U.S. DEPARTMENT OF ENERGY
OFFICE OF RIVER PROTECTION

TITLE: **INTEGRATED ASSESSMENT PROGRAM**	Number: ESQ-OA-IP-01 R0 Issued: 05-19-08 Page: 1 of 50
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1.0 PURPOSE

This implementing procedure (IP) establishes the responsibilities and requirements for implementing the U.S. Department of Energy (DOE), Office of River Protection (ORP) Integrated Assessment Program, which includes assessments of programs, assessments of their implementation, and performance of management walkthroughs. Integrated Safety Management System (ISMS) functions and principles provide the underlying foundation for this IP. This IP provides the assessment processes that enable ORP staff to (1) monitor the contractors' performance to ascertain program status in facilities; (2) effect continuous improvement in contractors' construction and operations; (3) determine the effectiveness of implementation of applicable DOE Orders, state and federal regulations, national codes and standards, contract requirements (including Authorization Basis requirements), and other requirements for ORP and its contractors as a whole; (4) conduct self-assessments of ORP activities; and (5) evaluate the effectiveness of ORP and contractor assurance systems. ORP assessments focus on performance and effectiveness rather than simple compliance with requirements. The ORP Integrated Assessment Program strives for high-quality reviews with the flexibility to meet both base requirements and emerging needs. The ORP Integrated Assessment Program fulfills an important part of the "Feedback and Continuous Improvement" function of ORP's ISMS.

The ORP Integrated Assessment Program is one of the tools for ORP to implement the DOE field element oversight function described in DOE O 226.1, *Implementation of Department of Energy Oversight Policy*. The ORP Integrated Assessment Program provides for the following:

a. Operational awareness of contractor work activities (including design and construction)

b. Review of performance against formally established environmental safety and health (ES&H) performance measures, other performance indicators, and contractor self-assessments

c. Periodic, value-added assessments to confirm contractors' safe performance of work and effectiveness of contractors' assessment programs

d. For-cause assessments, as necessary

e. Management and independent assessment of ORP performance

The ORP Integrated Assessment Program is designed to achieve maximum value from assessments, with explicitly required assessments forming the foundation of the program.

Specific results from these assessments are fed back to the assessed organizations to effect performance improvements, if needed. The next layer of the program consists of evaluations of ORP and contractor assurance systems, including self-assessment programs. The results of these evaluations are shared between line and program organizations and are used to effect change in performance, as needed, and to determine if additional assessments are needed for a particular facility or program. Performance indicators are used to monitor contractor performance. These performance indicators and performance data from other sources are used in targeting evaluations of contractor self-assessments and in planning ORP assessments of the contractors. Using this approach, the amount of assessment activity directed to a particular facility or program can be tailored so resources are focused where the most value can be obtained.

2.0 CANCELLATION

ORP M 220.1 R5, *ORP Integrated Assessment Program*, September 5, 2007.

3.0 APPLICABILITY

This IP applies to ORP managers, staff, and support services contractors who conduct assessments of contractor facility-specific activities, contractors' site-level programmatic activities, or ORP organization activities. Such personnel include technical specialists assigned to facilities and program organizations, as well as those personnel who provide technical support to these organizations. This IP also applies to ORP Direct Reports to the ORP Manager, as well as to Division Directors who conduct management walkthroughs and management assessments. In conjunction with ORP M 420.2, *Facility Representative Program,* this IP applies to Facility Representatives (FR) who perform broad-based assessments of facility operation and construction.

4.0 DEFINITIONS

4.1 ACRONYMS

AFI	assessment follow-up item
AM	Assistant Manager
AMD	Acquisition Management
APC	Assessment Program Committee
APM	Assessment Program Manager
CAP	corrective action plan
CARS	Consolidated Action Reporting System
CRAD	Criteria and Review Approach Document
DNFSB	Defense Nuclear Facilities Safety Board
DOE	U.S. Department of Energy
ECP	Employee Concerns Program
EM	Office of Environmental Management

ENS   Engineering and Nuclear Safety
ES&H   Environment, Safety, and Health
ESQ   Environmental Safety and Quality
FR   Facility Representative
FRAM   *Safety Management, Functions, Responsibilities, and Authorities Manual*
HQ   U.S. Department of Energy Headquarters
HTC   Hanford Training Catalog
IP   implementing procedure
ISMS   Integrated Safety Management System
LTA   less than adequate
NQA   Nuclear Quality Assurance
OADB   Operational Awareness Database
OPA   Project Administration
ORP   Office of River Protection
ORPS   Occurrence Reporting and Processing System
PAAA   *Price-Anderson Amendments Act*
QA   quality assurance
RL   DOE Richland Operations Office
SETO   Safety Education Through Observation
SME   subject matter expert
SSO   Safety System Oversight
TF   Tank Farms
TED   TF Engineering Division
TPD   TF Programs and Projects Division
TRA   technology readiness assessment
WCD   WTP Construction Oversight and Acceptance Division
WED   WTP Engineering Division
WPD   WTP Programs and Projects Division
WTP   Waste Treatment and Immobilization Plant

4.2 DEFINITION OF TERMS

<u>Annual (Organizational) Assessment Plan</u>. A plan accounting for assessment requirements and scheduling the assessment coverage (program and facility specific) for an AM organization for a calendar year.

<u>Assessment</u>. A systematic evaluation of contractor or ORP performance based on awareness of work activities, data analysis, and comparison to the results of the contractor's self-assessment; as well as reviewing, evaluating, inspecting, testing, checking, conducting surveillance, auditing, or otherwise determining and documenting whether items, processes, systems, or services meet specified requirements and are performed effectively.

<u>Assessment Follow-up Item (AFI)</u>. A matter requiring further review because of a potential finding or problem, because specific contractor or ORP action is pending, or because needed information to determine compliance with requirements and/or acceptable performance was not available at the time of the assessment.

Assessment Plan. A document that identifies the purpose, scope, criteria, team members, pertinent documents, and other information needed to define the bounds of the assessment.

Assessment Program Committee (APC). A committee consisting of representatives from the ORP line organizations, the Environmental Safety and Quality (ESQ) organization, and the ORP Manager's office. The committee reviews and approves the ORP annual Integrated Assessment Schedule, reviews the results of assessments and trend reports, ensures assessment results are shared with other ORP organizations as appropriate, and serves as final authority for resolving assessment team member dissenting opinions. The committee also functions to identify common areas of weaknesses with ORP and its contractors' organizations based on assessment results and recommends changes needed to address problem areas.

Assessment Program Manager (APM). The ORP employee responsible for the ORP-wide management of the assessment program.

Assurance Systems. Systems that encompass all aspects of the processes and activities designed to identify deficiencies and opportunities for improvement, report deficiencies to the responsible managers, complete corrective actions, and share in lessons learned effectively across all aspects of operation. (DOE O 226.1, 6.a)

Consolidated Action Reporting System (CARS). An ORP database used to track management commitments.

Concern. A determination by management of a programmatic breakdown or widespread problem supported by one or more findings.

Evaluation of Contractor Self-assessment. An assessment whereby the assessor compares the contractor's analysis of their own performance (i.e., as documented in contractor management and independent assessments) against objective evidence of facility/program performance. Knowledge may be gained via the assessor's own observations, input from other ORP employees, reviews independent of ORP, or other means. The results of the assessment include identification of proficiencies and deficiencies for (1) performance of the specific facility/program work and (2) contractor's analysis of their own performance (including correction of problems).

Exit Meeting. A formal meeting between the cognizant ORP assessment team leader and contractor management for summarizing assessment results and providing contractor management the opportunity to provide additional information to DOE regarding deficiencies and issues.

Facility. As used herein, facility refers to a discrete operation, location, or field activity.

Facility Manager. A contractor individual having direct responsibility for the day-to-day operation or construction of a facility or group of related facilities.

Finding. An individual item not meeting a committed requirement (e.g., contract, regulation, safety basis, Quality Assurance (QA) program, Authorization Basis document, procedure, and Standards/Requirements Identification Documents [S/RID]).

For-Cause Assessment. Review of contractor construction, operations activities, or programs conducted as a result of poor performance or trends indicating the potential for improvement requiring DOE follow-up to protect the government's interest. Specific reviews may also arise from implementing new requirements placed on the contractor or new, significantly revised contractor systems requiring validations. Referred to as "for-cause reviews" in DOE O 226.1.

Independent Assessment. Assessments measuring item and service quality, measuring the adequacy of work performance, and promoting improvement. Independent assessors are independent from line management. All assessments of contractor activities performed by or for ORP are independent assessments.

Integrated Assessment Schedule. The schedule of assessments issued by the APC, assembled from the annual assessment plans submitted by AM organizations.

Management Assessment. Assessments performed by Direct Reports to the ORP Manager as well as Division Directors to evaluate the Direct Reports' management processes and identify problems that hinder their own organizations from achieving their objectives.

Management Walkthrough. First-hand observations of a discrete operation or field activity by an ORP manager. (This responsibility cannot be delegated.) Management walkthroughs do not include attendance at meetings, presentations, or similar activities inside a facility.

Non-Cited Finding. A finding that is not willful, programmatic, or a repeat of a previous finding; has minor safety or cost impact; and is being tracked by the contractor's corrective action program may be classified as a non-cited finding and would not require a written response from the contractor.

Observation. The notation of a condition or practice that warrants the contractor's attention but is not directly linked to compliance with a requirement.

Operational Awareness Database (OADB). A database used for documenting management walkthrough surveillances, and other surveillances of contractor performance. Surveillance activities include summaries of meetings attended, management walkthrough results, and formal and informal document reviews.

Opportunity for Improvement. An area that meets only minimal standards or management expectations for performance but does not meet the definition of a finding or concern. This term is used primarily with ORP management and independent assessments and is not used when assessing the contractor.

Requirement. A legally binding obligation such as a statute, regulation, contractual commitment, or contract-required order.

Root Cause. The most basic cause(s) for a condition or event leading to a deficiency that, when corrected, would prevent the recurrence of the problem.

Site Programs. Refers to programs that protect the public, workers, environment, and national security interests or support essential mission activities. Site programs specifically include environment, safety, and health; safeguards and security; cyber security; emergency management; and business operations programs. (DOE O 226.1, 6.c)

Site Management Systems. Refers to required management systems that provide the framework for a set of related site programs. Site management systems specifically include Integrated Safety Management, Integrated Safeguards and Security Management, and QA programs. (DOE O 226.1, 6.d)

Standard. A formally expressed expectation for the performance of work (e.g., required regulations, Orders, directives, and industry consensus standards).

Stop Work Action. ORP personnel's notification to contractor personnel to cease a particular work activity due to an imminent safety hazard or where continuing an activity creates a potentially unrecoverable activity adverse to quality.

Subject Matter Expert (SME). An individual with demonstrated experience and documented knowledge of a program area whose responsibilities include monitoring and assessment of contractor performance within the program area for one or more specific facilities.

Surveillance. An evaluation of an ongoing program, functional area, or activity to verify that it complies with DOE standards and requirements, is conducted safely, and conforms to procedures and best practices. Surveillances are typically narrower in scope and use fewer team members compared with other types of assessments.

