a section of the sewer main. Furthermore, the sewer crew replaced 57 laterals due to structural issues found after inspecting the lateral connection.

The purchase of in-house foaming equipment for root control and staff training on equipment has reduced the risks for lateral SSO's because the root SSO locations are being put on an annual pretreatment program. Investigation of all lateral and lateral failures was started at the end of fiscal 10-11 and is continuing. The crews foamed 16,717 feet of pipeline in FY 14/15 and 6,060 feet of pipeline in FY 15/16. On Antelope St., in FY 15/16, 15 sewer laterals were lined due to root intrusion issues which negate any further need for foaming. The Crews cleaned in FY 14/15 over 389,000 feet of sewer and CCTV'd over 250,000 feet of the sewer system. In FY 15/16 crews cleaned over 378,000 feet of sewer and CCTV'd over 273,000 feet of the sewer system. For a combined total of 700,000 feet of cleaned and 500,000 feet CCTV'd in the sewer system in just two years.

Description of the additions and improvements to the collection system planned for the upcoming year

Major collection system rehabilitation projects planned for FY 16/17 include:

- Lining of 1,280 lineal feet of sewer trunk line along Beamer St., CIP 16-11
- Lining of 160 sewer laterals along Clover St., Buckeye Ave., and Park Ave., CIP 15-22
- Rehabilitation of 3 segments of Harter Ave. sewer main, including lining and replacement of with PVC SDR 26
- Spot repairs of the gravity sewer main at two locations on Memorial Ln.
- Replacement of 375 lineal feet of gravity sewer main along Dog Gone Alley at College St.

The flow monitors have been collecting wet and dry weather flow data for continued model calibration and system observation. Flat bottom sewer manholes will be channelized and any existing lining problem will be lined with mortar as an on-going project to remove flat bottom manholes from the sewer system. The foaming program will be reduced to complete lateral lining.

Review of Performance

Attached to this memorandum are performance indicator assessment sheets, which summarize the collection of specific data, intended to provide a basis by which performance in various areas related to the management and operation of the sewer collection system are measured. A responsible person is assigned to each performance indicator assessment sheet. Each quarter, each responsible person collects the data related to their assigned performance indicator assessment sheet and provides an interim rating of the City's performance. At the end of the one year auditing period, final assessments, and recommendations for performance improvement are made. This process is described in section ix of the City's SSMP. Attached is a summary of the performance indicators tracked by the City and performance in each area with explanation of why goals were not met and actions taken or to be taken in the next FY for future performance improvements and modifications to the SSMP. Overall, the 65

performance indicators had only 7 below goal PI's in FY 15/16, an improvement over last FY's 12 below goal performance indicators. The main issues with not meeting performance indicator goals were generally due to lack staffing, non-communication with staff on tracking for the SSMP, and a backlog of CCTV inspection for evaluation and assignment in the CACIP module. These are all addressed in the summary spreadsheet and FY 16/17 audit should see a marked decrease in below goals.

Attachments:

Performance Indicator Assessment Sheets (48 PI forms)

Summary of Performance Indicator Spreadsheet FY 14/15 and FY15/16

City of Woodland SSMP Performance Indicator Summary FY 15/16

	Performance Indicator	Ratings FY 15/16	Reason	Action taken
Audits				
Audits	Bi-annual Council Presentation	Good		
Audits	Review of SSMP audits	Excellent		
CCTV				
CCTV	Footage inspected / 16 work hours	Excellent		
CCTV	Feet inspected with CCTV / year	Excellent		
CCTV	Pipe segments inspected / year	Good		
CCTV	% of CCTV surveyys with a 4 or 5 structural grading	Good		
CMMS&GIS				
CMMS&GIS	% population of key GIS attribute fields for gravity sewer mains	Below Goal	Key attributes are missing from GIS	Set aside time to gather and enter information
CMMS&GIS	% population of key GIS attribute fields for sewer manholes	Below Goal	Key attributes are missing from GIS	Set aside time to gather and enter information
CMMS&GIS	Year-to-date % of CityWorks work orders that have been closed-out	Good/Excellent		
Codes & Ordinances				
Codes & Ordinances	Time since last meeting to discuss list of Ordinance/Code updates based on sewer-specific issues	Good		
Codes & Ordinances	Time since last actual update to Ordinances/Codes based on sewer-specific issues	Good		
Communication Program				
Communication Program	% Communication Activities Completed	Excellent	Completed in 2010	PI should be updated to further conduct communication activities
Communication Program	% Public Comment Emails Responded To	Excellent		
Communication Program	# of Public Comment Email Responses	N/A		
Employee Recognition				
Employee Recognition	Time since last awards/letters distribution: Operation & Maintenance staff	Excellent	Total of 15 letters of acknowledgement received by O&M Staff	
FOG Control				
FOG Control	Time since last coordination meeting with Environmental Compliance and O&M staff	Below Goal	Met once in FY	Reassign meeting coordination to Alex Truitt
FOG Control	% reduction of FOG-related SSOs compared to previous year	Excellent		
FOG Control	Annual # of FOG control public education events	Excellent		
FOG Control	% completed of PPP Permit inspections	Excellent		
HVVC				
HVVC	Feet cleaned / year	Excellent		
HVVC	Pipe segments cleaned / year	Excellent		
HVVC	Footage cleaned / 16 work hours	Good		
HVVC	% Pipe segments pre-cleaned prior to CCTV inspection	Excellent		
Mapping				
Mapping	Average time for redline updates	Excellent		
Mapping	% of sites GPS'd from CIP Sewer R&R in construction	Excellent		
Mapping	% of new development sites GPS'd	Excellent		
O&M Budget				
O&M Budget	Funding provided for O&M budget	Good		
O&M Budget	O&M operation cost	Good		

City of Woodland SSMP Performance Indicator Summary FY 15/16

	Performance Indicator	Ratings FY 15/16	Reason	Action taken
PM Effectiveness				
PM Effectiveness	% of work orders that are emergencies	Excellent		
PM Effectiveness	% of Labor and Material Costs that is Emergency Work on Private Laterals	Excellent		
PM Effectiveness	% of Labor and Material Costs that is Emergency	Acceptable	21% of work order costs were emergency work	Review work orders consisting of emergency work and determine if the emergency work consists of lateral failures due to preventable causes.
PM Frequencies				
PM Frequencies	% Completion of closed-out work orders vs. expected preventative maintenance work orders	Good		Determine eventual use of preventative maintenance CityWorks work orders
PM Frequencies	Frequency of thorough lift station inspection / maintenance	Acceptable		Work with electrical to determine documentation.
R&R Funds				
R&R Funds	Annual R/R funding provided as % of sewer system value	Excellent		
R&R Funds	Annual funding provided for R/R program vs. CA&CIP cost projections	Good		
R&R Program				
R&R Program	% of CCTV inspected assets with risk ratings of 4 or 5 that have been evaluated in the CA&CIP Module	Below Goal	45 out of 326 assets evaluated	Set aside staff time to evaluate and prioritize sewer rehabilitation projects.
R&R Program	% of assets with risk ratings of 4 or 5 that have CIP "actions" assigned or O&M repairs assigned	Below Goal	44 out of 326 assets assigned actions	Set aside staff time to evaluate and prioritize sewer rehabilitation projects.
R&R Program	# of line failures per 100 miles of pipe	Below Goal	7 Structural Failures and emergencies per 100 miles of pipe	Review structural failure areas to find commonalities with age and type of pipe with the intent to start a lining project
R&R Program	% of scheduled CIPs designed or in construction	Acceptable	55% of CIPs in design or construction	Set aside more time to get sewer projects into construction
Replacement Parts				
Replacement Parts	Frequency of lift station equipment and replacement part inventory review	Excellent		Determine necessary documentation.
Replacement Parts	Frequency of Fleet equipment and replacement part inventory review	Excellent		Determine necessary documentation.
Replacement Parts	Frequency of pipeline / manhole equipment and replacement part inventory review	Excellent		Determine necessary documentation.
Root Treatment				
Root Treatment	% reduction in of root related SSOs compared to previous year	Excellent		
Root Treatment	Footage of laterals treated for root intrusion/year	Acceptable	6,060 ft treated for root intrusion	Determine if lining is a better solution than root treatment, revise PI
Root Treatment	Average footage of laterals treated/quarter	Acceptable	1,515 ft treated for root intrusion/quarter	Determine if lining is a better solution than root treatment, revise PI
SECAP				
SECAP	Ratio of peak WWF to peak DWF	Excellent		
SECAP	Time since last hydraulic model update	Acceptable	24 months	Have utilities engineering department update and run model.
Service Requests				
Service Requests	Response time for urgent calls	Excellent		
Service Requests	Response time for routine calls	Excellent		
Service Requests	Average # of service calls / 100 miles of pipe	Excellent		

City of Woodland SSMP Performance Indicator Summary FY 15/16

Performance Indicator		Ratings FY 15/16	Reason	Action taken
SSO Mitigation				
SSO Mitigation	% captured of SSO (flat, 1-5%)	Excellent		
SSO Mitigation	Average time to investigate SSO with CCTV, when CCTV'd	Excellent		
SSO Mitigation	% of SSO events investigated with CCTV	Acceptable	83% of SSO's were followed by a CCTV inspection	Increase efforts to follow-up with all SSO's, including private events.
SSO Prevention				
SSO Prevention	# of repeat SSOs / 5 years	Below Goal	10 repeat SSO's in the past 5 Fys	Review SGMs connected to repeat SSO's, map repeat SSOs, and review CCTV for main and laterals
SSO Prevention	# of SSOs / 100 miles / year	Excellent		
SSO Prevention	% reduction of SSOs from previous year	Excellent		
SSO Prevention	% of repeat SSOs followed by mitigation	Good	80%: 8/10	Prioritize future repeat SSO locations for R&R work.
SSO Response				
SSO Response	SSO response time during normal hours	Excellent		
SSO Response	SSO response time after normal hours	Excellent		
Staffing				
Staffing	% of vacant positions	Excellent		
Standards Update				
Standards Update	Time since last actual update to design standards based on sewer-specific issues	Excellent		
Standards Update	Time since last meeting to discuss list of design standard updates based on sewer-specific issues	Excellent		
Training				
Training	Frequency of tabletop / tailgate training	Acceptable	Approximately bi-weekly: 29 total	Review PI to determine necessary frequencies of both field equipment and tailgate training, and possible overlap.
Training	Frequency of field / equipment training	Excellent	Approximately monthly: 16 total	
Training	Frequency of SSO response training	Good	Approximately bi-monthly: 7 total	

City of Woodland SSMP Performance Indicator Summary FY 14/15

	Performance Indicator	Ratings FY 14/15	Reason	Action taken
Audits	Annual Council Presentation	Acceptable	Council reviewed SSMP Internal Audit in Nov 2014	
Audits	Review of SSMP audits	Excellent		
Audits	Audits			
CCTV	Footage inspected / 16 work hours	Acceptable		
CCTV	Feet inspected with CCTV / year	Excellent		
CCTV	Pipe segments inspected / year	Excellent		
CCTV	% Passing quality control check	N/A		Remove PI and replace with new PI that evaluates number of level 4/5 pipe conditions.
CCTV	CCTV			
CMMS&GIS	% population of key GIS attribute fields for gravity sewer mains	Below Goal	Key attributes are missing from GIS	Evaluate Goals, determine if fields are key attributes
CMMS&GIS	% population of key GIS attribute fields for sewer manholes	Below Goal	Key attributes are missing from GIS	Evaluate Goals, determine if fields are key attributes
CMMS&GIS	Year-to-date % of CityWorks work orders that have been closed-out	Good/Excellent		
CMMS&GIS	CMMS&GIS			
Codes & Ordinances	Time since last meeting to discuss list of Ordinance/Code updates based on sewer-specific issues	Acceptable		
Codes & Ordinances	Time since last actual update to Ordinances/Codes based on sewer-specific issues	Good		
Codes & Ordinances	Codes & Ordinances			
Communication Program	% Communication Activities Completed	Excellent		
Communication Program	% Public Comment Emails Responded To	Excellent		
Communication Program	# of Public Comment Email Responses	N/A		
Communication Program	Communication Program			
Employee Recognition	Time since last awards/letters distribution: Engineering staff	Below Goal	No awards distributed to Engineering staff	Find ways to award Engineering Staff, if valid or remove goal
Employee Recognition	Time since last awards/letters distribution: Management staff	Below Goal	No awards distributed to Management staff	Find ways to award Management Staff, if valid or remove goal
Employee Recognition	Time since last awards/letters distribution: Operation & Maintenance staff	Good	8 letters of acknowledgement received by O&M staff	
Employee Recognition	Employee Recognition			
FOG Control	Time since last coordination meeting with Environmental Compliance and O&M staff	Acceptable	Met four times, within 3-4 months	
FOG Control	% reduction of FOG-related SSOs compared to previous year	Excellent		
FOG Control	Annual # of FOG control public education events	Excellent		
FOG Control	Frequency of PPP permits inspections	Good		
FOG Control	FOG Control			
HVVC	% Pipe segments pre-cleaned prior to CCTV inspection	Below Goal	Not documented correctly on City Works	Find a way to document on Cityworks in such a way that all pre-cleaning is accounted for, Updated the PI
HVVC	Feet cleaned / year	Excellent		
HVVC	Pipe segments cleaned / year	Excellent		
HVVC	Footage cleaned / 16 work hours	Good		
HVVC	HVVC			
Mapping	Time since last GIS redline markup export and update of CAD maps for field changes completed	Below Goal	last redline update to CADD done in January 2014	Email Larry PI and determine if goals are still needed or need to be revised
Mapping	Average time for redline updates	Excellent		
Mapping	Average time for rehab & replacement updates	Excellent		

City of Woodland SSMP Performance Indicator Summary FY 14/15

	Performance Indicator	Ratings FY 14/15	Reason	Action taken
Mapping	Average time for “new development” updates	Excellent		
Mapping	Mapping			
O&M Funds	Funding provided for O&M budget	Good		
O&M Funds	O&M operation cost	Good		
O&M Funds	O&M Budgeting			
PM Effectiveness	% of work orders that are emergencies	Excellent		
PM Effectiveness	% of Labor and Material Costs that is Emergency Work on Private Laterals	Excellent		
PM Effectiveness	% of Labor and Material Costs that is Emergency	Good		
PM Effectiveness	PM Effectiveness			
PM Frequencies	% Completion of closed-out work orders vs. expected preventative maintenance work orders	Below Goal	Flushing Program was being revised/on hold	Revised Flushing Program
PM Frequencies	Frequency of thorough lift station inspection / maintenance	Excellent		
PM Frequencies	PM Frequencies			
R&R Funds	Annual R/R funding provided as % of sewer system value	Excellent		
R&R Funds	Annual funding provided for R/R program vs. CA&CIP cost projections	N/A		Revise this PI
R&R Funds	R&R Funds			
R&R Program	% of CCTV inspected assets that have been evaluated in the CA&CIP Module	Below Goal	Unrealistic goal w/ database of 3,521 CCTV records	Change performance indicator for evaluations 4 or 5, Draft new PI for R&R
R&R Program	% of assets with risk ratings of 4 or 5 that have CIP “actions” assigned	Below Goal	CIP actions assigned will be done during evaluation	Assign CIP to 4/5 during evaluations, Draft new PI to include O&M R&R
R&R Program	# of line failures per 100 miles of pipe	Below Goal	7 Structural Failures and emergencies per 100 miles of pipe	Talk with O&M
R&R Program	% of scheduled CIPs designed or in construction	Good	7 CIP repairs completed/design out of 10 CIP bundles	
R&R Program	R&R Program			
Replacement Parts	Frequency of lift station equipment and replacement part inventory review	Acceptable		
Replacement Parts	Frequency of Fleet equipment and replacement part inventory review	Excellent		
Replacement Parts	Frequency of pipeline / manhole equipment and replacement part inventory review	Excellent		
Replacement Parts	Replacement Parts			
Root Treatment	% reduction in of root related SSOs compared to previous year	Below Goal	17 SSO's this FY vs 17 SSO's last FY	
Root Treatment	Footage of laterals treated for root intrusion/year	Excellent		
Root Treatment	Averatge footage of laterals treated/quarter	Good		
Root Treatment	Root Treatment Program			
SECAP	Ratio of peak WWF to peak DWF	Excellent		
SECAP	Time since last hydraulic model update	Excellent		
SECAP	SECAP			
Service Requests	Response time for urgent calls	Excellent		
Service Requests	Response time for routine calls	Excellent		
Service Requests	Average # of service calls / 100 miles of pipe	Good		

City of Woodland SSMP Performance Indicator Summary FY 14/15

	Performance Indicator	Ratings FY 14/15	Reason	Action taken
Service Requests	Service Requests			
SSO Mitigation	% captured of SSO (flat, 1-5%)	Excellent		
SSO Mitigation	Average time to investigate SSO with CCTV	Excellent		
SSO Mitigation	% captured of SSO (steep, >5%)	N/A	No steep areas	Remove PI
SSO Mitigation	% complete on-line reporting for category 3 spills	N/A		
SSO Mitigation	SSO Mitigation			
SSO Prevention	# of repeat SSOs / 3 years	Below Goal	4 Repeat SSO's	See if repairs are necessary for SGM connected to repeat SSO's, Map Repeat SSO, Review CCTV for main and laterals
SSO Prevention	# of SSOs / 100 miles / year	Excellent		
SSO Prevention	% reduction of SSOs from previous year	Excellent		
SSO Prevention	SSO Prevention			
SSO Response	SSO response time during normal hours	Excellent		
SSO Response	SSO response time after normal hours	Excellent		
SSO Response	SSO Response			
Staffing	% of vacant positions	Acceptable	9% vacancy or 1 UMI position vacant	Advertise UMI position
Staffing	Staffing			
Standards Update	Time since last actual update to design standards based on sewer-specific issues	Acceptable	Standards were updated within 5 years	
Standards Update	Time since last meeting to discuss list of design standard updates based on sewer-specific issues	Excellent		
Standards Update	Standards Update			
Training	Frequency of tabletop / tailgate training	Good		
Training	Frequency of field / equipment training	Good		Change WO description to include equipment/field training
Training	Frequency of SSO response training	Good		Change WO description to include SSO response training
Training	Training			

Goal: SSMP Audits and Updates

Responsible Person (RP):
Principal Utilities Civil Engineer

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify efforts to present the findings of SSMP performance evaluations to City Council and other peer agencies, with the purpose of receiving valuable feedback on performance and possible improvements to existing procedures and programs.

