Honorable John T. Conway  
Chairman  
Defense Nuclear Facilities Safety Board  
Suite 700  
625 Indiana Avenue, N.W.  
Washington, D.C. 20004  

Dear Mr. Chairman:

The January 1996 deliverables called for in the Department's Implementation Plan for Defense Nuclear Facilities Safety Board Recommendation 94-4 are enclosed. A list of the deliverables is provided as Enclosure 1 to this letter.

Competing priorities at the Oak Ridge Plant have required a rescheduling of two 94-4 Commitments. Commitments 3.5 and 5.5 were originally scheduled for February 1996. This schedule for accomplishing these commitments cannot be achieved without severely impacting the higher priority task of completing the resumption of the Disassembly and Assembly mission area on time. Therefore, these Commitments and related Commitments 3.6 and 5.6 have been rescheduled for accomplishment later in the year. Change 4 to the Implementation Plan, detailing this change, is listed as Enclosure 6 on the list of January 1996 Deliverables.

If you have any questions, please contact me or have your staff contact Phil Aiken of my staff at (301) 903-4513.

Sincerely,

[Signature]

Thomas P. Seitz  
Deputy Assistant Secretary for  
Military Application and  
Stockpile Management  
Defense Programs

Enclosure

cc w/enclosure:  
M. Whitaker, US-3.1
Enclosure 1:
List of January 1996 Deliverables.

Enclosure 2:
Commitment 2.3, the Lockheed Martin Energy Services, Inc. (LMES) Corrective Action Plan (CAP) for the Task 2 Assessment (Commitment 2.2).

Enclosure 3:
Commitment 3.3, the LMES CAP for the Task 3 self assessment of its criticality safety program (Commitment 3.2).

Enclosure 4:
Commitment 4.3, the integrated Department and LMES CAP for the Task 4 assessments of the Conduct of Operations Program at Y-12 (Commitment 4.2).

Enclosure 5:
Commitment 7.1, Quarterly Report 4, containing an update of activities occurring between October 1 and December 31, 1995.

Enclosure 6:
January 30, 1996

Mr. R. J. Spence  
Department of Energy, Oak Ridge Operations  
Post Office Box 2001  
Oak Ridge, Tennessee 37831

Dear Mr. Spence:

Corrective Action Plan for Task 3.2 Assessment; Defense Nuclear Facilities Safety Board (DNFSB) 94-4

This letter provides the corrective action plan to address the results of the Lockheed Martin Energy Systems, Inc., Evaluation of the Oak Ridge Y-12 Plant Nuclear Criticality Safety Program (Y/NO-00009) dated November 1995. The individual corrective action plans addressed in this letter are provided as attachments.

The Task 3.2 Assessment Report identified issues associated with Nuclear Criticality Safety (NCS) Program for the facilities at the Oak Ridge Y-12 Plant. These issues were categorized by the assessment team in the following manner:

Finding - A statement of fact documenting a deviation from an applicable federal law, Department of Energy (DOE) order, standard, safety requirement, approved procedure, or assessment program criteria.

Observation - Any situation, while not in violation of any written procedure or requirement in the judgement of the assessment team member, is worthy of raising to the attention of site management in order to enhance overall performance.

The following methodology was used to address these issues:

* An Assessment Plan was previously developed based on criteria developed by Lockheed Martin Energy Systems (LMES) to satisfy Commitment 3.1 of Task 3 of the DOE Implementation Plan for DNFSB Recommendation 94-4 issued in February 1995. These criteria were published as Lockheed Martin Energy Systems Assessment Criteria for the
Evaluation of the Oak Ridge Y-12 Plant Nuclear Criticality Safety Program (Y/NO-00005) and were grouped under six performance objectives, numbered NCS.1 through NCS.6. Following are the performance objectives along with the associated findings and observations identified during performance of the assessment:

**NCS.1 Organization/Administration:** "The organizations responsible for nuclear criticality safety (NCS) at the site are in place, are adequately staffed, and are functioning in an effective manner."

There are no unresolved issues regarding this performance objective.

**NCS.2 Development of NCS Requirements:** "NCS requirements for site fissionable material operations are established on the basis of industry standards [American National Standards Institute/American Nuclear Society (ANSI/ANS) standards] and any additional requirements of DOE Order 5480.24."

**Finding NCS 2-16:** Procedure Y70-01-150, Sect. VI.A.4.d, states "Actual fissile storage array dimensions shall not exceed CSA dimensions by more than 6 inches."

**NCS.3 Implementation of NCS Requirements:** "NCS requirements for site fissionable material operations are adequately implemented through flowdown, NCS training, and configuration management practices."

**Finding NCS 3-8:** Y-12 has not formally identified this noncompliance nor adequately documented corrective actions to meet this requirement for all applicable Y-12 operations/facilities.

**Finding NCS 3-9b and 3-10:** The 9720-5 Warehouse postings for array storage areas do not post the Nuclear Criticality Safety Approval (NCSA) limits. The postings list the applicable NCSA number for that array storage area.

**Finding NCS 3-10:** Procedure Y70-01-150, VI.A.4.g. states "Fissile storage arrays shall be conspicuously posted (if required by CSA)."
Finding NCS 3-15: Supervisor training has not been provided in a programmatic fashion.

Observation 3-2: Contrary to the Operational Safety Requirements (OSR) in Section 5.2.3 of Y/TS-1314 (OSR for 9204-2 and 9204-2E), an Unreviewed Safety Question Determination was not performed for recent revision to Nuclear Criticality Safety Department (NCSD) Procedures Y70-150, 151, and 160. In addition, several clarifications are needed within the OSRs to address ambiguities and provide justification of existing OSRs.

Observation 3-7: When the “Request for Criticality Safety Approval” form is more than one page, the “Criticality Safety Approval” (CSA) is placed on interleaved pages (intermingled with “Request” pages). See Appendix B, Y70-160. The CSA is used as a procedure in many plant areas.

NCS.4 Assessments: “Procedures covering both operational NCS compliance and NCS program assessments are in place and are being performed at the site in an effective manner.”

There are no unresolved issues regarding this performance objective.

NCS.5 NCS Incident Reporting, Tracking, Trending, Resolution, and Lessons Learned: “A program is in place and functioning effectively at the site to handle NCS incident reporting, tracking, trending, resolution, and lessons learned.”

There are no unresolved issues regarding this performance objective.

NCS.6 Criticality Accident Alarm System and Emergency Planning: “Programs are in place at the site to assure criticality accident alarm (CAA) coverage where it is required by DOE Order 5480.24 and ANSI/ANS-8.3 and to assure proper emergency response in event of a criticality accident.”
Finding NCS 6-34: Instructions are not posted as required by American Nuclear Standards Institute (ANSI) 8.3 and by ESS-CS-101 for response to the signals.

Observation 6-1: A clarification to the OSR is needed to provide justification for not requiring a criticality accident alarm system (CAAS).


* Formal root cause analysis was not required for Task 3.2 findings based on the results of the IMPRB risk rankings and the requirements of QA-16.1. Accountable managers were responsible for a determination of the direct cause for each finding as directed by QA-16.1.

* The corrective action plan developed for each finding focuses on addressing the direct cause as determined by the accountable manager. These corrective action plans are provided in Attachment I.

* Observations from the Task 3.2 Assessment-Report were not entered into Energy Systems Action Management System (ESAMS). The actions to address these issues are provided in Attachment II.

* Concurrency with the corrective action plans was obtained from each affected Y-12 Site Office (YSO) counterpart prior to formal issuance through this letter.

* The corrective action plan for all findings has been entered into ESAMS for tracking. A potential for revision of scheduled completion dates in ESAMS exists due to possible resource impacts from the fiscal year 1997 budget.

Status reports will be issued to your office on a periodic basis to keep you informed of the progress made toward implementing the corrective actions tied to the Task 3.2 Assessment Report.
Mr. R. J. Spence

Page 5
January 30, 1996

Should you need additional information or have questions, please contact Kevin Carroll at 6-2289.

Very truly yours,

T. R. Butz
Y-12 Plant Manager

TRB: bdb

Attachments: As Stated

cc/atts: G. A. Atwood
         J. C. Bell
         T. R. Butz
         K. J. Carroll-RC
         V. E. Chase
         C. C. Edwards
         R. N. Escher
         C. M. Eubanks
         R. E. Fenstermaker
         B. S. Foster
         T. F. Gorman
         F. P. Gustavson
         R. M. Harding
         D. K. Hoag (DOE-ORO)
         E. L. Hockett
         L. B. Jago
         N. C. Jessen
         D. F. McCarthy
         M. K. Morrow
         R. K. Roosa
         D. L. Wall (DOE-ORO)
         P. R. Wasilko
         S. R. Wilson
         Y-12 Audit Response Center
         A. K. Zava
LETTER TITLE:

Corrective Action Plan for Task 3.2 Assessment: Defense Nuclear Facilities Safety Board (DNFSB) 94-4
Attachment I
DNFSB RECOMMENDATION 94-4 TASK 3.2 CORRECTIVE ACTION PLAN - FINDINGS

<table>
<thead>
<tr>
<th>ID#</th>
<th>Finding Description/Corrective Action</th>
<th>Scheduled Comp. Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCS 2-16</td>
<td><strong>Finding:</strong> Procedure Y70-01-150, Sect. VI.A.4.d states “actual fissile storage array dimensions shall not exceed CSA dimensions by more than six inches.”</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td><strong>Action 1:</strong> Using a team of operations managers, Nuclear Criticality Safety (NCS) managers, procedure managers, and invited Department of Energy (DOE) Site Office personnel, benchmark other NCS programs in the DOE complex (minimum of three).</td>
<td>02/05/96</td>
</tr>
<tr>
<td></td>
<td><strong>Action 2:</strong> Prepare trip report from benchmarking trips.</td>
<td>02/05/96</td>
</tr>
<tr>
<td></td>
<td><strong>Action 3:</strong> From trip report, develop needed improvement areas and approach. This improvement plan needs to consider at a minimum the following: * Incorporation of divisional-level general criticality safety procedures, such as Y70-01-150, into a site-level document controlled by Nuclear Criticality Safety Department (NCSD).</td>
<td>04/01/96</td>
</tr>
<tr>
<td></td>
<td><strong>Action 4:</strong> Develop an implementation plan to execute the improvement plan specifics. Include any phasing of changes and any required retraining/ requalification needed. (Note: Specific action assignments will involve tasking of facilities to execute requirements. This Corrective Action Plan will be updated after the completion of Action 4.)</td>
<td>06/01/96</td>
</tr>
<tr>
<td></td>
<td><strong>Action 5:</strong> Based on review in Action 3 and implementation plan, draft needed changes to procedures/new procedures to improve the noted area.</td>
<td>02/15/97</td>
</tr>
<tr>
<td></td>
<td><strong>Action 6:</strong> Forward copy of site manual/new procedures to DOE Site Office.</td>
<td>03/15/97</td>
</tr>
<tr>
<td></td>
<td><strong>Action 7:</strong> Develop a plant group (similar to composition to benchmarking group) to assess effectiveness of implementation plan.</td>
<td>05/15/97</td>
</tr>
<tr>
<td>NCS 3-8</td>
<td><strong>Finding:</strong> Y-12 has not formally identified this noncompliance nor adequately documented corrective actions to meet this requirement for all applicable Y-12 operations/ facilities.</td>
<td>-</td>
</tr>
<tr>
<td>Action</td>
<td>Description</td>
<td>Date</td>
</tr>
<tr>
<td>--------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------------</td>
</tr>
<tr>
<td>Action 1</td>
<td>Issue joint Y-12 Plant/Nuclear Operations letter invoking the compensatory measure required plantwide for criticality related procedures which do not have Criticality Safety Approval (CSA) limits and conditions included.</td>
<td>05/01/96</td>
</tr>
<tr>
<td>Action 2</td>
<td>Develop implementation plans for upgrading technical procedures per the new Technical Procedures Writer's Guide, Y10-103, including the addition of applicable safety controls for all organizations that have CSAs (Disassembly and Storage Organization).</td>
<td>05/01/96</td>
</tr>
<tr>
<td>Action 3</td>
<td>Develop implementation plans for upgrading technical procedures per the new Technical Procedures Writer's Guide, Y10-103, including the addition of applicable safety controls for all organizations that have CSAs (Quality Organization).</td>
<td>05/01/96</td>
</tr>
<tr>
<td>Action 4</td>
<td>Develop implementation plans for upgrading technical procedures per the new Technical Procedures Writer's Guide, Y10-103, including the addition of applicable safety controls for all organizations that have CSAs (Analytical Services Organization (ASO)).</td>
<td>05/01/96</td>
</tr>
<tr>
<td>Action 5</td>
<td>Develop implementation plans for upgrading technical procedures per the new Technical Procedures Writer's Guide, Y10-103, including the addition of applicable safety controls for all organizations that have CSAs (Waste Management Organization).</td>
<td>05/01/96</td>
</tr>
<tr>
<td>Action 6</td>
<td>Develop implementation plans for upgrading technical procedures per the new Technical Procedures Writer's Guide, Y10-103, including the addition of applicable safety controls for all organizations that have CSAs (Enriched Uranium Operations Organization).</td>
<td>05/01/96</td>
</tr>
</tbody>
</table>

**NCS 3-9B, 3-10**

**Finding:** The 9720-5 Warehouse postings for array storage areas do not post the Nuclear Criticality Safety Approval (NCSA) limits. The postings list the applicable NCSA number for that array storage area.

**Action 1:** Using a team of operations managers, NCS managers, procedure managers, and invited DOE Site Office personnel, benchmark other NCS programs in the DOE complex (minimum of three). | 02/05/96   |
| **Action 2:** Prepare trip report from benchmarking trips.                                                     | 02/05/96   |

Page 2
## Attachment I (Continued)

### DNFSB RECOMMENDATION 94-4 TASK 3.2 CORRECTIVE ACTION PLAN - FINDINGS

<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
</table>
| 3      | From trip report, develop needed improvement areas and approach. This improvement plan needs to consider at a minimum the following:  
* Review use of postings as operators aids.  
* Requirements of American National Standards Institute (ANSI) 8.1, Section 4.1.4, that postings shall be maintained specifying material identification and all limits that are subjected to procedural control. | 04/01/96 |
| 4      | Develop an implementation plan to execute the improvement plan specifics. Include any phasing of changes and any required retraining/qualification needed. (Note: Specific action assignments will involve tasking of facilities to execute requirements. This Corrective Action Plan will be updated after the completion of Action 4.) | 06/01/96 |
| 5      | Based on review in Action 3 and implementation plan, draft needed changes to procedures/new procedures to improve the noted area.                                                                               | 02/15/97 |
| 6      | Forward copy of site manual/new procedures to DOE Site Office.                                                                                                                                              | 03/15/97 |
| 7      | Develop a plant group (similar to composition to benchmarking group) to assess effectiveness of implementation plan.                                                                                         | 05/15/97 |

### NCS 3-10 Finding: Procedure Y70-01-150, VI. A. 4.g. states “Fissile storage arrays shall be conspicuously posted (if required by CSA)”.

<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>The NCSD conduct a review of Procedure Y70-01-150 for additional cases where exemptions from regulations are annotated.</td>
</tr>
<tr>
<td>2</td>
<td>Revise Procedure Y70-01-150, Section VI.A. 4.g, to remove the text “(if required by CSA)” and any additional areas determined by NCSD review as possible exemptions from regulations.</td>
</tr>
</tbody>
</table>

### NCS 3-15 Finding: Supervisor training has not been provided in a programmatic fashion.

<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Using a team of operations managers, NCS managers, procedure managers, and invited DOE Site Office personnel, benchmark other NCS programs in the DOE complex (minimum of three).</td>
</tr>
<tr>
<td>2</td>
<td>Prepare trip report from benchmarking trips.</td>
</tr>
</tbody>
</table>
### Attachment I (Continued)
**DNFSB RECOMMENDATION 94-4 TASK 3.2 CORRECTIVE ACTION PLAN - FINDINGS**

| Action 3: From trip report, develop needed improvement areas and approach. This improvement plan needs to consider at a minimum the following:  | 04/01/96 |
| *Review of criticality safety training practices to “provide” training for improvement areas, NCSD, operations managers, operations supervisors, support personnel, front line supervisors, and operators.  |  |
| *Ensure DOE requirements for training are included in program.  |  |

| Action 4: Develop an implementation plan to execute the improvement plan specifics. Include any phasing of changes and any required retraining/requalification needed. (Note: Specific action assignments will involve tasking of facilities to execute requirements. This Corrective Action Plan will be updated after the completion of Action 4.)  | 06/01/96 |

| Action 5: Based on review in Action 3 and implementation plan, draft needed changes to procedures/new procedures to improve the noted area.  | 02/15/97 |

| Action 6: Forward copy of site manual/new procedures to DOE Site Office.  | 03/15/97 |

| Action 7: Develop a plant group (similar to composition to benchmarking group) to assess effectiveness of implementation plan.  | 05/15/97 |

### NCS 6-34
**Finding**: Instructions are not posted as required by ANSI 8.3 and ESS-CS-101 for response to the signals.

| Action 1: The NCSD shall verify the requirements of ANSI/ANSI 8.3 are properly reflected in the central procedure ESS-CS-101 as invoked by Y70-150.  | 03/20/96 |

| Action 2: Emergency Management shall ensure adequate instructions exist on the physical requirements for evacuation signs. For example, maximum spacing.  | 03/20/96 |

| Action 3: Nuclear Operations facilities shall:  | 08/20/96 |
| a. Ensure facility in compliance with posting requirements stated in paragraphs 1 and 2.  |  |
| b. Ensure postings are controlled in a program such as operator aids.  |  |
| c. Ensure evaluation of posting control is incorporated into internal self-assessment program for the facilities.  |  |
Attachment I (Continued)
DNFSB RECOMMENDATION 94-4 TASK 3.2 CORRECTIVE ACTION PLAN - FINDINGS

| **Action 4:** Waste Management shall:                                                                 | 08/20/96 |
| a. Ensure facility in compliance with posting requirements stated in paragraphs 1 and 2.                  |          |
| b. Ensure postings are controlled in a program such as operator aids.                                    |          |
| c. Ensure evaluation of posting control is incorporated into internal self-assessment program for the facilities. |          |

| **Action 5:** The ASO shall:                                                                            | 08/20/96 |
| a. Ensure facility in compliance with posting requirements stated in paragraphs 1 and 2.                  |          |
| b. Ensure postings are controlled in a program such as operator aids.                                    |          |
| c. Ensure evaluation of posting control is incorporated into internal self-assessment program for the facilities. |          |

| **Action 6:** Periodically during evacuation drills evaluate effectiveness of evacuation postings.         | 05/20/96 |

KJCarroll: bdb  
01/30/96
January 30, 1996

Mr. R. J. Spence  
Department of Energy, Oak Ridge Operations  
Post Office Box 2001  
Oak Ridge, Tennessee 37831

Dear Mr. Spence:

Corrective Action Plan for Task 2 Assessment:  
Defense Nuclear Facilities Safety Board (DNFSB) 94-4

This letter provides the Corrective Action Plan to address the results of the "Task 2 Assessment Report for the Oak Ridge Y-12 Facility - DNFSB 94-4 (DOE-DP/EH-OR-01)" dated November 29, 1995. The Corrective Action Plan addresses the 12 findings and 3 concerns associated with the Task 2 Assessment Report.