Technical Readiness Assessment (TRA). An independent assessment initiated by DOE Headquarters (HQ), Office of Environmental Management (EM) or a Federal Project Director to assess the readiness of a technology for implementation in the design of a facility. TRAs are conducted in accordance with the HQ EM publication, *Technology Readiness Assessment/ Technology Maturation Process Guide*.

Validation. Reviewing, inspecting, testing, checking, auditing, or otherwise establishing and documenting whether activities, processes, services, or documents conform to specified requirements.

5.0 RESPONSIBILITIES

The Assistant Manger (AM) for ESQ, is responsible for the ORP Integrated Assessment Program and appoints the Assessment Program Manager (APM). Responsibilities for conducting assessments are listed in MGT-PM-PL-002, *Safety Management Functions, Responsibilities, and Authorities Manual* (FRAM) (formerly ORP M 411.1-1). Assessments and surveillance activities are executed through the use of this IP.

6.0 ASSESSMENT PROGRAM

6.1 GENERAL

6.1.1 Oversight of Contractor Assessment Programs and Assurance Systems

Oversight of a contractor's assessment program and assurance systems is an integral part of the ORP Integrated Assessment Program and one of the means for determining if reactive assessments are needed. A contractor's assessment program and assurance systems encompass management assessments conducted by a facility or program management, assessments conducted by the contractor's independent assessment groups, continuous improvement processes, performance indicator and measurement processes, and other oversight activities. An element of ORP oversight is the review of contractor assessments and assurance system activities as they are conducted and as part of facility and programmatic assessments.

6.1.2 Allocation of Assessment Resources

Sufficient resources should be in place to meet the base requirements of the ORP Integrated Assessment Program. The base requirements for the program include conduct of required assessments, regular surveillance of contractor field activities, oversight of the contractor's assessment program, evaluation of facility and program related data, and establishment and monitoring of performance indicator data. Additionally, resources should be made available to conduct reactive assessments. When results from the base requirement assessments show good performance by the contractor, there is less need to conduct reactive assessments. However, when assessment results show problems developing, the assessment activity for the problem area should be increased.

ORP assessments should be coordinated with contractor site assurance system activities to promote efficient use of resources.

6.2 PROCEDURE

6.2.1 Training and Qualification

AMs responsible for an assessment may develop procedures to institute a process(es) to ensure personnel performing assessments possess suitable qualifications commensurate with the nature and type of assessment to be conducted, or AMs may apply the requirements directly from this IP. Attachment 9.1 provides a sample record for documenting qualification of assessment personnel that may be customized to specify qualification requirements for an organization.

The form, ORP-111, is located on HLAN Hanford Site Forms and may be used to document assessor training and qualification. Minimum qualification requirements are as follows:

Assessor:

- Participation in a minimum of one assessment as an observer or assistant to an assessor
- Successful completion of classroom training in assessment techniques

Lead Assessor:

- Successful completion of a training course for lead assessors or equivalent, documented training

- Successful completion of a written, oral, or practical examination focused on assessment methodology and, as appropriate, aspects of the assessor's technical discipline required for assessments

- Management evaluation that both oral and written communications skills are adequate for representing ORP while leading assessments

- Completion of at least three assessments as an assessor or assistant to an assessor

Nuclear Quality Assurance (NQA)-1 Lead Assessor:

For assessors working in the QA discipline, an AM assessment procedure is required to implement, using a graded approach, the NQA-1-2000, *Quality Assurance Requirements for Nuclear Facility Applications with Addenda*, mandatory certification requirements of Requirement 2, Section 303, "Lead Auditors," and the nonmandatory guidance of Appendix 2A-3, "Nonmandatory Guidance on the Education and Experience of Lead Auditors." As a minimum, these certification requirements must include:

- Participation in a minimum of five assessments as an assessor or assistant to an assessor

- On-the-job training, guidance, and counseling under the direct supervision of a lead assessor to address the planning, performance, reporting, and follow-up of assessments

- Successful completion of a written, oral, or practical examination focused on assessment methodology, as well as knowledge and understanding of NQA-1-2000 and the structure of NQA programs

- Ten education and experience points, based on the point schedule of NQA-1-2000 Appendix 2A-3

As a minimum, personnel performing surveillances must be qualified as assessors. AM organizations using site inspectors or acceptance inspectors must establish qualification procedures and requirements for them based on their training, skills, and experience.

These qualifications are valid for three years (one year for NQA-1-2000 lead assessors) and may then be extended by the AM indefinitely based on a determination that the assessor or lead assessor has maintained proficiency. AM procedures must specify a process for extending

qualifications, including requirements and documentation methods. As a minimum, AM procedures must require one or more of the following for extending a qualification:

- Additional assessment training
- Review of applicable assessment procedures, technical procedures, and requirements
- Participation in at least one assessment

A federal employee's individual development plan should provide any qualification record for required training not already in an individual's training record. A supervisor can exempt an individual from qualification record requirements based on an individual's documented qualifications or certifications, such as NQA-1 lead auditor, auditor, or surveillance certification from another organization. Qualified ORP FRs need no additional training to qualify under this program, except they must complete all NQA-1 lead auditor requirements to be certified as a QA lead assessor.

Occasionally, an AM or team lead may elect to use individuals who are knowledgeable in the area being assessed but not qualified according to this IP to perform assessments. In these cases, the individuals must be thoroughly briefed on the ORP assessment program and the contractor's requirements specified in the contractor's contract, procedures, QA program, and/or Authorization Basis documents. In addition, the individual must be teamed with qualified assessors while performing onsite assessments.

No specific qualification is required for persons performing management assessments.

6.2.2 Annual Assessment Plans and Integrated Assessment Schedule

ORP AMs ensure their organization annual assessment plans are developed and implemented for their respective organizations. As a minimum, annual organization assessment plans include required assessments as identified for the Tank Farms, Waste Treatment and Immobilization Plant, and 222-S Project as well as evaluations of contractor assessments. This includes planned surveillances other than those associated with day-to-day construction and operations oversight activities of the ORP FRs, site inspectors, and acceptance inspectors. Attachment 9.2 provides a list of required functional areas and applicable assessment requirements for the Tank Farms, Waste Treatment and Immobilization Plant, and 222-S Project. However, these lists do not form an assessment baseline, they only identify explicit assessment requirements specified in DOE directives.

ESQ will conduct a minimum of two internal independent assessments per year.

In developing the ORP Integrated Assessment Schedule, the Assessment Program Committee (APC) must apply the graded approach when scheduling assessments. Except when a regulatory, DOE Order, or other requirement defines the frequency for assessing a topical area, the APC should consider the following when scheduling assessments:

- Relative importance to safety, safeguards, and security
- Magnitude of any hazard or risk involved

- Life-cycle stage of a facility or activity
- Impact/consequences on the programmatic mission of a facility
- Unique characteristics of a facility or activity; nuclear safety classification or hazard category of the item or activity
- Relative importance of radiological and non-radiological hazards
- Complexity of products or services involved
- Performance history of a facility or activity
- Other relevant factors

As a minimum, topical areas are to be re-assessed every three to five years unless otherwise specified in a requirement.

Over the course of the year, for-cause assessments may also be conducted to address emerging issues and concerns. The need for a for-cause assessment may be identified via any data source (e.g., performance indicators, results from assessments, FR observations). Reactive and for-cause assessments are not included as part of the annual assessment plans but are reported and tracked the same as planned assessments. A reactive or for-cause assessment may count as a planned assessment if it is sufficiently similar to the planned assessment. Attachment 9.3 provides a list of items to be considered when determining program elements to be assessed. By September 15 of each year, the APM issues a call to the AMs to submit their annual organizational assessment plans, identifying assessment topics, fieldwork dates, and proposed lead assessors. By November 1 of each year, ORP AMs send copies of the annual assessment plans to the APM. AMs ensure that their annual assessment plans are distributed to the specified HQ element if distribution is required by a DOE Order. The APC then develops the ORP Integrated Assessment Schedule from the organizational assessment plans. ORP AMs ensure any subsequent changes to their organizational annual assessment plans are coordinated with all affected ORP organizations, and the changes are provided to the APM.

In developing the ORP Integrated Assessment Schedule, the APC must consider the requirements of DOE O 414.1C, *Quality Assurance,* for assessments of the ORP QA program, although annual assessments are not required. When planned assessments fulfill required assessments specified in Attachment 9.2, the ORP Integrated Assessment Schedule must identify the specific requirement for each assessment.

The ORP Integrated Assessment Schedule must address environment, safety, and health; safeguards and security; cyber security; and emergency management to comply with DOE requirements. The ORP Integrated Assessment Schedule must also show balance between reviews of documentation (e.g., plans procedures and records) and adequacy of implementation through observation of actual work activities at the facilities. Similarly, the ORP Integrated Assessment Schedule must provide balance between evaluations of systems (such as ISMS and integrated safeguards and security management system), programs (e.g., radiation protection), facilities, and implementation of individual elements of those systems (e.g., specific work activities).

The ORP Integrated Assessment Schedule need not include all surveillance and inspection activities associated with day-to-day construction and operations oversight activities of the ORP FRs, site inspectors, and acceptance inspectors. However, these oversight activities will be reported and issues tracked in a manner similar to those for planned assessments.

On a quarterly basis, AMs will report to the APC any trends indicated in Occurrence Reporting and Processing System (ORPS) reports, *Price-Anderson Amendments Act* (PAAA) Noncompliance Tracking System reports, assessment findings and concerns, the OADB, and other sources of performance information. The APC will use this information in developing or revising the ORP Integrated Assessment Schedule, in identification of for-cause assessments, and in identifying such actions as increasing specific surveillance activities or taking specific actions to improve contractor performance.

The APM:

a. Prepares the ORP Integrated Assessment Schedule by consolidating the annual organizational assessment plans.
b. Reviews the ORP Integrated Assessment Schedule to ensure requirements for frequency and scope are met and an effective and efficient plan is established.
c. Documents the results of the review.
d. Submits the ORP Integrated Assessment Schedule to the APC for approval.

The APC reviews and approves the ORP Integrated Assessment Schedule and any changes to the plan.

ORP AMs may make changes to their assessment plans within their respective organizations without APC approval to ensure resources are available and appropriately balanced (e.g., the assessment is delayed to obtain appropriate contractor support). AMs report changes to their assessment plans to the APM who maintains a log of changes. The APM provides the log to the APC during quarterly APC meetings for use in scheduling upcoming assessments.

Technology readiness assessments (TRA) are scheduled when identified by Federal Project Directors or HQ EM. TRAs establish the maturity of a technology and its readiness for insertion in the project design and execution schedule.

6.2.3 Assessment Program Committee

The APC follows the agenda of Attachment 9.8 to identify areas and topics requiring assessment attention and to revise the assessment plan. The APC evaluates assessment activity to ensure ORP crosscutting issues identified through assessments are addressed at the appropriate level. Completed ORP assessments are reviewed by the APC to determine if ORP is receiving maximum value for the expenditure of resources. The APC also ensures proper resources are allocated across ORP to successfully complete the ORP Integrated Assessment Schedule, or that modifications are made to the ORP Integrated Assessment Schedule to support better utilization of resources.

The ORP Manager designates a representative from the ORP Manager's Office to the APC.
The ORP AMs designate a primary member and an alternate member to serve on the APC and to represent the respective organizations.
The members of the APC select a chair and alternate chair by consensus and with the concurrence of the representative from the ORP Manager's office. Annually, the APC chair informs all ORP managers via memorandum of the identities of the APC members, including the identities of the chair and the alternate chair.