PIs and Data Collection Methods:

1. Was a bi-annual report prepared and presented to City Council based on the SSMP performance indicator review process?
Data Collection Method: Keep track manually.
2. The frequency with which a review of the City SSMP, a SSMP Audit, or SSMP performance evaluation (i.e. annually summary of performance indicator tracking process) is completed.
Data Collection Method: Keep track manually. A file of all peer reviews should be kept.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Bi-annual Council presentation	No	-	Yes	-
2	Time since last review of SSMP, SSMP Audits, or SSMP Performance Evaluations	> 5 years	2-5 years	1-2 years	< 1 year

Periodic Performance Tracking				
Date	Measured Value			Performance Assessment Comments
FY 15/16	Goal	1	2	
	Value	Yes	<1 year	

Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

1. **Good** – Presented FY 13/14 on 10/21/2014. Preparing to present FY 14/15 and 15/16.
2. **Excellent** – SSMP Audit Review in January 2015 for FY 14/15.

Recommendation #1: None.

Recommendation #2: None.

Signature of Responsible Person: (sign when complete)	Date:
	9/6/16

Goal:**Closed Circuit Television (CCTV) Inspections****Responsible Person (RP):**

Chief Collections Systems Operator

Description of Performance Indicator(s) (PIs):

CCTV inspections are conducted using a standardized protocol to supply sufficient data for use in capital improvement project planning. The PIs listed below quantify efforts to complete CCTV work according to system-wide inspection frequency goals, and to complete the work both efficiently and with high quality.

PIs and Data Collection Methods:

1. *The total footage of the collection system inspected per year with CCTV.*
Data Collection Method: Determine year-to-date CCTV inspection footage production from central crystal report, and project to year-end production.
2. *The total number of pipe segments inspected with CCTV per year.*
Data Collection Method: Determine year-to-date CCTV inspection pipe production from central crystal report, and project to year-end production.
3. *The average footage inspected per 16 hours of work (one full day for a crew of 2).*
Data Collection Method: Determine year-to-date CCTV effort hours expended from central crystal report, and divide by 16 to determine the number of equivalent 16-hour blocks worked. Divide the year-to-date footage inspected (also from central crystal report) by the number of 16 hour blocks worked to determine average daily crew production.
4. *The percentage of CCTV surveys with a 4 or a 5 structural grading in CACIP module.*
Data Collection Method: Determine total number of CCTV inspections completed and the number of CCTV videos with a 4 or 5 structural grading from the CACIP Module.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Feet inspected with CCTV / year	< 100,000	100,000-170,000	170,000-200,000	> 200,000
2	Pipe segments inspected / year	< 400	400-600	600-800	> 800
3	Footage inspected / 16 work hours	< 1500	1500-1600	1600-2000	> 2000
4	% CCTV Surveys with a 4 or a 5 structural grading	> 30%	20-30%	10-20%	< 10%

Periodic Performance Tracking						
Date	Measured Value					Performance Assessment Comments
FY 15/16	Goal	1	2	3	4	4. 326 surveys / 2583 total CCTV'd assets
	Value	273,947	1,653	1,671	11%	
Annual Performance Assessment / Recommendations for Updates						
<p>FY 15/16 Ratings:</p> <ol style="list-style-type: none"> Excellent – 273,947 feet inspected Excellent – 1,653 pipe segments inspected Good – 1,671 feet inspected / 16 work hours Good – 11% <p>Recommendation #1: None.</p> <p>Recommendation #2: None.</p> <p>Recommendation #3: None.</p> <p>Recommendation #4: None.</p>						

Signature of Responsible Person: (sign when complete)	Date:
	9/6/16

Goal: Computerized Maintenance Management System (CMMS) & Graphical Information System (GIS)

Responsible Person (RP):
GIS Analyst

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts required to maintain a robust population of attribute data within the City GIS that can be used to supplement the City’s CA&CIP Module and hydraulic modeling efforts. Additionally, the City’s effort to consistently close-out work orders is quantified to ensure that scheduled work is completed in a timely manner.

PIs and Data Collection Methods:

1. *Percentage population of key attribute data for sewer collection system assets within GIS geodatabase for gravity sewer mains.*
Data Collection Method: Determine the % of values for the following fields in the GIS geodatabase SGravityMain table from the central crystal report: InstallDate, Material, WidthTop, UpstreamInvert, DownstreamInvert, Slope, DesignFlow, Condition, ConditionDate

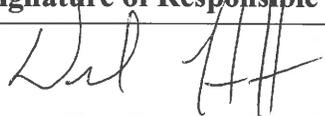
2. *Percentage population of key attribute data for sewer collection system assets within GIS geodatabase for manholes.*
Data Collection Method: Determine the % of values for the following fields in the GIS geodatabase SManhole table from the central crystal report: InstallDate, Condition, ConditionDate, Elevation, BarrelDiameter, BarrelMaterial, Depth

3. *Percentage of year-to-date CityWorks work orders that are closed*
Data Collection Method: Determine the % of year-to-date CityWorks work orders that have been closed out from the central crystal report.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% population of key GIS attribute fields for gravity sewer mains	< 80%	80-90%	90-95%	95-100%
2	% population of key GIS attribute fields for sewer manholes	< 80%	80-90%	90-95%	95-100%
3	Year-to-date % of CityWorks work orders that have been closed-out	< 80%	80-90%	90-95%	95-100%

Periodic Performance Tracking					
Date	Measured Value			Performance Assessment Comments	
1 st Qtr	Goal	1	2	3	3. 432 of 466 closed/completed or 93%
	Value	71%	46%	93%	
2 nd Qtr	Goal	1	2	3	3. 469 of 502 closed/completed or 93%
	Value	70%	46%	93%	
3 rd Qtr	Goal	1	2	3	3. 614 of 673 closed/completed or 91%
	Value	70%	46%	99%	
4 th Qtr	Goal	1	2	3	3. 225 of 281 closed/completed or 91%
	Value	71%	47%	94%	

Annual Performance Assessment / Recommendations for Updates	
<p>FY 15/16 Ratings:</p> <ol style="list-style-type: none"> Below Goal – 71% Below Goal – 46% Good/Excellent – 1,838 out of 1,932 closed or 95% for FY 15/16. <p>Recommendation #1: Set aside time to gather and enter information into database.</p> <p>Recommendation #2: Set aside time to gather and enter information into database.</p> <p>Recommendation #3: None.</p>	

Signature of Responsible Person: (sign when complete)	Date:
	9.6.16

Goal:**Maintaining Codes and Ordinances****Responsible Person (RP):**

Principal Utilities Civil Engineer

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to keep the City Codes and Ordinances current with known or upcoming changes in regulatory issues. This effort involves keeping a list of recommended updates to the codes and ordinances, which is reviewed by all parties with responsibility over the collection system and updated on a consistent basis.

PIs and Data Collection Methods:

- The frequency with which the list of required/requested updates to the City Code and Ordinances is maintained and discussed with O&M, Engineering, Environmental Compliance, and Management with regard to sewer-specific issues.*

Data Collection Method: Keep track manually. Current list of updates, and meeting notes from past meetings should be available.

- The frequency with which the Municipal Code is revised to incorporate the list of required/requested sewer-specific updates.*

Data Collection Method: Keep track manually. A file of completed updates and/or new ordinances specific to the sewer collection system should be kept.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Time since last meeting to discuss Ordinance/Code updates based on sewer-specific issues	> 5 Years	2-5 years	1-2 years	< 1 year
2	Time since last actual update to Ordinances/Codes based on sewer-specific issues	> 10 Years	5-10 years	2-5 years	< 2 years

Periodic Performance Tracking				
Date	Measured Value			Performance Assessment Comments
FY 15/16	Goal	1	2	2. Last updated on 1/15/13, 1546 section 19-1-1
	Value	~1 yr	~3 yrs	
Annual Performance Assessment / Recommendations for Updates				
<p>FY 15/16 Ratings:</p> <ol style="list-style-type: none"> Good – approximately 1 year ago Good – 3.5 years ago <p>Recommendation #1: None.</p> <p>Recommendation #2: None.</p>				

Signature of Responsible Person: (sign when complete)	Date:
	5/6/16

Goal:**Communication Program****Responsible Person (RP):**

Administration Clerk

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to communicate with the public on a regular basis concerning the development and status of the City SSMP.

PIs and Data Collection Methods:

1. *Based on the current SSMP phase as described in the Communication Plan (Development, Implementation, Performance phases) in SSMP section xi, the percentage of communication activities completed that have been scheduled per the Communication Plan Table to-date.*

Data Collection Method: Keep track manually. RP should develop a file for documenting communication activities and completed dates.

2. *Total number of year-to-date public comment email responses.*

Data Collection Method: The City's public comment email link should be set up to deliver emails directly to the RP. The RP should keep a separate folder specifically for filing SSMP public comment emails and responses. There is no goal set for this PI. The RP only needs to document the total number of responses.

3. *The percentage of public comment emails received that were responded to.*

Data Collection Method: RP will use Microsoft Outlook to determine the number of year-to-date comment emails received, and determine the number of year-to-date responses and determine the response percentage.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% Communication Activities Completed	< 70%	70-80%	80-90%	90-100%
2	# of Public Comment Email Responses	N/A	N/A	N/A	N/A
3	% Public Comment Emails Responded To	< 80%	80-90%	90-95%	95-100%

Periodic Performance Tracking					
Date	Measured Value			Performance Assessment Comments	
FY 15/16	Goal	1	2	3	1. Completed in 2010 2. Total of 2 sewer specific emails were received by pubworks@cityofwoodland.org 3. All 2 were responded to
	Value	100%	N/A	100%	
Annual Performance Assessment / Recommendations for Updates					
<p>FY 15/16 Ratings:</p> <ol style="list-style-type: none"> Excellent – Communication Activities completed in 2010. Excellent – 2 out of 2 emails were responded to in an appropriate amount of time. <p>Recommendation #1: Remove PI and replace with new PI to achieve communication with public.</p> <p>Recommendation #2: None.</p> <p>Recommendation #3: None.</p>					

Signature of Responsible Person: (sign when complete)	Date:
<i>Susan R Parker</i>	9/6/16

Goal:		Employee Recognition			
Responsible Person (RP): Chief Collections Systems Operator					
Description of Performance Indicator(s) (PIs): The PIs listed below quantify the efforts to publicly recognize employees for exceptional work and provide a rewards system (gift certificates, cash, etc.) as part of the program.					
PIs and Data Collection Methods: 1. <i>The frequency with which awards are distributed to O&M staff</i> Data Collection Method: Keep Track Manually. Count letters distributed as found in the Q drive and determine frequency in a year.					
	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Time since last awards distribution: Operation & Maintenance staff	< 6 months	6 months	1 Quarter	1 month

Periodic Performance Tracking			
Date	Measured Value		Performance Assessment Comments
1 st Qtr	Goal	1	1. Letters in Q:\PubWorks\!ADMIN SERVICES\Congratulatory letters
	Value	9	
2 nd Qtr	Goal	1	1. Letters in Q:\PubWorks\!ADMIN SERVICES\Congratulatory letters
	Value	3	
3 rd Qtr	Goal	1	1. Letters in Q:\PubWorks\!ADMIN SERVICES\Congratulatory letters
	Value	2	
4 th Qtr	Goal	1	1. Letters in Q:\PubWorks\!ADMIN SERVICES\Congratulatory letters
	Value	1	
Annual Performance Assessment / Recommendations for Updates			
FY 15/16 Ratings: 1. Excellent – Total of 15 letters of acknowledgement received by O&M Staff: average of 1.25 letters a month. Recommendation #1: None.			

Signature of Responsible Person: (sign when complete)	Date:
	7/6/16

Goal: Fats, Oils, and Grease (FOG) Control Program

Responsible Person (RP):
Environmental Compliance Inspector

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to operate an effective and efficient FOG control program.

PIs and Data Collection Methods:

1. *The percent reduction in sanitary sewer overflows (SSOs) and blockages requiring flushing attributed to FOG blockages from the previous year.*

Data Collection Method: For the first year of tracking, simply report number of SSOs and blockages caused by FOG from the central crystal report. Report SSOs and blockages from both sewer mains and sewer laterals. After data is available from the first year of tracking, determine the year-to-date FOG-related SSOs and blockages from the central crystal report, project the number of events out to the total year, and compare to the previous year's events to determine % reduction.

2. *The percentage of Pollution Prevention Program (PPP) permit holder inspections completed per quarter.*

Data Collection Method: Keep track manually using total number of PPP permit holders and number of inspection forms.

[Note: when PPP program managed through CityWorks, a query can be set up to quantify inspections completed based on work-order records rather than counting inspection forms.]

3. *The number of public education outreach events conducted per year.*

Data Collection Method: Keep track manually. Project the year-to-date activity number out to the total year. The RP should keep documentation on all FOG Control public outreach events and activities in a file which can be reviewed to determine what activities have been conducted.

4. *Time since last joint Environmental Compliance and O&M meeting to review FOG-related issues in the collection system.*

Data Collection Method: Keep track manually. RP should keep file of meeting notes and action items from meetings.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% reduction of FOG-related SSOs compared to previous year	< 0%	0-5%	5-10%	10-20%
2	% completed of PPP permits inspections	<90%	90-95%	95-100%	100%
3	Annual # of FOG control public education events	< 200	200-300	300-400	> 400
4	Time since last coordination meeting with Environmental Compliance and O&M staff	> 6 months	3-6 months	2-3 months	< 2 months

Periodic Performance Tracking						
Date	Measured Value					Performance Assessment Comments
1 st Qtr	Goal	1	2	3	4	1. 0 incidents this FY, 1 incident last FY. 2. Actual inspection rates for this quarter: FSBs – 100%, ARBs – 100%.
	Value	100%	100%	105	1 mo	
2 nd Qtr	Goal	1	2	3	4	1. No incidents this FY, no incidents last FY. 2. Actual inspection rates for this quarter: FSBs – 100%, ARBs – 100%.
	Value	0%	100%	45	4 mo	
3 rd Qtr	Goal	1	2	3	4	1. No incident this FY, 1 incident last FY. 2. Actual inspection rates for this quarter: FSBs – 100%, ARBs – 100%.
	Value	100%	100%	50	7 mo	
4 th Qtr	Goal	1	2	3	4	1. No incidents this FY, 1 incident last FY. 2. Actual inspection rates for this quarter: FSBs – 100%, ARBs – 100%.
	Value	100%	100%	107	10 mo	

Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

1. **Excellent** – 0 incidents this year, 3 incidents last year. 100% reduction.
2. **Excellent** – 100% of all PPP permit holders inspected every quarter.
3. **Excellent** – Total of 307 outreach events conducted, generally information handed out at site visits.
4. **Below Goal** – Met once this FY, over 6 months ago.

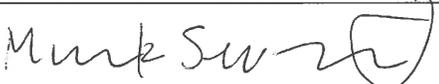
Pretreatment devices for businesses permitted under the City's Pollution Prevention Program are inspected on an ongoing basis: quarterly for Food Service Businesses (FSBs) and Automotive Related Businesses (ARBs).

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: Review necessary documentation of outreach events.

Recommendation #4: Reassign Alex Truitt to schedule coordination meetings with Environmental Compliance and O&M staff.

Signature of Responsible Person: (sign after annual review)	Date:
	9/6/2016

Goal:**High Velocity Vacuum Cleaning (HVVC)****Responsible Person (RP):**

Chief Collections Systems Operator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the effort to periodically clean hot spot pipes and support CCTV inspection by pre-cleaning pipes.

PIs and Data Collection Methods:

1. *The total footage of the collection system cleaned per year with HVVC.*
Data Collection Method: Determine year-to-date HVVC footage production from central crystal report, and project to year-end production.
2. *The total number of pipe segments cleaned with HVVC per year.*
Data Collection Method: Determine year-to-date HVVC pipe cleaning production from central crystal report, and project to year-end production.
3. *The average footage cleaned per 16 hours of work (one full day for a crew of 2).*
Data Collection Method: Determine year-to-date HVVC effort hours expended from central crystal report, and divide by 16 to determine the number of equivalent 16-hour blocks worked. Divide the year-to-date footage cleaned (also from central crystal report) by the number of 16 hour blocks worked to determine average daily crew production.
4. *The percentage of CCTV inspections that were conducted where pre-cleaning was completed.*
Data Collection Method: Determine the number of year-to-date CCTV inspections that have been pre-cleaned from the central crystal report, and compare to the total number of year-to-date CCTV inspections completed (also from central crystal report).

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Feet cleaned / year	< 210,000	210,000-240,000	240,000-300,000	> 300,000
2	Pipe segments cleaned / year	< 700	700-900	900-1000	> 1000
3	Footage cleaned / 16 work hours	<1800	1800-2300	2300-2500	> 2500
4	% Pipe segments pre-cleaned prior to CCTV inspection	< 70%	70-80%	80-90%	> 90%

Periodic Performance Tracking						
Date	Measured Value					Performance Assessment Comments
FY 15-16	Goal	1	2	3	4	1-3 goals' values are numerically worse than last year's statistics.
	Value	378,200	2,157	2,414	96%	
Annual Performance Assessment / Recommendations for Updates						
<p>FY 15-16 Ratings:</p> <ol style="list-style-type: none"> Excellent – 378,200 ft cleaned per year with HVVC. Excellent – 2,157 segments cleaned with HVVC per year. Good – 2,414 feet cleaned per unit. Excellent – 96% of sewer main segments are pre-cleaned prior to CCTV. Only counted segments with 'SGM#' and if there was jetting/heavy cleaning done on the Crystal Report. <p>Recommendation #1: Review rating divisions to increase expectations.</p> <p>Recommendation #2: Review rating divisions to increase expectations.</p> <p>Recommendation #3: None.</p> <p>Recommendation #4: None.</p>						

Signature of Responsible Person: (sign when complete)	Date:
	9/12/16

Goal: System Mapping

Responsible Person (RP):
GIS Analyst

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to provide up-to-date maps of assets in the collection systems and other applicable facilities (i.e., stormwater facilities, waterways, etc.). This effort involves completing map change requests in a timely fashion. Map change requests come from three sources; namely, 1) variations observed in the field, 2) changes from rehabilitation or replacement, and 3) additional assets from new development.

