1. Purpose

This procedure defines the process used at the Idaho National Laboratory (INL) for the performance of Management Self-Assessments (MSA) for readiness activities.

Management Assessments performed as part of the INL Integrated Assessment Program are defined in PDD-13710, Integrated Assessment Program, and are not covered by this procedure.

NOTE: *For the purposes of this procedure the MSA will be performed on an activity, whether the activity is the startup/restart of a facility, project, etc., for unrestricted operations or preparations for an Operational Readiness Review or Readiness Assessment.*

2. Scope and Applicability

Management Self-Assessments for readiness activities may be conducted for a variety of reasons, but the product is **always** the ability of management to affirm that an activity is at a state of readiness to commence or resume unrestricted operation of a defined scope of work. This generally includes a review of equipment, personnel, and procedures to ensure the activity can proceed safely and in compliance with applicable requirements.

LWP-9902, Startup and Restart of Nuclear Facilities, establishes the requirements (in accordance with DOE Order 425.1C) for the startup of new nuclear facilities and for the restart of existing nuclear facilities that have been shutdown. The readiness activities conducted under LWP-9902 are used to independently verify readiness and are not to be used to prepare for readiness. An MSA is required to be performed before an Operational Readiness Review (ORR) or a Readiness Assessment (RA) and may also be performed for other activities when desired by management.

This procedure applies to the conduct of any MSA for readiness activities at the INEEL. The MSA may be in preparation for an ORR, a RA, or for allowing unrestricted operation of nuclear activities that fall below the requirements of LWP-9902, Appendix C. This procedure also applies to preparations for unrestricted operation of radiological or other hazardous facilities or activities for which management determines that a MSA is the tool to be used to affirm readiness. This includes projects managed by Project Management, Construction, Environmental Restoration, Deactivation, Decontamination, and Decommissioning, Long Term Stewardship, or Voluntary Consent Order programs.

A graded approach to the rigor applied in the conduct of the MSA may be utilized dependent on the hazard classification of the activity. Less rigor is allowed for activities classified as a moderate hazard or lower. The application of this graded approach will be at the discretion of the final approval authority. Normally the final approval authority is

the cognizant Operations Director for a Hazard Category 3 and above nuclear facility, or the Division Director for Radiological and other than nuclear facilities.

Prior to an MSA, personnel at a facility or activity may conduct an internal review to determine readiness in accordance with defined criteria. For Projects, the defined criteria performed prior to the MSA would be completion of the final project transfer per the approved testing and turnover plan as described in MCP-2869, Construction Turnover and Acceptance, and LWP-7201, Management of INEEL Projects.

Upon affirmation of readiness by the facility or project manager, and the required approvals of the MSA criteria, the MSA will be conducted as directed by the Operations/Division Director (O/DD). Findings from the MSA will be categorized as either *pre-start* or *post-start findings* (see def.). Pre-start findings must be resolved before the activity can commence. In preparation for an ORR or RA, if the pre-start findings cannot be resolved prior to commencement of the ORR or RA, the findings must be identified as an open item on a manageable list that will be closed prior to startup or restart. As a minimum, the O/DD must approve, or delegate the approval authority in writing, the commencement of a RA, ORR, or unrestricted operations of the activity.

This procedure is applicable to all activities planned after the effective date. Activities planned before the effective date should use, to the maximum extent practicable, the process described herein.

3. RESPONSIBILITIES/PREREQUISITES

3.1 Responsibilities

Performer	Responsibilities
Operations/Division Director	Determines the graded approach to be utilized in conduct of the MSA Provides the final approval authority for startup/restart of the activity
Cognizant Manager	Holds overall responsibility for assuring readiness is attained for the activity
MSA Lead	Conducts the MSA and writes the MSA report
Activity Lead	Completes readiness activities for the defined scope of work

3.2 Prerequisites

The cognizant O/DD will normally be the BEA manager that determines that a MSA will be conducted for the activity. The O/DD should apply a graded approach to the rigor of the MSA dependent on the hazard characterization of the

activity. Normally, activities classified as moderate or lower hazard will utilize a graded approach to the conduct of a MSA.

If the cognizant O/DD does not retain startup/restart authority for the activity, the manager responsible for this approval must be delegated in writing.

4. INSTRUCTIONS

4.1 Cognizant ODD: Determine if the MSA will be conducted in accordance with Section 4.3, Full MSA, or 4.4, Graded Approach MSA.