The APC:

a. Meets on a periodic basis (typically on a quarterly basis) and as needed. Meetings normally follow the agenda of Attachment 9.8.

b. Reviews the ORP Integrated Assessment Schedule and changes to the schedule.

c. Reviews performance of assessments and trend analyses against the ORP Integrated Assessment Schedule and makes recommendations to improve assessment performance as necessary.

d. Ensures a program is in place and functioning to share assessment results that may enhance assessments by other organizations.

e. Identifies and recommends changes needed in the assessment process.

f. Documents APC actions and decisions.

g. Publishes the ORP Integrated Assessment Schedule on the ORP website.

The APC chairman informs the ORP Manager of ORP-wide issues and issues on which the APC cannot reach agreement.

6.2.4 Independent Assessment Conduct

Independent assessments are performed by one assessor or a team of assessors. Assessors conduct fieldwork using detailed inspection/assessment procedures, FR instructions, or using specifically developed assessment plans with lines of inquiry, criteria and review approach documents (CRAD), or checklists. The assessment team leader plans the overall assessment, but specific assessment planning and performance activities should be discussed with the cognizant ORP AM or Division Director (or designee). TRAs are planned, performed, and reported following the program plan to the extent that it is consistent with the protocols of the HQ EM publication, *Technology Readiness Assessment/Technology Maturation Plan Process Guide*.

During planning and preparation, duties of the assessment team leader include the following:

a. Obtain input and assistance from other organizations, as appropriate.

b. Assemble an assessment team, as appointed by management, and ensure the team members are trained and qualified in accordance with Section 6.2.1.

c. Develop an individual assessment plan that includes the purpose, scope, criteria, team members, pertinent documents, and other information needed to define the bounds of the assessment. Review previous assessment results to incorporate into the plan a review for recurrence of previous assessment findings.

d. Identify the FR, facility manager, ORP Division Director, and/or contractor program manager (as appropriate) and the point of contact in the contractor or assessed ORP organization. For assessments of contractors, invite the FR to participate on the assessment team, if applicable.

e. Make informal arrangements with the FR and contractor or assessed ORP organization to confirm planned assessment dates and to ensure that proper personnel will be available.

f. Determine the requirements for entering necessary facilities (e.g., radiological, training, and security), and ensure all access requirements are met prior to the start of field work.

g. Obtain input from the FR and subject matter expert (SME) (if not the team leader) on previously observed weaknesses and areas of information or concern, as appropriate.

h. Determine probable length of time required for assessment field work.

i. Develop lines of inquiry, CRADs, or checklists from defined assessment criteria and additional sources, such as:

   1. Programmatic assessments and facility-specific assessments of program elements, when applicable

   2. Past deficiencies and corrective actions

   3. Results of other assessments, evaluations, or events (e.g., investigation reports, reportable occurrences, implementation of lessons learned items, etc.)

   4. Past and current management issues

   5. Additional considerations for support service organizations:

      (a) Identification of customers

      (b) Identification of customer requirements

      (c) Alignment of processes with key business drivers

      (d) Establishment of customer service standards.

j. Prior to initiation of field work, ensure the scope and schedule of the assessments are communicated to assessment team members, the FR, facility manager, Defense Nuclear Facilities Safety Board (DNFSB) representative, and others as appropriate. The appropriate method for communicating this information (e.g., meeting, writing, telephoning) is at the discretion of the assessment team leader.

Division Directors oversee assessments. Duties include the following:

a. Request support from other organizations, when appropriate.

b. Review and provide input to individual assessment plans in program-specific areas prior to performance of assessments.

c. Ensure proper coordination of assessment activities with other affected ORP divisions.

d. Review assessment results.

e. Determine if reactive assessments need to be conducted.

The assessment team leaders manage the conduct of the assessments. In performing assessments, assessment personnel do not speak for ORP or contractor management. Assessment team leaders must conduct themselves in a manner that does not permit the appearance of absolving the assessed organization from compliance with established programs or procedures.

The assessment team leaders ensure assessment personnel:

a. Do not dictate or manage policy to the contractor or assume responsibility for ensuring the adequacy of a program or safe operation of a process or a facility.

b. Do not coerce contractor action.

c. Do not serve as a means for personnel of the assessed organization to bypass established ORP lines of communication.

d. Do not allow friendships or relationships to interfere with the objective performance of assessment functions. If the perception of favoritism or partiality may exist, team members should request to be excused from the assessment team.

e. Do not operate facility equipment or instrumentation under any circumstances.

During assessments of contractors, the assessment team members interface with contractor personnel during fieldwork to understand the system, program, or facility being assessed. Assessment team members are official representatives of DOE, exercising authority consistent with DOE program and management guidance and in an objective, factual, formal, and non-confrontational manner. Special care must be taken to ensure that field observation activities do not interfere with the normal conduct of operations or alter the performance of these operations. However, assessment team members bring imminent hazards to the immediate attention of contractor management and the assessment team leader.

Assessment team members inspect and observe, collect facts, assess the facility or organization against requirements and performance in accordance with the individual assessment plan, and document potential proficiencies and deficiencies.

During assessment fieldwork, duties of the assessment team leader include the following:

a. Suspend assessment activities if imminent hazards or significant, potentially unrecoverable conditions adverse to quality are identified that result in initiating notification and stop work action. Assessment activity may continue once mitigating actions are implemented.

b. Keep FRs and appropriate ORP and contractor management informed of ongoing assessment results.

c. Report any incident of uncooperativeness, personal injury, or out-of-the-ordinary observations to their immediate supervisor and the line Division Director responsible for the organization or facility.

d. Perform the assessment in accordance with the assessment plan and/or procedure. Issues should be discussed with the line Division Director using the issue characterization guidance provided in Attachment 9.7.

e. Conduct a formal exit meeting with the assessed organization and ORP management. Invite DNFSB representatives to the exit meeting. During the exit meeting, the lead assessor will normally use a visual presentation and/or handouts to convey the following information:

1. Purpose of the assessment

2. Assessment team membership

3. Assessment requirements base

4. Overall conclusions, including identification of any stop-work actions, etc

5. Findings, concerns, observations, and assessment follow-up items (AFI)

6. Next steps

6.2.4.1 Independent Assessment Results Reporting

> **NOTE 1:** These instructions provide the minimum reporting requirements; individual organizations may choose to add other reporting/communication processes.

> **NOTE 2:** Reporting requirements for management walkthroughs are listed in Section 6.2.6.

The assessment team leader ensures immediate notification is provided to the DOE ORP FR and the contractor's senior management if operating requirements and required actions are not within limits, if a significant occupational safety and health regulation noncompliance is identified, if an imminent hazard is identified, or if a significant, potentially unrecoverable condition adverse to quality is identified.

When team members identify dissenting opinions regarding the results and conclusions of the assessment, they will report their opinion in a memorandum to the assessment team leader and responsible Division Director with a copy to the APC chair. Unresolved issues are elevated to the responsible AM. Assessment reports are not to be transmitted to contractors or ORP management until the AM or, if still unresolved, the APC has dispositioned the dissenting opinion. If necessary, the team member, lead assessor, Division Director, or AM may request a special APC meeting to disposition the dissenting opinion.

The results of independent assessments are documented in formal reports and sent to the assessed organization and others for their information and/or action as described below. These reports can either be detailed accounts of what was assessed, observations made, and the results (including documenting any findings or assessment follow-up items), or a summary report, briefly describing the results of the assessment, any findings or AFIs, and referencing OADB entries or

internal periodic FR reports written to document the assessment results. (Summary reports are most commonly prepared by FRs with continuous oversight responsibilities.) Attachment 9.7 provides guidance regarding the criteria for characterizing issues and documenting cited or non-citied findings. The lead assessor completes the ISMS evaluation (Attachment 9.9) and includes it as part of the report. Assessment reports and/or referenced documents described above, if used in lieu of detailed reports, are stored as permanent ORP records (see Section 8.0).

Unless waived by management, the lead assessor submits a draft copy of the report to the assessed organization for a factual accuracy review. The lead assessor then dispositions the resulting comments and revises the draft report as appropriate.

The lead assessor signs the report, attaches it to the cover letter or memorandum described in Attachment 9.4, and places it in concurrence as specified in ORP correspondence procedures. The cognizant ORP line Division Director (if the report documents contractor performance), and the appropriate ORP AM approve the transmittal.

If the report documents any findings, the organization Team Lead or Division Director responsible for the surveillance briefs the ORP Manager. As an alternative, the organization Team Lead or Division Director may obtain the ORP Manager's concurrence on the correspondence transmitting the report. Copies of the reports are transmitted to contractor senior management and the following as applicable:

a. For facility-specific assessments:
    1. Senior FR for the facility
    2. Cognizant line Division Directors
    3. APM
b. For programmatic assessments:
    1. Cognizant program Division Directors
    2. APM

Assessment reports and associated transmittal correspondence identify findings, AFIs, and concerns stemming from assessment results. The reports specify contractor response requirements and due dates. An example report format is shown in Attachment 9.4. Attachment 9.5 specifies the ORP numbering systems for assessment reports.

The APM:

a. Reviews reports for applicability to other ORP organizations and possible site-wide issues.
b. Makes assessment information available to ORP organizations.
c. Ensures published assessment reports are available on the ORP website.
d. Brings potential ORP-wide issues to the attention of the AMs and the ORP Deputy Manager.

6.2.4.2 Identifying and Resolving Concerns

If the assessment team leader believes the assessment team has identified a concern, the assessment team leader briefs the cognizant AM and obtains agreement that a concern exists. The assessment team leader and the AM then consider transmitting a letter or memorandum to the assessed organization requesting justification for why any activities affected by the concern should continue. If such a letter is appropriate, the assessment team leader or AM staff drafts the letter and routes it through the ORP Correspondence Control System.

If a concern is documented in a letter, the concern is also entered into the Consolidated Action Reporting System (CARS) independently of the assessment report issues. Response time on the letter for the assessed organization is at the discretion of the AM, but no more than two weeks should normally be allowed. The assessment need not be completed prior to issuance of this letter, but the assessment team is to have first gathered adequate substantiating evidence for the concern. If appropriate, the AM meets with the management of the assessed organization to assure a mutual understanding of the issue and the path forward.

If the AM is dissatisfied with a contractor's response to the concern, the AM initiates appropriate contract action, such as a letter of direction. If the AM considers that a PAAA violation may have occurred, and the contractor's response is inadequate, the AM describes the issue to the ESQ PAAA Coordinator. At the PAAA Coordinator's discretion, the HQ PAAA Enforcement staff is notified of the issue. At the discretion of the AM, the concern may be closed out along with, or independent of, the other issues of the assessment.

The AM organization documents acceptance of concern responses in formal correspondence with the assessed organization. When the responsible staff (e.g., an SME or the lead assessor) and the AM agree the contractor has provided an appropriate analysis and corrective action for the concern, the AM organization documents acceptance in a letter to the assessed organization and updates the CARS entry with the updated status.

When the assessed organization notifies ORP management that the corrective actions for the concern have been completed, the lead assessor or a representative of the AM organization verifies corrective action completion. The AM organization uses formal correspondence to notify the assessed organization of closure of the concern and closes the issue in CARS.

