OFFICE OF INDEPENDENT OVERSIGHT AND PERFORMANCE ASSURANCE

APPRAISAL PROCESS PROTOCOLS

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U.S. Department of Energy
Office of Independent Oversight
and Performance Assurance
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Preface

The Office of Independent Oversight and Performance Assurance (OA) was established in May 1999 as a direct report to the Secretary of Energy. Establishment of OA was one part of the Secretary of Energy's reorganization and strengthening of U.S Department of Energy (DOE) safeguards and security programs. In October 2001, in a realignment of responsibilities for the independent oversight of both the DOE and the National Nuclear Security Administration (NNSA), the Secretary of Energy added responsibility for independent oversight of environment, safety, and health (ES&H) programs to OA's mission. Consequently, OA is responsible to the Secretary of Energy (and to the NNSA Administrator for NNSA matters) for all independent oversight of safeguards and security, cyber security, ES&H, and emergency management policies and programs DOE-wide, including the NNSA.

OA prepared these appraisal process protocols as part of a continuing effort to enhance the quality, consistency, and contribution of independent oversight activities. These process protocols describe the general process and principal activities for evaluating both the effectiveness of DOE safeguards and security, cyber security, ES&H, and emergency management policies, and of DOE line management in implementing those policies throughout the DOE. These process protocols describe the overall philosophy, approach, scope, and methods to be used by all OA organizations when conducting their specific appraisals.

Subordinate organizations will conform to the guidance provided herein when developing and implementing the specific procedures and techniques appropriate and necessary for accomplishing their unique independent oversight responsibilities in the areas of DOE safeguards and security, cyber security, ES&H, and emergency management.

The appraisal process protocols have evolved through experience and have been developed to be flexible and easily adaptable as they are applied to the various policies, sites, facilities, and activities being evaluated. As part of the continuing effort to improve the independent oversight process, OA anticipates making periodic updates and revisions to these process protocols in response to changes in DOE program direction and guidance, insights gained from independent oversight activities, and feedback from customers and constituents. Therefore, users of these process protocols as well as other interested parties are invited to submit comments and recommendations to the Office of Independent Oversight and Performance Assurance.

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Acronyms

CSO	Cognizant Secretarial Officer
DOE	U.S. Department of Energy
ES&H	Environment, Safety and Health
NNSA	National Nuclear Security Administration
OA	Office of Independent Oversight and Performance Assurance
OA-1	Office of the Director, Office of Independent Oversight and Performance Assurance
OA-10	Office of Safeguards and Security Evaluations
OA-20	Office of Cyber Security and Special Reviews
OA-30	Office of Emergency Management Oversight
OA-40	Office of Management and Information Resources
OA-50	Office of Environment, Safety, and Health Evaluations
SNM	Special Nuclear Material
S&S	Safeguards and Security

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Definitions

Appraisal: An umbrella term referring to any oversight activity conducted by the Office of Independent Oversight and Performance Assurance (OA). Periodic inspections, special inspections, assessments, special studies, integrated safety management evaluations, and special reviews are all forms of appraisals.

Closeout Briefings: Meetings at which a summary of inspection results is provided to U.S. Department of Energy (DOE) management. A closeout briefing for managers of the DOE field element and the responsible DOE contractor(s) is normally conducted by the OA team prior to their departure from the inspected facility.

Cognizant Secretarial Officer: The Assistant Secretary/Director responsible for a set of facilities or laboratories (e.g., Lawrence Livermore National Laboratory, Y-12, Test Reactor Area at Idaho National Engineering and Environmental Laboratory) within a multi-program field office.

Corrective Action Plan: A document that provides, for each finding or deficiency addressed, planned corrective actions and the responsible individual and organizations; the date of action initiation; key milestones; the date of expected completion of the action; how actions will be tracked to closure; steps to address root causes and generic applicability; and the mechanism for verifying closure and ensuring that such actions are sufficient to prevent recurrence. May also provide a detailed discussion of longer-term enhancements and upgrades, as well as descriptions of actions taken and compensatory measures already in place. Line management responsibilities and specific requirements for the preparation of corrective action plans are established in DOE Order 470.2A, *Security and Emergency Management Independent Oversight and Performance Assurance Program*.

Cyber Security: The protection resulting from all measures designed to prevent deliberate or inadvertent unauthorized disclosure, acquisition, manipulation, modification, or loss of information contained within computer networks and systems, as well as measures designed to prevent denial of authorized use of the system.

Deficiency: An inadequacy that is found during an inspection and is listed for corrective action.

DOE: U.S. Department of Energy. References to DOE in this protocol, unless specifically indicated otherwise, are assumed to encompass the National Nuclear Security Administration.

Emergency Management: The policies, programs, and capabilities associated with identifying, categorizing, reporting, managing, and mitigating abnormal conditions that threaten the safety or security of a site, its workers, the public, or the environment.

Environment, Safety and Health: Activities through which the DOE defines, develops, and implements its responsibilities under Federal laws, regulations, executive orders, and other directives to provide for the safe operation of its facilities and the protection of its facilities, workers, the public, and the environment.

Finding: A concise, factual statement of key observations and conclusions (usually addressing a policy or program deficiency) resulting from an oversight activity.

Integrated Safety Management Evaluation: A scheduled periodic appraisal of integrated safety management systems, as defined by DOE Order 450.4, *Safety Management Systems*, including their application to contractor and project management and to specific activities and work with a potential for adverse impacts on worker or public safety or on the environment.

Lead Program Secretarial Officer: An Assistant Secretary/Director to whom assigned field offices directly report and who has overall ownership responsibility for the field offices.

Mitigation: The action(s) necessary to recover, to the greatest extent possible, from adverse effects of an incident, or measures that are in place or taken to wholly or partially compensate for weaknesses in program implementation.

National Security Interests: Such activities performed at DOE or DOE contractor, subcontractor, consultant, or other facilities or installations that involve classified matter, special nuclear materials, nuclear weapons, nuclear weapons components and devices, government property of high value or that would impact on DOE program continuity, or otherwise are deemed important.

Performance Tests: Activities conducted to evaluate all or selected portions of safeguards security systems or cyber security, ES&H, or emergency management programs as they exist at the time of the test.

Program Secretarial Officer: An Assistant Secretary/Director funding work at a particular site or lab via a "customer" relationship with the field element.

Safeguards: An integrated system of physical protection, material accounting, and material control measures designed to deter, prevent, detect, and respond to unauthorized possession, use or sabotage of special nuclear material. Safeguards include the timely indication of possible diversion, and credible assurance that no diversion has occurred. Also see **Security.**

Security: Activities through which the DOE defines, develops, and implements its responsibilities under the Atomic Energy Act of 1954, as amended, Federal statutes, executive orders and other directives, for the protection of Restricted Data and other classified information or matter, nuclear weapons and nuclear weapon components, and for the protection of DOE and DOE contractor facilities, property, and equipment. Security is also applied to special nuclear materials. When physical, personnel, and technical security are combined with material control and material accountability, the protection is referred to as safeguards.

Site Safeguards and Security Plan: A description of the systems and procedures implemented and planned to protect DOE security interests and other property at a specific site.

Validation: The process by which OA ensures the factual accuracy of collected data and ensures that identified deficiencies, and their impacts, are effectively communicated to responsible managers and organizations.

Section 1

INTRODUCTION

Contents

Vision

The Office of Independent Oversight and Performance Assurance's (OA) vision is to stimulate improvements in the U.S. Department of Energy's (DOE) safeguards and security, cyber security, environment, safety and health (ES&H) and emergency management programs by providing the Secretary of Energy and other senior managers with independent, objective, accurate, timely, and credible information regarding the effectiveness of those programs and by identifying potentially useful and effective program improvements.

Mission

OA's mission is to provide the Secretary of Energy and senior DOE managers with an independent assessment of the effectiveness of DOE policy and DOE site performance in the areas of safeguards and security, emergency management, cyber security, ES&H, and other critical functions as directed by the Secretary. OA is the exclusive focal point for DOE Headquarters onsite inspections of DOE sites in all areas of safeguards and security, emergency management, cyber security, and ES&H. The office's authority is established by DOE Order 470.2A, *Security and Emergency Management Independent Oversight and Performance Assurance Program*, as well as other DOE directives (e.g., DOE Order 151.1, *Emergency Management System*, and DOE Guide 450.4-1B, *Integrated Safety Management System Guide*) that identify responsibilities for oversight in the areas of safeguards and security, cyber security, emergency management, and ES&H. The office is structured to meet mission requirements. Figure 1 provides an organizational diagram.

Scope of Independent Oversight Appraisals

All OA activities are designed to satisfy its mission requirements. The office's oversight function is "independent" from DOE's line program offices (line management) in that the office has no responsibility for operations or programs, policy development, or technical support to line managers, and does not receive guidance or direction from line managers below the Secretarial level.

The independent oversight program includes a number of activities, collectively referred to as appraisals, related to evaluating DOE policy and DOE and contractor line management performance in the areas under its purview. Appraisals can generally be grouped into four types of activities: (1) inspections, (2) follow-up reviews, (3) assessments and special studies, and (4) special reviews. Brief descriptions of these types of appraisals follow.

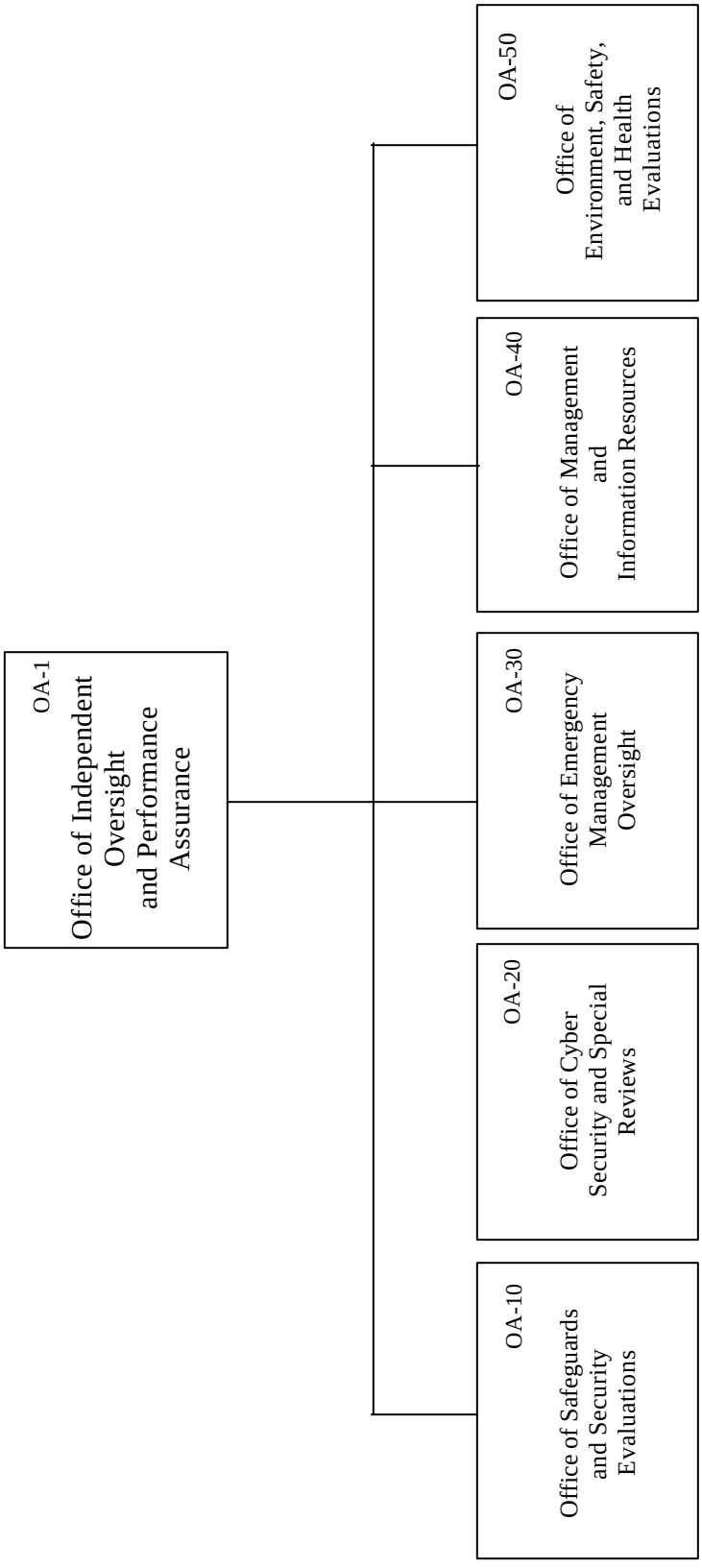

FIGURE 1. Office of Independent Oversight and Performance Assurance Organization

Inspections

Inspections are a primary tool for assessing the adequacy of DOE policies and the effectiveness of policy implementation. **Periodic inspections** are scheduled activities that determine the adequacy of program performance at a specific site or location. They are broad in their program coverage and technical span, and may include evaluation of major performance tests and exercises. **Integrated safety management evaluations** are included in this category of appraisal. **Special inspections** are usually more limited in scope than periodic inspections, often focusing on a limited number of program elements, and may include: major performance tests, evaluation of line management exercises, unannounced inspections, remote scanning or penetration tests of cyber security capabilities, or other inspection activities that may be required on a one-of-a-kind basis. A validated report is published for each inspection, findings are identified, and program performance is normally rated according to the independent oversight rating system described in Section 5 of this document. When appropriate, needed improvements are identified. Proposed corrective actions are reviewed for adequacy, and findings and associated corrective actions are tracked for subsequent follow-up.

