

Portsmouth Information Release Approval Request

I. Document / Information Description (to be filled out by the requestor)

ID Number: _____ Originated Date: 02/11/15

Document Title or Identification: WEMS-RSI Walkdowns 540 1-27-15, 720 11-11-14, 1000 10-28-14, 735 9-23-14, 700 12-16-14, 720 11-11-14, 1000 10-28-14, 540 8-19-14, 700 12-16-14, 720 11-11-14, 735 9-23-14, 540 8-19-14, 700 12-16-14, 1000 10-28-14, 735 9-23-14, 540 8-19-14

Comments: _____

Original Author(s) /Organization: R Snodgrass

Format: Document: Total # Pages Transparencies / Presentations
 Photos: # Photos Electronic Media: Type: _____

Reviews Requested: Classification Official Use Only Export Controlled Information
 Unclassified Controlled Nuclear Information Public Release
 Yes No Contains Patentable or Proprietary and/or has Clearance Patent Information

Requestor: R Snodgrass
Printed Name

II. Classification and Protected Information Review

	Yes	No	
Classification Review:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Document is Classified
Sensitive Information	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Contains Official Use Only (OUO)
Review:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Contains Unclassified Controlled Nuclear Information (UCNI)
ECI Review:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Contains Export Controlled Information (ECI)

III. Information Release Approved or Denied (To be completed by the PORTS Classification Office)

Yes No - Approved for Public Release
 Approved with restrictions (choose one):
 Approved for DOE/ DOE Contractor Personnel Only
 Approved for Internal Distribution Only
 Other (describe): _____

Classification Office:
(Signature / Date)

Samuel C. Eldridge

Digitally signed by Samuel C. Eldridge
 DN: c=us, o=u.s. government, ou=department of energy, ou=Energy IT Services, ou=Portsmouth Paducah Project Office, ou=People, cn=Samuel C. Eldridge
 Date: 2015.02.11 08:41:25 -05'00'

Suggested file location & name: _____

 O:\WEMS RMDC File Drop Box\Classification Office File Drop\WEMS-RSI Walkdowns 540 1-27-15, 720 11-11-14

Blank form is approved for public release



X-540 Facility Walk-Down Summary

01/27/2015

Team Members:

Eric Anderson - WEMS Media Specialist
John Chestnut - WEMS Hourly Service Worker
Mark Cornett - WEMS Hourly Service Worker
Tony Couser – WEMS Hourly Service Worker
Cathy Forshey – WEMS Senior Quality Assurance Specialist
Richard Kielmar – WEMS Physical Security
Mike Horton – WEMS USW Safety Representative
Matt Miller – WEMS ESH&Q Manager
Phil Moore – WEMS Facility Manager
Rick Snodgrass – Tetra Tech Senior Construction Manager
Michael Staker – WEMS Safety Technician

X-540:

Housekeeping:

- **Proficiency:** Housekeeping in the entire X-540 is exemplary
(Notified Management of Proficiency)

Administrative:

- **Recommendation:** Replace all four legged swivel base chairs with chairs having at least 5 legs (*see picture #1*)
(Submitted a request for work to Work Control to have all four legged swivel base chairs replaced)
- Agent Weight Inspection Record tag on fire suppression system has not been filled out (*see picture #2*)
(Contacted WEMS Materials Manager for corrective action)

Fire Safety:

- Gage for fire suppression system is indicating a low level of content (*see picture #3*)
(Completed - FBP Fire Services Shift Commander was notified and responded that the tanks are indicating in the red due to room temperature and this is acceptable)

Hazardous Material:

- Metal barrel used to accumulate circuit boards for recycling is not staged in a Satellite Accumulation Area (*see picture #4*)
(Completed. WEMS Environmental Manager has performed an evaluation and determined that the barrel does not need to be staged in a Satellite Accumulation Area)

General Industry:

- Pipe insulation in Extinguisher Room is deteriorating and needs to be repaired. (*see picture #5*)
(Submitted a request for work to Work Control to have insulation repaired)

Electrical Safety:

- Opening in red electrical box (*see picture #6*)
(Submitted a request for work to Work Control to have opening properly covered)
- **Recommendation:** Install a GFCI outlet on wall where heater is used in lunch room
(Submitted a request for work to Work Control to have a GFCI outlet installed)

A: Acceptable - meets requirements

F: Finding – a direct deviation from a written requirement

O: Observation – a condition if left unchanged may lead to a Finding (considered Acceptable because does not violate a written requirement, but requires resolution)

R: Recommendation – suggestions for improvement

P: Proficiency – an exemplary practice or area of performance



Picture #1



Picture #2



Picture #3



Picture #4



Picture #5



Picture #6

Date: November 11, 2014

Inspection Team Members:

Eric Anderson
 Mike Horton –
 Phil Moore
 Gretchen Ondera-Kisor
 Michael Staker

Facility: X-720 Shipping and Receiving



Safety Items	Accep.	Unaccep.	Description	Completion Date
HOUSEKEEPING				
			* Minor Housekeeping Items (see summary)	
Aisles and passage ways clear	X			
Walking surfaces free from slip, trip, and fall hazards	X			
Exits unobstructed and open freely	X			
Emergency exit signs illuminated	X			
Materials stored on top of cabinets	X			
Materials leaning against posts or racks	X			
Trash receptacles available and emptied	X			
Restroom facilities clean and well maintained	X			
Eating areas clean and sanitary	X			
All lights operational	X			
ADMINISTRATIVE				
OSHA sign posted	X			
Emergency Action Plan posted	X			
Forklift inspection sheets available and completed	X			
Personnel wearing appropriate PPE	X			
FIRE SAFETY				
Fire extinguishers properly located and unobstructed	X			
Fire extinguishers charged and currently inspected	X			
Fire extinguishers identified with labels or lights	X			
18" clearance between sprinkler head and stored material	X			
3 ft. clearance around fire alarm pull station	X			
Ceiling tiles in place and in good condition	X			

Safety Items	Accep.	Unaccep.	Description	Completion Date
HAZARDOUS MATERIAL				
MSDS available	X			
Personnel aware of hazard communications/MSDS	X			
Chemicals stored appropriately	X			
Containers labeled and legible	X			
Waste containers closed and labeled appropriately	X			
GENERAL INDUSTRY				
Electrical cords or pneumatic lines crossing floors	X			
Tools, equipment stored in appropriate places	X			
Supplies stored neat and orderly	X			
Shelves and racks overloaded	X			
Equipment grounded and secured to the floor	X			
Load limits posted on shelving	X			
Ladders in good condition and stored securely	X			
All hand and power tools in good condition	X			
GFCIs used with portable power tools	X			
Machine guards in place and working properly	X			
ELECTRIAL SAFETY				
3ft clearance maintained around electrical boxes		X	Finding: Access to Electrical panel LP-16CI is blocked <i>(Completed, access to electrical panel has been restored)</i>	
Electrical circuits properly labeled	X			
No exposed wiring	X			
Knock-outs missing	X			
Strain reliefs in good condition	X			
Extension cords not being used as permanent wiring	X			
Extension cords have grounding prong	X			

Date: December 16, 2014

Facility: X-700



Inspection Team Members:

Eric Anderson	Bernie Pertuset
Kip Archer	Michael Staker
John Chestnut	Cliff White
Mike Horton	Kari Williams
Betty McAdow	Rick Snodgrass

Safety Items	Accep.	Unaccep.	Description	Completion Date
HOUSEKEEPING				
			Proficiency: Housekeeping in the Sheet Metal Shop is excellent Proficiency: Housekeeping in the Janitorial storage area (column B-1) is excellent	
Aisles and passage ways clear	X			
Walking surfaces free from slip, trip, and fall hazards	X			
Exits unobstructed and open freely	X			
Emergency exit signs illuminated	X			
Materials stored on top of cabinets	X			
Materials leaning against posts or racks	X			
Trash receptacles available and emptied	X			
Restroom facilities clean and well maintained	X			
Eating areas clean and sanitary	X			
All lights operational	X			
ADMINISTRATIVE				
OSHA sign posted	X			
Emergency Action Plan posted	X			
Forklift inspection sheets available and completed	X			
Personnel wearing appropriate PPE	X			
FIRE SAFETY				
Fire extinguishers properly located and unobstructed	X		Recommendation: Paint a square on floor of Weld Shop to indicate location of fire extinguisher.	
Fire extinguishers charged and currently inspected	X			
Fire extinguishers identified with labels or lights	X			
18" clearance between sprinkler head and stored material	X			
3 ft. clearance around fire alarm pull station	X			
Ceiling tiles in place and in good condition	X			

Safety Items	Accep.	Unaccep.	Description	Completion Date
HAZARDOUS MATERIAL				
MSDS available	X			
Personnel aware of hazard communications/MSDS	X			
Chemicals stored appropriately	X			
Containers labeled and legible	X			
Waste containers closed and labeled appropriately	X			
GENERAL INDUSTRY				
			Recommendation: Leslie water heater in men's locker room is very hot. Recommend placing a chain boundary and signage stating that the heater components are hot.	
Electrical cords or pneumatic lines crossing floors	X			
Tools, equipment stored in appropriate places	X			
Supplies stored neat and orderly	X			
Shelves and racks overloaded	X			
Equipment grounded and secured to the floor	X			
Load limits posted on shelving	X			
Ladders in good condition and stored securely	X			
All hand and power tools in good condition	X			
GFCIs used with portable power tools	X			
Machine guards in place and working properly	X			
ELECTRICAL SAFETY				
3ft clearance maintained around electrical boxes	X			
Electrical circuits properly labeled	X			
No exposed wiring		X	Finding: Electrical panel LP-C4E was left open (<i>Completed, panel has been closed.</i>)	
Knock-outs missing	X			
Strain reliefs in good condition	X			
Extension cords not being used as permanent wiring	X			
Extension cords have grounding prong	X			