6.2.5 Management Assessment Conduct

Direct Reports to the ORP Manager and Division Directors are to assess their own management processes and identify and correct problems that hinder their organizations from achieving their objectives. The APC schedules formal management assessments on the ORP Integrated Assessment Schedule. While Direct Reports conduct the actual management assessment, Direct Reports may assign staff to assemble and analyze data prior to their evaluation.

Where appropriate, management assessments will be coordinated and performed jointly with the DOE Richland Operations Office (RL). Management assessments must include programmatic and line management oversight processes and activities (e.g., security surveys, FR programs,

personnel qualification standards, and training programs) to assess whether requirements and management expectations are met. Continuous improvement mechanisms (e.g., corrective action processes) must be in place to improve the effectiveness and efficiency of oversight programs and operations.

Management assessments look at the total picture: how well the management system meets specified requirements; the expectations for safely performing work; and the organizational mission, goals, and objectives. The emphasis of management assessment is on management issues that affect performance and related processes such as strategic planning, personnel qualification and training, staffing and skills mix, communication, and cost control; organizational interfaces; and mission objectives. The purpose of this type of assessment is to identify the management aspects of performance and make improvements. Management assessment is an introspective self-analysis to determine whether the management infrastructure is properly focused on achieving desired results (from DOE G 414.1-1A, *Management Assessment and Independent Assessment Guide*).

6.2.5.1 Management Assessment Result Reporting

Formal management assessments are documented in a memorandum addressed to the ORP Deputy Manager. The memorandum should identify assessment criteria, assessment results, and commitments for corrective actions for any weaknesses. Findings and concerns, if identified, are entered in CARS.

6.2.6 Management Walkthrough Conduct

The ORP Manager established the following base requirements of the management walkthrough program:

a. Management walkthroughs are first-hand observations of a discrete operation or field activity by Direct Reports to management (Deputy Manager, AMs, Project Managers, and Senior Technical Advisors to the Manager), Division Directors, other Senior Technical Advisors, and excepted service team leads. This responsibility cannot be delegated.

b. At each quarterly APC meeting, the APM will propose walkthrough topics for each person responsible for conducting walkthroughs. These will be approved by the APC, and the APM will provide them to the Management Walkthrough Coordinator (see below).

c. When scheduling, planning, and performing management walkthroughs, the APC, AMs, and persons performing walkthroughs should use the guidance of Attachment 9.6.

d. The ORP management walkthrough program shall accumulate an average of three hours of field presence per month per member of the ORP management team.

e. Each management walkthrough should be at least one hour in length.

f. Time spent attending meetings, presentations, and similar activities inside an assigned facility <u>does not</u> count toward accumulated walkthrough time. Time spent performing other types of facility observation activity (field work for assessments, observation of critiques, design reviews, etc.) <u>does</u> count toward accumulated walkthrough time.

g. After each management walkthrough, the performing ORP staff (identified in "a" above) shall immediately notify contractor management if operating requirements and required actions are deficient (e.g., hazards identified, safety and health noncompliance, procedures not being followed).

h. Significant deficiencies shall be transmitted to the cognizant FR and put into CARS, if necessary.

i. Management walkthroughs will normally be documented in the OADB in accordance with ORP M 243.1, *Operational Awareness Oversight Database*.

j. Best practices and significant deficiencies that may be inherent in other work across the River Protection Project (RPP) should be shared among the ORP senior management team.

The ORP Manager shall assign a Management Walkthrough Coordinator, who is responsible for the following:

a. Collecting all management walkthrough OADB reports and providing them to the APM.

b. Maintaining a record of management walkthrough hours for each manager and transmitting a tabulation to the APM at the end of each month.

c. Providing by e-mail at least one week before the end of each month, the status of required walkthroughs. This e-mail will go to each individual with incomplete assigned walkthroughs for the month, the APM, the APC Chair, and the ORP Manager.

6.2.7 Conduct of FR Routine Activities and Other ORP Surveillances

In addition to routines specified in the FR instructions and WTP-OA-DI-02, *WCD Construction Oversight*, management may assign qualified persons to conduct surveillances of contractor and ORP activities. Persons conducting surveillances and FR routines prepare by developing informal checklists or obtaining an existing CRAD or Facility Representative Instruction for the surveillance topic. Before conducting the surveillance, surveillance personnel notify the cognizant FR, contractor management, and ORP management as applicable.

Surveillance fieldwork activities and FR routines are conducted in the same manner as for an independent assessment or as specified in the FR instructions and WTP-OA-DI-02. Upon completing the surveillance fieldwork the surveillant reviews his or her results and conclusions with contractor management, ORP management, and the FR as applicable.

6.2.7.1 Surveillance Results Reporting

Persons conducting surveillances and FR routines document activity in the OADB. If the surveillant identifies any findings or concerns requiring a response by the contractor, the

surveillant documents them in a formal surveillance report. Surveillance reports are signed by the surveillant. If the surveillance report documents any findings, the organization Team Lead or the Division Director responsible for the surveillance briefs the ORP Manager. As an alternative, the organization Team Lead or Division Director may obtain the ORP Manager's concurrence on the correspondence transmitting the surveillance report. Surveillance reports with any issues requiring a response from the contractor are transmitted by letter to the contractor. Issues requiring a response by ORP management are documented in a memorandum and entered into CARS. The surveillant enters issues requiring a response from the contractor into CARS. Correspondence, follow-up, and closure of surveillance findings is the same as for independent assessments.

6.2.8 Tracking

For tracking the status of assessments:

   a. Each AM assigns responsibility for tracking assessment status
   b. Assigned individual(s) provide status information to the APM
   c. APM maintains a list of assigned individuals and updates the overall status

For tracking deficiencies:

   a. The assessment team leader or other individual conducting an assessment enters assessment findings and concerns into CARS, including the following dates and milestones:
   - When the exit meeting was conducted;
   - When the report was issued;
   - When the contractor responded; and
   - When corrective action verification was completed.
   b. Each AM ensures CARS is maintained for those deficiencies under his/her purview and reports trends and performance at APC meetings. See Attachment 9.7 for guidance regarding the criteria for characterizing issues, including cited and non-cited findings.

6.2.9 Deficiency Closure

For independent assessments and surveillances, Division Directors distribute contractor or ORP organization corrective action correspondence, including corrective action plans (CAP), to appropriate SMEs or assessment team leader for evaluation.

The assigned SME or assessment team leader assesses the adequacy of proposed CAPs and discusses unacceptable corrective actions with the appropriate line Division Director. This includes verification that the assessed organization answered each bullet in the report transmittal correspondence (see Attachment 9.4). For acceptable corrective action proposals, SMEs and assessment team leaders notify the management of the assessed organization of their conclusion. Notification by e-mail may be appropriate. For unacceptable corrective action proposals, the SME or assessment team leader initiates formal correspondence rejecting the

corrective action proposal. CARS entries are made to document acceptance or rejection of the corrective action correspondence.

Once contractors or ORP organizations report they have completed the acceptable corrective actions, the SME or assessment team leader performs a review of the actions to verify they were performed as stated. If corrective actions are completed, the assigned staff member closes the item in CARS and notifies the assessed organization. Notification by e-mail is acceptable. If appropriate, the staff member schedules a later follow-up surveillance in CARS to verify corrective action effectiveness. Otherwise, corrective action effectiveness will be verified in a subsequent assessment or by a formal corrective action effectiveness verification (Section 6.2.10).

When all issues for an assessment, surveillance, or other oversight activity requiring corrective action are completed and closed, the SME or assessment team leader places a letter or memorandum into concurrence notifying the assessed organization that the assessment is closed. The SME or assessment team leader then closes the assessment out in CARS.

Division Directors ensure the following occur:

a. Unacceptable corrective actions are discussed with cognizant ORP or contractor managers and are formally transmitted to the contractor or the assessed ORP organization.

b. SMEs and assessment team leaders appropriately accept or reject corrective actions.

c. Areas of disagreement are elevated to the cognizant AM for appropriate disposition.

d. The ORP Division Director and the cognizant AM discuss significant disagreements with the contractor regarding corrective actions. They consider and pursue contractual and/or regulatory options to bring the contractor into compliance with contractual requirements.

NOTE: The degree of closure validation required should be based on the severity of the deficiency, frequency of recurrence, and professional judgment. Closure of those items for which a corrective action was required must be validated.

Division Directors ensure closure of deficiencies is documented in CARS and included as input for AM periodic reports and perform the following:

a. Ensure the deficiency is closed for DOE tracking.

b. Ensure the contractor was notified that the deficiency was closed.

If closure validation identifies unsatisfactory completion of corrective actions, line Division Directors or AMESQ perform the following:

a. Ensure the deficiency remains open for tracking purposes.

b. Notify and transmit to the contractor or assessed ORP organization the basis for the unsatisfactory completion and/or resolve disagreements as necessary.

c. Elevate disagreements with the cognizant contractor manager to the AM for resolution.

    d. Document unsatisfactory completion of deficiency closure in CARS. If appropriate, notify contractors by letter of unsatisfactory corrective actions.

6.2.10 Corrective Action Effectiveness Reviews

When appropriate, AMs will direct the conduct of corrective action effectiveness reviews. In determining when a corrective action effectiveness review is necessary, they will consider the following.

    a. Number and complexity of problem findings and associated corrective actions in the CAP.

    b. Significance and impact of each problem finding and associated corrective actions to site/organization safety, mission operations, and security.

    c. Resource (funding, personnel, and time) requirements and availability to conduct the effectiveness reviews for specific corrective actions. For example, verifying completion and determining effectiveness of an additional procedure incorporated to ensure protective grounding for a specific hazardous work requirement may be scheduled immediately and conducted by several personnel in a day. A review of the effectiveness of a revised emergency response process directive and training program for the emergency response team may include a performance test scheduled during the conduct of the site annual emergency response exercise and will involve several performance test evaluators.

Corrective action effectiveness reviews are conducted using the guidance of DOE G 414.1-5, *Corrective Action Guide*, Sections 7.1 through 7.9, as appropriate. A corrective action effectiveness review may be conducted by an individual or by a team, but it must be conducted by qualified assessment personnel using an approved plan. Therefore, it may be incorporated into an assessment of a particular topic or facility that is performed after corrective actions from the previous assessment are complete.

Often, an important component of corrective action effectiveness verification is to repeat the activity that originally identified the issue, or corrective action effectiveness verification teams may identify alternative methods for determining if the corrective actions were effective. However, the activity must be more than simply verifying that corrective action commitments were completed correctly. Effectiveness review activities include one or more of the following as described in DOE G 414.1-5:

- Document reviews
- Performance indicators
- Work observations
- Facility tours
- Performance testing
- Personnel interviews

Effectiveness reviews must be conducted after enough time has passed for the original problem to recur, or the corrective actions have been challenged by events. If conditions for implementing the corrective actions can only occur under certain circumstances (e.g., during an emergency response exercise) then the effectiveness review must be able to address effectiveness of the corrective actions under those circumstances.

Corrective action effectiveness reviews and review issues are documented in independent assessment reports as described in Section 6.2.4 of this IP. Issues are reported, resolved, tracked, closed, and verified using the same procedure for independent assessments.

6.2.11 Performance Indicators

Division Directors ensure the following are performed:

a. Appropriate actions are taken to address adverse trends.
b. Data are provided to the APM for overall performance indicators.
c. Performance indicators are established and used for allocating assessment resources and identifying needed reactive assessments.