Follow-up Reviews

Follow-up reviews are conducted to determine the status and progress of corrective actions and other activities being taken in response to deficiencies previously identified by OA appraisals. Ratings may be assigned as a result of follow-up reviews.

Assessments and Special Studies

Assessments and special studies are conducted to address concerns that transcend performance at a specific site or location. **Assessments** might address the effectiveness of program elements as implemented across DOE by analyzing complex-wide program issues, or they might analyze the implementation of a specific policy item throughout the complex. **Special studies** are performed to address an area, concern, or issue within a program, and might focus on the status of a specific program element, the adequacy of specific policies, or the implementation status of specific policies throughout DOE. They might also address areas outside safeguards and security, cyber security, emergency management, or ES&H that affect those programs. A report containing conclusions and recommendations is published for each assessment and special study, but ratings are not normally assigned.

Special Reviews

Special reviews are conducted at the request of the Secretary or other senior DOE managers, sometimes on a "rapid response" basis, to provide specific needed information about safeguards and security, cyber security, emergency management, ES&H, or other critical DOE functions. Alternatively, OA might conduct special reviews on its own initiative if a need to do so is perceived.

Subordinate Organization Procedures

These appraisal process protocols provide an overview of the independent oversight process that is applicable to all OA organizations when conducting all types of appraisals. The offices of Safeguards and Security Evaluations, Cyber Security and Special Reviews, Emergency Management Oversight, and Environment, Safety and Health Evaluations will develop and publish more detailed program plans, guides, procedures, and protocols as necessary to assist in accomplishing their specific missions and responsibilities.

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Section 2

APPROACH TO INDEPENDENT OVERSIGHT

Contents

Introduction

The independent oversight program provides a disciplined and consistent process for monitoring, evaluating, and reporting the status of safeguards and security, cyber security, ES&H, and emergency management programs in the DOE. The process has been developed and refined over time and tested through repeated use; the remainder of this document describes the essential elements of that process, all of which are closely tied to established independent oversight appraisal goals and philosophy.

Appraisal Goals

Independent oversight program goals are to:

- Determine whether DOE policies and policy guidance in the areas of safeguards and security, cyber security, ES&H and emergency management are effective
- Determine whether the programs in those same areas meet the requirements established by DOE policy and whether those programs are effective
- Assess the impact of any identified deficiencies, taking into account mitigating factors, compensatory measures, and current or planned corrective actions
- Determine the status of actions relative to previously identified deficiencies
- Present potential enhancements for consideration for strengthening the program or addressing identified deficiencies.

Appraisal Philosophy

To accomplish its mission and achieve its goals, each independent oversight appraisal employs a set of carefully developed and experience-based principles:

- Planning is the foundation of all appraisals. Detailed and coordinated planning must precede all appraisals and must continue through the conclusion of each appraisal.
- OA coordinates its efforts with DOE Headquarters elements and the field. The ultimate objective of the independent oversight program is to improve the DOE's performance, and can best be achieved through coordination and openness at all levels.

- In determining the adequacy of DOE policies, OA considers such things as whether the policy sufficiently defines security expectations, its clarity, and its implementability.

- The measures used to judge programs are based on established standards. National standards are the basic requirements with which DOE programs must comply. They are established by Congress, the DOE, and other executive agencies. DOE policy is promulgated through DOE directives; other national standards are exemplified by applicable public laws, regulations, executive orders, and other directives. Local standards are those imposed by the local DOE operations office, the facility contractor, or subordinate contractors responsible for administering programs within their areas of operation. Local standards usually deal with site-specific implementation of national requirements, but may impose more stringent requirements. They are promulgated through DOE field office implementing instructions, contractor procedures, site safeguards and security plans, cyber security plans, integrated safety management plans and procedures, and emergency readiness assurance plans. OA reviews and uses appropriate local standards to evaluate programs, especially if they differ from or cover areas not addressed by national requirements.

- OA strives to be fair, reasonable, and factual in interpreting DOE policies and standards and in evaluating how they are applied in specific programs. All data used in the evaluation process are validated at multiple levels to ensure correctness.

- Performance is considered to be the most accurate indicator of a program's effectiveness. Whenever possible, OA conducts performance tests to assess the adequacy of a program or program element. By means of these tests, OA determines how well a program works in implementing the intent and objectives of DOE policy.

- Appraisals are designed to provide managers with meaningful, accurate, and current information on program status. OA reports clearly present appraisal results, identifying and analyzing the impacts of strengths and weaknesses. Additionally, when possible and appropriate, potential enhancements are identified to managers for their consider-ation. The results are reported in a format designed to be useful for all levels to which it is disseminated.

- The cooperation and assistance of field element and facility representatives is essential in order to conduct thorough, efficient, and fair appraisals. Local representatives provide detailed site and system knowledge for planning; arrange administrative and logistical support; expedite data collection activities; and identify the local points of contact who participate during data gathering and validation. Relations between OA and local representatives should be cordial, open, and professional. However, the role of local representatives must remain limited to providing assistance, with OA determining the scope of activities and the techniques to be employed.

- The qualifications of independent oversight representatives are of paramount importance. It is essential that they be: knowledgeable of applicable standards; technically competent in their assigned areas; cognizant of OA philosophies and goals; and able to successfully perform all necessary functions related to their appraisal responsibilities. OA training programs are intended to maintain and continually improve mission performance.

Roles and Responsibilities

Responsibilities for implementing the independent oversight program are distributed, largely along topical lines, to OA's various elements, as follows and as depicted in Figure 2.

Office of Independent Oversight and Performance Assurance (OA-1)

The office director and a small staff provide strategic direction, quality management, coordination, and information management for the overall independent oversight program and for the subordinate organizations.

Office of Safeguards and Security Evaluations (OA-10)

The Office of Safeguards and Security Evaluations conducts all appraisals of DOE safeguards and security programs. The programs evaluated generally include the following functional areas:

- Protection program management
- Personnel security
- Physical security systems
- Material control and accountability
- Classified matter protection and control
- Protective force.

Specific independent oversight responsibilities include:

- Performing periodic inspections of safeguards and security programs at DOE sites possessing significant amounts of special nuclear material, classified information, or other security interests
- Performing regular assessments of nuclear materials assurance at DOE sites
- Evaluating DOE policies related to safeguards and security
- Performing follow-up reviews to ensure that corrective actions are effective
- Performing complex-wide studies of safeguards and security issues
- Identifying opportunities for improving safeguards and security performance
- Reviewing other governmental and commercial safeguards and security programs to provide benchmarks for DOE performance
- Providing resources, as necessary, to participate in special reviews.

Office of Cyber Security and Special Reviews (OA-20)

The Office of Cyber Security and Special Reviews conducts appraisals of DOE cyber security programs—both classified and unclassified—and conducts special reviews as required. OA-20 frequently integrates its efforts with OA-10 when conducting cyber security inspections. Specific independent oversight responsibilities include:

- Performing periodic inspections (which may be announced or unannounced) of classified and unclassified cyber security at DOE sites
- Maintaining a continuous program of remote testing for DOE network vulnerabilities through scanning and penetration testing
- Evaluating DOE policies related to classified and unclassified cyber security
- Performing cyber security follow-up reviews to ensure that corrective actions are effective

FIGURE 2. Distribution of Inspection/Evaluation Topics Across OA Offices

(Note: OA-40 does not conduct inspections/evaluations.)

- Performing complex-wide studies of cyber security issues
- Identifying opportunities for improving cyber security performance
- Reviewing other governmental and commercial cyber security programs to provide benchmarks for DOE performance
- Providing the Secretary and senior DOE managers with a "rapid response" capability to perform special reviews in safeguards and security, emergency management, or other critical functions (assistance and resources may be provided by other OA organizations)
- Performing ongoing analyses to identify trends and emerging issues in the cyber security arena
- Performing strategic-level assessments of safeguards and security, cyber security, and emergency management policies and programs.

Office of Emergency Management Oversight (OA-30)

The Office of Emergency Management Oversight conducts appraisals of DOE emergency management programs. Specific independent oversight responsibilities include:

- Performing periodic inspections of emergency management programs at DOE sites having significant amounts of special nuclear materials or other hazards
- Evaluating emergency management exercises conducted by DOE Headquarters and/or DOE facilities
- Evaluating DOE policies related to emergency management
- Performing emergency management follow-up reviews to ensure that corrective actions are effective
- Performing complex-wide studies of emergency management issues
- Identifying opportunities for improving emergency management performance
- Reviewing other governmental and commercial emergency management programs to provide benchmarks for DOE performance
- Providing resources, as necessary, to participate in special reviews.

Office of Management and Information Resources (OA-40)

The Office of Information Management and Information Resources provides a complete spectrum of information and knowledge management support services to the Office of the Director (OA-1) and to the four line assessment and oversight offices (OA-10, OA-20, OA-30, and OA-50). OA-40 facilitates access to and use of all data and information sources necessary for planning, decision-making, and successful conduct of OA programs and activities. The functions of OA-40 include:

- Providing program planning and Federal personnel management services for OA
- Providing budgeting and contract administration services for OA
- Developing information management systems for OA, including development and operation of an OA Information Technology Center
- Participating in systems integration activities with information management organizations that support OA operations

- Formulating strategies and evaluating methodologies for integrating software or computer equipment to improve efficiency and effectiveness

- Providing expert analysis and trending of safeguards and security, cyber security, and emergency management information to help focus OA activities

- Developing program performance measure-ment methodologies, study designs, and analytical tools to enhance OA's contribution to long-term security and emergency management programs

- Establishing and maintaining the OA Web site

- Identifying, tracking, and trending safeguards and security, cyber security, and emergency management performance measures, objectives, and indicators associated with a particular site and the DOE complex as a whole

- Using groupware, databases, and other software tools, combined with other OA information, to develop an enterprise repository of intellectual capital on DOE security affairs.

Office of Environment, Safety and Health Evaluations (OA-50)

The Office of Environment, Safety and Health Evaluations conducts appraisals of DOE ES&H programs. The programs evaluated generally include the following functional areas:

- Worker safety and health

- Facility safety

- Environmental protection

- Integrated safety management.

Specific independent oversight responsibilities include:

- Conducting periodic inspections (e.g., integrated safety management evaluations) of ES&H programs at DOE sites

- Evaluating DOE policies relating to ES&H programs

- Performing follow-up reviews to ensure that corrective actions are effective

- Performing complex-wide studies of ES&H issues

- Identifying opportunities for improving ES&H programs

- Reviewing other governmental and commercial ES&H programs to provide benchmarks for DOE performance

- Providing resources, as necessary, to participate in special reviews.

Major Phases of Appraisals

All appraisals can be characterized by the four major functional activities—or phases—they have in common: planning, conduct, closure, and follow-up.

The **planning** phase includes those activities necessary to prepare for all aspects of an appraisal. The **conduct** phase includes that portion of the appraisal principally devoted to collecting and validating data. The **closure** phase involves data integration and analysis, issue identification, rating determination (if applicable), draft report preparation and quality review, and management briefings. The **follow-up** phase includes comment review and final report preparation, and, for some activities, Headquarters briefings, corrective action plan reviews, and corrective action tracking. Although these phases are identified by the primary activities they encompass,

actual component activities may overlap significantly. For example, some data are collected during the planning phase, and planning (particularly for performance testing) can extend into the conduct phase. Similarly, analysis begins during data collection and continues throughout the process. Subsequent sections of this document describe the activities and expectations associated with these major appraisal phases.

Protection of Classified Information

OA team personnel often handle classified documents and sensitive unclassified information during the course of appraisals. This information may be provided by OA, reviewed as part of the oversight activity process, borrowed from the facility being visited, or generated by the team members. Additionally, team members may use classified word processing equipment in performing such duties as recording data and writing reports.

Team members are required to comply fully with all applicable DOE and local security requirements, especially those concerning classified computers, documents, and discussions. The OA manager in charge of the team will provide for appropriate site-specific guidance and instructions to the team on these matters. All team members must comply with the policy and guidance issued.

Professional Conduct and Relations with Site and Headquarters Personnel

The cooperation and assistance of representatives of inspected organizations, whether at Headquarters or in the field, are crucial in conducting a successful appraisal. OA appraisals evaluate line management at the DOE Headquarters, DOE field element, and facility contractor levels; OA personnel should maintain the highest standards of conduct when dealing with representatives of line management, including supervisors, managers, and other personnel encountered during the course of all appraisal activities. Professional conduct and relationships with personnel are covered in more detail in Appendix B.

Interested DOE and National Nuclear Security Administration Headquarters organizations (such as the Chief Information Officer, the Office of Security and Emergency Operations, the Office of Environment, Safety and Health, and program offices)—which may or may not be in the line management chain—often send representatives to observe OA appraisal activities. Since OA appraisals are conducted openly, appropriate participation by such organizations is welcomed. Such representatives are encouraged to participate as observers; they are not members of the appraisal team, but may be allowed to participate—on a non-interfering basis—in such activities as tours, meetings, interviews, and other appropriate data collection activities.

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Section 3

PLANNING APPRAISALS

Contents

Introduction

Planning within OA is a long-range and continuous process, involving a myriad of activities and essentially all staff members. These appraisal process protocols deal only with those aspects of planning that are most directly associated with conducting appraisals. Thorough planning is the foundation of all appraisals. Even routine and repetitive appraisals require the gathering and analysis of large amounts of information from many sources, decision-making based on that analysis, and appraisal preparation based on those decisions. The quality of planning significantly affects all other appraisal phases. Because there are limited amounts of time and other resources available for planning, planning efforts must be focused and efficient.