Oversight Activity – Management/Independent Conformity Assessment Report

<p>Oversight Activity Type/Tracking # (specify walkthrough, walkdown, walkaround, inspection, surveillance, review, examination, evaluation, other type of oversight activity and tracking number, as applicable):</p> <p>EQ-SH-OA-14-081, Facility Inspection (December)</p> <p><input checked="" type="checkbox"/> Management Conformity Assessment (MCA) <input type="checkbox"/> Independent Conformity Assessment (ICA). This report may be supplemented with completion and attachment of FSSF-2613, <i>Independent Conformity Assessment Record</i>, and other planning and coordination documents (ICA Notification, ICA Plan, Checklists, Pre-ICA Meeting Notes, Post-ICA Meeting Notes, etc.), as appropriate.</p>	<p>Oversight Activity Title/Assessed Organization/Project (provide oversight activity title from plan, other; name of work organization, project, etc. being assessed, and project number, as applicable):</p> <p>Facility Inspection (December X-700)</p>
<p>Date Conducted (provide date(s) oversight activity was performed):</p> <p>12/16/2014</p>	<p>Location (facility or place where oversight activity was performed):</p> <p>X-700</p>
<p>Oversight Organization (name of organization – internal Department/Function, external subcontractor, other performing oversight activity):</p> <p>Environmental, Safety, Health and Quality - Safety and Health</p>	<p>Oversight Team (name and signature of person(s) performing oversight activity):</p> <p>Michael Horton</p> <p><input checked="" type="checkbox"/> Factual Accuracy Review Concurrence/Approval signature and date by: <u>Michael Horton (signature on file)</u></p>
<p>Scope of Oversight Activity (describe why assessment was performed and what was covered):</p> <p>Focus areas include: Housekeeping, Industrial Safety, Fire Safety, Hazardous Material Storage, Electrical Safety and Miscellaneous</p>	
<p>Basis (provide full reference to documents where requirements, specifications, other criteria forming basis characteristics of oversight activity were identified):</p> <p>10 CFR 851.21 Hazard Identification and Assessment - Contractor must establish procedures to identify existing and potential work place hazards and assess the risk of injury.</p>	
<p>Lines of Inquiry (specify checklist, guidance cards, basis document excerpts, other basis characteristics tracking tools used; attach if not re-stated in Characteristics in Attachment 1, Results Summary):</p> <p>Attachment #1 – Results Summary Attachment #2 – Walk-Down Summary Attachment #3 – Checklist</p>	
<p>Personnel Contacted (list who was interviewed and consulted during the oversight activity and their title and organization):</p> <p>None</p>	

Not Approved for Public Release

Oversight Activity – Management/Independent Conformity Assessment Report

Results Summary (see Instructions): list Remarks (results) in relation to Characteristics (requirements); use attached summary and attach backup materials as appropriate; clearly Identify Acceptable (meets requirements), Findings (a direct deviation or non-compliance from a written requirement), Observations (a condition that if left unresolved, may lead to a Finding, and requires resolution), Recommendations (best practices and suggestions for improvement), and Proficiencies (an exemplary practice or area of performance excellence). Identify in Status if corrected at the time of the assessment or unresolved. For Findings and Observations, identify Trending Codes in ISMS, Quality Criteria and Apparent Cause.

ATTACHMENT 1 – RESULTS SUMMARY								
Item #	Characteristic (Requirement)	A, F, O, R or P	<u>QA Use Only!</u> IR, NCR, OR, PAAA, LL, Signif. Screen.	ISMS		Quality Criteria	Remarks (Results)/ Status (Corrected or Unresolved)	Apparent Cause
				Funct.	Prin.			
1	Housekeeping (10 Items), See Attachment #3 – Checklist	A (10) P (2)	N/A	4	6	9	<p>Proficiency: Housekeeping in the Sheet Metal Shop is excellent</p> <p>Proficiency: Housekeeping in the Janitorial storage area (column B-1) is excellent</p> <p>See Attachment 2, X-700, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.</p>	N/A
2	Administrative (4 Items), See Attachment #3 – Checklist	A (4)	N/A	4	6	9	<p>See Attachment 2, X-700, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution</p>	N/A
3	Fire Safety (6 Items), See Attachment #3 – Checklist	A (6) R (1)	N/A	4	6	9	<p>Recommendation: Paint a square on floor of Weld Shop to indicate location of fire extinguisher.</p> <p>See Attachment 2, X-700, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution</p>	N/A
4	Hazardous Material (5 Items), See Attachment #3 – Checklist	A (5)	N/A	4	6	9	<p>See Attachment 2, X-700, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution</p>	N/A

Oversight Activity – Management/Independent Conformity Assessment Report

ATTACHMENT 1 – RESULTS SUMMARY											
Item #	Characteristic (Requirement)	A, F, O, R or P	QA Use Only! IR, NCR, OR, PAAA, LL, Signif. Screen.	ISMS		Quality Criteria	Remarks (Results)/ Status (Corrected or Unresolved)	Apparent Cause			
				Funct.	Prim.						
5	General Industry (10 Items), See Attachment #3 – Checklist	A(10) R (1)	N/A	4	6	9	Recommendation: Leslie water heater in men’s locker room is very hot. Recommend placing a chain boundary and signage stating that the heater components are hot. See Attachment 2, X-700, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution	N/A			
6	Electrical Safety (7 Items), See Attachment #3 – Checklist	A (6) F (1)	N/A	4	6	9	Finding: Electrical panel LP-C4E was left open (<u>Completed, panel has been closed.</u>) See Attachment 2, X-700, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution	4			
Number of Characteristics		Number Acceptable		Number of Findings		Number of Observations		Number of Recommendations		Number of Proficiencies	
42		41		1		0		2		2	

Legend: A: Acceptable – meets requirements

F: Finding – a direct deviation or non-compliance from a written requirement

O: Observation – a condition if left unresolved may lead to a Finding, and requires resolution

R: Recommendation – best practices and suggestions for improvement

P: Proficiency – an exemplary practice or area of performance Excellence

N/A: Not Applicable

N/E: Not Evaluated

GFS – Government Furnished Service

IR: screened for Incident Report

NCR: screened for non-conformance report

OR: screened for occurrence report

PAAA: screened for Price Anderson

Amendments Act report

OELL – screened for Operating

Experience/Lessons Learned

Instructions:

OA are generally designated management conformity assessment (MCA) or Independent Conformity Assessment (ICA). OA include walkthroughs, walkdowns, walkarounds, inspections, surveillances, reviews, examinations, evaluations, and other types of oversight activities, which evaluate programs, processes, products, services, and facilities over varying time intervals. Graded assessments (GA) are generally MCA of limited extent, level or degree, rate an activity (i.e., acceptable, other), and generally include walkthroughs, walkdowns, walkarounds and inspections. MCA generally have shorter time intervals from start to completion than ICA. ICA generally requires more resources than MCA, and planning, performing, and reporting must be conducted with full knowledge and involvement of the Project Manager. ICA are generally assessments of a larger scope and longer duration than MCA, conducted by a team coordinated by a Lead Assessor with specified training and qualification, with results documented in a rigorous narrative report. The degree of independence of the assessment team (i.e., free of direct responsibility in the area assessed, and carried out without a vested interest in the result) is the primary differentiator from MCAs. MCA may be supplemented with attachment of other documents, and ICA may be supplemented with attachment of FSSF-2613, *Independent Conformity Assessment Record*, and other ICA planning and coordination documents (ICA Notification, ICA Plan, Checklists, Pre-ICA Meeting Notes, Post-ICA Meeting Notes, etc.), as appropriate.



Oversight Activity – Management/Independent Conformity Assessment Report

Note: Some ICA, depending on the scope, may require a more elaborate formal structured written report than provided by FSSF-2604. Contact the Quality Manager for guidance.

Draft and Final OA reports Distribution List includes, at a minimum, Line Manager, primary point of contact(s) in work organization, and Quality Manager. Other organizations (other WEMS work organizations, parent companies, subcontractors, other contractors, regulators, DOE and DOE support subcontractor, as appropriate) may also be included in distribution, as determined by the Responsible Person/Line Manager.

Distribution of Final report to Quality Manager must include distribution memo and PDF files. Quality Manager enters report into the Integrated Oversight Program Plan (IOPP) Log, and provides PDF files to CTS Coordinator for entry of issues [Findings, Observations, Recommendations (Optional)] into the CTS in accordance with FSS-2607, *Incident Reporting and Issues Management Program*, for action tracking, closure, and trending, and to Records Management for archives. Nonconformance Reports (NCRs) – in accordance with FSS-2603, *Control of Nonconforming Items and Services*, NCRs must be completed and attached to this report whenever an item (i.e., generally equipment and material) discovered during the OA is tagged out as unusable until corrected. Findings, Observations and Recommendations (Optional) (i.e., Issues) will be entered into the WEMS FSS Commitment Tracking System (CTS), tracked through closure and require a closure evidence package.

Tracking Numbers: OA tracking numbers are assigned by the Quality Manager in the following format: Department - Function - OA - Year- Consecutive Number (Example: Environmental, Safety, Health, and Quality (EQ), Quality (QA) - OA - 10 - 001). Quality maintains a list of Department and Function abbreviations.

Trending Codes:

<i>ISMS Functions:</i>	<i>ISMS Principles:</i>	<i>Quality Criteria (10CFR830.122):</i>	<i>Apparent Cause</i>
<i>1: Define the Scope of Work</i>	<i>1: Line Management Responsibility for Safety</i>	<i>1: Program</i>	<i>1: Design/Engineering Problem</i>
<i>2: Analyze the Hazards</i>	<i>2: Clear Roles and Responsibilities</i>	<i>2: Personal Training and Qualifications</i>	<i>2: Equipment/Material Problem</i>
<i>3: Develop and Implement Hazard Controls</i>	<i>3: Competence Commensurate with Responsibility</i>	<i>3: Quality Improvement</i>	<i>3: Human Performance Less Than Adequate</i>
<i>4: Perform Work Within Controls</i>	<i>4: Balanced Priorities</i>	<i>4: Documents and Records</i>	<i>4: Management Problem</i>
<i>5: Provide Feedback and Continuous Improvement</i>	<i>5: Identification of Safety Standards and Requirements</i>	<i>5: Work Processes</i>	<i>5: Communications Less Than Adequate</i>
	<i>6: Hazard Control Tailored to Work Being Performed</i>	<i>6: Design</i>	<i>6: Training Deficiency</i>
	<i>7: Operations Authorization</i>	<i>7: Procurement</i>	<i>7: Other Problem</i>
	<i>8: Worker involvement</i>	<i>8: Inspection and Acceptance Testing</i>	
		<i>9: Management Assessment</i>	
		<i>10: Independent Assessment</i>	
		<i>11: Rad Protection (10CFR835)</i>	



