

Y-12 Site Assessment Report
F&I Commitment 25 – DNFSB Recommendation 2004-1

Performance Objective 1.0 Contractor Program Documentation: Contractor line management has established a comprehensive and integrated operational assurance system which encompasses 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.

Evaluation: Performance Objective partially met, judgment of need previously identified with corrective action in place.

Results: This objective was evaluated through an internal review. A crosswalk was developed between the CRAD criteria and the program elements and gaps were identified. A review of current corrective actions was evaluated to determine their applicability to the CRAD criteria.

Criteria 2-6 were assessed by a combination of the 2005 OA-40 ES&H Assessment, NNSA-YSO assessments, and internal reviews. A comparison of the criteria compared to existing program elements indicated compliance with these criteria. Internal procedures define the BWXT Y-12 assessment, injury and illness reporting, operational event reporting, worker feedback, issues management, lessons learned, and performance measures programs and processes. Results of these processes are reviewed with NNSA YSO monthly as part of the performance evaluation process.

Criteria 1 was assessed as part of the Impact Assessment of implementing DOE O 226.1. The review identified that a program description document that fully details the programs and processes that comprise the contractor assurance system and is approved by both the contractor management and DOE did not exist. This gap is being corrected by revising the site Quality Assurance Program Description to incorporate the description of the Contractor Oversight Program. The site Quality Assurance Program Description is approved by contractor management and DOE annually. The revised site Quality Assurance Program Description is due to NNSA YSO by February 13, 2006 and is being tracked through the Y-12 Correspondence Tracking System.

Judgment of Need: There is one ongoing commitment action resulting from the Impact Assessment of implementing DOE O 226.1. This action is listed and briefly described in the Site Action Plan.

Performance Objective 2.0 Contractor Program Implementation:

2.1: Assessments and Performance Indicators: Contractor Line management has established a rigorous and credible assessment program that evaluates the adequacy of programs, processes, and performance on a recurring basis. Formal mechanisms and processes have been established for collecting both qualitative and quantitative information on performance and this information is effectively used as the basis for informed management decisions to improve performance.

Evaluation: Performance objective partially met.

Results: This objective was thoroughly assessed during the 2005 OA ES&H Assessment, as well as through internal assessments, Corporate Independent ISM Assessment, NNSA YSO assessments, and external assessments. With the exception of some minor implementation deficiencies identified during NNSA YSO assessments and internal assessments which have been corrected, the assessments indicated that this performance objective was fully met.

Criteria 1-3 were formalized in internal procedures which define the program for scheduling and conducting management and independent assessments and correcting deficiencies identified through those assessments. These procedures define independence requirements for conducting independent assessments and training requirements for the conduct of both management and independent assessments.

Criteria 4-5 were established in an internal Contractor Assurance System (CAS) guidance document. Within the CAS, each identified manager (e.g. functions/business, program, facility) establishes a basis for metrics in the compliance matrix with oversight by the division manager/director. Each metric is defined as to how it is measured and criterion values supporting green, yellow, or red designations. Established metrics are validated, peer-reviewed, and coordinated with the customer and other affected managers. The owning manager certifies the initial process and resulting metric to the cognizant division manager/director. The metrics and quad charts are systematically updated using the best available information.

Noteworthy Practices: Management and Independent Assessments procedures, Y15-902 and Y15-903 respectively. The Independent Assessment program was cited as a noteworthy practice and the Management Assessment program received positive comments in the 2005 OA-40 ES&H assessment.

Judgment of Need: None identified

Performance Objective 2.0 Contractor Program Implementation:

2.2 Operating Experience: The Contractor has developed and implemented an Operating Experience program that communicates Effective Practices and Lessons Learned during work activities, process reviews, and incident/event analyses to potential users and applied to future work activities.

Evaluation: Performance Objective partially met. Judgment of need previously identified with corrective action in place.

Results: This objective was assessed during the 2005 OA ES&H Assessment.

Criteria 1-2: While a formal process was in place to identify and disseminate lessons learned from internal and external sources and to take action on applicable lessons learned, the OA-40 identified a deficiency in the process as it pertained to external lessons learned. The current program places the responsibility to identify and disseminate external lessons learned on individual line managers rather than a central point of contact. As a result, external lessons learned were not being evaluated for applicability to BWXT Y-12 nor were internal lessons learned being shared with the rest of the DOE complex consistently.

