

1 DR. MANSFIELD: How are they maintained?
2 Do you jointly sign something that is not part of the
3 contract, that includes details like that? Are they
4 memorialized somehow?

5 MS. YUAN-SOO HOO: They are in writing.
6 They are maintained by the Laboratory. They're the
7 basis for how they perform their self-assessments.

8 DR. MANSFIELD: So they can't change
9 willy-nilly.

10 MS. YUAN-SOO HOO: No.

11 CHAIRMAN CONWAY: Okay. With that, we'll
12 turn to you, Dr. Anastasio.

13 DR. ANASTASIO: Thank you, Mr. Chairman.
14 I hope that in the interest of time, you'll accept my
15 written document, and I'll try to do a quick summary.

16 CHAIRMAN CONWAY: Very good.

17 DR. ANASTASIO: Mr. Chairman and Members
18 of the Board, thank you for the opportunity to discuss
19 our systems we have to assure work is performed safely
20 at the Lawrence Livermore National Laboratory. Of
21 course, these systems are dynamic. We strive to
22 continuously improve safety through self-assessments
23 and corrective actions.

24 We vigorously try to identify deficiencies
25 ourselves, and fix them. But, of course, the

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1 Laboratory benefits greatly from the perspective of
2 others, who provide independent review and oversight
3 in a way to help us improve. Of course, these include
4 the DOE, the NNSA, the University of California and,
5 of course, this Board.

6 We listen carefully to the recommendations
7 and criticisms we receive, and work diligently to
8 rectify any issues that might have been identified
9 there.

10 On a personal note, I'm committed to
11 excellence in safety performance. Work safety has
12 long been a part of my day-to-day responsibilities as
13 I've grown up through the weapons program at the
14 Laboratory. In my background, I've had day-to-day
15 responsibilities for the operations of nuclear and
16 high-explosive activities in our most hazardous
17 facilities at the laboratory.

18 Before I became Director, I was a Deputy
19 Director for Strategic Operations during a time when
20 we were implementing ISM. These roles have really
21 shaped my views about safety. I expect safety to be
22 an integral part of programmatic objectives. I hold
23 my managers accountable for ensuring that work is done
24 safely, and within an approved safety envelope.

25 I have communicated to employees that they

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1 should not do work unless it can be done safely.
2 Safety is deeply rooted in our culture, because it is
3 the heart of the job that we have in a Nuclear Weapons
4 Laboratory. We have the cradle to grave
5 responsibility for the nuclear weapons that we design,
6 and this is not just the overall physics design that
7 we have to ensure is safe inherently, but also we have
8 to consider how the weapons are built, how they're
9 handled in the field, and how they're inspected, how
10 they're refurbished, how they're disassembled, and how
11 they are disposed of. Consequently, Livermore
12 provides support to help assure safe operation in all
13 the NNSA manufacturing plants, as well.

14 A Safety Management System,
15 self-assessment, assurance systems, and oversight are
16 all essential. However, they alone cannot ensure
17 safety, particularly in a research environment where
18 work is not routine that we have at the Laboratory.
19 And when I look at the Columbia disaster report, there
20 are many things to note in there. And I think they
21 have reinforced some of these points that I've made
22 here, and I cited a few quotes in my written
23 testimony, which I won't read here.

24 But I think we've heard this morning,
25 discussions of culture. And I think culture is a very

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1 important issue for all of us. And I think the
2 culture of a systems approach that we have from the
3 Weapons Program, that kind of infuses itself in the
4 Laboratory, it's everyone's job to keep their work
5 processes up-to-date to look for improvements, to
6 question the processes that might seem deficient.
7 And, in fact, I would say that several recent
8 discoveries about safety have been uncovered, because
9 we've had working scientists and engineers who were
10 encouraged to think about what they're doing, not just
11 to follow procedures. And by doing that, they've come
12 across issues that no one had ever thought of before.