The APM:

a. Establishes overall performance indicators on assessments and management walkthroughs, including indicators on results from assessments and on the assessment program itself.
b. Maintains overall performance indicators (including tracking, trending, and analysis).
c. Publishes the status and analysis of performance indicators periodically (monthly, quarterly, or annually as applicable) for internal ORP use.

7.0 REFERENCES

DOE G 414.1-1A, *Management Assessment and Independent Assessment Guide*

DOE G 414.1-5, *Corrective Action Guide*

DOE O 226.1, *Implementation of Department of Energy Oversight Policy*

DOE O 414.1C, *Quality Assurance*

MGT-PM-PL-002, *Safety Management Functions, Responsibilities, and Authorities Manual* (formerly ORP M 411.1-1)

NQA-1- 2000, *Quality Assurance Requirements for Nuclear Facility Applications with Addenda*

ORP M 243.1, *Operational Awareness Oversight Database*

ORP M 420.2, *Facility Representative Program*

Technology Readiness Assessment/ Technology Maturation Process Guide, U.S. Department of Energy, Office of Environmental Management, Washington, D.C.

WTP-OA-DI-02, *WCD Construction Oversight* (formerly ORP M 432.1, *Waste Treatment And Immobilization Plant (WTP) Project Construction Oversight Manual*)

8.0 RECORDS

The following records generated by this procedure will be controlled and maintained by the generating organization.

- ORP Integrated Assessment Schedule
- Assessment reports and associated correspondence (including surveillance reports and other assessment formats)
- Deficiency closure documentation (e.g., contractor deficiency follow-up and closure correspondence)
- Training and qualification records

9.0 ATTACHMENTS

9.1   ORP Assessment Qualification Record (ORP-111)

9.2   Functional Areas and Applicable Assessment Requirements

9.3   Items to be Considered when Determining Program Elements to be Assessed

9.4   Independent Assessment Report Format and Content

9.5   Numbering System for Assessment Reports (findings, non-cited findings, concerns, and assessment follow-up items)

9.6   Management Walkthrough Guidance

9.7   Characterization of Findings and Cause Codes for Issues

9.8   Agenda for Quarterly Assessment Program Committee Meetings

9.9   Integrated Safety Management System (ISMS) Evaluation

Attachment 9.1. ORP Assessment Qualification Record

ORP-111 (06/03)	**ORP Assessment Qualification Record**	Page 1 of 2

Name _____

I. GENERAL TRAINING AND INDOCTRINATION

	Required if Marked	Initial/Date
A. ASSESSOR/AUDITOR TRAINING		
1. Surveillance Methodologies or equivalent (Hanford Training Catalog [HTC] 170029)		/
2. Assessment Techniques or equivalent (HTC 350322)	*	/
3. Auditing Methods for Lead Auditor or equivalent (HTC 170022)	**	/
4. Effectiveness Verification Workshops or equivalent	*	/
		/
B. SUPPORT TRAINING AND REQUIREMENTS		
1. HGET	*	/
2. Radiation Worker II		/
3. Hanford Physical and Whole Body Count		/
4. Tank Farm Orientation		/
5. HAZWOPER (24 hr)		
		/
C. READING ASSIGNMENT (All in ORP ESQ Assessor Training Required Reading Binder)		/
1. DOE G 414.1-1A, Management Assessment and Independent Assessment Guide		/
2. Auditing Methods for Lead Auditors		/
3. 10 CFR 830, Subpart A	*	/
4. DOE O 414.1A, Quality Assurance	*	/
5. ORP M 414.1, Quality Assurance	*	/
6. NQA-1, Quality Assurance Requirements for Nuclear Facility Applications		/
7. DOE/RW-0333P, Quality Assurance Requirements and Description		/

II.   ADDITIONAL TRAINING REQUIREMENTS

Reading Assignment

Classroom Assignment

***Required for Assessor Qualification; ** Required for Lead Assessor Qualification

Attachment 9.1. ORP Assessment Qualification Record (continued)

ORP-111 (06/03)	**ORP Assessment Qualification Record** **(Continued)**	Page 2 of 2

II. ADDITIONAL TRAINING REQUIREMENTS (continued)

Exercise

Special Oral or Written Examination

Additional training or discussions

Based on the background-related experience, I concur with the candidate pursuing the requirements for qualification as Assessment Team Leader/Assessor (circle one). In addition to the requirements contained in Section I of this card, the candidate should complete the items above. [Note: Assignment of additional requirements is entirely at the discretion of the responsible Office of the Assistant Manager (AM) or Project Manager.]

_____   _____

Assistant Manager or Designee   **Date**

I concur the candidate meets the requirements for qualification as Assessment Team Leader/Assessor (circle one). For assessment team leaders, I concur this individual is capable of communicating effectively, both in writing and orally.

_____   _____

Assistant Manager or Designee   **Date**

Attachment 9.2. Functional Areas and Applicable Assessment Requirements

\Table A: Assessment Functional Areas

Functional Area	Specified Frequency	Responsible ORP Organization	DOE Assessment Requirement
ALARA Program Assessment/Radiation Protection	None specified	ESQ	DOE P 441.1, *Program and Project Management Policy for the Planning, Programming, Budgeting, and Acquisition of Capital Assets*; DOE O 226.1, *Implementation of Department of Energy Oversight Policy*, Attachment 2
Assurance Systems	None specified	ESQ/TF/WTP	DOE O 226.1, Attachment 2
Emergency Management	Annual	TF	DOE/RL-94-02, *Hanford Emergency Response Plan*; DOE O 151.1, *Comprehensive Emergency Management System*, Chapter X; DOE O 226.1, Attachment 2
Employee Concerns Program (ECP)	Annually	ORP ECP Officer	DOE O 442.1, *Department of Energy Employee Concerns Program* (and supplemented); DOE O 226.1, Attachment 2
Environmental Protection Program	None specified	ESQ	DOE O 450.1, *Environmental Protection Program*; DOE G 450.1-1, *Implementation Guide for Use with DOE O 450.1, Environmental Protection Program*
ES&H Reporting	Twice annually /quarterly	ESQ/TF/WTP	DOE O 231.1, *Environment, Safety and Health Reporting*; DOE M 231.1-1, *Environment, Safety and Health Reporting Manual*, Chapter 2; DOE O 226.1, Attachment 2;
Fire Protection	Every three years	ENS	DOE O 420.1, *Facility Safety*; DOE G 420.1-3, *Implementation Guide for DOE Fire Protection and Emergency Services Programs for Use with DOE O 420.1B, Facility Safety*
Integrated Safety Management	None specified	ESQ/TF/WTP	DOE M 450.4-1, *Integrated Safety Management System Manual*, Attachment 2; DOE G 450.4-1, *Integrated Safety Management System Guide*, Chapter 4; DOE O 226.1, Attachment 2
Maintenance	None specified	ESQ/TF/WTP	DOE O 433.1, *Maintenance Management Program for DOE Nuclear Facilities*; DOE G 433.1-1, *Nuclear Facility Maintenance Management Program Guide for Use with DOE O 433.1*

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

\Table A: Assessment Functional Areas

Functional Area	Specified Frequency	Responsible ORP Organization	DOE Assessment Requirement
Management Systems	None specified	TF/WTP/ESQ/OPA/AMD/ TPD/TED/WCD/WED/WPD	DOE O 210.2, *DOE Corporate Operating Experience Program*; DOE O 350.1, *Contractor Human Resource Management Programs*; DOE P 450.7, *Environment, Safety and Health (ESH) Goals*; MGT-PM-PL-002, *Safety Management Functions, Responsibilities, and Authorities Manual* (formerly ORP M 411.1-1); DOE O 226.1, Attachment 2
Occupational Safety and Health	Annual	TF/WTP/ESQ	DOE O 440.1, *Worker Protection Program for DOE (Including the National Nuclear Security Administration) Federal Employees*; DOE O 226.1, Attachment 2
Occurrence Reporting and Processing of Operations Information	None specified	TF/WTP	DOE O 231.1; DOE M 231.1-2; DOE O 226.1, Attachment 2
PAAA Program	None specified	ESQ	DOE O 226.1, Attachment 2
Quality Assurance	None specified	ESQ	DOE O 414.1, *Quality Assurance*; DOE G 414.1-3, *Suspect/Counterfeit Items Guide for Use with 10 CFR 830 Subpart A, Quality Assurance Requirements, and DOE O 414.1B, Quality Assurance*; DOE G 414.1-4, *Safety Software Guide for Use with 10 CFR 830, Subpart A, Quality Assurance Requirements, and DOE O 414.1C, Quality Assurance*; DOE G 414.1-5, *Corrective Action Program Guide*; DOE/RW-0333P, *Quality Assurance Requirements and Description for the Civilian Radioactive Waste Management Program*, Section 2; DOE O 226.1, Attachment 2
Radioactive Waste Management	None specified	TF	DOE M 435.1-1, *Radioactive Waste Management Manual*; DOE O 226.1, Attachment 2
Training and Qualification	None specified	ESQ/TF/WTP	DOE O 360.1, *Federal Employee Training*; DOE M 360.1-1, *Federal Employee Training Manual*, Chapter V; DOE O 226.1, Attachment 2
Workplace Substance Abuse Program	None specified	TF/WTP	10 CFR 707.5(f), "Workplace Substance Abuse Programs at DOE Sites"; DOE O 350.1, Chapter VIII

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

Table B: Specific Assessment Requirements

Directive and Applicable Sections	Title of Directive	Assessment Requirement
DOE O 151.1 Chapter X, Sections 1.a, 2.a.3	Comprehensive Emergency Management System	"Identify findings (i.e., weaknesses or deficiencies) in emergency management programs and/or provide assurances that emergency capabilities are sufficient to implement emergency plans. Readiness assurance evaluation activities can include: program and exercise evaluations, tracking performance indicators, and no-notice exercises." "Each DOE/NNSA Cognizant Field Element must evaluate the emergency management program at each site/facility under its supervision. Each site/facility must be evaluated at least once every three years. The Cognizant Field Element must notify the Program Secretarial Officer of its evaluation schedule." **Note: RL performs part, but not all, of this function.**
DOE O 210.2 Sect. 5.e.(5)	Performance Indicators and Analysis of Operations Information	"As a part of self-assessments conducted to evaluate organizational performance in Integrated Safety Management (ISM), includes an assessment of the effectiveness of the organization's operating experience program."
DOE O 226.1, Attachment 2, Section 1.a.(2)	Implementation of Department of Energy Oversight Policy	"DOE line management must review contractor assurance systems periodically to ensure that: required assessments by applicable DOE directives are being performed; the effectiveness of safety management programs, including programs that are credited in the safety basis for nuclear facilities are being assessed adequately; deficiencies are being self-identified; and corrective actions are being taken in a timely and effective manner."
DOE O 226.1, Attachment 2, Section 1.n	Implementation of Department of Energy Oversight Policy	"DOE oversight programs and assurance systems will evaluate performance against requirements and performance objectives to include laws, regulations, national standards, DOE directives, DOE-approved plans and program documents (e.g., security plans, authorization basis documents, and quality assurance program), site-specific procedures/manuals, criteria review and approach documents, other contractually mandated requirements, and contractual performance objectives. Requirements and performance objectives are established and interpreted through approved processes so that they are relevant to the site and mission. Continuous improvement opportunities are identified and pursued."