Oversight Activity – Management/Independent Conformity Assessment Report

Attachment #2 – Walk-Down Summary



Oversight Activity – Management/Independent Conformity Assessment Report

Attachment #3 – Checklist



Oversight Activity – Management/Independent Conformity Assessment Report

<p>Oversight Activity Type/Tracking # (specify walkthrough, walkdown, walkaround, inspection, surveillance, review, examination, evaluation, other type of oversight activity and tracking number, as applicable):</p> <p>EQ-SH-OA-14-064, Facility Inspection (November)</p> <p><input checked="" type="checkbox"/> Management Conformity Assessment (MCA) <input type="checkbox"/> Independent Conformity Assessment (ICA). This report may be supplemented with completion and attachment of FSSF-2613, <i>Independent Conformity Assessment Record</i>, and other planning and coordination documents (ICA Notification, ICA Plan, Checklists, Pre-ICA Meeting Notes, Post-ICA Meeting Notes, etc.), as appropriate.</p>	<p>Oversight Activity Title/Assessed Organization/Project (provide oversight activity title from plan, other; name of work organization, project, etc. being assessed, and project number, as applicable):</p> <p>Facility Inspection (November X-720 Shipping and Receiving)</p>
<p>Date Conducted (provide date(s) oversight activity was performed):</p> <p>11/11/2014</p>	<p>Location (facility or place where oversight activity was performed):</p> <p>X-720 Shipping and Receiving</p>
<p>Oversight Organization (name of organization – internal Department/Function, external subcontractor, other performing oversight activity):</p> <p>Environmental, Safety, Health and Quality - Safety and Health</p>	<p>Oversight Team (name and signature of person(s) performing oversight activity):</p> <p>Michael Horton</p> <p><input checked="" type="checkbox"/> Factual Accuracy Review Concurrence/Approval signature and date by: <u>Michael Horton (signature on file)</u></p>
<p>Scope of Oversight Activity (describe why assessment was performed and what was covered):</p> <p>Focus areas include: Housekeeping, Industrial Safety, Fire Safety, Hazardous Material Storage, Electrical Safety and Miscellaneous</p>	
<p>Basis (provide full reference to documents where requirements, specifications, other criteria forming basis characteristics of oversight activity were identified):</p> <p>10 CFR 851.21 Hazard Identification and Assessment - Contractor must establish procedures to identify existing and potential work place hazards and assess the risk of injury.</p>	
<p>Lines of Inquiry (specify checklist, guidance cards, basis document excerpts, other basis characteristics tracking tools used; attach if not re-stated in Characteristics in Attachment 1, Results Summary):</p> <p>Attachment #1 – Results Summary Attachment #2 – Walk-Down Summary Attachment #3 – Checklist</p>	
<p>Personnel Contacted (list who was interviewed and consulted during the oversight activity and their title and organization):</p> <p>None</p>	

Not Approved for Public Release

Oversight Activity – Management/Independent Conformity Assessment Report

Results Summary (see Instructions): list Remarks (results) in relation to Characteristics (requirements); use attached summary and attach backup materials as appropriate; clearly Identify Acceptable (meets requirements), Findings (a direct deviation or non-compliance from a written requirement), Observations (a condition that if left unresolved, may lead to a Finding, and requires resolution), Recommendations (best practices and suggestions for improvement), and Proficiencies (an exemplary practice or area of performance excellence). Identify in Status if corrected at the time of the assessment or unresolved. For Findings and Observations, identify Trending Codes in ISMS, Quality Criteria and Apparent Cause.

ATTACHMENT 1 – RESULTS SUMMARY									
Item #	Characteristic (Requirement)	A, F, O, R or P	<u>QA</u> <u>Use</u> <u>Only!</u> IR, NCR, OR, PAAA, LL, Signif. Screen.	ISMS		Quality Criteria	Remarks (Results)/ Status (Corrected or Unresolved)	Apparent Cause	
				Funct.	Prin.				
1	Housekeeping (10 Items), See Attachment #3 – Checklist	A (10)	N/A	4	6	9	See Attachment 2, X-720, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
2	Administrative (4 Items), See Attachment #3 – Checklist	A (4)	N/A	4	6	9	See Attachment 2, X-720, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution	N/A	
3	Fire Safety (6 Items), See Attachment #3 – Checklist	A (6)	N/A	4	6	9	See Attachment 2, X-720, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution	N/A	
4	Hazardous Material (5 Items), See Attachment #3 – Checklist	A (5)	N/A	4	6	9	See Attachment 2, X-720, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution	N/A	
5	General Industry (10 Items), See Attachment #3 – Checklist	A(10) R (1)	N/A	4	6	9	Recommendation: Gates at equipment door should open in both directions in order to block pedestrian traffic <i>(Submitted a Request for Work to Work Control to have recommendation evaluated)</i> See Attachment 2, X-720, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution	N/A	

Oversight Activity – Management/Independent Conformity Assessment Report

ATTACHMENT 1 – RESULTS SUMMARY									
Item #	Characteristic (Requirement)	A, F, O, R or P	QA Use Only! IR, NCR, OR, PAAA, LL, Signif. Screen.	ISMS		Quality Criteria	Remarks (Results)/ Status (Corrected or Unresolved)	Apparent Cause	
				Funct.	Prim.				
6	Electrical Safety (7 Items), See Attachment #3 – Checklist	A (6) F (1)	N/A	4	6	9	<p>Finding: Access to Electrical panel LP-16CI is blocked (<u>Completed, access to electrical panel has been restored.</u>)</p> <p>See Attachment 2, X-720, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution</p>	4	
Number of Characteristics		Number Acceptable		Number of Findings		Number of Observations		Number of Recommendations	Number of Proficiencies
42		41		1		0		1	0

Legend: A: Acceptable – meets requirements

F: Finding – a direct deviation or non-compliance from a written requirement

O: Observation – a condition if left unresolved may lead to a Finding, and requires resolution

R: Recommendation – best practices and suggestions for improvement

P: Proficiency – an exemplary practice or area of performance Excellence

N/A: Not Applicable

N/E: Not Evaluated

GFS – Government Furnished Service

IR: screened for Incident Report

NCR: screened for non-conformance report

OR: screened for occurrence report

PAAA: screened for Price Anderson

Amendments Act report

OELL – screened for Operating

Experience/Lessons Learned

Instructions:

OA are generally designated management conformity assessment (MCA) or Independent Conformity Assessment (ICA). OA include walkthroughs, walkdowns, walkarounds, inspections, surveillances, reviews, examinations, evaluations, and other types of oversight activities, which evaluate programs, processes, products, services, and facilities over varying time intervals. Graded assessments (GA) are generally MCA of limited extent, level or degree, rate an activity (i.e., acceptable, other), and generally include walkthroughs, walkdowns, walkarounds and inspections. MCA generally have shorter time intervals from start to completion than ICA. ICA generally requires more resources than MCA, and planning, performing, and reporting must be conducted with full knowledge and involvement of the Project Manager. ICA are generally assessments of a larger scope and longer duration than MCA, conducted by a team coordinated by a Lead Assessor with specified training and qualification, with results documented in a rigorous narrative report. The degree of independence of the assessment team (i.e., free of direct responsibility in the area assessed, and carried out without a vested interest in the result) is the primary differentiator from MCAs. MCA may be supplemented with attachment of other documents, and ICA may be supplemented with attachment of FSSF-2613, *Independent Conformity Assessment Record*, and other ICA planning and coordination documents (ICA Notification, ICA Plan, Checklists, Pre-ICA Meeting Notes, Post-ICA Meeting Notes, etc.), as appropriate.

Note: Some ICA, depending on the scope, may require a more elaborate formal structured written report than provided by FSSF-2604. Contact the Quality Manager for guidance.

Draft and Final OA reports Distribution List includes, at a minimum, Line Manager, primary point of contact(s) in work organization, and Quality Manager. Other organizations (other WEMS work organizations, parent companies, subcontractors, other contractors, regulators, DOE and DOE support subcontractor, as appropriate) may also be included in distribution, as determined by the Responsible Person/Line Manager.

Distribution of Final report to Quality Manager must include distribution memo and PDF files. Quality Manager enters report into the Integrated Oversight Program Plan (IOPP) Log, and provides PDF files to CTS Coordinator for entry of issues [Findings, Observations, Recommendations (Optional)] into the CTS in accordance with FSS-2607, *Incident Reporting and Issues Management Program*, for action tracking, closure, and trending, and to Records Management for archives. Nonconformance Reports (NCRs) – in accordance with FSS-2603, *Control of Nonconforming Items and Services*, NCRs must be completed and attached to this report whenever an item (i.e., generally equipment and material) discovered during the OA is tagged out as unusable until corrected. Findings, Observations and Recommendations (Optional) (i.e., Issues) will be entered into the WEMS FSS Commitment Tracking System (CTS), tracked through closure and require a closure evidence package.

Not Approved for Public Release



Oversight Activity – Management/Independent Conformity Assessment Report

Tracking Numbers: OA tracking numbers are assigned by the Quality Manager in the following format:
 Department - Function - OA - Year- Consecutive Number (Example: Environmental, Safety, Health, and Quality (EQ), Quality (QA) - OA - 10 - 001). Quality maintains a list of Department and Function abbreviations.

Trending Codes:

<i>ISMS Functions:</i>	<i>ISMS Principles:</i>	<i>Quality Criteria (10CFR830.122):</i>	<i>Apparent Cause</i>
1: Define the Scope of Work 2: Analyze the Hazards 3: Develop and Implement Hazard Controls 4: Perform Work Within Controls 5: Provide Feedback and Continuous Improvement	1: Line Management Responsibility for Safety 2: Clear Roles and Responsibilities 3: Competence Commensurate with Responsibility 4: Balanced Priorities 5: Identification of Safety Standards and Requirements 6: Hazard Control Tailored to Work Being Performed 7: Operations Authorization 8: Worker involvement	1: Program 2: Personal Training and Qualifications 3: Quality Improvement 4: Documents and Records 5: Work Processes 6: Design 7: Procurement 8: Inspection and Acceptance Testing 9: Management Assessment 10: Independent Assessment 11: Rad Protection (10CFR835)	1: Design/Engineering Problem 2: Equipment/Material Problem 3: Human Performance Less Than Adequate 4: Management Problem 5: Communications Less Than Adequate 6: Training Deficiency 7: Other Problem



Oversight Activity – Management/Independent Conformity Assessment Report

Attachment #2 – Walk-Down Summary



Oversight Activity – Management/Independent Conformity Assessment Report

Attachment #3 – Checklist



X-700 Facility Walk-Down Summary

12/16/2014

Team Members:

Eric Anderson – WEMS Media Specialist
Kip Archer – WEMS Safety and Health Manager
John Chestnut – WEMS Hourly Service Worker
Mike Horton – WEMS USW Safety Representative
Betty McAdow – WEMS RMDC Clerk
Bernie Pertuset – WEMS Training Specialist
Michael Staker – WEMS Safety Technician
Cliff White – WEMS Hourly Building Mechanic
Kari Williams – WEMS Computer Support Coordinator
Rick Snodgrass – Tetra Tech Senior Construction Manager

X-700:

Housekeeping:

- **Proficiency:** Housekeeping in the Sheet Metal Shop is excellent
Notified Management of Proficiency
- **Proficiency:** Housekeeping in the Janitorial storage area (column B-1) is excellent
Notified Management of Proficiency
- Poor housekeeping practices at the south parking/equipment staging area (including broken glass, a radioactive control tag on the ground, and multiple trip hazards (*see pictures #1 and #2*))
Notified WEMS O&M Manager
- Mobile Equipment Shop needs general clean-up
Notified WEMS O&M Manager

Administrative:

- X-700 South Vehicle Repair Shop - EZ-GO golf cart #418 was observed in some stage of repair without the vehicle being tagged or identified in some manner as being out-of-service for repairs.
(Completed, Administrative Control tag has been affixed to cart)
- Metal drum near carpentry shop needs clear legible labeling (*see picture #3*)
(Completed, the X-700 drum label has been removed and the words Floor Sweepings is on the lid. This drum is to be removed in the future as sweepings are now bagged and placed in the carpenter shop rolling dumpster for disposition.)