4.1.1 A Full MSA is required to determine the readiness of a nuclear facility or activity to conduct an ORR/RA. A Full MSA is also recommended for determining the readiness of a high hazard activity for unrestricted operation.

4.1.2 A Graded Approach MSA will normally be conducted to determine the readiness of moderate or low hazard activities for unrestricted operation.

4.1.3 Document the type of MSA to be performed on Appendix D, Checklist for Completion of MSA Items.

NOTE: *Appendix D shall be used by the Cognizant Manager throughout this procedure to document the completion of major procedural steps. This will ensure consistency in documentation of MSAs regardless of type or reason for conducting and provide a schedule-tracking tool for completion of the MSA.*

4.2 *Cognizant Manager* (see def.): Conduct the MSA in accordance with Section 4.3, Full MSA, or 4.4, Graded Approach MSA, as directed by the O/DD and ensure the signatures in Appendix D are obtained upon completion of the procedural requirements listed.

4.3 Full MSA

4.3.1 Cognizant Manager: Identify the *Activity Lead* (see def.) and *MSA Lead* (see def.) for the activity.

4.3.2 Activity Lead/MSA Lead: Develop a MSA Plan which includes:

- A description of the activity.
- Prerequisites for readiness.
- Activity specific MSA criteria-using Appendix A, Management Self-Assessment Generic Criteria, as a guide.

- Identification of the *MSA Team* (see def.) and their responsibilities, as applicable.
- The time frame expected for accomplishment of the MSA.
- For MSAs in preparation for an ORR/RA, include the following items in the MSA Plan:
  - Address the core criteria in DOE O 425.1C, 4.d
  - Address the readiness to perform oversight of the activity
  - Address the critical review of the contractor's proposed manageable list of pre-start findings (if proposed) in order to ensure that the conduct of the DOE ORR will not be adversely impacted by the open items.

4.3.3 Activity Lead/MSA Lead: Obtain approval of the MSA Plan from the Cognizant Manager.

4.3.4 Operational Safety Board: Review and concur with the MSA Plan, including the MSA criteria, and determine if the criteria are adequate to affirm readiness.

4.3.4.1 If not adequate, direct the development of additional criteria and document in OSB meeting minutes.

4.3.5 Activity Lead: Develop a detailed activity specific readiness Task List that is cross-referenced to the MSA criteria. A sample format is provided in Appendix B.

4.3.6 Cognizant Manager: Review and approve the activity specific Task List.

4.3.7 Activity Lead: Using the approved activity specific readiness Task List, conduct the following:

4.3.7.1 Coordinate the completion of tasks to assure readiness.

4.3.7.2 Ensure the completion is documented by having the responsible personnel sign the specific task verification. By this signature the responsible person is validating that the task(s) have been completed in accordance with the defined criteria.

4.3.7.3 Coordinate the preparation of detailed objective evidence for each MSA criteria that includes all applicable documentation substantiating task completion / readiness, such as copies of procedures or drawings, records of interviews or inspections, etc.

4.3.7.4 Review the objective evidence with the Cognizant Manager to obtain concurrence that the evidence is acceptable and complete.

4.3.8 Activity Lead: Provide objective evidence to the MSA Lead for the applicable activity.

4.3.9 MSA Lead: If applicable, identify the MSA Team members and define their responsibilities. Document in the MSA report.

4.3.10 MSA Lead: Utilizing the MSA Plan, coordinate the team review of evidence folders for each MSA criteria.

4.3.11 MSA Lead: Utilizing the MSA Plan, coordinate the conduct of additional facility assessments and/or performance demonstrations as applicable.

4.3.12 MSA Lead: Issue a MSA report to the Cognizant Manager. Identify *pre-start* and *post-start* (see def.) findings, if any, in the MSA report.

4.3.12.1 Include the team member assignments, reports on the approved MSA Plan criteria, and a conclusion on the readiness of the activity in the MSA report.

4.3.13 MSA Lead: Review the MSA report with the Activity Lead and Cognizant Manager to ensure clear understanding of the findings. Provide recommendations for corrective actions for pre-start and post-start findings as appropriate.

4.3.14 Activity Lead: Develop corrective actions for findings using Appendix C. Identify corrective actions for both pre-start and post-start findings. Pre-start finding corrective action(s) has/have priority for closure.

4.3.14.1 Screen all prestart and poststart findings for inclusion into the Issue Communication and Resolution Environment (ICARE) following the requirements of LWP-13840, *Corrective Action System.*

4.3.14.2 Enter those prestart and poststart findings into the ICARE system that require tracking in accordance with the requirements of LWP-13840.