Regardless of the nature of the appraisal—inspection, assessment, study, or other—and regardless of the size of the team involved, the same planning process is applicable; the planning requirements may vary in magnitude for different activities, but the essential elements of planning will not vary.

This section outlines the OA planning process for appraisals and the general distribution of planning responsibilities. While the directors of subordinate OA organizations (OA-10, OA-20, OA-30, OA-40, and OA-50) establish detailed planning requirements and procedures to meet their specific needs, those fall within the scope of the general process outlined here.

Planning Goal

The goal of planning in OA is to anticipate and successfully prepare for every action necessary to meet mission requirements and conduct the highest quality appraisals possible with the available resources.

Strategic Planning, Program Planning, and Scheduling

Strategic planning is the responsibility of the OA Director and the directors of the subordinate offices. Strategic planning involves taking a long view of evolving threats and adjusting the organization's processes and capabilities to meet future needs. For example, increasing cyber security attacks via the Internet against information on DOE computer networks, and the increasing potential for terrorist groups to use chemical or biological attacks, require OA to obtain new capabilities and employ new techniques.

Decisions about how the offices' resources will be allocated toward accomplishing the offices' missions and which activities will be conducted at which locations within the DOE complex

have a profound affect on OA's ability to achieve and maintain a comprehensive understanding of the DOE-wide status of the programs OA is charged with monitoring. Consequently, the organization's senior managers, and ultimately the OA Director, oversee and directly participate in planning.

Scheduling of major activities also requires coordination at the OA-1 level. Several factors make this necessary: the nature and scope of some activities require the subordinate offices to support each other with both Federal staff and contractor personnel; subordinate offices all draw from a finite pool of essential computer equipment; OA philosophy encourages integrated inspections and close coordination of site visits to minimize the impact on site operations; and the OA Director must ultimately determine OA priorities. OA's protocol addressing the site prioritization and appraisal scheduling process is provided as Appendix D.

Management Planning

Management planning responsibilities are continuous throughout an appraisal's cycle. Most of the early planning requirements are management responsibilities (as opposed to team planning responsibilities.) Once an appraisal has been approved and tentatively scheduled, the director of the responsible office initiates planning activities, which may include:

- Contacting the affected sites and organizations to begin ongoing coordination
- Identifying and collecting documents and other information that will be needed for more detailed planning
- Conducting an initial review of available information to assist initial decisions regarding activity scope and focus
- Determining the tentative scope and focus of the appraisal
- Developing and coordinating a site visit schedule with site(s)/organizations(s) to be visited
- Identifying and acquiring the personnel resources to accomplish both the technical and administrative support aspects of the appraisal, including determining if participants in OA's Field Augmentation Program will be included on the appraisal team (the OA Field Augmentation Program is explained in Appendix E)
- Identifying and satisfying logistics needs, such as onsite workspace, hotel accommodations, computer and other equipment support, and visit requests and badging
- Directing and overseeing team planning activities at team planning meeting(s) or site planning visit(s)
- Overseeing necessary ongoing planning throughout the course of the appraisal.

Management planning activities, with appropriate input from the results of early team planning activities, are used to create a formal plan for the conduct of the appraisal. As planning is continuous throughout an appraisal, so too is the formal plan a "living document," subject to modification as the activity progresses.

Team Planning

Detailed planning for data collection—the essence of all appraisals—typically begins when the team has been established and convenes at a planning meeting. The planning meeting may be conducted at Headquarters or in the field (in conjunction with a scoping visit), depending upon the nature and needs of the specific appraisal. The planning meeting affords all team members the opportunity to interact and function as a group and focus exclusively on their planning tasks. For some activities, such as extended assessments or

special studies, additional planning meetings may be convened as necessary. During the course of the planning meeting, the team will normally be expected to:

- Be briefed on the results of previous management planning activities, including the objectives and proposed parameters of the appraisal, and any management guidance and expectations
- Review and analyze available documentation
- Tour key facilities at the site
- Conduct preliminary interviews with DOE field element and facility managers
- Meet with stakeholders, as appropriate
- Contact and conduct appropriate information exchanges with representatives from Headquarters and the field
- Recommend any modifications to activity scope and focus resulting from planning activities
- Determine appropriate data collection methods and develop detailed data collection plans, including any necessary performance test plans, safety plans, etc.
- Develop a schedule of data collection and related activities
- Identify additional information and support requirements, and communicate them to the appropriate individuals or organizations
- Brief or otherwise inform managers of planned activities.

While much of the detailed planning for an appraisal should be accomplished at the planning meeting(s), planning is an ongoing effort and may continue well into the conduct phase of the activity. Both managers and team members are expected to remain flexible and ready to adapt plans to respond to unexpected circumstances that may arise during any phase of an appraisal.

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Section 4

CONDUCTING APPRAISALS

Contents

Introduction

The conduct phase of an appraisal normally encompasses that period when the majority of the needed data is collected. This may consist of a concentrated effort during a relatively short period of time, as during an inspection, or it may occur over an extended period, as in some assessments or special studies. For some types of appraisals (e.g., inspections) conduct occurs almost exclusively on site at the inspected facility; for other types of activities, such as cyber security scans and penetration tests, team members may be located remote from the subject site. The conduct phase is tailored to the unique needs and objectives of each specific appraisal. This stage is crucial to the success of an appraisal because during this stage, team members collect most of the information upon which they will base their analyses and conclusions (and ratings and recommendations, when appropriate).

This section addresses the goal and scope of conduct activities, data collection methods, data validation procedures, and important related topics.

Goal

The goal of conducting an appraisal is to accomplish all planned data collection activities in a fair, impartial, professional manner and to validate the technical accuracy of the data collected.

Scope

Data collection activities generally follow the plans and schedules developed during the formal planning process. Team members normally focus on accomplishing planned activities; however, data collection activities can be adjusted to accommodate changing conditions. For example, early data collection results may necessitate reduced or expanded activities in planned areas of emphasis and investigation of areas not originally identified for review. Problems or potential problems that become apparent during the course of data collection should not be ignored simply because they were not included in formal planning.

Data Collection Methods

Since data is critical to a successful appraisal, it is essential that sufficient amounts of accurate, pertinent data be collected. To achieve this, it is important to employ the appropriate data collection methods. There are six basic methods of data collection available to team members: document reviews, interviews, observations, knowledge tests, tabletop exercises, and performance tests. Since there are inherent strengths and limitations associated with each of these methods, the specific methods employed must be carefully selected and used in combination with each other to ensure that all necessary data is collected and cross-checked.

Document Reviews

Document reviews are a basic method used in virtually every appraisal. Every DOE program reviewed normally has associated with it policy guidance, procedures, records, and other information in documentary form. Even in preparation for employing other data collection methods, such as performance tests, document reviews are usually essential. Document reviews are not limited to paper documents; information in computer databases, computer system directories, and automated logs of computer activity are included in this category.

Interviews

Interviews can provide useful data that is not readily available from other data collection methods. Interviews are most effective in determining perceptions and individual understanding of policies, procedures, duties, and management expectations. While both formal and informal interview techniques may be employed, deliberate preparation is necessary before any interview. Interview techniques are discussed in Appendix A.

Whenever managers are being interviewed, OA staff should be present; when senior managers are interviewed, an OA manager should be present.

Observations

Observations allow team members to see how personnel actually do their jobs, and to evaluate their performance under normal conditions. Such observations provide valuable data about whether personnel follow established procedures, operate equipment properly, etc. However, under some conditions the observer's very presence may skew the performance being observed; consequently, observations should be made judiciously and are best used to complement or round out data obtained from other sources. Observations can also be useful to determine how systems and equipment are designed, installed, operated, and maintained.

Knowledge Tests

While job knowledge may be best assessed through interviews, observations, and performance tests, formal knowledge tests—particularly written tests—are an efficient and time-saving way to determine whether a large number of people possess a specific body of knowledge. Knowledge tests may be written or oral, or a combination of the two, and appropriate sampling techniques should be used in administering the tests. Team members should understand that knowledge tests indicate only whether personnel are knowledgeable in certain areas, not whether they can apply that knowledge or perform related duties.

Tabletop Exercises

Tabletop exercises can be a useful tool to answer a limited range of questions regarding procedures and associated responsibilities, knowledge of procedures and responsibilities, and decision-making capabilities. They are a fairly simple and resource-efficient method to provide insight into such areas as the adequacy of response planning, personnel knowledge resulting from training and exercises, and decision-making capabilities associated with specific types of situations. Tabletop exercises are carefully coordinated with inspected organizations, and specific procedures

regarding the planning and conduct of tabletop exercises are contained in OA's organizational process guides or other protocols.

Performance Tests

Performance testing is one of the most valuable data collection methods available, and is a preferred method for inspection-related activities. In contrast with knowledge testing, performance testing is designed to determine whether personnel have the skills and abilities to perform their duties, whether procedures work, and whether systems and equipment are functional and appropriate. Virtually any skill, duty, procedure, system, or item of equipment can be performance tested. Performance tests may vary in complexity from simple to complicated.

Some tests can be conducted under completely normal conditions, where the subject is unaware of the testing. Other tests must be conducted under artificial conditions, although maximum realism is always a primary consideration. While most performance tests must, by their very nature, be conducted on site, some tests, such as cyber security scans and penetration tests, may be conducted from remote locations.

Before any performance test is conducted by an OA organization, all test activities must be appropriately coordinated with site representatives or other responsible individuals or organizations. To promote safety and realism in performance testing, subordinate OA organizations are required to establish formal protocols for planning and conducting certain performance tests. These are detailed in the organizational process guides or other protocol documents.

Other Methods

While the five basic data collection methods are specified above, OA personnel are not limited to these basic methods as described. Different or hybrid methods may be used, and personnel are encouraged to employ the best techniques available for a specific task. For example, a survey or questionnaire, appropriate for some types of appraisals, may share characteristics of the document review, interview, and knowledge test methods.

Integration

Since data is collected by various team members during virtually all appraisals, it is important that all appropriate information is shared among team members in a timely manner. Information collected by one team member may have a direct impact on a line of investigation being conducted by another. When teams are large—and particularly when several teams are involved and each is focusing on a different area or discipline—a conscious and deliberate effort at information integration is required. Specific methods for achieving integration vary from formal to informal, may be dictated somewhat by the team size and type of activity involved, and may include team meetings, shared data collection notes, and daily reports to managers. Specific methods to be employed are left to the discretion of the responsible activity manager.

Major Deficiency Identification

When potentially serious deficiencies are identified during an appraisal—particularly an inspection—those deficiencies are brought to the attention of the appraisal manager, the responsible organization's managers, and OA

senior management as soon as possible. When enough data is collected that inspectors can be reasonably sure that a significant deficiency exists, the deficiency should be identified, formally communicated to the responsible site managers, and discussed in sufficient detail to ensure that it is understood. This formal communication can occur by means of an Issue Form available from appraisal management or by means of a written policy issue paper (see Section 5). This is part of the validation process discussed below. Such deficiencies may or may not ultimately result in formal findings or policy issues, depending on the individual circumstances.

The Director of OA will provide routine updates of significant deficiencies to the Deputy Secretary and/or the appropriate Under Secretary. Also, the Director of OA will provide short written summaries of inspection results to the Secretary, with copies to the Deputy Secretary, the appropriate Under Secretary, the cognizant secretarial officer (CSO), and the Director of Security and Emergency Operations. These will include any site plans for immediate compensatory measures.

Opportunities for Improvement

OA inspectors have a broad range of knowledge in their individual topical areas of expertise, and also have the advantage of observing methods of program implementation across the entire DOE complex. When deficiencies or inefficiencies in program implementation are identified during an independent oversight activity, inspectors are sometimes knowledgeable of approaches that might be appropriate in improving program performance. Often these are based on successful approaches observed at other DOE sites. When appropriate, specific opportunities for improvement are communicated to the inspected organizations for consideration by their line management.

Validation

Validation is the process OA uses to verify the accuracy of the information obtained during data collection activities. It is a critical element in the conduct of all appraisals. Validation is a continuous process to ensure that:

- All data collected are factually correct and can legitimately be used to evaluate the effectiveness of the program.

- Points of contact and site management are aware of the data that have been collected. They must either acknowledge its accuracy, provide correct information, request that further data be collected, or provide mitigating information. Representatives of the CSO, DOE field element, and DOE contractors may participate in validations.

Procedures employed by OA organizations include a process for ongoing validations. Information is validated with the point of contact as it is collected, or as soon thereafter as practical; during daily validation meetings with points of contact; at daily management briefings; periodically throughout the conduct phase; during summary validation meetings at the end of data collection; and during reviews of draft reports.

Section 5

APPRAISAL CLOSURE

Contents

Introduction

The closure phase of an appraisal normally takes place after data collection is essentially complete (although, at times, closure activities may identify additional data needs). Data must be organized, assimilated, and analyzed in order to form conclusions and report the results. This section discusses the various tasks to be accomplished during the closure phase, including data analysis, determination of findings, assignment of ratings (if appropriate), report preparation, identification of policy issues, and others.

Goals

The main goals of this phase are to thoroughly analyze all available data, draw valid conclusions from that analysis, and, based on the analysis and conclusions, prepare a report that accurately reflects the status of the program(s) being examined and provides appropriate managers the information they need.

