

# ES&H RESPONSIBILITIES

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## OAK RIDGE OFFICE ASSESSMENT PROGRAM

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1. PURPOSE. This document addresses the roles and responsibilities to be used for implementing the Oak Ridge Office (ORO) Assessment Program. The objectives of this program are to ensure effective, efficient ORO programs and operations through application of comprehensive and integrated assessment activities.
2. APPLICABILITY. The provisions of this document apply to ORO Federal staff and oversight activities (not contractors and leasees/regulates).
3. RESPONSIBILITIES.
  - a. Manager, ORO.
    - (1) Ensures that appropriate processes are in place to oversee effective execution of mission activities and implementation of requirements.
    - (2) Ensures that line management develops effective, documented programs for conducting oversight assessments of their contractors' programs.
    - (3) Ensures that management assessments are conducted of ORO activities.
    - (4) For ORO-wide assessments requested by the ORO Manager, ensures the development of CAPs consistent with Departmental expectations and this Manual.
    - (5) Controls and approves changes to CAPs and individual due dates where approval authority resides with ORO. Approves the CAPs within 60 calendar days of issuance of the final report.
    - (6) For CAPs that require Headquarters (HQ) approval, submits the CAPs to the appropriate DOE HQ offices for approval or approves the CAPs if approval has been delegated.
    - (7) Approves and issues the ORO IAS prior to the start of each FY and any changes, which may result in quarterly updates, as required.
    - (8) Requests independent assessments to be conducted of ORO and contractor activities, as necessary, and ensures they are included on the IAS.
    - (9) Approves the charter for the Three-Year Assessment Plan Working Group (Working Group).
    - (10) Approves and issues the *Three-Year Assessment Plan* prior to the start of the FY and the annual updates, as required.(11) Sets expectations for ORO line managers Walkthrough Surveillance Program.
  - b. Organizations (Assistant Manager for Science; Assistant Manager for Environmental Management; Assistant Manager for Administration; Assistant Manager for Nuclear Fuel Supply; Assistant Manager for Environment, Safety and Health [AMESH]; Assistant Manager for Financial Management; Assistant Manager for Security and Emergency Management; Office of Chief Counsel; Office of Partnerships and Program Development; Public Affairs Office; and Diversity Programs and Employee Concerns Manager).

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- (1) Ensure that an organizational assessment plan is developed to identify assessment commitments for the upcoming three FYs to ensure that required assessments are performed. The organization's assessment plan information shall be submitted to the ORO Manager to be included in the *Three-Year Assessment Plan*. The *Three-Year Assessment Plan* is updated, as required, prior to the start of the FY.
- (2) Ensures unfettered access to information and facilities in order to implement an effective oversight program consistent with applicable laws and requirements.
- (3) Ensure required assessments for their organization are captured in the *Three-Year Assessment Plan*.
- (4) Review and concur on annual and quarterly (if required) updates to the *Three-Year Assessment Plan*.
- (5) Assign an organizational representative to participate on the Three-Year Plan Working Group. The representative should be empowered to speak for their organization.
- (6) Ensure that the organizational assessment schedule is developed to identify planned assessments for the FY. Formal assessments (including external assessments) that are low-volume, high-threshold shall be submitted to the ORO Manager to be included in the ORO IAS, which is updated quarterly, as required.
- (7) Ensure the qualifications and independence of assessment team members who perform independent assessments.
- (8) Ensure appropriate assessments are captured in the IAS, and approve their organizations' IAS.
- (9) Ensure IAS assessments are completed as scheduled or obtain the ORO Manager's approval of the schedule changes.
- (10) Ensure the IAS is consistent with the *Three-Year Assessment Plan*.
- (11) Ensure the effectiveness of Federal and contractor programs (as applicable) and management systems, including assurance and oversight systems.
- (12) Ensure their organization's implementation of requirements via a documented management assessment (self-assessment) program.
- (13) Ensure a management assessment is conducted of their organization, at least annually, to measure the effectiveness of the management systems and processes and the ability of the organization to meet its objectives.
- (14) Maintain qualified staff to conduct assessments, as applicable.
- (15) Ensure all assessments (including management, independent, and IAS) are entered and kept current in the Oak Ridge Issues, Open Items, Nonconformances System (ORION).
- (16) Ensure that key assessment information (i.e., subject, type, category, team leader, driver, start and end dates, status, final report, etc.), findings, corrective actions (CAs), and

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proficiencies are documented and entered into ORION for all assessments in the appropriate fields.