4.3.15 Cognizant Manager: Approve the corrective actions, assignee and due date.

4.3.16 Activity Lead: Complete pre-start corrective actions and demonstrate closure to the MSA Lead and Cognizant Manager. Document on Appendix C.

4.3.16.1 Place closure evidence in the applicable project document file.

4.3.17 MSA Lead and Cognizant Manager: Concur with closure documentation. Document on Appendix C.

4.3.18 Approval Authority: Review the MSA results and approve start or resumption of activity or approve commencement of the ORR or RA. Document approval on Appendix C.

4.4 Graded Approach MSA

4.4.1 Cognizant Manager: Identify the Activity Lead and MSA Lead for the activity.

4.4.2 Activity Lead/MSA Lead: Develop a MSA Plan which includes:

- A description of the activity.
- Activity specific MSA criteria-using Appendix A, Management Self-Assessment Generic Criteria, as a guide.

4.4.3 Activity Lead: Develop a Task List that is cross-referenced to the MSA criteria. A sample format is provided in Appendix B.

4.4.4 Activity Lead: Using the approved activity specific readiness Task List, conduct the following:

4.4.4.1 Coordinate the completion of tasks to assure readiness.

4.4.4.2 Ensure the completion is documented by having the responsible personnel sign the specific task verification. By this signature the responsible person is validating that the task(s) have been completed in accordance with the defined criteria.

4.4.4.3 Coordinate the preparation of detailed objective evidence for each MSA criteria that includes all applicable documentation substantiating task completion / readiness, as appropriate.

4.4.5 MSA Lead: If applicable, identify the MSA Team members and define their responsibilities. Document in the MSA report.

4.4.6 MSA Lead: Utilizing the MSA Plan, coordinate the team review of the completed Task List and/or evidence folders for each MSA criteria.

4.4.7 MSA Lead: Utilizing the MSA Plan, coordinate the conduct of additional facility assessments and/or performance demonstrations as applicable.

4.4.8 MSA Lead: Issue a MSA report to the Cognizant Manager. Identify *pre-start* and *post-start* (see def.) findings, if any, in the MSA report.

4.4.8.1 Include the team member assignments, reports on the approved MSA Plan criteria, and a conclusion on the readiness of the activity in the MSA Report.

4.4.9 Activity Lead: Screen all prestart and poststart findings for inclusion into the ICARE system following the requirements of LWP-13840, *Corrective Action System.*

4.4.9.1 Enter those prestart and poststart findings into the ICARE system that requires tracking in accordance with the requirements of LWP-13840.

4.4.9.2 Complete pre-start corrective actions and demonstrate closure to the MSA Lead and Cognizant Manager. Document on Appendix C.

4.4.9.3 Place closure evidence in the applicable project document file as appropriate.

4.4.10 Approval Authority: Review the MSA results and approve start or resumption of activity. Document approval on Appendix C.

5. RECORDS

Records Description	Uniform File Code	Disposition Authority	Retention Period
MSA Plan and Report	0352	A22-2-b-1	Cut off upon completion of the assessment. Destroy 10 years after cut off.
Appendix B	0352	A22-2-b-1	
Appendix C	0352	A22-2-b-1	
Appendix D	0352	A22-2-b-1	

6. DEFINITIONS

Activity Lead. A person assigned the responsibility for completing readiness activities for the defined scope of work.

Cognizant Manager. The manager holding the overall responsibility for assuring readiness is attained for the activity.

MSA Lead. A person assigned the responsibility for conducting the MSA. The MSA Lead should be independent from the assigned scope of work as much as practical.

MSA Team. As determined by the MSA Lead, those subject matter experts required to accomplish the assessment. The subject matter experts are personnel that have the background, education, qualifications, and assessment skills necessary to competently assess readiness.

Pre-Start Findings. A finding that must be corrected prior to allowing unrestricted operation of an activity. Such findings must demonstrably impact the capability of the operation to be performed safely and in compliance with the applicable requirements as determined by the MSA Lead. Management and process efficiency findings should normally be classified as post-start findings.

Post-Start Findings. A finding that should be corrected as soon as practical but is not required to be corrected prior to unrestricted operation.

Task List. A list of tasks that must be completed and verified as complete for a specific activity before unrestricted operations may begin. Appendix B is a sample format for the Task List cross-referenced to the MSA criteria.