The Task 2 Assessment Report identified issues associated with the site's implementation of Criticality Safety Approvals (CSAs) and Operational Safety Requirements (OSRs). These issues were categorized by the assessment team in the following manner:

Finding A statement of fact documenting a deviation from an applicable federal law, Department of Energy (DOE) order, standard, safety requirement, approved procedure, or assessment program criteria.

Concern Any situation while not in violation of any written procedure, in the judgment of the assessment team member, indicates less than optimal performance and could be an indicator of more serious problems.

Observation Any situation while not in violation of any written procedure or requirement, in the judgment of the assessment team member, is worthy of raising to the attention of site management in order to enhance overall performance.

The following methodology was used to address these issues:

The findings and concerns were grouped into programmatic areas to assist in root cause analysis and Corrective Action Plan development. Related issues were addressed through a common plan to provide programmatic consistency and eliminate duplication of effort. The following is the programmatic grouping (findings are indicated with an "F" and concerns with a "C"): 
Nuclear Criticality Safety

F02  Lockheed Martin Energy Systems (LMES) is not performing a formalized root cause analysis for repetitive nuclear criticality safety (NCS) deficiencies.

F11  Postings do not specify limits on control parameters or explicitly identify allowed materials.

F14  The LMES has not explicitly identified associated limits for controlled parameters in criticality safety analyses.

Operations/Nuclear Criticality Safety

F13  Thirty-two identified areas requiring CSAs in the Enriched Uranium Operations Organization do not have CSAs.

F16  Operations for Special Nuclear Material (SNM) Vehicle Transport requiring CSAs are not covered by Class 1 or Class 2 procedures.

F20  The LMES has not performed a CSA requirement for the 9215 machine shop coolant system nor has LMES properly authorized the deviation.

Fire Protection

F07  The LMES has moderation control areas not identified in prefire plans, CSAs, or Nuclear Criticality Safety Approvals (NCSAs).

Lessons Learned

F08  The LMES Lessons Learned Program is deficient in measuring operational performance improvement, program effectiveness, and integrating the program throughout the management chain and across functional areas for nuclear criticality safety.

F15  The LMES has not fully addressed examples of lessons learned from other sites.
Mr. R. J. Spence, DOE-ORO  
Page 3  
January 30, 1996

Training

F17  Maintenance, radiation control, technical support, and others who may direct or instruct operators do not receive sufficient training on the new and revised CSAs for unattended work in key areas.

C18  Current training has not yet produced a safety culture among workers consistent with DOE Order 5480.19 to prevent criticality safety deficiencies and ensure proper response if deficiencies occur.

Operational Safety Requirements (OSRs)

F06  The OSRs or Technical Safety Requirements (TSRs) have not been approved for Buildings 9720-33 and 9995.

F09  Deficiencies were observed with (1) safety analysis and authorization bases to support safety and other important programs throughout Y-12, (2) clarity of safety basis for newly approved OSRs, (3) quality of OSRs for the Enriched Uranium Operations Organization, and (4) implementation of OSRs with respect to criticality safety.

C04  The OSRs for Buildings 9212 and 9206 should be updated to current DOE requirements prior to resumption of operations in those nuclear facilities.

C05  The LMES has nuclear facilities (e.g., Buildings 9995, 9202/9203, and 9805) which do not have an approved authorization basis.

Through agreement with the DOE Y-12 Site Office (YSO), all findings were analyzed to determine root cause. The root cause analyses were conducted utilizing the TapRoot methodology as the basis for analyzing ten findings. A modified Management Oversight and Risk Tree (MORT) analysis was used for the two findings associated with the Lessons Learned Program. The Energy Systems Quality Organization facilitated the analyses and is incorporating the results into a formal report. Concurrence with the methodology and resultant root cause(s) was obtained from a designated YSO counterpart for each root cause analysis.
The corrective actions developed for each finding focus on addressing the root cause as determined in the formal process delineated above. Actions were also included to correct specific issues noted in the findings and concerns.

Development of the Corrective Action Plan was coordinated with other programmatic initiatives under way at Y-12 (e.g., Task 4 Conduct of Operations Corrective Action Plan, Y-12 Infrastructure Committees, etc.) to address issues on a global basis for related efforts, thereby ensuring consistent programmatic direction. For example, corrective actions for F17 and C18, which involve training issues, were incorporated in the Task 4 Corrective Action Plan. Issues related to NCS that were noted by the Task 4 assessment team were included in the Task 2 Corrective Action Plan.

Concurrence with the corrective action plan for each finding and concern was obtained from a designated YSO counterpart prior to formal issuance of the overall Task 2 Corrective Action Plan enclosed with this letter.

Corrective actions for the findings and concerns are being entered into the Energy Systems Action Management System (ESAMS) for tracking. Observations from the Task 2 Assessment Report are not being entered into ESAMS. The following actions have been taken or planned to address these issues:

**Observation 01** The Plan of the Day (POD) meeting does not include representation from all required support organizations.

*Action:* This issue is addressed in the Conduct of Operations Standards section of the 94-4 Task 4 Conduct of Operations Corrective Action Plan.

**Observation 03** Existing OSRs do not meet the format and content requirements of DOE Order 5480.22. However, they were still approved by DOE, Oak Ridge Operations.

*Action:* The DOE Order 5480.22 content and format requirements will be fully adhered to after completing an update of the safety analysis documentation. This update is progressing in accordance with the DOE Orders 5480.22 and 5480.23 Implementation Plan. As OSRs are revised, they will comply with 5480.22 as much as the safety basis allows. Improvement in the safety basis documentation is covered by F09 and C05.
Observation 10  Contaminated combustible waste storage in nuclear facilities presents a housekeeping problem and potential safety issues.

Action: This issue is part of the Self-Assessment Program in the 94-4 Task 4 Conduct of Operations Corrective Action Plan. This issue is also being addressed as part of the readiness assessment for Disassembly and Assembly.

Observation 12  The root cause identified by LMES in Y/DD-679 is too broad in scope to allow for effective implementation of corrective actions.

Action: A root cause analysis is being performed in response to F02. This review will also address Observation 12.

Observation 19  Job-specific criticality safety training programs are compartmentalized, resulting in reduced effectiveness.

Action: This issue is addressed as part of the Training Program in Section II of the 94-4 Task 4 Conduct of Operations Corrective Action Plan.

Observation 21  The Occurrence Reporting and Processing System (ORPS) reports place an emphasis on detection of the occurrences of problems instead of the analysis of the causes and chronology of problems.

Action: Occurrence Reporting staff will be apprised that the "Description of Occurrence" should include all pertinent background information to the event. Recent events, since this Observation, have included more complete descriptions.
Observation 22  Final ORPS reports are not always submitted within the required 45-day period.

Action: A corrective action plan was developed that covers Observation 22. Overdue occurrence reports are highlighted in weekly memorandums to senior management. As a result of working the corrective action associated with this observation, the percentage of overdue occurrence reports has declined by 40 percent. Work continues to eliminate overdue occurrence reports by February 29, 1996.

Status reports will be given to your office on a periodic basis to keep you informed of the progress we make in implementing the corrective actions tied to the Task 2 Assessment Report. The Corrective Action Plan will be revised as required to reflect updated budgetary guidance, changes in work priority, and resource availability.

Should you need additional information or have questions, please contact Charlene Edwards at 4-1711.

Very truly yours,

T. R. Butz
Y-12 Plant Manager

TRB:pld

Enclosure: As Stated

c/enc: See Page 7
Enclosure

Letter, Butz to Spence
Dated: January 30, 1996

LETTER TITLE:
Corrective Action Plan for Task 2 Assessment: Defense Nuclear Facilities Safety Board (DNFSB) 94-4
c/enc: G. A. Atwood
         J. C. Bell
         T. R. Butz
         K. J. Carroll
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         A. K. Zava
<table>
<thead>
<tr>
<th>ID #</th>
<th>Finding</th>
<th>Corrective Action Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>02</td>
<td>LMES is not performing a formalized root cause analysis for repetitive nuclear criticality safety (NCS) deficiencies. This finding is supported by discussion related to the following issues: &lt;br&gt; <strong>Issue 1:</strong> A formal Root Cause Analysis is not always performed and/or documented for criticality safety deficiencies. This is particularly evident for repetitive or generic deficiencies. This may lead to the identification of incorrect corrective actions. &lt;br&gt; <strong>Issue 2:</strong> The corrective action procedure utilizes predetermined root cause codes which inherently discourage the use of independent analysis. &lt;br&gt; <strong>Issue 3:</strong> The principle probable cause identified in the Type-C investigation does not appear to have a corresponding corrective action.</td>
<td>Using a team of operations managers, NCS managers, procedure managers, and DOE Site Office personnel, benchmark other NCS programs in the DOE complex (minimum of 3).</td>
</tr>
<tr>
<td></td>
<td>02/96</td>
<td>Prepare trip report from benchmarking trips.</td>
</tr>
<tr>
<td></td>
<td>02/96</td>
<td>From trip report, develop needed improvement areas and approach. This NCS Improvement Plan needs to consider at minimum the following:</td>
</tr>
<tr>
<td></td>
<td>04/96</td>
<td><em>Response to incidents and nonconformances, and the proper level of response invoked by procedures.</em></td>
</tr>
<tr>
<td>Date</td>
<td>Action</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>6/50</td>
<td><strong>Implementation Plan:</strong> Develop a plan group (similar in composition to benchmarking group) to assess effectiveness of DOD Office.</td>
<td></td>
</tr>
<tr>
<td>7/69</td>
<td><strong>Action 6:</strong> Review and revise root cause procedure to include description of appropriate root cause methods.</td>
<td></td>
</tr>
<tr>
<td>7/67</td>
<td><strong>Action 7:</strong> Develop corrective action plan based on results of root cause analysis; include any identified in Y/D-679.</td>
<td></td>
</tr>
<tr>
<td>6/96</td>
<td><strong>Action 8:</strong> Based on the NGS Improvement Plan and as scheduled in the Implementation Plan, draft needed changes to procedures/new procedures to improve the noted area.</td>
<td></td>
</tr>
<tr>
<td>9/69</td>
<td><strong>Action 9:</strong> Review the root cause analysis focusing on root cause analysis of the December 22, 1994, event as noted in the TYPE-C investigation.</td>
<td></td>
</tr>
<tr>
<td>6/96</td>
<td><strong>Action 10:</strong> Draft the T-Root analysis of the December 22, 1994, event as noted in the TYPE-C investigation.</td>
<td></td>
</tr>
<tr>
<td>6/96</td>
<td><strong>Program:</strong> Develop an Implementation plan to execute the NGS Improvement Plan specific to include any necessary training, and any required training/actualization needed. (Note: Specific action assignments will involve tasking of facilities to execute requirements.)</td>
<td></td>
</tr>
<tr>
<td>6/96</td>
<td><strong>Program:</strong> Incorporate threshold criteria for performing root cause analysis in QA-16.1, Corrective Action Program of a procedure/assigned training program.</td>
<td></td>
</tr>
<tr>
<td>4/96</td>
<td><strong>Action 1:</strong> Coordinate with Quality Organization to determine when to perform a root cause analysis for precipitous or generic trends related to NGS or CSA deficiencies.</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td>Action</td>
<td></td>
</tr>
<tr>
<td>------</td>
<td>--------</td>
<td></td>
</tr>
<tr>
<td>6/97</td>
<td>Action 5: Based on the NCS Improvement Plan and as scheduled in the Implementation Plan, draft needed changes to procedures to improve the noted area.</td>
<td></td>
</tr>
<tr>
<td>3/97</td>
<td>Action 6: Provide training to NCS personnel on revised requirements for NCS positions.</td>
<td></td>
</tr>
<tr>
<td>7/97</td>
<td>Action 7: Forward copy of site manual/new procedures to DOE Site Office.</td>
<td></td>
</tr>
<tr>
<td>0/97</td>
<td>Action 8: Develop a plan for a benchmarking group (similar to one) to assess effectiveness of implementation plan.</td>
<td></td>
</tr>
<tr>
<td>9/96</td>
<td>Action 4: Develop an Implementation Plan to execute the NCS Improvement Plan specifically. Include any procedural controls.</td>
<td></td>
</tr>
</tbody>
</table>
| 6/96 | Requirements of American National Standards Institute (ANSI) 8.1, Section 4.7.2, which states that limits that are subjected to review use of positions as operators/tendered should be maintained specifically and all limits that are subjected to these limits should be considered at a minimum. The following are considered areas and approaches. This NCS Improvement Plan:

- From initial report, develop needed improvement areas and approach. This NCS Improvement Plan.
- Prepare report from benchmarking trips.
- Using a team of operations managers, NCS managers, procurement managers, and DOE Site Office personnel, benchmark other NCS programs in the DOE complex (minimum of 3).
- Positions do not specify limits on control parameters or explicitly identify allowed materials. |

**Finding:**
Develop an implementation plan to execute the NCS Improvement Plan specifics. Include any

Operations validation and verification of CSA requirements.

Process to quickly revise current CSAs, including a method to document the incorporated

Safety analysis.

Identify the explicit controls and requirements relied upon for double contingency in

controls identified in the criticality safety analysis.

Ensure that these requirements are included in the criticality safety analysis to support the

analytical.

Ensure requirements are clearly identified from controlled parameters in the criticality safety

analytical.

Concerning the explicit identification of associated limits for controlled parameters in

Determine the interpretation of ANSI/American Nuclear Society (ANS)–1.1984, Section 8.3.3

From the report, develop needed improvement areas and approach. This NCS Improvement Plan

Prepared the report from benchmarking tips.

Using a team of operations managers, NCS managers, procedure managers, and DOE site office

Finding: LME has not explicitly identified associated limits for controlled parameters in criticality safety
<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action 5</td>
<td>Based on the NCS Improvement Plan and as scheduled in the implementation plan, draft needed changes to procedures/new procedures to improve the noted area.</td>
</tr>
<tr>
<td>Action 6</td>
<td>Forward copy of site manual/new procedures to DOE Site Office.</td>
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<tr>
<td>Action 7</td>
<td>Develop a plant group (similar in composition to benchmarking group) to assess effectiveness of implementation plan.</td>
</tr>
</tbody>
</table>

02/97
03/97
05/97
| Action 1  | Review enriched uranium operations to identify areas requiring CEA's that are missing CEA's per 770-150.  
| Action 2 | Issue CEA's for those dynamic continuing operation areas that are missing CEA's.  
| Action 3 | For sake continuing operation areas, dynamic-declared continuing operation areas, and nonconfining operation areas, formally document the safety basis with peer review. (via a white paper).  
| Action 4 | Complete development of the NCS Improvement Plan that is to include the following:  

Define who is responsible for implementation of the nuclear criticality safety standards.  

Define the standard for when a criticality safety analysis is needed and how it is obtained.  

The standards cannot be maintained (e.g. mechanism for determination without necessary revising the standards cannot be accomplished, and acceptable compensatory actions if compliance with the standards have been achieved).  

**Finding:** Thirty-two identified areas requiring CEA's in enriched uranium operations do not have CEA's in.

---

**CSA**

- Define how to make modifications to procedures and policies if standard changes are required.
<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action 1</td>
<td>Procedure Y20-NN-09-002 will be replaced by a Y50-series technical procedure which will be used to create the new procedure. The procedure will be used for Class 1 or Class 2 procedures.</td>
</tr>
<tr>
<td>Action 2</td>
<td>Fully comply with the current revision of Y10-01.</td>
</tr>
<tr>
<td>Action 3</td>
<td>Complete a critique of the incident(s) which led to P16 and the initial response to the finding.</td>
</tr>
<tr>
<td>Action 4</td>
<td>Complete development of the NCS Improvement Plan that is to include the following:</td>
</tr>
<tr>
<td>Action 5</td>
<td>NCS issues. Perform a review of EVO equipment prior to restart for holdup.</td>
</tr>
</tbody>
</table>

| Finding | |
|--------| |
| Finding: LMEs has not performed a CSA requirement for the building 9215 machine shop coolant system. |

**Procedures per Y10-01:**

*Note: All hazardous material movements are now required to be covered by Class 1 or Class 2 technical procedures.