- Scrap metal drum in Electrical shop is not properly labeled.
(Submitted a Request for Work to Work Control to have label applied)
- Water catch pan at column D-2 needs labeled.
(Completed, labeling has been applied)

Fire Safety:

- **Recommendation:** Paint a square on floor of Weld Shop to indicate location of fire extinguisher. (see picture #4) *(WO #14120048)*
- Ruby light box 2555B Southeast corner of building is burnt out
(Completed, the ruby light has been relamped and is operating properly)
- A small quantity combustible material is in the Flammables cabinet near column C-2
(Completed, combustible materials have been removed)

Hazardous Material:

- A compressed gas cylinder mounted on the Miller welding cart was observed with the regulator installed. (see picture #5)
(Completed, regulator was removed from cylinder.)
- Protective insulation wrap around asbestos pipe insulation south of column A-4 is hanging down and could be easily pulled (potentially cause damage to asbestos insulation) (see picture #6)*(FBP has been notified to abate the asbestos)*

General Industry:

- Paint peeling off of floor in Men's Locker Room (see picture #7)
(Scheduled to be repainted after the beginning of 2015)
- **Recommendation:** Leslie water heater in men's locker room is very hot. Recommend placing a chain boundary and signage stating that the heater components are very hot. (see picture #8)
(Submitted a Request for Work to Work Control to have chain and signage installed)
- Water leak in entrance to mezzanine office area *(Scheduled to be repaired in early 2015)*

Electrical Safety:

- **Finding:** Electrical panel LP-C4E was left open (see picture #9)
(Completed, panel has been closed.)
- Daeco Cooler (located north of break room and fence) has no labeling identifying voltage (see picture #10) *(Submitted a Request for Work to Work Control to have Cooler evaluated for proper labeling)*

A: Acceptable - meets requirements

F: **Finding** – a direct deviation from a written requirement

O: **Observation** – a condition if left unchanged may lead to a Finding (considered Acceptable because does not violate a written requirement, but requires resolution)

R: **Recommendation** – suggestions for improvement

P: **Proficiency** – an exemplary practice or area of performance



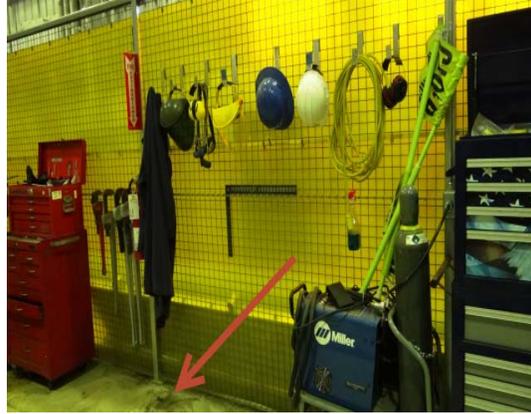
Picture #1



Picture #2



Picture #3



Picture #4



Picture #5



Picture #6



Picture #7



Picture #8



Picture #9



Picture #10



X-735 Facility Walk-Down Summary

09/23/2014

Team Members:

Eric Anderson - WEMS Media Specialist
Mike Horton – WEMS USW Safety Representative
Rick Snodgrass – Tetra Tech Senior Construction Manager
Barry Snook - RSI Project Fire Protection Engineer
Michael Staker – WEMS ESH Technician
Marlene Underwood – WEMS IT Specialist

X-735:

Housekeeping:

- A sign stating "Smoking in this area only" was observed attached to the fence on the northeast corner of the area perimeter. This smoking area was cluttered with combustibles (wooden pallets) which create a potential fire hazard (*see picture #1*)
Completed, sign has been relocated.
- Fire hose needs proper storage (*see picture #2*)
Completed, hose has been rolled up and properly stored
- Interior of the microwave oven located in the break room needs cleaned
Completed, microwave has been cleaned.
- Poor housekeeping was observed on the ground along the fence on the west side of the building behind the roll-off container. This area is cluttered with wooden pallets, trash, rebar, scrap wood, old chairs, and miscellaneous debris (*see picture #3*)
Completed, area has been cleaned up.
- Portable ladders were observed being stored outside in the elements (*see picture #4*)
Completed, ladders have been properly stored indoors
- Objects blocking ladder access to Mezzanine level (*see picture #5*)
Completed, objects have been removed.

Administrative: N/A

Fire Safety:

- Safety fuel can missing arrestor (*see picture #6*)
Completed, can has been removed from service
- Safety fuel can damaged (*see picture #7*)
Completed, can has been removed from service
- Battery powered grease gun stored in flammables cabinet (*see picture #8*)
Completed, gun has been removed.
- Weed eater with fuel stored in cabinet with combustibles
Completed, weed eater was removed and properly stored

Hazardous Material:

- An un-labeled black garden sprayer containing some type of liquid was observed being stored on the floor along the east wall of the high bay area.
Completed, sprayer has been properly labeled
- Two 5 gallon diesel fuel containers without hazard warning labels attached were observed being stored inside the flammable cabinet located on the north side of the building just west of the wooden storage shed.
Completed, containers have been labeled

General Industry:

- Shovel handle was damaged (*see picture #9*)
Completed, shovel has been removed from service
- Cover not provided over exit sign
Completed, WEMS Grounds Maintenance Supervision performed evaluation.
- (*Repeat*) - Boundary tape has fallen down around unprotected razor wire stored at the North side
(Request for work has been resubmitted to Work Control to have razor wire appropriately staged and a proper boundary posted)

Electrical Safety:

- The access door on lighting panel #LP B-2 was standing open (*see picture #10*)
Completed, panel has been closed.

Acceptable - meets requirements

Finding – a direct deviation from a written requirement

Observation – a condition if left unchanged may lead to a Finding (considered Acceptable because does not violate a written requirement, but requires resolution)

Recommendation – suggestions for improvement

Proficiency – an exemplary practice or area of performance



Picture #1



Picture #2



Picture #3



Picture #4



Picture #5



Picture #6



Picture #7



Picture #8



Picture #9



Picture #10



X-1000 Facility Walk-Down Summary

10/28/2014

Team Members:

Eric Anderson - WEMS Media Specialist
Rusty Cosby – WEMS Hourly Service Worker
Tony Couser – WEMS Hourly Service Worker
Mike Horton – WEMS USW Safety Representative
Rick Grose – WEMS Hourly Service Worker
Phil Moore – WEMS Facility Manager
Mark Pelfrey – WEMS Construction Engineer
Michael Staker – WEMS Safety Technician
Fawn Stewart – WEMS Accounting Clerk

X-1000 First Floor:

Housekeeping:

- Communication equipment (cables and modem) needs rolled up and stored neatly next to the copier in the Mailroom
Contacted WEMS Records Management Manager for corrective action.
- Too many chairs are in the Mailroom. This is creating a trip/fall hazard
Contacted WEMS Records Management Manager for corrective action.
- The mat under the paper cutter in the mailroom needs to be straightened
Contacted WEMS Records Management Manager for corrective action.
- Old document storage room where cubicles are, is being used to store computers
(Completed I.T. relocated computer).
- Cardboard boxes in the Cafeteria area need to be broken down and removed
Completed, boxes have been broken down and removed
- Overhead relamping needed in lobby at door E-2
Submitted a Request for Work to Work Control to have relamping performed

Administrative:

- **Observation:** Several vehicles were observed parking in designated “No Parking” areas
(Completed. Plant Security has issued illegal parking citations. Areas will continue to be monitored).

- Designated Tornado Shelter in the Training Lab is crowded with storage
Completed, According to Emergency Action Plan the Training Room is not a designated tornado shelter

Fire Safety:

- Hot cooking appliances on the edge of shelves and coolers in the I.T. Area
Contacted WEMS IT/Telecommunications Manager for corrective action.

