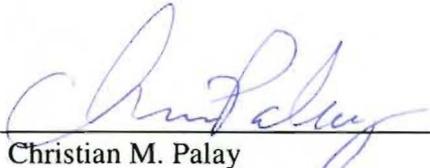


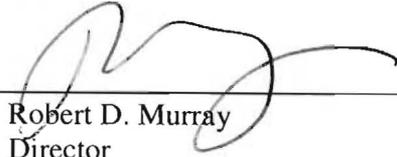


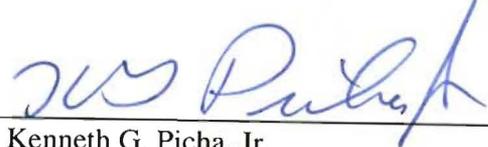
Office of Environmental Management (EM)

**Subject: High Level Waste (HLW) and Used Nuclear Fuel (UNF)
Independent Oversight Program Description**

Administrative Procedure

Preparer:  4/26/2011
Christian M. Palay Date
Office of Standards and Quality Assurance

Approval:  4-27-2011
Robert D. Murray Date
Director
Office of Standards and Quality Assurance

Concurrence:  4-27-2011
Kenneth G. Picha, Jr. Date
Acting Deputy Assistant Secretary
Safety and Security Program

1.0 PURPOSE

- 1.1 This Program Description describes the organizational structure, organizational interfaces, functional responsibilities, and levels of authority for the High Level Waste (HLW) and Used Nuclear Fuel (UNF) Independent Oversight Program. It also describes procedures, processes, and planning used to implement the applicable requirements of the Quality Assurance Requirements and Description (QARD) and EM-QA-002, Quality Assurance Program Plan (QAPP).

2.0 SCOPE

- 2.1 The organizational structure of the Environmental Management (EM) oversight program and component activities is formally documented in the EM Quality Assurance Program Plan (QAPP), EM-QA-002. The EM Office of Standards and Quality Assurance has overall responsibility for the development and implementation of the program, and is responsible for defining, integrating, and ensuring effective implementation of quality assurance (QA) activities.

The program is structured such that an individual performing the work is responsible for achieving and maintaining quality; line management is responsible for evaluating quality; and independent assessors are responsible for independently assessing the quality of the work. Effective implementation of the program is dependent upon the efforts of all levels throughout the EM organization assigned to perform work.

3.0 APPLICABILITY

- 3.1 This procedure applies to EM personnel and contractors who are directly or indirectly involved with the QARD oversight function as conducted by the Office of Standards and Quality Assurance at EM Headquarters.

4.0 REQUIREMENTS and REFERENCES

- 4.1 Quality Assurance Requirements and Description (QARD), DOE/RW-0333P, Revision 20
- 4.2 EM-QA-002, Quality Assurance Program Plan (QAPP)
- 4.3 AP-2.2Q, Surveillances
- 4.4 AP-16.1Q, Corrective Action
- 4.5 AP-17.1Q, Quality Assurance Records

4.6 AP-18.1Q, Audits

5.0 DEFINITIONS

N/A

6.0 RESPONSIBILITIES

6.1 Director, Office of Standards and Quality Assurance

6.1.1 Ensures that a QA program that meets regulatory management requirements is established, maintained, and implemented.

6.1.2 Verifies that activities subject to the QARD have been correctly performed by reviews, surveillances, and/or audits.

6.2 QA Lead, Office of Standards and Quality Assurance

6.2.1 The QA Lead shall have direct access to management at a level where appropriate action can be effective; be sufficiently independent from cost and schedule considerations; have the organizational freedom to communicate with other management positions; have no other assigned responsibilities unrelated to the QA program that would prevent appropriate attention to QA matters; and have the authority to stop work when significant conditions adverse to quality warrant such action.

6.2.2 Supports line management and individuals in understanding, interpreting, and meeting QA requirements. The QA Lead shall have sufficient authority, access to work areas, and organizational freedom to identify quality problems, recommend solutions, verify implementation of solutions, and assure that unsatisfactory conditions are controlled until proper disposition has occurred.

6.2.3 Ensures that the following QA functions are performed: scheduling, reviewing, conducting and approving QA audits; maintaining liaison with customers and subordinate organizations; preparing and reviewing procedures which implement planning documents; tracking quality indicators, performing trend analyses, and reporting QA problems; processing documentation concerning conditions adverse to quality; and resolving quality disputes.

- 6.3 EMCBC Assistant Director Office of Logistics
 - 6.3.1 Interfaces directly with the Director and QA Lead, Office of Standards and Quality Assurance to ensure that EMCBC Office of Logistics resources are available to perform the necessary responsibilities listed below.
 - 6.3.2 Provides personnel to perform document control activities such as developing, implementing, and maintaining policies, plans, and procedures that control the quality of the work consistent with applicable upper-tier requirements.
 - 6.3.3 Provides personnel to manage the Qualification and Training of Lead Auditors and Auditors ensuring adequate technical and QA training is provided to personnel performing quality affecting activities.
 - 6.3.4 Provides personnel to manage Quality Assurance Records ensuring personnel adhere to applicable procedures concerning the generation, identification, control, and protection of QA Records.
 - 6.3.5 Provides Subject Technical Specialists and/or Auditors to assist in the conduct of HLW and/or UNF site audits.
- 6.4 Office of Disposal Operations
 - 6.4.1 Interfaces directly with the Director and QA Lead, Office of Standards and Quality Assurance to ensure that Technical Specialist and/or Auditor resources are available to assist in the performance of Oversight Audit activities.
 - 6.4.2 Provides technical requirements to EM sites with HLW to follow and ensure compliance with the applicable requirements.
- 6.5 Office of Nuclear Materials Disposition
 - 6.5.1 Interfaces directly with the Director and QA Lead, Office of Standards and Quality Assurance to ensure that Technical Specialist and/or Auditor resources are available to assist in the performance of Oversight Audit activities.
 - 6.5.2 Provides technical requirements to EM sites with UNF to follow and ensure compliance with the applicable requirements.