Integration

The information integration discussed in the previous section continues to be important during the closure phase. During data analysis, all pertinent information, regardless of who collected it, should be considered in the effort to reach valid conclusions. Not only should raw data be shared, but also conclusions and other results of analysis should be shared, as appropriate, among team members.

Analysis of Results

While analysis is an ongoing process during all phases of an appraisal, it culminates during the closure phase. Analysis involves a critical review of all data collection results, particularly identified program strengths and weaknesses, and leads to logical, supportable conclusions regarding how well the program functions and satisfies the intent of DOE policy.

If there are no deficiencies, analysis is a relatively simple matter. If there are negative issues, weaknesses, deficiencies, or standards that are not fully met, these must be considered individually and collectively and then balanced against any strengths or mitigating factors to determine the overall impact on the program's effectiveness. Factors that should be considered during analysis include:

- Whether the deficiency is isolated or systemic
- Whether program managers and other line managers knew of the deficiency, and if so, what actions were taken
- The importance or significance of the standard affected by the deficiency
- Mitigating factors, such as the effectiveness of other programs or program elements that may compensate for the deficiency
- The deficiency's actual or potential effect on mission performance or accomplishment
- The magnitude and significance of the actual or potential vulnerability to DOE interests resulting from the deficiency.

The analysis must result in—and support—conclusions regarding how successfully the program being evaluated meets requirements.

Findings

One product of analysis in certain types of appraisals (e.g., inspections, integrated safety management evaluations, and follow-up reviews) is the identification of findings. Findings are used to indicate significant deficiencies that merit managers' priority attention. Team members are responsible for determining which inspection results are designated as findings; findings usually identify aspects of a program that do not meet the intent of DOE policy. Although any program element or system not in compliance with DOE policy or not meeting DOE performance standards may be identified as a finding, teams are expected to exercise judgment in determining findings. Minor and non-systemic items, while appropriately identified so that they can be corrected, are normally not designated as findings.

Findings are presented in a manner that identifies both the specific problem and the appropriate reference. If multiple findings each address specific aspects of a single standard, the team should determine whether the potential findings should be "rolled up" and reported as a single finding. This "rollup" may be appropriate if the single finding statement can clearly and completely convey the problems. Findings should always be worded to express the specific nature of the deficiency, clearly indicate whether the deficiency is localized or indicative of a trend, and clearly identify which organization (DOE Headquarters or field element, facility contractor, etc.) is responsible. Typically, assignment of a finding requires a discussion of the impact of the condition described, including any mitigating factors and compensatory measures. While findings often identify conditions that adversely impact a program's rating, findings do not necessarily impact the rating.

Ratings

For inspection activities, the conclusions reached through analysis of results lead to the assignment of ratings. The teams are responsible for assigning the ratings; however, final approval for ratings rests with OA managers, and, ultimately, the Director of OA.

- **Effective Performance (Green):** Assigned when the system being inspected provides reasonable assurance that the identified protection or ES&H needs are

met (overall performance is effective). The element being inspected would normally be rated Effective Performance if all applicable standards are met and effectively implemented. An element would also normally be rated Effective Performance if, for all standards that are not met, other systems or compensatory measures exist that provide equivalent protection, or if the impact of failure to fully meet an applicable standard is minimal and does not significantly degrade the protection provided. Line managers would be expected to effectively address any specific deficiencies identified.

- **Needs Improvement (Yellow):** Assigned when the system being inspected only partially meets identified protection or ES&H needs or provides questionable assurance that the identified protection needs are met. The element being inspected would normally be rated Needs Improvement if one or more applicable standards are not met and are only partially compensated for by other systems, and the resulting deficiencies degrade the effectiveness of the inspected system. Line managers would be expected to significantly increase their attention on the identified areas of weakness.

- **Significant Weakness (Red):** Assigned when the system being inspected does not provide adequate assurance that the identified protection or ES&H needs are met. The element being inspected would normally be rated Significant Weakness if one or more applicable standards are not met, and there are no compensating factors to reduce the impact on system effectiveness, and the resulting deficiencies seriously degrade the effectiveness of the inspected system. Line managers would be expected to apply immediate attention, focus, and resources to the deficient program areas.

Policy Issues

Periodically during appraisals, issues arise or deficiencies are observed that stem from policy weaknesses: lack of policy, lack of clarity in policy, ambiguous or contradictory policies, inappropriate policy, or inappropriate implementation guidance. When such an issue arises, OA will document the issue and submit it to the Headquarters element responsible for the policy in question (typically the Office of Security and Emergency Operations or the Office of Environment, Safety and Health). The point may be documented in the appraisal report or in a separate written policy issue paper that identifies the subject, provides necessary background information, states the problem, discusses its implications, and, if appropriate, recommends a course of action.

Report Preparation

A report is issued as the formal product of any appraisal. Reports are the only published records of specific appraisals, and are intended for dissemination to the Secretary and appropriate managers at DOE Headquarters and field elements (including, when appropriate, facility contractors). Reports for various types of appraisals may vary in format; the most appropriate format for the specific purpose will be used. Appendix C provides guidance for preparing the portions of appraisal reports that are targeted at senior management.

For all independent oversight activities, report preparation activities share a common process:

- An **initial draft** report is prepared by the team.

- The initial draft is reviewed by a **Quality Review Board** to ensure that it is readable and logical, and contains adequate, balanced

information to support conclusions (and, if appropriate, ratings). The Quality Review Board may require revisions to the report.

- After review by the Quality Review Board and tentative approval by the Director of OA, the initial draft may be provided to appropriate line organizations for a factual accuracy review. For inspections, a copy of the draft report is provided to the responsible DOE field element and the onsite representative of the CSO, who are allowed a limited time to provide written comments regarding factual accuracy. All comments are reviewed and appropriate changes are made to the draft report.

- For inspections, one copy of a **final draft** report is provided to the responsible DOE field element, the CSO, and the Director of Security and Emergency Operations or the Assistant Secretary for Environment, Safety and Health, as appropriate, which are allowed a period in which to provide written comments regarding factual accuracy. (The CSO and DOE field element have ten working days from receipt of the final draft report to provide a unified written response to OA concerning the factual accuracy of the draft.) All comments received will be reviewed and appropriate changes will be made in the final report.

Quality Review Board

The Quality Review Board, mentioned above, normally consists of managers and senior personnel (usually former senior managers) from OA and support contractors. The board is responsible for providing a "reality check" by knowledgeable individuals who have not been close to the data collection effort, and who can therefore evaluate the report's contents and presentation through fresh eyes, and on its own merits.

Briefings

The closure process for appraisals often includes a requirement to brief appropriate managers on the progress, results, and conclusions of the activity. Briefings fall into two main categories: internal and external.

Internal briefings apprise OA managers and staff of the status of an ongoing activity, providing information necessary to keep them informed of results and issues so that they can provide necessary direction and guidance.

External briefings apprise managers outside of OA—normally managers of organizations undergoing an appraisal—of the results and conclusions of an oversight activity. Inspection closure processes usually include at least two briefings: an internal briefing to the OA Director or other senior OA managers; and an external briefing (an exit briefing) to report the inspection results to responsible line managers. The need for briefings associated with other (non-inspection) types of appraisals depends upon the specific nature of such activities. The structure, level of detail, and specific content of briefings will normally be tailored to the needs of the audience and the specific information that needs to be communicated.

Process Improvement

OA consistently strives to improve its internal processes as part of its continuing effort to improve its products and the level of value it provides to the DOE. During the closure phase of each major appraisal, managers are expected to solicit from team members information that can be used for process improvement. The format for such solicitations (questionnaire, roundtable discussion, after-action report) will be determined by the responsible managers, and may vary depending on the type of appraisal being reviewed and perceived needs for improvement areas.

Section 6

APPRAISAL FOLLOW-UP

Contents

Introduction

Much work remains to be done after the completion of the onsite portion of an appraisal. This section addresses such responsibilities and tasks as finalizing the OA report, conducting necessary briefings, reviewing corrective action plans, and tracking findings for follow-up purposes. All of the responsibilities and tasks addressed in this section apply to inspection activities; some do not normally apply to other types of appraisals, and would be applied only when appropriate.

Goals

The primary goals of the follow-up phase are to prepare and disseminate an accurate account of the appraisal results through a final report and appropriate briefings; review proposed corrective actions for adequacy; and provide policy issue discussions to the senior managers of appropriate Headquarters organizations.

Headquarters Briefings

When the results of an appraisal warrant, upon returning to Headquarters, OA managers will provide an updated one-page summary of appraisal results, and, upon request, brief the Secretary, Deputy Secretary and/or Under Secretary. Additionally, OA will brief the CSO as soon as possible after the onsite closeout. Other senior Headquarters managers may be included at the discretion of the senior official being briefed.

As soon as practical after completing onsite evaluation activities, usually within a few working days, OA will coordinate with the pertinent CSO and DOE field element to schedule a briefing on the appraisal results for the DOE Security Council or the DOE Safety Council, as appropriate. The briefing will normally be provided at a regularly scheduled council meeting.

After each inspection, OA will coordinate with Public Affairs, Congressional Liaison, the CSO, the Office of Security and Emergency Operations, and the Office of the Secretary to develop an approach for providing results to external stakeholders, including any needed briefings. Such briefings to external stakeholders will not normally take place until after the final report is issued; OA's responsibility is to brief the inspection results.

Policy Issue Papers

Upon returning to Headquarters, the responsible OA organization completes, if necessary, any policy issue papers and provides them to the manager(s) of the appropriate Headquarters organization(s). OA will respond, as needed, to requests for discussions or for additional information pertinent to the issue(s) raised.

Final Report

The CSO and the DOE field element have ten working days from their receipt of the final draft report to provide OA with their consolidated comments regarding its factual accuracy. OA will consider the comments, hold consultations between managers and the appropriate staff members, and determine the OA action on each response.

OA will publish a final report ten working days after receipt of the consolidated comments. The final report will be distributed to the Office of the Secretary, the Office of Security, the CSO, and the DOE field element. The Director of OA and the Director of Security will together determine, on a case-by-case basis, which other DOE organizations need to receive copies of the final report. Some reports (e.g., reports of inspections of Special Access Programs) will have very limited distribution.

Corrective Action Plans

DOE Order 470.2A requirements for the development, submission, and review of corrective actions plans in response to OA-assigned findings are briefly summarized below. Classified corrective action plans (e.g., addressing safeguards and security and cyber security deficiencies) and unclassified corrective action plans (e.g., addressing emergency management and ES&H deficiencies) may be submitted in separate documents to avoid unnecessary classification of unclassified plans. The CSO and the DOE field element have ten working days from receipt of the final draft report to prepare and provide to OA a **preliminary corrective action plan** to address immediate and initial planned responses to all findings in the OA final draft report. As soon as practical, but within ten days of receipt, OA will provide the CSO and DOE field element appropriate informal comments regarding the adequacy of the proposed corrective actions in correcting the identified deficiencies.

Within 30 working days after receiving the final draft report, the CSO and DOE field element will provide OA with an **interim corrective action plan** addressing, in detail, ongoing and planned corrective actions for each finding identified in the final draft report. OA will review and comment on the interim corrective action plan within 15 days of receipt.

Within 30 working days after receiving the final report, the CSO and DOE field element will issue a **final corrective action plan**. Final corrective action plans should address, in detail, all completed, ongoing, and long-term actions associated with each finding in the report.

Corrective Actions and Follow-up

In accordance with the Secretary's guidance, line managers (CSOs and DOE field elements) are responsible for entering findings and corrective actions into Headquarters databases (Safeguards and Security Information Management System, Corrective Action Tracking System) and for tracking and closing corrective actions and findings. Information regarding the current status of all findings and associated corrective actions is available on these tracking systems. OA will monitor the progress of corrective actions and will provide follow-ups and regular independent assessments of progress in addressing deficiencies.

Section 7

RECORDS MANAGEMENT

Contents

Introduction

Independent oversight reports provide formal, permanent records of the results of independent oversight activities of all kinds. However, much of the detailed information regarding the conduct of appraisal activities, the results of data collection efforts, and the deliberations and analyses of team members is not specifically included in the formal reports. While independent oversight's goal is to include sufficient detail in each report to fully justify the report's conclusions and enable the report to stand on its own, there is a need to retain some documentation that provides additional details regarding various aspects of an appraisal activity. Consequently, it is OA's policy to archive certain types of information associated with appraisal activities for a reasonable length of time to enable an accurate response to queries for additional detail.

Records Retention Requirements

A collection of records associated with each appraisal activity will be assembled and archived for a period of ten years from the date of the final report of the activity. At a minimum, the archives should contain the following types of information, in either electronic or documentary form:

- Inspection (Appraisal) Plan
- Correspondence pertinent to the appraisal
- Daily Reports/Summaries of appraisal activities (if produced)
- Lists of individuals formally interviewed
- Observations/Supporting evidence (e.g., Data Collection Sheets, Evaluator Worksheets)
- Performance test plans and results (including safety plans, Trusted Agent agreements, cyber scan results, etc.)
- Lists of key documents that were reviewed
- Issue Forms
- Initial and final draft reports provided to field element/program office for comment
- Site/field element/program office comments on draft report(s)
- Final report.

Other information in addition to that identified above may be necessary to fully document an appraisal activity. Specific types of information and the levels of detail required may vary with the nature of the appraisal activity. Office Directors (OA-10, OA-20, OA-30, and OA-50) are to identify, in their individual process protocols, the specific additional types of information to be collected and archived and are to establish and coordinate specific requirements and procedures to ensure that Team Leaders for all appraisal activities under their jurisdiction identify and archive all appropriate information.