PIs and Data Collection Methods:

1. *The average time to update GIS maps based on redlines received from O&M staff in the field through Redline Process.*

Data Collection Method: Determine the average completion time for field staff redline map updates completed in the year-to-date period from the central crystal report.

2. *The % of CIP Sewer R&R in construction that are being GPS'd to update GIS maps*

Data Collection Method: Use the Tyler Eden Project Module under Sewer CIP to determine the number of rehabilitation and/or replacement projects in construction through crystal report. Determine the number of GPS sites visited that were/are currently in construction.

3. *The % of new development sites that have been GPS'd*

Data Collection Method: Track new developments under current construction, manually. Check these areas of new developments for availability of sewer data in GIS and determine the percentage of subdivision sites that have been GPS'd.

[note: spreadsheet of new developments available through Miguel Chavez.]

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Average time for redline updates	> 12 days	10-12 days	8-9 days	< 7 days
2	% of sites GPS'd from CIP Sewer R&R in construction	< 25%	25-70%	70-100%	100%
3	% of new development sites GPS'd	< 50 %	50-85%	85-100%	100%

Periodic Performance Tracking					
Date	Measured Value				Performance Assessment Comments
1 st Qtr	Goal	1			
	Value	5 days			
2 nd Qtr	Goal	1			
	Value	4 days			
3 rd Qtr	Goal	1			
	Value	7 days			
4 th Qtr	Goal	1	2	3	2,3. All areas of new development/R&R locations with sewer involvement have been GPS'd.
	Value	6 days	100%	100%	

Annual Performance Assessment / Recommendations for Updates

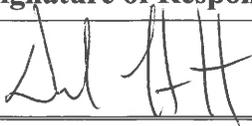
FY 15/16 Ratings:

1. **Excellent** – Year end average is 6 days.
2. **Excellent** – 100% of R&R sites listed as CIP Projects have GIS data on sewer infrastructure.
3. **Excellent** – 100% of new development sites have GIS data on sewer infrastructure.

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: None.

Signature of Responsible Person: (sign when complete)	Date:
	9.6.16

Goal:**Operation and Maintenance Budgeting****Responsible Person (RP):**

Management Analyst

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to sufficiently provide and utilize funds to effectively operate and maintain the collection system.

PIs and Data Collection Methods:

1. *The amount of funding provided for operating and maintaining the collection system per foot of main line pipe.*

Data Collection Method: Determine annual funds allocated for operation and maintenance of the sewage collection system, and divide by the total gravity main and pressure main pipe footage from the central crystal report. [Note: This PI only needs to be tracked on an annual basis, not a quarterly basis.]

2. *The annual cost of operating and maintaining the collection system per foot of main line pipe.*

Data Collection Method: Determine actual year-to-date sewer system O&M costs from financial accounting system, and divide by the total gravity main and pressure main pipe footage from the central crystal report. Project the cost per foot to the year-end total cost per foot.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Funding provided for O&M budget	< \$1/ft/year	\$1-\$2/ft/year	\$2-\$3/ft/year	> \$3/ft/year
2	O&M operation cost	> 100% budget	95-100% of budget	<95% of budget	N/A

Periodic Performance Tracking

Date	Measured Value		Performance Assessment Comments
FY 15/16	Goal	1 2	1. Good – \$2,437,609.50 / 973,203.56 ft of sewer pipe = \$2.50/ ft
	Value	\$2.50/ft \$2.09/ft	2. Good –\$2,198,515.66 divided by 973,203.56 feet = \$2.25/ ft, within budget (84%)

Annual Performance Assessment / Recommendations for Updates

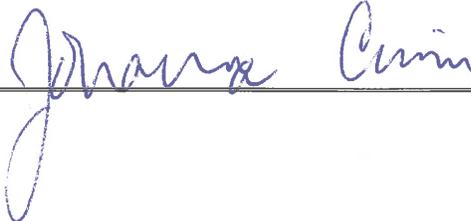
FY 15/16 Ratings:

- Good** – \$2.50/ft.
- Good** – Within budget. (84%)

Recommendation #1: None.

Recommendation #2: None.

Signature of Responsible Person: (sign when complete)	Date:
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	9/6/16
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Goal:**Preventative Maintenance Effectiveness****Responsible Person (RP):**

Chief Collections Systems Operator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the effectiveness of the preventative maintenance program in limiting time and expenses required to respond to emergency calls and failures of the sanitary sewer system.

PIs and Data Collection Methods:

1. *The percentage of work orders that are emergency.*

Data Collection Method: Determine from central crystal report. Emergency work orders include the following CityWorks priority categories: “priority 1” (emergency), “priority 2” (urgent), and “priority 9” (on-call).

2. *The percentage of accountable labor and material costs that are attributed to emergency work versus regular preventative maintenance work.*

Data Collection Method: Determine from central crystal report. Emergency work orders include the following CityWorks priority categories: “priority 1” (emergency), “priority 2” (urgent), and “priority 9” (on-call).

3. *The percentage of accountable labor and material costs that are attributed to emergency work on private laterals.*

Data Collection Method: Determine the total year-to-date work order costs (labor and materials) for all “priority 1” (emergency), “priority 2” (urgent), and “priority 9” (on-call) work orders associated with sewer laterals from the central crystal report. Determine the percentage of the total year-to-date work order costs (also from central crystal report) associated with the sewer collection system these “lateral emergency” work orders represent.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% of work orders that are emergencies	> 40%	30-40%	20-30%	< 20%
2	% of Labor and Material Costs that is Emergency Work	> 30%	20-30%	10-20%	0-10%
3	% of Labor and Material Costs that is Emergency Work on Private Laterals	> 20%	10-20%	5-10%	0-5%

Periodic Performance Tracking

Date	Measured Value			Performance Assessment Comments	
FY 15/16	Goal	1	2	3	1. 199 out of 1936 WOs 2. \$196,974.60 out of \$948,936.17 3. \$12,151.97 out of \$948,936.17
	Value	10%	21%	1.2%	

Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

- 1. **Excellent** – 10%
- 2. **Acceptable** – 21%
- 3. **Excellent** - 1.2%

Recommendation #1: None.

Recommendation #2: Review work orders consisting of emergency work and determine if the emergency work consists of lateral failures due to preventable causes.

Recommendation #3: None.

Signature of Responsible Person: (sign when complete)	Date:
	9/6/16

Goal: Frequency of Preventative Maintenance (PM) Activities

Responsible Person (RP):
Chief Collections Systems Operator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the effort to ensure that work orders are being created to accurately document preventative maintenance activities, and that preventative maintenance activities are being completed as planned by management.

PIs and Data Collection Methods:

- Compare the number of closed-out work orders in the CMMS to the number of flushing and inspection work orders that should have been generated if all of the pipes on the weekly and quarterly cleaning routes were completed and determine the completion %.*

Data Collection Method: Determine the total number of year-to-date closed-out preventative maintenance CCTV inspection and hydroflushing work orders from the central crystal report. Compare the number of closed-out work orders to the number of work orders that were expected based on the number of assets on the weekly and quarterly inspection and cleaning routes (excel files).
- Frequency of thorough electrical and mechanical inspections of lift stations.*

Data Collection Method: Keep track manually. Determine the number of thorough electrical/mechanical inspections conducted over the previous 2-year period for each lift station to determine the inspection frequency. Report the average inspection frequency for all lift stations. [Note: when lift station work orders are being managed through CityWorks, a query can be set up to determine the number of work orders completed over the last 2-year period and calculate the average inspection frequency.]

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% Completion of closed-out work orders vs. expected preventative maintenance work orders	< 75%	75-85%	85-95%	95-100%
2	Frequency of thorough lift station inspection / maintenance	> Biannually	Every 4-6 months	Every 3-4 months	< Quarterly

Periodic Performance Tracking				
Date	Measured Value			Performance Assessment Comments
FY 15/16	Goal	1	2	
	Value	94.6%	Every 4-6 Months	1. 106 closed PM WOs vs. 112 expected closed WOs 2. Electrical and mechanical inspection is conducted annually or more often if a problem is identified in daily routine checks of the station.

Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

- Good** – 94.6 % closed out work orders vs. expected PM work orders.
- Acceptable** – Electrical and mechanical inspection is conducted annually or more often if a problem is identified in daily routine checks of the station.

Recommendation #1: Determine the eventual use of preventative maintenance CityWorks work orders, or else continue working to distinguish WOs separately from other unscheduled preventative maintenance as: routine flushing, routine inspection, or quarterly cleaning for more consistent sorting.

Recommendation #2: Work with electrical to determine what a thorough inspection outside of daily maintenance involves.

Signature of Responsible Person: (sign when complete)	Date:
	9/6/16

Goal:**Rehabilitation and Replacement (R/R) Funding****Responsible Person (RP):**

Management Analyst

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to provide sufficient funds for the R/R program to maintain or improve the condition of the collection system over time.

PIs and Data Collection Methods:

1. *The percentage of the total system value as defined by GASB34 reporting budgeted for the year for R/R projects.*

Data Collection Method: Manually compare total R/R funding provided to the value of the sewer collection system as determined by GASB34 reporting.

[Note: this PI may be tracked on an annual basis, and does not need to be tracked quarterly.]

2. *The annual funding budgeted for R/R projects compared to the estimated funding required according to estimates produced by the CA&CIP Module.*

Data Collection Method: Manually sum the total annual R/R funding provided vs. the funding required for the current year according to CIP bundles scheduled for the current year in the CA&CIP module.

[Note: this PI may be tracked on an annual basis, and does not need to be tracked quarterly.]

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Annual R/R funding provided as % of sewer system value	<1%	1.0%-1.5%	1.5%-2.0%	>2.0%
2	Annual funding provided for R/R program vs. CA&CIP cost projections	< needs from CA&CIP analysis	N/A	Consistent with needs from CA&CIP analysis	N/A

Periodic Performance Tracking

Date	Measured Value		Performance Assessment Comments
FY 15/16	Goal	1 2	
	Value	12.28% Consistent.	

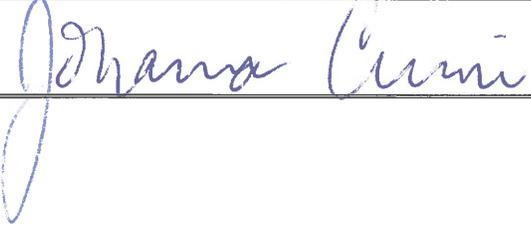
Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

- 1. **Excellent** – Uses FY 16 Asset value for Fund 220 (\$87,685,040.74)
- 2. **Good** – Spent 86% of what was requested as of 8/1/2016.

Recommendation #1: None.

Recommendation #2: None.

Signature of Responsible Person: (sign when complete)	Date:
	9/6/14

Goal:**Rehabilitation and Replacement (R/R) Program****Responsible Person (RP):**

Principal Utilities Civil Engineer

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to develop and implement an R/R program. This involves developing a CA&CIP Module for continually prioritizing line segments to be identified for rehabilitation or replacement. Once prioritized line segments are identified and bundled into Capital Improvement Projects (CIPs), appropriate rehabilitation or replacement methods will be analyzed, designed, and constructed.

PIs and Data Collection Methods:

1. *The percentage of assets in the CA&CIP Module that have risk ratings from 4-5 and have been CCTV inspected that have also been evaluated.*

Data Collection Method: Determine the percentage of CCTV inspected assets that have been evaluated in the CACIP from the central crystal report.

2. *The percentage of assets in the CA&CIP Module that have risk ratings from 4-5 that have a capital improvement "action" assigned or operations and maintenance repairs assigned.*

Data Collection Method: Determine the percentage of assets in the CACIP module with risk ratings of 4 or 5 that have capital improvement actions assigned during evaluation. Then, determine the percentage of assets in the CACIP module with risk ratings of 4 or 5 that have O&M repairs assigned during evaluation. Add the two percentages.

3. *The percentage of CIP bundles assigned to the previous year that are in design or construction.*

Data Collection Method: Manually determine the % based on determination of which CIP bundles assigned to the previous year in the CACIP Module are actually in design or construction.

4. *The number of annual main line structural pipe failures or breaks per 100 miles of pipe.*

Data Collection Method: Determine the number of SSOs caused by structural failures in gravity mains, force mains, and manholes as well as the number of repairs or replacements of gravity mains, force mains, and manholes due to emergency structural problems from the central crystal report. Project the total number of year-to-date structural issues to year-end totals. Finally, determine the ratio of structural failures per 100 miles of pipe using the total length of sewer system gravity and pressure main piping (also found in the central crystal report).

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% of CCTV inspected assets with risk ratings of 4 or 5 that have been evaluated in the CA&CIP Module	< 75%	75-85%	85-95%	95-100%
2	% of assets with risk ratings of 4 or 5 that have CIP "actions" assigned or O&M repairs assigned	< 75%	75-85%	85-95%	95-100%
3	% of scheduled CIPs designed or in construction	< 50%	50-60%	60-70%	> 70%
4	# of line failures per 100 miles of pipe	> 4	3-4	2-3	< 2

Periodic Performance Tracking						
Date	Measured Value				Performance Assessment Comments	
FY 15/16	Goal	1	2	3	4	1. 45 evaluated out of 326 assets 2. 44 placed in CIP actions out of 326 assets 4. 19 total structural failures over 271 total miles of sewer pipe
	Value	14%	13%	55%	7	

Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

1. **Below Goal** – 14%
2. **Below Goal** – 13%
3. **Acceptable** – 55%
4. **Below Goal** – 7/100 miles of sewer pipe

Recommendation #1: Staff needs to take more time to evaluate and prioritize sewer rehabilitation projects.

Recommendation #2: Staff needs to take more time to evaluate and prioritize sewer rehabilitation projects.

Recommendation #3: Staff needs to set aside more time to get sewer projects into construction.

Recommendation #4: Review structural failure areas to find commonalities with age and type of pipe with the intent to start a lining project.

Signature of Responsible Person: (sign when complete)	Date:
	9/6/16

Goal: Replacement Parts

Responsible Person (RP):
 Equipment Services Clerk /
 Utility Maintenance Worker /
 WPCF Operator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to ensure that adequate reserves of replacement parts are available to respond to foreseeable emergency situations that may arise within the collection system.

PIs and Data Collection Methods:

1. *Frequency with which the inventory of necessary equipment and replacement parts for fleet vehicles is reviewed and updated, and new parts ordered if needed.*
Data Collection Method: Report generated through Fleet Software System semi-annually.
2. *Frequency with which the inventory of necessary equipment and replacement parts for pipeline and manhole repairs is reviewed and updated, and new parts ordered if needed.*
Data Collection Method: Keep track manually.
3. *Frequency with which the inventory of necessary equipment and replacement parts for lift stations is reviewed and updated, and new parts ordered if needed.*
Data Collection Method: Keep track manually.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Frequency of Fleet equipment and replacement part inventory review	>Annually	Annually / Semi-annually	Semi-annually / Quarterly	> Quarterly
2	Frequency of pipeline / manhole equipment and replacement part inventory review	>Annually	Annually / Semi-annually	Semi-annually / Quarterly	> Quarterly
3	Frequency of lift station equipment and replacement part inventory review	>Annually	Annually / Semi-annually	Semi-annually / Quarterly	> Quarterly

Periodic Performance Tracking					
Date	Measured Value				Performance Assessment Comments
1 st Qtr	Goal	1	2	3	
	Value	Cont	Qrtly	Annual	
2 nd Qtr	Goal	1	2	3	
	Value	Cont	Qrtly	Annual	
3 rd Qtr	Goal	1	2	3	
	Value	Cont	Qrtly	Annual	
4 th Qtr	Goal	1	2	3	
	Value	Cont	Qrtly	Annual	

Annual Performance Assessment / Recommendations for Updates

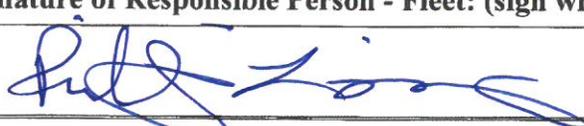
FY 15/16 Ratings:

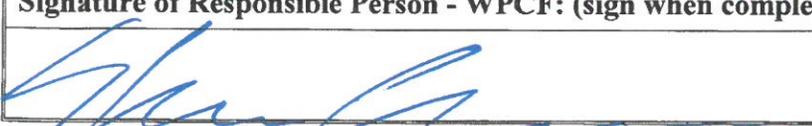
1. **Excellent** – Monitoring occurs on a real-time basis using FASTER Fleet.
2. **Excellent** – Quarterly.
3. **Acceptable** – Inventory conducted annually, with parts ordered as soon as repair or replacement is completed.

Recommendation #1: Review PI with Fleet to determine necessary documentation.

Recommendation #2: Review PI with O&M staff to determine necessary documentation.

Recommendation #3: Review PI to determine necessary documentation.

Signature of Responsible Person - Fleet: (sign when complete)	Date:
	9-19-16

Signature of Responsible Person - WPCF: (sign when complete)	Date:
	9-12-16

Signature of Responsible Person - O&M: (sign when complete)	Date:
	9/6/16

Goal: Response to Service Requests

Responsible Person (RP):
Administrative Clerk

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts taken to effectively respond to customer service calls.

PIs and Data Collection Methods:

1. *The average response time for an urgent call.*
Data Collection Method: Determine the average response time for “priority 1” (emergency), “priority 2” (urgent), and “priority 9” (on-call) service calls from the central crystal report.

2. *The average response time for a routine call.*
Data Collection Method: Determine the average response time for “priority 3” (routine) service calls from the central crystal report.

3. *Average number of service calls per 100 miles of pipe per year.*
Data Collection Method: Determine the total number of year-to-date service calls from the central crystal report, project to year-end totals, and determine number of calls per 100 miles of main line gravity and pressure pipe.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Response time for urgent calls	> 1 day	1 day	8 hours	1 hour
2	Response time for routine calls	> 1 week	1 week	3 days	1 day
3	Average # of service calls / 100 miles of pipe	> 200	150-200	100-150	< 100

Periodic Performance Tracking					
Date	Measured Value				Performance Assessment Comments
FY 15/16	Goal	1	2	3	1 & 2. Front desk must establish live contact with the Supervisor (or designate). No voice mail or e-mail will be accepted. 3. 231 service requests
	Value	0.5 hours	2 hours	81 calls / 100 miles	

Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

- Excellent** – Average response time for an urgent call is 0.5 hours.
- Excellent** – Average response time for a routine service call is 2 hours.
- Excellent** – 81 is the average # of service calls/100 mi pipe.