13 And because of that, we'll have a safer system.

14 In my written testimony, I think I
15 described in some detail our Integrated Safety
16 Management System.

17 DR. MANSFIELD: Pardon me for breaking in.

18 DR. ANASTASIO: Yes.

19 DR. MANSFIELD: That's a keen observation,
20 that it's only by thinking your way through the
21 procedures, that you recognize that there's
22 inadequacies. However, do you believe the next step
23 would be to rectify the procedures so that they cover
24 the inadequacies, so they can still be
25 procedure-based, but still work with our eyes open?

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1 DR. ANASTASIO: Yes. I think what's really
2 important is to make sure that you spend your
3 resources doing the things that will provide you
4 safety, so you can get your program done. And you
5 don't want to waste your effort doing things that are
6 not very beneficial to you. You want to focus your
7 efforts on the things that are important. And I think
8 in many cases, certainly around nuclear operations,
9 having procedures is essential.

10 So if you find something that's been
11 overlooked or discovered; absolutely, you need to go
12 correct your processes and procedures to account for
13 this new thing. And it may mean that it will make
14 your processes easier, or simpler. It may mean it will
15 make it more complicated and so forth, but you have to
16 do what you need to do to be safe.

17 So as I was going to say, we have an
18 Integrated Safety Management System at the Laboratory,
19 which I won't try to describe here. It's described
20 somewhat in the written report. But I think since
21 we've implemented it, I think we've markedly improved
22 our safety management procedures and practices at the
23 Laboratory, and our safety performance.

24 And given that we're going through a
25 reorganization, re-engineering at NNSA, I just would

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1 say that our attention to safety is not going to
2 change, it's not going to diminish because NNSA is
3 going through this reorganization. And we recognize
4 that, in fact, further improvements at Livermore are
5 needed. They're identified through our assessment and
6 external oversight, as I said before. And many of
7 them are already in progress.

8 I thought instead of going through the
9 system, I might enumerate some of the things we've
10 been doing recently to improve our procedures and
11 practices. We've consolidated our nuclear materials
12 and facility operations into just two different
13 organizations of the Laboratory, which will help with
14 efficiencies, but also help with expertise so that
15 people are most used to handling these issues will be
16 able to keep their focus on them.

17 We strengthened our management of these
18 operations in these facilities through the addition of
19 an Authorization Basis Group. This is an organization
20 that provides independent expert single point of
21 contact within the Laboratory, and external to the
22 Laboratory for nuclear Authorization Basis issues.

23 Further, we're strengthening our
24 management through a new system engineering program,
25 which will ensure that systems remain consistent with

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1 their analyzed safety requirements, so that although
2 you put something in place, you want to make sure you
3 maintain those things to ensure the safety envelope is
4 still in place.

5 We're developing Documented Safety
6 Analysis reports, strengthening our work planning
7 processes, improving our attention to work-specific
8 work area hazard analysis and controls, improving work
9 supervision, and develop legacy material plans as part
10 of our facility Authorization Basis, as some examples.

11 Of course, there must be a system in place
12 to assure yourself that you are meeting the
13 performance objectives you set out, and so we have a
14 comprehensive array of self-assessment processes.
15 They range from the activity level of the facilities,
16 to the directorates, to the institution. They're
17 nearly continual at the activity level. And at the
18 other extreme, very formal self-assessments at the
19 institutional level are done annually. And this is
20 done through the Laboratory's Assurance Review Office,
21 which reports directly to my Deputy for Operations.
22 And they provide an independent internal appraisal of
23 the Laboratory's ES&H policies and their
24 implementation. It's this office that has the
25 responsibility for compiling and tracking

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1 deficiencies, for trending, and for corrective actions
2 across the whole Laboratory.

3 Finally, we're also making the needed
4 changes in our assurance systems so that we can meet
5 NNSA's new requirements for contractor assurances.
6 And for us, I think the most important change, and
7 this was raised earlier, will be to develop some kind
8 of a formal risk methodology that we don't yet have in
9 place. And with this methodology, the Site Office,
10 the University of California and the Laboratory will
11 better be able to focus their assessment and oversight
12 resources to have the most effective safety program we
13 can have.