7. References

PDD-13710, Integrated Assessment Program

LWP-9902, Startup and Restart of Nuclear Facilities

DOE Order 425.1C, Startup and Restart of Nuclear Facilities

MCP-2869, Construction Turnover and Acceptance

LWP-7201, Management of INEEL Projects

8. APPENDICES

Appendix A, Management Self-Assessment Generic Criteria Guide
Appendix B, Task List (Sample)
Appendix C, Pre-Start Finding Corrective Actions and Activity Approval (Sample)
Appendix D, Procedural Requirements Checklist
Appendix E, Procedure Basis

Appendix A

Management Self-Assessment Generic Criteria Guide

The following generic criteria should be used, as applicable, to develop specific criteria for the defined scope of work (activity).

1. Facility safety documentation that describes the "safety envelope" of the activity is in place and has been implemented.

    1.1. Safety Class, Safety Significant, and Defense in Depth Systems, Structures, and Components (SSCs) have been designated, as appropriate.

    1.2. The safety documentation characterizes the hazards/risks associated with the activity and should identify preventive and mitigating measures to protect the workers, public, and the environment from these hazards/risks.

    1.3. Facility safety documents are current, approved, and properly controlled.

    1.4. Criticality safety requirements are current, approved, and properly controlled.

    1.5. Facility safety and criticality safety requirements have been incorporated into applicable procedures and documents.

    1.6. Unreviewed Safety Questions (USQs) related to the activity are either resolved or DOE approved interim controls are implemented prior to conducting the activity.

    1.7. Facility Hazards List has be updated to reflect introduced/removed hazards.

2. The selection, training, and qualification for operations, maintenance, operations support personnel, and technical staff have been established, documented, and implemented.

    2.1. The training and qualification program encompasses the range of duties and activities to be performed.

    2.2. Personnel have been trained on the facility/activity safety documentation.

    2.3. Job categories and resources required for activity performance has been identified.

    2.4. Personnel have completed training on the latest revision of procedures required for activity performance.

2.5. The level of knowledge of managers, operations, operations support personnel and technical staff is adequate based on examinations / simulations / evaluations / drills, etc. and selected interviews, as applicable.

2.6. Potential and anticipated activities, including radiological abnormalities, have been addressed using simulation, walk-throughs, tabletop analysis, or similar method.

2.7. Modifications to the facility have been reviewed for potential impacts on training. Training has been performed to incorporate all aspects of these changes.

3. Resources are effectively allocated to address ESH&Q, programmatic, and operational considerations.

3.1. There are sufficient numbers of trained/qualified personnel to conduct and support operations.

3.2. Adequate facilities and equipment are available to ensure operational support services (e.g., operations, training, maintenance, waste management, environmental protection, industrial safety and hygiene, radiological protection, quality assurance, criticality safety, and engineering) are adequate for operations.

4. Administrative and engineering controls to prevent and mitigate hazards are tailored to the work being performed and associated hazards.

4.1. There are adequate and correct procedures and/or work control documents for operating the activity systems and these procedures are current, approved, and properly controlled.

4.2. Job Safety Analyses have been performed in accordance with procedures such as MCP-3562, "Hazard Identification, Analysis and Control of Operational Activities," MCP-3571, "Independent Hazard Review," STD-101," Integrated Work Control Process" or ANL-W Environment, Safety and Health Manual, Subsection 4.1K, "Safe Work Program and Hazard Assessment Process" and the controls to address the hazards implemented into the applicable procedures.

4.3. Health and Safety walk-downs have been completed in the operating areas required to support the activity and deficiencies have been resolved.

4.4. An adequate startup or restart program has been developed to confirm operability of equipment, viability of procedures and documents, and performance and knowledge of operators. Dry runs, if required have been successfully performed.

4.5. The formality and discipline of operations is adequate to conduct work safely and programs are in place to maintain this Conduct of Operations posture.

4.6. Radiological Work Permits and associated personnel protective equipment are in place to support the activity.

4.7. Environmental regulatory and permit requirements have been reviewed to ensure compliance for the activity.

5. Equipment (systems and components) required for activity performance has been identified, meets the design criteria for the activity, and a system is in place to maintain control over the design.

5.1. Configuration control has been maintained on modifications to equipment.

5.2. Required calibrations and preventive maintenance on equipment have been identified and verified to be complete in accordance with the required periodicity.

5.3. Required engineering reviews of preventive (PM) and predictive maintenance have been performed to determine if changes are needed to required periodicity and that current PM's are adequate.