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: None.

Signature of Responsible Person: (sign when complete)	Date:
<i>Susan R Parker</i>	<i>9/16/16</i>

Goal:**Root Treatment Program (RTP)****Responsible Person (RP):**

Chief Collections Systems Operator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to mitigate reoccurring sewer lateral blockages due to root intrusion and to operate an effective Root Treatment Program.

PIs and Data Collection Methods:

- The total footage of sewer laterals treated for root intrusion over one year*
Data Collection Method: Determine the year-to-date footage of treated sewer laterals from central crystal report, and extrapolate to the end of the year.
- The average footage of sewer laterals treated per fiscal quarter.*
Data Collection Method: Determine the year-to-date total footage of sewer laterals treated from central crystal report and divide by four.
- The percent reduction in Sanitary Sewer Overflows (SSOs) and blockages requiring flushing attributed to root intrusion from previous year.*
Data Collection Method: For the first year of tracking, simply report the number of SSO's and blockages caused by root intrusion from the central crystal report. After data is available from the first year of tracking, determine the year-to-date number of SSOs and blockages attributed to root intrusion, project the number of events out to the total year, and then compare the previous year's events to determine the percent reduction.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Total footage of laterals treated for root intrusion over one year	< 6,000	6,000 – 10,000	10,000-20,000	> 20,000
2	Average footage of sewer laterals treated per quarter	< 1,500	1,500 – 2,500	2,500-5,000	> 5,000
3	% reduction in SSOs attributed to root intrusion from the previous year	< 0	0 – 2.5%	2.5-5%	> 5%

Periodic Performance Tracking				
Date	Measured Value			Performance Assessment Comments
1 st Qtr	Goal	1	3	3. 0% reduction. 5 SSOs this FY. 2 SSOs last FY
	Value	4,160	0%	
2 nd Qtr	Goal	1	3	3. 25% reduction. 6 SSOs this FY. 8 SSOs last FY
	Value	143	25%	
3 rd Qtr	Goal	1	3	3. 75% reduction. 1 SSO this FY. 4 SSOs last FY
	Value	875	75%	
4 th Qtr	Goal	1	3	3. 66% reduction. 1 SSO this FY. 3 SSOs last FY
	Value	939	66%	

Annual Performance Assessment / Recommendations for Updates

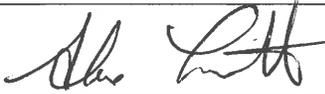
FY 15/16 Ratings:

1. **Acceptable** – 6,060 ft of sewer laterals treated for root intrusion.
2. **Acceptable** – 6,060 ft / 4. 1,515 ft of sewer laterals treated per fiscal quarter.
3. **Excellent** – 24%: 13 SSOs attributed to root intrusion this FY. 17 SSOs last FY.

Recommendation #1: Increase footage treated per quarter to remain consistent.

Recommendation #2: Increase footage treated per quarter to remain consistent.

Recommendation #3: None.

Signature of Responsible Person: (sign after annual review)	Date:
	9/6/16

Goal: System Evaluation and Capacity Assurance Program (SECAP)

Responsible Person (RP):
Principal Utilities Civil Engineer

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to conduct an evaluation of the system and ensure sufficient capacity to convey expected wastewater flows.

PIs and Data Collection Methods:

1. *Ratio of peak wet weather flow to peak dry weather flow as monitored at the WWTP*
Data Collection Method: Collect daily flow data for the largest wet weather event at the WWTP headworks year-to-date and compare to the average daily dry weather (summer) flows as reported by WWTP operators to determine the ratio.
2. *Frequency of hydraulic model updates*
Data Collection Method: Keep track manually. Hydraulic model updates include adjustments to parcel use information, system geometry (i.e. pipe sizes, inverts, locations), updates to I/I rates, etc. RP should keep a log of hydraulic model update activities.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Ratio of peak WWF to peak DWF	> 2.0 : 1	1.7:1 – 2.0:1	1.5:1 – 1.7:1	1.3:1 – 1.5:1
2	Time since last hydraulic model update	> 24 months	18-24 months	12-18 months	< 1 year

Periodic Performance Tracking

Date	Measured Value		Performance Assessment Comments
FY 15/16	Goal	1 2	1. Max day: 5.23, ADWF from July-Oct: 3.6 2. Ran for General Plan Scenario Wastewater Hydraulic Review
	Value	1.45 06-2014	

Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

1. **Excellent** – 1.45:1
2. **Acceptable** – 24 months

Recommendation #1: None.

Recommendation #2: Have utilities engineering department update and possibly run model.

Signature of Responsible Person: (sign when complete)	Date:
	9/8/16

Goal:**Mitigation of Sanitary Sewer Overflows (SSOs)****Responsible Person (RP):**

Chief Collections Systems Operator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts taken to mitigate any SSOs that occur.

PIs and Data Collection Methods:

1. *The percent of SSO volume capture in flat areas (i.e. slopes of 1-5%).*

Data Collection Method: Calculate manually from either completed City of Woodland SSO report forms filed year-to-date, or from information entered into the CIWQS database. Calculate % captured volume for all categories of SSOs (including from private laterals) for which the “description of terrain surrounding the point of blockage or spill cause” is described as flat. For each SSO event, determine the “% captured” as the volume of sewage recovered and returned to the sewer system divided by the total spill volume. Then, average the % captured for all spills in the year-to-date period.

[Note: The City of Woodland has no areas with slopes greater than 5%.]

2. *Average time from an SSO event to when the line is inspected with CCTV to investigate the cause.*

Data Collection Method: Review the central crystal report. Manually compare this list to SSO report forms filed year-to-date. For each year-to-date SSO, determine if a corresponding follow-up CCTV inspection was completed. Manually calculate the time between when each SSO is reported to the date a follow-up CCTV inspection was calculated. If there are SSOs for which a CCTV inspection has not been conducted, exclude from calculation. Average the CCTV inspection response time for all year-to-date SSOs.

3. *The percentage of SSO Events that were followed by an inspection of the line with CCTV to investigate the cause.*

Data Collection Method: Review the central crystal report which lists all year-to-date SSOs and count number of SSOs without a CCTV inspection completed. Compare to total number of all year-to-date SSOs.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% captured of SSO (flat, 1-5%)	<70%	70%-80%	90-90%	90-100%
2	Average time to investigate SSO with CCTV	>1 week	5-7 days	3-5 days	< 3 days
3	% of SSO Events investigated with CCTV	< 75%	75-90%	90-95%	95-100%

Periodic Performance Tracking					
Date		Measured Value			Performance Assessment Comments
FY 15/16	Goal	1	2	3	2. All CCTV'd SSOs were CCTV'd in one day.
	Value	100%	1 day	83%	3. 5 SSOs of 29 total did not have a follow-up CCTV inspection.
Annual Performance Assessment / Recommendations for Updates					
<p>FY 15/16 Ratings:</p> <ol style="list-style-type: none"> Excellent – 100% of SSO volume captured in flat areas. Excellent – 1 day Acceptable – 83% of SSOs were followed up with a CCTV inspection. <p>Recommendation #1: None.</p> <p>Recommendation #2: None.</p> <p>Recommendation #3: Increase efforts to follow-up with all SSOs, including private events.</p>					

Signature of Responsible Person: (sign when complete)	Date:
	9/6/16

Goal:**Prevention of Sanitary Sewer Overflows (SSOs)****Responsible Person (RP):**

Chief Collections Systems Operator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts taken to prevent the occurrence of SSOs.

PIs and Data Collection Methods:

1. *The number of SSOs per 100 miles of gravity sewer mains per year.*

Data Collection Method: Determine the number of SSO events that occurred year-to-date that are attached to gravity mains, force mains, manholes, and lift stations from the central crystal report. Project the number of SSOs to year-end totals. Divide this number by the total footage of gravity mains and force mains in the City (also available on the central crystal report).

2. *The percent reduction in SSOs from the previous year.*

Data Collection Method: Determine the number of SSO events that occurred year-to-date that are attached to gravity mains, force mains, manholes, and lift stations from the central crystal report. Project the number of SSOs to year-end totals and compare to the number of SSOs that occurred last year to determine the % reduction.

3. *The number of repeat SSOs in a five year period.*

Data Collection Method: Review the central crystal report which lists all SSOs by asset type over the last five year period, sorted by Facility ID. Manually determine the number of repeat SSOs. [Note: SSO spreadsheet lists locations of all previous SSOs and determines any repeat addresses.]

4. *The percentage of repeat SSOs followed by mitigation, such as root treatment or repair work.*

Data Collection Method: Keep track manually of repeat SSO locations. Search for work orders on the lateral line, sewer clean out, and sewer pipe IDs. [Note: SSO spreadsheet lists locations of all previous SSOs and determines any repeat addresses.]

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	# of SSOs / 100 miles / year	>5	5	3.5	2.3
2	% reduction of SSOs from previous year	< 0%	0-5%	5-10%	> 10%
3	# of repeat SSOs / 5 years	> 0	-	-	0
4	% of repeat SSOs followed by mitigation	< 70%	70-80%	80-100%	100%

Periodic Performance Tracking						
Date	Measured Value				Performance Assessment Comments	
FY 15/16	Goal	1	2	3	4	2. No possible improvement 4. 8/10 SSO's had clear follow-ups
	Value	0	N/A	10	80%	

Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

- Excellent** – 0 Main SSOs per 100 mi of pipe.
- Excellent** – 0 Main SSO occurrence this FY vs. 0 SSO occurrences this FY. N/A.
- Below Goal** – 10 repeat SSO's in last 5 fiscal years.
- Good** – 80%

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: Ratings may need to be revised to create achievable standards.

Recommendation #4: Prioritize future repeat SSO locations for rehabilitation and repair work.

Signature of Responsible Person: (sign when complete)	Date:
	9/6/16

Goal:**Response to Sanitary Sewer Overflows (SSOs)****Responsible Person (RP):**

Chief Collections Systems Operator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts taken to effectively respond to SSOs. *Response time* is defined as the time of first notification or discovery of a SSO to the arrival onsite by City staff.

Data Collection Methods

1. *The average response time during normal business hours (M-F 7am-4pm).*

Data Collection Method: Determine manually from year-to-date City SSO records or using the CIWQS database. Determine response time for each event by comparing “Date and time sanitary sewer system agency was notified of or discovered spill” to “Estimated Operator arrival date/time” and calculate Response Time. SSOs that occur during normal business hours are those that are initially reported between 7am and 4 pm Monday through Friday. Determine the average response time for year-to-date incidents.

2. *The average response time after hours (M-F 4pm-7am, weekends, holidays).*

Data Collection Method: Determine manually from year-to-date City SSO records or using the CIWQS database. Determine response time for each event by comparing “Date and time sanitary sewer system agency was notified of or discovered spill” to “Estimated Operator arrival date/time” and calculate Response Time. SSOs that occur during normal business hours are those that are initially reported between 4pm and 7am, or on weekends or holidays. Determine the average response time for year-to-date incidents.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	SSO response time during normal hours	>30 min	30 min	20 min	15 min
2	SSO response time after normal hours	<1 hr	1 hr	45 min	30 min

Periodic Performance Tracking

Date	Measured Value		Performance Assessment Comments	
FY 15/16	Goal	1	2	1 & 2 reported in minutes.
	Value	16	31	

Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

- 1. **Excellent** – Average response time is 16 minutes.
- 2. **Excellent** – Average response time is 31 minutes.

Recommendation #1: None.

Recommendation #2: None.

Signature of Responsible Person: (sign when complete)	Date:
	9/6/16

Goal:	Staffing
Responsible Person (RP): Administrative Clerk	
Description of Performance Indicator(s) (PIs): The PIs listed below quantify the efforts to fill all funded positions within the Utility Maintenance, Environmental Operations, and Utilities Engineering Divisions of the City of Woodland to meet the necessary effort required to implement the City SSMP.	
PIs and Data Collection Methods: 1. <i>The percentage of vacant staff positions in the divisions listed above.</i> Data Collection Method: Keep track manually.	

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% of vacant positions	> 10%	10%	5%	All filled

Periodic Performance Tracking			
Date	Measured Value		Performance Assessment Comments
FY 15/16	Goal	1	
	Value	0%	

Annual Performance Assessment / Recommendations for Updates
FY 15/16 1. Excellent – All positions filled. Recommendation #1: None.

Signature of Responsible Person: (sign when complete)	Date:
<i>Susan R. Parker</i>	9/6/16

Goal:**Maintain Up-to-date Standards****Responsible Person (RP):**

Principal Utilities Civil Engineer

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to keep the City Standards current with regards to design and construction of the collection system. This effort involves keeping a list of recommended updates to the standards, which is reviewed by all parties with responsibility over the sewer collection system and updated on a consistent basis.

PIs and Data Collection Methods:

1. *The frequency with which the list of required/requested updates to the standards is maintained and discussed with O&M, Engineering, Environmental Compliance and Management.*

Data Collection Method: Keep track manually. Current list of updates, and meeting notes from past meetings should be available.

2. *The frequency with which the standards are revised to incorporate the list of required/requested updates.*

Data Collection Method: Keep track manually. A file of completed updates and/or new design standards specific to the sewer collection system should be kept.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Time since last meeting to discuss list of design standard updates based on sewer-specific issues	> 2 years	1-2 years	0.5-1 year	< 6 months
2	Time since last actual update to design standards based on sewer-specific issues	> 5 years	2-5 years	1-2 years	< 1 year

Periodic Performance Tracking				
Date	Measured Value			Performance Assessment Comments
1 st Qtr	Goal	1	2	
	Value	-	-	
2 nd Qtr	Goal	1	2	
	Value	-	-	
3 rd Qtr	Goal	1	2	
	Value	March	-	
4 th Qtr	Goal	1	2	2. Currently being finalized.
	Value	June, July	July	

Annual Performance Assessment / Recommendations for Updates

FY 15/16 Ratings:

1. **Excellent** – Under 6 months ago.
2. **Excellent** – Under one year ago: currently happening.

Recommendation #1: None.

Recommendation #2: None.

Signature of Responsible Person: (sign when complete)	Date:
	9/6/16

Goal: Staff Training

Responsible Person (RP):
Chief Collections Systems Operator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the effort required to ensure that regular training takes place.

PIs and Data Collection Methods:

1. *The frequency with which tabletop / tailgate training meetings are conducted by the O&M staff.*
Data Collection Method: Keep track manually of tabletop / tailgate meetings completed year-to-date, and calculate the average frequency of the trainings during that same time period.
2. *The frequency with which field / equipment training exercises are conducted by the O&M staff.*
Data Collection Method: Keep track manually of field / equipment training exercise training completed year-to-date, and calculate the average frequency of the trainings during that same time period.
3. *The frequency with which field, equipment or tabletop / tailgate training is conducted that includes training on SSO response procedures outlined in the OERP.*
Data Collection Method: Keep track manually of all tabletop, tailgate, field, or equipment trainings that involve SSO response that have been completed year-to-date, and calculate the average frequency of trainings during that same time period.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Frequency of tabletop / tailgate training	<Biweekly	Biweekly	Weekly	>Weekly
2	Frequency of field / equipment training	<Quarterly	Quarterly	Bimonthly	Monthly
3	Frequency of SSO response training	<Quarterly	Quarterly	Bimonthly	Monthly

Periodic Performance Tracking

Date	Measured Value			Performance Assessment Comments	
1 st Qtr	Goal	1	2	3	1. 9 total. Average of 3 tabletop/tailgates per month. 2. 2 total. 3. 2 total.
	Value	9	2	2	
2 nd Qtr	Goal	1	2	3	1. 4 total. Average of 1.25 tabletop/tailgate per month. 2. 6 total. 3. 1 total.
	Value	4	6	1	
3 rd Qtr	Goal	1	2	3	1. 9 total. Average of 3 tabletop/tailgates per month. 2. 1 total. 3. 2 total.
	Value	9	1	2	
4 th Qtr	Goal	1	2	3	1. 7 total. Average of 4 tabletop/tailgates per month. 2. 7 total. 3. 2 total.
	Value	7	7	2	

Annual Performance Assessment / Recommendations for Updates

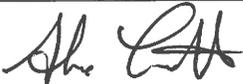
FY 15/16 Ratings:

1. **Acceptable** – Approximately biweekly tailgate meetings: 29 total in fiscal year.
2. **Excellent** – Monthly field/equipment training. 16 total in fiscal year.
3. **Good** – Approximately bi-monthly. 7 total in fiscal year. O&M working to have monthly training for SSOs.

Recommendation #1: Review PI with Alex to determine necessary frequencies of field equipment and tailgate training.

Recommendation #2: Review PI with Alex to determine necessary frequencies of field equipment and tailgate training.

Recommendation #3: None.

Signature of Responsible Person: (sign when complete)	Date:
	9/6/16

Goal: SSMP Audits and Updates					
Responsible Person (RP): Principal Utilities Civil Engineer					
Description of Performance Indicator(s) (PIs): The PIs listed below quantify efforts to present the findings of SSMP performance evaluations to City Council and other peer agencies, with the purpose of receiving valuable feedback on performance and possible improvements to existing procedures and programs.					
PIs and Data Collection Methods:					
1. <i>Was an annual report prepared and presented to City Council based on the SSMP performance indicator review process?</i> Data Collection Method: Keep track manually.					
2. <i>The frequency with which a review of the City SSMP, a SSMP Audit, or SSMP performance evaluation (i.e. annually summary of performance indicator tracking process) is completed.</i> Data Collection Method: Keep track manually. A file of all peer reviews should be kept.					
	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Annual Council presentation	No	Yes	-	-
2	Time since last review of SSMP, SSMP Audits, or SSMP Performance Evaluations	> 5 years	2-5 years	1-2 years	< 1 year

Periodic Performance Tracking

Date	Measured Value			Performance Assessment Comments
FY 14/15	Goal	1	2	1. FY 15 Audit on 11/4/14, SSMP 2015 Revisions on 6/6/15 2. SSMP Revision Meeting on 9/14/15, 10/14/14, 3/26/15, and 5/8/15
	Value	yes	6 mo	

Annual Performance Assessment / Recommendations for Updates

FY 14/15

- 1. Acceptable – Council reviewed SSMP Internal Audit FY 14 in November of 2014.
- 2. Excellent – SSMP revision reviews quarterly. Most recent review in May of 2015.