14 So let me conclude by saying, of course,
15 all of this depends on people, of whom I have very
16 high expectations for safety performance. But the
17 people doing the activity cannot meet these
18 expectations without safety professionals at the
19 Laboratory, and at the Site Office, who provide the
20 expertise, the on-Site presence, and the understanding
21 of Site-specific details. They make the ES&H
22 Assurance System work, and continually improve it.

23 So in closing, let me just say that I am
24 committed to safe operations at Livermore. It's
25 integral to meeting our mission objectives for the

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1 Department of Energy, and for the country. Thank you,
2 and I'll answer any questions you have.

3 CHAIRMAN CONWAY: Thank you. Dr.
4 Eggenberger.

5 VICE CHAIRMAN EGGENBERGER: Yes. Dr.
6 Anastasio, I'm going to ask you a question and use a
7 word that I don't like to use. A lot has been said
8 today about the word of "culture." And culture is a
9 word that also pops up in the Columbia accident
10 investigation. Could you comment on the culture at
11 Livermore, and you haven't used the word.

12 DR. ANASTASIO: Actually, I thought I did,
13 but go ahead.

14 VICE CHAIRMAN EGGENBERGER: Oh, okay.
15 Well, then I missed it. But could you comment on
16 culture a little bit, as you see it?

17 DR. ANASTASIO: Yeah. I think as I tried
18 to point out, that we have a culture that derives from
19 our nuclear weapons activities. And those nuclear
20 weapons activities mean we have responsibility not for
21 just what I do today within my stovepipe, but we have
22 an integrated systems responsibility as the weapon
23 system as a whole. But also, a system across its
24 whole life, from the time when we design it, until it
25 goes out and until it gets built, until it goes out in

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1 the field, as it goes through the plants, it's in the
2 hands of the military, it comes back, gets dismantled.

3 We have responsibilities around all of that, and
4 that's a system level culture that I think is an
5 important one; that make sure that people are thinking
6 beyond their stovepipe. They're thinking in terms of
7 accomplishing the mission, and how safety has to be an
8 integral part of doing that. Because safety is at the
9 heart of a nuclear weapons mission.

10 VICE CHAIRMAN EGGENBERGER: Well, can I
11 pull you back to safety culture then?

12 DR. ANASTASIO: Sure. Well, I think the
13 safety -- say more what you mean.

14 VICE CHAIRMAN EGGENBERGER: Well, one of
15 the items that we've been looking at since '89 across
16 the complex is using a safety system that is more
17 analytical and data based as opposed to expert systems
18 based. And when we talk about safety culture, people
19 generally tend to talk about the expert based culture
20 system, as opposed to the more data and analytical
21 based culture system. How are we doing at Livermore
22 on those?

23 DR. ANASTASIO: My view is we need to do
24 both. As I said at the end, I think we can use an
25 analytical approach to do risk methodologies, and to

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1 help focus where you should pay your most attention.
2 You can use analytic approaches to evaluate accidents
3 and so forth.

4 VICE CHAIRMAN EGGENBERGER: That isn't
5 what I said. I said analytical and data based. What
6 you don't want to do is just make analyses and write
7 down numbers. You have to have data also that is
8 truth of some sort.

9 DR. ANASTASIO: Well, I would just cite -
10 and again, it's hard to talk about here since we're
11 not in a classified room, but I'd cite the two
12 examples I raised in my testimony, where scientists
13 and engineers at the Laboratory have come up with two
14 new safety issues. And as those ideas were developed,
15 the program actually questioned the ideas, and part of
16 it was to go demonstrate. Go build a system. Go
17 demonstrate, collect data to see whether, in fact,
18 things behave the way you think they do. And sure
19 enough, we found some things that nobody knew. And
20 so, absolutely, data is essential. Again, that's the
21 nuclear weapons culture. The nuclear weapons culture
22 is, you just don't theorize about something, you have
23 to go make it happen. We develop a product. That's
24 the role of our Laboratories, to develop a product
25 that works. And so that means you have to have data,

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1 and I think that permeates us whether it's safety or
2 program, or science, or whatever it is. You can't
3 have product without data.