<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
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<td>Action 4</td>
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</tr>
<tr>
<td>Action 5</td>
<td>NCS issues. Perform a review of EVO equipment prior to restart for holdup.</td>
</tr>
</tbody>
</table>

<p>| Finding | |
|--------| |
| Finding: LMEs has not performed a CSA requirement for the building 9215 machine shop coolant system. |</p>
<table>
<thead>
<tr>
<th>Action Number</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>Update existing fire plans and train to updated plans in accordance with the NCS.</td>
</tr>
<tr>
<td>5</td>
<td>Assister the NCS Manual/Procedural Requirements. This section supports the NCS Manual/Procedural Requirements. It provides guidance to implement憾mentally with DOF 5480.2.</td>
</tr>
<tr>
<td>4</td>
<td>Review V50.20.49 and either revise or issue new command media in coordination with the NCS.</td>
</tr>
<tr>
<td>3</td>
<td>Develop a lesson plan from the Special Instruction; obtain NCS's review/approval of the lesson.</td>
</tr>
<tr>
<td>2</td>
<td>Submit request for additional resources for the review and update of fire plans.</td>
</tr>
<tr>
<td>1</td>
<td>Issue a Special Instruction for fire fighting in moderation control areas; obtain Nuclear Criticality Safety Department's (NCS's) technical review and written approval of the special instructions and appendices to all fire plans.</td>
</tr>
<tr>
<td>Finding</td>
<td>Nuclear Criticality Safety Guidelines for Fire Fighting in Watershed provides only General Guidance.</td>
</tr>
</tbody>
</table>

**Finding:**

- F07

**FIRE PROTECTION**
<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/96</td>
<td>Find LMEs' lessons learned program is deficient in measuring operational performance improvement and program effectiveness and in integrating the program throughout the management chain and across functional areas for nuclear criticality safety.</td>
</tr>
<tr>
<td>04/96</td>
<td>Define line and staff organizations management responsibilities for identifying, evaluating, and sharing lessons learned.</td>
</tr>
<tr>
<td>04/96</td>
<td>Identify lessons learned dissemination approaches.</td>
</tr>
<tr>
<td>08/96</td>
<td>Reevaluate and reidentify realistic, internal clearencehouse activities to identify lessons learned.</td>
</tr>
<tr>
<td>09/96</td>
<td>Revise Lessons Learned Procedure, QA-16.3, to incorporate management, line, and staff responsibilities and dissemination approaches identified in associated action plan actions.</td>
</tr>
<tr>
<td>03/97</td>
<td>Communicate responsibilities as defined in procedure revision.</td>
</tr>
<tr>
<td>03/97</td>
<td>Review implementation of QA-16.3, Lessons Learned and Alerts Program.</td>
</tr>
<tr>
<td>Action</td>
<td>Description</td>
</tr>
<tr>
<td>--------</td>
<td>-------------</td>
</tr>
<tr>
<td>7</td>
<td>Review implementation of QA-16, Lessons Learned and Alerts Program.</td>
</tr>
<tr>
<td>6</td>
<td>Communicate responsibilities as defined in procedure revision.</td>
</tr>
<tr>
<td>5</td>
<td>Revise lessons learned Procedure, QA-16, to incorporate management, line, and staff responsibilities and dissemination approaches identified in associated action plan actions.</td>
</tr>
<tr>
<td>4</td>
<td>Reevaluate and identify realistic, internal cleaning house activities to identify lessons learned.</td>
</tr>
<tr>
<td>3</td>
<td>Identify lessons learned dissemination approaches.</td>
</tr>
<tr>
<td>2</td>
<td>Define line and staff responsibilities management responsibilities for identifying, evaluating, and sharing lessons learned.</td>
</tr>
<tr>
<td>1</td>
<td>Review lessons cited in finding for potential lessons learned and issue lessons learned as applicable.</td>
</tr>
</tbody>
</table>

**Finding:** Lessons has not fully addressed examples of lessons learned from other sites (Rocky Point B-771, Segroly P-510 Corp, P-560, R-57), see Appendix A, Task 2, Assessing Plan, Rev. 1, October 1995.
<table>
<thead>
<tr>
<th>C18</th>
<th>OPERATIONAL SAFETY REQUIREMENTS (OSRs)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Concern:</strong></td>
<td>Current training has not yet produced a safety culture among workers that prevents criticality safety deficiencies and ensures proper response if deficiencies occur.</td>
</tr>
<tr>
<td><strong>Action 1</strong></td>
<td>Necessary elements for establishing the required safety culture are embodied in the 94-4 Task 4 Corrective Action Plan. Specifically, the Conduct of Operations (CONOPS) Standards, the CONOPS Improvement Program and the training of support personnel covered in the &quot;Additional Improvement Areas&quot; sections are responsive to the issue of establishing the required safety culture.</td>
</tr>
<tr>
<td><strong>Finding:</strong></td>
<td>Assess the effectiveness of these actions under the Self Assessment Program per the corrective action plan for the 94-4 Task 4 Finding C-29204-2E, Management Self Assessment.</td>
</tr>
<tr>
<td><strong>OSRs or Technical Safety Requirements (TSRs) have not been approved (or developed) for Buildings 9720-33 and 9995.</strong></td>
<td>None of these buildings have DOE approved Safety Analysis Reports (SARs).</td>
</tr>
<tr>
<td><strong>Finding:</strong></td>
<td>Review the 1027-92 hazard category for Building 9720-33 and confirm the facility is not a nuclear facility.</td>
</tr>
<tr>
<td><strong>Action 2</strong></td>
<td>Per the current implementation plan schedule for DOE Orders 5480.22 and 5480.23, submit the Building 9995 SAR.</td>
</tr>
<tr>
<td><strong>Action 3</strong></td>
<td>Submit a revision to the Implementation Plan for DOE Orders 5480.22 and 5480.23. This revision will describe the process for compiling existing safety analysis documentation for submission as a Y-12 Plant SAR, and it will include the process for future revisions to be compliant with 5480.22 and 5480.23.</td>
</tr>
<tr>
<td><strong>Issue to Y-12 Site Office for review the Y-12 Plant Safety Analysis Report (SAR).</strong></td>
<td>The Plant SAR will not be fully compliant with DOE Order 5480.23/22 when issued but will serve as a framework for future improvements.</td>
</tr>
<tr>
<td>Action</td>
<td>Finding: Problems exist with (1) safety analyses and authorization bases to support safety and other important programs throughout Y-12, (2) clarity of safety bases for newly approved ORSs, (3) quality of ORSs for continued uranium operations, and (4) implementation of ORSs, generally.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>1</td>
<td>Verify that an RFA exists that requires Category II facilities having new ORSs prior to resumption of operations. Action 1: OSRs for Buildings 9212 and 9206 should be updated to current DOE requirements prior to resumption.</td>
</tr>
<tr>
<td>2</td>
<td>Issue Y-12 Site Office for review the Y-12 Plan SAR. (Note: The Plan SAR will not be fully compliant with DOE Orders 5480.22 and 5480.23.)</td>
</tr>
<tr>
<td>3</td>
<td>Submit a Basis for Inception Operations (BIOs) for nuclear facilities for review and approval to DOE.</td>
</tr>
<tr>
<td>4</td>
<td>Upgrade Y-12 Plan SAR to be compliant with 5480.23/22.</td>
</tr>
<tr>
<td>Concern: LMES has nuclear facilities (e.g., Buildings 9995, 9202/9203, and 9805) which do not have an approved authorization basis (e.g., no SARS, OSRs, or BICs).</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td></td>
</tr>
<tr>
<td><strong>Action 1</strong> Submit a revision to the Implementation Plan for DOE Orders 5480.22 and 5480.23. This revision will describe the process for compiling existing safety analysis documentation for submission as a Y-12 Plant SAR, and it will include the process for future revision to be compliant with 5480.22 and 5480.23.</td>
<td></td>
</tr>
<tr>
<td><strong>Action 2</strong> Issue to Y-12 Site Office for review the Y-12 Plant SAR. (Note: The Plant SAR will not be fully compliant with DOE Orders 5480.23/22 when issued but will serve as a framework for future improvements.)</td>
<td></td>
</tr>
</tbody>
</table>
January 31, 1996

Mr. R. J. Spence  
Department of Energy, Oak Ridge Operations  
Post Office Box 2001  
Oak Ridge, Tennessee  37831

Dear Mr. Spence:

Corrective Action Plan for the Defense Nuclear Facilities Safety Board (DNFSB)  
Recommendation 94-4 Task 4 Assessment of Conduct of Operations at Y-12


Through agreement with the Department of Energy-Y-12 Site Office (DOE-YSO), all findings from this assessment were analyzed to determine root cause. The root cause analyses were conducted utilizing the TapRoot methodology as the basis for analysis for 25 findings, and a modified Management Oversight and Risk Tree (MORT) analysis incorporated for three programmatic management implementation issues. The Energy Systems Quality Organization facilitated each analysis and has incorporated the results into a formal report. Concurrence with the methodology and resultant root cause(s) was obtained from the DOE-YSO counterpart for each analysis performed.

The Task 4 Corrective Action Plan was developed by focusing on addressing the root cause for all findings as the basis for structuring programmatic corrective actions. This process allows the site to concentrate its resources on strengthening the overall Conduct of Operations program rather than concentrating exclusively on correcting the symptomatic deficiencies. The issues associated with the concerns and observations noted in the assessment report were also addressed by the programmatic actions delineated in the Task 4 Corrective Action Plan.

These corrective actions were coordinated with other programmatic initiatives at Y-12 (e.g., DNFSB 94-4 Task 2 Criticality Safety Approvals/Operational Safety Requirements corrective action plan, Y-12 infrastructure improvement teams, etc.) in order to address issues on a global basis for related efforts, thereby ensuring consistent programmatic direction.
Concurrence with the Task 4 Corrective Action Plan was obtained from each affected DOE-YSO counterpart prior to formal issuance through this letter. Status reports will be provided to your office on a periodic basis to keep you informed of progress towards implementing the corrective actions tied to the Task 4 Assessment Report.

Should you need additional information or have questions, please contact Tom Paul at 6-5561 or Lee Jago at 4-3853.

Sincerely,

[Signature]

F. P. Gustavson
Vice President
Defense and Manufacturing

FPG:BSF: pld

Enclosure: As Stated

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C. C. Edwards
R. N. Escher
B. S. Foster
F. P. Gustavson
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P. R. Wasilko
Lockheed Martin Energy Systems
Corrective Action Plan
for the
Defense Nuclear Facilities Safety Board (DNFSB)
Recommendation 94-4 Task 4 Assessment
of Conduct of Operations at Y-12

January 30, 1996

Compiled By
T. W. Paul

Oak Ridge Y-12 Plant
Oak Ridge, Tennessee
operated by
LOCKHEED MARTIN ENERGY SYSTEMS
for the
U. S. DEPARTMENT OF ENERGY

MANAGED BY
MARTIN MARIETTA ENERGY SYSTEMS, INC.
FOR THE UNITED STATES
DEPARTMENT OF ENERGY
DNFSB RECOMMENDATION 94-4 TASK 4 CORRECTIVE ACTION PLAN
(CONDUCT OF OPERATIONS)

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EXECUTIVE SUMMARY

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- CONOPS Implementation Training
- Ongoing Floor Training Program
- CONOPS Implementation
- CONOPS Assessments

SECTION II. ADDITIONAL IMPROVEMENT AREAS

- Training and Qualification Program
- Drill Program
- Issues Management
- Radiological Control
- Maintenance
- Occurrence Reporting
- Fire Protection
- Configuration Management
- Document Control

APPENDIX A. SUMMARY OF FINDINGS AND CORRECTIVE ACTIONS

January 30, 1996 Revision 0
DNFSB Recommendation 94-4 Task 4 (Conduct of Operation)  
Corrective Action Plan  

EXECUTIVE SUMMARY  

The Task 4 Assessment Report for the Oak Ridge Y-12 Facility - DNFSB 94-4 identified issues associated with the implementation of the site's Conduct of Operations program. These issues were categorized by the assessment team in the following manner:  

Finding A statement of fact documenting a deviation from an applicable federal law, Department of Energy (DOE) order, standard, safety requirement, approved procedure, or assessment program criteria.  

Concern Any situation while not in violation of any written procedure, in the judgement of the assessment team member, indicates less than optimal performance and could be an indicator of more serious problems.  

Observation Any situation while not in violation of any written procedure or requirement, in the judgement of the assessment team member, is worthy of raising to the attention of site management in order to enhance overall performance.  

STRATEGY FOR THE DEVELOPMENT OF THE TASK 4 CORRECTIVE ACTION PLAN  

Key Strategy 1: Focus on Correction of Programmatic Issues. A programmatic approach was selected as the basis for addressing this assessment report. This strategy allowed each issue to be evaluated as a symptomatic deficiency inherent within a particular functional area. These symptoms were evaluated to determine their relation to the overall programmatic structure required to implement site-level programs. The key elements in this structure were defined as:  

1. Standards established to define the requirements/expectations of the program;  
2. Tools required to be in place in order to implement the program;  
3. Training required to educate employees on all elements of the program;  
4. Implementation of the program; and  
5. Assessment process required to measure effectiveness/progress of the program.  

Each finding, concern, and observation from the Task 4 Assessment Report was associated to a particular programmatic functional area and then further defined by its relation within the five elements of the programmatic structure defined above. Then, further analysis was conducted to identify the root cause associated with the 28 findings from the assessment report.
The root cause analyses were conducted utilizing the TapRoot methodology as the basis for analysis for 25 findings and a modified Management Oversight and Risk Tree (MORT) analysis incorporated for three programmatic management implementation issues. The Energy Systems Quality Organization facilitated each analysis and incorporated the results into a formal report. Concurrence with the methodology and resultant root cause(s) was obtained from a designated YSO counterpart for each analysis performed.

Based on the results of the root cause analyses, the key programmatic elements of this corrective action plan are:

- Near-term development and implementation of Conduct of Operations standards in the support and balance-of-plant organizations, particularly where an interface exists with Nuclear Operations;
- The establishment of a robust ongoing floor training program that focuses on daily interaction between line management and operators to reinforce technical training and emphasize management expectations and lessons learned; and
- The implementation of a management assessment process that ensures expectations are being met and identifies short-comings so that real-time corrections can be made.

A Corrective Action Plan was developed for each programmatic functional area by focusing on addressing the root cause for all findings as the basis for structuring programmatic corrective actions required to fully implement each program. This process allows the site to concentrate its resources on strengthening the overall Conduct of Operations program rather than concentrating exclusively on correcting symptomatic deficiencies.

Recognizing the importance of timely attention to these symptomatic deficiencies, each issue identified in this assessment report was also addressed in terms of actions required to correct the field conditions for each deficiency noted. While these symptomatic corrections are not specifically identified in the Task 4 Corrective Action Plan, they will be addressed through actions submitted within the Energy Systems Action Management System (ESAMS) for closure and tracking. For example, for a finding that cited the wrong procedure revision being used on the floor, the task 4 CAP addresses the need for a document control program. The correction of the field condition (e.g., placing the correct revision on the floor for that specific occurrence) will be included as an action step in the ESAMS corrective action plan for the finding.

In addition, the 19 observations identified in the assessment report were evaluated for applicability to the overall programmatic issues addressed in the relevant functional areas. Many of the observations are addressed by the programmatic actions of the functional areas, with feasibility of incorporation at the discretion of the functional manager responsible for the affected programmatic area.
Key Strategy 2: Phased execution of corrective actions building on improvements made in the resumed facilities. Improvements in Conduct of Operations have been achieved in the nuclear facilities that have been resumed. This CAP builds on lessons learned from the resumption activities, using the disciplined operations experience of line managers and mentors assigned to those areas to develop and execute site-wide improvements. Execution of this plan will be phased over a 2-3 year time frame. Priority for implementation is established in the following manner:

1. Nuclear Operations currently restarted;
2. Nuclear Operations to be restarted;
3. Organizations providing support to Nuclear Operations; and
4. Balance of Plant (BOP) - all other organizations at Y-12.

Key Strategy 3: Integrate corrective actions with other ongoing Y-12 initiatives. Development of the Corrective Action Plans was coordinated with other programmatic initiatives at Y-12 (e.g., Task 2 CSAs/OSRs corrective action plan, Y-12 Infrastructure committees, etc.) in order to address issues on a global basis for related efforts to ensure consistent programmatic direction. Concurrency with the individual corrective actions was obtained from a designated YSO counterpart prior to formal issuance of this action plan.

GROUPING OF THE TASK 4 ASSESSMENT FINDINGS AND CONCERNS

The Task 4 CAP is organized into two major sections. Section I includes corrective actions for the Conduct of Operations program improvements necessary to affect long-term culture change at Y-12. Section II includes the corrective actions to address other programmatic improvements necessary to fully address all of the Task 4 issues. Following is a breakdown of the programmatic functional area grouping of the issues identified in the Task 4 Assessment Report:

I. CONDUCT OF OPERATIONS

General Program

Findings C-1/Supp-1 Program support in the area of Conduct of Operations for other than Nuclear Operations is deficient.