Criteria 3-4: The OA-40 assessment did not identify any deficiencies associated with worker feedback. Common feedback mechanisms are described in site plans/program documents and include employee concerns programs, telephone or intranet "hotline" processes for reporting concerns or questions, pre-job briefs, job hazard walk-downs by workers prior to work, post-job reviews, employee suggestion forms, safety meetings, employee participation in committees and working groups, and labor organization input. Lessons learned are reviewed and applied as appropriate in job planning, during pre-job briefs, and in Operational Safety Boards.

Judgment of Need: There is one ongoing corrective action plan resulting from the 2005 OA Assessment. These actions are listed and briefly described in the Site Action Plan.

Performance Objective 2.0 Contractor Program Implementation:

2.3 Event Reporting: Contractor line management has established and implemented programs and processes to identify, investigate, report, and respond to operational events and incidents and occupational injuries and illnesses.

Evaluation: Performance Objective partially met. Judgment of need previously identified with corrective action in place.

Results: This objective was assessed during the 2005 OA ES&H Assessment, as well as in internal management assessments and an Internal Audit.

Criteria 1-2: While formal programs and processes were established for identifying, reporting, analyzing, and resolving operational events, accidents and injuries, the OA assessment identified a deficiency in the area of accident and injury investigations. The deficiency established insufficient documentation and investigation of occupational injuries and illnesses involving work control deficiencies for consistent identification of root causes and implementation of effective corrective and preventive actions. Internal procedures to critique and report operational events define time requirements for reporting and investigating events. An internal management assessment and internal audit identified deficiencies associated with the process for tracking non-reportable events and implementation of requirements for non-reportable events. Corrective action plans were developed and have been closed, with the exception of the field verification and were therefore not listed under the judgment of need.

Judgment of Need: There is one ongoing corrective action plan resulting from the 2005 OA Assessment. These actions are listed and briefly described in the Site Action Plan.

Performance Objective 2.0 Contractor Program Implementation:

2.4 Issues Management: The Contractor has developed and implemented a formal process to evaluate the quality and usefulness of feedback, and track to resolution performance and safety issues and associated corrective actions.

Evaluation: Performance Objective partially met. Judgment of need previously identified with corrective action in place.

Results: This objective was assessed during the 2005 OA ES&H Assessment, as well as in internal independent assessments and Y-12 Site Office oversight assessments.

Criteria 1-6: While formal programs and processes are in place for identifying, analyzing, tracking, and resolving performance and safety issues, the OA assessment identified a deficiency for those safety deficiencies identified during less formal assessments to ensure appropriate documentation, categorization, evaluation, causal analysis, extent of condition evaluations, and recurrence controls. A deficiency was noted in the September 2005 Y-12 Site Office (YSO) Monthly Assessment Report specific to the roles and responsibilities of the Issues Management Prioritization and Risk Board (IMPRB) that analyzes, categorizes, and assigns performance and safety deficiencies and found that some aspects of the IMPRB process are not clearly established and documented.

Judgment of Need: There is one ongoing corrective action plan resulting from the 2005 OA Assessment and one corrective action plan resulting from the YSO Monthly Assessment Report. These actions are listed and briefly described in the Site Action Plan.

YSO Assessment Report
F&I Commitment 25 – DNFSB Recommendation 2004-1

Performance Objective 3.0 - DOE Line Management Oversight:

DOE line management has established and implemented effective oversight processes that evaluate the adequacy and effectiveness of contractor assurance systems and DOE oversight processes.

Evaluation: Performance Objective has been met. To obtain further improvement a judgment of need has been identified which includes existing corrective actions and a new action related to lessons learned.

Results: This objective was evaluated through numerous reviews such as the 2005 OA-40 ES&H Assessment, OA-50 Safeguards and Security Evaluation Inspection, ISO 9001 registration audit, QAS 1 programmatic review, and internal review. A crosswalk was developed between the CRAD criteria and the program elements.