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APPENDIX A

INTERVIEW TECHNIQUES

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INTERVIEW TECHNIQUES

The interview is an invaluable instrument for obtaining data and information. There are several different types. OA inspectors are primarily interested in the data determination interview, used to secure data and information from the interviewee.

Obviously each interview will be different, depending on the type of interview, the needs of the parties involved, and the complexity of the topics discussed. However, to be successful, every interview should be two-way and *carefully planned.*

Frequently the goals of the two parties may be dissimilar or even opposite. One of the purposes of the interview would then be to find a common ground for discussion. At times the personalities of the individuals involved may be quite different, which can in itself create barriers. One way of alleviating, if not eliminating, many problems is for the inspector to plan the interview, designate the objectives to be achieved, be sensitive to the other person's needs and feelings, and listen intelligently and understandingly.

Planning the Interview

Too often the interview is carried through without planning. Almost any interview will be more successful if time is taken to establish objectives and general methods and techniques. The experienced inspector will plan as carefully as possible in the following areas:

Selection of purpose. In many cases, the inspector will try to discuss too wide a variety of topics or confine the discussion to topics that are not applicable. This is not an efficient use of time, and may unnecessarily open up areas of disagreement or misunderstanding. It is true that one must be flexible during an interview, but it is also wise to plan ahead. The inspector may wish to establish objectives with the interviewee, or reach decisions, or secure facts, or select a specific course of action.

Briefing oneself. Too many interviews reach an impasse because "I don't have the DOE policy clarification memoranda on this subject," or "I had no idea all the data on this system would be needed." In almost every case, the necessary data are easily available if the inspector simply does his or her "homework."

Preparation of key questions. It is often vital to get the interviewee to express himself freely. This may be done by asking the right kind of questions. But such questions often do not come quickly and easily; they, too, require preplanning. Queries such as "How would you reorganize the operation?" or "What action do you recommend for solving the problem?" may motivate the interviewee to respond openly and freely.

Recognition of the interviewee's perceptions, expectations, and personality. Each of us responds differently. Some will be open and free with one approach; others respond better to another. A moment or two spent prior to the discussion in attempting to determine the individual's personality, perceptions, and needs is often time very well invested.

There are other areas that the inspector may prepare for; the point is that a communication exercise as important as an interview should always be planned.

The Interview in Action

The inspector will certainly adapt the interview to the persons involved. However, in every instance it is important to use the tools of interviewing to their maximum effectiveness:

- Questioning
- Listening
- Observing
- Evaluating.

In addition, the inspector should attempt to:

Establish a friendly climate. When people are treated courteously, honestly, and respectfully, they usually respond positively. If the exchange is to be open, honest, and free, the climate must help to attain those goals.

Articulate the purpose of the interview. It is helpful to both parties if a common understanding is reached as to the purpose of the interview and the subjects or issues to be discussed.

Secure the interviewee's input. Because of the nature of inspections, there is a tendency on the part of both the inspector and the interviewee to allow the inspector to dominate the discussion. That is wrong. The interviewee should participate freely and thoroughly. Without this participation, it will be difficult for the inspector to gather the data necessary to accurately evaluate the area being inspected.

Question, listen, observe, evaluate. These points are the keys to the successful interview. Questions should be carefully worded and should make the interviewee want to talk. And it is here that the inspector must resist the temptation to argue, correct, explain, or pontificate. It is a time to listen—listen attentively, understandingly, skillfully, and sensitively. And in listening, of course, one must also observe the nonverbal communication of the interviewee.

As a result of tactful questioning, sensitive listening, and thoughtful observing, the inspector should now be in a position for accurate evaluating.

Terminate effectively. Interviews are often terminated too abruptly. Whatever cooperative climate was developed between the inspector and interviewee is likely to be lost. An effective termination is important, especially if the interviewee is going to participate in the validation process.

It is wiser to hold a short interview, expertly conducted and graciously terminated, than a longer one that is halted abruptly and discourteously.

The interview can be among the most important of all the inspector's communication tools. There is no better way of determining the facts, and confirming or refuting information gathered prior to the site visit.

Interviews require time, but this is usually time well spent. A good exchange will often give the inspector valuable information. Interviewees have the opportunity to express themselves and the satisfaction of having someone listen. This is particularly true if the individuals being inspected are proud of their achievements and of their areas of responsibility.

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APPENDIX B

PROFESSIONAL CONDUCT

APPENDIX B

PROFESSIONAL CONDUCT

Office of Independent Oversight and Performance Assurance (OA) inspectors occupy sensitive and highly visible positions and must maintain the highest standards of personal and professional conduct. This is especially important during the onsite inspection, since everything inspectors do is under scrutiny. While on appraisals, team members are considered official representatives of U.S. Department of Energy Headquarters. Their behavior must always be beyond reproach. This includes being tactful, courteous, and properly attired. Their conduct should always enhance the professional stature of the appraisal team and the Office of Independent Oversight and Performance Assurance.

While on site, inspectors must follow all local rules, entry and exit procedures, safety regulations, parking requirements, and other employee and visitor guidelines. Inspectors are responsible for familiarizing themselves with all local policies. When in doubt, they should ask their immediate supervisor or the manager of the independent oversight activity. If they encounter problems or if local requirements alter essential inspection activities, the inspector should inform the independent oversight activity manager as soon as possible.

Inspectors will come into contact with a variety of individuals during inspection activities, including supervisors, security managers, and other site personnel who are not members of the safeguards and security or emergency management communities. OA personnel must be well received and looked upon as professionals. Also, it is essential that site safeguards and security or emergency management personnel provide the support and assistance inspectors need in order to do their jobs. Professional image and support can quickly erode when inspectors openly criticize the site or its personnel or make unfavorable comparisons with other sites. Inspectors should avoid being habitual critics. Most organizations have one or more individuals who continually complain and contend that all is wrong, that their supervisors are unfair, and that if only they could get out of the organization their happiness would be complete. Their departure is almost always welcomed. If criticism of the site is warranted, it should be included in the proper section of the inspection report.

Inspectors should avoid adversarial relationships. No matter how difficult an individual may be, the inspector is responsible for promoting good relations. Inspectors should not allow themselves to view an inspection as "just another inspection" and forget that the personnel being inspected may consider it a career-threatening event. Inspectors need to be sensitive to the pressures and stress experienced by the people being inspected. This is amplified further when significant problems are identified. At these times, inspectors can be the object of intense scrutiny, and may be questioned or criticized by personnel from the inspected facility. Establishing good relations will significantly relieve these stressful situations.

Inspectors should not be excessively aggressive or, on the other hand, unduly condescending or informal. Inspectors should avoid displaying a superior attitude or portraying themselves as experts or authority figures. Inspectors should refrain from telling jokes or humorous stories. Usually, individuals undergoing an inspection are not amused, especially when they are trying to perform their duties under the additional tensions that accompany an inspection. Also, excessive chatter by inspectors about themselves and their experiences can be annoying, although site personnel will usually

appear interested out of deference. This kind of incessant one-sided dialogue is thoughtless, and can be stressful for individuals having to continuously feign interest. Additionally, it detracts from inspection activities and wastes time that could otherwise be better spent collecting data. Although establishing a good rapport with site personnel includes a limited amount of "small talk," most conversation should center on the inspection.

Improper conduct of any kind cannot be tolerated. Abrasive or vulgar language, obscene body language, or flippant remarks should always be avoided. Frivolous remarks or insensitive criticism, even in jest, can be misinterpreted or poorly received. It is important that all inspectors understand that OA fully supports the prevention of sexual harassment. All OA managers and inspectors should be alert to conditions, regardless of how innocent they appear, that could produce an incident of sexual harassment. Immediate action must be taken to correct problems, respond to requests for assistance, and prevent future occurrences. It is imperative that all OA personnel understand their right to a harassment-free work environment and their responsibility for eliminating conduct that could lead to sexual harassment.

According to guidelines issued by the Equal Employment Opportunity Commission, sexual harassment is a form of sex discrimination under Title VII of the Civil Rights Act of 1964. It is a punishable offense. These guidelines address unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when made a term or condition of employment, when used as the basis for employment decisions, or when they create an offensive working environment. The type of prohibited conduct includes physical (touching, patting, and bumping), verbal (propositions, sexual jokes, comments about a person's body, or obscene language that is gender specific or sexual in nature), and other types of improper conduct (display of pictures that are offensive in sexual content, sexual gestures, leering, or any behavior with sexual overtones). One of the most important factors in determining what constitutes "unwelcome behavior" and "sexual conduct" is that it depends more on effect than intent; and effect can only be determined by the recipient. So, whether the perpetrator intentionally or unintentionally sexually harasses another person is not the only issue. How that behavior is received is central in determining that the occurrence took place.

Team members may socialize and relax at appropriate times and locations while on inspections. However, these activities should be in good taste and not leave the impression that the team is partying all night or that inspectors consider the trip a boondoggle. Personnel from the inspected facility or operations office often stay at the same hotel as the inspection team and observe after-hours activities. Inspectors must be particularly discreet when socializing with personnel or friends from the inspected facility to minimize the chance of these occurrences being perceived as compromising the objectivity of the inspection. Excessive drinking of alcohol is especially discouraged, and any improper conduct exhibited by an OA inspector who is obviously intoxicated will not be tolerated.

Contractors serving as inspectors must be extremely careful to avoid any conflict of interest, potential conflict of interest, or appearance of conflict of interest. Discussing future work possibilities at the site, mentioning individual or corporate capabilities and experience as they apply to current site problems, and any other similar activity is unacceptable. Such actions cast doubt on inspection objectivity and OA's independent oversight mission, and can result in the inspector being removed from the site. Should any potential conflict of interest be encountered, it must be reported to the responsible OA manager immediately.

Team members should not discuss future job possibilities or leave a resume with anyone from the inspected facility. This is not only unprofessional, but it creates the impression that one is taking advantage of his or her official position for personal gain.

When initially contacted to participate on a topic team during a particular inspection, inspectors must not assume that that particular topic will in fact be selected. In the past, there have been conversations between inspectors and operations office or site personnel about areas to be inspected prior to OA finalizing the inspection planning or notifying the operations office point of contact. OA personnel should not pass the word that OA is considering a specific topic at a specific operations office. All initial planning is to be kept internal to OA and not discussed with any field element representative. OA will formally notify the field element at the proper time.

Inspectors will work especially closely with points of contact, trusted agents, and operations office, facility, and site contractor personnel who have been assigned specific inspection responsibilities. During initial meetings, inspectors should ensure that each of these individuals fully understands what is expected. In dealing with points of contact and trusted agents, inspectors should be open, candid, and straightforward. A close working relationship is necessary and desired, but it should be kept on a professional level.

Points of contact are expected to assist in the general planning of inspection activities, arrange for local resources in support of inspection activities, assist in expediting data collection, and validate data with inspectors. They are not necessarily informed of all details of performance tests or other data collection activities in advance of the activity, and they do not determine what will be inspected or how it will be inspected.

Trusted agents are expected to assist in planning and conducting performance tests, and are fully aware of appropriate aspects of the tests. Points of contact may also be trusted agents if time permits them to accomplish both functions.

The information provided in this section is not intended to be an exhaustive discourse on personal and professional conduct, or on ethical standards. The intent here is to provide a condensed treatment of these subjects as they pertain to OA, highlighting some of the most common problems and issues encountered during inspections concerning conduct, personal behavior, and relationships with inspected personnel. On the whole, professional conduct stems from good judgment, consideration for others, civility, and a genuine concern for the prestige of the organization one represents. Most professionals treat others the way they themselves wish to be treated, and conduct themselves and dress in a way that portrays the best possible image of their capacities. It follows, therefore, that a highly visible organization responsible for inspection and oversight of programs designed to protect some of the most critical elements in existence, nuclear weapons and material, would expect the highest standards of conduct from those who represent it.

A Checklist for OA Inspectors on Professional Conduct

- As an official representative of Headquarters, Department of Energy, your behavior should always be beyond reproach.
- Be tactful, courteous, and properly attired.
- While on site, comply with all local rules and regulations.
- Avoid criticizing the site or site personnel.
- Avoid adversarial relationships.
- Be sensitive to the pressures and stress experienced by the people being inspected.
- Establish good relationships with site personnel.
- Do not be excessively aggressive or unduly condescending or informal.
- Avoid displaying a superior attitude or portraying yourself as an authority figure or expert.
- Refrain from telling jokes or humorous stories to persons being inspected.
- Avoid excessive chatter about yourself and your experiences.
- Avoid vulgar language, obscene body language, or flippant remarks.
- Avoid actions that can be interpreted as sexual harassment.
- Be discreet when socializing.
- Avoid the excessive use of alcohol.
- Contractors must be careful to avoid any conflict of interest or appearance of conflict of interest.
- Do not discuss job possibilities or leave a resume with personnel from the inspected facility.
- Keep all initial planning internal to OA.
- Develop a good, professional relationship with points of contact and trusted agents.