4 CHAIRMAN CONWAY: Dr. Mansfield.

5 DR. MANSFIELD: Nothing.

6 CHAIRMAN CONWAY: Dr. Matthews.

7 DR. MATTHEWS: I get the sense from your
8 testimony that you feel your self-assessment program
9 is robust, and the question I have - have you made any
10 changes as a result of some of the organizational
11 changes we see coming out of Headquarters?

12 DR. ANASTASIO: I don't know if I'd say
13 our self-assessment program is robust. It needs some
14 attention. We have to do better. I think Camille
15 pointed out a good one, which is, we have to do
16 better, and we're looking to do that, the process of
17 doing that is integrating across the whole Site. You
18 know, you integrate at some level. You need
19 integration to happen across the whole Site, to be
20 able to see how activity is done in a consistent way,
21 and appropriately consistent way across the Site, is
22 an important thing that I think we're not doing well
23 enough at yet.

24 And how do you follow-up on corrective
25 actions, and make sure that the lessons you learn are

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1 actually implemented back into your system, so if you
2 discover something new, you change the procedures to
3 accommodate that.

4 So I think there are things that,
5 obviously, we need to improve, and I tried to
6 enumerate a number of them. On the other hand, I
7 think that we have adequate self-assessment. Maybe
8 that's the way I'd say it.

9 As far as changing things, the thing I
10 welcome the most about the new NNSA approach,
11 something that Camille mentioned, was the clarity of
12 roles and responsibilities. I think that's an
13 important thing that's happened with NNSA. It's not
14 clear to me as the Laboratory Director, who I need to
15 go to about what. And that's become very clear to me,
16 very clear to Camille, and Ambassador Brooks. And so
17 we understand each of our roles and responsibilities.

18 And I think we have a much more effective system
19 because of that.

20 DR. MATTHEWS: Thank you.

21 CHAIRMAN CONWAY: You know, for quite a
22 while the Board has been interested in ensuring that
23 the Laboratories help and support Pantex, the work at
24 Pantex, and from everything I can gather, it's my
25 impression now that Livermore has been very

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1 supportive, and I give credit to Jerry Dow. I don't
2 think --

3 DR. ANASTASIO: And so do I.

4 CHAIRMAN CONWAY: I don't think --
5 whenever we go as a Board to visit there, we usually
6 see his presence there, so I do want to compliment
7 Livermore, and Jerry specifically for the assistance
8 he's rendering, and we hope it continues.

9 DR. ANASTASIO: Yes, thank you. And
10 again, that's one of the reasons I mentioned our
11 weapons responsibilities, because I think we do take
12 that seriously. Although we're not responsible for
13 the operations at Pantex, we're responsible for giving
14 them the technical support they need to handle some of
15 the complicated issues of a partially assembled
16 weapon, etcetera, that are very complicated and
17 difficult. And that requires lots of analysis and lots
18 of data to understand what's the right thing to do.

19 CHAIRMAN CONWAY: Some of us remember
20 visiting Livermore back in the '50s and '60s, when you
21 were sort of the Little House on the Prairie. There
22 was nothing around you, just some vineyards that you
23 could look out. Now when I go out to Livermore and I
24 see these homes right up against your fence, it
25 stresses the importance of how you handle some of the

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1 materials that you are working with. And I guess if I
2 were to make any comment, I would hope to see a little
3 more attention given to things at the Superblock.

4 We've been kind of a little worried about
5 some of the attention to detail at the Superblock. As
6 the Lab Director, if you could bring some influence
7 there, I think it would be worthwhile.