Criteria 1– 4; 6-10 were assessed by a combination of the 2005 OA-40 ES&H Assessment, OA 50 Safeguards and Security Evaluation Inspection, ISO 9001 registration audit and internal reviews. A comparison of the criteria compared to existing program elements indicated compliance with these criteria. In September 2005, OA-40 noted YSO’s oversight program as mature and improving. “YSO uses an integrated office management solution that has greatly improved YSO programs for documentation of operational awareness information, issues management, staff tasking, correspondence tracking, assessment scheduling, corrective action tracking and internal performance indicators. The YSO Technical Qualification Program is a mature, efficient and effective program.” Internal procedures define the YSO assessment program, issues management and performance measures programs and processes. Results of these processes are reviewed within YSO weekly as part of the management system description meeting.

However, OA-40 did note that YSO had not ensured that tasks identified in activity hazard analyses for NNSA construction projects were defined in sufficient detail to support effective identification of hazards and controls. YSO has included this issue in the judgment of need and corrective actions are noted in the site action plan.

Criteria 5 were assessed during the 2005 OA-40 assessment and were found to be partially met. Even though YSO has a mature and improving oversight program, OA noted an opportunity for improvement to address specific oversight of the contractor’s lessons learned program.

Criteria 11 were assessed as part of the 2005 OA-40 ES&H assessment. Historically, Oak Ridge Operations Office managed the Employee Concerns Program that encompassed YSO and the Y-12 site. Recently, the NNSA Service Center was assigned responsibility for supporting the ECP for YSO; however the Service Center does not

currently provide all the needed support. Currently, the ECP at YSO was found to have weaknesses in processing, training, investigative files and assessments. YSO is establishing a fully compliant stand alone program which will be maintained until the Service Center capability is online and demonstrates the ability to assume the responsibilities for handling employee concerns.

Judgment of Need: The opportunity for improvement to specifically address oversight of the contractors lessons learned program will be addressed in the scheduling of subject assessment in the FY 06 schedule. There are two ongoing actions resulting from the OA-40 Assessment that addresses the Employee Concerns Program and hazard analysis and control. These actions are listed and briefly described in the Site Action Plan.

Y-12 Site Action Plan
 F&I Commitment 25 – DNFSB Recommendation 2004-1

Judgment of Need 1: There is one ongoing commitment action resulting from the Impact Assessment of implementing DOE O 226.1.

For existing corrective actions/initiatives for each objective:

Existing Corrective Actions:

Criterion	Source of Corrective Action/Identification Number	Corrective Action	Due Date	Action Owner / Organization
1.1	YCATS COR-Y-12-12/1/2005-61783	Commitment to NNSA/YSO as part of the impact assessment for DOE Order 226.1. The oversight program description will be incorporated into the site Quality Assurance Plan (QAP).	2/17/06	Chuck Moseley/Tia Finney QAPA

Y-12 Site Action Plan
F&I Commitment 25 – DNFSB Recommendation 2004-1

Judgment of Need 2: There is an ongoing corrective action plan resulting from the 2005 OA Assessment and one corrective action plan resulting from the YSO Monthly Assessment Report.

Existing corrective actions/initiatives for each objective:

Existing Corrective Actions:

Criterion	Source of Corrective Action/Identification Number	Corrective Action	Due Date	Action Owner / Organization
2.2	OA Review CAPS S6473/I53275/A104377	Revise Y15-331 to define the formal system for identifying, disseminating and using external Lessons Learned to be administered by the site Lessons Learned coordinator.	5/30/06	Kathie Hensley QA/PA
	OA Review CAPS S6473/I53275/A104378	Revise Y15-331 to define process for communicating Product Notices.	5/30/06	Kathie Hensley QA/PA
	OA Review CAPS S6473/I53275/A104379	Upon issuance of new Operating Experience DOE Order (replacement for Lessons Learned guidance), perform gap analysis between requirements and current process and revise Y15-331, Lessons Learned Procedure as appropriate.	5/30/06	Kathie Hensley QA/PA
	OA Review CAPS S6473/I53275/A104423	Revise Y15-331 to define criteria and process for identifying internal Lessons Learned for submission to the DOE Lessons Learned site.	5/30/06	Kathie Hensley QA/PA
2.3	OA Review CAPS S6473/I53273/A014367	Evaluate CONOPS Rep process, accident and illness evaluations, Feedback and Improvement Working Group results, Safety Walk-downs, and MBWA, determine current methodology, to include significance screening, identify gaps and define path forward, or justify no change required, and incorporate results into corrective actions.	3/29/06	Shirley Wilson QA/PA