Recommendation #1: Acceptable

Recommendation #2: Excellent

Signature of Responsible Person: (sign when complete)

Date:



1/5/16

Goal: Closed Circuit Television (CCTV) Inspections

Responsible Person (RP):
CCTV Crew Leader

Description of Performance Indicator(s) (PIs):

CCTV inspections are conducted using a standardized protocol to supply sufficient data for use in capital improvement project planning. The PIs listed below quantify efforts to complete CCTV work according to system-wide inspection frequency goals, and to complete the work both efficiently and with high quality.

PIs and Data Collection Methods:

1. *The total footage of the collection system inspected per year with CCTV.*

Data Collection Method: Determine year-to-date CCTV inspection footage production from central crystal report, and project to year-end production.

2. *The total number of pipe segments inspected with CCTV per year.*

Data Collection Method: Determine year-to-date CCTV inspection pipe production from central crystal report, and project to year-end production.

3. *The average footage inspected per 16 hours of work (one full day for a crew of 2).*

Data Collection Method: Determine year-to-date CCTV effort hours expended from central crystal report, and divide by 16 to determine the number of equivalent 16-hour blocks worked. Divide the year-to-date footage inspected (also from central crystal report) by the number of 16 hour blocks worked to determine average daily crew production.

4. *The percentage of CCTV surveys that pass quality control standards (not more than one defect omitted per 100 feet of pipe inspected) by Utilities Engineering during review using the CACIP Module.*

Data Collection Method: Determine total number of CCTV inspections completed in the year-to-date with a “pass” or “fail” in the QA/QC field from the central crystal report. Calculate the percent passing as those inspections with a “pass” divided by the total number with either a “pass” or “fail” assigned.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Feet inspected with CCTV / year	< 100,000	100,000-170,000	170,000-200,000	> 200,000
2	Pipe segments inspected / year	< 400	400-600	600-800	> 800
3	Footage inspected / 16 work hours	<1500	1500-1750	1750-2000	> 2000
4	% CCTV Surveys with 5 or 4 structural grading	> 90%	90%	95%	98%

Periodic Performance Tracking						
Date	Measured Value				Performance Assessment Comments	
FY 14/15	Goal	1	2	3	4	
	Value	250,359	1,443	1,615	N/A	
Annual Performance Assessment / Recommendations for Updates						
<p>FY 14/15 Ratings:</p> <ol style="list-style-type: none"> 1. Excellent 2. Excellent 3. Acceptable <p>Recommendation #1: None.</p> <p>Recommendation #2: None.</p> <p>Recommendation #3: None.</p> <p>Recommendation #4. Remove PI and replace with a new PI that evaluates the number of level 4/5 pipe conditions.</p>						

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal:**Computerized Maintenance Management System (CMMS) & Graphical Information System (GIS)****Responsible Person (RP):**

GIS Analyst

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts required to maintain a robust population of attribute data within the City GIS that can be used to supplement the City's CA&CIP Module and hydraulic modeling efforts. Additionally, the City's effort to consistently close-out work orders is quantified, to ensure that scheduled work is completed in a timely manner.

PIs and Data Collection Methods:

1. *Percentage population of key attribute data for sewer collection system assets within GIS geodatabase for gravity sewer mains.*

Data Collection Method: Determine the % of values for the following fields in the GIS geodatabase SGravityMain table from the central crystal report: InstallDate, Material, WidthTop, UpstreamInvert, DownstreamInvert, Slope, DesignFlow, Condition, ConditionDate

2. *Percentage population of key attribute data for sewer collection system assets within GIS geodatabase for manholes.*

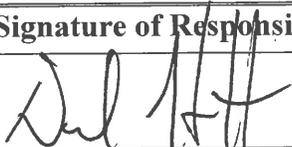
Data Collection Method: Determine the % of values for the following fields in the GIS geodatabase SManhole table from the central crystal report: InstallDate, Condition, ConditionDate, Elevation, BarrelDiameter, BarrelMaterial, Depth

3. *Percentage of year-to-date CityWorks work orders that are closed*

Data Collection Method: Determine the % of year-to-date CityWorks work orders that have been closed out from the central crystal report.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% population of key GIS attribute fields for gravity sewer mains	< 80%	80-90%	90-95%	95-100%
2	% population of key GIS attribute fields for sewer manholes	< 80%	80-90%	90-95%	95-100%
3	Year-to-date % of CityWorks work orders that have been closed-out	< 80%	80-90%	90-95%	95-100%

Periodic Performance Tracking					
Date	Measured Value			Performance Assessment Comments	
1 st Qtr	Goal	1	2	3	1&2. The attribute data has fields that O&M crew is not able to populate. 3. 428 of 439 closed/completed or 97%
	Value	71%	46%	93%	
2 nd Qtr	Goal	1	2	3	1&2. The attribute data has fields that O&M crew is not able to populate. 3. 347 of 384 closed/completed or 90%
	Value	69%	47%	90%	
3 rd Qtr	Goal	1	2	3	1&2. The attribute data has fields that O&M crew is not able to populate. 3. 465 of 467 closed/completed or 99%
	Value	69%	47%	99%	
4 th Qtr	Goal	1	2	3	1&2. The attribute data has fields that O&M crew is not able to populate. 3. 446 of 476 closed/completed or 94%
	Value	76%	49%	94%	
Annual Performance Assessment / Recommendations for Updates					
<p>FY 14/15 Ratings</p> <ol style="list-style-type: none"> Below Goal – Key attributes are missing from GIS Below Goal – Key attributes are missing from GIS Good/Excellent – 1,258 out of 1,327 closed or 95% for FY 14/15 <p>Recommendation #1:</p> <p>Recommendation #2:</p> <p>Recommendation #3:</p>					

Signature of Responsible Person: (sign when complete)	Date:
	1-5-16

Goal:**Maintaining Codes and Ordinances****Responsible Person (RP):**

Principal Utilities Civil Engineer

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to keep the City Codes and Ordinances current with known or upcoming changes in regulatory issues. This effort involves keeping a list of recommended updates to the codes and ordinances, which is reviewed by all parties with responsibility over the collection system and updated on a consistent basis.

PIs and Data Collection Methods:

1. *The frequency with which the list of required/requested updates to the City Code and Ordinances is maintained and discussed with O&M, Engineering, Environmental Compliance, and Management with regard to sewer-specific issues.*

Data Collection Method: Keep track manually. Current list of updates, and meeting notes from past meetings should be available.

2. *The frequency with which the Municipal Code is revised to incorporate the list of required/requested sewer-specific updates.*

Data Collection Method: Keep track manually. A file of completed updates and/or new ordinances specific to the sewer collection system should be kept.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Time since last meeting to discuss list of Ordinance/Code updates based on sewer-specific issues	> 5 Years	2-5 years	1-2 years	< 1 year
2	Time since last actual update to Ordinances/Codes based on sewer-specific issues	> 10 Years	5-10 years	2-5 years	< 2 years

Periodic Performance Tracking

Date	Measured Value		Performance Assessment Comments	
FY 14/15	Goal	1	2	
	Value	3.5 years	2.5 years	

Annual Performance Assessment / Recommendations for Updates

FY 14/15 Ratings

- 1. Acceptable
- 2. Good

Recommendation #1:

Recommendation #2:

Signature of Responsible Person: (sign when complete)

Date:



1/5/16

Goal:**Communication Program****Responsible Person (RP):**

Management Analyst

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to communicate with the public on a regular basis concerning the development and status of the City SSMP.

PIs and Data Collection Methods:

1. *Based on the current SSMP phase as described in the Communication Plan (Development, Implementation, Performance phases) in SSMP section xi, the percentage of communication activities completed that have been scheduled per the Communication Plan Table to-date.*

Data Collection Method: Keep track manually. RP should develop a file for documenting communication activities and completed dates.

2. *Total number of year-to-date public comment email responses.*

Data Collection Method: The City's public comment email link should be set up to deliver emails directly to the RP. The RP should keep a separate folder specifically for filing SSMP public comment emails and responses. There is no goal set for this PI. The RP only needs to document the total number of responses.

3. *The percentage of public comment emails received that were responded to.*

Data Collection Method: RP will use Microsoft Outlook to determine the number of year-to-date comment emails received, and determine the number of year-to-date responses and determine the response percentage.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% Communication Activities Completed	< 70%	70-80%	80-90%	90-100%
2	# of Public Comment Email Responses	N/A	N/A	N/A	N/A
3	% Public Comment Emails Responded To	< 80%	80-90%	90-95%	95-100%

Periodic Performance Tracking					
Date	Measured Value			Performance Assessment Comments	
FY 14/15	Goal	1	2	3	1. Completed in 2014 2. Total of 7 sewer specific emails were received by pubworks@cityofwoodland.org 3. All 7 were responded to
	Value	100%	N/A	100%	

Annual Performance Assessment / Recommendations for Updates

FY 14/15

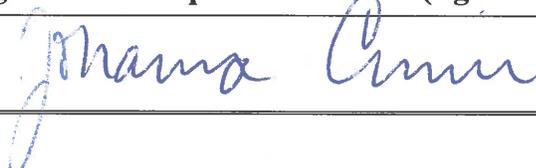
1. Excellent – Communication Activities completed in 2014.

3. Excellent – 7 out of 7 emails were responded to in an appropriate amount of time.

Recommendation #1: None.

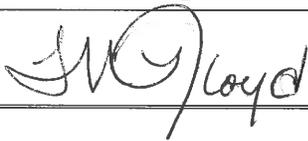
Recommendation #2: None.

Recommendation #3: None.

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal:		Employee Recognition			
Responsible Person (RP): Wastewater System Administrator					
Description of Performance Indicator(s) (PIs): The PIs listed below quantify the efforts to publicly recognize employees for exceptional work and provide a rewards system (gift certificates, cash, etc.) as part of the program.					
PIs and Data Collection Methods:					
1. <i>The frequency with which awards are distributed to O&M staff</i> Data Collection Method: Keep Track Manually					
2. <i>The frequency with which awards are distributed to Engineering staff.</i> Data Collection Method: Keep Track Manually					
3. <i>The frequency with which awards are distributed to Management staff.</i> Data Collection Method: Keep Track Manually					
	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Time since last awards distribution: Operation & Maintenance staff	< 6 months	6 months	1 Quarter	1 month
2	Time since last awards distribution: Engineering Staff	< 6 months	6 months	1 Quarter	1 month
3	Time since last awards distribution: Management staff	< 6 months	6 months	1 Quarter	1 month

Periodic Performance Tracking					
Date		Measured Value			Performance Assessment Comments
1 st Qtr	Goal	1	2	3	
	Value	1	0	0	
2 nd Qtr	Goal	1	2	3	
	Value	0	0	0	
3 rd Qtr	Goal	1	2	3	
	Value	4	0	0	
4 th Qtr	Goal	1	2	3	
	Value	3	0	0	
Annual Performance Assessment / Recommendations for Updates					
		<p>FY 14/15 Ratings:</p> <ol style="list-style-type: none"> 1. Good – Total of 8 letters of acknowledgement received by O&M Staff 2. Below Goal – No awards distributed to Engineering Staff 3. Below Goal – No awards distributed to Management Staff <p>Recommendation #1: None.</p> <p>Recommendation #2: Find ways to award Engineering Staff.</p> <p>Recommendation #3: Find ways to award Management Staff.</p>			

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal: Fats, Oils, and Grease (FOG) Control Program

Responsible Person (RP):
Environmental Compliance Manager

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to operate an effective and efficient FOG control program.

PIs and Data Collection Methods:

1. *The percent reduction in sanitary sewer overflows (SSOs) and blockages requiring flushing attributed to FOG blockages from the previous year.*
Data Collection Method: For the first year of tracking, simply report number of SSOs and blockages caused by FOG from the central crystal report. Report SSOs and blockages from both sewer mains and sewer laterals. After data is available from the first year of tracking, determine the year-to-date FOG-related SSOs and blockages from the central crystal report, project the number of events out to the total year, and compare to the previous year's events to determine % reduction.

2. *The frequency of Pollution Prevention Program (PPP) permit holder inspections.*
Data Collection Method: Divide the total number of PPP permit holders in the permit excel database by the number of inspection forms collected year-to-date, and project an equivalent inspection frequency in years.
 [Example: If there are 1,000 permit holders and 50 inspections are completed in the first 6 months of the year, the inspection frequency is: 1000 permits / 50 inspections / (12 mo / 6mo) = 10 years]
 [Note: when PPP program managed through CityWorks, a query can be set up to quantify inspections completed based on work-order records rather than counting inspection forms.]

3. *The number of public education outreach events conducted per year.*
Data Collection Method: Keep track manually. Project the year-to-date activity number out to the total year. The RP should keep documentation on all FOG Control public outreach events and activities in a file which can be reviewed to determine what activities have been conducted.

4. *Time since last joint Environmental Compliance and O&M meeting to review FOG-related issues in the collection system.*
Data Collection Method: Keep track manually. RP should keep file of meeting notes and action items from meetings.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% reduction of FOG-related SSOs compared to previous year	< 0%	0-5%	5-10%	10-20%
2	Frequency of PPP permits inspections	> Annually	6-12 months	3-6 months	< Quarterly
3	Annual # of FOG control public education events	< 2	2-3	4-6	> 6
4	Time since last coordination meeting with Environmental Compliance and O&M staff	> 6 months	3-6 months	2-3 months	< 2 months

Periodic Performance Tracking						
Date	Measured Value					Performance Assessment Comments
1 st Qtr	Goal	1	2	3	4	1. 1 Incident this FY, 1 incident last FY. 2. Actual inspection rates for this quarter: FSBs - 100%, ARBs - 100%
	Value	0	3-6 mo	105	1	
2 nd Qtr	Goal	1	2	3	4	1. No Incidents this FY, 3 incidents last FY. 2. No staff to conduct inspection this quarter: FSBs - 0%, ARBs - 0%
	Value	100	3-6 mo	50	1	
3 rd Qtr	Goal	1	2	3	4	1. 1 Incident this FY, No incidents last FY. 2. Program was short-staffed this quarter. FSBs - 100%, ARB - 100%.
	Value	0	3-6 mo	30	1	
4 th Qtr	Goal	1	2	3	4	1. No Incidents this FY, No incidents last FY. 2. Actual inspection rates for this quarter: FSBs - 100%, ARBs - 100%
	Value	0	3-6 mo	100	1	

Annual Performance Assessment / Recommendations for Updates

FY 14/15 – Ratings

1. Excellent – 2 incidents this year, 4 incidents last year. 50% reduction.
2. Good – 3-6 months. Inspections are done every quarter with an exception of the 3rd quarter this FY due to no Pretreatment Inspector.
3. Excellent – Total of 285 outreach events conducted, generally information handed out at site visits.
4. Acceptable – Met four times this FY, within 3-4 months.

Pretreatment devices for Food Service Businesses (FSBs) and Automotive Related Businesses (ARBs) permitted under the City's Pollution Prevention Program are inspected quarterly. Our goal is > 50% inspection rate for each category.

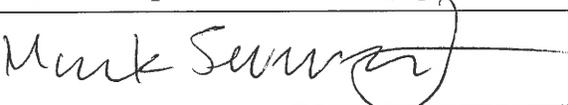
Environmental Compliance and O&M staffs meet Quarterly to discuss SSOs and related issues.

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: None.

Recommendation #4: None.

Signature of Responsible Person: (sign after annual review)	Date:
	1/11/2016

Goal:**High Velocity Vacuum Cleaning (HVVC)****Responsible Person (RP):**

HVVC Crew Leader

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the effort to periodically clean hot spot pipes and support CCTV inspection by pre-cleaning pipes.

PIs and Data Collection Methods:

1. *The total footage of the collection system cleaned per year with HVVC.*
Data Collection Method: Determine year-to-date HVVC footage production from central crystal report, and project to year-end production.
2. *The total number of pipe segments cleaned with HVVC per year.*
Data Collection Method: Determine year-to-date HVVC pipe cleaning production from central crystal report, and project to year-end production.
3. *The average footage cleaned per 16 hours of work (one full day for a crew of 2).*
Data Collection Method: Determine year-to-date HVVC effort hours expended from central crystal report, and divide by 16 to determine the number of equivalent 16-hour blocks worked. Divide the year-to-date footage cleaned (also from central crystal report) by the number of 16 hour blocks worked to determine average daily crew production.
4. *The percentage of CCTV inspections that were conducted where pre-cleaning was completed.*
Data Collection Method: Determine the number of year-to-date CCTV inspections that have been pre-cleaned from the central crystal report, and compare to the total number of year-to-date CCTV inspections completed (also from central crystal report).

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Feet cleaned / year	< 210,000	210,000-240,000	240,000-300,000	> 300,000
2	Pipe segments cleaned / year	< 700	700-900	900-1000	> 1000
3	Footage cleaned / 16 work hours	<1800	1800-2300	2300-2500	> 2500
4	% Pipe segments pre-cleaned prior to CCTV inspection	< 70%	70-80%	80-90%	> 90%

Periodic Performance Tracking

Date	Measured Value				Performance Assessment Comments	
FY 14-15	Goal	1	2	3	4	1,2,3 numerically better than last year's stats.
	Value	389,822	2,461	2,439	52%	

Annual Performance Assessment / Recommendations for Updates

FY 14-15 Ratings:

1. **Excellent** – 389,822 ft cleaned per year with HVVC.
2. **Excellent** – 2,461 segments cleaned with HVVC per year.
3. **Good** – 2,439 feet cleaned per unit.
4. **Below Goal** – 52% of segments pre-cleaned prior to CCTV. Only counted segments with 'SGM#' and if there was jetting/heavy cleaning done on the Crystal Report.

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: None.

Recommendation #4: CCTV crew needs to be sure to include the Clean Date and the ML_Name (SGM#).

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal:**System Mapping****Responsible Person (RP):**

GIS Analyst

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to provide up-to-date maps of assets in the collection systems and other applicable facilities (i.e., stormwater facilities, waterways, etc.). This effort involves completing map change requests in a timely fashion. Map change requests come from three sources; namely, 1) variations observed in the field, 2) changes from rehabilitation or replacement, and 3) additional assets from new development.