APPENDIX C

GUIDANCE FOR PREPARING PORTIONS OF OA APPRAISAL REPORTS THAT ARE TARGETED AT SENIOR MANAGEMENT

APPENDIX C

GUIDANCE FOR PREPARING PORTIONS OF OA APPRAISAL REPORTS THAT ARE TARGETED AT SENIOR MANAGEMENT

To meet our oversight obligations, the three inspecting offices within the Office of Independent Oversight and Performance Assurance (OA) conduct numerous activities of varying scope and intensity. At one extreme, OA conducts periodic inspections of safeguards and security programs and integrated safety management evaluations; at the other extreme, OA conducts external security scans of computer systems and limited, tightly focused follow-up reviews. Between the two extremes, OA conducts activities such as special reviews, special studies, emergency management reviews, and cyber security reviews. These activities share some common elements, but each type of activity is also different in significant ways. It is appropriate that the reports issuing from these various activities be tailored to best represent and communicate the essential facts relating to the activity. Consequently, inspections may produce reports of 100 pages with several appendices and much detail, whereas external cyber security scans may be reported in as few as five to ten pages.

Reporting is one of OA's most important responsibilities. OA reports are the primary product, and if OA does not do a good job of reporting, the considerable effort and resources devoted to planning, data collection, and analysis will not achieve the overall OA objective of providing information that can be used to make improvements. The offices have generally been doing an effective job of reporting the technical details of appraisal activities. OA appraisal reports provide sufficient information about what was done, what was found, the significance of what was found, and the areas that are in need of corrective actions and management attention. Such information is very useful to the managers, supervisors, and staff who administer and operate the various programs.

However, senior managers often do not have the time, the inclination, or the need to read the technical details contained in the body of a report. Their needs are better served by a concise but thorough explanation that allows them to understand the significant results of the appraisal without having to read the technical details. Senior managers are an important audience that OA needs to reach. They often make or influence the decisions regarding policy, funding, and concentration of effort that are necessary to correct the problems that OA identifies. If OA reports are not successful in alerting senior managers to problems, the chance that the problems will be effectively corrected diminishes. Consequently, OA needs to ensure that it does the best possible job of providing the appropriate information to senior managers in its reports, either in an executive summary or a concise summary report (i.e., the "front end").

The large majority of reports that OA produces can be divided into two categories:

- Long reports, often including numerous appendices and containing considerable detail, such as reports of periodic inspections

- Shorter reports, often 5 to 25 pages, usually associated with efforts of narrower scope, such as follow-up reviews, cyber security reviews, and emergency management reviews.

For the longer reports that address several program areas and usually contain considerable detail, it is appropriate to continue writing a formal report "front end" that incorporates the essence of the significant details reported in the appendices and provides an overall analysis of program status and needs, as well as conclusions regarding the adequacy (rating) of the inspected program(s). The "front end" is typically 5 to 10 pages long. Usually, a report that has a "front end" does not have a separate executive summary. An annotated outline and example of a typical front end for such a report are provided in Sections C.1 and C.2.

For the shorter reports of more narrowly-scoped activities—reports that often fall into the 5 to 25 page range, and usually provide detail in the body of the report rather than in appendices—an executive summary is the appropriate vehicle for reaching the senior management audience. Guidance for preparing executive summaries and an example are provided in Sections C.3 and C.4.

C.1 Annotated Outline For "Front End" Of Longer Appraisal Reports

The "front end" (or summary report) of a long appraisal report serves to communicate the significant information pertaining to the appraisal, and is supported by the detailed information contained in the appendices (usually one for each topical area). It is not merely a summary of the individual (topical) appendices, but also serves to unify significant results of the various areas, identify trends, and provide an overall analysis of the significant information contained in the (topical) appendices. It also expresses conclusions regarding the adequacy of the overall program(s) being evaluated. Although the "front end" is supported by the detail contained in the (topical) appendices, it must contain sufficient detail and explanation to stand alone. It should provide the reader with sufficient information to gain an accurate understanding of program status—including both positive and negative aspects, as well as areas that need corrective actions/management attention—without having to read the detailed appendices. If integrated safeguards and security management was a focus of the review, the "front end" report should provide the reader with a summary analysis of performance with regard to the guiding principles of security management. The following annotated outline provides a structure that accommodates this goal.

Annotated Outline: "Front End"

1.0 INTRODUCTION

The introduction should be short, probably no more than two pages in any case, and succinctly written. It should normally include the following types of information:

- *The type of activity, the office that conducted it, and where and when it was conducted. Includes identification of responsible organizations, such as Cognizant Secretarial Office/Lead Program Secretarial Office, field element, and major contractors.*
- *Limited background information concerning past performance, including significant problem areas and ratings associated with most recent inspections, surveys, etc. If there were significant problems, may include a brief comment on what corrective (particularly management) actions have been taken.*
- *Any recent major changes, such as contract changes, significant budget changes, mission changes, etc.*
- *The scope and focus of the activity, and, if appropriate, why the activity was conducted. (For example, was the inspection a routine periodic visit, or was it conducted in response to a particular incident/condition, or at the Secretary's direction).*
- *If integrated safeguards and security management was a focus of the appraisal, a brief indication of that focus and a very brief overview of what integrated safeguards and security management is (i.e., a comprehensive and systematic program for integrating security into all aspects of operations).*
- *A brief (one paragraph maximum) synopsis of the major conclusions regarding program status, to give the reader an indication of the bottom line before reading the discussion of inspection results.*
- *An explanation of where in the report (e.g., front end section, appendices) various types of information (e.g., overall results, detailed results, ratings) can be found.*

2.0 RESULTS

This section provides a summary assessment of results of the appraisal activity. Significant results of the topical area inspections are addressed; less-significant results may not be specifically mentioned in this section. This section does not address the results by topic area, but attempts to combine the results of all areas—particularly trying to identify commonalities or trends across topic areas—and provides a balanced discussion of positive and negative attributes and how they affect overall program performance.

2.1 Positive Program Attributes

This subsection describes significant things that the responsible organizations (Headquarters, field element, or contractor) have been doing well, and that contribute to program improvement or strength. May include such things as initiatives or good, solid performance in program areas, appropriate management attention, particular actions taken to correct past deficiencies, etc. If applicable, should include one or more paragraphs that summarize the positive aspects of integrated safeguards and security management at the site and the benefits that have been achieved through integrated safeguards and security management. Use of a "bolded bullet" approach (i.e., a bold topic sentence that provides the essence of the positive aspect, followed by supporting detail and examples) is a technique that is effective for communicating to managers.

Annotated Outline: "Front End" (continued)

2.2 Program Weaknesses and Items Requiring Attention

This subsection identifies and discusses weaknesses that warrant management attention. Not all weaknesses identified in the detailed appendices need to be individually mentioned in this section; some weaknesses (particularly weaknesses in the same topic area) may be grouped and discussed in a broader context. The problem or problem area should be sufficiently explained (including examples, if necessary) to promote understanding; significant mitigating circumstances should be explained; and any significant immediate corrective actions should be identified. The impact or potential consequences of these weaknesses should be identified if appropriate. If applicable, include one or more paragraphs addressing the guiding principles of integrated safeguards and security management as they relate to the identified weaknesses. Where possible, analyze the root causes of weaknesses in terms of the guiding principles. Use of a "bolded bullet" approach (i.e., a bold topic sentence that provides the essence of the weakness/issue, followed by supporting detail and examples) is encouraged.

3.0 CONCLUSION

This section should briefly state the overall conclusion drawn from the appraisal activity. It should provide a discussion of the overall program status and be relevant to the scope of the appraisal activity. It may discuss whether the program is improving or getting worse. It should identify significant areas that require correction and/or need management attention. It should state the cumulative impact of the (good and bad) results on the overall adequacy of program performance. If applicable, it should include conclusions about the status and ongoing efforts related to integrated safeguards and security management.

4.0 RATING

This section provides the rating statement(s) for the program and program elements being evaluated.

C.2 Example of "Front End" of Longer Appraisal Report

The following is a generic example of a "front end" (summary report) of a longer appraisal report in which the details of appraisal results are contained in individual appendices. This example is provided to illustrate an application of the guidance provided in Section C.1; it should not be considered a rigid template that must be copied in all cases. It is not necessary to copy the language of the example when writing actual reports. While the general format and flow of information should be used in all cases, the individual circumstances of each appraisal effort will dictate the specific length and content of the summary report. For example, some of the specific information that may be addressed in the introduction will depend upon such circumstances as mission or contract changes, past problems, and recent initiatives. The length and complexity of the discussion in the results section will depend upon the results of the topical appraisals. Consequently, the specific circumstances associated with each appraisal should be considered, and appropriate judgment should be exercised in applying the guidance and principles provided in Section C.1.

Note that the example is portion-marked, even though it is unclassified. This is merely a reminder that *classified* reports must be portion-marked; unclassified reports are not.

Example: "Front End"

1.0 INTRODUCTION (U)

(U) The Secretary of Energy's Office of Independent Oversight and Performance Assurance (Independent Oversight) conducted an inspection of selected safeguards and security program topics at the AB Operations Office (AB) and the XY Plant (XY) during August 2000. The inspection was conducted by Independent Oversight's Office of Safeguards and Security Evaluations (OA-10).

(U) This inspection evaluated the U.S. Department of Energy (DOE) Office of Environmental Management (EM), AB, and contractor implementation of selected security topical areas related to protection of classified and unclassified sensitive information. The topics reviewed were classified matter protection and control (CMPC) and personnel security. The Independent Oversight team evaluated implementation of these programs at the AB offices and at XY.

(U) EM is the lead program secretarial office for AB and the cognizant secretarial office for XY, and has overall Headquarters responsibility for programmatic direction and funding of activities at XY. AB provides operational direction to the contractor and performs line management oversight of activities at XY. Acme-XY (A-XY) is the managing and operating contractor for XY. As the protective force contractor, Hotshot Guards, Inc. (HGI) has responsibility for most security functions, including protective force patrols, access controls at certain portals, and technical operations.

(U) XY received a Satisfactory performance rating in the most recent DOE Annual Report to the President. Previous Independent Oversight reviews of AB, including a follow-up inspection in 1996 and a site profile in 1998, also indicate that overall safeguards and security performance has been adequate. The most recent AB security survey report (February 2000) did not indicate significant problems in AB facility safeguards and security programs.

(U) Inspection results indicate that EM, AB, and XY contractors have established effective CMPC and personnel security programs. These programs comply with DOE requirements and are effectively implemented, with particularly strong management support, and a history of quickly and effectively correcting identified deficiencies. Though these programs are strong overall, increased management attention is needed to upgrade technical surveillance countermeasures (TSCM) equipment and training, ensure that classified matter is stored in approved repositories, and correct record keeping and timeliness issues in some personnel security activities.

(U) Section 2 of this report provides a summary assessment of results of the inspection of the CMPC and personnel security topics. Section 3 presents conclusions based on those results. Section 4 presents the ratings. Appendix A provides supplemental information on the Independent Oversight team composition. Appendix B identifies the findings that require corrective action and follow-up, as well as a number of policy issues requiring attention at DOE Headquarters. The detailed results of the reviews of the CMPC and personnel security topics are contained in Appendices C and D, respectively.

Example: "Front End" (continued)

2.0 RESULTS (U)

2.1 Positive Program Attributes (U)

(U) EM, AB, and XY contractors have established generally effective programs in CMPC and personnel security. With some exceptions, the CMPC and personnel security topics comply with DOE requirements and are effectively implemented. As discussed in the following paragraphs, some aspects of these topics were particularly effective.

(U) **AB management support for information security is evident and has contributed to a generally effective CMPC program**. Although some isolated weaknesses were evident (see Section 2.2 and Appendix C), the protection afforded classified matter is consistent with DOE requirements. Records for documents maintained in accountability systems are concise, accurate, and clear. The foreign ownership, control, or influence (FOCI) program, administrative and physical access controls, security infractions program, and operations security (OPSEC) program are effectively implemented.

(U) **The AB and contractor personnel security program has several strengths**. Personnel security program elements, including the security education and awareness program, the classified visits program, and the unclassified foreign visits and assignments program, are effectively implemented. One of the programmatic strengths is the unclassified foreign visits and assignments program, which has a formalized and effective process to address counterintelligence, export control, and foreign intelligence requirements. The personnel clearance program and the personnel security assurance program (PSAP) meet the intent of the DOE order, although some weaknesses were evident in documentation and institutionalization of certain elements (see Section 2.2 and Appendix D).

(U) **AB and its contractors have been responsive in implementing appropriate corrective actions.** Historically, AB management has supported safeguards and security programs and has been proactive in correcting identified weaknesses. For example, AB was effective in resolving problems identified during the 1996 Independent Oversight follow-up inspection involving the registration of work-for-others programs at XY. In this area, AB has established additional controls for work-for-others programs that have the potential to evolve into special access programs. These additional controls (e.g., a documented list of participants) enable AB to more effectively implement DOE requirements (e.g., read-in briefings and debriefings) related to special access programs. In addition, AB has already implemented or initiated appropriate corrective actions to address the CMPC findings of this inspection. For example, AB took prompt action to replace security containers not approved by the General Services Administration (GSA) that were being used to store classified documents.

2.2 Weaknesses and Items Requiring Attention (U)

(U) Although the two AB programs inspected are generally effective, several weaknesses warrant increased management attention by XY contractors, AB, and EM.

