



Department of Energy
Washington, DC 20585

June 30, 2000

The Honorable John T. Conway
Chairman
Defense Nuclear Facilities Safety Board
625 Indiana Avenue, NW, Suite 700
Washington D.C. 20004

Dear Mr. Chairman:

We are pleased to forward the Office of Oversight Safety Issue Corrective Action Process Procedure to the Defense Nuclear Facilities Safety Board (DNFSB). This procedure outlines the internal framework for monitoring the Department of Energy process for addressing and resolving Safety Issues identified during the conduct of Oversight appraisal activities. It supplements Safety Issue corrective action process requirements outlined in DOE Implementation Plan for DNFSB Recommendation 98-1, Plan to Address and Resolve Safety Issues Identified by Internal Independent Oversight, dated March 10, 1999.

The procedure delineates the Office of Oversight process for entering Safety Issues identified during the conduct of appraisal activities in the DOE Corrective Action Tracking System, evaluation of line management corrective action plans (CAPs), and resolution of disagreements concerning the CAPs.

If you have any questions, please contact me at 301-903-6457.

Sincerely,

A handwritten signature in black ink, appearing to read "S. David Stadler".

S. David Stadler, PhD
Deputy Assistant Secretary
Office of Oversight
Environment, Safety and Health

Enclosure

cc:
E. Livingston, S
M. Whitaker, S-3.1
D. Michaels, EH-1
S. Cary, EH-1
T. Wyka, Safety Management Implementation Team

<p>U.S. Department of Energy</p>	<p>Subject: Office of Oversight Safety Issue Corrective Action Process</p>	<p>SP: EH-2.05.01 Rev.: 0 Eff. Date: 4/10/00</p>
<p>Office of Oversight</p>	<p><i>[Signature]</i> Acting Director, Oversight Planning and Analysis</p>	<p>Controlled Copy</p>
<p>Standard Procedure</p>	<p><i>[Signature]</i> 4/10/00 Deputy Assistant Secretary Date</p>	<p>Number 1</p> <p>Page 1 of 6</p>

1.0 PURPOSE

This procedure implements the Office of the Deputy Assistant Secretary (DAS) for Oversight program to effectively monitor the Department of Energy (DOE) process for addressing and resolving Safety Issues and Judgements of Need identified during the conduct of Office of Oversight appraisal activities. It supplements Safety Issue corrective action process requirements delineated in Attachment 2, DOE Order 414.1A, Quality Assurance, and satisfaction of Judgements of Need requirements delineated in DOE Order 225.1A, Accident Investigations. Throughout this procedure, the term Safety Issues will also apply to Judgements of Need, unless otherwise specified. This procedure specifies:

- the process and responsibilities for dissemination and follow-up of identified Safety Issues,
- monitoring development and reporting of corrective actions to resolve identified Safety Issues,
- evaluating the timeliness and effectiveness of Corrective Action Plans and their implementation, and
- participating in resolution of disputes concerning development and implementation of corrective actions if the actions are deemed inadequate.

2.0 APPLICABILITY

This procedure applies to all personnel assigned to the Office of Oversight.

3.0 PROCEDURAL REQUIREMENTS

3.1 General

- 3.1.1 An integral part of the DOE Integrated Safety Management system is the Office of Oversight providing information and analysis to management on the effectiveness and trends of the Department's environment, safety and health (ES&H); and line management addressing and resolving Safety Issues identified by the Office of Oversight and Accident Investigation Boards during the conduct of appraisal activities that could contribute to

potential adverse impact on the ES&H of workers and the public. Oversight appraisal activities include safety management evaluations; special reviews, studies, inspections and investigations; and accident investigations.

- 3.1.2 This process includes line management developing and implementing corrective actions in response to Oversight and Accident Investigation Board Safety Issues, tracking and reporting the status of these corrective actions, and effective closure of the corrective actions taken to resolve the identified Safety Issues.
- 3.1.3 The Office of Oversight is responsible to monitor the line management corrective action process in response to identified Safety Issues and review the timeliness and adequacy of Corrective Action Plan development and implementation.