Hazardous Material: N/A

General Industry:

- A section of a parking spot designated for Maintenance in the west dock parking area is sinking. (see pictures #1 and #2)
Completed, WEMS Construction Engineer determined the spot is safe for parking

Electrical Safety: N/A

X-1000 Second Floor:

Housekeeping:

- Refrigerators on South end of 2nd floor needs cleaned out. Expired/rotted food in them creating an unsanitary condition.
Completed, Refrigerators have been cleaned out
- Relamping needed in cubicle 2009
Submitted a Request for Work to Work Control to have relamping performed

Administrative: N/A

Fire Safety: N/A

Hazardous Material: N/A

General Industry: N/A

Electrical Safety: N/A

Acceptable - meets requirements

Finding - a direct deviation from a written requirement

Observation - a condition if left unchanged may lead to a Finding (considered Acceptable because does not violate a written requirement, but requires resolution)

Recommendation - suggestions for improvement

Proficiency - an exemplary practice or area of performance



X-720 Shipping and Receiving Facility Walk-Down Summary 11/11/2014

Team Members:

Eric Anderson - WEMS Media Specialist
Mike Horton – WEMS USW Safety Representative
Phil Moore – WEMS Facility Manager
Gretchen Ondera-Kisor – WEMS A/R Coordinator
Michael Staker – WEMS Safety Technician

X-720 Shipping and Receiving:

Housekeeping:

- Cardboard needs disposed of (*see picture #1*)
(Contacted WEMS Materials Manager for corrective action)
- Pallet near ramp needs removed (*see picture #2*)
(Contacted WEMS Materials Manager for corrective action)
- Items on ductwork needs properly stored (*see picture #3*)
(Contacted WEMS Materials Manager for corrective action)

Administrative:

- AED monthly inspection past due (*see picture #4*)
(Completed, monthly inspection for AED is current)
- Out of service electrical box needs proper administrative control tag (*see picture #5*)
(Notified FBP Facility Manager and requested corrective actions)

Fire Safety:

- Fire extinguisher sign needs repaired (*see picture #6*)
(Completed, sign has been repaired)

Hazardous Material: N/A

General Industry:

- Toxic locker needs relamping (*see picture #7*)
(Notified FBP Facility Manager and requested corrective actions)
- High Bay needs relamping (*see picture #8*)
(Notified FBP Facility Manager and requested corrective actions)
- Street light over door S-16 is burned out (*see picture #9*)
(Completed, light has been repaired)
- Seat on forklift PA04030 needs repaired (*see picture #10*)
(Submitted a Request for Work to Work Control to have seat repaired)
- **Recommendation:** Gates at equipment door should open in both directions in order to block pedestrian traffic
(Submitted a Request for Work to Work Control to have recommendation evaluated)

Electrical Safety:

- Refrigerator and condensate pump plugged into extension cord permanently (*see picture #11*)
(Notified FBP Facility Manager and requested corrective actions)
- **Finding:** Access to Electrical panel LP-16CI is blocked (*see picture #12*)
(Completed, access to electrical panel has been restored)

Acceptable - meets requirements

Finding - a direct deviation from a written requirement

Observation - a condition if left unchanged may lead to a Finding (considered Acceptable because does not violate a written requirement, but requires resolution)

Recommendation - suggestions for improvement

Proficiency - an exemplary practice or area of performance



Picture #1



Picture #2



Picture #3



Picture #4



Picture #5



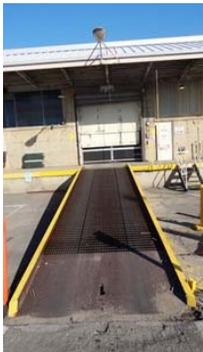
Picture #6



Picture #7



Picture #8



Picture #9



Picture #10



Picture #11



Picture #12

Date: October 28, 2014

Facility: X-1000

Inspection Team Members:

Eric Anderson
 Rusty Cosby
 Tony Couser
 Mike Horton
 Rick Grose
 Phil Moore
 Mark Pelfrey
 Michael Staker
 Fawn Stewart



Safety Items	Accep.	Unaccep.	Description	Completion Date
HOUSEKEEPING				
Aisles and passage ways clear	X			
Walking surfaces free from slip, trip, and fall hazards	X			
Exits unobstructed and open freely	X			
Emergency exit signs illuminated	X			
Materials stored on top of cabinets	X			
Materials leaning against posts or racks	X			
Trash receptacles available and emptied	X			
Restroom facilities clean and well maintained	X			
Eating areas clean and sanitary	X			
All lights operational	X			
ADMINISTRATIVE			<p>Observation: Several vehicles were observed parking in designated "No Parking" areas <i>Contacted WEMS Facility Manager and Senior Management for corrective action.</i></p>	
OSHA sign posted	X			
Emergency Action Plan posted	X			
Forklift inspection sheets available and completed	X			
Personnel wearing appropriate PPE	X			
FIRE SAFETY				
Fire extinguishers properly located and unobstructed	X			
Fire extinguishers charged and currently inspected	X			
Fire extinguishers identified with labels or lights	X			
18" clearance between sprinkler head and stored material	X			
3 ft. clearance around fire alarm pull station	X			
Ceiling tiles in place and in good condition	X			

Safety Items	Accep.	Unaccep.	Description	Completion Date
HAZARDOUS MATERIAL				
MSDS available	X			
Personnel aware of hazard communications/MSDS	X			
Chemicals stored appropriately	X			
Containers labeled and legible	X			
Waste containers closed and labeled appropriately	X			
GENERAL INDUSTRY				
Electrical cords or pneumatic lines crossing floors	X			
Tools, equipment stored in appropriate places	X			
Supplies stored neat and orderly	X			
Shelves and racks overloaded	X			
Equipment grounded and secured to the floor	X			
Load limits posted on shelving	X			
Ladders in good condition and stored securely	X			
All hand and power tools in good condition	X			
GFCIs used with portable power tools	X			
Machine guards in place and working properly	X			
ELECTRIAL SAFETY				
3ft clearance maintained around electrical boxes	X			
Electrical circuits properly labeled	X			
No exposed wiring	X			
Knock-outs missing	X			
Strain reliefs in good condition	X			
Extension cords not being used as permanent wiring	X			
Extension cords have grounding prong	X			

Date: September 23, 2014

Facility: X-735

Inspection Team Members:

Eric Anderson
Mike Horton
Rick Snodgrass
Barry Snook
Michael Staker
Marlene Underwood



Safety Items	Accep.	Unaccep.	Description	Completion Date
HOUSEKEEPING				
			Several areas needing attention in housekeeping were observed. Please refer to summary.	
Aisles and passage ways clear	X			
Walking surfaces free from slip, trip, and fall hazards	X			
Exits unobstructed and open freely	X			
Emergency exit signs illuminated	X			
Materials stored on top of cabinets	X			
Materials leaning against posts or racks	X			
Trash receptacles available and emptied	X			
Restroom facilities clean and well maintained	X			
Eating areas clean and sanitary	X			
All lights operational	X			
ADMINISTRATIVE				
OSHA sign posted	X			
Emergency Action Plan posted	X			
Forklift inspection sheets available and completed	X			
Personnel wearing appropriate PPE	X			
FIRE SAFETY				
Fire extinguishers properly located and unobstructed	X			
Fire extinguishers charged and currently inspected	X			
Fire extinguishers identified with labels or lights	X			
18" clearance between sprinkler head and stored material	X			
3 ft. clearance around fire alarm pull station	X			
Ceiling tiles in place and in good condition	X			

Safety Items	Accep.	Unaccep.	Description	Completion Date
HAZARDOUS MATERIAL				
MSDS available	X			
Personnel aware of hazard communications/MSDS	X			
Chemicals stored appropriately	X			
Containers labeled and legible	X			
Waste containers closed and labeled appropriately	X			
GENERAL INDUSTRY				
Electrical cords or pneumatic lines crossing floors	X			
Tools, equipment stored in appropriate places	X			
Supplies stored neat and orderly	X			
Shelves and racks overloaded	X			
Equipment grounded and secured to the floor	X			
Load limits posted on shelving	X			
Ladders in good condition and stored securely	X			
All hand and power tools in good condition	X			
GFCIs used with portable power tools	X			
Machine guards in place and working properly	X			
ELECTRIAL SAFETY				
3ft clearance maintained around electrical boxes	X			
Electrical circuits properly labeled	X			
No exposed wiring	X			
Knock-outs missing	X			
Strain reliefs in good condition	X			
Extension cords not being used as permanent wiring	X			
Extension cords have grounding prong	X			

Oversight Activity – Management/Independent Conformity Assessment Report

<p>Oversight Activity Type/Tracking # (specify walkthrough, walkdown, walkaround, inspection, surveillance, review, examination, evaluation, other type of oversight activity and tracking number, as applicable):</p> <p>EQ-SH-OA-14-060</p> <p><input checked="" type="checkbox"/> Management Conformity Assessment (MCA) <input type="checkbox"/> Independent Conformity Assessment (ICA). This report may be supplemented with completion and attachment of FSSF-2613, <i>Independent Conformity Assessment Record</i>, and other planning and coordination documents (ICA Notification, ICA Plan, Checklists, Pre-ICA Meeting Notes, Post-ICA Meeting Notes, etc.), as appropriate.</p>	<p>Oversight Activity Title/Assessed Organization/Project (provide oversight activity title from plan, other; name of work organization, project, etc. being assessed, and project number, as applicable):</p> <p>Facility Inspection (October, X-1000)</p>
<p>Date Conducted (provide date(s) oversight activity was performed):</p> <p>10/28/2014</p>	<p>Location (facility or place where oversight activity was performed):</p> <p>X-1000</p>
<p>Oversight Organization (name of organization – internal Department/Function, external subcontractor, other performing oversight activity):</p> <p>Environmental, Safety, Health and Quality - Safety and Health</p>	<p>Oversight Team (name and signature of person(s) performing oversight activity):</p> <p>Michael Horton</p> <p><input checked="" type="checkbox"/> Factual Accuracy Review Concurrence/Approval signature and date by: <u>Michael Horton (signature on file)</u></p>
<p>Scope of Oversight Activity (describe why assessment was performed and what was covered):</p> <p>Focus areas include: Housekeeping, Industrial Safety, Fire Safety, Hazardous Material Storage, Electrical Safety and Miscellaneous</p>	
<p>Basis (provide full reference to documents where requirements, specifications, other criteria forming basis characteristics of oversight activity were identified):</p> <p>10 CFR 851.21 Hazard Identification and Assessment - Contractor must establish procedures to identify existing and potential work place hazards and assess the risk of injury.</p>	
<p>Lines of Inquiry (specify checklist, guidance cards, basis document excerpts, other basis characteristics tracking tools used; attach if not re-stated in Characteristics in Attachment 1, Results Summary):</p> <p>Attachment #1 – Results Summary Attachment #2 – Walk-Down Summary Attachment #3 – Checklist</p>	
<p>Personnel Contacted (list who was interviewed and consulted during the oversight activity and their title and organization):</p> <p>None</p>	

Oversight Activity – Management/Independent Conformity Assessment Report

Results Summary (see Instructions): list Remarks (results) in relation to Characteristics (requirements); use attached summary and attach backup materials as appropriate; clearly Identify Acceptable (meets requirements), Findings (a direct deviation or non-compliance from a written requirement), Observations (a condition that if left unresolved, may lead to a Finding, and requires resolution), Recommendations (best practices and suggestions for improvement), and Proficiencies (an exemplary practice or area of performance excellence). Identify in Status if corrected at the time of the assessment or unresolved. For Findings and Observations, identify Trending Codes in ISMS, Quality Criteria and Apparent Cause.