Criterion	Source of Corrective Action/Identification Number	Corrective Action	Due Date	Action Owner / Organization
2.3	OA Review CAPS S6473/I53273/A014440	Revise Y73-170 Safety and Health Incident Reporting and Investigation to incorporate the following items: <ol style="list-style-type: none"> 1. Clearly defined investigation methodology, including supervisor and manager review and concurrence, forms, and analysis process. 2. Management review process for reports to ensure quality of investigations and effectiveness of corrective actions and; 3. Corrective action tracking process 	6/15/06	David Neubauer ES&H/Safety
	OA Review CAPS S6473/I53273/A014441	Safety department will establish a department level procedure to include internal review process and forms used in the accident investigation reporting and trending system.	7/13/06	David Neubauer ES&H/Safety
	OA Review CAPS S6473/I53273/A014442	Perform a 1 st quarter FY07 assessment to verify effectiveness of the corrective actions.	12/28/06	David Neubauer ES&H/Safety
2.4	OA Review CAPS S6473/I53269/A104367	Evaluate CONOPS Rep process, accident and illness (finding 12), FIWG, Safety Walk downs, and MBWA, determine current methodology, to include significance screening, identify gaps and define path forward, or justify no change required, and add resulting actions to this plan.	3/29/06	Shirley Wilson QA/PA
	OA Review CAPS S6473/I53269/A104368	Revise Y15-312, Issues Management procedure, as appropriate to include any actions resulting from the gap analysis.	6/21/06	Shirley Wilson QA/PA
	OA Review CAPS S6473/I53269/A104369	Revise Y15-312, Issues Management procedure, to better define and clarify requirements for trending analysis.	6/21/06	Shirley Wilson QA/PA
	OA Review CAPS S6473/I53269/A1070	Evaluate Y15-312 requirement to not enter all Level C issues from Management Assessments and non-reportable critiques that were corrected within five working days of documenting the minimum assessment components, as defined in Part C of Y15-902. Revise Y15-312 if decision is made to change or justification for no change.	6/21/06	Shirley Wilson QA/PA

Criterion	Source of Corrective Action/Identification Number	Corrective Action	Due Date	Action Owner / Organization
2.4	OA Review CAPS S6473/I53269/A107071	Define process for causal determination for appropriate cause indication for Level C issues and revise Y15-312 to incorporate.	6/21/06	Shirley Wilson QA/PA
	OA Review CAPS S6473/I53269/A107072	Combine the IMPRB Significance Determination worksheet and the UCN Significance Determination worksheet to a single form that will be used for all applications.	12/8/05 Closed	Shirley Wilson QA/PA
	OA Review CAPS S6473/I53269/A107073	Revise Y14-004 to require the use of the critique module which will require Significance Determination checklist be completed and documented in the module.	12/15/05 Closed	Damien Bowers QA/PA
	OA Review CAPS S6473/I53269/A107074	Revise the IMPRB Charter to delete authorization for IMPRB to waive extent of conditions and causal analysis.	12/8/05 Closed	Shirley Wilson QA/PA
	OA Review CAPS S6473/I53269/A107075	Revise Y15-312, Issues Management, to eliminate IMPRB role in waiving Extent of Conditions Review and Causal Analysis and to establish a new documented waiver process for internal Level B issues that requires approval by the Issues Manager and Performance Assurance Manager, and update the IMPRB definition.	6/21/06	Shirley Wilson QA/PA
	OA Review CAPS S6473/I53269/A107076	Revise Y15-312, Issues Management, to improve guidance and provide clarification on extent of conditions review.	6/21/06	Shirley Wilson QA/PA
2.4	YSO MAR CAPS S6473/I53206/A103955	Revise the IMPRB Significance Determination Worksheet to delete Section V. General Questions, B. Scope of Issue/Extent of Conditions and C. Root Cause Analysis to eliminate the IMPRB role in waiving causal analysis and extent of conditions for Level B issues. Section V.A. General Questions, Review of Similar Issues addresses duplicate issues.	12/8/05 Closed	Shirley Wilson QA/PA