PIs and Data Collection Methods:

1. *The average time to update GIS maps based on redlines received from O&M staff in the field through Redline Process.*

Data Collection Method: Determine the average completion time for field staff redline map updates completed in the year-to-date period from the central crystal report.

2. *Time since the last feature class export for redline changes from the GIS mapping system was completed for updating of the CAD mapping system due to redline markups made in the field.*

Data Collection Method: Keep track manually.

3. *The average time to update CAD/GIS maps based on as-builts received from rehabilitation or replacement projects.*

Data Collection Method: Keep track manually from map change request forms (MCRs) filed within the year-to-date.

4. *The average time to update CAD/GIS maps based on as-builts from new development.*

Data Collection Method: Keep track manually from map change request forms (MCRs) filed within the year-to-date.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Average time for redline updates	> 2 months	1-2 months	1 month – 2 weeks	< 2 weeks
2	Time since last GIS redline markup export and update of CAD maps for field changes completed	> 3 months	2-3 months	1-2 months	< 1 month
3	Average time for rehab & replacement updates	> 3 months	2-3 months	1-2 months	< 1 month
4	Average time for “new development” updates	> 6 months	3-6 months	2-3 months	< 2 months

Periodic Performance Tracking						
Date	Measured Value					Performance Assessment Comments
1 st Qtr	Goal	1	2	3	4	
	Value	7 days	-	-	-	
2 nd Qtr	Goal	1	2	3	4	
	Value	11 days	-	-	-	
3 rd Qtr	Goal	1	2	3	4	4. 1/6/15 Heritage Units 4C&7. 3-4 days to update, 1/27/15 Solara Ranch. 3-4 days
	Value	8 days	-	-	3.5 days	
4 th Qtr	Goal	1	2	3	4	3. 6/18/15 - Pioneer Widening. 2 days to update 4. 4/18/15 Heritage Park, 2 days to update. 5/19/15 Heritage Remainder Phase 1 & Phase 2 – 3 days.
	Value	3 days	-	2 days	2.5 days	

Annual Performance Assessment / Recommendations for Updates

FY 14/15 Ratings

1. Excellent – Year end average is 7 days.
2. Below Goal – Last Redline Updates to CADD was done in January 2014.
3. Excellent – Year end average is 2 days.
4. Excellent - Year end average is 3 days.

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: None.

Recommendation #4: None.

Signature of Responsible Person: (sign when complete)	Date:
	1.6.15

Goal: **Operation and Maintenance Budgeting**

Responsible Person (RP):
Management Analyst

Description of Performance Indicator(s) (PIs):
The PIs listed below quantify the efforts to sufficiently provide and utilize funds to effectively operate and maintain the collection system.

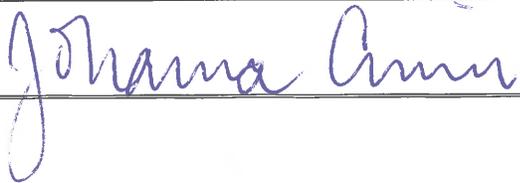
- PIs and Data Collection Methods:**
- The amount of funding provided for operating and maintaining the collection system per foot of main line pipe.*
Data Collection Method: Determine annual funds allocated for operation and maintenance of the sewage collection system, and divide by the total gravity main and pressure main pipe footage from the central crystal report. [Note: This PI only needs to be tracked on an annual basis, not a quarterly basis.]
 - The annual cost of operating and maintaining the collection system per foot of main line pipe.*
Data Collection Method: Determine actual year-to-date sewer system O&M costs from financial accounting system, and divide by the total gravity main and pressure main pipe footage from the central crystal report. Project the cost per foot to the year-end total cost per foot.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Funding provided for O&M budget	< \$1/ft/year	\$1-\$2/ft/year	\$2-\$3/ft/year	> \$3/ft/year
2	O&M operation cost	> budget	N/A	within budget	N/A

Periodic Performance Tracking				
Date	Measured Value			Performance Assessment Comments
FY 14/15	Goal	1	2	1. Good – \$ 2,388,982 / 980,236 ft of sewer pipe. 2. Good – \$2.03/ ft, within budget
	Value	\$2.44/ft	\$2.03/ft	

Annual Performance Assessment / Recommendations for Updates

Recommendation #1: none
Recommendation #2: none

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal: Preventative Maintenance Effectiveness

Responsible Person (RP):
Utilities Maintenance Supervisor

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the effectiveness of the preventative maintenance program in limiting time and expenses required to respond to emergency calls and failures of the sanitary sewer system.

PIs and Data Collection Methods:

1. *The percentage of work orders that are emergency.*
Data Collection Method: Determine from central crystal report. Emergency work orders include the following CityWorks priority categories: “priority 1” (emergency), “priority 2” (urgent), and “priority 9” (on-call).

2. *The percentage of accountable labor and material costs that are attributed to emergency work versus regular preventative maintenance work.*
Data Collection Method: Determine from central crystal report. Emergency work orders include the following CityWorks priority categories: “priority 1” (emergency), “priority 2” (urgent), and “priority 9” (on-call).

3. *The percentage of accountable labor and material costs that are attributed to emergency work on private laterals.*
Data Collection Method: Determine the total year-to-date work order costs (labor and materials) for all “priority 1” (emergency), “priority 2” (urgent), and “priority 9” (on-call) work orders associated with sewer laterals from the central crystal report. Determine the percentage of the total year-to-date work order costs (also from central crystal report) associated with the sewer collection system these “lateral emergency” work orders represent.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% of work orders that are emergencies	> 40%	30-40%	20-30%	< 20%
2	% of Labor and Material Costs that is Emergency	> 30%	20-30%	10-20%	0-10%
3	% of Labor and Material Costs that is Emergency Work on Private Laterals	> 20%	10-20%	5-10%	0-5%

Periodic Performance Tracking

Date	Measured Value				Performance Assessment Comments
	Goal	1	2	3	
FY 14/15	Value	14%	14%	0.9%	1. 259 out of 1759 WO
	Goal	1	2	3	

Annual Performance Assessment / Recommendations for Updates

FY 14/15

1. Excellent – 14%
2. Good – 14%
3. Excellent - 0.9%

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: None.

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal: Frequency of Preventative Maintenance (PM) Activities

Responsible Person (RP):
Utilities Maintenance Supervisor

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the effort to ensure that work orders are being created to accurately document preventative maintenance activities, and that preventative maintenance activities are being completed as planned by management.

PIs and Data Collection Methods:

1. Compare the number of closed-out work orders in the CMMS to the number of flushing and inspection work orders that should have been generated if all of the pipes on the weekly and quarterly cleaning routes were completed and determine the completion %.

Data Collection Method: Determine the total number of year-to-date closed-out preventative maintenance CCTV inspection and hydroflushing work orders from the central crystal report. Compare the number of closed-out work orders to the number of work orders that were expected based on the number of assets on the weekly and quarterly inspection and cleaning routes (excel files).

2. Frequency of thorough electrical and mechanical inspections of lift stations.

Data Collection Method: Keep track manually. Determine the number of thorough electrical/mechanical inspections conducted over the previous 2-year period for each lift station to determine the inspection frequency. Report the average inspection frequency for all lift stations. [Note: when lift station work orders are being managed through CityWorks, a query can be set up to determine the number of work orders completed over the last 2-year period and calculate the average inspection frequency.]

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% Completion of closed-out work orders vs. expected preventative maintenance work orders	< 75%	75-85%	85-95%	95-100%
2	Frequency of thorough lift station inspection / maintenance	> Biannually	Every 4-6 months	Every 3-4 months	< Quarterly

Periodic Performance Tracking				
Date	Measured Value			Performance Assessment Comments
FY 14/15	Goal	1	2	
	Value	72%	<Quarterly	1. 81 closed PM WOs vs. 112 expected closed WOs 2. WPCF staff does bi-weekly pump down for scum and grease control.

Annual Performance Assessment / Recommendations for Updates

FY 14/15 Ratings

1. Below Goal – 72% closed out work orders vs. expected PM work orders.
2. Excellent – Electrical visited sewer lift stations annually and WPCF maintains sewer lift stations bi-weekly with tracking on paper and MP2 (maintenance management system) for WPCF. Lift stations are inspected and visited daily.

Recommendation #1: The flushing program was being revised for a few months to evaluate the need for flushing in certain areas. The expected PM for flushing was on hold which accounts for less work orders than expected.

Recommendation #2: None.

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal:**Rehabilitation and Replacement (R/R) Funding****Responsible Person (RP):**

Management Analyst

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to provide sufficient funds for the R/R program to maintain or improve the condition of the collection system over time.

PIs and Data Collection Methods:

1. *The percentage of the total system value as defined by GASB34 reporting budgeted for the year for R/R projects.*

Data Collection Method: Manually compare total R/R funding provided to the value of the sewer collection system as determined by GASB34 reporting.

[Note: this PI may be tracked on an annual basis, and does not need to be tracked quarterly.]

2. *The annual funding budgeted for R/R projects compared to the estimated funding required according to estimates produced by the CA&CIP Module.*

Data Collection Method: Manually sum the total annual R/R funding provided vs. the funding required for the current year according to CIP bundles scheduled for the current year in the CA&CIP module.

[Note: this PI may be tracked on an annual basis, and does not need to be tracked quarterly.]

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Annual R/R funding provided as % of sewer system value	<1%	1.0%-1.5%	1.5%-2.0%	>2.0%
2	Annual funding provided for R/R program vs. CA&CIP cost projections	< needs from CA&CIP analysis	Consistent with needs from CA&CIP analysis	N/A	N/A

Periodic Performance Tracking			
Date	Measured Value		Performance Assessment Comments
FY 14/15	Goal	1	1. FY 15 Capital Projects Funded by Sewer + FY 15 220-086-7853-5262 budgeted amount divided by GASB 34 FY Sewer Evaluation. 2.
	Value	16.22%	

Annual Performance Assessment / Recommendations for Updates
FY 14/15 1. Excellent – FY 15 Capital Projects funded by Sewer is \$10,454,000 + FY 220-086-7853-5262 budgeted amount (\$376,762.23) divided by \$66,761,206 (GASB 34 FY 15 Sewer Eval) Recommendation #1: None. Recommendation #2: <i>Revise the PI!</i>

Signature of Responsible Person: (sign when complete)	Date:
<i>Johanna Crimi</i>	<i>1/5/16</i>

Goal: Rehabilitation and Replacement (R/R) Program

Responsible Person (RP):
Principal Utilities Civil Engineer

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to develop and implement an R/R program. This involves developing a CA&CIP Module for continually prioritizing line segments to be identified for rehabilitation or replacement. Once prioritized line segments are identified and bundled into Capital Improvement Projects (CIPs), appropriate rehabilitation or replacement methods will be analyzed, designed, and constructed.

PIs and Data Collection Methods:

1. *The percentage of assets in the CA&CIP Module that have been CCTV inspected that have also been evaluated.*
Data Collection Method: Determine the percentage of CCTV inspected assets that have been evaluated in the CACIP from the central crystal report.
2. *The percentage of assets in the CA&CIP Module that have risk ratings from 4-5 that have a capital improvement "action" assigned.*
Data Collection Method: Determine the percentage of assets in the CACIP module with risk ratings of 4 of 5 that have capital improvement actions assigned from the central crystal report.
3. *The percentage of CIP bundles assigned to the previous year that are in design or construction.*
Data Collection Method: Manually determine the % based on determination of which CIP bundles assigned to the previous year in the CACIP Module are actually in design or construction.
4. *The number of annual main line structural pipe failures or breaks per 100 miles of pipe.*
Data Collection Method: Determine the number of SSOs caused by structural failures in gravity mains, force mains, and manholes from the central crystal report. Also determine the number of repairs or replacements of gravity mains, force mains, and manholes due to emergency structural problems from the central crystal report. Project the total number of year-to-date structural issues to year-end totals. Finally, determine the ratio of structural failures per 100 miles of pipe using the total length of sewer system gravity and pressure main piping (also found in the central crystal report).

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% of CCTV inspected assets that have been evaluated in the CA&CIP Module	< 75%	75-85%	85-95%	95-100%
2	% of assets with risk ratings of 4 or 5 that have CIP "actions" assigned	< 75%	75-85%	85-95%	95-100%
3	% of scheduled CIPs designed or in construction	< 60%	60-70%	70-80%	> 80%
4	# of line failures per 100 miles of pipe	> 4	3-4	2-3	< 2

Periodic Performance Tracking						
Date	Measured Value				Performance Assessment Comments	
FY 14/15	Goal	1	2	3	4	
	Value	1%	0.7%		7	
Annual Performance Assessment / Recommendations for Updates						
FY 14/15 Ratings						
<ol style="list-style-type: none"> 1. Below Goal - Unrealistic goal with a database of 3,521 CCTV records 2. Below Goal - CIP actions assigned will be done during evaluation. 3. Good - 7 CIP repairs completed Design out of 10 CIP Bundles. 4. Below Goal - 13 gravity mains repair and replace, that were structural emergencies. Total repair/replace and SSO's for sewer mains and manholes that were structural emergencies is 13. 180 miles of sewer pipe. 7 structural failures and emergencies per 100 mi of pipe. (3 lateral R/R and 1 Private manhole SSO due to structural failures, but not counted in this PI). 						
Recommendation #1: Change Performance Indicator for evaluations on 4 or 5 lines.						
Recommendation #2: Assign CIP to 4/5 during evaluations.						
Recommendation #3: None.						
Recommendation #4: None.						

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal:**Replacement Parts****Responsible Person (RP):**

Equipment Services Clerk /
Utility Maintenance Worker /
WPCF Operator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to ensure that adequate reserves of replacement parts are available to respond to foreseeable emergency situations that may arise within the collection system.

PIs and Data Collection Methods:

1. *Frequency with which the inventory of necessary equipment and replacement parts for fleet vehicles is reviewed and updated, and new parts ordered if needed.*

Data Collection Method: Report generated through Fleet Software System semi-annually.

2. *Frequency with which the inventory of necessary equipment and replacement parts for pipeline and manhole repairs is reviewed and updated, and new parts ordered if needed.*

Data Collection Method: Keep track manually.

3. *Frequency with which the inventory of necessary equipment and replacement parts for lift stations is reviewed and updated, and new parts ordered if needed.*

Data Collection Method: Keep track manually.

		Below Goal	Acceptable	Good	Excellent
1	Frequency of Fleet equipment and replacement part inventory review	>Annually	Annually / Semi-annually	Semi-annually / Quarterly	> Quarterly
2	Frequency of pipeline / manhole equipment and replacement part inventory review	>Annually	Annually / Semi-annually	Semi-annually / Quarterly	> Quarterly
3	Frequency of lift station equipment and replacement part inventory review	>Annually	Annually / Semi-annually	Semi-annually / Quarterly	> Quarterly

Periodic Performance Tracking

Date	Measured Value			Performance Assessment Comments	
1 st Qtr	Goal	1	2	3	1. Performed routine repairs and maintenance. Parts inventory was maintained to assure maximum operation of crucial equipment. 2. Inventory on 7/1/14 3. Spare pump in stock for Gibson. Bypass pumping capabilities for both pump stations by tow portable pumps available at WPCF. A portable generator for the lift stations is also available at the WPCF for additional emergency capability. MP2 is the maintenance management software for the WPCF.
	Value	Qtrly	Qtrly	Annually	
2 nd Qtr	Goal	1	2	3	1,3. Same as Q1. 2. Inventory on 10/1/14
	Value	Qtrly	Qtrly	Annually	
3 rd Qtr	Goal	1	2	3	1,3. Same as Q1. 2. Inventory on 1/1/15
	Value	Qtrly	Qtrly	Annually	
4 th Qtr	Goal	1	2	3	1,3. Same as Q1. 2. Inventory on 4/1/15
	Value	Qtrly	Qtrly	Annually	

Annual Performance Assessment / Recommendations for Updates

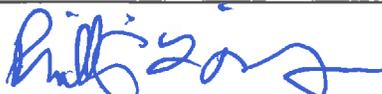
FY 14/15 Ratings

- Excellent** – Quarterly. Performed routine repairs and maintenance. Parts inventory was maintained to assure maximum operation of crucial equipment.
- Excellent** – Quarterly. Inventory done on the first of January, April, July and October.
- Acceptable** – Annually. Spare pump in stock for Gibson. Bypass pumping capabilities for both pump stations by tow portable pumps available at WPCF. A portable generator for the lift stations is also available at the WPCF for additional emergency capability.

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: None.

Signature of Responsible Person: (sign when complete)	Date:
	1-6-16

Goal: **Response to Service Requests**

Responsible Person (RP):
Administrative Clerk

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts taken to effectively respond to customer service calls.

PIs and Data Collection Methods:

1. *The average response time for an urgent call.*
Data Collection Method: Determine the average response time for “priority 1” (emergency), “priority 2” (urgent), and “priority 9” (on-call) service calls from the central crystal report.

2. *The average response time for a routine call.*
Data Collection Method: Determine the average response time for “priority 3” (routine) service calls from the central crystal report.

3. *Average number of service calls per 100 miles of pipe per year.*
Data Collection Method: Determine the total number of year-to-date service calls from the central crystal report, project to year-end totals, and determine number of calls per 100 miles of main line gravity and pressure pipe.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Response time for urgent calls	> 1 day	1 day	8 hours	1 hour
2	Response time for routine calls	> 1 week	1 week	3 days	1 day
3	Average # of service calls / 100 miles of pipe	> 200	150-200	100-150	< 100

Periodic Performance Tracking

Date	Measured Value				Performance Assessment Comments
FY 14/15	Goal	1	2	3	3. 262 service requests
	Value	3 hours	1 hour	142 calls/100 mi	

Annual Performance Assessment / Recommendations for Updates

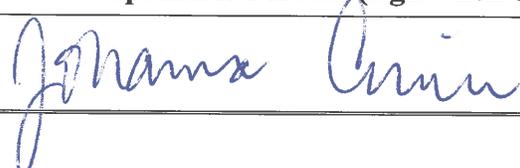
FY 14/15 Ratings

1. Excellent - Average response time for an urgent call is 3 hours.
2. Excellent - Average response time for a routine service call is 1 hour.
3. Good – 142 is the average # of service calls/100 mi pipe.

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: None.