6.6 HLW and UNF Sites

6.6.1 Interfaces directly with the QA Lead, Office of Standards and Quality Assurance, Lead Auditors, and Auditors to provide necessary evidence of compliance with requirements.

6.6.2 Responsible for HLW and/or UNF Waste Handling, Storage, and Shipping in accordance with the Quality Assurance Requirements and Description (QARD).

6.6.3 Responsible for the development of corrective action plans for the resolution of conditions adverse to quality in a timely manner.

6.7 Individuals

Each individual is responsible for the quality of his/her work. All individuals are responsible for identifying potential and existing conditions adverse to quality, and reporting them through the appropriate program outlined in AP-16.1Q, Corrective Action.

7.0 GENERAL INFORMATION

7.1 Organization

The general organizational structure of the High Level Waste (HLW) and Used Nuclear Fuel (UNF) Independent Oversight Program is defined in the Quality Assurance Program Plan (QAPP) for the Oversight of QARD-based programs at Sites with High Level Waste and Used Nuclear Fuel.

7.2 Communication

All management levels shall establish and maintain channels of communication to provide timely dissemination of quality performance information addressing issues such as:

- The development and implementation status of the QA program;
- The status and resolution of significant quality problems;
- Lessons Learned from conditions adverse to quality; and
- Management practices and improvements, and trend analysis results.

7.3 Dispute Process

QA disputes involving the definition and implementation of QA program requirements shall be brought to the attention of the QA Lead and the responsible manager and, if not resolved, elevated to the Director, Office of Standards and Quality Assurance. When resolution cannot be completed at this level, the dispute shall then be elevated to the Deputy Assistant Secretary, Safety and Security Program.

The QA Lead shall determine if the scope, magnitude, and possible effects of the dispute warrant documentation, and if so, ensure that a suitable record is submitted to the EMCBC Records Management Center.

7.4 Oversight Program QARD Application

The QA Lead will develop and maintain a QARD Requirements Matrix to identify:

- Documents that implement applicable QARD requirements
- QARD requirements are not applicable, based on scope of work
- Exceptions to QARD requirements including any written justification

7.5 Oversight Methods

7.5.1 Audits

Audits are planned and documented activity performed to determine by investigation, examination, or evaluation of objective evidence the adequacy of and compliance with established procedures, instructions, drawings, and other applicable documents and the effectiveness of implementation.

7.5.2 Surveillances

Surveillances or inspection activities are performed for the sole purpose of process control or product acceptance. They typically are not planned to the formality of Audits and monitor work in progress.

7.6 Oversight Planning

7.6.1 Scheduling

Audits shall be scheduled in a manner that provides coverage and coordination with ongoing activities, based on the status and importance of the activity. Scheduled audits shall be supplemented by additional audits of specific subjects when necessary to provide adequate coverage.

7.6.2 Preparation

The auditing organization shall develop an audit plan for each audit. This plan shall identify the audit scope, requirements, audit personnel, activities to be audited, organizations to be notified, applicable documents, schedule, and written procedures or checklists.

7.6.3 Selection of Audit Team

Selection of the Audit Team shall be performed in advance of the planned audit such that verification of qualifications, required reading and logistics can be performed prior to commencement of the audit.

7.6.4 Performance

The audit shall be conducted over a sufficient time period to ensure that the elements selected for audit are evaluated against specified requirements.

7.6.5 Reporting

The audit report shall be signed or otherwise endorsed by the QA lead auditor and issued to the audited organization. The contents of the report shall contain the elements of the following:

- Describe the scope of the audit
- Identify auditors and persons contacted
- Summarize audit results, including a statement on the effectiveness of the elements audited
- Describe each reported adverse audit finding
- Request a Corrective Action Plan (at the discretion of the auditor/assessor)

7.6.6 Response

Management of the audited organization or activity shall investigate adverse audit findings, schedule corrective actions, including measures to prevent

recurrence of significant conditions adverse to quality, and notify the appropriate organization in writing of action taken or planned. Audit responses shall be evaluated by or for the auditing organization.

7.6.7 Follow-up Action

Follow-up action shall be taken to verify that corrective action is accomplished as scheduled.

7.6.8 Audit Records

Audit records shall include audit plans, audit reports, written replies, and the record of completion of corrective action.

8.0 RECORDS MAINTENANCE

8.1 QA Records

The following QA Records, generated through implementation of this procedure, shall be prepared and submitted to the EMCBC Records Management Center in accordance with AP-17.1Q, Quality Assurance Records:

- Organizational Structure Description
- QA Dispute Records
- Quality Assurance Program Plan (QAPP)
- QARD Requirements Matrix

9.0 FORMS USED

Form 5.1-1, Record of Revision

10.0 ATTACHMENTS

N/A

RECORD OF REVISION

**DOCUMENT: AP-1.1Q, High Level Waste (HLW) and Used Nuclear Fuel (UNF)
Independent Oversight Program Description**

If there are changes to the controlled document, the revision number increases by one. Indicate changes by one of the following:

- I Placing a vertical black line in the margin adjacent to sentence or paragraph that was revised.
- I Placing the words GENERAL REVISION at the beginning of the text.

Rev. No.	Description of Changes	Revision on Pages	Date
0	Original	All	04/27/2011