Criterion	Source of Corrective Action/Identification Number	Corrective Action	Due Date	Action Owner / Organization
2.4	YSO MAR CAPS S6473/I53206/A103956	Revise Y15-312, Issues Management procedure to eliminate IMPRB role in waiving Extent of Conditions Review and Causal Analysis on Level B NNSA/YSO or external issues, to establish a new documented waiver process for internal Level B issues that requires approval by the Issues Manager and Performance Assurance Manager, and to update the IMPRB definition.	6/21/06	Shirley Wilson QA/PA
	YSO MAR CAPS S6473/I53206/A103957	Ensure the website administrator updates the website with revision 6 of the IMPRB Charter to maintain the current revision.	11/29/05 Closed	Shirley Wilson QA/PA
	YSO MAR CAPS S6473/I53206/A103958	Revise the IMPRB Charter to clarify that the Co-Chair will perform a CAPS database analysis of similar issues prior to the meetings and clarify that it is the responsibility of the primary IMPRB members to ensure that their designated backup attends the meeting when the primary member is unable to attend.	12/8/05 Closed	Shirley Wilson QA/PA
	YSO MAR CAPS S6473/I53206/A103775	Perform a field verification/corrective action effectiveness review.	9/21/06	Shirley Wilson QA/PA

Y-12 Site Action Plan
F&I Commitment 25 – DNFSB Recommendation 2004-1

Judgment of Need 3:

The opportunity for improvement to specifically address oversight of the contractor’s lessons learned program will be addressed by scheduling assessment(s) in the FY 06 schedule. There are two ongoing actions resulting from the OA-40 Assessment that addresses hazard analysis and the Employee Concerns Program.

Corrective Action:

Criterion	Corrective Action	Deliverable	Due Date	Action Owner / Organization
3.5	FY 06 Assessment schedule will include a review of contractor’s lessons learned program.	Lessons learned program review scheduled in FY 06 assessment schedule.	2/15/06	Mike Glasman/AMOP

Existing Corrective Action:

Criterion	Source of Corrective Action/Identification Number	Corrective Action	Due Date	Action Owner / Organization
3.1	OA- 40 Review ISS-M0-11/28/2005-70711	Provide additional guidance to the Corp of Engineers regarding expectations for hazard analysis including the following: (1) AHA content – hazard identification, analysis, and identification of controls; (2) Sufficient level of detail of activity description to allow for adequate analysis; (3) Evaluation of controls needed based on MSDS information; (4) Evaluation of site specific pre-existing conditions/hazards; and (5) Monitoring required to demonstrate adequate controls (i.e., noise). (3/31/2006) Develop and implement an assessment plan for NNSA contracted jobs to provide additional construction safety oversight and review including assignment of an NNSA Federal Project Manager. (3/31/2006)	3/31/06	Susan Morris/AMTS

Criterion	Source of Corrective Action/Identification Number	Corrective Action	Due Date	Action Owner / Organization
3.11	OA 40 Review ISS-MO-11/28/2005-84269	<ul style="list-style-type: none"> a) Issue an approved YSO procedure that governs the YSO Employee Concern Program. To address the specific finding, the following elements will be included in this procedure, at a minimum: Roles and responsibilities of the ECP Manager and supporting staff members; the establishment, content requirements and maintenance of ECP records; ECP process requirements and flow of information to required YSO personnel and managers; and Actions to take to ensure the anonymity of personal information. (3/31/2006) b) Schedule and complete an assessment of the contractor's ECP. (4/30/2006) c) Issue a service level agreement between the YSO and Service Center detailing the agreed upon type and level of support for the ECP. (4/30/2006) d) Document, in writing, the YSO person designated as the YSO Employee Concerns Program (ECP) Manger. (1/31/2006) 	4/30/06	Sam Gaines/AMA