5.4. Equipment has been verified operational.

5.5. The material condition of support equipment will support the safe conduct of operations.

5.6. Requirements from vendor technical manuals and data have been incorporated into activity documents.

5.7. Spare parts inventory for activity and support equipment is adequate for activity performance.

5.8. Hoisting and rigging equipment required for the activity has been tested/calibrated and lifts required have been classified, reviewed, and approved.

6. The roles/responsibilities and the division of these roles/responsibilities for the scope of work have been clearly defined.

6.1. The operating organization(s) roles and responsibilities have been clearly defined, understood, and are effectively implemented with line management responsibility for control of safety.

6.2. Functions, assignments, responsibilities, and reporting relationships between the operating organization and support organizations are clearly defined, understood, and effectively implemented.

7. A feedback and improvement process has been established to identify, evaluate, and resolve deficiencies and recommendations made by self-assessments, oversight groups, review teams, etc.

    7.1. There are no open ICARE issues that impact the activity that must be closed prior to commencement of the activity. If these corrective actions exist, they should be identified as pre-start findings.

    7.2. A review of Lessons Learned from similar activities has been conducted.

8. Procurement Quality has been addressed.

    8.1. A review for counterfeit parts has been conducted.

    8.2. The Quality Level Designation has been confirmed.

    8.3. The supplier(s) are on the approved supplier list for the equipment.

    8.4. The vendor data was reviewed and found to be complete.

    8.5. The receiving inspection was completed and the plan acceptable and signed off.

    8.6. Non-conformance Reports are open.

9. Other criteria deemed necessary by the Cognizant Manager, Activity Lead, MSA Lead, or OSB.

Appendix B

Task List (SAMPLE)

ACTIVITY: _____

NOTE 1: *Each task identified must have a completion verification signature. If the activity is being completed/verified by other than the person listed, then indicate name of verifier and obtain signature from verifier when the activity is complete. Supporting documentation that demonstrates closure of the activity will be assembled in evidence files. Evidence files will be provided to the MSA lead for review.*

NOTE 2: *Items listed in parenthesis are for direction only and should be deleted when the document is complete.*

1. Safety Documentation

(List each safety document that is applicable to the activity.)
(List any deficiencies or open actions for each as applicable.)

Safety documents for the conduct of the activity are approved and implemented in the applicable operating procedures.

_____	_____	_____
Responsible Person	Signature	Date

2. Training

(List training to be conducted for the activity including approved plans, type of training [procedure refresher, facility walkdown, drills, etc.], and date completed.)

(Place training documentation in evidence file [such as signed attendance roster])

All assigned activity personnel have completed training as specified for the activity.

_____	_____	_____
Responsible Person	Signature	Date

3. Resources

(List the resources required for the activity)

Sufficient resources are allocated for the activity.

Responsible Person	Signature	Date

4. Hazard Identification and Mitigation

(List JSAs performed to identify hazards and the mitigation of these hazards, including procedures used for incorporation.)

(Identify the hazards control procedure utilized for hazard identification and mitigation.)

Hazard identification and mitigation is complete and engineering or administrative controls are in place to ensure the work can be safely performed.

Responsible Person	Signature	Date

5. Equipment

(List all equipment [with the exception of common tools and consumable items] needed for the activity and status of each [e.g. operable, shutdown, out of service, etc.].)

(List any open Work Orders, provide copies of closed WOs as appropriate, especially to document completion of equipment PMs.)

(List PM due date for equipment if PM required, PM schedule for completion if past due, etc.)

(List calibration date for instruments as applicable.)

(List each critical lift needed for the activity. Provide copy of approved lift plan in the evidence file. If not approved, list what is needed and completion date.)

(The equipment needed for the activity has been verified operational.)

All equipment necessary to perform the activity is operable. PMs/Calibrations are current and in date. All critical lift plans are approved.

Responsible Person	Signature	Date

6. Roles and Responsibilities

(List each document that defines roles and responsibilities of the operations, operations support, and ESH&QA organizations.) (The roles/responsibilities may be part of a local procedure or defined in the Project Execution Plan.)

Roles and responsibilities for the scope of work has been clearly defined and implemented.

Responsible Person	Signature	Date

7. Feedback History

(Provide a list of ICAREs applicable to the activity, open actions, and status, and what needs to be done to close an open action. Suggest a search be done by ICARE person in the organization and maintain search results in evidence file.)

(List each ORPS action applicable to your facility, status, and what needs to be done to close an open action-affecting the activity. Suggest search in ORPS and maintain search results in evidence file.)