3.2 Development of Safety Issues in DOE Corrective Action Tracking System (CATS)

- 3.2.1 Office Directors responsible for conducting the appraisal will electronically provide the identified Safety Issues outlined in the Oversight appraisal report that requires corrective actions and follow-up to the Oversight Document Control Center (DCC) Lead Contact within five working days following the date the DAS for Oversight approved and signed the transmittal issuing the report. The Office Director responsible for Accident Investigations will electronically provide the Judgements of Need to the DCC Lead Contact within five working days following the date of report acceptance by the Appointing Official. Information provided will include the appraisal report title, date of the transmittal issuing the report, and the following information for each Safety Issue addressed in the appraisal report:

- Safety Issue description title – short title identifying the Safety Issue
- Safety Issue description – a short outline of the Safety Issue
- Guiding principle(s) applicable to the Safety Issue
- Core function(s) applicable to the Safety Issue
- Functional area applicable to the Safety Issue

- 3.2.2 This information should be submitted electronically in Microsoft Word with a spelling and grammar check. An example of the information to be provided is attached.
- 3.2.3 The DCC Lead Contact will enter the above information for each Oversight Safety Issue in the DOE Corrective Action Tracking System web-based database within five working days following receipt of the information from the Office Director. The DCC will also retain copies of all Oversight appraisal reports and the signed transmittals issuing the report.

3.3 Evaluation of Corrective Action Plans

- 3.3.1 Office Directors will monitor development of the Cognizant Line Manager's (CLM) Corrective Action Plan (CAP) addressing all Safety Issues identified in the appraisal report. The CAP is to be approved by the Program Secretarial Officer (PSO) or designee within 60 calendar days from the issuance of the appraisal report, and a copy of the final

CAP will be forwarded by the PSO to the Office of Oversight for review. The PSO will also forward a copy of any approved CAP completion date extensions. For accident investigations, CLMs will deliver the CAP to the PSO and Office of Oversight within 30 calendar days from the acceptance of the report by the appointing official.

- 3.3.2 Office Directors will complete a review of the CAP to determine the timeliness and adequacy of the planned corrective actions within 30 calendar days of the CAP approval.
- 3.3.3 Office Directors should attempt to informally resolve any disagreements with the CLM or PSO concerning the timeliness or adequacy of the CAP.
- 3.3.4 Office Directors will prepare a response memorandum from the DAS for Oversight to the applicable CLM and PSO on the results of the CAP review. This response will be an agreement (with or without comments as appropriate) that the plan is responsive to the Safety Issues identified in the appraisal report or disagreement with the plan because corrective actions are not sufficiently responsive to the Safety Issues. The memorandum will be submitted through the Oversight Corrective Action Lead Contact to the DAS for Oversight for approval and signature.
 - 3.3.4.1 If disagreements of the CAP are informally resolved with the CLM or PSO, the agreed to resolution of the CAP will be annotated in the Oversight response memorandum.
 - 3.3.4.2 Disagreements with the CAP stated in the Oversight response memorandum will include specific reasons for the disagreement to include the following information:
 - reference specific Safety Issue number listed in the CATS
 - reference specific corrective action by title and number
 - specify deficiency of the corrective action
 - specify reason for deficiency
 - reference(s) (if applicable)
 - 3.3.4.3 The Oversight response memorandum will include a request for the PSO to provide an informal or formal response on proposed actions to resolve the stated disagreement(s) with the CAP within 30 days from the issuance of the memorandum. An Oversight memorandum on results of the follow-up review will be submitted to the PSO. A revised CAP or formal change to the CAP incorporating the agreed changes will also be requested.
- 3.3.4 Office Directors will monitor CATS to ensure agreed changes to the CAP are entered. Procedures for accessing CATS are outlined in the CATS User's Guide for Direct Web Access.
- 3.3.5 The DCC will be provided a written copy of all CAPs, included as an addressee in the distribution of all Office of Oversight official correspondence concerning CAP reviews and extensions, and provided a copy of official correspondence received by the Office of Oversight concerning the CAP reviews and extensions.

3.4 Evaluation of CAP Implementation

- 3.4.1 Office Directors may monitor the implementation of the approved CAPs as necessary to support management and oversight activities such as future appraisals. Monitoring may include CATS reviews, briefings provided by line management, and other follow-up activities as appropriate.
- 3.4.2 Office Directors should attempt to informally resolve any disagreements with the CLM concerning timely and adequate implementation of the CAP.
- 3.4.3 If attempts to informally resolve these disagreements with the CLM are not successful, the Oversight Corrective Action Lead Contact will be notified and actions should be initiated to informally request assistance from the PSO to resolve the disagreements.
- 3.4.4 If informal attempts to resolve the disagreements with the CAP implementation are unsuccessful, Office Directors will prepare a formal memorandum from the DAS for Oversight to the CLM and PSO explaining the specific reason(s) for this concern and recommendations, as appropriate. The memorandum will include a request for an informal or formal response concerning the disagreements within 30 calendar days. The memorandum will be submitted through the Oversight Corrective Action Lead Contact to the DAS for Oversight for approval and signature.
- 3.4.5 The DCC will be included as an addressee in the distribution of all Office of Oversight official correspondence concerning CAP implementation reviews and will be provided a copy of all official correspondence received by the Office of Oversight concerning the reviews.