C-1-1 The Plant Conduct of Operations Matrices of Applicability and Implementation Plan have not yet been developed as required in DOE Order 5480.19

C-3-1 The corrective actions taken to correct the root cause of the September 1994 CSA incident have not been effective in all nuclear operations areas.
Concerns

C-1-7 Plant Conduct of Operations Manual has not yet been developed.

C-1/DUO-1 LMES should review Conduct of Operations Chapters 3 and 13 for applicability to all facilities.

C-1/9204-4-1 Specific responsibilities and actions required to implement Conduct of Operations chapter requirements in facilities have not been fully developed.

C-1/9204-2E-1 Unique Process and Control Areas should be reviewed for applicability to the facility.

Conduct of Operations - Operations Organization & Administration (Chapter 1)

Findings

C-1-8 Performance goals as required by DOE Order 5480.19 and the Nuclear Operations Conduct of Operations Manual are not currently being maintained as required by the Order and Manual.

C-2/DUO-1 Four potential CSA violation were found in 9201-5, third floor lay down area.

C-2/DUO-3 Some electrical controller doors not routinely fastened after maintenance

C-2/DUO-4 Material conditions in equipment spaces of 9998 and on the roof of 9998 were poor.

C-2/9720-5-1 Operator rounds in Building 9720-5 do not inspect for correct placement of tags and locks as specified in DOE-STD-1030-92, Guide to Good Practices for Lockouts and Tagouts, Section 4.8

Concerns

C-2/DUO-7 Many material deficiencies exist in DUO facilities.

C-1/EUTO-1 An applicability matrix for 9215 EUTO is not filed in the shift manager’s or operations manager’s Conduct of Operations Manual.

C-2/9204-2E-2 Plan of the day meetings are not consistent across the plant.

C-2/9204-4QE-2 Material conditions exist that affect safety.
Conduct of Operations - Shift Routines & Operating Practices (Chapter 2)

Findings C-1-5 Nuclear Operations Conduct of Operations Manual chapter on rounds does not incorporate requirement to inspect for correct placement of tags/locks as specified in DOE-STD-1030-92, Guide to Good Practices for Lockouts and Tagouts, Section 4.8

C-2/DUO-5 Daily round sheets were not reviewed weekly as required.

C-2/DUO-6 Housekeeping in 9201-5 had deteriorated to the point that personnel making rounds were insensitive to safety concerns.

Concerns C-1-6 General lighting in many facilities is inadequate.

C-2/EUTO-3 Pre-shift briefings need improvement.

C-2/EUTO-5 Workers need to record unusual items in the remarks section of the round sheets.

Conduct of Operations - Communications (Chapter 4)

Findings C-2/EUTO-1 The public address system is not used effectively.

C-2/EUTO-2 Voice communications are informal and not precise. Repeatbacks are neither used nor required.

Concern C-1-9(Non-Nuc) Communications practices are not in conformance with DOE Order 5480.19, Chapter IV.

Conduct of Operations - Lockout/Tagout (Chapter 9)

Findings C-2/9720-5-1 The Lockout/Tagout system in Building 9720-5 is not being periodically inspected as required by DOE Order 5480.19, Chapter IX.

C-1/LOTO-1 The Y-12 Lockout/Tagout Program does not meet today's DOE-wide practice in that appropriate verification is not required.

C-2/LOTO-1 Locking devices used in one LOTO were improperly installed.

Concerns C-1/LOTO-2 The Lockout/Tagout program does not specify frequency of periodic inspections.
C-2/LOTO-2 Some deficiencies were noted during placement of lockout/tagout.

Conduct of Operations - Logkeeping (Chapter 11)

Finding C-2/DUO-5 Daily round sheets were not reviewed weekly as required.
Comment: Also addressed in ConOps Chapter 2.

Conduct of Operations - Operations Turnover (Chapter 12)

Concern C-2/9204-4QE-1 A support group pre-evolution brief was less than adequate.

Conduct of Operations - Timely Orders (Chapter 15)

Concern C-2/EUTO-4 EUO Timely Order effectiveness needs improvement.

Conduct of Operations - Operations Procedures (Chapter 16)

Concern C-3/PP-1 Implementation of the procedures program does not completely address identified deficiencies.

Conduct of Operations - Ongoing Floor Training

Findings C-2/T&D-1, 8 A comprehensive continuing training program is not in place to implement Conduct of Operations

C-2/T&D-4 Training is not effective in helping operators retain important information.

Concerns C-1/T&D-2 The site lacks infrastructure to support an effective training program.

C-1/T&D-3 The Training Program does not take credit for actual events.

C-2/T&D-3 Training is not formally conducted.

Conduct of Operations - Management Assessments

Finding C-1-2 Line management is not conducting routine Conduct of Operations assessments as required by the Y-12 Plant Management Assessment Program (Y60-028) requirements and DOE Order 5480.19
Concern: C-2/9204-2E-5 Self-assessment program in 9204-2E lacks management participation and is not performance based.

**Conduct of Operations - Drill Program**

Concerns C-2/T&D-5, 6, 7 Drills need improvement

II. **ADDITIONAL PROGRAMMATIC IMPROVEMENT AREAS**

**Training and Qualification Program**

Findings

C-1/T&D-1 Qualification process for shift manager and shift technical advisor (STA) is incomplete.

C-2/T&D-2 Personnel serving as Shift Manager and STA are not formally qualified.

Concerns C-3/T&D-1 No corrective action plans have been presented to address training deficiencies.

**Issues Management**

Concern C-1-3 DOE monthly assessments are not acted upon by management.

**Nuclear Criticality Safety Approvals**

Concerns C-2/PP-1 The revision process for CSAs does not contain sufficient documentation and review of changes.  
**Comment:** This concern is addressed through the Task 2 Corrective Action Plan for CSAs/OSRs. Please see finding F14 in Task 2 for this action plan.

C-2/PP-2 The CSA validation process is not sufficiently rigorous to ensure facility compliance with assumptions.  
**Comment:** This concern is addressed through the Task 2 Corrective Action Plan for CSAs/OSRs. Please see finding F14 in Task 2 for this action plan.
Radiological Control

Findings  C-2/DUO-2  A number of radiological control issues were noted (9 issues).
          C-2/Supp-2  Many deficiencies were observed in radiological control practices.
Concern    C-2/Supp-4  Contaminated transport trucks pose an ALARA concern.
          C-2/Supp-3  CAAS surveillance source poses an ALARA concern.
Comment:  This concern has been evaluated and determined to pose no
          ALARA concerns. Formal documentation addressing this
          issue is being finalized and has received concurrence from
          the designated YSO counterpart. The resolution of this
          issue will be formally documented in ESAMS.

Maintenance/Work Control

Finding  C-1/DUO-2  There are no maintenance procedures in place or scheduled to be
          developed to support operating equipment in 9215/9204-2E.

Occurrence Reporting

Finding  C-1-4  Occurrence reporting does not meet DOE Order 5000.3B
          requirements.

Fire Protection

Finding  C-2/Supp-1  Fire department records of fire extinguisher inspections LTA
          Concern    C-2/Supp-8  Surveillance of dry chemical fire extinguishers may not ensure
          operability.
Comment:  This concern has been evaluated and determined that the
          operability of dry chemical fire extinguishers is not being
          compromised. Formal documentation addressing this issue
          is being finalized and has received concurrence from the
          designated YSO counterpart. The resolution of this issue
          will be formally documented in ESAMS.
Accountability

Finding  C-2/9204-2E-3 Bi-monthly Material Control & Accountability (MCA) inventories have not been completed for 9204-2E since July 1995.

Comment: This finding has been corrected. The issues resulting in this deficiency were unique to this particular situation and do not have application on a global basis. Formal documentation addressing this issue is being finalized and has received concurrence from the designated YSO counterpart. The resolution of this issue will be formally documented in ESAMS.

A summary of the Task 4 Assessment Report Findings and their associated corrective actions is included as Attachment A to this Corrective Action Plan.
### DNFSB RECOMMENDATION 94-4 TASK 4 CORRECTIVE ACTION PLAN
(Conduct of Operations)

