**Contractor Requirements Document**  
**(Supplemented) Form**

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<th>CRD O 232.2A</th>
<th>(Supplemented Rev. 0)</th>
<th>Title: Occurrence Reporting and Processing of Operations Information.</th>
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<td>Applicable Contractor(s):</td>
<td>OccMed <em>X</em></td>
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**Section A – Headquarters CRD:**  
See DOE O 232.2A, Attachment 1, 2, 3, 4, 5, and 6.
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### Section B – General Clarifications:

1) Attachment 2, Occurrence Reporting Criteria:
   a. Section 4, Occurrence Reporting Criteria, Group 2, Subgroup B, (2): Emergency Response Organization is defined as the Hanford Fire Department.
   b. Section 4, Occurrence Reporting Criteria, Group 2 – Personnel Safety and Health, Subgroup D, Hazardous Energy (2): Work is authorized to begin when the associated work document has been released and zero-energy (safe condition and/or safe-to-work) checks have been completed.
   c. Section 4, Occurrence Reporting Criteria, Group 2 – Personnel Safety and Health, Subgroup D, Hazardous Energy (2): The following is to be added after “potential worker exposure”: “(e.g. lockout/tagout not utilized when required; lockout/tagout in place does not identify and control all potential energy sources; lockout/tagout on incorrect component or missing from correct component; component in wrong position with lockout/tagout installed; etc.)”
   d. Section 4, Occurrence Reporting Criteria, Group 4, Subgroup B, (1): Stop Work by Senior Contractor Management only requires reporting when a formal declaration is officially transmitted to DOE.
   e. Section 4, Occurrence Reporting Criteria, Group 6 – Contamination/Radiation Control, Subgroup B, Spread of Radioactive Contamination:
      f. Legacy contamination is defined as contamination not attributable to current operations.
      g. Single short form reports shall be submitted on a not to exceed quarterly basis.

2) Attachment 3, Occurrence Report Preparation, Section 2.b: The description of cause field must clearly identify how the identified causes are linked to corrective action documented.

3) Attachment 4, Occurrence Reporting Model:
   a. A root cause determination shall be made for:
      i. All Report Level (RL)-H Occurrence reports,
      ii. All Near Miss occurrences categorized under Attachment 2, Section 4, Occurrence Reporting Criteria, Group 10, Management Concerns/Issues (2),
      iii. All Management Concern occurrences reported for Recurring Events (see section E.2.b of this SCRD) under Attachment 2, Section 4, Occurrence Reporting Criteria, Group 10, Management Concerns/Issues (1),
      iv. All Occupational Injuries reported under Attachment 2, Section 4, Occurrence Reporting Criteria, Group 2.A.(4).
      v. Root Cause evaluation can be waived for the aforementioned conditions by the FR on a case by case basis when the benefit of root cause analysis is not necessary to develop corrective actions to prevent recurrence and an apparent cause determination is adequate.
   b. An apparent cause determination shall be made for all Low Level Reportable Occurrences. An apparent cause determination shall also be made for Informational Level Reportable Occurrences under Attachment 2, Occurrence Reporting Criteria,
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### Section 4 Occurrence Reporting Criteria, Group 2, Subgroup B(3) Fire in a Nuclear Facility.

- At a minimum, assess effectiveness to prevent recurrence for all High Level Reportable Occurrences.

### Section C – Specific Clarifications:
None

### Section D – General Supplemental Requirements

1. **Attachment 2, Occurrence Reporting Criteria: Section 4, Occurrence Reporting Criteria,**
   - **Group 2 – Personnel Safety and Health, Subgroup D, Hazardous Energy (2):** Any failure to follow a prescribed hazardous energy control process that did not result in potential worker exposure to or contact with hazardous energy shall be entered into the contractor corrective action management system and screened at a minimum of “track until fixed” or similar screening level. The issues shall be trended and evaluated for commonality to identify broader corrective actions.
     - **i.** “Any failure to follow a prescribed hazardous energy control process” is to be defined as a Technical Error. A Technical Error is the failure to properly execute a hazardous energy control process requirement that could have resulted in hazardous energy being present, unidentified, in the work location but was prevented by other credited process controls (i.e., technical review, installation, verification, safe condition check, safe-to work check).
   - **b.** **Group 10, Management Concerns and Issues (2) “Near Miss”:** Near miss events shall be processed in accordance with requirements of the corresponding near miss reporting criteria (e.g. Group 2A, Occupational Injuries and Exposures).
   - **c.** **Group 8, Packaging and Transportation:** For categorization under this criteria, “In Transit” shipments (i.e. outside of a facility boundary) shall be reported by the shipper of record. Events under this criteria that occur within a facility boundary are the responsibility of the facility prime contractor. “In Transit” shipments that utilize a federal driver shall be reported by the DOE primer contractor associated with the shipment.