ATTACHMENT 1 – RESULTS SUMMARY									
Item #	Characteristic (Requirement)	A, F, O, R or P	<u>QA</u> <u>Use</u> <u>Only!</u> IR, NCR, OR, PAAA, LL, Signif. Screen.	ISMS		Quality Criteria	Remarks (Results)/ Status (Corrected or Unresolved)	Apparent Cause	
				Funct.	Prin.				
1	Housekeeping (10 Items), See Attachment #3 – Checklist	A (10)	N/A	4	6	9	See Attachment 2, X-1000, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
2	Administrative (4 Items), See Attachment #3 – Checklist	A (3) O (1)	N/A	4	6	9	Observation: Several vehicles were observed parking in designated “No Parking” areas Contacted WEMS Facility Manager and Senior Management for corrective action. See Attachment 2, X-1000, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	4, 5	
3	Fire Safety (6 Items), See Attachment #3 – Checklist	A (6)	N/A	4	6	9	See Attachment 2, X-1000, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
4	Hazardous Material (5 Items), See Attachment #3 – Checklist	A (5)	N/A	4	6	9	See Attachment 2, X-1000, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
5	General Industry (10 Items), See Attachment #3 – Checklist	A (10)	N/A	4	6	9	See Attachment 2, X-1000, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	

Oversight Activity – Management/Independent Conformity Assessment Report

ATTACHMENT 1 – RESULTS SUMMARY											
Item #	Characteristic (Requirement)	A, F, O, R or P	QA Use Only! IR, NCR, OR, PAAA, LL, Signif. Screen.	ISMS		Quality Criteria	Remarks (Results)/ Status (Corrected or Unresolved)	Apparent Cause			
				Funct.	Prim.						
6	Electrical Safety (7 Items), See Attachment #3 – Checklist	A (7)	N/A	4	6	9	See Attachment 2, X-1000, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A			
Number of Characteristics		Number Acceptable		Number of Findings		Number of Observations		Number of Recommendations		Number of Proficiencies	
42		41		0		1		0		0	

Legend: A: Acceptable – meets requirements

F: Finding – a direct deviation or non-compliance from a written requirement
 O: Observation – a condition if left unresolved may lead to a Finding, and requires resolution
 R: Recommendation – best practices and suggestions for improvement
 P: Proficiency – an exemplary practice or area of performance Excellence
 N/A: Not Applicable
 N/E: Not Evaluated
 GFS – Government Furnished Service

IR: screened for Incident Report
 NCR: screened for non-conformance report
 OR: screened for occurrence report
 PAAA: screened for Price Anderson Amendments Act report
 OELL – screened for Operating Experience/Lessons Learned

Instructions:

OA are generally designated management conformity assessment (MCA) or Independent Conformity Assessment (ICA). OA include walkthroughs, walkdowns, walkarounds, inspections, surveillances, reviews, examinations, evaluations, and other types of oversight activities, which evaluate programs, processes, products, services, and facilities over varying time intervals. Graded assessments (GA) are generally MCA of limited extent, level or degree, rate an activity (i.e., acceptable, other), and generally include walkthroughs, walkdowns, walkarounds and inspections. MCA generally have shorter time intervals from start to completion than ICA. ICA generally requires more resources than MCA, and planning, performing, and reporting must be conducted with full knowledge and involvement of the Project Manager. ICA are generally assessments of a larger scope and longer duration than MCA, conducted by a team coordinated by a Lead Assessor with specified training and qualification, with results documented in a rigorous narrative report. The degree of independence of the assessment team (i.e., free of direct responsibility in the area assessed, and carried out without a vested interest in the result) is the primary differentiator from MCAs. MCA may be supplemented with attachment of other documents, and ICA may be supplemented with attachment of FSSF-2613, *Independent Conformity Assessment Record*, and other ICA planning and coordination documents (ICA Notification, ICA Plan, Checklists, Pre-ICA Meeting Notes, Post-ICA Meeting Notes, etc.), as appropriate.

Note: Some ICA, depending on the scope, may require a more elaborate formal structured written report than provided by FSSF-2604. Contact the Quality Manager for guidance.

Draft and Final OA reports Distribution List includes, at a minimum, Line Manager, primary point of contact(s) in work organization, and Quality Manager. Other organizations (other WEMS work organizations, parent companies, subcontractors, other contractors, regulators, DOE and DOE support subcontractor, as appropriate) may also be included in distribution, as determined by the Responsible Person/Line Manager.

Distribution of Final report to Quality Manager must include distribution memo and PDF files. Quality Manager enters report into the Integrated Oversight Program Plan (IOPP) Log, and provides PDF files to CTS Coordinator for entry of issues [Findings, Observations, Recommendations (Optional)] into the CTS in accordance with FSS-2607, *Incident Reporting and Issues Management Program*, for action tracking, closure, and trending, and to Records Management for archives. Nonconformance Reports (NCRs) – in accordance with FSS-2603, *Control of Nonconforming Items and Services*, NCRs must be completed and attached to this report whenever an item (i.e., generally equipment and material) discovered during the OA is tagged out as unusable until corrected. Findings, Observations and Recommendations (Optional) (i.e., Issues) will be entered into the WEMS FSS Commitment Tracking System (CTS), tracked through closure and require a closure evidence package.

Tracking Numbers: OA tracking numbers are assigned by the Quality Manager in the following format: Department - Function - OA - Year- Consecutive Number (Example: Environmental, Safety, Health, and Quality (EQ), Quality (QA) - OA - 10 - 001). Quality maintains a list of Department and Function abbreviations.

Not Approved for Public Release



Oversight Activity – Management/Independent Conformity Assessment Report

Trending Codes:

<i>ISMS Functions:</i>	<i>ISMS Principles:</i>	<i>Quality Criteria (10CFR830.122):</i>	<i>Apparent Cause</i>
<i>1: Define the Scope of Work</i> <i>2: Analyze the Hazards</i> <i>3: Develop and Implement Hazard Controls</i> <i>4: Perform Work Within Controls</i> <i>5: Provide Feedback and Continuous Improvement</i>	<i>1: Line Management Responsibility for Safety</i> <i>2: Clear Roles and Responsibilities</i> <i>3: Competence Commensurate with Responsibility</i> <i>4: Balanced Priorities</i> <i>5: Identification of Safety Standards and Requirements</i> <i>6: Hazard Control Tailored to Work Being Performed</i> <i>7: Operations Authorization</i> <i>8: Worker involvement</i>	<i>1: Program</i> <i>2: Personal Training and Qualifications</i> <i>3: Quality Improvement</i> <i>4: Documents and Records</i> <i>5: Work Processes</i> <i>6: Design</i> <i>7: Procurement</i> <i>8: Inspection and Acceptance Testing</i> <i>9: Management Assessment</i> <i>10: Independent Assessment</i> <i>11: Rad Protection (10CFR835)</i>	<i>1: Design/Engineering Problem</i> <i>2: Equipment/Material Problem</i> <i>3: Human Performance Less Than Adequate</i> <i>4: Management Problem</i> <i>5: Communications Less Than Adequate</i> <i>6: Training Deficiency</i> <i>7: Other Problem</i>

Not Approved for Public Release



Oversight Activity – Management/Independent Conformity Assessment Report

Attachment #2 – Walk-Down Summary



Oversight Activity – Management/Independent Conformity Assessment Report

Attachment #3 – Checklist



Oversight Activity – Management/Independent Conformity Assessment Report

<p>Oversight Activity Type/Tracking # (specify walkthrough, walkdown, walkaround, inspection, surveillance, review, examination, evaluation, other type of oversight activity and tracking number, as applicable):</p> <p>EQ-SH-OA-14-056, Facility Inspection (September)</p> <p><input checked="" type="checkbox"/> Management Conformity Assessment (MCA) <input type="checkbox"/> Independent Conformity Assessment (ICA). This report may be supplemented with completion and attachment of FSSF-2613, <i>Independent Conformity Assessment Record</i>, and other planning and coordination documents (ICA Notification, ICA Plan, Checklists, Pre-ICA Meeting Notes, Post-ICA Meeting Notes, etc.), as appropriate.</p>	<p>Oversight Activity Title/Assessed Organization/Project (provide oversight activity title from plan, other; name of work organization, project, etc. being assessed, and project number, as applicable):</p> <p>Facility Inspection (September, X-735)</p>
<p>Date Conducted (provide date(s) oversight activity was performed):</p> <p>09/23/2014</p>	<p>Location (facility or place where oversight activity was performed):</p> <p>X-735</p>
<p>Oversight Organization (name of organization – internal Department/Function, external subcontractor, other performing oversight activity):</p> <p>Environmental, Safety, Health and Quality - Safety and Health</p>	<p>Oversight Team (name and signature of person(s) performing oversight activity):</p> <p>Michael Horton</p> <p><input checked="" type="checkbox"/> Factual Accuracy Review Concurrence/Approval signature and date by: <u>Michael Horton (signature on file)</u></p>
<p>Scope of Oversight Activity (describe why assessment was performed and what was covered):</p> <p>Focus areas include: Housekeeping, Industrial Safety, Fire Safety, Hazardous Material Storage, Electrical Safety and Miscellaneous</p>	
<p>Basis (provide full reference to documents where requirements, specifications, other criteria forming basis characteristics of oversight activity were identified):</p> <p>10 CFR 851.21 Hazard Identification and Assessment - Contractor must establish procedures to identify existing and potential work place hazards and assess the risk of injury.</p>	
<p>Lines of Inquiry (specify checklist, guidance cards, basis document excerpts, other basis characteristics tracking tools used; attach if not re-stated in Characteristics in Attachment 1, Results Summary):</p> <p>Attachment #1 – Results Summary Attachment #2 – Walk-Down Summary Attachment #3 – Checklist</p>	
<p>Personnel Contacted (list who was interviewed and consulted during the oversight activity and their title and organization):</p> <p>None</p>	

Not Approved for Public Release

Oversight Activity – Management/Independent Conformity Assessment Report

Results Summary (see Instructions): list Remarks (results) in relation to Characteristics (requirements); use attached summary and attach backup materials as appropriate; clearly Identify Acceptable (meets requirements), Findings (a direct deviation or non-compliance from a written requirement), Observations (a condition that if left unresolved, may lead to a Finding, and requires resolution), Recommendations (best practices and suggestions for improvement), and Proficiencies (an exemplary practice or area of performance excellence). Identify in Status if corrected at the time of the assessment or unresolved. For Findings and Observations, identify Trending Codes in ISMS, Quality Criteria and Apparent Cause.