(Applicable lessons learned have been incorporated into the activity)

All ICARE/ORPS action items affecting the activity have been completed and the action items closed in ICARE/ORPS or required mitigative actions are in place and adequate.

Responsible Person	Signature	Date

8. Procedures

(List the procedures required to perform the scope of work. If procedure is not ready to work, then list actions still needed [e.g. HEG review, DAR required, final approvals, validation, etc.].)

(Hazard controls and requirements from upper tier documents are traceable to implementing procedures.)

The procedures and forms necessary to conduct the activity are approved and ready for use.

Responsible Person	Signature	Date

9. Procurement Quality

(Provide evidence of procurement quality document review actions.)

Quality has reviewed both the procurement actions and quality related documents.

Responsible Person	Signature	Date

10. Other

(List any other criteria necessary for verifying the readiness of the activity).

APPROVED:

Submitted: Activity Lead	Date

Approved: Cognizant Manager	Date

Appendix C

Pre-Start Finding Corrective Actions And Activity Approval (SAMPLE)

Activity: _____ MSA Report Reference: _____

Prepared by (Activity Lead): _____ Date: _____

NOTE: *Document each corrective action for pre-start finding(s) identified from the MSA report. Attach additional information as needed to document closure. Place closure documents in the applicable project document file and sign when complete. Obtain approvals required below.*

Action:
1.

_____

_____

_____

Assigned To _____ **Due Date** _____

Action:
2.

_____

_____

_____

Assigned To _____ **Due Date** _____

Action:
3.

_____

_____

_____

Assigned To _____ **Due Date** _____

CORRECTIVE ACTIONS APPROVED (Action, assignee, and due date)

Submitted: Activity Lead	Date
Approved: Cognizant Manager	Date

CLOSURE APPROVAL

The corrective actions identified have been completed. The objective evidence for completion and closure have been reviewed and placed in the facility evidence file. By signature below, I concur that the pre-start findings have been closed and recommend approval to start or resume the activity.

Closure Concurrence: Cognizant Manager	Date
Closure Concurrence: MSA Lead	Date

STARTUP/RESTART APPROVAL

The startup/restart of the activity is approved or the ORR or RA may commence.

Approval Authority	Date

Appendix D

Procedural Requirements Checklist

Step	Requirement	Responsibility	Date Completed	Signature	Comments
4.1	Determine MSA Type	Operations or Division Director			Circle type of MSA: FULL GRADED APPROACH
4.3.1 4.4.1	Identify the Activity Lead	Cognizant Manager			Name:
4.3.1 4.4.1	Identify the MSA Lead	Cognizant Manager			Name:
4.3.2 4.4.2	Develop the MSA Plan	Activity Lead / MSA Lead			Ensure MSA Plan includes all the criteria in applicable step.
4.3.5 4.4.3	Develop Task List	Activity Lead			Ensure Task List covers MSA Criteria.
4.3.7.3 4.4.4.3	Ensure objective evidence is gathered for each MSA Criteria	Activity Lead			None
4.3.12 4.4.8	Issue MSA Report	MSA Lead			Ensure MSA Report includes pre-start and post-start findings and all the criteria in applicable step
4.3.16 4.4.9	Complete pre-start corrective actions	Activity Lead			Ensure objective evidence of closure is placed in applicable project document file
4.3.18 4.4.10	Review MSA results and approve start or resumption of activity or commencement of ORR or RA.	Approval Authority			None

Appendix E

Procedure Basis

Step	Basis/Summary	Source
4.1, 4.2	Determine type of MSA	ID O 425.A CRD 2.b, e.
4.3	Conduct MSA to determine readiness of a nuclear facility for conducting an ORR/RA	ID O 425.A CRD 2.b
4.3.1	Identify MSA Team Leader	ID O 425.A CRD 2.b.(1)
4.3.9	Determine MSA Team members	ID O 425.A CRD 2.b.(2)
4.3.2	Items to include in MSA Plan	ID O 425.A CRD 2.b.(3)
4.3.13	MSA Team Leader ensure all issues are dealt with in timely manner	ID O 425.A CRD 2.b.(4)
4.3.12	Issue MSA Report	ID O 425.A CRD 2.b.(5)

Step	Basis/Summary	Source
All other steps under Section 4.3	As noted in procedure	Best Management Practice derived from DOE Complex Industry Standard
4.4	Graded Approach MSA	ID O 425.A, CRD 2.e. Best Management Practice derived from DOE Complex Industry Standard