**NOTE:** Corrective Actions tracked in HQ databases and/or contractor tracking system are not intended to be tracked in ORION.

- (17) Ensure that key walkthrough information (e.g., organization performing the walkthrough, assessor(s), site, contractor, facility, project, and functional areas covered), and findings are documented and entered into ORION in the appropriate fields.
- (18) For organizations overseeing contractors, ensure that oversight programs and processes are in place to assess contractor performance.
- (19) For organizations overseeing contractors, ensures that operational awareness activities and a Walkthrough Surveillance Program are implemented.
- (20) Ensure findings (Priority 1, Priority 2, or Priority 3) or proficiencies are appropriately categorized in the assessment report and prior to being entered into ORION.
- (21) Perform root cause analysis on recurring or significant findings, as applicable.
- (22) Ensure root cause analysis is performed for Priority 1 findings.
- (23) Ensure validation is performed for closure of Priority 1 findings.
- (24) Ensure that the reports for all assessments are loaded into ORION.
- (25) Ensure that CAs for Priority 1 and Priority 2 findings are tracked to closure, that findings (Priority 1, Priority 2, Priority 3) are trended, and performance measures are established to support continuous improvement.
- (26) Ensure that CAs for Priority 1 and Priority 2 findings are approved, prioritized, and completed in a timely manner consistent with their significance.
- (27) Ensure apparent causes are assigned in ORION for Priority 1 and Priority 2 findings.
- (28) Ensure verifiable evidence is attached or referenced in ORION for closure of findings Priority 1 and Priority 2 and CAs.
- (29) Ensure Federal staffs prepare and submit CAPs consistent with this Manual.
- (30) Ensure CAPs are developed for assessments that they “own” within 30 calendar days of receipt of the final report and that these are approved within 60 calendar days of receipt of the report.
- (31) Control and approve changes to CAPs and individual due dates for reviews that they own.
- (32) Ensure that Federal staff prepare, as applicable, and submit CAPs consistent with Departmental expectations.

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- (33) Ensure that completion of CAs and resolution of issues are implemented as stated in the CAP and that changes to CA commitments and to CAPs are approved by the member of management that approved the initial CA or CAP.
  - (34) Perform effectiveness reviews of CAP implementation, as appropriate. Effectiveness reviews are required for findings entered in the HQ Corrective Action Tracking System (CATS).
  - (35) Identify any applicable lessons learned (LL) as a result of conducting assessments and walkthroughs.
  - (36) Establish formal mechanisms and processes for collecting both qualitative and quantitative information on performance and use this information to improve performance.
- c. AMESH.
- (1) Manages the ORO Assessment Program for the ORO Manager by developing ORO command media, leading/coordinating the development of the *Three-Year Assessment Plan* and the IAS, administering ORION, and performing analysis of ORO assessment information.
  - (2) Supports the ORO Manager and the line organizations in conducting assessments and walkthroughs, as requested.
  - (3) Manages the execution of Environment, Safety and Health (ES&H) assessments of ORO contractors and of ORO line and support organizations, as requested.
  - (4) Coordinates the ORO Lessons Learned and Operating Experience Program activities for ORO.
  - (5) Conducts performance analysis activities in order to provide feedback to the ORO Manager and the line organizations for tracking and trending ES&H and quality issues, occurrences, and CAs associated with findings identified in internal and external assessments of ORO activities.
  - (6) Provides an ORO system and tools for planning, scheduling, conducting, and tracking ORO assessments, walkthroughs, findings, and CAs.
  - (7) Serves as the point of contact for the DOE Office of Environment, Safety and Health (EH) Corrective Action Management Program Team.
  - (8) Assigns an organizational representative who leads the annual ORO effort to develop the *Three-Year Assessment Plan* and who also serves as the Working Group Chair.
  - (9) Provides the template for the *Three-Year Assessment Plan* to the Working Group.