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

Table B: Specific Assessment Requirements

Directive and Applicable Sections	Title of Directive	Assessment Requirement
DOE O 226.1, Attachment 2, Section 2.b.(4)	Implementation of Department of Energy Oversight Policy	"Assessments must include reviews of site qualification standard programs, training programs, and individual training and qualification as they relate to environment, safety, and health; safeguards and security; emergency management; and cyber security."
DOE O 226.1, Attachment 2, Section 2.c.(1)	Implementation of Department of Energy Oversight Policy	"DOE line management must assess implementation and effectiveness of contractor assurance systems for environment, safety, and health; safeguards and security; emergency management; cyber security systems and their sub-elements (e.g., radiation protection within environment, safety and health) by examining the following: (a) Assessment methods (e.g., whether sufficient emphasis is placed on observation of work activities); (b) The frequency, breadth, and depth of assessments; (c) Line management involvement in assessments; (d) Evaluators' technical expertise and qualifications; (e) The number and nature of findings identified; and (f) The degree of rigor applied to assessment." [DOE O 226.1 considers all field element organizations to be "line management."]
DOE O 226.1, Attachment 2, Section 2.c.(2)	Implementation of Department of Energy Oversight Policy	"DOE line management must regularly assess the effectiveness of contractor issues management and corrective action processes, lessons learned processes, and other feedback mechanisms (e.g., worker feedback). DOE line management must also evaluate contractor processes for communicating information, including dissenting opinions up the management chain." [DOE O 226.1 considers all field element organizations to be "line management."]
DOE O 226.1, Attachment 2, Section 2.c.(3)	Implementation of Department of Energy Oversight Policy	"DOE line management must validate that contractor corrective actions have been implemented and are effective in resolving deficiencies and preventing recurrence." [DOE O 226.1 considers all field element organizations to be "line management."]
DOE O 226.1, Attachment 2, Section 2.c.(4)	Implementation of Department of Energy Oversight Policy	"DOE line management must also regularly assess the contractor's reporting processes and performance to assess that contractors meet reporting requirements for events and incidents of security, environment, safety, health, cyber security, and emergency management concern and take effective actions to prevent recurrence of deficiencies or findings." [DOE O 226.1 considers all field element organizations to be "line management."]

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

Table B: Specific Assessment Requirements

Directive and Applicable Sections	Title of Directive	Assessment Requirement
DOE O 226.1, Attachment 2, Section 2.c.(5)	Implementation of Department of Energy Oversight Policy	"For sites where contractors report the results of performance measures to DOE (e.g., as part of a contractual provision), DOE must regularly assess the effectiveness of processes for collecting, evaluating, and reporting performance data to ascertain the accuracy, completeness, and validity of the performance measures."
DOE O 231.1, Section 5.b.(5).(c)	ES&H Reporting	"Assess contractor capability and performance in carrying out the occurrence reporting requirements of this Order and take actions to correct any weaknesses."
DOE M 231.1-1, Chapter 2, Section 1.a and 1.a.(5)	Environment, Safety, and Health Reporting Manual	Sect. 1.a: "Periodic, at least twice per year, quality checks will be performed to verify that the information recorded and reported to DOE, through the Computerized Accident/Incident Reporting System, regarding work related injuries and illnesses to DOE contractor employees is thorough, accurate, and consistent with information contained in local records." Sect. 1.a.(5): "Perform periodic, at least quarterly, quality checks of the information recorded and reported to CAIRS on work related injuries and illnesses to Federal employees to verify that the information is thorough, accurate, and consistent with information contained in local records."
DOE M 231.1-2, Section 4.5.b	Occurrence Reporting and Processing of Operations Information	"Assess capability and performance of the facility personnel in carrying out the requirements of this Manual, in accordance with established agreements with the responsible Secretarial Officers or Deputy Administrators (NNSA)." (ORP Requirement: As a minimum, assessments of occurrence reporting will evaluate ORPS report content in addition to evaluating the reporting process.)
DOE O 350.1, Section 4.b.(2)	Contractor Human Resource Management Programs	"Evaluate contractor benefit programs on a periodic basis to assess program costs and assure costs are reasonable and allowable."

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

Table B: Specific Assessment Requirements

Directive and Applicable Sections	Title of Directive	Assessment Requirement
DOE O 360.1, Section 5.g.(2)	Federal Employee Training	"[Field Element Managers] assess and report on training consistent with DOE strategic planning, budget, succession planning, and training administration processes, with specific attention to: (a) Requirements of statutes, regulations, and DOE directives; (b) DOE strategic plan and mission goals and objectives; (c) Governmental and DOE-wide policy and management functions; (d) Scientific and technical personnel and related materials, work processes, security, safety, health, environmental, nuclear, and technical operations needs; and (e) Manager, supervisor, and team leader training appropriate to the duties and responsibilities of their positions and succession planning needs."
DOE M 360.1-1, Chapter V, Section 8.a	Federal Employee Training Manual	"Field elements must conduct periodic self-assessments of the implementation of the Technical Qualification Program. These assessments must be conducted and documented in accordance with the Technical Qualification Program Assessment Guidance and Criteria."
ORP M 411.1-1, Part II, Section 2.2.k	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department Of Energy, Office of River Protection	"[OPA] Performs self-assessments of critical ORP business processes."
ORP M 411.1-1, Part II, Section 3.1.l	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department of Energy, Office of River Protection	"[AMD] Conducts self-assessments to evaluate the effectiveness and efficiency of all ORP acquisition operations"
ORP M 411.1-1, Part II, Section 4.2	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department of Energy, Office of River Protection	"[WED conducts] technical oversight, assessments, review of contractor design products, review of contract technical deliverables, and walkthrough of facilities to confirm that the constructed facility meets requirements."
ORP M 411.1-1, Part II, Section 4.4.d	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department of Energy, Office of River Protection	"[The Lead Construction Inspector] schedules and conducts periodic WTP Supplier inspections to verify Supplier compliance with WTP technical and quality requirements, and to verify adequate Contractor supplier quality oversight."
ORP M 411.1-1, Part II, Section 5.3.k	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department Of Energy, Office of River Protection	"[TPD] Conducts technical reviews, surveillances, and evaluations to assess Tank Farm Project performance and ensure implementation of corrective actions identified through internal and external assessments and audits."

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

Table B: Specific Assessment Requirements

Directive and Applicable Sections	Title of Directive	Assessment Requirement
ORP M 411.1-1, Part II, Section 5.4.b	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department Of Energy, Office of River Protection	"[TED] Performs assessment of contractor's engineering organizations in support of operations."
ORP M 411.1-1, Part II, Section 6.0.e	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department Of Energy, Office of River Protection	"[ESQ] Provides program management, oversight, and ongoing in-depth assessment of contractor activities involving radiation protection and health physics."
ORP M 411.1-1, Part II, Section 6.0.n	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department Of Energy, Office of River Protection	"[ESQ] Provides program management, oversight, and ongoing in-depth assessment of fire protection and prevention."
ORP M 411.1-1, Part II, Section 6.2.m	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department Of Energy, Office of River Protection	"[ESQ] Coordinates inspection and assessment of suspect and counterfeit items for the WTP and Tank Farms procurements and work activities."
ORP M 411.1-1, Appendix A	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department Of Energy, Office of River Protection	"[AMTF] Monitor and assess contractor's Lessons Learned Program." (Except ATL)
ORP M 411.1-1, Appendix A	Safety Management Functions, Responsibilities, and Authorities Manual for the U.S. Department Of Energy, Office of River Protection	"[ESQ] Assess [ORP] organizations to identify areas in which continuous improvement in the safety of DOE operations can be realized."
DOE O 414.1 Section 5.c.(4)	Quality Assurance	"Perform independent assessments of contractor organizations to evaluate the adequacy and implementation of their QAPs. Other suitable methods may be used in combination with independent assessments."
DOE G 414.1-3 Section 8.2	Suspect Counterfeit Items Guide	"DOE/NNSA should assess the adequacy and effectiveness of implementation of processes for review, notification, resolution of S/CI issues, and associated training, within both Federal and contractor quality assurance programs. DOE guidance G 414.1-1 contains information on independent and management assessment."

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

Table B: Specific Assessment Requirements

Directive and Applicable Sections	Title of Directive	Assessment Requirement
DOE G 414.1-4, Section 6.2	Safety Software Guide	"DOE should assess the effectiveness of its actions in resolving issues related to safety software management and controls. DOE also evaluates the adequacy and implementation effectiveness of DOE and contractor safety software management and controls."
DOE G 414.1-5, Section 9.0	Corrective Action Program Guide	"The overall corrective action program should be continuously monitored and assessed for effectiveness in reporting, evaluating, resolving and preventing recurrence of identified problem findings. Continuous site/organization feedback on the status and success of program implementation should be emphasized."
DOE O 420.1, Section 5.d.(6); Chapter II, Section 3.b.(13)	Facility Safety	"Conduct comprehensive self assessments and assessments of contractor fire protection programs and criticality safety programs." "A documented comprehensive fire protection self assessment and an assessment of contractors' programs performed by DOE every 3 years."
DOE G 420.1-3, Sections 4.13.3.(c), 4.13.5, and 4.13.6	Implementation Guide for DOE Fire Protection and Emergency Services Programs	"Comprehensive assessments of fire protection program elements by DOE and by contractors should be made every three years. (These should be staggered in anticipation of contractor-initiated enhancements.)" "DOE self-assessments and assessments of contractors are intended to confirm that comprehensive fire protection programs are in place site-wide. They should include a select review of facility and site fire protection features, fire safety policies and procedures, the qualifications of contractor fire safety professionals, the adequacy of self-assessments, fire hazards analyses, and program performance as detailed in this guidance and other DOE Orders/ Manuals" "It is expected that DOE assessments include the capabilities to respond in a timely and effective manner to site fire emergencies and related events. This assessment responsibility extends to contractors where there is no site fire department or brigade and where effective emergency response is predicated on other resources, such as occupant emergency organizations and offsite fire departments. In other words, the heads of field elements should determine the adequacy of the emergency response capability at all of the sites for which they have responsibility."

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

Table B: Specific Assessment Requirements

Directive and Applicable Sections	Title of Directive	Assessment Requirement
DOE M 426.1-1A Chapter IV, Sect. 2	Federal Technical Capability Manual	"Periodically, each DOE office with safety responsibilities for defense nuclear facilities conducts a local Federal Technical Capability Assessment covering all of the objectives and criteria in this Manual. This includes field elements and Headquarters offices. Local Federal Technical Capability Assessments should be led by a Senior Technical Safety Manager, who reports directly to the office manager for the purpose of the assessment. Although local assessments may be internal or independent assessments, usually they are internal assessments."
DOE O 433.1, Section 5.d.(13)	Maintenance Management Program for DOE Nuclear Facilities	"Conduct comprehensive self assessments and assessments of contractor maintenance management programs periodically with appropriate frequency and followup."
DOE G 433.1-1, Section 4.14.3.1	Nuclear Facility Maintenance Management Program Guide for Use with DOE O 433.1	"DOE involvement in the oversight of nuclear facility maintenance programs should include reviews by the DOE facility representative, field and area offices, and Headquarters. Inspections, audits, reviews, investigations and continuous self-assessment are necessary ingredients to achieving excellence in maintenance activities. Whether DOE or contractor, senior managers should periodically review and assess elements of the maintenance program for effectiveness and to identify areas of needed improvement. Such assessments should be aimed at assisting line managers and supervisors to identify and correct deficiencies. A comprehensive assessment of maintenance program elements should be conducted at least every other year and should include input from managers and supervisors from maintenance and other groups such as operations, technical staff, and appropriate corporate departments."
DOE M 435.1-1 Item 2.f.(10)	Radioactive Waste Management Manual	"Oversight. Ensuring oversight of radioactive waste management facilities, operations, and activities is conducted. Oversight shall ensure radioactive waste management program activities are conducted in accordance with a radioactive waste management basis and meet the requirements of DOE O 435.1, *Radioactive Waste Management*, and this manual.