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal:**Root Treatment Program (RTP)****Responsible Person (RP):**

Utilities Maintenance Worker III

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to mitigate reoccurring sewer lateral blockages due to root intrusion and to operate an effective Root Treatment Program.

PIs and Data Collection Methods:

1. *The total footage of sewer laterals treated for root intrusion over one year*
Data Collection Method: Determine the year-to-date footage of treated sewer laterals from central crystal report, and extrapolate to the end of the year.

2. *The average footage of sewer laterals treated per fiscal quarter.*
Data Collection Method: Determine the year-to-date total footage of sewer laterals treated from central crystal report and divide by four.

3. *The percent reduction in Sanitary Sewer Overflows (SSOs) and blockages requiring flushing attributed to root intrusion from previous year.*
Data Collection Method: For the first year of tracking, simply report the number of SSO's and blockages caused by root intrusion from the central crystal report. After data is available from the first year of tracking, determine the year-to-date number of SSOs and blockages attributed to root intrusion, project the number of events out to the total year, and then compare the previous year's events to determine the percent reduction.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Total footage of laterals treated for root intrusion over one year	> 500	< 500 - 1250	1250-2000	>2000
2	Average footage of sewer laterals treated per quarter	> 500	< 500 - 2000	2000-5000	> 5000
3	% reduction in SSOs attributed to root intrusion from the previous year	< 0	> 0 - 2.5%	> 2.5-5%	> 5%

Periodic Performance Tracking					
Date	Measured Value			Performance Assessment Comments	
1 st Qtr	Goal	1	2	3	3. 0% reduction. 2 SSOs this FY. 2 SSOs last FY.
	Value	52		0%	
2 nd Qtr	Goal	1	2	3	3. 0 % reduction. 8 SSOs this FY. 4 SSOs last FY.
	Value	5,565		0%	
3 rd Qtr	Goal	1	2	3	3. 56% reduction. 4 SSOs this FY. 9 SSOs last FY.
	Value	10,835		56%	
4 th Qtr	Goal	1	2	3	3. 0% reduction. 3 SSOs this FY. 2 SSOs last FY
	Value	265		0%	

Annual Performance Assessment / Recommendations for Updates

FY 14/15 Ratings

- 1. Excellent** – 16,717 ft of sewer laterals treated for root intrusion.
- 2. Good** – 16,717 ft/4. 4,179 ft of sewer laterals treated per fiscal year.
- 3. Below Goal** – 17 SSOs attributed to root intrusion this FY. 17 SSOs last FY.

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: See location of root caused SSOs and determine if lateral cleaning is required. Pay special attention if it's a repeat SSO.

Signature of Responsible Person: (sign after annual review)	Date:
	1/5/16

Goal: System Evaluation and Capacity Assurance Program (SECAP)

Responsible Person (RP):
Principal Utilities Civil Engineer

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to conduct an evaluation of the system and ensure sufficient capacity to convey expected wastewater flows.

PIs and Data Collection Methods:

1. *Ratio of peak wet weather flow to peak dry weather flow as monitored at the WWTP*
Data Collection Method: Collect daily flow data for the largest wet weather event at the WWTP headworks year-to-date and compare to the average daily dry weather (summer) flows as reported by WWTP operators to determine the ratio.

2. *Frequency of hydraulic model updates*
Data Collection Method: Keep track manually. Hydraulic model updates include adjustments to parcel use information, system geometry (i.e. pipe sizes, inverts, locations), updates to I/I rates, etc. RP should keep a log of hydraulic model update activities.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Ratio of peak WWF to peak DWF	> 2.0 : 1	1.7:1 – 2.0:1	1.5:1 – 1.7:1	1.3:1 – 1.5:1
2	Time since last hydraulic model update	> 24 months	18-24 months	12-18 months	< 1 year

Periodic Performance Tracking

Date	Measured Value			Performance Assessment Comments
FY 14/15	Goal	1	2	
	Value	Excellent	Good	

Annual Performance Assessment / Recommendations for Updates

FY 14/15 Ratings

1. Excellent – 12/18/14 Peak daily flow 5.664 mgd, Jun – September Average Dry Weather flow 3.821 mgd Ratio 1.48
2. Excellent – Hydraulic model updated and run on 6/14 from Waterworks Engineering

Recommendation #1:

Recommendation #2:

Signature of Responsible Person: (sign when complete)

Date:

A handwritten signature in black ink, appearing to be 'J. H.', written in a cursive style.

1/26/16

Goal:**Mitigation of Sanitary Sewer Overflows (SSOs)****Responsible Person (RP):**

Utilities Maintenance Supervisor

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts taken to mitigate any SSOs that occur.

PIs and Data Collection Methods:

1. *The percent of SSO volume capture in flat areas (i.e. slopes of 1-5%).*

Data Collection Method: Calculate manually from either completed City of Woodland SSO report forms filed year-to-date, or from information entered into the CIWQS database. Calculate % captured volume for all categories of SSOs (including from private laterals) for which the “description of terrain surrounding the point of blockage or spill cause” is described as flat. For each SSO event, determine the “% captured” as the volume of sewage recovered and returned to the sewer system divided by the total spill volume. Then, average the % captured for all spills in the year-to-date period.

2. *The percent of SSO volume capture in steep areas (i.e. slopes greater than 5%).*

Data Collection Method: Calculate manually from either completed City of Woodland SSO report forms filed year-to-date, or from information entered into the CIWQS database. Calculate % captured volume for all categories of SSOs (including from private laterals) for which the “description of terrain surrounding the point of blockage or spill cause” is described as steep. For each SSO event, determine the “% captured” as the volume of sewage recovered and returned to the sewer system divided by the total spill volume. Then, average the % captured for all spills in the year-to-date period.

3. *Average time from an SSO event to when the line is inspected with CCTV to investigate the cause.*

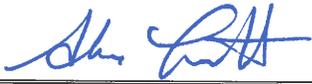
Data Collection Method: Review the central crystal report which lists all CCTV inspections that were completed year-to-date where the reason for the inspection is identified as a follow-up to an SSO. Manually compare this list to SSO report forms filed year-to-date. For each year-to-date SSO, determine if a corresponding follow-up CCTV inspection was completed. Manually calculate the time between when each SSO is reported to the date a follow-up CCTV inspection was calculated. If there are SSOs for which a CCTV inspection has not been conducted, calculate the time from the SSO occurrence to the current date. Average the CCTV inspection response time for all year-to-date SSOs.

4. *% of private lateral spills that are reported as category 3 spills in the CIWQS database.*

Data Collection Method: Determine the number of Category 3 (private lateral) work orders that have been completed year-to-date from the central crystal report. Compare manually to the number of category 3 spills that have been reported year-to-date through the City’s CIWQS account.

Performance Indicators					
Performance Indicators		Rating			
		Below Goal	Acceptable	Good	Excellent
1	% captured of SSO (flat, 1-5%)	<70%	70%-80%	90-90%	90-100%
2	% captured of SSO (steep, >5%)	<30%	30-50%	50-90%	90-100%
3	Average time to investigate SSO with CCTV	>1 week	5-7 days	3-5 days	< 3 days
4	% complete on-line reporting for category 3 spills	< 70%	70-80%	80-90%	90-100%

Periodic Performance Tracking						
Date	Goal	Measured Value				Performance Assessment Comments
FY 14/15	Goal	1	2	3	4	2. No slopes > 5% 3. 25 SSOs CCTV'd in 1 day. 10 SSOs were not shown to have CCTV done. 4. 15 private lateral spills
	Value	100%	N/A	1 day	N/A	
Annual Performance Assessment / Recommendations for Updates						
<p>FY 14/15 Ratings:</p> <ol style="list-style-type: none"> Excellent – 100% of SSO volume captured in flat areas. N/A – No steep areas. 1 day – 25 SSOs were CCTV'd in one day. 10 SSOs were not shown to have CCTV done. Total of 15 private lateral spills. None were reported. <p>Recommendation #1: None.</p> <p>Recommendation #2: None.</p> <p>Recommendation #3: Complete Crystal Works report in a constant format. When <i>CCTV'D</i> is answered with 'N', some put <i>CCTV RESPONSE TIME (DAYS)</i> as 'N/A' while others put '1'.</p> <p>Recommendation #3: None.</p>						

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal:**Prevention of Sanitary Sewer Overflows (SSOs)****Responsible Person (RP):**

Utilities Maintenance Supervisor

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts taken to prevent the occurrence of SSOs.

PIs and Data Collection Methods:

1. *The number of SSOs per 100 miles of gravity sewer mains per year.*

Data Collection Method: Determine the number of SSO events that occurred year-to-date that are attached to gravity mains, force mains, manholes, and lift stations from the central crystal report. Project the number of SSOs to year-end totals. Divide this number by the total footage of gravity mains and force mains in the City (also available on the central crystal report).

2. *The percent reduction in SSOs from the previous year.*

Data Collection Method: Determine the number of SSO events that occurred year-to-date that are attached to gravity mains, force mains, manholes, and lift stations from the central crystal report. Project the number of SSOs to year-end totals and compare to the number of SSOs that occurred last year to determine the % reduction.

3. *The number of repeat SSOs in a three year period.*

Data Collection Method: Review the central crystal report which lists all SSOs by asset type over the last three year period, sorted by Facility ID. Manually determine the number of repeat SSOs.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	# of SSOs / 100 miles / year	>5	5	3.5	2.3
2	% reduction of SSOs from previous year	< 0%	0-5%	5-10%	> 10%
3	# of repeat SSOs / 3 years	>0	-	-	0

Periodic Performance Tracking					
Date	Measured Value			Performance Assessment Comments	
FY 14/15	Goal	1	2	3	
	Value	0	100%	>0	

Annual Performance Assessment / Recommendations for Updates

FY 14/15

1. Excellent – 0 Main SSOs per 100 mi of pipe.
2. Excellent – 1 Main SSO occurrence last FY vs. 0 SSO occurrences this FY. 100% Reduction.
3. Below Goal – 4 repeat SSO’s in last 3 fiscal years.

Recommendation #1: None.

Recommendation #2: None.

Recommendation #3: Use new layer in GIS that displays SSOs to locate repeat SSOs. See if the corresponding SGM is a 5 Rating. Watch CCTV/Sewer SSL videos to determine if repairs need to be made.

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal:**Response to Sanitary Sewer Overflows (SSOs)****Responsible Person (RP):**

Utilities Maintenance Supervisor

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts taken to effectively respond to SSOs. *Response time* is defined as the time of first notification or discovery of a SSO to the arrival onsite by City staff.

Data Collection Methods

1. *The average response time during normal business hours (M-F 7am-4pm).*

Data Collection Method: Determine manually from year-to-date City SSO records or using the CIWQS database. Determine response time for each event by comparing “Date and time sanitary sewer system agency was notified of or discovered spill” to “Estimated Operator arrival date/time” and calculate Response Time. SSOs that occur during normal business hours are those that are initially reported between 7am and 4 pm Monday through Friday. Determine the average response time for year-to-date incidents.

2. *The average response time after hours (M-F 4pm-7am, weekends, holidays).*

Data Collection Method: Determine manually from year-to-date City SSO records or using the CIWQS database. Determine response time for each event by comparing “Date and time sanitary sewer system agency was notified of or discovered spill” to “Estimated Operator arrival date/time” and calculate Response Time. SSOs that occur during normal business hours are those that are initially reported between 4pm and 7am, or on weekends or holidays. Determine the average response time for year-to-date incidents.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	SSO response time during normal hours	>30 min	30 min	20 min	15 min
2	SSO response time after normal hours	<1 hr	1 hr	45 min	30 min

Periodic Performance Tracking				
Date	Measured Value		Performance Assessment Comments	
FY 14/15	Goal	1	2	1 & 2 reported in minutes.
	Value	15		

Annual Performance Assessment / Recommendations for Updates

FY 14/15 Ratings:

1. Excellent – Average response time is 15 minutes.
2. Excellent – Average response time is 28 minutes.

Recommendation #1: Be sure that the response time in the SSO report form and work order are the same. If the report form had the wrong times, make times of notification and arrival clear on comments section of the work order.

Recommendation #2: Same as Recommendation #1.

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

Goal:		Staffing			
Responsible Person (RP): Administrative Clerk					
Description of Performance Indicator(s) (PIs): The PIs listed below quantify the efforts to fill all funded positions within the Utility Maintenance, Environmental Operations, and Utilities Engineering Divisions of the City of Woodland to meet the necessary effort required to implement the City SSMP.					
PIs and Data Collection Methods: 1. <i>The percentage of vacant staff positions in the divisions listed above.</i> Data Collection Method: Keep track manually.					
	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	% of vacant positions	> 10%	10%	5%	All filled

Periodic Performance Tracking			
Date	Measured Value		Performance Assessment Comments
FY 14/15	Goal	1	1. One UMW vacant position.
	Value	9%	
Annual Performance Assessment / Recommendations for Updates			
FY 14/15 1. Acceptable – 9%. 1 UMW is vacant, 11 staff positions. Recommendation #1: Advertising for the UMI position.			

Signature of Responsible Person: (sign when complete)	Date:
<i>Johanna Curcio</i>	<i>1/5/16</i>

Goal:**Maintain Up-to-date Standards****Responsible Person (RP):**

Principal Utilities Civil Engineer

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the efforts to keep the City Standards current with regards to design and construction of the collection system. This effort involves keeping a list of recommended updates to the standards, which is reviewed by all parties with responsibility over the sewer collection system and updated on a consistent basis.

PIs and Data Collection Methods:

- The frequency with which the list of required/requested updates to the standards is maintained and discussed with O&M, Engineering, Environmental Compliance and Management.*

Data Collection Method: Keep track manually. Current list of updates, and meeting notes from past meetings should be available.

- The frequency with which the standards are revised to incorporate the list of required/requested updates.*

Data Collection Method: Keep track manually. A file of completed updates and/or new design standards specific to the sewer collection system should be kept.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Time since last meeting to discuss list of design standard updates based on sewer-specific issues	> 2 years	1-2 years	6 months – 1 year	< 6 months
2	Time since last actual update to design standards based on sewer-specific issues	> 5 years	2-5 years	1-2 years	< 1 year

Periodic Performance Tracking					
Date	Measured Value		Performance Assessment Comments		
1 st Qtr	Goal	1	2		
	Value	-	-		
2 nd Qtr	Goal	1	2		2. Last time Sewer standards were update, Addendum #1 11/2010, available on-line.
	Value	-	-		
3 rd Qtr	Goal	1	2	1. Standards update is discussed at weekly O&M and UE staff meeting and via email during May – June.	
	Value	-	-		
4 th Qtr	Goal	1	2		
	Value	-	-		

Annual Performance Assessment / Recommendations for Updates

FY 14/15 Ratings

- 1. Excellent – The design standards were reviewed by staff during summer of 2015.**
- 2. Acceptable – Standards were updated within 5 years.**

Recommendation #1: None.

Recommendation #2: None.

Signature of Responsible Person: (sign when complete)	Date:
	1/26/16

Goal:**Staff Training****Responsible Person (RP):**

Wastewater Systems Administrator

Description of Performance Indicator(s) (PIs):

The PIs listed below quantify the effort required to ensure that regular training takes place.

PIs and Data Collection Methods:

1. *The frequency with which tabletop / tailgate training meetings are conducted by the O&M staff.*
Data Collection Method: Keep track manually of tabletop / tailgate meetings completed year-to-date, and calculate the average frequency of the trainings during that same time period.

2. *The frequency with which field / equipment training exercises are conducted by the O&M staff.*
Data Collection Method: Keep track manually of field / equipment training exercise training completed year-to-date, and calculate the average frequency of the trainings during that same time period.

3. *The frequency with which field, equipment or tabletop / tailgate training is conducted that includes training on SSO response procedures outlined in the OERP.*
Data Collection Method: Keep track manually of all tabletop, tailgate, field, or equipment trainings that involve SSO response that have been completed year-to-date, and calculate the average frequency of trainings during that same time period.

	Performance Indicators	Rating			
		Below Goal	Acceptable	Good	Excellent
1	Frequency of tabletop / tailgate training	<Biweekly	Biweekly	Weekly	>Weekly
2	Frequency of field / equipment training	<Quarterly	Quarterly	Bimonthly	Monthly
3	Frequency of SSO response training	<Quarterly	Quarterly	Bimonthly	Monthly

Periodic Performance Tracking					
Date	Measured Value			Performance Assessment Comments	
1 st Qtr	Goal	1	2	3	1. 11 total. Average of 4 tabletop/tailgates per month. 2. 4 total. 3. 1 total.
	Value	11	3	1	
2 nd Qtr	Goal	1	2	3	1. 9 total. Average of 3 tabletop/tailgates per month. 2. 4 total. 3. 2 total.
	Value	9	4	2	
3 rd Qtr	Goal	1	2	3	1. 12 total. Average of 4 tabletop/tailgates per month. 2. 3 total. 3. 2 total.
	Value	12	3	2	
4 th Qtr	Goal	1	2	3	1. 15 total. Average of 4 tabletop/tailgates per month. 2. 4 total. 3. 3 total.
	Value	12	3	3	

Annual Performance Assessment / Recommendations for Updates

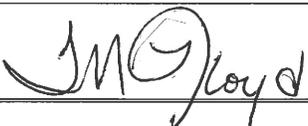
FY 14/15 Ratings:

- Good** – Weekly tailgate meetings. Approximately 4 a month based on work orders and the 2014, 2015 Utility Safety Meeting Schedule. No tailgate meetings were held in November.
- Good** – Monthly field/equipment training. Approximately once a month based on work orders and the 2014, 2015 Utility Safety Meeting Schedule. Performed training on Lateral Camera, Rodding Machine, and other operations.
- Good** – Approximately bi-monthly. O&M working to have monthly training for SSOs. 1/30/15 SSO training canceled due to SSO at the end of the day.