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- (10) Ensures that the final updated *Three-Year Assessment Plan* is consolidated and provided to the ORO Manager for approval.
  - (11) Ensures the IAS is consolidated from ORION and provided to the ORO Manager for approval.
  - (12) Prepares a monthly report for ORO senior management on the status of CAs.
  - (13) Reports on progress and changes to the approved IAS as part of the Data Display Capability (War Room Concept) senior staff discussions.
  - (14) Ensures a one-time notification is sent to the Assistant Managers and Safety Advocates when a Priority 1 finding is entered into ORION (enforced by the system).
- d. Working Group.
- (1) Implements the *Three-Year Assessment Plan Working Group Charter* (Document Management [DM] 204546).
  - (2) Collects assessment requirements from their respective organizations.
  - (3) Ensures all assessments are documented consistently across the organizations in the template provided by the Working Group Chair.
  - (4) Annually evaluates planned assessment schedules from each organization to:
    - Check for consistency with the *Three-Year Assessment Plan*.
    - Assist their organization in determining which assessments will be included in the IAS. The Working Group members evaluate their respective organizations' draft IAS to ensure that it is consistent with the *Three-Year Assessment Plan*.
    - Make recommendations with respect to assessment topics, assessment gaps, and independent assessments.
    - Identify opportunities for ORO-wide consolidation to minimize redundancy, enhance assessment quality, and optimize subject matter expert (SME) resource use.
  - (5) Annually develops a draft update to the *Three-Year Assessment Plan*.
  - (6) Submits the draft update to the ORO Senior Board for comments.
  - (7) Dispositions comments received on the *Three-Year Assessment Plan*.
  - (8) Prepares the final updated *Three-Year Assessment Plan* to be submitted to the ORO Manager for approval.
  - (9) Develops LL on the process and recommend improvements to ORO management.
  - (10) Keeps track of the status of ORO's adherence to the final updated *Three-Year Assessment Plan* and update the plan as needed.

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- e. Management Review Committee (Composed of the Safety Advocates).
  - (1) Meets on a periodic basis (generally quarterly) with Trending Review Team to discuss trends from assessment, walkthrough, and event-driven data and may adjust trending code assignments to improve consistency and usability of data.
- f. Trending Review Team (Technical Staff assigned by Safety Advocates).
  - (1) Meets on a periodic basis (generally monthly) to evaluate and discuss trends from assessment, walkthrough, and event-driven data.
  - (2) Reports results of trending analysis to Safety Advocates.
  - (3) Adjusts ORION trending code assignments, as appropriate, to improve consistency and usability of data for trending.
  - (4) Advises ORION users on how to input data to improve consistency and usability for trending.

## 4. REFERENCES.

- a. DOE P 226.1, DEPARTMENT OF ENERGY OVERSIGHT POLICY, dated June 10, 2005.
- b. DOE O 226.1, IMPLEMENTATION OF DEPARTMENT OF ENERGY OVERSIGHT POLICY, dated September 15, 2005.
- c. DOE G 414.1-1A, MANAGEMENT ASSESSMENT AND INDEPENDENT ASSESSMENT GUIDE, dated May 31, 2001.
- d. DOE O 414.1C, QUALITY ASSURANCE, dated June 17, 2005.
- e. DOE O 420.1B, FACILITY SAFETY, dated December 22, 2005.
- f. DOE O 440.1A, WORKER PROTECTION MANAGEMENT FOR DOE FEDERAL AND CONTRACTOR EMPLOYEES, dated March 27, 1998.
- g. DOE P 450.4, SAFETY MANAGEMENT SYSTEM POLICY, dated October 15, 1996.
- h. DOE G 450.4-1B, INTEGRATED SAFETY MANAGEMENT SYSTEM GUIDE (VOLUME 1 AND 2) 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 DOE ACQUISITION REGULATION, dated March 1 2001.
- i. DOE O 470.2B, INDEPENDENT OVERSIGHT AND PERFORMANCE ASSURANCE PROGRAM, dated October 31, 2002.
- j. “*ORION Usage Guide*,” dated May 2006.
- k. “*Safety Attainment Board Charter*”

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- l. EM Policy Memorandum, "*Policy for Content and Implementation of Corrective Action Plans (CAP)*," dated October 4, 2001.
- m. Office of Science "*Manager's Walkthrough Guide*"
- n. "*Three-Year Assessment Plan Working Group Charter*" (DM ID Number 204546)
- o. "*Three-Year Assessment Plan*"
- p. "*Integrated Assessment Schedules*"
- q. Complex, Corporate-Level ORO CAP example, "*2005 ORO Integrated Safety Management System Review*" (DM ID Number 250421)
- r. Simple ORO CAP example, "*Safety System Oversight Program Implementation Review*" (DM ID Number 224840)
- s. Memorandum that established the DOE Nuclear Criticality Safety Improvement Initiative, dated November 11, 1999.
- t. EH CATS "*Data Change Request Form*"
- u. ORO and NNSA "*Stop Work/Suspend Work*" Responsibility Declaration, dated October 2000.