ATTACHMENT 1 – RESULTS SUMMARY									
Item #	Characteristic (Requirement)	A, F, O, R or P	<u>QA</u> <u>Use</u> <u>Only!</u> IR, NCR, OR, PAAA, LL, Signif. Screen.	ISMS		Quality Criteria	Remarks (Results)/ Status (Corrected or Unresolved)	Apparent Cause	
				Funct.	Prin.				
1	Housekeeping (10 Items), See Attachment #3 – Checklist	A (10)	N/A	4	6	9	See Attachment 2, X-735, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
2	Administrative (4 Items), See Attachment #3 – Checklist	A (4)	N/A	4	6	9	See Attachment 2, X-735, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
3	Fire Safety (6 Items), See Attachment #3 – Checklist	A (6)	N/A	4	6	9	See Attachment 2, X-735, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
4	Hazardous Material (5 Items), See Attachment #3 – Checklist	A (5)	N/A	4	6	9	See Attachment 2, X-735, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
5	General Industry (10 Items), See Attachment #3 – Checklist	A(10)	N/A	4	6	9	See Attachment 2, X-735, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
6	Electrical Safety (7 Items), See Attachment #3 – Checklist	A (7)	N/A	4	6	9	See Attachment 2, X-735, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	



Oversight Activity – Management/Independent Conformity Assessment Report

ATTACHMENT 1 – RESULTS SUMMARY							
Item #	Characteristic (Requirement)	A, F, O, R or P	ISMS		Quality Criteria	Remarks (Results)/ Status (Corrected or Unresolved)	Apparent Cause
			Funct.	Prin.			
			Number of Findings	Number of Observations	Number of Recommendations	Number of Proficiencies	
42			0	0	0	0	

Legend: A: Acceptable – meets requirements

F: Finding – a direct deviation or non-compliance from a written requirement

O: Observation – a condition if left unresolved may lead to a Finding, and requires resolution

R: Recommendation – best practices and suggestions for improvement

P: Proficiency – an exemplary practice or area of performance Excellence

N/A: Not Applicable

N/E: Not Evaluated

GFS – Government Furnished Service

IR: screened for Incident Report

NCR: screened for non-conformance report

OR: screened for occurrence report

PAAA: screened for Price Anderson

Amendments Act report

OELL – screened for Operating

Experience/Lessons Learned

Instructions:

OA are generally designated management conformity assessment (MCA) or Independent Conformity Assessment (ICA). OA include walkthroughs, walkdowns, walkarounds, inspections, surveillances, reviews, examinations, evaluations, and other types of oversight activities, which evaluate programs, processes, products, services, and facilities over varying time intervals. Graded assessments (GA) are generally MCA of limited extent, level or degree, rate an activity (i.e., acceptable, other), and generally include walkthroughs, walkdowns, walkarounds and inspections. MCA generally have shorter time intervals from start to completion than ICA. ICA generally requires more resources than MCA, and planning, performing, and reporting must be conducted with full knowledge and involvement of the Project Manager. ICA are generally assessments of a larger scope and longer duration than MCA, conducted by a team coordinated by a Lead Assessor with specified training and qualification, with results documented in a rigorous narrative report. The degree of independence of the assessment team (i.e., free of direct responsibility in the area assessed, and carried out without a vested interest in the result) is the primary differentiator from MCAs. MCA may be supplemented with attachment of other documents, and ICA may be supplemented with attachment of FSSF-2613, *Independent Conformity Assessment Record*, and other ICA planning and coordination documents (ICA Notification, ICA Plan, Checklists, Pre-ICA Meeting Notes, Post-ICA Meeting Notes, etc.), as appropriate.

Note: Some ICA, depending on the scope, may require a more elaborate formal structured written report than provided by FSSF-2604. Contact the Quality Manager for guidance.

Draft and Final OA reports Distribution List includes, at a minimum, Line Manager, primary point of contact(s) in work organization, and Quality Manager. Other organizations (other WEMS work organizations, parent companies, subcontractors, other contractors, regulators, DOE and DOE support subcontractor, as appropriate) may also be included in distribution, as determined by the Responsible Person/Line Manager.

Distribution of Final report to Quality Manager must include distribution memo and PDF files. Quality Manager enters report into the Integrated Oversight Program Plan (IOPP) Log, and provides PDF files to CTS Coordinator for entry of issues [Findings, Observations, Recommendations (Optional)] into the CTS in accordance with FSS-2607, *Incident Reporting and Issues Management Program*, for action tracking, closure, and trending, and to Records Management for archives. Nonconformance Reports (NCRs) – in accordance with FSS-2603, *Control of Nonconforming Items and Services*, NCRs must be completed and attached to this report whenever an item (i.e., generally equipment and material) discovered during the OA is tagged out as unusable until corrected. Findings, Observations and Recommendations (Optional) (i.e., Issues) will be entered into the WEMS FSS Commitment Tracking System (CTS), tracked through closure and require a closure evidence package.

Tracking Numbers: OA tracking numbers are assigned by the Quality Manager in the following format:

Department - Function - OA - Year- Consecutive Number (Example: Environmental, Safety, Health, and Quality (EQ), Quality (QA) - OA - 10 - 001). Quality maintains a list of Department and Function abbreviations.

Trending Codes:

<i>ISMS Functions:</i>	<i>ISMS Principles:</i>	<i>Quality Criteria (10CFR830.122):</i>	<i>Apparent Cause</i>
------------------------	-------------------------	---	-----------------------

Not Approved for Public Release

Oversight Activity — Management/Independent Conformity Assessment Report

<ul style="list-style-type: none"> 1: Define the Scope of Work 2: Analyze the Hazards 3: Develop and Implement Hazard Controls 4: Perform Work Within Controls 5: Provide Feedback and Continuous Improvement 	<ul style="list-style-type: none"> 1: Line Management Responsibility for Safety 2: Clear Roles and Responsibilities 3: Competence Commensurate with Responsibility 4: Balanced Priorities 5: Identification of Safety Standards and Requirements 6: Hazard Control Tailored to Work Being Performed 7: Operations Authorization 8: Worker involvement 	<ul style="list-style-type: none"> 1: Program 2: Personal Training and Qualifications 3: Quality Improvement 4: Documents and Records 5: Work Processes 6: Design 7: Procurement 8: Inspection and Acceptance Testing 9: Management Assessment 10: Independent Assessment 11: Rad Protection (10CFR835) 	<ul style="list-style-type: none"> 1: Design/Engineering Problem 2: Equipment/Material Problem 3: Human Performance Less Than Adequate 4: Management Problem 5: Communications Less Than Adequate 6: Training Deficiency 7: Other Problem
--	---	--	--



Oversight Activity – Management/Independent Conformity Assessment Report

Attachment #2 – Walk-Down Summary



Oversight Activity – Management/Independent Conformity Assessment Report

Attachment #3 – Checklist

Date: August 19, 2014

Facility: X-540

Inspection Team Members:

Eric Anderson	Mike Horton
Tony Canterbury	Susie Morrow
Alicia Coulson	Les Munn
Bill Hardin	Barry Snook



Safety Items	Accep.	Unaccep.	Description	Completion Date
HOUSEKEEPING			Proficiency: Entire facility is well maintained and very clean	
Aisles and passage ways clear	X			
Walking surfaces free from slip, trip, and fall hazards	X			
Exits unobstructed and open freely	X			
Emergency exit signs illuminated	X			
Materials stored on top of cabinets	X			
Materials leaning against posts or racks	X			
Trash receptacles available and emptied	X			
Restroom facilities clean and well maintained	X			
Eating areas clean and sanitary	X			
All lights operational	X			
ADMINISTRATIVE				
OSHA sign posted	X			
Emergency Action Plan posted	X			
Forklift inspection sheets available and completed	X			
Personnel wearing appropriate PPE	X			
FIRE SAFETY				
Fire extinguishers properly located and unobstructed	X			
Fire extinguishers charged and currently inspected	X			
Fire extinguishers identified with labels or lights	X			
18" clearance between sprinkler head and stored material	X			
3 ft. clearance around fire alarm pull station	X			
Ceiling tiles in place and in good condition	X			

Safety Items	Accep.	Unaccep.	Description	Completion Date
HAZARDOUS MATERIAL				
MSDS available	X			
Personnel aware of hazard communications/MSDS	X			
Chemicals stored appropriately	X			
Containers labeled and legible	X			
Waste containers closed and labeled appropriately	X			
GENERAL INDUSTRY				
Electrical cords or pneumatic lines crossing floors	X			
Tools, equipment stored in appropriate places	X			
Supplies stored neat and orderly	X			
Shelves and racks overloaded	X			
Equipment grounded and secured to the floor	X			
Load limits posted on shelving	X			
Ladders in good condition and stored securely	X			
All hand and power tools in good condition	X			
GFCIs used with portable power tools	X			
Machine guards in place and working properly	X			
ELECTRICAL SAFETY				
3ft clearance maintained around electrical boxes	X			
Electrical circuits properly labeled	X			
No exposed wiring	X			
Knock-outs missing	X			
Strain reliefs in good condition	X			
Extension cords not being used as permanent wiring	X			
Extension cords have grounding prong	X			



Oversight Activity – Management/Independent Conformity Assessment Report

<p>Oversight Activity Type/Tracking # (specify walkthrough, walkdown, walkaround, inspection, surveillance, review, examination, evaluation, other type of oversight activity and tracking number, as applicable):</p> <p>EQ-SH-OA-14-044, Facility Inspection (August)</p> <p><input checked="" type="checkbox"/> Management Conformity Assessment (MCA) <input type="checkbox"/> Independent Conformity Assessment (ICA). This report may be supplemented with completion and attachment of FSSF-2613, <i>Independent Conformity Assessment Record</i>, and other planning and coordination documents (ICA Notification, ICA Plan, Checklists, Pre-ICA Meeting Notes, Post-ICA Meeting Notes, etc.), as appropriate.</p>	<p>Oversight Activity Title/Assessed Organization/Project (provide oversight activity title from plan, other; name of work organization, project, etc. being assessed, and project number, as applicable):</p> <p>Facility Inspection (August)</p>
<p>Date Conducted (provide date(s) oversight activity was performed):</p> <p>08/19/2014</p>	<p>Location (facility or place where oversight activity was performed):</p> <p>X-540</p>
<p>Oversight Organization (name of organization – internal Department/Function, external subcontractor, other performing oversight activity):</p> <p>Environmental, Safety, Health and Quality - Safety and Health</p>	<p>Oversight Team (name and signature of person(s) performing oversight activity):</p> <p>Mike Horton, et. al.</p> <p><input checked="" type="checkbox"/> Factual Accuracy Review Concurrence/Approval signature and date by: Michael Horton (signature on file)</p>
<p>Scope of Oversight Activity (describe why assessment was performed and what was covered):</p> <p>Focus areas include: Housekeeping, Industrial Safety, Fire Safety, Hazardous Material Storage, Electrical Safety and Miscellaneous</p>	
<p>Basis (provide full reference to documents where requirements, specifications, other criteria forming basis characteristics of oversight activity were identified):</p> <p>10 CFR 851.21 Hazard Identification and Assessment - Contractor must establish procedures to identify existing and potential work place hazards and assess the risk of injury.</p>	
<p>Lines of Inquiry (specify checklist, guidance cards, basis document excerpts, other basis characteristics tracking tools used; attach if not re-stated in Characteristics in Attachment 1, Results Summary):</p> <p>See Attachment #1 – Results Summary See Attachment #2 – Walk-Down Summary See Attachment #3 – Checklist</p>	
<p>Personnel Contacted (list who was interviewed and consulted during the oversight activity and their title and organization):</p> <p>None</p>	

Oversight Activity – Management/Independent Conformity Assessment Report

Results Summary (see Instructions): list Remarks (results) in relation to Characteristics (requirements); use attached summary and attach backup materials as appropriate; clearly Identify Acceptable (meets requirements), Findings (a direct deviation or non-compliance from a written requirement), Observations (a condition that if left unresolved, may lead to a Finding, and requires resolution), Recommendations (best practices and suggestions for improvement), and Proficiencies (an exemplary practice or area of performance excellence). Identify in Status if corrected at the time of the assessment or unresolved. For Findings and Observations, identify Trending Codes in ISMS, Quality Criteria and Apparent Cause.