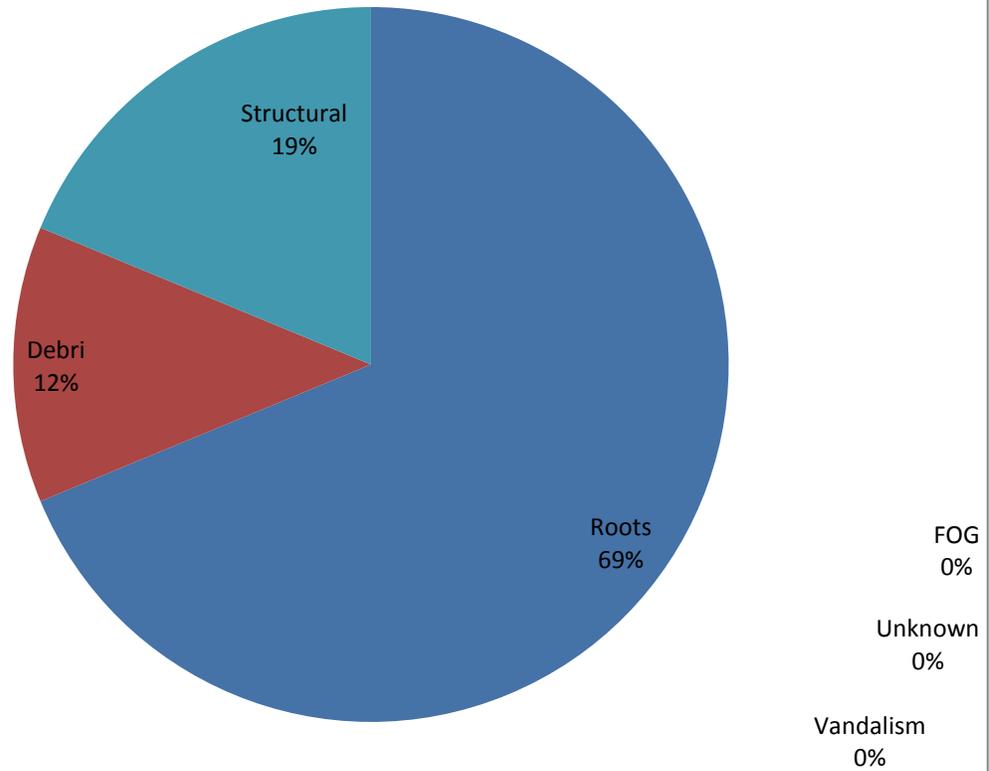
Recommendation #1: None.

Recommendation #2: Change WO descriptions to include equipment/field training.

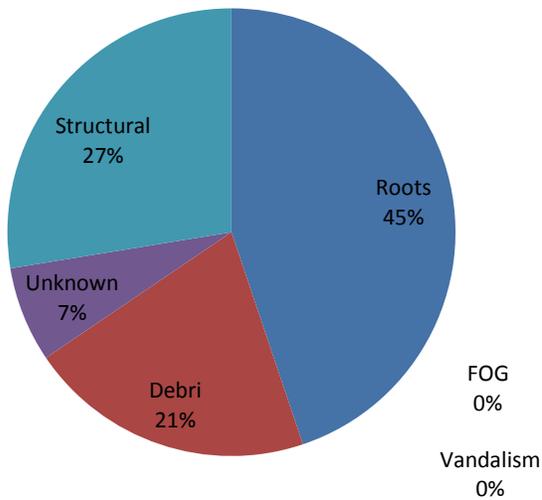
Recommendation #3: Change WO descriptions to include SSO response training.

Signature of Responsible Person: (sign when complete)	Date:
	1/5/16

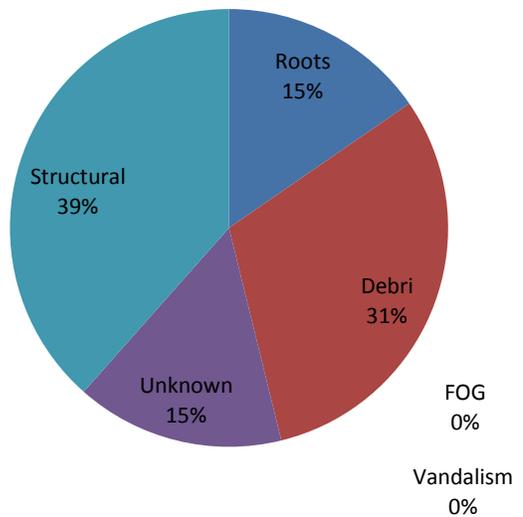
City's SSO Causes FY 15-16



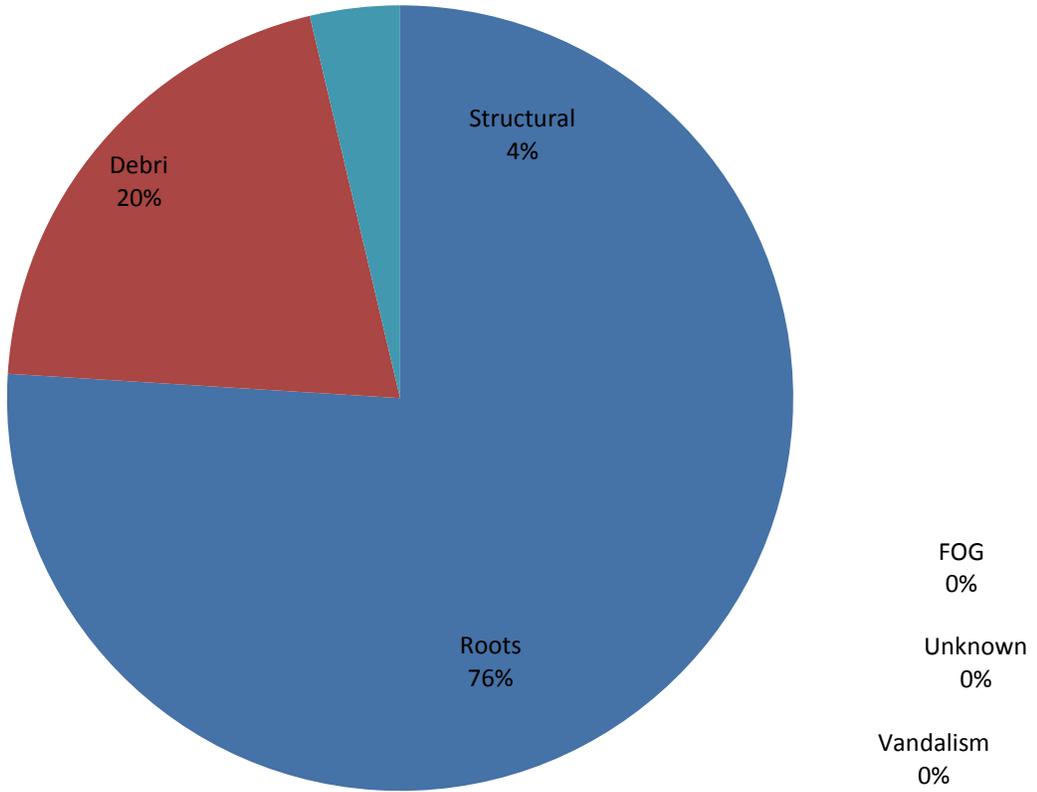
Total SSO Causes FY 15-16



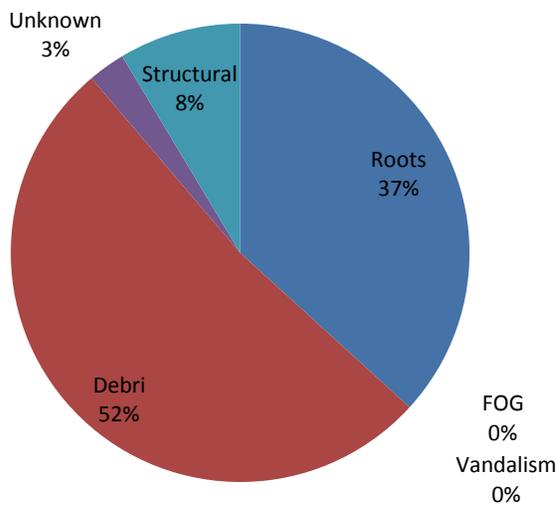
Private's SSO Causes FY 15-16



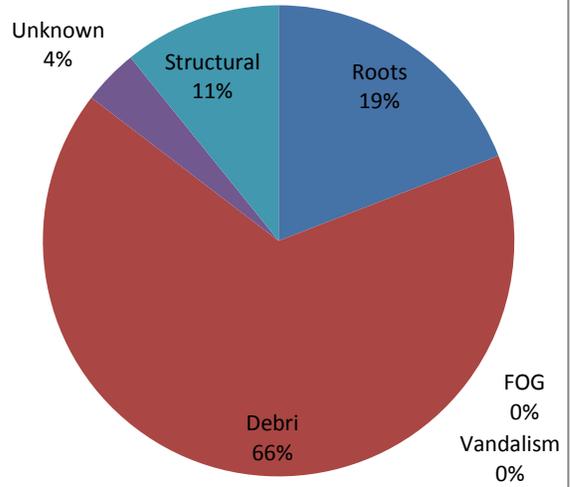
City's Spill Volume FY 15-16



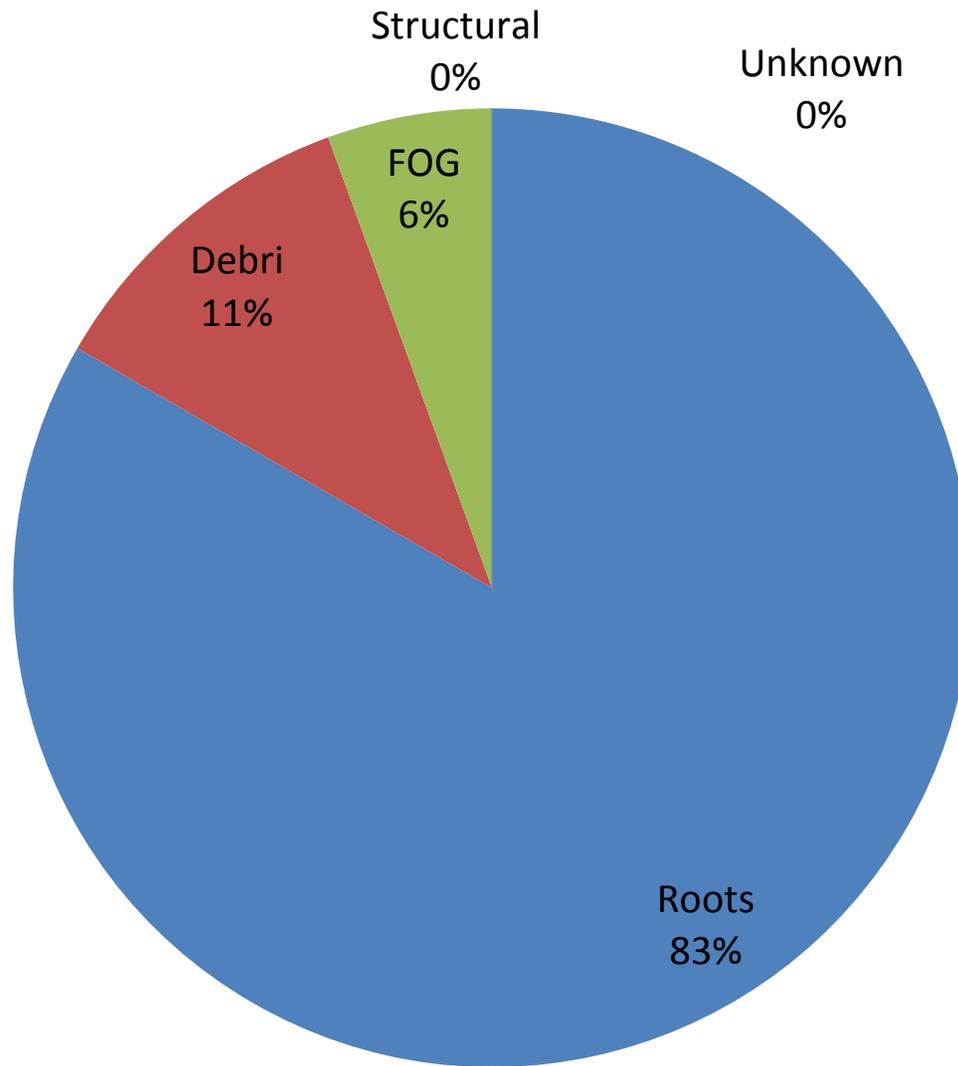
Total Spill Volume FY 15-16



Private's Spill Volume FY 15-16

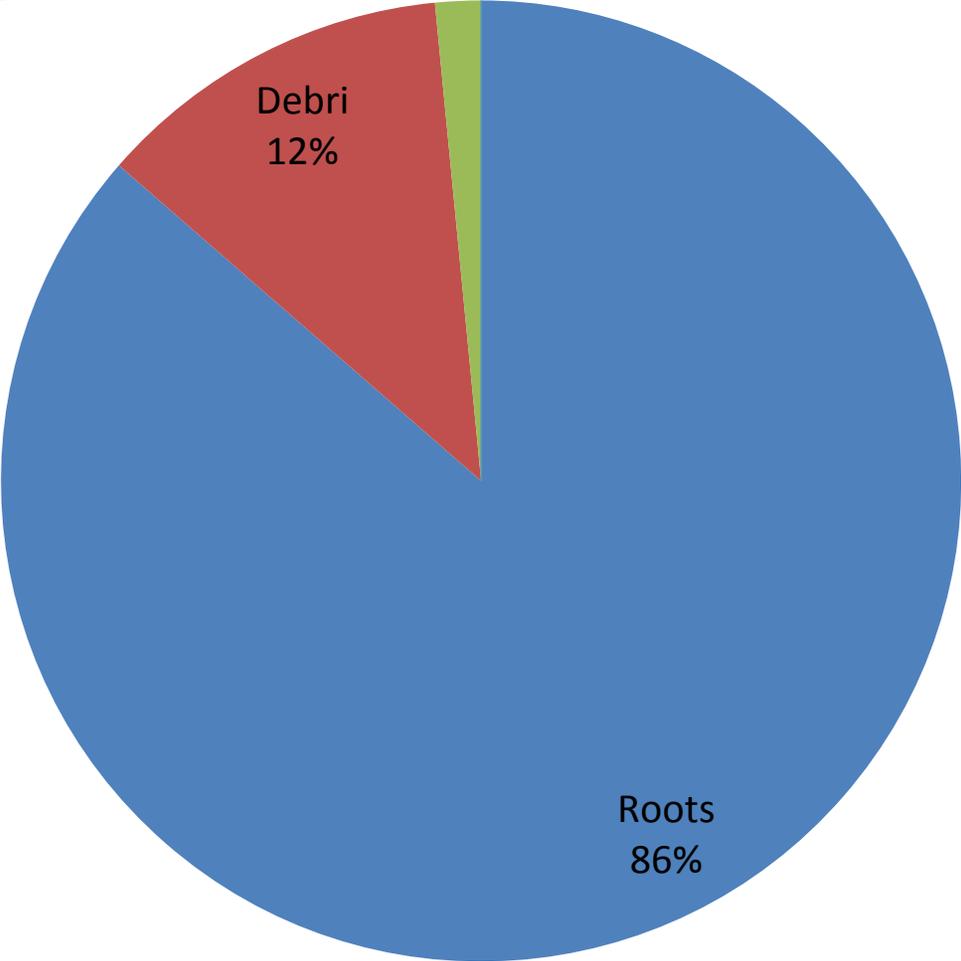


City's SSO Causes FY 14-15



City's Spill Volume FY 14-15

Structural 0% FOG 2% Unknown 0%



City of Woodland
Sewer System Management Plan
Change Log

Date	SSMP Element/Section	Description of Change/Revision Made	Change Authorized By
8/9/2016	SSMP Audit	Revised PI to provide for bi-annual presentations to council instead of annual presentations. Rating for giving bi-annual presentation changed to "Good" instead of "Acceptable."	Tim Busch
8/9/2016	CCTV	Revised PI#4 – changed "% of CCTV surveys passing quality control check" to "% of CCTV surveys with a 4 or a 5 structural grading." Adjusted range accordingly.	Tim Busch
8/9/2016	CCTV	Revised ratings of PI#3 to allow for the average of the past three years to qualify as "Good." Previous range: <1500 / 1500-1750 / 1750-2000 / >2000. 3 yr average: 1584 feet / 16 work hours.	Alex Truitt
8/9/2016	Employee Recognition	Removed awards distribution to Engineering and Management staff.	Sue Parker
8/9/2016	FOG Control Program	Changed PI#2 (Frequency of PPP Permit Inspections) to reflect % of inspections completed per quarter to match current data collection practices.	Mark Severeid
8/9/2016	FOG Control Program	Changes rating of PI#3 to account for meaning of "public education outreach events." Good determined as average of the past three years: 301.	Mark Severeid
8/9/2016	O&M Budgeting	Changed ratings of PI#2 to reflect % of budget used.	Johanna Currie
8/9/2016	R&R Funding	Changed ratings of PI#2: a budget consistent with needs is now the basis for a "Good" rating and not an "Acceptable" rating.	Johanna Currie
8/9/2016	Root Treatment	Change ratings of PI#1 and #2 to be consistent (amount per year is four times the amount per quarter) and to reflect the average of the past two years: 11,400 ft treated per year.	Alex Truitt
8/9/2016	SSO Mitigation	Since the city has no steep areas of over a 5% slope, PI#2 was removed.	Alex Truitt
8/9/2016	SSO Mitigation	PI#3 (renumbered as PI#2) revised to include only times when CCTV is conducted	Alex Truitt
8/9/2016	SSO Mitigation	PI#4 removed (% complete on-line reporting for category 3 spills) according to standard practice and replaced with "% of SSO Events followed with CCTV inspection"	Alex Truitt
8/9/2016	SSO Prevention	PI#3 changed to reflect new SSO spreadsheet capabilities to find all repeat SSOs.	Alex Truitt
8/9/2016	SSO Prevention	PI#4 added to reflect efforts in mitigating repeat SSOs	Alex Truitt
8/9/2016	R&R Program	Adjusted rating scale for PI#3. Expectations lowered by 10% across the board. (ie; >80% changed to >70%)	Tim Busch
8/9/2016	R&R Program	Revised PI#1 to limit evaluation of CCTV to those assets with a risk rating of 4 or 5.	Tim Busch
8/11/2016	Mapping	Revised PI#2 to account for changes in staffing, data availability, and available technology. Up-to-date maps require that R&R sites are GPS'd during construction.	Daniel Hewitt
8/11/2016	Mapping	Revised PI#3 to account for changes in staffing, data availability, and available technology. Up-to-date maps require new development sites to be GPS'd during construction.	Daniel Hewitt