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

Table B: Specific Assessment Requirements

Directive and Applicable Sections	Title of Directive	Assessment Requirement
DOE O 440.1, Section 5.c.(1)	Worker Protection Management for DOE Federal and Contractor Employees	"[Operations office managers and heads of field elements] ensure that unannounced worker protection inspections of contractor work places are conducted at least annually." (ORP Requirement: At the discretion of the APC, the following areas will be assessed at least annually: confined space, hazardous energy control, fall protection, excavation, hazard analysis, and life safety/fire protection.)
DOE P 441.1, Section 3.H	Department of Energy Radiological Health and Safety Policy	"Conduct oversight to ensure departmental requirements are being complied with and appropriate radiological work practices are being implemented."
DOE O 442.1 & Supplement, Sections 4.f and 5.c	Department of Energy Employee Concerns Program	Section 4.f: "The ECP manager must assess, at least annually, the effectiveness of the ECP and processes used to implement this Order. Problems that hinder the ECP from achieving its objectives must be identified and corrected." Section 5.c: "Use self-assessment or outside review to conduct management assessments of their ECPs. Assess the results with the Headquarters or field element manager, and take any necessary actions to improve program operations."
DOE O 450.1, Section 5.b	Environmental Protection Program	"DOE Operations/Field/Site Office Managers must assess implementation of EMSs as a component of the implementation of DOE O 226.1, *Implementation of Department of Energy Oversight Policy*, dated 9-15-05."
DOE G 450.1-1, Section 6.2.3	Implementation Guide for Use with DOE O 450.1, "Environmental Protection Program"	"The site's existing ISMS assessment program should be modified to include a structured, formal self-assessment of all elements of the ISMS/EMS, including the level of implementation and operational effectiveness of procedures, programs, and controls, in addition to the level of progress made toward objectives and targets. Assessments should identify nonconformity, root causes, trends, and corrective actions. Assessments should also be consistent with DOE O 226.1, *Implementation of Department of Energy Oversight Policy,* dated 9-15-05."
DOE M 450.4-1, Attachment 2	Integrated Safety Management System Manual	"Review self-assessment results regarding DOE ISM performance; these self-assessment reviews can and should be conducted throughout the year."

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

Table B: Specific Assessment Requirements

Directive and Applicable Sections	Title of Directive	Assessment Requirement
DOE G 450.4-1 Chapter IV, Section 3	Integrated Safety Management System Guide for Use With Safety Management System Policies (DOE P 450.4, DOE P 450.5, and DOE P 450.6); The Functions, Responsibilities, and Authorities Manual; and The Department Of Energy Acquisition Regulation	"DOE line oversight of the contractor's ISMS and the review and approval of the contractor's annual ISMS revisions as well as the environment, safety, and health performance objectives, performance measures, and commitments."
DOE P 450.7	Department of Energy Environment, Safety and Health (ES&H) Goals	"A rigorous assessment program shall be established that provides sufficient data to determine within desired confidence levels that program goals for ES&H are being achieved, that corrective actions and opportunities for improvement are being identified and implemented. The assessment part of an effective ES&H program serves to provide reasonable assurance that unknown factors do not exist in either the physical workplace or the management systems that govern work that can cause injury or loss. The assessments will provide a status of performance and corrective actions, if any."
DOE/RL-94-02, Section 14.1.1	Hanford Emergency Response Plan	"The RL/ORP Emergency Preparedness staff functions … overseeing the site contractor emergency preparedness programs include: assessing facility emergency preparedness programs to verify compliance with appropriate federal and state directives and policy, and providing the results/conclusions to the CSO and the DOE-HQ Director of Emergency Management."
DOE/RW-0333P, Section 2.2.10	OCRWM Quality Assurance Requirements and Description	"Management shall regularly review the scope, status, adequacy, and compliance aspects of the QA program they are executing and its compliance with 10 CFR 63, Subpart G, to assure its effective implementation. These reviews shall include frequent review of QA program status through reports, meetings, audits, surveillance, and observations. Appropriate management shall receive, as a minimum, audit reports, surveillance reports, trend reports, and management assessment reports."

Attachment 9.2. Functional Areas and Applicable Assessment Requirements (continued)

Table B: Specific Assessment Requirements

Directive and Applicable Sections	Title of Directive	Assessment Requirement
RL/REG-2000-04, Revision 3, Sect 4	WTP Industrial Health and Safety Oversight Plan	"ES&H Assessments–Report to LPSO/CSO: DOE field elements must submit to the lead program secretarial officer (LPSO) and cognizant secretarial officer (CSO) for their sites an annual summary report on the ES&H assessments conducted during the previous calendar year at the sites under their direction. The LPSO can allow organizations that collect this information on a fiscal year basis the option of preparing the annual summary report based on fiscal year rather than calendar year information. The annual summary report must be prepared in accordance with Attachment 2, "Instructions for the Annual Report on Environment, Safety, and Health Assessments," and submitted by the end of March each year." Also for Field Office Managers and Directors: "Periodically review ES&H assessments conducted at sites under their direction and prepare and submit an annual summary report on the assessments performed the previous calendar year to the LPSO and CSO for their sites." (Additional requirement: At the discretion of the APC, the following areas will be assessed at least annually: confined space, hazardous energy control, fall protection, excavation, hazard analysis, and life safety/fire protection.)
10 CFR 707.5(f)	Workplace Substance Abuse Program at DOE Sites	"DOE shall periodically review and evaluate each contractor's program, including the contractor's oversight of the covered subcontractors, to assure effectiveness and compliance with this part."

Attachment 9.3. Items to Be Considered when Determining Program Elements to Be Assessed

Division Directors consider the following when determining program elements to be assessed:

a. Contractual/legal requirements

b. Potential risk to workers, the public, and the environment

c. Conditions indicative of known or suspected noncompliance

d. Special interests or priorities (e.g., request from DOE Headquarters, upcoming external audits, etc.)

e. Investigation reports

f. Implementation of corrective actions

g. Lessons learned items

h. Results of external assessments

i. Areas for which little information is available or documented

j. Number of past deficiencies

k. Contractor internal assessment data

l. Current or past management issues

m. Available resources

n. Time since element was last assessed

o. Significant changes in the element (personnel, procedures, system)

p. Materiality (cost, risk, etc.)

Attachment 9.4. Independent Assessment Report Format and Content

Independent assessment reports are standalone documents that should include the following:

a. For assessments of contractors, a transmittal letter from ORP to the designated contractor executive formatted in accordance with ORP correspondence requirements. The content varies depending on whether findings, concerns, or other issues were identified. In general, however, every transmittal letter must include the following:

   1. Subject line: The subject line of the letter should include the report number and the title of the report.

   2. A discussion in the body of the letter addressing the most important assessment results, including findings, significant issues or concerns, and conclusions. Considerable flexibility is possible in terms of choosing the proper content and overall message of the cover letter. In general, this portion of the cover letter should focus on clearly communicating a few main points (or a single point) that are well supported by the executive summary and report details rather than attempting to deliver a large number of points or extensive detail. If no findings or significant issues were raised by the assessment, this section should state this and briefly summarize the scope of specific assessment activities performed. This should substantiate the conclusion that "no findings or significant issues were identified."

   3. For reports identifying findings or concerns, direction on how to respond to the finding(s), assessment follow-up item(s) (AFI), or concern(s) as follows:

      Within 30 days of receipt of this letter you should respond to the assessment findings [concerns, and assessment follow-up items]. For the findings [and concerns], the response should include:

      - The causes of the findings;
      - The corrective actions that have been taken to control or remove any adverse impact from noncompliant conditions (remedial actions) and the results achieved;
      - The corrective actions that will be taken to identify the extent of condition, correct the cause(s), and prevent further findings; and
      - The date when all corrective actions will be completed, verified, and compliance to applicable requirements achieved.

      Letters do not normally request responses to observations, but this may be done when the assessment team leader or the line Division Director believe it will provide a benefit. Responses to observations do not require the response criteria above.

Attachment 9.4. Assessment Report Format and Content (continued)

b. For assessments of ORP organizations, a memorandum requiring a response addressed to the cognizant manager. When the assessment finds issues, the memorandum requests corrective action. When assessments identify significant deficiencies, the memorandum also requests the cognizant manager to identify root causes.

c. If the report documents any findings or concerns, the organization Team Lead or the Division Director responsible for the surveillance normally briefs the ORP Manager. As an alternative, the organization Team Lead or Division Director may obtain the ORP Manager's concurrence on the correspondence transmitting the report.

d. A report coversheet documenting the report number, assessment period, assessment location, names of the team members, and the name of the report approval authority.

e. An executive summary that is informative but concise. An assessment report executive summary should provide a useful overview for contractor management and for ORP staff when preparing management briefings. It should include the following sections:

    1. Introduction: The executive summary should begin with a brief introduction that covers the type of assessment, scope (i.e., the contractor programs or functional areas reviewed), and any special details.

    2. Presentation of significant issues and conclusions: The executive summary should summarize issues in the report and provide a general conclusion on the adequacy of each program area in which significant review was performed.

    Note: Executive summaries are optional for reports shorter than 10 pages.

f. A "Report Details" section that includes the following:

    1. Assessment purpose and scope: This is the same as the assessment plan purpose and scope.

    2. Results: This section provides a concise overview of the conclusions and strengths and should discuss each finding, concern, and other issue in sufficient detail to be standalone and allow the contractor to initiate corrective action. Information detailing and supporting concerns, findings, observations/opportunities for improvement, open items, and AFIs should be discussed in detail in this section.

        Each issue must begin with a concise description statement limited to one or two sentences. Concerns should include a discussion regarding which finding or findings support them. Findings must quote the requirements that were violated. Issues are enumerated in accordance with this attachment.

Attachment 9.4. Assessment Report Format and Content (continued)

    3. Conclusions: This section provides a short summary of the overall adequacy of the area assessed and a brief summary of any issues.

g. A summary data section that may list key personnel contacted during the assessment, documents reviewed, and issues from previous assessments that were reviewed and/or closed.

h. A completed Integrated Safety Management (ISMS) Evaluation form (Attachment 9.9).

i. If applicable, a listing of all weekly facility representative reports issued during the report period, with a brief description of the subject of each.

Each report should have a unique report number as described in Attachment 9.5. Numbering for concerns, findings, and AFIs should be as described in Attachment 9.5, unless an external customer's numbering system is imposed. Application of trending and root cause codes is also identified in Attachment 9.7 and should be used when summarizing the assessment result findings in Operational Awareness Database (OADB) and Consolidated Action Reporting System (CARS) entries.