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January 30, 1996 Revision 0
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<td>Issue draft generic roles and responsibilities of operations managers (facility managers), specifically safety and emergency systems, in COO Manual Chapter 1.</td>
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<td>2/96</td>
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<td>I.A.4.a</td>
<td>Issue a Draft Site CONOPS Manual for review and comment. The manual defines the site organization and establish conduct of operations standards. The manual will be supported by new or revised LMES procedures for those chapters requiring procedural discipline in the execution of the standards.</td>
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<td>Approve and Issue Site CONOPS Manual.</td>
<td>Vice President for Defense and Mfg.</td>
<td>5/96</td>
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<td>I.A.5</td>
<td>Define fire suppression system and Criticality Accident Alarm System ownership for operations managers.</td>
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<td>CONOPS Tools (Programs, Procedures, etc.)</td>
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<td>Define the specific roles and responsibilities of the site operations managers and area coordinators</td>
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<td>Identify the specific zones and facilities at the site to which Operations and area coordinators will be assigned.</td>
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<td>Assign Operations and area coordinators for each Zone/Facility.</td>
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<td>Obtain and review examples of CONOPS performance indicators used at other site, such as Rocky Flats, SRS, Pantex.</td>
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<td>Define performance indicators (PIs) for the site. Establish performance indicators reported to YSO.</td>
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<td>CONOPS Implementation Training</td>
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<td>I.C.1</td>
<td>Prepare line manager CONOPS implementation training for each chapter of COO Manual.</td>
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<td>C-2/9204-2E-3</td>
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<td>1.C.4.b</td>
<td>Conduct operator CONOPS implementation training for non-resumed Nuclear operations organizations.</td>
<td>Mentors Program Mgr (Y-12 Trng Mgr)</td>
<td>10/96</td>
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<td>C-2/Supp-3</td>
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<td>C-2/9204-2E-3</td>
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<td>1.C.4.c</td>
<td>Conduct operator CONOPS implementation training for support organizations.</td>
<td>Mentors Program Mgr (Y-12 Trng Mgr)</td>
<td>11/96</td>
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<td>C-2/9204-2E-3</td>
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<td>1.C.4.d</td>
<td>Conduct operator CONOPS implementation training for balance of plant organizations.</td>
<td>Mentors Program Mgr (Y-12 Trng Mgr)</td>
<td>6/97</td>
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<td>C-1/Supp-1</td>
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<td>I.C.5</td>
<td>Ongoing Floor Training</td>
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<tr>
<td>I.C.5.a</td>
<td>Ongoing Floor Training Standards</td>
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<tr>
<td>I.C.5.a.1</td>
<td>Conduct an initial awareness training session for Y-12 Organization Managers that emphasizes senior management's expectations for conduct of operations.</td>
<td>Deputy V.P. for Defense and Mfg.</td>
<td>3/96</td>
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<td>C-3-1</td>
</tr>
<tr>
<td>I.C.5.a.2</td>
<td>Develop a Y-12 manager (supervisor) training program geared to COO responsibilities, rigor &amp; formality, attention to issues, manager involvement, goals &amp; motivations, and unity &amp; communication.</td>
<td>Trng Mgr assisted by PEG and Mentors</td>
<td>5/96</td>
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<td>C-3-1</td>
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<tr>
<td>I.C.5.a.3</td>
<td>Develop a Standard for the Ongoing Floor Training Program that describes roles and responsibilities, use of lessons learned, and the requirements for implementation of ongoing floor training in nuclear operations and support organizations.</td>
<td>Y-12 Trng Mgr</td>
<td>6/96</td>
<td></td>
<td>C-2/T&amp;D-1, C-2/T&amp;D-4, C-2/T&amp;D-8</td>
</tr>
<tr>
<td>I.C.5.a.4</td>
<td>Commence ongoing training for Nuclear Ops and Support Line Mgrs on principles of COO and COO implementation in their facilities.</td>
<td>Y-12 Nuclear Operations, V.P. and Plant Managers</td>
<td>8/96</td>
<td>After completion of all organization applicability matrices</td>
<td>C-3-1, C-2/DUO-1, C-1/Supp-1, C-2/9204-2E-3, C-2/T&amp;D-1, C-2/T&amp;D-4, C-2/T&amp;D-8</td>
</tr>
<tr>
<td>I.C.5.b</td>
<td>Ongoing Floor Training Tools</td>
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<tr>
<td>I.C.5.b.1</td>
<td>Develop near-term schedule for delivery of specific topics to a selected Pilot area</td>
<td>NucOps Trng Mgr</td>
<td>8/96</td>
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<tr>
<td>I.C.5.b.2</td>
<td>Develop training guides for 1st month of Pilot training.</td>
<td>NucOps Trng Mgr</td>
<td>9/96</td>
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<td>CAP ID #</td>
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<tr>
<td>I.C.5.c</td>
<td>Training on the Ongoing Floor Training Program</td>
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<tr>
<td>I.C.5.c.1</td>
<td>Train Pilot area Line Mgrs &amp; Personnel who are responsible for conducting Ongoing Floor Training</td>
<td>NucOps Trng Mgr</td>
<td>10/96</td>
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<tr>
<td>I.C.5.c.2</td>
<td>Train remaining Line Mgrs &amp; Personnel who are responsible for conducting Ongoing Floor Training</td>
<td>Y-12 Trng Mgr</td>
<td>4/97</td>
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<td>C-2/T&amp;D-1</td>
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<td>C-2/T&amp;D-4</td>
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<td>C-2/T&amp;D-8</td>
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<tr>
<td>I.C.5.d</td>
<td>Ongoing Floor Training Implementation</td>
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<tr>
<td>I.C.5.d.1</td>
<td>Conduct a Ongoing Floor Training Pilot in a selected Nuc Ops Area</td>
<td>NucOps Trng Mgr</td>
<td>10/96</td>
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<tr>
<td>I.C.5.d.2</td>
<td>Update the Ongoing Floor Training Program, based upon Pilot results</td>
<td>NucOps Trng Mgr</td>
<td>3/97</td>
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<tr>
<td>I.C.5.d.3</td>
<td>Transition Ongoing Floor Training implementation to all Y-12 areas to remaining NucOps and support organizations.</td>
<td>Y-12 Trng Mgr</td>
<td>6/97</td>
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<td>C-1/Supp-1</td>
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<td>C-2/DUO-1</td>
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<td>C-2/T&amp;D-4</td>
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<td>C-2/T&amp;D-8</td>
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<tr>
<td>I.C.5.e</td>
<td>Ongoing Floor Training Assessment</td>
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<tr>
<td>I.C.5.e.1</td>
<td>Develop an assessment checklist to evaluate the effectiveness of ongoing training to be included in the ongoing CONOPS Assessment program</td>
<td>Y-12 Trng Mgr</td>
<td>10/96</td>
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<td>CAP ID #</td>
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<td>I.D.1</td>
<td>Cancel obsolete site-level CONOPS procedures that are superseded by the Site CONOPS Manual. These old procedures are actually standards whose contents will be &quot;rolled in&quot; as requirements to the manual.</td>
<td>COO Mgr</td>
<td>5/96</td>
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<tr>
<td>I.D.2</td>
<td>Revise any existing site-level CONOPS procedures that will be retained to achieve consistency with CONOPS Manual</td>
<td>COO Mgr</td>
<td>8/96</td>
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<tr>
<td>I.D.3</td>
<td>Implement COO in the organizations in accordance with the approved Requests for Approval (RFAs)</td>
<td>COO Mgr</td>
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<tr>
<td>I.D.3.1</td>
<td>Implement RFA # 137 (RSS)</td>
<td>Org Mgr</td>
<td>4/96</td>
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<td>I.D.3.2</td>
<td>Implement RFA # 147 (DUO)</td>
<td>Org Mgr</td>
<td>3/96</td>
<td>C-2/DUO-1</td>
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<tr>
<td>I.D.3.3</td>
<td>Implement RFA # 160 (D&amp;A)</td>
<td>Org Mgr</td>
<td>12/96</td>
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<tr>
<td>I.D.3.4.a</td>
<td>Approve RFA # 162 (EUO)</td>
<td>DOE COO Mgr</td>
<td>2/96</td>
<td>YSO has the RFA for approval</td>
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<tr>
<td>I.D.3.4.b</td>
<td>Implement RFA # 162 (EUO)</td>
<td>EUO Org Mgr</td>
<td>11/96</td>
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<tr>
<td>I.D.3.5.a</td>
<td>Prepare/Submit RFA for QE (supersede COO implementation as defined by the current Standards &amp; Controls Management Plan)</td>
<td>QE Org Mgr</td>
<td>7/96</td>
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<tr>
<td>I.D.3.5.b</td>
<td>Approve RFA for QE</td>
<td>DOE COO Mgr</td>
<td>8/96</td>
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<tr>
<td>I.D.3.5.c</td>
<td>Implement RFA for QE</td>
<td>QE Org Mgr</td>
<td>1/97</td>
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<tr>
<td>I.D.3.6.a</td>
<td>Revise RFA # 161 (Support Organizations)</td>
<td>Plant Mgr</td>
<td>5/96</td>
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<td>CAP ID #</td>
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<tr>
<td>I.D.3.6.b</td>
<td>Approve RFA # 161 (Support Organizations)</td>
<td>DOE COO Mgr</td>
<td>6/96</td>
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<tr>
<td>I.D.3.6.c</td>
<td>Implement RFA # 161 (Support Organizations)</td>
<td>Plant Mgr</td>
<td>10/97</td>
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<td>I.D.3.7.a</td>
<td>Revise RFA #163 (BoP)</td>
<td>Plant Mgr</td>
<td>10/96</td>
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<tr>
<td>I.D.3.7.b</td>
<td>Approve RFA #163 (BoP)</td>
<td>DOE COO Mgr</td>
<td>11/96</td>
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<td>I.D.3.7.c</td>
<td>Implement RFA #163 (BoP)</td>
<td>Plant Mgr</td>
<td>12/97</td>
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<tr>
<td>I.D.3.8.a</td>
<td>Revise RFA # 164 (Sitewide)</td>
<td>COO Mgr</td>
<td>3/96</td>
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<tr>
<td>I.D.3.8.b</td>
<td>Approve RFA # 164 (Sitewide)</td>
<td>DOE COO Mgr</td>
<td>4/96</td>
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<tr>
<td>I.D.3.8.c</td>
<td>Implement RFA # 164 (Sitewide)</td>
<td>COO Mgr</td>
<td>12/97</td>
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<tr>
<td>I.D.3.9</td>
<td>Cancel RFA # 85 (superseded by RFA 164)</td>
<td>COO Mgr</td>
<td>3/96</td>
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<td>CAP ID #</td>
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<tr>
<td>I.E</td>
<td>CONOPS Assessments Nuclear Operations has implemented an assessment program in DSO that is performed by the Nuclear Operations Mentors. In addition, a pilot program has been implemented in EUO. This section of the Plan builds on the Lessons Learned from the mentors' program and the EUO pilot to establish a robust assessment program throughout nuclear operations, support, and balance of plant organizations.</td>
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<tr>
<td>I.E.1</td>
<td>CONOPS Assessment Program Standards</td>
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<tr>
<td>I.E.1.a</td>
<td>Develop standards for a site-wide CONOPS assessment program (based on SRS Management Self-Assessment Program, including lessons learned from the DSO and the EUO assessment programs).</td>
<td>Y-12 COO Manager assisted by Nuc Ops Mentors</td>
<td>6/96</td>
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<td>C-1-2 C-3-1 C-2/9204-2E-3 C-2/9204-2E-5</td>
</tr>
<tr>
<td>I.E.1.b</td>
<td>Develop performance indicators (PIs) for measuring COO implementation progress and establish periodicity for evaluating results.</td>
<td>COO Mgr</td>
<td>6/96</td>
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<td>C-3-1 C-2/9204-2E-3 C-2/9204-2E-5</td>
</tr>
<tr>
<td>I.E.1.c</td>
<td>Conduct independent assessment to evaluate the level of COO implementation in NucOps including support organizations.</td>
<td>LMES Performance Evaluation Group (PEG)</td>
<td>11/96</td>
<td></td>
<td>C-3-1 C-2/9204-2E-3 C-2/9204-2E-5</td>
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<tr>
<td>I.E.1.d</td>
<td>94-4 Task 4 Team re-assess COO in conjunction with PEG assessment.</td>
<td>DP-24 94-4 Task 4 Coordinator</td>
<td>11/96</td>
<td></td>
<td>DOE Item</td>
</tr>
<tr>
<td>I.E.1.e</td>
<td>Revise COO CAP based upon the results of the independent assessments.</td>
<td>COO Mgr</td>
<td>1/97</td>
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<td>CAP ID #</td>
<td>Description</td>
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<td>Assessment ID #</td>
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<tr>
<td>I.E.1.f</td>
<td>Conduct site-wide independent assessment to evaluate the level of COO implementation.</td>
<td>Y-12 Quality Systems Manager</td>
<td>2/98</td>
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<td>C-3-1 C-2/9204-2E-3</td>
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<tr>
<td>I.E.1.g</td>
<td>Revise COO CAP based upon the results of the independent assessments.</td>
<td>COO Mgr</td>
<td>3/98</td>
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<tr>
<td>I.E.2</td>
<td><strong>CONOPS Assessment Tools</strong></td>
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<tr>
<td>I.E.2.a</td>
<td>Revise Y60-028 to incorporate assessment requirements for 5480.19 and to incorporate the new Standard.</td>
<td>Quality Organization Mgr.</td>
<td>9/96</td>
<td></td>
<td>C-1-2 C-2/9204-2E-3</td>
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<tr>
<td>I.E.2.b</td>
<td>Develop generic cards or checklists for use during management assessments. As appropriate, assessment should include: - Elements of 5480.19 - Housekeeping - Compliance with CSAs - Facility Condition - Inspection of Locks and tags for proper placement - deficient equipment tags in place - Rad Con Compliance</td>
<td>COO Mgr assisted by SMEs</td>
<td>9/96</td>
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<td>C-2-DUO-7 C-2/9204-2E-5</td>
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<tr>
<td>I.E.3</td>
<td><strong>CONOPS Assessment Training</strong></td>
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<tr>
<td>I.E.3.a</td>
<td>Develop training for revised Y60-028.</td>
<td>Quality Org. Manager assisted by Y-12 Training Manager</td>
<td>12/96</td>
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<tr>
<td>I.E.3.b</td>
<td>Implement training for revised Y60-028 for Organization Managers, Functional managers, Shift Managers, STAs, etc.</td>
<td>Y-12 Trmg Manager assisted by Mentors</td>
<td>3/97</td>
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<td>C-1-2 C-2/9204-2E-5</td>
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<tr>
<td>I.E.3.c</td>
<td>Develop training for line management on performance based assessment techniques</td>
<td>Y-12 Trmg Manager assisted by Mentors</td>
<td>8/96</td>
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<td>C-3-1</td>
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<td>CAP ID #</td>
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<td>Due Date</td>
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<td>Assessment ID #</td>
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<tr>
<td>I.E.3.d</td>
<td>Train nuclear operations and support line management on performance based assessment techniques.</td>
<td>Y-12 Trng Manager assisted by Mentors</td>
<td>10/96</td>
<td></td>
<td>C-3-1</td>
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<td>C-2/DUO-1</td>
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<td>C-2/9204-2E-3</td>
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<td>C-2/9204-2E-5</td>
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<tr>
<td>I.E.4</td>
<td><strong>CONOPS Assessment Implementation</strong></td>
<td></td>
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<tr>
<td>I.E.4.a</td>
<td>Submit assessment plans and schedules for Nuclear Operations and Support Organizations per revised Y60-028.</td>
<td>Y-12 Org Mgrs</td>
<td>5/97</td>
<td></td>
<td>C-1-2</td>
</tr>
<tr>
<td>I.E.4.b</td>
<td>Organizations complete initial conduct of operations assessments in resumed NUCOPS organizations.</td>
<td>Y-12 Org Mgrs</td>
<td>12/96</td>
<td>Based on their resumed status, perform interim assessments in RSS in 4/96 and DUO in 3/96</td>
<td>C-1-2</td>
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<td>C-2/9204-2E-5</td>
</tr>
<tr>
<td>I.E.4.c</td>
<td>Organizations complete initial conduct of operations assessments in non-resumed NUCOPS organizations.</td>
<td>Y-12 Org Mgrs</td>
<td>11/96</td>
<td></td>
<td>C-1-2</td>
</tr>
<tr>
<td>I.E.4.d</td>
<td>Organizations complete initial conduct of operations assessments in support organizations.</td>
<td>Y-12 Org Mgrs</td>
<td>6/97</td>
<td></td>
<td>C-1-2</td>
</tr>
<tr>
<td>I.E.4.e</td>
<td>Organizations complete initial conduct of operations assessments in BOP organizations.</td>
<td>Y-12 Org Mgrs</td>
<td>9/97</td>
<td></td>
<td>C-1-2</td>
</tr>
<tr>
<td>I.E.4.f</td>
<td>Complete an independent assessment of compliance with Y60-028.</td>
<td>Quality Organization Manager</td>
<td>12/97</td>
<td></td>
<td>C-1-2</td>
</tr>
<tr>
<td>I.E.4.g</td>
<td>Revise Y60-028 and guidance based on independent assessment results.</td>
<td>Quality Organization Manager</td>
<td>2/98</td>
<td></td>
<td>C-1-2</td>
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<td>CAP ID #</td>
<td>Description</td>
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<tr>
<td>II.</td>
<td>ADDITIONAL IMPROVEMENT AREAS</td>
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<tr>
<td>II.A</td>
<td>Training Program</td>
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<tr>
<td>II.A.1</td>
<td>Training Program Standards</td>
<td></td>
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</tr>
<tr>
<td>II.A.1.a</td>
<td>Assign/Hire a Y-12 site Training Manager</td>
<td>Deputy Vice President for Defense and Mfg.</td>
<td>3/96</td>
<td></td>
<td>C-2-T&amp;D-1</td>
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<td>C-2-T&amp;D-4</td>
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<td>C-2-T&amp;D-8</td>
</tr>
<tr>
<td>II.A.1.b</td>
<td>Develop and publish a Training Manual that defines sitewide training roles, responsibilities, and standards to supplement Y90 series procedures</td>
<td>Trng Mgr</td>
<td>12/96</td>
<td></td>
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<tr>
<td>II.A.2</td>
<td>Training Program Tools</td>
<td></td>
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</tr>
<tr>
<td>II.A.2.a</td>
<td>Develop/Upgrade Qualification Programs for qualified positions (except EUO) including facility specific training/organization</td>
<td>Trng Mgr assisted by Org. Managers</td>
<td>9/96</td>
<td>TIM, R5 required completion in 12/95. Assessment in progress.</td>
<td></td>
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<tr>
<td>II.A.3</td>
<td>Training Program Training</td>
<td></td>
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<td>CAP ID #</td>
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<td>II.A.4</td>
<td>Training Program Implementation</td>
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<tr>
<td>II.A.4.a</td>
<td>Qualify personnel per TIM, R5</td>
<td>Org Mgrs</td>
<td>12/96</td>
<td>TIM, R5 required completion</td>
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<td></td>
<td>in 12/95. Assessment in progress.</td>
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<tr>
<td>II.A.4.b</td>
<td>Establish a Training Work Group (TWG) to track</td>
<td>Trng Mgr</td>
<td>1/96</td>
<td>Complete</td>
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<tr>
<td></td>
<td>and execute the TIM commitments and enhance</td>
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<td>consistency across the site for training</td>
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<td></td>
<td>implementation</td>
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<tr>
<td>II.A.5</td>
<td>Training Program Assessment</td>
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<tr>
<td>II.A.5.a</td>
<td>Develop and execute training program assessments</td>
<td>Trng Mgr</td>
<td>6/97</td>
<td>Assessments will begin 2/96;</td>
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<tr>
<td></td>
<td>including programmatic and compliance and</td>
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<td>and will be ongoing.</td>
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<td></td>
<td>training effectiveness.</td>
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<tr>
<td>II.A.5.b</td>
<td>Execute adherence based training assessments,</td>
<td>Org Trng Mgrs</td>
<td>6/97</td>
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<td>including student feedback and management</td>
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<td></td>
<td>oversight.</td>
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<tr>
<td>II.B</td>
<td>Drill Program</td>
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<td>II.B.1</td>
<td>Drill Program Standards</td>
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<tr>
<td>II.B.1.a</td>
<td>Hire an experienced Drill Program Manager</td>
<td>Nuc Ops Mgr</td>
<td>11/95</td>
<td>Complete 11/95</td>
<td></td>
</tr>
<tr>
<td>II.B.1.b</td>
<td>Develop a Drill Program Plan for DSO facilities</td>
<td>Drill Program</td>
<td>3/96</td>
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<td></td>
<td>for CY 1996.</td>
<td>Manager</td>
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<tr>
<td>II.B.1.c</td>
<td>Drill Program Procedure for Nuclear Operations</td>
<td>Nuc Ops Procedures Mgr.</td>
<td>4/96</td>
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<td>(per .20a). [NOTE: BoP is covered by Site</td>
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<td></td>
<td>Emergency Preparedness Procedures.]</td>
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<td>CAP ID #</td>
<td>Description</td>
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<td>II.B.2</td>
<td><strong>Drill Program Tools</strong></td>
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<tr>
<td>II.B.2.a</td>
<td>Develop an initial set of Drill Guides for DSO facilities</td>
<td>Drill Prog. Mgr.</td>
<td>2/96</td>
<td>Complete for 3 DSO facilities. This is an ongoing process; guides are developed as necessary to support facility activities.</td>
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<tr>
<td>II.B.2.b</td>
<td>Commence development of Drill Program Tools in remaining Nuclear Operations facilities. Tools may include: guides, a list of the types and categories of drills, drill scenarios, and simulation devices</td>
<td>Org Mgrs</td>
<td>3/97</td>
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<tr>
<td>II.B.3</td>
<td><strong>Drill Program Training</strong></td>
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<tr>
<td>II.B.3.a</td>
<td>Train DSO personnel and DSO drill coordinators on conduct of drills.</td>
<td>Drill Pgm Manager</td>
<td>1/96</td>
<td>Complete</td>
<td></td>
</tr>
<tr>
<td>II.B.3.b</td>
<td>Train remaining Nuc Ops Organization and Facility Drill Coordinators on conduct of drills.</td>
<td>Nuc Ops Trng Mgr</td>
<td>1/97</td>
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<tr>
<td>II.B.3.b</td>
<td>Train Nuc Ops and Support personnel on conduct of drills.</td>
<td>Nuc Ops Trng Mgr</td>
<td>2/97</td>
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<tr>
<td>II.B.4</td>
<td><strong>Drill Program Implementation</strong></td>
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<tr>
<td>II.B.4.a</td>
<td>Commence drills in DSO based on the DSO drill schedule of 2 per week.</td>
<td>DSO Manager</td>
<td>1/96</td>
<td>Complete. Approximately 50 drills have been executed to date.</td>
<td></td>
</tr>
<tr>
<td>II.B.4.a</td>
<td>Commence drills in all Nuc Ops facilities per schedules defined in facility drill programs</td>
<td>Ops Mgrs</td>
<td>5/97</td>
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<tr>
<td>CAP ID #</td>
<td>Description</td>
<td>Responsibility</td>
<td>Due Date</td>
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<td>II.B.5</td>
<td>Drill Program Assessment</td>
<td>Org Mgr assisted by Drill Pgm Manager</td>
<td>1/96</td>
<td>Complete; this is a continuous process that is built into the Drill Program.</td>
<td></td>
</tr>
<tr>
<td>II.B.5.a</td>
<td>Commence observation of the execution of drills in DSO and provide feedback to facility and line managers. Use lessons learned through observation to improve drill guides and other implementation tools.</td>
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<td>II.C</td>
<td>Issues Management</td>
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<tr>
<td>II.C.1</td>
<td>Issues Management Standards</td>
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<tr>
<td>II.C.1.a</td>
<td>Establish an Issues Manager for the Y-12 LMES Organization</td>
<td>Vice President for Defense and Manufacturing</td>
<td>12/95</td>
<td>Complete</td>
<td>C-3-DUO</td>
</tr>
<tr>
<td>II.C.1.b</td>
<td>Establish process to assign responsibility for distribution and follow-up of DOE Monthly Assessment Report with the YSO.</td>
<td>Vice President for Defense and Manufacturing</td>
<td>12/95</td>
<td>Complete</td>
<td>C-3-DUO</td>
</tr>
<tr>
<td>II.C.2</td>
<td>Issues Management Tools</td>
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<tr>
<td>II.C.2.a</td>
<td>Revise LMES Corrective Action Planning procedures to prohibit the development of an action plan as the only action of a CAP task</td>
<td>LMES Corrective Action Planning Manager</td>
<td>3/96</td>
<td></td>
<td>F-2.4-1</td>
</tr>
<tr>
<td>II.C.2.b</td>
<td>Revise the CAP for the DOE RA finding in RSS MG3-2 to comply with the revised LMES Corrective Action Planning procedures.</td>
<td>DSO Manager</td>
<td>1/96</td>
<td>Complete</td>
<td>F-2.4-1</td>
</tr>
<tr>
<td>II.C.2.c</td>
<td>Review/Approve the CAP for the DOE RA finding in RSS MG3-2.</td>
<td>YSO</td>
<td>3/96</td>
<td></td>
<td>F-2.4-1</td>
</tr>
<tr>
<td>CAP ID #</td>
<td>Description</td>
<td>Responsibility</td>
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<tr>
<td>II.C.3</td>
<td>Issues Management Training</td>
<td></td>
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<td>C-1-3</td>
</tr>
<tr>
<td>II.C.3.a</td>
<td>Provide a briefing to Y-12 organization managers that outlines the process for responding to the DOE Monthly Assessment Report and emphasizes the importance of understanding the programmatic issues and addressing the issues with follow-up.</td>
<td>Y-12 Issues Manager</td>
<td>4/96</td>
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</tr>
<tr>
<td>II.C.3.b</td>
<td>Provide a briefing to line and facility managers that outlines the process for responding to the DOE Monthly Assessment Report and emphasizes the importance of understanding the programmatic issues and addressing the issues with follow-up.</td>
<td>Org. Managers</td>
<td>6/96</td>
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<tr>
<td>II.C.4</td>
<td>Issues Management Implementation - No new action</td>
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<tr>
<td>II.C.5</td>
<td>Issues Management Assessment</td>
<td></td>
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<td>C-1-3</td>
</tr>
<tr>
<td>II.C.5.a</td>
<td>Evaluate effectiveness of the corrective action process at Y-12, including the issues prioritization process.</td>
<td>Y-12 Issues Manager</td>
<td>8/96</td>
<td></td>
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</tr>
<tr>
<td>II.C.5.b</td>
<td>Revise corrective action process and procedures as needed based on above assessment.</td>
<td>Y-12 Issues Manager</td>
<td>12/96</td>
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<tr>
<td>CAP ID #</td>
<td>Description</td>
<td>Responsibility</td>
<td>Due Date</td>
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<tr>
<td>II.D</td>
<td>RADIOMATIC CONTROL [Note: This section of the Plan is formatted around the root causes identified for the Rad Con deficiencies.]</td>
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<tr>
<td>II.D.1</td>
<td>Root Cause: Management System; Standards, Policies, or Administrative Controls Not Used.</td>
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</tr>
<tr>
<td>II.D.1.a</td>
<td>Establish and implement general requirements for the use of anti-contamination clothing.</td>
<td>RADCON Mgr</td>
<td>12/95</td>
<td>Completed 12/7/95, implemented via Y70-124 and Y70-122.</td>
<td>C-2/SUPP-2, C-2 QE-5</td>
</tr>
<tr>
<td>II.D.1.b</td>
<td>Develop a Required Reading for the Y-12 Plant that consist of recent plant wide RadCon deficiencies.</td>
<td>RADCON Mgr</td>
<td>02/96</td>
<td></td>
<td>C-2 SUPP-2, C-2 DUO-2</td>
</tr>
<tr>
<td>II.D.1.c</td>
<td>Incorporate RadCon deficiencies II.D.1.b into Radiological Worker II training.</td>
<td>LMES Trng Mgr</td>
<td>06/96</td>
<td></td>
<td>C-2 SUPP-2, C-2 DUO-2</td>
</tr>
<tr>
<td>II.D.1.d</td>
<td>Develop Required Reading for RadCon Department personnel that consists of recent deficiencies in radiological control practices.</td>
<td>RADCON Mgr</td>
<td>02/96</td>
<td></td>
<td>C-2 SUPP-2, C-2 DUO-2, C-2 SUPP-5</td>
</tr>
<tr>
<td>II.D.1.e</td>
<td>Incorporate RadCon deficiencies contained in Required Readings II.D.1.b and II.D.1.d into the Radiological Control Technician (RCT) Continuing Training Program.</td>
<td>RADCON Mgr</td>
<td>03/96</td>
<td></td>
<td>C-2 SUPP-2, C-2 DUO-2, C-2 SUPP-5</td>
</tr>
<tr>
<td>II.D.1.f</td>
<td>Conduct refresher Radiological Worker II training for all radiological workers.</td>
<td>LMES Trng Mgr</td>
<td>12/97</td>
<td></td>
<td>C-2 SUPP-2, C-2 DUO-2</td>
</tr>
<tr>
<td>CAP ID #</td>
<td>Description</td>
<td>Responsibility</td>
<td>Due Date</td>
<td>Status</td>
<td>Assessment ID #</td>
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<tr>
<td>II.D.2</td>
<td>Root Cause: Management System; Standards, Policies, or Administrative Controls (SPAC) Less Than Adequate; No SPAC</td>
<td></td>
<td></td>
<td></td>
<td>C-2 DUO-2</td>
</tr>
<tr>
<td>II.D.2.a</td>
<td>Obtain representative samples of vegetation from outdoor contamination areas and analyze for contamination.</td>
<td>RADCON Mgr</td>
<td>04/96</td>
<td></td>
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</tr>
<tr>
<td>II.D.2.b</td>
<td>Issue appropriate recommendation to line organizations after obtaining sample results.</td>
<td>RADCON Mgr</td>
<td>05/96</td>
<td></td>
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</tr>
<tr>
<td>II.D.2.c</td>
<td>RadCon Manager will make formal presentation to senior management concerning status of uncontained outdoor radioactive storage area. Based on their direction, risks, and available funds, a remediation/mitigation plan will be developed.</td>
<td>RADCON Mgr</td>
<td>07/96</td>
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<tr>
<td>II.D.2.d</td>
<td>Revise and implement procedure Y60-66-RC-600, &quot;Radiological Control Surveillance Program&quot;.</td>
<td>RADCON Mgr</td>
<td>12/95</td>
<td>Completed 12/01/95</td>
<td>C-2 DUO-2, C-2 SUPP-2</td>
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<tr>
<td>II.D.3</td>
<td>Root Cause: Management System; Corrective Action Not Yet Implemented</td>
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<tr>
<td>II.D.3.a</td>
<td>Hire additional Radiological Control Technicians to meet RadCon requirements.</td>
<td>RADCON Mgr</td>
<td>09/96</td>
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<tr>
<td>II.D.3.b</td>
<td>Relocate key managers responsible for oversight of RadCon program implementation to the protected area to improve RadCon/Line Organization interaction.</td>
<td>Deputy Mgr for Health, Safety, Environment &amp; Accountability Org.</td>
<td>06/96</td>
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<td>Due Date</td>
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<td>II.E</td>
<td>Maintenance</td>
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<td>II.E.1</td>
<td>Maintenance Standards - No New Actions</td>
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<td>II.E.2</td>
<td>Maintenance Tools</td>
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<tr>
<td>II.E.2.a</td>
<td>Publish “Guideline to Good Practices for Y-12 Maintenance” for maintenance groups, implementing DOE 4330.4B ch-2, and applicable chapters of DOE 5480.19.</td>
<td>Maintenance Mgr</td>
<td>3/96</td>
<td>draft in review</td>
<td>C-1-DUO-2 C-2-DUO-3 C-2-QE-1</td>
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<tr>
<td>II.E.2.b</td>
<td>Review FMO data to identify additional Performance Indicators needed for implementation of CONOPS. (II.F.2.c)</td>
<td>Maintenance Mgr</td>
<td>7/96</td>
<td></td>
<td></td>
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<tr>
<td>II.E.2.c</td>
<td>Update Maintenance Performance Indicators to include COO elements. (II.F.2.b)</td>
<td>Maintenance Mgr</td>
<td>8/96</td>
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<tr>
<td>II.E.2.d</td>
<td>Revise work control procedures as needed to fully implement Guidelines to Good Practices For Y-12 Maintenance.</td>
<td>Maintenance Mgr</td>
<td>12/96</td>
<td>ongoing</td>
<td>C-1-DUO-2 C-2-DUO-3 C-2-QE-1</td>
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<td>II.E.3</td>
<td>Maintenance Training</td>
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<td>II.E.3.a</td>
<td>Develop lesson plan for each element of “Guidelines to Good Practices for Y-12 Maintenance”.</td>
<td>Maintenance Mgr</td>
<td>6/96</td>
<td>working</td>
<td>C-1-DUO-2 C-2-QE-1</td>
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<td>II.E.3.b</td>
<td>Conduct training on the elements of “Guidelines to Good Practices for Y-12 Maintenance”.</td>
<td>Maintenance Mgr</td>
<td>12/96</td>
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<td>C-1-DUO-2 C-2-DUO-3 C-2-QE-1</td>
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<td>II.E.4.a</td>
<td>Complete the Preventive Maintenance Program improvement project. The project validates PM requirements, eliminating low value maintenance and reducing overdue backlog.</td>
<td>Maintenance Mgr</td>
<td>6/96</td>
<td>ongoing</td>
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<td>II.E.5</td>
<td>Maintenance Assessment</td>
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<tr>
<td>II.E.5.a</td>
<td>Assess the implementation of Guidelines to Good Practices For Y-12 Maintenance to identify areas of noncompliance.</td>
<td>Maintenance Mgr</td>
<td>3/97</td>
<td>C-1-DUO-2</td>
<td>C-2-DUO-3 C-2-QE-1</td>
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<tr>
<td>II.E.5.b</td>
<td>Resolve resulting issues (II.E.5.a)</td>
<td>Maintenance Mgr</td>
<td>Asmnt rpt + 1 month</td>
<td>C-1-DUO-2</td>
<td>C-2-QE-1</td>
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<td>II.F</td>
<td>Occurrence Reporting Program</td>
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<td>II.F.1</td>
<td>Occurrence Reporting Standards</td>
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<td>II.F.1.a</td>
<td>Revise Procedure Y60-161 to include all of the categorization criteria listed in DOE 232.1.</td>
<td>OR Mgr</td>
<td>1/96</td>
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<td>C-1-4</td>
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<tr>
<td>II.F.1.b</td>
<td>Disseminate to the Facility Managers/Designees a memorandum which discusses the importance of reporting through the DOE 232.1 system items which are collectively significant.</td>
<td>OR Mgr</td>
<td>2/96</td>
<td>C-1-4</td>
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<td>II.F.1.c</td>
<td>DOE approve revised procedure Y10-161</td>
<td>YSO</td>
<td>3/96</td>
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<td>F-3.2.2</td>
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<td>II.F.3</td>
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<td>II.F.3.a</td>
<td>Conduct an awareness session for Facility Managers or their designees to the DOE 232.1 Categorization Criteria.</td>
<td>OR Mgr</td>
<td>2/96</td>
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<td>C-1-4</td>
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<td>II.F.4</td>
<td>Occurrence Reporting Implementation - no new action</td>
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<td>II.F.5</td>
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<tr>
<td>II.F.5.a</td>
<td>Conduct a surveillance to assess compliance with procedural categorization requirements of Y60-161.</td>
<td>OR Mgr</td>
<td>7/96</td>
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<td>C-1-4</td>
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<tr>
<td>II.G</td>
<td>Fire Protection</td>
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<tr>
<td>II.G.1</td>
<td>Fire Protection Standards</td>
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<td>II.G.1.a</td>
<td>Develop a procedure for fire extinguisher inspection to be in compliance with NFPA standards.</td>
<td>Fire Chief</td>
<td>3/97</td>
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<td>C-2/SUPP-1</td>
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<tr>
<td>II.G.1.b</td>
<td>Develop and implement command media or procedure to document that fire extinguishers will be controlled at Y-12 through the Fire Protection Program.</td>
<td>Fire Chief</td>
<td>9/96</td>
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<td>C-2/SUPP-1</td>
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<td>II.G.2</td>
<td>Fire Protection Tools</td>
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<td>II.G.2.a</td>
<td>Develop a bar code system into a new fire inspection and maintenance information system for identifying and locating fire extinguishers.</td>
<td>Fire Chief</td>
<td>3/97</td>
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<td>C-2/SUPP-1</td>
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<tr>
<td>1</td>
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<td>Fire Chief</td>
<td>Reserve Reshling Issue (IIH.5'p)</td>
<td>11/98</td>
<td>C-5.2b</td>
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<td>Assess Effectiveness of Monthly Surveillance</td>
<td>12/97</td>
<td>C-5.4</td>
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<td>Fire Protection Implementation</td>
<td>7/97</td>
<td>C-5.6</td>
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<td>3/97</td>
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<td>Fire Protection Training</td>
<td>3/97</td>
<td>C-5.3</td>
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<td>6</td>
<td>2/97</td>
<td>Fire Chief</td>
<td>Fire Protection Training</td>
<td>2/97</td>
<td>C-5.4</td>
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<td>7</td>
<td>9/96</td>
<td>Fire Chief</td>
<td>Fire Protection Training</td>
<td>9/96</td>
<td>C-5.6</td>
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<td>8</td>
<td>2/98</td>
<td>Fire Chief</td>
<td>Develop &amp; Implement Command Media or Building Managers</td>
<td>2/98</td>
<td>C-2.12</td>
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<tr>
<td>9</td>
<td>9/97</td>
<td>Fire Chief</td>
<td>Develop &amp; Implement Command Media or Building Managers</td>
<td>9/97</td>
<td>C-2.12</td>
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</table>