8 DR. ANASTASIO: Yes, sir. I think we take
9 Superblock very seriously. It's obviously the thing
10 that keeps me up the most at night, and I think we
11 have a good operation there that can get better. And
12 clearly, the consequence of any serious mistake can be
13 very significant, and it deserves all the attention we
14 can afford to give it.

15 CHAIRMAN CONWAY: Amen.

16 DR. ANASTASIO: So we do take that
17 seriously. I think we have -- I am proud of how far
18 we've come in the last five plus years there. I think
19 we've made a lot of progress. Frankly, having work
20 there to do has helped us make a lot of progress, and
21 I think there's room to do better, and we're focused
22 on trying to do that.

23 CHAIRMAN CONWAY: Thank you. Kent, did
24 you have anything?

25 MR. FORTENBERRY: I just wanted to ask one

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1 question. You mentioned the risk methodology and how
2 it would focus you on the high-risk, high consequence,
3 high probability. Does the Columbia accident
4 assessment shed any light, or provide any insight in
5 that regard; which is basically saying I'm going to
6 focus my effort on the real high consequence items?

7 DR. ANASTASIO: Yes. I think what the
8 Columbia accident says is that you have to be always
9 questioning what those things are. You can't rest on
10 your assessment of any given point in time. As you go
11 forward, and especially in an institution like ours
12 where you're not doing the same thing over and over
13 again, so even though you think you might think you
14 understand, as the processes change, as the activity
15 on the job site changes, which it does because that's
16 the way we do business, you have to evolve your
17 thinking about where the risks are, and what are the
18 appropriate processes and procedures to compensate and
19 to mitigate those risks.

20 MR. FORTENBERRY: That's an important --

21 DR. ANASTASIO: And so that's why I say, I
22 think having a culture that's not just about procedure
23 is important, but to have the worker be responsible,
24 and feel responsible, make sure that they're always
25 thinking about what they're doing, and why they're

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1 doing. And always, part of that thinking would be
2 about safety, I think is an important aspect of the
3 culture. And to have that instilled in the worker,
4 and if they ever feel like they're going in a place
5 where they're uncomfortable, they know that they
6 should stop. And they know that if anybody gives them
7 a problem, they call me up directly and say I did this
8 and somebody is harassing me, and I'll fix it, because
9 they need to feel that way.

10 And so, yes, you need to have a risk
11 methodology to focus your attention, because we only
12 have 8,000 people in the Lab, so that's all the people
13 I can -- that's the maximum number I can put on any
14 kind of issue. So you have to --

15 MR. FORTENBERRY: We have a little bit
16 less than that here. But that's an important --

17 DR. ANASTASIO: So you always have to make
18 decisions.

19 MR. FORTENBERRY: And that's exactly what
20 I wanted to hear.

21 DR. ANASTASIO: You bet, but you have to
22 -- that's why I said in the very beginning. Our
23 safety systems are dynamic. They have to always be
24 changing so they reflect what it is you're doing on a
25 particular day, or how your mission is evolving, or

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1 how you've learned something new; and hence, you have
2 to incorporate that. So you can't rest on your
3 laurels, you have to always be thinking.

4 CHAIRMAN CONWAY: Thank you. With that,
5 thank you both for coming here today.

6 DR. ANASTASIO: Thank you.

7 CHAIRMAN CONWAY: And as we always do, I
8 ask if there's anybody in the audience that wishes to
9 come forward and make any comment. All right. If not
10 then, the record will remain open until the 16th, in
11 case anybody present here or from the public wishes to
12 submit a comment. The record will, as I say, be held
13 open until the 16th. And with that, we'll now recess,
14 subject to call of the Chair. Thank you all.

15 The record of this proceeding will remain
16 open until January 16, 2004. I would like to reiterate
17 that the Board reserves its right to further schedule
18 and otherwise regulate the course of this meeting, to
19 recess, reconvene, postpone, or adjourn this meeting,
20 and exercise its authority under the Atomic Energy Act
21 of 1954, as amended.

22 (Whereupon, the proceedings went off the
23 record at 11:38 a.m.)

24

25