2. **Attachment 3, Occurrence Report Preparation,**
   - **a.** **Section 2:** All Low Level reports shall contain the information required by Section 1 and Section 2.
   - **b.** **Section 3:** All Informational Level reports shall meet Section 1 and 2.a reporting detail.

3. **Attachment 4, Occurrence Reporting Model,**
   - **a.** **Table, page 1:**
     - **i.** Final High Level, Low Level, and Informational Level reports requiring causal analysis per this SCRD must be submitted within 45 calendar day after initial categorization of the occurrence.
ii. Initial Notification: The Facility manager (or delegate) shall notify the Facility Representative (FR) of all Informational Level Reportable Occurrences as soon as practical (i.e. promptly), but no later than two hours after categorization. If the FR is not available, the On-Call FR shall be notified.

b. Section 3.e, Updating Reports:
   i. For any High Level Reportable Occurrences, any proposed changes to corrective actions previously approved by the FR in ORPS (including completion dates) require FR approval. Minor administrative errors do not require approval (e.g., typographical errors).
   ii. If the final report cannot be submitted within the timeframes required by this SCRD, an update to the Occurrence Report must be submitted explaining the delay and providing an estimated date for submittal.

c. Section 4: Final High Level, Low Level, and Informational Level reports requiring causal analysis per this SCRD must be submitted within 45 calendar day after initial categorization of the occurrence.

d. Section 5.a: Within 14 days after finalizing a Low Level report or Informational Level report where causal analysis was required by this SCRD, the Facility Representative will review the report with regard to the requirements of this Order as supplemented, and will provide approval or rejection, and any comments to the contractor. Documentation of approval or rejection (including reason for rejection) of Low Level reports and Informational Level reports requiring causal analysis will be documented via the DOE oversight database.

e. Section 5.b: If the Low Level report or Informational Level report requiring causal analysis is rejected by the Facility Representative, a revised Final Report must be submitted to the ORPS database within 21 calendar days of the rejection. If the revised report cannot be resubmitted within this time, an update to the Occurrence Report must be submitted explaining the delay and providing an estimated date for resubmittal.

f. Facility Management shall notify the FR for all events such that real time notification of DOE line management occurs for personnel injuries, personnel radioactive contamination or internal deposition, chemical exposures, work stoppages, and any other situation that might receive public, regulatory, or DOE Headquarters attention. In addition, the FR shall be notified on a 24-hour basis of events that reach a threshold to notify the Facility Manager, to include non-reportable and adverse conditions. If Facility Management is unable to contact the FR, then the On-Call FR shall be notified. Specific criteria for notification shall be, but are not limited to, the following:
   i. Where employees:
      1. Receive occupational injuries or are exposed to hazards that result in transport to first aid, a hospital, or cause the individual to be entered into a medical monitoring program.
      2. Are unexpectedly exposed to hazardous substances (e.g., beryllium, asbestos, mercury, lead, etc) in excess of regulated limits, or unplanned IDLH conditions.
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3. Receive skin or personal clothing contamination where decontamination is performed. Contractors shall distinguish between clothing contamination and skin contamination.