**ID #**

**C2/SNPP-1**

**Description**

- Reserve Reshling Issue (IIH.5'p)
- Assess Effectiveness of Monthly Surveillance
- Fire Protection Assessment
- Fire Protection Implementation
- Fire Protection Training
- Develop & Implement Command Media or Building Managers
<table>
<thead>
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<th>Date</th>
<th>Status</th>
<th>Responsibility</th>
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</thead>
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<tr>
<td>3-1</td>
<td>96/4</td>
<td>Due</td>
<td>Nucops Procedures 102 and Y10-103 on revised procedures Y10-102 and Y10-103. Identify appropriate personnel to receive training.</td>
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<tr>
<td>3-1</td>
<td>96/3</td>
<td>Due</td>
<td>Nucops Procedures 102 and Y10-103. Identify appropriate personnel to receive training.</td>
</tr>
<tr>
<td>3-1</td>
<td>96/1</td>
<td>Due</td>
<td>Nucops Procedures 102 and Y10-103. Identify appropriate personnel to receive training.</td>
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<td>Document Control Tools - no new action</td>
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<td></td>
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<td>Document Control Standards - no new action</td>
</tr>
</tbody>
</table>

**Tasks for II.1**

- **II.1.1**
  - Assessments of CM processes.
  - Develop guidance for performing ongoing assessments of CM processes.
  - Develop a general schedule for the activities.

- **II.1.2**
  - CM Program Team.
  - Develop a general schedule for the activities.

- **II.1.3**
  - CM Program Team.
  - Develop a general schedule for the activities.

- **II.1.4**
  - Nucops Procedures 102 and Y10-103.
  - Identify appropriate personnel to receive training.

**Tasks for II.2**

- **II.2.1**
  - Nucops Procedures 102 and Y10-103.
  - Identify appropriate personnel to receive training.

**Tasks for II.3**

- **II.3.1**
  - Nucops Procedures 102 and Y10-103.
  - Identify appropriate personnel to receive training.

**Tasks for II.4**

- **II.4.1**
  - Nucops Procedures 102 and Y10-103.
  - Identify appropriate personnel to receive training.

**Tasks for II.5**

- **II.5.1**
  - Nucops Procedures 102 and Y10-103.
  - Identify appropriate personnel to receive training.

**Tasks for II.6**

- **II.6.1**
  - Nucops Procedures 102 and Y10-103.
  - Identify appropriate personnel to receive training.

**Tasks for II.7**

- **II.7.1**
  - Nucops Procedures 102 and Y10-103.
  - Identify appropriate personnel to receive training.

**Tasks for II.8**

- **II.8.1**
  - Nucops Procedures 102 and Y10-103.
  - Identify appropriate personnel to receive training.

**Tasks for II.9**

- **II.9.1**
  - Nucops Procedures 102 and Y10-103.
  - Identify appropriate personnel to receive training.
<table>
<thead>
<tr>
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<td>3/98</td>
<td>10/96</td>
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<td>Incorporate assessment elements for document</td>
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</tbody>
</table>

**II.4.1** Evaluate results of ENU Pilot, resolve resulting issues upon the requirements of Y10-189.

**II.4.2** Pilot a document control process in ENU based upon the requirements of Y10-189.

**II.4.3** Implement Y10-189 in remaining Nucops.

**II.4.4** Document Control Implementation

**II.5** Support, balance of plant areas

**II.5.1** Technical Writer

**II.5.2** Support, balance of plant areas

**II.5.3** Incorporate assessment elements for document

**II.5.4** Implement Y10-189 in remaining Nucops.
ACTION FOR FINDING NUMBER - This field provides a correlation between the findings and concerns listed in the Task 4 Report and the planned corrective actions.

STATUS - Status of action

DUE - Due date for action closure

RESPONSIBILITY - Manager who is responsible to complete the action and close it using the Y-12 Corrective Action Management Process.

DESCRIPTION - Description of the action to be taken. Actions should be describable.

KEY TO TASK 4 CAP ELEMENTS
<table>
<thead>
<tr>
<th>Task</th>
<th>Approval and Issue Site CONOPS Manual</th>
<th>Chapter 1: Owner/Tenant Roles &amp; Responsibilities</th>
<th>Chapter 16: Operations Procedures</th>
<th>Chapter 2: Conduct Line Mgr CONOPS Implementation Training for Support Organizations.</th>
<th>Chapter 2.4: Commence Ongoing Training for Nuclear Ops and Support Line Mgrs on principles of COO and COO implementation in their facilities.</th>
<th>Chapter 5.2.3: Transition Ongoing Floor Training implementation to all Y-12 areas to remaining NucOps and support organizations.</th>
<th>Chapter 3.2: Implement RFA #147 (DUO)</th>
<th>Chapter 3.3: Train nuclear operations and support line management on performance based assessment techniques.</th>
<th>Date</th>
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<tbody>
<tr>
<td>I.A.4.b</td>
<td>Vice President for Defense and Mfg.</td>
<td>-</td>
<td>-</td>
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<td>5/96</td>
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<td>I.C.2.c</td>
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<td>Conduct line manager CONOPS implementation training for support organizations.</td>
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<td>9/96</td>
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<td>Commence ongoing training for Nuclear Ops and Support Line Mgrs on principles of COO and COO implementation in their facilities.</td>
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<tr>
<td>96/9</td>
<td>G.2.b</td>
<td>For building managers, monthly visual inspection of fire extinguishers.</td>
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<td>97/9</td>
<td>G.2.a</td>
<td>Develop and implement command media or system for identification of fire extinguishers.</td>
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<tr>
<td>96/9</td>
<td>G.2.a</td>
<td>Develop a bar code system into a new fire protection tool.</td>
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<td>97/9</td>
<td>G.2.a</td>
<td>Develop a procedure for the extinguisher program.</td>
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<td>G.1.b</td>
<td>For fire chief, will be controlled at Y-12 through the fire extinguisher procedure to document that fire extinguishers standards inspection to be in compliance with NFPA.</td>
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<td>Develop a procedure for the extinguisher program.</td>
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<td>Develop and implement command media or system for identification of fire extinguishers.</td>
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<td>Develop a procedure for the extinguisher program.</td>
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"Fire Department records of fire extinguishers are less than adequate." (C-2/Support-1)
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<tr>
<td>11/97</td>
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<td>Resolve remaining issues (11.7, 12.3)</td>
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<td>12/97</td>
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<td>Assess effectiveness of monthly surveillance.</td>
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<td>Fire Protection Assessment</td>
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<td>01/97</td>
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<td>02/97</td>
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<td>Cause scheduled surveillance of fire</td>
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<td>Implement bar code system</td>
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<tr>
<td>03/97</td>
<td></td>
<td>Fire Protection Implementation</td>
</tr>
<tr>
<td>04/97</td>
<td></td>
<td>Monthly visual inspection of the extinguishers</td>
</tr>
<tr>
<td>05/97</td>
<td></td>
<td>Train facility managers on revised procedure for extinguishers</td>
</tr>
<tr>
<td>06/97</td>
<td></td>
<td>Annual maintenance of the extinguishers</td>
</tr>
<tr>
<td>07/97</td>
<td></td>
<td>Train fire personnel on revised procedure for education at Y-12</td>
</tr>
<tr>
<td>08/97</td>
<td></td>
<td>Develop required reading for fire extinguishers</td>
</tr>
<tr>
<td>09/97</td>
<td></td>
<td>Procure necessary equipment (bar code readers)</td>
</tr>
<tr>
<td>10/97</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cycle</td>
<td>Action</td>
<td>Purpose</td>
</tr>
<tr>
<td>-------</td>
<td>--------</td>
<td>---------</td>
</tr>
<tr>
<td>1996/11</td>
<td>Merr</td>
<td>Program Management Activities to Support Organization Training.</td>
</tr>
<tr>
<td>1996/01</td>
<td>Merr</td>
<td>Program Management Activities to Support Organization Training.</td>
</tr>
<tr>
<td>1996/06</td>
<td>Merr</td>
<td>Program Management Activities to Support Organization Training.</td>
</tr>
<tr>
<td>1996/08</td>
<td>Coo</td>
<td>Implementation in their facilities.</td>
</tr>
<tr>
<td>1996/05</td>
<td>Coo</td>
<td>Programs for facility operators and plan.</td>
</tr>
</tbody>
</table>