Example: "Front End" (continued)

(U) **AB TSCM equipment, personnel training, and procedures have not been updated to reflect current requirements and threats.** Under the direction of AB, A-XY is responsible for conducting TSCM services for various facilities or programs at AB and XY locations. AB and A-XY use a 1989 TSCM Standard Procedures Guide that has not been updated or supplemented with the DOE Headquarters-issued 1996 TSCM Procedures Manual. Additionally, the TSCM Team Lead and supporting TSCM technologists, who were all certified in 1988 and trained in various ancillary security disciplines, have not since received advanced-level training in the latest, most critical elements of TSCM. Further, periodic maintenance for the existing TSCM equipment suite (such as routine annual calibration) has not been conducted, the TSCM staff do not have the equipment or tools to accomplish such maintenance, and the existing suite of TSCM equipment is outdated and incomplete (e.g., no satellite-based penetration device). The weaknesses in TSCM are partially mitigated by the effective security controls at AB and XY facilities, such as access controls, alarm systems, and various administrative controls. AB and A-XY representatives indicated their resolve to correct this situation and immediately initiated efforts to incorporate the latest TSCM requirements and guidance into their procedures, retrain their staff, and seek funding to procure, augment, or update the necessary suite of TSCM equipment.

(U) **CMPC requirements were not effectively implemented in a few areas.** AB facilities were using some (about 19) non-GSA-approved security containers to store classified documents up through Secret/National Security Information. Under a 1998 DOE Headquarters memorandum, such containers can be used under certain circumstances (i.e., when protected by full intrusion detection systems or equivalent protective force patrols). However, not all non-approved containers at AB and XY facilities are afforded this level of protection. Further, AB's practice for protecting classified matter in transit destined for destruction does not comply with either applicable DOE requirements or the site's own documented procedures. According to site-provided documentation, when classified documents destined for destruction are bagged and picked up by a courier (a security police officer) for transport to a central destruction facility, they are transported by two officers in a van within which there is a padlocked cage to secure the documents, and one officer remains with the van at all times. However, at the AB facilities, the procedures were not implemented as required: the Independent Oversight team members observed a single officer collecting bagged documents and placing them in his unoccupied van, which lacked any locked cage. AB took immediate action to identify all unapproved security containers on site, and advised Independent Oversight that their replacement with approved containers was under way and that most containers will be replaced by September 29, 2000. They are also addressing the problems in the transportation of documents to destruction facilities (e.g., installing locked cages and ensuring adherence to site requirements).

(U) **There are weaknesses in PSAP documentation and procedures.** Although the PSAP generally achieves the intent of the final rule, some aspects of the PSAP were not adequately documented and procedures are not in place for certain aspects of the program. For example, AB does not provide formal, documented training to the DOE certifying official or medical personnel, and AB does not have a current PSAP implementation plan as required by Federal regulation.

Example: "Front End" (continued)

(U) In most cases, the personnel security weaknesses noted above were at least partially mitigated by the knowledge and experience of certain personnel (e.g., the current PSAP certifying official) and other process controls (e.g., memorandum in lieu of the PSAP certification form and informal on-the-job training for the certifying official and medical personnel), so the weaknesses do not have a direct adverse impact on the effectiveness of the PSAP. However, AB management attention is needed to ensure that effective corrective actions are taken because these weaknesses place undue reliance on the performance of individuals rather than on clearly documented processes and standards.

(U) **AB is not consistently meeting established timeframes for processing personnel clearance cases.** In approximately 25 percent of 95 cases reviewed, AB did not meet established time frames for processing cases. Most of these problems involved a failure to meet the seven-day requirement for granting or processing cases containing no derogatory information. In cases where there is no derogatory information, the potential impact on security is negligible. Some cases, however, involved a failure to meet the 30-day requirement to take action (e.g., an interview or letter of interrogatory) on cases in which completed investigations were determined to contain derogatory information. Although no significant problems were noted in the files reviewed, failure to meet the timeframes for cases involving derogatory information could conceivably cause a delay in discontinuing access authorizations where warranted. AB reports that the ability to meet established timeframes is a longstanding problem and will continue to be so. A contributing factor is the incremental nature of the funding for investigations, which often results in surges in cases (e.g., AB may submit a large number of requests for investigations to the Office of Personnel Management when funding is available and receive a large number back for processing within a short interval, all of which must be processed in the established timeframes). Considering the available AB personnel (two adjudicators) and other factors (their other duties and vacation/illness), AB has often had difficulty meeting the established timeframes. Similar problems in meeting the timeframes are evident at many other DOE sites.

3.0 CONCLUSIONS (U)

(U) EM, AB, and AB contractors have established generally effective CMPC and personnel security programs. AB line management support for safeguards and security is evidenced by the historically satisfactory programs at AB sites and by AB's responsiveness in correcting weaknesses identified during this inspection.

(U) AB and contractor management attention is needed to ensure that identified safeguards and security weaknesses are fully analyzed and resolved, including the weaknesses in TSCM, CMPC procedure implementation, PSAP documentation/procedures, and personnel clearance processing timeframes. In addition, improvements in self-assessments could help ensure that deficient conditions are identified and corrected.

(U) While certain items warrant further improvement and increased attention, the deficiencies identified by this inspection are not systemic or pervasive, and they do not significantly degrade the overall

Example: "Front End" (continued)

effectiveness of protection of classified and sensitive unclassified information. Further, AB and its contractors have already implemented or initiated appropriate corrective actions for the CMPC weaknesses and have taken action to address some aspects of personnel security weaknesses.

4.0 RATINGS (U)

(U) EM, AB, and contractor implementation of the CMPC and personnel security programs provides reasonable assurance that classified and sensitive unclassified information is protected. Therefore, a rating of EFFECTIVE PERFORMANCE is assigned for these topical areas.

(U) The ratings for the topical areas are:

(U) Classified Matter Protection and Control ……EFFECTIVE PERFORMANCE
(U) Personnel Security……EFFECTIVE PERFORMANCE

C.3 Guidance For Preparing Executive Summaries

The executive summary for a shorter appraisal report should provide enough information to enable the reader (particularly senior managers) to understand the scope and nature of the activity, the significant results and their implications, and what (if any) areas require management attention. The executive summary should include sufficient "meat" (e.g., details, examples if necessary) to convey a full understanding of the essential results and their significance without having to read the body of the report.

The length and formal structure of the executive summary will vary with the nature of the basic report. For very short reports, the executive summary may be structured as a page of paragraphs with no formal subheadings. For longer reports, the executive summary may be several pages long, and structured with formal divisions under such headings as scope, background, results, and conclusions, as appropriate. Whatever the length and formality of structure of an executive summary, each should include certain types of information that should flow in a certain manner.

The following discussion identifies the attributes, including content and flow, of information that should be included in an executive summary. This model accommodates all the information and presentation needs of a good executive summary and is flexible enough to be applied to summaries of various lengths and levels of formality.

There are four categories of information that are essential to every executive summary. Each executive summary should address these categories of information, in the order they are presented here. Aside from maintaining this broad flow of information, the specific headings and internal structure of the presentation can vary with the needs of the subject matter. The four main categories of information are shown on the following pages, with annotations providing more detail concerning the information and its presentation within each category.

Guidance: Executive Summary

INTRODUCTORY AND BACKGROUND INFORMATION

Introductory and background information may typically include:

- *What appraisal activity was conducted, where and when it was conducted, and by whom*
- *The scope of the activity*
- *The reason for the activity (e.g., past problems, special event, routine periodic, etc.)*
- *Any other information necessary to prepare the reader for the information that follows*
- *If integrated safeguards and security management was a focus of the appraisal, a brief indication of that focus and a very brief overview of what integrated safeguards and security management is (i.e., a comprehensive and systematic program for integrating security into all aspects of operations).*

This information should be provided as succinctly as possible, and may range in length from a minimum of a single paragraph to several paragraphs.

The next two categories of information deal with results of the appraisal activity. When writing about results in the executive summary, do not discuss each topical or subtopical area individually. Rather, extract the significant information (good things, bad things) from all the topical/subtopical areas and address them in an integrated manner, concentrating on their overall impact on the evaluated program. Roll all results up to a discussion of the overall program being evaluated.

POSITIVE RESULTS

List and discuss here the significant positive results—things that have been accomplished, initiatives that have contributed to the evaluated program, deficiencies that have been corrected. If applicable, include a paragraph that summarizes the positive aspects of integrated safeguards and security management at the site and the benefits that have been achieved through integrated safeguards and security management. Roll up individual positive results as appropriate and treat them in general terms here. However, provide enough information or examples to enable the reader to understand what has been accomplished or why the things that are being done are good. It is not sufficient to just state that "a number of program improvements have been made." Provide sufficient descriptive information without getting into the level of detail contained in the body of the report. This information may require as little as a single paragraph, or up to several paragraphs. Be brief, but include enough to get the necessary points across. Use of bullets here is perfectly acceptable, and the "bolded bullet" approach explained in Section C.1 is often effective.

WEAKNESSES NEEDING ATTENTION

List and discuss here significant problems or cumulative weaknesses that require corrective actions and/or management attention. If applicable, include one or more paragraphs addressing the guiding principles of integrated safeguards and security management as they relate to the identified weaknesses

Guidance: Executive Summary (continued)

and/or root causes of identified weaknesses. Whenever possible, roll up individual weaknesses and treat them in more general terms, at a higher level. Again, provide enough details or examples to enable the reader to understand what is wrong and why it is important that it be fixed. It is not enough to merely state that "a number of significant program deficiencies were identified." Provide enough detail to convey the nature and gravity of the problems, without duplicating the detail contained in the body of the report. Be brief, but include whatever is needed to provide sufficient description and explanation. Use of bullets here is perfectly acceptable, and the "bolded bullet" approach explained in Section C.1 is often effective.

CONCLUSION

This section should sum up the impacts of the good and the bad, and communicate the overall conclusion reached concerning program status. It may indicate whether the program is showing an improving or declining trend, and should identify areas that may require significant management attention. The bottom line regarding program adequacy should be stated here. The conclusion discussion can often be limited to a single paragraph. If applicable, it should include conclusions about the status and ongoing efforts related to integrated safeguards and security management. If the activity is rated, the rating can be included at the end of this category of information.

C.4 Example of Executive Summary

The following is an example of an executive summary for a shorter appraisal report that presents information in the body of the report rather than in several detailed appendices. It is provided as an example to illustrate the application of the guidance provided in Section C.3. The example does not reflect all possible issues that might be addressed in an executive summary, nor do its length and level of detail reflect all possibilities. Consequently, in each case judgment must be exercised—based upon the specific circumstances of the appraisal—in applying the guidance and principles provided in Section C.3.

Example: Executive Summary

EXECUTIVE SUMMARY

Background

The Secretary of Energy's Office of Independent Oversight and Performance Assurance (OA) conducted a follow-up review of the XYZ Site's (XYZ) emergency management program during June 2000. Review activities were planned and conducted by OA's Office of Emergency Management Oversight (OA-30). The purpose of the review was to determine current program status, including the status of corrective actions taken to address program weaknesses identified as needing significant management attention during an August 1998 OA-30 periodic evaluation and a June 1999 follow-up evaluation. This review also examined the effectiveness of the ZZ Operations Office (ZZ) and XYZ feedback and improvement management processes as mechanisms for identifying, analyzing, and addressing program deficiencies, implementing corrective actions, and demonstrating and verifying the effectiveness of those actions in improving the site's emergency management response capability.

The 1998 evaluation identified several positive attributes of XYZ's emergency management program in the areas of initial responder facilities and equipment, mutual aid agreements and interfaces with offsite response agencies, the emergency management-related employee volunteer support organization, and continuing focus on reducing the types and quantities of hazardous materials on site. However, significant programmatic weaknesses were found in hazards assessments, emergency planning implementation procedures, event categorization and classification capabilities, notifications, emergency responder training, and the XYZ self-assessment and corrective action management programs. As a result, the XYZ emergency response organization was not prepared to assess an incident scene, properly categorize or classify the emergency, formulate worker and public protective actions, or promptly and accurately notify offsite authorities.

The 1999 follow-up evaluation found that XYZ was in the process of redesigning its emergency management program and had implemented some effective interim corrective actions. These included transfer of emergency classification and notification responsibility to the incident commander to increase promptness, revision of work control processes to facilitate development and validation of hazard surveys and assessments, and improvement of program integration. However, the results of the 1999 follow-up evaluation confirmed the continued existence of weaknesses in hazards assessments, implementing procedures for emergency classification and protective action decision-making, corrective action tracking and monitoring systems, and ZZ oversight of the site's emergency management program.

Results

XYZ has made some notable improvements in the site's emergency management program since the 1999 OA-30 follow-up evaluation:

Example: Executive Summary (continued)

- Hazard surveys and facility-specific hazards assessments have been completed.
- Incident commanders demonstrated a clear understanding of the immediate actions required in an emergency and awareness of the need for conservative decision-making.
- XYZ purchased a computer system to assist in quickly warning nearby residents of significant or emergency events and integrated the system into the adjoining city's emergency response system.
- XYZ conducted two site emergency response exercises during non-duty hours to test the site's ability to perform critical emergency response functions without the immediate staffing of the emergency management center.

Additionally, program attributes that were previously identified as strengths—such as response facilities and equipment, offsite response interfaces, and employee volunteer networks—have been well maintained.

Although the XYZ program has achieved improvements in each of its major elements, enough deficiencies remain that none of the elements yet perform at a satisfactory level. Significant areas requiring management attention include:

- **Fundamental program weaknesses remain that must be addressed to achieve assurance that the site is capable of adequately responding to an actual or potential release of hazardous material.** For example: the hazards assessment does not yet address potential emergencies resulting from malevolent threats or transportation activities; procedures and guidance for recommending public protective actions have not been established; predetermined protective actions lack sufficient specificity to be implemented in an emergency and are not supported by a technical basis; and the site's policy for notifying offsite authorities of emergency events is inadequate and does not comply with DOE requirements or expectations. Collectively, these deficiencies prevent the site from adequately preparing for all potential emergency events and reduce the chance that it will take the appropriate response and protective actions if an event occurs. These weaknesses were identified during previous OA-30 evaluations as well as during internal XYZ assessments, but they have not been corrected.