ATTACHMENT 1 – RESULTS SUMMARY									
Item #	Characteristic (Requirement)	A, F, O, R or P	<u>QA Use Only!</u> IR, NCR, OR, PAAA, LL, Signif. Screen.	ISMS		Quality Criteria	Remarks (Results)/ Status (Corrected or Unresolved)	Apparent Cause	
				Funct.	Prin.				
1	Housekeeping (10 Items), See Attachment #3 – Checklist	A (10) P (1)	N/A	4	6	9	Proficiency: Entire facility is well maintained and very clean See Attachment 2, X-540, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
2	Administrative (4 Items), See Attachment #3 – Checklist	A (4)	N/A	4	6	9	See Attachment 2, X-540, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
3	Fire Safety (6 Items), See Attachment #3 – Checklist	A (6)	N/A	4	6	9	See Attachment 2, X-540, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
4	Hazardous Material (5 Items), See Attachment #3 – Checklist	A (5)	N/A	4	6	9	See Attachment 2, X-540, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
5	General Industry (10 Items), See Attachment #3 – Checklist	A (10)	N/A	4	6	9	See Attachment 2, X-540, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	

Oversight Activity – Management/Independent Conformity Assessment Report

ATTACHMENT 1 – RESULTS SUMMARY									
Item #	Characteristic (Requirement)	A, F, O, R or P	<u>QA Use Only!</u> IR, NCR, OR, PAAA , LL, Signif. Screen.	ISMS		Quality Criteria	Remarks (Results)/ Status (Corrected or Unresolved)	Apparent Cause	
				Funct.	Prim.				
6	Electrical Safety (7 Items), See Attachment #3 – Checklist	A (7)	N\A	4	6	9	See Attachment 2, X-540, Facility Walk-Down Summary. All issues determined OSHA “other than serious” and corrected at the time of the inspection, work order or Line Management referral completed, or entered into the Worker Involvement Network for resolution.	N/A	
Number of Characteristics		Number Acceptable		Number of Findings		Number of Observations		Number of Recommendations	Number of Proficiencies
42		42		0		0		0	1

Legend: A: Acceptable – meets requirements

F: Finding – a direct deviation or non-compliance from a written requirement

O: Observation – a condition if left unresolved may lead to a Finding, and requires resolution

R: Recommendation – best practices and suggestions for improvement

P: Proficiency – an exemplary practice or area of performance Excellence

N/A: Not Applicable

N/E: Not Evaluated

GFS – Government Furnished Service

IR: screened for Incident Report

NCR: screened for non-conformance report

OR: screened for occurrence report

PAAA: screened for Price Anderson

Amendments Act report

OELL – screened for Operating

Experience/Lessons Learned

Instructions:

OA are generally designated management conformity assessment (MCA) or Independent Conformity Assessment (ICA). OA include walkthroughs, walkdowns, walkarounds, inspections, surveillances, reviews, examinations, evaluations, and other types of oversight activities, which evaluate programs, processes, products, services, and facilities over varying time intervals. Graded assessments (GA) are generally MCA of limited extent, level or degree, rate an activity (i.e., acceptable, other), and generally include walkthroughs, walkdowns, walkarounds and inspections. MCA generally have shorter time intervals from start to completion than ICA. ICA generally requires more resources than MCA, and planning, performing, and reporting must be conducted with full knowledge and involvement of the Project Manager. ICA are generally assessments of a larger scope and longer duration than MCA, conducted by a team coordinated by a Lead Assessor with specified training and qualification, with results documented in a rigorous narrative report. The degree of independence of the assessment team (i.e., free of direct responsibility in the area assessed, and carried out without a vested interest in the result) is the primary differentiator from MCAs. MCA may be supplemented with attachment of other documents, and ICA may be supplemented with attachment of FSSF-2613, *Independent Conformity Assessment Record*, and other ICA planning and coordination documents (ICA Notification, ICA Plan, Checklists, Pre-ICA Meeting Notes, Post-ICA Meeting Notes, etc.), as appropriate.

Note: Some ICA, depending on the scope, may require a more elaborate formal structured written report than provided by FSSF-2604. Contact the Quality Manager for guidance.

Draft and Final OA reports Distribution List includes, at a minimum, Line Manager, primary point of contact(s) in work organization, and Quality Manager. Other organizations (other WEMS work organizations, parent companies, subcontractors, other contractors, regulators, DOE and DOE support subcontractor, as appropriate) may also be included in distribution, as determined by the Responsible Person/Line Manager.

Distribution of Final report to Quality Manager must include distribution memo and PDF files. Quality Manager enters report into the Integrated Oversight Program Plan (IOPP) Log, and provides PDF files to CTS Coordinator for entry of issues [Findings, Observations, Recommendations (Optional)] into the CTS in accordance with FSS-2607, *Incident Reporting and Issues Management Program*, for action tracking, closure, and trending, and to Records Management for archives. Nonconformance Reports (NCRs) – in accordance with FSS-2603, *Control of Nonconforming Items and Services*, NCRs must be completed and attached to this report whenever an item (i.e., generally equipment and material) discovered during the OA is tagged out as unusable until corrected. Findings, Observations and Recommendations (Optional) (i.e., Issues) will be entered into the WEMS FSS Commitment Tracking System (CTS), tracked through closure and require a closure evidence package.

Tracking Numbers: OA tracking numbers are assigned by the Quality Manager in the following format:

Department - Function - OA - Year- Consecutive Number (Example: Environmental, Safety, Health, and Quality (EQ), Quality (QA) - OA - 10 - 001). Quality

Not Approved for Public Release



Oversight Activity – Management/Independent Conformity Assessment Report

maintains a list of Department and Function abbreviations.

Trending Codes:

<i>ISMS Functions:</i>	<i>ISMS Principles:</i>	<i>Quality Criteria (10CFR830.122):</i>	<i>Apparent Cause</i>
1: Define the Scope of Work 2: Analyze the Hazards 3: Develop and Implement Hazard Controls 4: Perform Work Within Controls 5: Provide Feedback and Continuous Improvement	1: Line Management Responsibility for Safety 2: Clear Roles and Responsibilities 3: Competence Commensurate with Responsibility 4: Balanced Priorities 5: Identification of Safety Standards and Requirements 6: Hazard Control Tailored to Work Being Performed 7: Operations Authorization 8: Worker involvement	1: Program 2: Personal Training and Qualifications 3: Quality Improvement 4: Documents and Records 5: Work Processes 6: Design 7: Procurement 8: Inspection and Acceptance Testing 9: Management Assessment 10: Independent Assessment 11: Rad Protection (10CFR835)	1: Design/Engineering Problem 2: Equipment/Material Problem 3: Human Performance Less Than Adequate 4: Management Problem 5: Communications Less Than Adequate 6: Training Deficiency 7: Other Problem



X-540 Facility Walk-Down Summary

08/19/2014

Team Members:

Eric Anderson - WEMS Media Specialist
Tony Canterbury – WEMS Facilities Support Services Manager
Alicia Coulson – WEMS Records Management Manager
Bill Hardin - WEMS Hourly Service Worker
Mike Horton – WEMS USW Safety Representative
Susie Morrow – WEMS RMDC Clerk
Les Munn - WEMS Hourly I&E Mechanic
Barry Snook - RSI Project Fire Protection Engineer

X-540:

Housekeeping:

- **Proficiency:** Entire facility is well maintained and very clean.
(Submitted to O&M Manager for recognition)

Administrative:

- Two hand trucks (dollies) do not have inspection stickers. *(see picture #1)*
(Determination by WEMS Safety Engineer that no formal inspection is required)

Fire Safety:

- A small flammable/combustible liquids storage cabinet is missing the ventilation bungs.
(see picture #2)
(Completed, ventilation bungs have been installed)
- Several wall penetrations are not fire stopped and one cable tray penetration appears to be sealed with an unapproved fire stopping material. *(see pictures #3 and #4)*
(Submitted to Safety Manager for determination)
- The building is protected with a clean agent fire suppression system, as well as four (4) 15# CO2 clean agent portable fire extinguishers and two (2) 10# multipurpose dry chemical fire extinguishers. Why are dry chemical (extremely corrosive) fire extinguishers provided in a building that is protected with a clean agent fire suppression system?
(Submitted to Safety Manager for determination)

Hazardous Material: N/A

General Industry:

- Relamping needed in office area (*see picture #5*)
(Request for work has been submitted to Work Control to have relamping performed)
- Gap in Southeast exterior overhead corner is allowing wasps to harbor (*see picture #6*)
(Request for work has been submitted to Work Control to have gap resealed)

Electrical Safety: N/A

A: Acceptable - meets requirements

F: Finding – a direct deviation from a written requirement

O: Observation – a condition if left unchanged may lead to a Finding (considered Acceptable because does not violate a written requirement, but requires resolution)

R: Recommendation – suggestions for improvement

P: Proficiency – an exemplary practice or area of performance



Picture #1



Picture #2



Picture #3



Picture #4



Picture #5



Picture #6