Di-monthly inventories have not been completed for 924-2E since July 1995. (C-2/924-2E-3)
<table>
<thead>
<tr>
<th>96/01</th>
<th>Y-12 Management</th>
<th>Y-12 Quality Manager</th>
<th>9.E.3.d</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>86/2</td>
<td></td>
<td></td>
<td>9.E.1.f</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>96/11</td>
<td>PEG (Performance</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Evaluation Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>96/6</td>
<td>COO Mentor</td>
<td></td>
<td>9.E.4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>96/6</td>
<td>Y-12 COO Mentor</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>96/8</td>
<td>Managers,</td>
<td></td>
<td>9.C.2.3</td>
</tr>
<tr>
<td></td>
<td>Operations and</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Plant</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>96/6</td>
<td>Time Mentor</td>
<td></td>
<td>9.C.4.1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>E.1.a</td>
<td>Develop standards for a site-wide CONOPS assessment program (based on SRS Management and lessons learned from the DSO and the EUO assessment programs).</td>
<td>E.1.b</td>
<td>Develop performance indicators (PIs) for measuring COO implementation progress and establish periodicity for evaluating results.</td>
</tr>
</tbody>
</table>

**Y-12 COO Manager assisted by Nuc Ops Mentors**

| | 6/96 | | | | | | 9/96 |

**LMES Performance Evaluation Group (PEG)**

| | 6/96 | 11/96 | | | | | |

**COO Mgr. assisted by SMEs**

| | | | | | | | |

The self-assessment program in 9204-2E lacks management participation and is not performance based. (C-2/9204-2E-5)

January 30, 1996 Revision 0
<table>
<thead>
<tr>
<th>Workdate</th>
<th>Work</th>
<th>Maintenance Order</th>
<th>Task Description</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/96</td>
<td>96/9</td>
<td>Maintenance Order</td>
<td>Develop a lesson plan for each element of maintenance for Y-12 guidelines.</td>
<td></td>
</tr>
<tr>
<td>12/96</td>
<td>12</td>
<td>Maintenance Order</td>
<td>Revises work control procedures as needed to maintain Y-12 guidelines.</td>
<td></td>
</tr>
<tr>
<td>3/96</td>
<td>3</td>
<td>Maintenance Order</td>
<td>Publish guidelines for maintenance for maintenance groups, Y-12 guidelines.</td>
<td></td>
</tr>
</tbody>
</table>

There are no Maintenance Procedures in place or scheduled to be developed to support operations or equipment in 9215/9204-2E.

<table>
<thead>
<tr>
<th>Date</th>
<th>Work</th>
<th>Task Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/96</td>
<td>Y-12</td>
<td>Maintenance operation assessments in revised NUREG</td>
</tr>
<tr>
<td>12/96</td>
<td>Y-12</td>
<td>Shif Managers, STS, etc.</td>
</tr>
<tr>
<td>12/96</td>
<td>Y-12</td>
<td>Implement training for revised Y400-028 for maintenance</td>
</tr>
<tr>
<td>9/97</td>
<td>Y-12</td>
<td>Train nuclear operators and support the techniques.</td>
</tr>
<tr>
<td>9/97</td>
<td>Y-12</td>
<td>Management on performance based assessment</td>
</tr>
<tr>
<td>9/97</td>
<td>Y-12</td>
<td>Maintenance and Operations Manager</td>
</tr>
<tr>
<td>9/97</td>
<td></td>
<td>Organizational, functional managers, STS, etc.</td>
</tr>
<tr>
<td>Month</td>
<td>Maintenance Issue</td>
<td>Description</td>
</tr>
<tr>
<td>-------</td>
<td>-------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>96/03</td>
<td>RADCON Mer</td>
<td>Incorporate Radcon deficiencies contained in II.D.1.b into RCT.</td>
</tr>
<tr>
<td>96/05</td>
<td>RADCON Mer</td>
<td>Incorporate Radcon deficiencies into II.D.1.b.</td>
</tr>
<tr>
<td>96/07</td>
<td>LMS Time Mer</td>
<td>Incorporate Radcon deficiencies II.D.1.b into Radcon Worker II training.</td>
</tr>
<tr>
<td>96/09</td>
<td>RADCON Mer</td>
<td>Incorporate Radcon deficiencies II.D.1.b into LMS Time Mer.</td>
</tr>
<tr>
<td>96/11</td>
<td>RADCON Mer</td>
<td>Incorporate Radcon deficiencies into RADCON Mer.</td>
</tr>
<tr>
<td>96/01</td>
<td>Maintenance Mer</td>
<td>Conduct training on the elements of &quot;Guidelines.&quot;</td>
</tr>
<tr>
<td>97/03</td>
<td>Maintenance Mer</td>
<td>Resolve remaining issues (II.E.5.9).</td>
</tr>
<tr>
<td>97/04</td>
<td>Maintenance Mer</td>
<td>Assess the implementation of &quot;Guidelines&quot; to Good Practices for Y-12 Maintenance.</td>
</tr>
<tr>
<td>97/10</td>
<td>Maintenance Mer</td>
<td>Practice for Y-12 Maintenance to identify areas of noncompliance.</td>
</tr>
<tr>
<td>Date</td>
<td>Action</td>
<td>Details</td>
</tr>
<tr>
<td>------</td>
<td>--------</td>
<td>---------</td>
</tr>
<tr>
<td>6/96</td>
<td>ESH Mer</td>
<td>Recalculate key managers responsible for oversight of Radcon line to improve Radcon Line Program's implementation.</td>
</tr>
<tr>
<td>9/96</td>
<td>RADCON Mer</td>
<td>Hire additional Radiological Control Technicians to meet Radcon requirements.</td>
</tr>
<tr>
<td>12/10/95</td>
<td>RADCON Mer</td>
<td>Revise and implement procedure Y60-66-Rc. Program “Radionis. Radiological Control Surveillance.”</td>
</tr>
<tr>
<td>12/95</td>
<td>RADCON Mer</td>
<td>Developed a Radionis. mitigation plan in accordance with guidance on plant characterization, risks, and available facilities.</td>
</tr>
<tr>
<td>6/96</td>
<td>RADCON Mer</td>
<td>Radcon Manager will make formal presentation of Radcon mitigation plan to the Radcon/Line.</td>
</tr>
<tr>
<td>9/96</td>
<td>RADCON Mer</td>
<td>Issue appropriate Radcon recommendation for site contamination.</td>
</tr>
<tr>
<td>9/96</td>
<td>RADCON Mer</td>
<td>Obtain representative samples of vegetation for contamination and analyze for Radcon.</td>
</tr>
<tr>
<td>12/97</td>
<td>LME Time Mer</td>
<td>Conduct Refresher Radiological Worker II training for all Radiological Workers.</td>
</tr>
<tr>
<td>Date</td>
<td>Task Description</td>
<td>Status</td>
</tr>
<tr>
<td>------------</td>
<td>----------------------------------------------------------------------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>12/95</td>
<td>Complete the RADCON Mer. Training for all Radiological Workers</td>
<td></td>
</tr>
<tr>
<td>12/97</td>
<td>RADCON Mer. Training for the RADCON Worker II</td>
<td></td>
</tr>
<tr>
<td>03/96</td>
<td>Incorporate RADCON deficiencies contained in the Radiological Control Program</td>
<td></td>
</tr>
<tr>
<td>02/96</td>
<td>Develop Required Reading for RADCON</td>
<td></td>
</tr>
<tr>
<td>06/96</td>
<td>Incorporate RADCON deficiencies into the Radiological Control Program</td>
<td></td>
</tr>
<tr>
<td>02/96</td>
<td>Develop a Required Reading for the Y-12 Plan</td>
<td></td>
</tr>
<tr>
<td>12/95</td>
<td>Establish and Implement General Requirements for the use of anti-contamination</td>
<td></td>
</tr>
</tbody>
</table>

Many deficiencies were observed in radiological control practices. (C-2/Supp-2)
<table>
<thead>
<tr>
<th>II.D.3.b</th>
<th>Relocate key managers responsible for oversight of RadCon program implementation to the protected area to improve RadCon/Line Organization interaction.</th>
</tr>
</thead>
<tbody>
<tr>
<td>II.A</td>
<td>Training Program</td>
</tr>
<tr>
<td>II.A.1</td>
<td>II.A.1.a</td>
</tr>
<tr>
<td>II.A.1.b</td>
<td>Develop and publish a Training Manual that defines sitewide training roles, responsibilities, and requirements.</td>
</tr>
<tr>
<td>II.A.2</td>
<td>II.A.2.a</td>
</tr>
<tr>
<td>II.A.3</td>
<td>Training Program Training</td>
</tr>
</tbody>
</table>

"Shift manager and shift technical advisor qualification process is not documented." (C-1/T&D-1)
<table>
<thead>
<tr>
<th>Date</th>
<th>Time Merit</th>
<th>Task Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/97</td>
<td></td>
<td>Execute training activities assessments including compliance and training effectiveness.</td>
</tr>
<tr>
<td>6/97</td>
<td>Time Merit</td>
<td>Develop and execute training program.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Training Program Assessment.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Establish a training work group (TWG) to implement.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Enhance consistency across the site for training.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Track and execute the TIM commitments and metrics.</td>
</tr>
<tr>
<td>9/96</td>
<td>Time Merit</td>
<td>Complete.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Analysis Reports.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Minimum staffing per the facility safety for quality.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Nuclor personnel (excluding ENO).</td>
</tr>
<tr>
<td>4/97</td>
<td>Time Merit</td>
<td>Training Organization Training Managers on Program.</td>
</tr>
<tr>
<td>2/97</td>
<td>Time Merit</td>
<td>Brief Nuclear Operators and Support.</td>
</tr>
<tr>
<td>Date</td>
<td>Time Merit</td>
<td>Training Program/Training Management on Training Program</td>
</tr>
<tr>
<td>-------</td>
<td>-----------</td>
<td>---------------------------------------------------------</td>
</tr>
<tr>
<td>4/97</td>
<td></td>
<td>Train Organization Training Managers on Training Program</td>
</tr>
<tr>
<td>2/97</td>
<td></td>
<td>Brief Nuclear Operations and Support Training Program</td>
</tr>
<tr>
<td>9/97</td>
<td></td>
<td>Time Merit assisted by the Training Program</td>
</tr>
</tbody>
</table>

**Training Program/Training Program**

- **II.A.3.b**
  - Training/Regulation
  - Support (including facility-specific training)
  - Qualified positions (non-Nuclear Operations and Support)

- **II.A.3**
  - Develop/Upgrade Qualification Programs for Training/Regulation

- **II.A.2**
  - and Requirements
  - Define specific training roles, responsibilities,
  - Develop and publish a Training Manual that

- **II.A.1.5**
  - and Mile.
  - President of Defense

- **II.A.1**
  - Deputy Vice
  - Mgmt.
  - Assign a site training coordinator or Training

- **II.A.1.4**
  - Standards
  - Training Program Standards

**Personnel serving as shift manager and shift technical advisor are not formally qualified. (C-2/T&O-D-2)**
<table>
<thead>
<tr>
<th>Date</th>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/97</td>
<td>Time MFR</td>
<td>Complete Training Program Assessment</td>
</tr>
<tr>
<td>6/97</td>
<td>Time MFR</td>
<td>Establish a Training Work Group (TWG) to track and execute the TIM commitments and implementation</td>
</tr>
<tr>
<td>1/96</td>
<td>Time MFR</td>
<td>Analyze reports, minimum sharing per the facility Safety Quailty NCOs Prevent (excluding EEO) for Time MFR</td>
</tr>
<tr>
<td>5/96</td>
<td>Time MFR</td>
<td>Execute training activity assessments including compliance and training effectiveness, assessments including programmatic and student feedback and management oversight</td>
</tr>
</tbody>
</table>

II.A.4.8.1: Executive Order
<table>
<thead>
<tr>
<th>Transaction</th>
<th>Time</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ongoing Floor Training</td>
<td>96/6</td>
<td>Responsible for conducting Ongoing Floor Training.</td>
</tr>
<tr>
<td>Ongoing Floor Training</td>
<td>96/6</td>
<td>Develop a standard for the Ongoing Floor Training.</td>
</tr>
<tr>
<td>Ongoing Floor Training</td>
<td>96/4</td>
<td>Manager President for Defense and Mie. Deputy Vice President of Training.</td>
</tr>
</tbody>
</table>

**Note:** Continuing training is not being conducted in accordance with Chapter 12 of the Nuclear Operations Conduct of Operations manual. (C-2/F-2D-1)
<table>
<thead>
<tr>
<th>Date</th>
<th>Action</th>
<th>Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>1997/9</td>
<td>Y-12 Time Mer</td>
<td>Nucleiops and support organization. Implementation to all Y-12 areas to remain in place. Training on the ongoing floor.</td>
</tr>
<tr>
<td>1997/4</td>
<td>Y-12 Time Mer</td>
<td>Train remaining line managers &amp; personnel who are responsible for conducting ongoing floor.</td>
</tr>
<tr>
<td>1996/8</td>
<td>Managers, Operations and Plant</td>
<td>Managers of ongoing teams support COO implementation in their facilities. Support line managers on principles of COO and ongoing floor training.</td>
</tr>
<tr>
<td>1996/6</td>
<td>Y-12 Time Mer</td>
<td>COO implementation in nuclear facilities. Training on the ongoing floor for Nuclear Ops teams.</td>
</tr>
<tr>
<td>1996/4</td>
<td>Deputy Vice President for Defense</td>
<td>Manager assigns site training coordinator or Training on the ongoing floor.</td>
</tr>
</tbody>
</table>

"Training is not effective in helping operations retain important information." (C-2/TED-4)
<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Responsible</th>
<th>Task</th>
<th>Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/97</td>
<td>Y-12 Time</td>
<td>Nucleus and Support Organizations</td>
<td>Transition to all Y-12 areas to remaining</td>
<td>I.C. 5.D.3</td>
</tr>
<tr>
<td>4/97</td>
<td>Y-12 Time</td>
<td>Responsible for conducting Ongoing Floor</td>
<td>Training</td>
<td>I.C. 5.C.2</td>
</tr>
<tr>
<td>8/96</td>
<td>Y-12 Time</td>
<td>Managers, Operations and Plant</td>
<td>COO Implementation in their facilities, Support Line Mfs in principle of COO and</td>
<td>I.C. 5.A.4</td>
</tr>
<tr>
<td>6/96</td>
<td>Y-12 Time</td>
<td>Merger of Nuclear and Operations and Support, Responsible for Implementation of Organize and Training Program that describes roles and</td>
<td>Develop a standard for the Ongoing Floor</td>
<td>I.C. 5.A.3</td>
</tr>
<tr>
<td>4/96</td>
<td>Deputy Vice President for Defense</td>
<td>Manager</td>
<td>Assign a site training coordinator or Training</td>
<td>II. A.1.4</td>
</tr>
</tbody>
</table>

*(C.2/TAD.8)*

"Continuous Training is not being conducted in accordance with the Nuclear Operations Conduct of Operations manual."
<table>
<thead>
<tr>
<th>Date</th>
<th>Action</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>99/7</td>
<td>Conduct a surveillance to assess compliance with procedural categorization requirements of Y60-161</td>
<td>II.P.3.4</td>
</tr>
<tr>
<td>99/2</td>
<td>Conduct an awareness session for facility managers or their designees to the DOE 232.1 mandate</td>
<td>II.P.3.4</td>
</tr>
<tr>
<td>99/2</td>
<td>Items which are collectively significant, a memorandum which discusses the importance of reporting through the DOE 232.1 system</td>
<td>II.P.1.2</td>
</tr>
<tr>
<td>99/1</td>
<td>Review procedure Y60-161 to include all of the facility's managers/designees mandated in DOE 232.1</td>
<td>II.P.1.4</td>
</tr>
<tr>
<td>99/5</td>
<td>Vice President for Defense and Mitigation</td>
<td>I.A.4.4</td>
</tr>
</tbody>
</table>