- **The necessary factors are not in place to allow the site to achieve a comprehensive and integrated emergency response system.** XYZ has not adequately defined the elements and structure of its emergency planning, preparedness, and response program or the roles, responsibilities, authorities, and expectations of the wide variety of site organizations that must work together to implement an integrated and effective program. Additionally, the feedback, improvement, and corrective action processes have not been rigorous enough to correct identified weaknesses. Furthermore, neither DOE Headquarters nor ZZ has imposed upon XYZ adequate expectations for improvement of the emergency management program, nor have they adequately monitored the site's progress to ensure that effective corrective actions have been implemented. For example, since 1996, neither Headquarters program offices nor ZZ has communicated with XYZ managers on a routine basis regarding program status, nor have they conducted any

Example: Executive Summary (continued)

assessments of XYZ's emergency management program since that time. There are no DOE performance measures related to emergency management in the XYZ contract, and the established DOE corrective action verification and closure process has not been followed. Consequently, several emergency management-related items in the DOE Headquarters Corrective Action Tracking System are incorrectly identified as complete and verified. Also, DOE and XYZ did not develop additional corrective actions, refine existing corrective action plans, or validate the adequacy of progress as a result of information provided in the 1999 OA-30 follow-up or a subsequent XYZ internal assessment.

As a result of weaknesses in the DOE and XYZ feedback and improvement programs, XYZ incident commanders have not received procedures, training, or guidance necessary to accurately and promptly perform their duties regarding incident scene assessment, emergency classification, formal notifications, and formulation and implementation of protective actions.

Conclusions

XYZ is making progress toward improving the site's emergency preparedness and response capability. Improvements in hazards assessments; programmatic structure for categorization, classification, and emergency notifications; and the demonstrated capabilities of the incident commanders have enhanced the site's initial response capability. However, the continued presence of fundamental program weaknesses that were identified during previous internal and external assessments indicate that the management attention applied to the DOE and XYZ feedback and corrective action management programs has not been sufficient or effective, and that appropriate attention has not been directed toward identifying the root causes of these weaknesses. A significant contributor to these weaknesses is the lack of a clearly defined sitewide emergency management system that integrates all of the needed program elements and is understood and supported by the line managers who must make the program effective. Another key contributor is DOE's failure to adequately monitor and respond to the slow progress in program improvement or to set appropriate expectations and deadlines for needed programmatic improvements. The emergency management program is currently assigned an overall rating of NEEDS IMPROVEMENT. Increased management attention from both DOE and XYZ is needed to ensure that basic program elements are implemented in accordance with requirements and that the site effectively prepares to respond to emergencies in a manner that ensures adequate protection of site personnel and the public.

APPENDIX D

PROTOCOL FOR FACILITY PRIORITIZATION AND INSPECTION SCHEDULING

APPENDIX D

PROTOCOL FOR FACILITY PRIORITIZATION AND INSPECTION SCHEDULING

Purpose

This protocol describes the processes employed by the Office of Independent Oversight and Performance Assurance (OA) to establish the frequency of, and develop the schedules for, periodic inspections of safeguards and security (S&S), including cyber security and environment, safety and health (ES&H) including emergency management, at U.S. Department of Energy (DOE) and National Nuclear Security Administration (NNSA) sites.

Overview of Prioritization and Scheduling Process

OA employs a formal process through which it prioritizes each site based on standard sets of criteria – one for S&S, another for ES&H – resulting in the designation of each site as Priority I (highest priority), Priority II (medium priority), or Priority III (lowest priority). Consistent with OA's independent oversight responsibilities, all DOE and NNSA sites are assigned priorities for S&S; only NNSA sites are assigned priorities for ES&H. For NNSA sites, priority designations for S&S and ES&H are independent of each other. For example, a site could be a Priority I ES&H site, but a Priority II or Priority III S&S site.

OA also employs a formal process to develop and maintain a master schedule for periodic inspections. A nominal periodic inspection cycle is associated with each priority level: Priority I sites are nominally inspected at 24-month intervals; Priority II sites at 36-month intervals; and Priority III sites as required. Consequently, once the cycle is initiated, the nominal inspection schedule is repetitive and almost automatic. However, a number of other factors — including a facility's inspection results — may affect the actual schedule, as explained below.

Priority Assignment Process

Each site subject to independent oversight is assigned a priority designation based upon an analysis conducted by the respective office Directors (S&S, ES&H) and designated members of their staffs. The analyses are based on the various criteria described below, which are applied using available empirical data and the professional judgment of the analysts. Recommended priority assignments are submitted to the OA Director for approval.

A for-cause review of a site's priority designation is conducted when significant changes occur in the site's physical plant, mission, or operations. The standard set of criteria is used to analyze the site status, and the priority designation may be changed as appropriate.

A general review of all site priority designations is conducted at five-year intervals to ensure that they remain valid over time.

Criteria for Determining Safeguards and Security Priority Designations

Priority I (highest priority): Key site with high-value assets or with high risk; includes all sites with Category I (SNM) in accessible and transportable form.

Priority II (moderate priority): Sites with other significant security interests, more moderate risks.

Priority III (lowest priority): Low-risk site; primarily non-national defense mission and/or had no Category I or II quantities of SNM and limited classified information.

Factors to be considered:

- Amount of SNM present on site
- Amount and sensitivity of classified matter on site
- Amount and sensitivity of unclassified information on site
- Other assets that require protection
- Identified risks/risk levels associated with protection system
- Compensating or mitigating factors
- Management and program stability

Criteria for Determining Environment, Safety and Health Priority Designations

Priority I: Key site with operations involving significant radiological and/or chemical hazards with potential for offsite impact or impact to significant numbers of workers.

Priority II: Site posing other significant hazards, but with more moderate risks.

Priority III: Low-risk site posing only localized or very low potential ES&H impacts.

Factors to be considered:

- Current operations – current types and level of activities (e.g., construction, new starts, production, re-starts, remediation, decontamination and decommissioning)
- Process complexity – complexity (and uniqueness, if applicable) of activities at facility
- Facility conditions – general material/physical condition of facilities (e.g., age of facilities and equipment, life cycle considerations)
- Hazards – hazards at the facility that could affect workers, the public, or the environment (e.g., fissile or radioactive materials, chemicals, industrial hazards or waste)
- Organizational effectiveness – past performance of the facility's safety management program
- Key issues – significance of the facility's key issues and management's effectiveness in addressing them
- Recent trends – evaluation of trends in key performance measures
- Organizational stability – stability of DOE and contractor management organizations at the facility

Current Priority Designations

Current S&S and ES&H priority designations for all DOE and NNSA facilities are illustrated in the following tables.

Table D-1. Current Priority for DOE Facilities

Facility	S&S Priority	ES&H Priority
Headquarters (GTN & FORS)	II	III
Waste Isolation Pilot Plant	III	II
Chicago Operations	II	II
Argonne National Lab – East	II	II
Argonne National Lab – West	I	II
Brookhaven National Lab	II	III
New Brunswick Laboratory	III	III
Princeton Plasma Physics Laboratory	III	III
Ames Laboratory	III	III
Fermi Laboratory	III	III
EML	III	III
Idaho Operations	I	I
INEEL	I	I
Oak Ridge Operations	II	II
Oak Ridge National Lab	II	II
East Tenn Technology Park	III	II
Portsmouth Gaseous Dif Plant	III	III
Paducah Gaseous Dif Plant	III	III
Santa Barbara SCIF	III	III
OSTI	III	III
Jefferson Laboratory	III	III
Lawrence Berkeley Nat Lab	III	III
Stanford Linear Accel (SLAC)	III	III
Energy Technology Engineering Center	III	III
TRW	III	III
Fernald	III	III
West Valley	III	III
Mound	III	III
RMI	III	III
Battelle Columbus	III	III
SPR Office & 5 sites	III	III
Morgantown (FETC)	III	III
Pittsburgh (FETC)	III	III
Richland Operations	I	I
Hanford	I	I
PNNL	II	II
Rocky Flats Field Office	I	I

Table D-1. Current Priority for DOE Facilities (continued)		
RFCP	I	I
Savannah River Operations	I	I
Savannah River Site	I	I
Bonneville Power Admin	III	III
Western Power Admin	III	III
Southwestern Power Admin	III	III
Southeastern Power Admin	III	III
Golden Field Office (NREL)	III	III
Yucca Mountain	III	III
Grand Junction	III	III

Table D-2. Current Priority for NNSA Facilities		
Facility	**S&S Priority**	**ES&H Priority**
Albuquerque Operations	I	I
Los Alamos National Lab	I	I
Sandia National Lab – NM	I	I
Pantex Plant	I	I
Kansas City Plant	II	II
Office of Transportation Safeguards	I	III
Headquarters (GTN & FORS)	II	III
Nevada Operations	II	II
Nevada Test Site	II	II
NEST/ATLAS	III	III
Tonopah	III	III
Remote Sensing Laboratory	III	III
Y-12 Area Office	I	I
Y-12 Plant	I	I
Oakland Operations	I	I
Lawrence Livermore National Lab	I	I
Sandia National Lab – CA	II	III
Savannah River Area Office	I	I
Savannah River – Trit/Pu Disp	I	I

Schedule Development Process

OA will develop and maintain a three-year rolling schedule for periodic inspections, which will be updated annually and as required.

Annually, approximately three months prior to the beginning of the schedule (calendar) year, Office Directors (and designated staff) responsible for conducting S&S and ES&H inspections will:

- Identify periodic inspection and other requirements (e.g., follow-up activities, special reviews, special studies) in their areas of interest (S&S or ES&H) for the next three years. This will include

identification of recommended adjustments to the priority-based inspection cycle of facilities whose performance merits adjustment, as follows:

- Facilities that have demonstrated effective self-assessment programs *and* that have demonstrated strong performance (e.g., no ratings below Effective Performance) on two consecutive OA periodic inspections may be placed on extended inspection cycles. For example, Priority I facility cycles may be extended to 30-month intervals and Priority II facility cycles to 42-month intervals. Inspection intervals will generally not be extended beyond 36 months.

- Facilities that have demonstrated weak or ineffective self-assessment programs *or* that have demonstrated poor performance on an OA periodic inspection (e.g., less than Effective Performance ratings in one or more significant areas, or major deficiencies that affect protection capabilities) may be placed on a shortened inspection cycle. For example, Priority I facility cycles may be shortened to a 12- or 18-month interval and Priority II facility cycles to a 24- or 30-month interval, as deemed appropriate by the circumstances.

- Conduct a scheduling meeting at which they will:

  - Coordinate their respective inspection requirements.

  - Adjust the schedule for year 1 as required. This will include additions/changes resulting from performance-based modifications of inspection intervals, known follow-up activities, special studies, etc. Year 1 inspection dates may be coordinated with facility managers to avoid unnecessary conflicts. The year 1 schedule should reflect specific inspection dates.

  - Adjust the year 2 schedule. Although the year 2 schedule may be tentative, known changes and anticipated additional activities (e.g., special studies, etc.) should be incorporated. The year 2 schedule may reflect only the month of a planned activity, rather than specific dates.

  - Plan the year 3 schedule. Although the year 3 schedule will be very tentative, it should incorporate all inspection activities mandated by the priority-based inspection cycle (as amended as a result of good/bad performance). The year 3 schedule may reflect only the month (or quarter) of a planned activity.

  - If year 1 or year 2 activities exceed available resources, prioritize the activities and develop a rationale for which activities should be deferred to years 2 or 3.

- Submit the proposed schedule, with recommendations and rationale for interval adjustments and deferred activities, to the OA Director for approval.

Upon approval, and normally by November 30 of each year, the year 1 schedule for the following calendar year will be published and distributed to Headquarters and field elements. The out-year schedules (years 2 and 3) are used for internal planning purposes only.

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APPENDIX E

FIELD AUGMENTATION PROGRAM

APPENDIX E

Field Augmentation Program

The prioritization and scheduling processes described above result in an expanded "base load" of oversight activities and also place increased emphasis on local self-assessment programs (and, therefore, provide increased incentive for local managers to improve their self-assessment programs). To address these two issues, OA intends to expand its field augmentation program and make it a normal part of the independent oversight process. (OA and its predecessor organizations have successfully employed field augmentees for many years, but their previous use has been limited and sporadic.)

General Program Concept

- OA will utilize safeguards and security (S&S) and environment, safety, and health (ES&H) subject matter experts from DOE field elements and site contractors as members of independent oversight inspection teams.
- Augmentees will be volunteers who are recommended by field element S&S/ES&H managers and who are selected and approved for participation by OA.
- Augmentees will be restricted from participation in inspections of their own sites/organizations; contractor augmentees will be further restricted from participation in inspections of other sites operated by their employers.
- Augmentees will be fully integrated into inspection teams and will fully participate as members of the topic team to which they are assigned.

Key Program Advantages

- Allows OA to take advantage of the considerable subject matter expertise and experience that resides in the field.
- Provides augmentees (and through them, their managers and sites/organizations) with insight into OA's performance-based evaluation approach that can be taken back to their sites and used to improve local survey and self-assessment programs.
- Broadens OA's perspective (adds field perspective) in identifying and analyzing potential issues.
- Facilitates increased intersite exchange of S&S/ES&H approaches, practices, and procedures when augmentees view inspected site operations and/or discuss home site operations with inspectees.

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