3.5 Appraisal Activity Follow-up of CAP Implementation

- 3.5.1 During the conduct of appraisal activities, Office Directors should review completed corrective actions to Oversight Safety Issues addressed by their Office or other Oversight Offices in previous appraisal reports, if applicable.
- 3.5.2 In the event the completed corrective action is deemed unsatisfactory in successfully resolving the issue, a new Safety Issue will be addressed in the appraisal report.

3.6 Dispute Resolution Process

- 3.6.1 If informal and formal attempts to resolve the disagreements between the Office of Oversight and the CLM and PSO concerning the CAP or CAP implementation are unsuccessful, Office Directors will prepare a memorandum from the DAS for Oversight to the Assistant Secretary of Environment, Safety and Health (EH-1) explaining the disagreements, actions initiated to resolve the disagreements, and request for EH-1 resolution assistance. Copies of all formal correspondence concerning the disagreements will be attached to the memorandum. A proposed memorandum from the EH-1 to the

applicable PSO concerning the disagreements and requesting resolution will also be attached. The proposed memorandum will be submitted through the Oversight Corrective Action Lead Contact to the DAS for Oversight for approval and signature. The DCC will be included as an addressee in the distribution of the memorandum.

- 3.6.2 In the event the EH-1 decides to elevate the disagreements to the Office of the Secretary, Office Directors will prepare a proposed memorandum from the EH-1 to the applicable PSO stating this decision. Office Directors will also prepare a proposed memorandum from the EH-1 to the Secretary or designee explaining the disagreements, actions initiated to resolve the disagreements, and request for Secretary or designee resolution. Office Directors will prepare a transmittal memorandum from the DAS for Oversight to the EH-1 forwarding the proposed memorandum. The transmittal memorandum will be submitted through the Oversight Corrective Action Lead Contact to the DAS for Oversight for approval and signature. The DCC will be included as an addressee in the distribution of the memorandums.

4.0 ROLES AND RESPONSIBILITIES

4.1 The Office Directors are responsible for the following functions:

Electronically provide the identified Safety Issues outlined in the Oversight appraisal report to the Lead Contact.

Monitor development and complete a review of the CAP. Prepare a formal memorandum from the DAS for Oversight to the applicable CLM and PSO on the results of the CAP review.

Evaluate adequacy of completed corrective actions on a selective basis during appraisal activities.

Initiate and follow-up informal actions with the CLM to resolve any disagreements concerning the adequacy or timeliness of the CAP or implementation of the CAP.

Initiate and follow-up formal action to resolve any disagreements concerning the CAP or implementation of the CAP if informal resolution actions are not successful.

Provide copies of all correspondence concerning CAP approval and implementation to the DCC.

4.2 The Oversight Corrective Action Lead Contact is responsible for the following functions:

Coordinate the development, implementation and maintenance of the Office of Oversight Safety Issue Corrective Action Process.

Serve as principal advisor to the DAS for Oversight and Office Directors on the Oversight Safety Issue Corrective Action Process.

4.3 The DCC Lead Contact is responsible for the following functions:

Maintain administrative monitoring of the CATS to include entering Oversight report data and Safety Issues.

Maintain copies of all formal correspondence submitted by the Office of Oversight to DOE elements and submitted to the Office of Oversight by DOE elements concerning evaluation of CAPs, evaluation of CAP implementation, and any dispute resolution activities.

5.0 REFERENCES

DOE Order 414.1A Quality Assurance, September 29, 1999

DOE Order 225.1A, Accident Investigations, November 26, 1997

Department of Energy Implementation Plan to Defense Nuclear Facilities Safety Board Recommendation 98-1, March 10, 1999

Office of Oversight Environment, Safety, and Health Appraisal Process Protocols, July 1999

Corrective Action Tracking System (CATS) User's Guide for Direct Web Access, Document Number EH-72-1999-09-0001.Ver.1, June 30, 1999

Corrective Action Tracking System (CATS) Data Dictionary, December 8, 1999

SAMPLE OF INFORMATION REQUIRED FOR CATS DATA ENTRY

Report Title: Focused Review of __

Transmittal Date: January 13, 2000 (this is the date of the signed transmittal)

Issue Title: Implementation of __ Contractor Oversight Programs Not Fully Effective

Issue Description: The implementation of the __ contractor oversight programs is not fully effective and lacks systematic application. Deficiencies were identified in implementation of the technical assessment program, inadequate documentation of management walk-throughs, and inadequate self-assessments of the __ line oversight program.

Guiding Principle: 1 and 2

Core Function: 5

Functional Area: Quality Assurance