4. Have indications of radioactive internal deposition as verified by positive nasal smears, positive workplace monitoring results requiring follow-up (i.e. whole body count, bioassay), or other measured indication of a potential internal deposition.

   ii. When stop work is invoked for any safety related reason, either by workers or contractor management.

   iii. Whenever a situation is discovered that presents an imminent danger to workers, the environment, or the public or when it is determined such a condition was known to exist and was not mitigated.

   iv. Whenever any of the following barriers associated with determining isolation conditions for hazardous energy fail:

      1. Tagout preparation
      2. Technical Review
      3. Installation
      4. Verification
      5. Safe Condition Check
      6. Safe to Work Check

   v. Any type of transportation incident/accident involving radioactive or hazardous materials.

   vi. Whenever any incident occurs that involves the potential loss of control or compromise of classified or nuclear material.

   vii. Whenever noncompliance with an environmental permit or requirement is identified and self-notification to a regulatory authority is planned.

4) At a minimum document and independently verify corrective actions for High Level and Low Level Reportable Occurrences. Sampling may be performed for Low Level reports

5) Attachment 3, Section 2.d and Attachment 4, Section 6: Occurrence Investigation and Analysis: For High Level and Low Level reports, extent of condition is required to be performed and shall include all scope of work under the contract. Extent of condition reviews shall be conducted as soon as possible in order to take necessary compensatory actions to prevent reoccurrence while the causes of the initiating event are being determined.

### Section E - Specific Supplemental Requirements:

1) CHPRC
   a. In addition to those items listed in Section D.3.f of this SCRD, Facility Management shall notify the FR on a 24-hr real time basis of PISAs, Declaration of a Potential Inadequacy of the Documented Safety Analysis (a potential positive USQ), per 10 CFR 830.203.

2) CHPRC and MSA
   a. Attachment 4, *Occurrence Reporting Model*: Identifying Safety Performance Trends and Recurring Events:
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i. Ongoing analyses, considering all reportable and non-reportable occurrences and events, must be performed to look for trends, determine if corrective actions are effective, and conditions/occurrences are recurring.
   1. At a minimum, these analyses must be performed quarterly and must consider at least the previous 12-months.
   2. The analysis results must be reported to line management.
   3. Trending of ORPS data may be conducted as part of integrated analyses within the organization’s issue management or contractor assurance systems.
   4. Each contractor must perform ongoing, but as a minimum quarterly analyses of events during a 12 month period to look for trends.
   5. The quarterly performance analysis submitted to DOE-RL will include trend analysis and any emergent or adverse trends identified.

ii. Reports will cover three-month period that end on November 30th, February 28th, May 31st, and August 31st.

iii. The Reports will be formally transmitted to DOE-RL 30 days after the report period identified above.

iv. If a trend is identified after the period identified in 1b above but before the transmittal date of 1 above it will be included in the transmitted report.

v. For Management Concerns reported for Recurring Events submitted per section b below, the quarterly report to DOE must include discussion of corrective actions taken and implementation status.

vi. List the events (ORPS and others) that support an identified recurrence report. The list shall include the ORPS reference number, title, categorization date, and significant category. For non-ORPS events, the list shall include a title, brief description, and date of discovery or categorization.

vii. Cite the associated lessons learned including the DOE Corporate Lessons Learned database assigned number. If lessons learned have not yet been submitted, indicate that they will be submitted and follow-up in the next Quarterly Report. Lessons learned submitted to the Corporate Lessons Learned database for recurring events shall include the associated ORPS event number in the Reference field.

viii. Provide the status of corrective actions taken to address previous recurrent events until they are closed.

ix. For recurrent events and negative trends from previous reports discuss the effectiveness of the corrective actions taken.

x. Provide the status of lessons learned developed until they are submitted to the DOE Corporate Lessons Learned database and provide the assigned reference number.

b. Attachment 4, Occurrence Reporting Model: Reporting of Management Concerns reported for Recurring Events in the ORPS database: Recurring events identified by analysis of section E.2.a of this SCRD must be categorized and reported collectively as a Group 10(1) Management Concern occurrence no matter what the previous individual categorizations were, even if they were previously non-reportable.
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1. Management Concerns reported for Recurring Events will be written to the same requirements as a High Level report.
2. Previous individual Occurrence Report Numbers associated with the recurring event must be provided in the ORPS report Description of Cause block.
3. Lessons learned submitted for Management Concerns reported for Recurring Events shall contain reference to the ORPS report number.