"Occurrence reporting does not meet DOE Order 5000.3B requirements. (C-1-4)"
<table>
<thead>
<tr>
<th>I.C.3</th>
<th>Prepare operator CONOPS implementation training</th>
<th>9/96</th>
</tr>
</thead>
<tbody>
<tr>
<td>I.C.4.a</td>
<td>Conduct operator CONOPS implementation training for resumed Nuclear operations organizations</td>
<td>Mgr (Y-12 Tmg Mgr)</td>
</tr>
<tr>
<td>I.C.4.b</td>
<td>Conduct operator CONOPS implementation training for non-resumed Nuclear operations organizations</td>
<td>Mgr Mgr</td>
</tr>
<tr>
<td>I.C.4.c</td>
<td>Conduct operator CONOPS implementation training for support organizations</td>
<td>Mgr</td>
</tr>
<tr>
<td>I.C.4.d</td>
<td>Conduct operator CONOPS implementation training for balance of plant organizations</td>
<td>Mgr</td>
</tr>
<tr>
<td>I.C.5.a.1</td>
<td>Conduct an initial awareness training session for Y-12 Organization Managers that emphasizes senior management's expectations for conduct of operations</td>
<td>Deity V.P. for Defense &amp; Mfg.</td>
</tr>
<tr>
<td>I.C.5.a.2</td>
<td>Develop a Y-12 manager (supervisor) training program geared to COO responsibilities, rigor &amp; formality, attention to issues, manager involvement, goals &amp; motivations, and unity &amp; communication</td>
<td>Tmg Mgr assisted by PEG &amp; Mentors</td>
</tr>
<tr>
<td>I.C.5.a.4</td>
<td>Commence ongoing training for Nuclear Ops and COO implementation in their facilities.</td>
<td></td>
</tr>
<tr>
<td>-----------</td>
<td>--------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>I.E.1.a</td>
<td>Develop standards for a site-wide CONOPS assessment program (based on SRS Management Self-Assessment Program, including lessons learned from the DSO and the EUO assessment programs).</td>
<td></td>
</tr>
<tr>
<td>I.E.1.b</td>
<td>Develop performance indicators (PIs) for measuring COO implementation progress and establish periodicity for evaluating results.</td>
<td></td>
</tr>
<tr>
<td>I.E.1.c</td>
<td>Conduct independent assessment to evaluate the level of COO implementation including support organizations.</td>
<td></td>
</tr>
<tr>
<td>I.E.1.f</td>
<td>Conduct site-wide independent assessment to evaluate the level of COO implementation.</td>
<td></td>
</tr>
<tr>
<td>I.E.3.c</td>
<td>Develop training for line management on performance based assessment techniques.</td>
<td></td>
</tr>
<tr>
<td>I.E.3.d</td>
<td>Train nuclear operations and support line management on performance based assessment techniques.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Y-12 Nuclear Operations and Plant Managers</th>
<th>Y-12 COO Manager assisted by Nuc Ops Mentors</th>
<th>COO Mgr</th>
<th>LMES Performance Evaluation Group (PEG)</th>
<th>Y-12 Ouality Systems Manager</th>
<th>Y-12 Trng Manager assisted by Mentors</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>After completion of all organization applicability matrices</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/96</td>
</tr>
<tr>
<td>II.1.2.a</td>
</tr>
<tr>
<td>II.1.3.a</td>
</tr>
<tr>
<td>II.1.3.b</td>
</tr>
<tr>
<td>II.1.4.a</td>
</tr>
<tr>
<td>II.1.4.b</td>
</tr>
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<table>
<thead>
<tr>
<th>NuCorPs Procedures Mgr</th>
<th>NuCorPs Procedures Mgr</th>
<th>NuCorPs Procedures Mgr</th>
<th>NuCorPs Procedures Mgr</th>
<th>COO Mgr</th>
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</table>
| Matrices applicable | Managers Operations and Plant | COO Implemenation in their Facilties | Support Line Managers on principals of COO and Operations

<table>
<thead>
<tr>
<th>Event</th>
<th>Task</th>
<th>Task</th>
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</thead>
<tbody>
<tr>
<td>96/8</td>
<td>MER Manager Program</td>
<td>Conduct Operator CONOPS Implementation</td>
</tr>
<tr>
<td>97/6</td>
<td>MER Manager Program</td>
<td>Training for balance of plant organizations</td>
</tr>
<tr>
<td>96/11</td>
<td>MER Manager Program</td>
<td>Conduct Operator CONOPS Implementation</td>
</tr>
<tr>
<td>97/6</td>
<td>MER Manager Program</td>
<td>Training for balance of plant organizations</td>
</tr>
<tr>
<td>97/3</td>
<td>Defense and MER</td>
<td>Conduct Line Manager CONOPS Implementation</td>
</tr>
<tr>
<td>96/9</td>
<td>MER Manager Program</td>
<td>Conduct Line Manager CONOPS Implementation</td>
</tr>
<tr>
<td>96/9</td>
<td>Defense and MER</td>
<td>Conduct Line Manager CONOPS Implementation</td>
</tr>
<tr>
<td>96/5</td>
<td>Vice President for</td>
<td>Approve and Issue Site CONOPS Manual</td>
</tr>
<tr>
<td>96/5</td>
<td>Site CONOPS Manual</td>
<td></td>
</tr>
<tr>
<td>96/3</td>
<td>COO MER</td>
<td></td>
</tr>
<tr>
<td>96/3</td>
<td>Site CONOPS Manual</td>
<td>Conduct of Operations performance for Support Group personnel not assigned to Nuclear Operations is deficient</td>
</tr>
<tr>
<td>I.A.1.a</td>
<td>Site: Submit Site CONOPS Applicability Matrix to DOE</td>
<td></td>
</tr>
<tr>
<td>---------</td>
<td>---------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>I.A.1.b</td>
<td>DSO / DUO (resumed): Submit CONOPS Applicability Matrix to DOE</td>
<td></td>
</tr>
<tr>
<td>I.A.1.c</td>
<td>EIO (non-resumed): Submit CONOPS Applicability Matrix to DOE</td>
<td></td>
</tr>
<tr>
<td>I.A.1.d</td>
<td>Support: Submit CONOPS Applicability Matrix to DOE</td>
<td></td>
</tr>
<tr>
<td>I.A.1.e</td>
<td>Balance of Plant: Submit CONOPS Applicability Matrix to DOE</td>
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<table>
<thead>
<tr>
<th>Site:</th>
<th>COO Mgr</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draft in review</td>
<td>2/96</td>
</tr>
<tr>
<td>Resumed Mgr</td>
<td>3/96</td>
</tr>
<tr>
<td>Non-Resumed Mgr</td>
<td>3/96</td>
</tr>
<tr>
<td>Plant Mgr</td>
<td>6/96</td>
</tr>
</tbody>
</table>

“The Plant Conduct of Operations Matrices of Applicability and Implementation Plan has not yet been developed as required by DOE Order 5480.19.” (C-1-1)
<table>
<thead>
<tr>
<th>Program</th>
<th>96/9</th>
<th>Y-12 COO Manager</th>
<th>Memons assisted by Nuc Ops program</th>
<th>I.E.1.3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Self-assessment program, including lessons learned from the DSM and the ENU assessment program based on SRS Management assessment program (based on SRS-wide CONOPS standards for a site-wide CONOPS).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>96/5</td>
<td>Vice President for Defense and MPI</td>
<td>Approve and Issue Site CONOPS Manual</td>
<td>I.A.4.6</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>96/6</td>
<td>COO Manager</td>
<td>Issue a Draft Site CONOPS Manual for Review</td>
<td>I.A.4.6</td>
</tr>
</tbody>
</table>

(Ref: Assessment Program (N60-28) requirements and DOE Order 5480.19 (C-1-2). Line management is not conducting routine conduct of Operations Assessments as required by the Y-12 Plant Management Program.)

<table>
<thead>
<tr>
<th>Chapter 2: Shift Routines</th>
<th>965</th>
<th>Vice President for Defense and MPI</th>
<th>Approve and Issue Site CONOPS Manual</th>
<th>I.A.4.6</th>
</tr>
</thead>
</table>

(The Nuclear Operations Conduct of Operations Manual chapter on rounds does not incorporate the requirements to inspect for correct placement of tags and locks. (C-1-5).)
<table>
<thead>
<tr>
<th>Code</th>
<th>Date</th>
<th>Description</th>
<th>Sheet 1 E.3.b</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/96</td>
<td>5/97</td>
<td>Operations assessment in revised NUCOPS.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Support assessment plans and schedules for Nuclear Operations and Support</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Organizations, shift managers, STAS, etc.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Implement training for revised Y60-028 for V-12 Time Manager</td>
<td></td>
</tr>
<tr>
<td>96/6</td>
<td></td>
<td>Red Con Compliance</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- deficiency equipment tags in place</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Inspection of locks and tags for proper</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Facility Condition</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Compliance with CSAS</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Housekeeping</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Elements of 7480.19</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Appropriate assessment should include:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Develop generic cards or checklists for use</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>New Standard</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Requirement for 7480.19 and to incorporate the</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Quality Organization</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Revise Y60-028 to incorporate assessment</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td>Signature</td>
<td>Task Description</td>
<td></td>
</tr>
<tr>
<td>--------</td>
<td>-----------</td>
<td>------------------</td>
<td></td>
</tr>
<tr>
<td>9/6</td>
<td>COO Merit</td>
<td>Define performance indicators (PIs) for the site.</td>
<td></td>
</tr>
<tr>
<td>9/7</td>
<td>COO Merit</td>
<td>Obtain and review examples of CONOPS.</td>
<td></td>
</tr>
<tr>
<td>9/6</td>
<td>Vice President for Defense and MFE</td>
<td>Approve and issue site CONOPS Manual.</td>
<td></td>
</tr>
<tr>
<td>2/98</td>
<td>Quality Manager</td>
<td>Independent assessment results.</td>
<td></td>
</tr>
<tr>
<td>2/97</td>
<td>Quality Manager</td>
<td>Review Y60-028 and build evidence based on.</td>
<td></td>
</tr>
<tr>
<td>9/97</td>
<td>Y-12 M&amp;E</td>
<td>Betancourt compliance with Y60-028.</td>
<td></td>
</tr>
<tr>
<td>9/97</td>
<td>Y-12 M&amp;E</td>
<td>Complete an independent assessment of.</td>
<td></td>
</tr>
<tr>
<td>9/97</td>
<td>Y-12 M&amp;E</td>
<td>Operations assessments in BOP Organizations.</td>
<td></td>
</tr>
<tr>
<td>11/96</td>
<td>Y-12 M&amp;E</td>
<td>Operations assessments in support of organizations.</td>
<td></td>
</tr>
<tr>
<td>11/96</td>
<td>Y-12 M&amp;E</td>
<td>Operations assessments in non-ResNWC CONOPS.</td>
<td></td>
</tr>
</tbody>
</table>

Currently being maintained (C-1-8).

Performance goals as required by DOE Order 5480.19 and the Nuclear Operations Conduct of Operations Manual are not.
### A-27

<table>
<thead>
<tr>
<th>Chapter 9</th>
<th>Lockout/Tagout</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chapter 2</td>
<td>Shift Routines</td>
</tr>
</tbody>
</table>

**Responsibilities**

<table>
<thead>
<tr>
<th>Chapter 1</th>
<th>Owner/Tenant Roles &amp; Defense and MRE.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vice President for Approval and Issue Site CONOPS Manual.</td>
<td></td>
</tr>
</tbody>
</table>

5/96

---

**The Lockout/Tagout System in Building 9720-5 is not periodically inspected as required by DOE Order 5480.19, Chapter IX.**

---

**(C-2/9720-5.1)**

---

**(C-2/DUN-6)**

---

**Housing/Building in 9201-5 has deteriorated to the point that personal making rounds were insensitive to safety concerns.**

---

<table>
<thead>
<tr>
<th>Chapter 2</th>
<th>Shift Routines</th>
</tr>
</thead>
</table>

**Responsibilities**

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Vice President for Approval and Issue Site CONOPS Manual.</td>
<td></td>
</tr>
</tbody>
</table>

5/96

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**Organizations**

<table>
<thead>
<tr>
<th>MeF</th>
<th>Mentor Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/96</td>
<td>Conduct Line manager CONOPS Implementation for Resumed Nuclear Operations Training.</td>
</tr>
<tr>
<td>Maintenance Area</td>
<td>Action</td>
</tr>
<tr>
<td>------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Maintenance 12</td>
<td>Assess implementation of good maintenance procedures for Y-12 maintenance</td>
</tr>
<tr>
<td>Maintenance 12</td>
<td>Conduct training on the elements of “Guidelines for Good Practices for Y-12 Maintenance”</td>
</tr>
<tr>
<td>Maintenance 12</td>
<td>Develop lesson plan for each element of “Guidelines for Good Practices for Y-12 Maintenance”</td>
</tr>
<tr>
<td>Maintenance 12</td>
<td>Revisit work control procedures as needed to fully implement guidelines for good practices for Y-12 maintenance</td>
</tr>
<tr>
<td>Maintenance 12</td>
<td>Chapter I: Owner/Tenant Roles</td>
</tr>
<tr>
<td>Maintenance 12</td>
<td>Approve and issue CONOPS Manual</td>
</tr>
</tbody>
</table>

*Some electrical controller doors are not routinely transferred after maintenance.” (C-2/DUO-3)
<table>
<thead>
<tr>
<th>I.A.4.b</th>
<th>Approve and Issue CONOPS Manual.</th>
<th>Vice President for Defense and Mfg.</th>
<th>5/96</th>
</tr>
</thead>
<tbody>
<tr>
<td>I.B.3</td>
<td>Chapter 1, Owner/Tenant Roles &amp; Responsibilities</td>
<td>Plant Mgr</td>
<td>8/96</td>
</tr>
<tr>
<td>I.C.2.a</td>
<td>Assign Operations and area coordinators for each Zone/Facility.</td>
<td>NucOps Mgr</td>
<td>8/96</td>
</tr>
<tr>
<td></td>
<td>Conduct line manager CONOPS implementation training for resumed Nuclear operations organizations.</td>
<td>Mentors Program Mgr</td>
<td></td>
</tr>
</tbody>
</table>

"Material conditions in the equipment spaces of 9998 and on the roof of 9998 were poor."

"Daily round sheets were not reviewed weekly as required." (C-2/DUO-5)
<table>
<thead>
<tr>
<th></th>
<th>I.C.4.a</th>
<th>I.A.4.b</th>
<th>Chapter 1: Owner/Tenant Roles &amp; Responsibilities</th>
<th>Chapter 4: Communications</th>
<th>Vice President for Defense and Mfg.</th>
</tr>
</thead>
</table>

"The public address system is not used effectively." (C-27/EUTO-1)
<table>
<thead>
<tr>
<th>No.</th>
<th>Merit</th>
<th>Memoirs Program</th>
<th>In-Service Training for Non-Restored Nuclear Operations</th>
<th>CONOPS Implementation</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>96/6</td>
<td>Merit</td>
<td>Memoirs Program</td>
<td>In-Service Training for Non-Restored Nuclear Operations</td>
<td>CONOPS Implementation</td>
<td>1.C.2.6</td>
</tr>
<tr>
<td>96/8</td>
<td>Merit</td>
<td>Memoirs Program</td>
<td>In-Service Training for Non-Restored Nuclear Operations</td>
<td>CONOPS Implementation</td>
<td>1.C.2.4</td>
</tr>
<tr>
<td>96/5</td>
<td>Vice President for Defence and M.I.F.E.</td>
<td>Memoirs Program</td>
<td>Approve and Issue the CONOPS Manual</td>
<td></td>
<td>1.A.4.b</td>
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</table>

Voice communications are informal and not precise. (C-2/EUTO-2)
<table>
<thead>
<tr>
<th>Date</th>
<th>Memo or Program</th>
<th>Description</th>
<th>Section</th>
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<tbody>
<tr>
<td>96/11</td>
<td>MER Memorists Program</td>
<td>Training for support organizations. Conduct operator CONOPS implementation.</td>
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<td>96/01</td>
<td>MER Memorists Program</td>
<td>Training for resumed Nuclear operations. Conduct operator CONOPS implementation.</td>
<td>1.C.4.b</td>
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<td>1.C.4.a</td>
</tr>
<tr>
<td>96/96</td>
<td>MER Memorists Program</td>
<td>Training for support organizations. Conduct line manager CONOPS implementation.</td>
<td>1.C.2.c</td>
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<td>Chapter 9</td>
<td>Lockout / Tagout</td>
</tr>
<tr>
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<td>--------------------------------</td>
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<td>-----------------</td>
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<tr>
<td>I.C.2.b</td>
<td>Conduct line manager CONOPS implementation training for non-resumed Nuclear operations</td>
<td>Mgr.</td>
<td>Mentor Program Mgr.</td>
</tr>
<tr>
<td>I.C.4.c</td>
<td>Conduct operator CONOPS implementation training for support organizations.</td>
<td>Mentor Program Mgr.</td>
<td></td>
</tr>
</tbody>
</table>

"The Y-12 LOTO Program does not meet today's DOE-wide practice in that appropriate verification is not required."

"Locking devices used in one lockout/tagout were improperly installed." (C-2/LOTO-1)

<table>
<thead>
<tr>
<th>I.A.4.b</th>
<th>Approve and Issue CONOPS Manual.</th>
<th>Chapter 10</th>
<th>Independent verification</th>
<th>Vice President for Defense and Mfg.</th>
<th>5/96</th>
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