Attachment 9.5. Numbering System for Assessment Reports
(Findings, Concerns, and Assessment Follow-Up Items)

This attachment provides or references the ORP numbering systems for the following:

a. Assessment reports
b. Items for tracking within assessment reports
c. Trending and root cause analysis.

Assessment Report Numbering

Each report should have a unique report number, V-WW-XXX-YYYY-ZZZ, where:

a. V is a single letter indicating A for assessment or S for surveillance.

b. WW is a two-digit code for calendar year.

c. XXX is a three-, four-, or five-letter code depicting the ORP division or AM organization acronym (e.g., ESQ for Office of AMESQ) conducting the assessment; see ORP organization chart for a complete list of organizational acronyms.

d. YYYY is a letter code for location of the assessment; RPPWTP, TANKFARM, 222S, SITE (indicating multiple contractors), INTERNAL, or MISC.

e. ZZZ is a sequential number for each review assigned by each division or AM organization starting with 001 at the beginning of each calendar year.; For example, the first RPPWTP inspection report for ESQ in 2002 would be numbered as follows: A-02-ESQ-RPPWTP-001.

Concern, Finding, Observation, and Assessment Follow-up Item (AFI) Numbering

Each concern, finding, observation/opportunity for improvement, and AFI is uniquely identified by adding three digits to the report numbers as follows:

Issue Number: V-WW-XXX-YYYY-ZZZ-**INN**, where

I = Single letter indicating the type of issue, where C is for concern, F is for finding, N is for non-cited finding, O is for observation/opportunity for improvement, and A is for AFI.

NN = Two-digit sequential numbering of the items identified in the report starting with 01. For example, the first issue identified in the first Environmental Safety and Quality report (in this case a finding) for fiscal year 2002 would be numbered as follows: A-02-ESQ-RPPWTP-001-F01.

Attachment 9.6. Management Walkthrough Guidance

Mangers are to perform walkthrough assessments and document the results in the Operational Awareness Database (OADB) in accordance with ORP M 243.1, *Operational Awareness Oversight Database*. Managers are to:

1. Observe activities in progress (e.g., plant operating procedures being performed, valve lineups being performed, chemistry samples being obtained and analyzed, construction activities, etc.).

2. Compare plant conditions to applicable technical limits (e.g., technical safety requirements). Identify conditions that are not within limits and applicable required actions, if any. Verify required actions comply with requirements.

3. Verify log-keeping, shift turnover, communications, and other items related to conduct of operations, verifying that they comply with applicable requirements.

4. Verify general activities and conditions comply with applicable occupational safety and health regulations.

5. Discuss with workers at the actual job sites the following:

    - Why are you doing the work?
    - What are the hazards of the work?
    - What are the controls in place that protect you from the hazards?
    - When should you stop work?
    - Who is responsible for the safety of the job?

When scheduling, planning, and performing management walkthroughs, the Assessment Program Committee (APC) and persons performing walkthroughs should use the guidance of this attachment.

1. Accompany Office of River Protection (ORP) subject matter experts (SME) and Safety System Oversight (SSO) personnel in oversight activities such as:

    - Accompany the Environmental Safety and Quality (ESQ) Radcon SME on a Tank Farms surveillance of respirator usage

    - Accompany a Waste Treatment and Immobilization Plant (WTP) site inspector on an inspection of WTP welds

    - Accompany the ESQ industrial safety SME on a surveillance of fall protection

    - Accompany a Tank Farms Facility Representative in a routine involving checking operator roundsheets

    - Accompany the ventilation system SSO in a surveillance of an exhauster system.

Attachment 9.6. Management Walkthrough Guidance (continued)

2. Accompany a Bechtel National, Inc. (BNI) site safety representative doing daily oversight of industrial safety at the WTP (with heavy emphasis on electrical safety, fall protection, scaffolding, and personal protective equipment). BNI has assigned certified safety professionals and certified industrial hygienists to:

   - Pretreatment Facility
   - High Level Waste Facility
   - Low Activity Waste Facility
   - Analytical Laboratory
   - Balance of Facilities
   - Marshaling Yard.

3. Accompany a CH2M HILL Hanford Group, Inc. site safety representative doing daily oversight of industrial safety at the Tank Farms or 222-S Laboratory:

   - Base operations
   - Retrieval and closure
   - Analytical technical services.

4. Accompany the BNI and CH2M HILL counterpart on general walkdowns of the Tank Farms Project or WTP sites:

   - Focus on the contractor representative's interaction with his or her safety personnel
   - Focus on craft intercommunication about safety
   - Focus on radiation protection (contamination postings, lock and key, high radiation area postings, etc.).

5. Accompany a DOE Facility Representative on a daily routine evaluation of industrial and nuclear safety at the Tank Farms or the WTP.

6. Accompany the WTP Safety Education Through Observation (SETO) personnel and determine effectiveness. *BNI created a SETO team to reinforce positive work behaviors and immediately correct at-risk behaviors in the field. SETO was developed for craft workers. The workers communicate with one another on ways tasks can be completed safer. The SETO team identifies trends associated with behaviors and works to lower at-risk trends and implement positive reinforcement of safe behaviors.*

Attachment 9.6. Management Walkthrough Guidance (continued)

7. Witness specific work activities at either the WTP or Tank Farms and determine if the contractor is meeting the requirements in their procedure (This requires getting the procedure or work package in advance to review and prepare.):

   - Hydrostatic testing

   - Fire Protection system testing

   - Steel erection, concrete placement, etc.

8. Other areas of review to improve overall knowledge of facilities, processes, and progress include:

   a. Upcoming construction activities

   b. Adequacy of engineering/design to accommodate construction

   c. Adequacy of planning/organizing with labor, materials, equipment to complete the future task (quantities/durations/constraints)

   d. Evaluation of both short term and long term construction goals to support facility mission

Attachment 9.7. Characterization of Findings and Cause Codes for Issues

A finding is an individual item not meeting a committed requirement (e.g., contract, regulation, safety basis, quality assurance program, Authorization Basis document, procedure, or Standards/Requirements Identification Documents [S/RID]). ORP has a number of tools available to effect change in contractor performance to address a findings. For example:

a. For an issue of significant concern, ORP may proceed directly to a letter to the contractor informing them of ORP's concern and requiring they take timely and comprehensive actions to address the concern, including stop work action. This action does not preclude issuing a finding at the end of the assessment.

b. ORP may choose to cite the finding in the assessment report once the assessment is completed and require the contractor to provide a written response detailing the actions they plan to take to address the finding.

c. At ORP management discretion, ORP might decide not to cite a finding provided the conditions described below are met:

   1. The finding is not willful, programmatic, or a repeat of a previous finding;
   2. The finding has minor safety, quality, or cost impact; and
   3. The finding has been entered into the contractor's corrective action program for corrective action and subsequent trending.

   Non-cited finding do not require written responses from contractors. However, the non-cited finding is still be discussed in the assessment report and assigned a CARS item for ORP trending. Assistant Manager (AM) policies may specify a closure process, but this procedure does not require follow-up and closure for individual non-cited findings.

For entering issues (findings, concerns, and assessment follow-up items [AFI]) into Consolidated Action Reporting System (CARS), the assessment team leader will identify the trending and root cause code using the guidance on the following page.

Attachment 9.7. Characterization of Findings and Cause Codes for Issues (continued)

Trending and Root Cause Codes

A1 Design/ Engineering Problem	**A2 Equipment/ Material Problem**	**A3 Human Performance LTA**	**A4 Management Problem**
B1 Design Input Less Than Adequate (LTA)	**B1** Calibration For Instruments LTA	**B1** Skill Based Error	**B1** Management Methods LTA
B2 Design Output LTA	**B2** Periodic/ Corrective Maintenance LTA	**B2** Rule Based Error	**B2** Resource Management LTA
B3 Design/ Documentation LTA	**B3** Inspection/ Testing LTA	**B3** Knowledge-Based Error	**B3** Work Organization & Planning LTA
B4 Design/ Installation Verification LTA	**B4** Material control LTA	**B4** Work Practices LTA	**B4** Supervisory Methods LTA
B5 Operability Of Design/ Environment LTA	**B5** Procurement control LTA		**B5** Change Management LTA
	B6 Defective, Failed, or Contaminated		

A5 Communications LTA	**A6 Training Deficiency**	**A7 Other Problem**	
B1 Written Communications Method of Presentation	**B1** No Training Provided	**B1** External Phenomena	
B2 Written Communication Content LTA	**B2** Training Methods LTA	**B2** Radiological/ Hazardous Material Problem	
B3 Written Communication Not Used	**B3** Training Material LTA		
B4 Verbal Communication LTA			

Attachment 9.8. Agenda for Quarterly Assessment Program Committee Meetings

The Assessment Program Committee (APC) meets at least quarterly to review the results of recent assessment activity and other indicators of possible performance weakness. Based on this review, the APC revises the assessment plan to focus on areas of concern and potential improvement. For the meeting, ESQ compiles and presents information the APC will use in identifying areas that should receive attention in upcoming assessments.

As a minimum, quarterly APC meetings will address the following:

- Review completed assessments for the most recent quarter against the assessment plan;
- Compare the number of findings identified during the most recent quarter vs. findings identified in the preceding period;
- Review the results of all assessments completed in the most recent quarter;
- Review the status of corrective actions from previous assessments;
- Review the Occurrence Reporting and Processing System (ORPS) events for the previous 12 months for recurring issues (Environmental Safety and Quality [ESQ] to provide a numerical analysis to assist in the review);
- Review noncompliances reported into the *Price-Anderson Amendments Act* (PAAA) Noncompliance Tracking System for the most recent quarter;
- Review occupational safety metrics for ORP and each contractor for the previous 12-month period;
- Identify overall trends in contractor and ORP assessment data (ESQ provide initial data);
- Review performance of ORP assessment and corrective action processes;
- Review status of performance objectives, measures, and commitments; and
- Revise the assessment plan to focus on areas and topics showing potential weakness.

Attachment 9.9. Integrated Safety Management System (ISMS) Evaluation

The following table is to be included in all assessment reports to aid ORP annual ISMS reviews.

ISMS Evaluation

For each of the following identify whether the report:

S = Identified a strength	N = Found the topic functioning with no special strength or weakness
W = Identified a weakness	N/A = Did not address the topic

Topical Area	Evaluation	Comment (optional)
Core Function 1: Define Scope of Work		
Core Function 2: Analysis of Hazards		
Core Function 3: Develop and Implement Hazard Controls		
Core Function 4: Perform Work Within Controls		
Core Function 5: Provide Feedback and Continuous Improvement		
Principle 1: Line Management Responsibility for Safety		
Principle 2: Clear Roles and Responsibilities		
Principle 3: Competence Commensurate with Responsibilities		
Principle 4: Balanced Priorities		
Principle 5: Identification of Safety Standards and Requirement		
Principle 6: Hazard Controls Tailored to Work Being Performed		
Principle 7: Operations Authorization		
Supplemental Principle 1: Highly-Reliable Operational Performance		
Supplemental Principle 2: Individual Attitude and Responsibility		
Supplemental Principle 3: Performance Assurance		
Supplemental Principle 4: Organizational Performance Improvement		