



Integrated Support Center  
Chicago Office

**Annual Performance Plan**

Fiscal Year 2009

A handwritten signature in black ink, appearing to read "Roxanne E. Purucker".

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Roxanne E. Purucker, Manager  
Office of Science – Chicago Office

10-10-08

Date

SC-CH Revision History

**TITLE:** Annual Performance Plan

**POINT OF CONTACT:** Barbara Clouse, IMS

**SCMS MANAGEMENT SYSTEM:** [Quality Assurance and Oversight](#)

**TO BE UPDATED:** Annually

REVISION	DATE	REASON/DRIVER	DESCRIPTION
0	Sep 07	<a href="#">Memo from G. Malosh, DDFO, dated July 17, 2007</a>	Essential element of the SC integrated approach for performance and accountability in all aspects of SC operations reporting to the DDFO
1	Oct 08	<a href="#">Quality Assurance and Oversight</a> SCMS Management System, as required by <a href="#">DOE O 226.1A</a> , Implementation of Department of Energy Oversight Policy	Annual Update

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## Office of Science – Chicago Office Integrated Support Center Fiscal Year 2009 Annual Performance Plan

### Introduction

Managing the Science Enterprise

*Innovation and research are unpredictable.*

*Managing the science enterprise must be precise, safe, law-abiding and predictable.*

For the past few decades the Department of Energy (DOE) Office of Science (SC) has charted the course for many basic and applied research programs carried out at its national laboratories and all of the nation's research universities by creating research programs to help realize the national research agenda.

The Office of Science – Chicago Office (SC-CH) aids in advancing and managing science by providing business services that serve to fund and facilitate research, to make experiments safer, to protect the environment and to safeguard the taxpayer's investment in science.

Together with the Oak Ridge Office, SC-CH comprises the Integrated Support Center (ISC), providing business and technical services necessary to support the science Americans have come to expect.

### **Background: Building on Our History and Traditions to Advance the Science Mission**

For more than 60 years, SC-CH has provided support to the nation's science and technology missions. During those six decades Chicago supported:

- the growth of nuclear technology from the Manhattan Project through the design and development of commercial nuclear power;
- management and operation of National Laboratories as the research and development engines of progress in science and technology;
- management of thousands of contracts and grants funding individual researchers at the majority of the nation's research universities; and
- projects ranging from the construction of particle accelerators to energy efficiency and renewable energy demonstrations.

Over this period, Chicago built on its expertise and experience to create a versatile team of highly qualified technical and business management experts. Today, Chicago is responsible for almost \$3.3 billion of DOE research, development, and other activities involving almost every Departmental program in all 50 states, Puerto Rico, the Virgin Islands, and 30 foreign countries. SC is the largest funding program in this mix, with Chicago responsible for \$2.6 billion, 65% of the SC total, or about 80% of the funds Chicago manages.

### **Providing Integrated Support to the Office of Science**

Though separated by 544 miles, the Chicago and Oak Ridge Offices comprise a successful virtual organization called the Integrated Support Center. The ISC supports the SC mission to safely foster, formulate, and support SC's seven research programs:

- Advanced Scientific Computing Research

- Basic Energy Sciences
- Biological and Environmental Research
- Fusion Energy Sciences
- High Energy Physics
- Nuclear Physics
- Workforce Development for Teachers and Scientists

Chicago and Oak Ridge provide safety, business, technical, and administrative support to the SC complex, other DOE program offices, and, as appropriate, other federal agencies. We do this by bringing together contract specialists and accountants and real estate specialists and environmental engineers (and many others) to prepare management and operating contracts for organizations like the national laboratories and the new Bioenergy Research Centers. We forge teams of quality assurance specialists and nuclear and fire safety professionals to protect the workers, the public and the environment. We combine the skills of patent attorneys, auditors, and budget, cyber security and real property analysts to ensure that America's investment in science is protected and managed according to the highest standards.

### **Service Plan**

The ISC Service Plan describes services or functions provided by Oak Ridge and Chicago throughout the SC organization; i.e. the Chicago Office provides communications support (and many other types) to SC's Argonne Site Office while the Oak Ridge Office provides communications support (and many other types) to DOE-SC's Thomas Jefferson Site Office.

The SC Site Offices include:

- Ames Site Office
- Argonne Site Office
- Berkeley Site Office
- Brookhaven Site Office
- Fermi Site Office
- Oak Ridge Site Office
- Pacific Northwest Site Office
- Princeton Site Office
- Thomas Jefferson Site Office
- Stanford Site Office

This Plan is periodically adjusted to reflect changing needs of the Site Offices (SO) and to make the most effective use of the resources and capabilities the ISC partners bring to the support of DOE mission accomplishment. The Chicago and Oak Ridge Managers directly report to SC's Deputy Director for Field Operations (DDFO) who, in turn, reports to the Director of the Office of Science.

### **This Year—Deliver Excellent Service**

This year we will continue to deliver the services all of our customers have come to expect – always seeking to improve.

### **This Year – Perfect the Office of Science Management System (SCMS)**

We have built a solid base, but there is some work ahead. We are focused on improving an already-healthy relationship with our partners in Oak Ridge. The blueprint for this is the SCMS.

SCMS is a common set of processes and practices to be utilized by all SC employees. However, SCMS is only the beginning; we are forging better relationships throughout the ISC and the Site Offices to ensure that the science enterprise receives only the best management services.

### **This Year – Initiate Work toward ISO Certification**

We have put together a team to start laying the ground work for ISO certification. We have already made great strides in professionalizing the way we do business, i.e., SCMS, the Technical Qualifications Program, ongoing employee development. We have established a goal to bring these together to systematize and certify the quality of the work we do.

### **This Year – Specific Goals, Objectives and Measures**

The specifics for how we will accomplish all of this and a more detailed description of what we are planning for Fiscal Year 2009 are contained in this Annual Performance Plan (APP). For the Chicago Office there are 8 SC-CH goals and 33 objectives, with specific measures and targets for each objective. This APP also contains the 13 joint ISC goals and 21 measures and targets developed by Oak Ridge and Chicago management working together to ensure the science enterprise is precise, safe, law-abiding and predictable.

In addition, this plan includes the SC DDFO organization's Goals and Objectives for FY 2009. This gives employees of the ISC a detailed insight into the priorities the Office of Science has established so we can all support a unified set of goals. Similarly, this APP describes our plans to effectively contribute toward those goals.

#### **Mission Statement**

The Office of Science - Chicago Office (SC-CH) is a critical element of the Office of Science (SC) program execution and implementation capability. SC-CH is the provider of essential business and technical support to assigned SC Site Offices, other Headquarters program sponsors and other federal agencies. SC-CH facilitates the delivery of remarkable discoveries, advancing technology and the understanding of energy and matter which perpetuates the well-being of the United States.

**Message to Chicago Office Staff**

*As the fiscal year closes, we set aside time each year to examine what we plan to accomplish in the next year. Part of Chicago's success can be attributed to our history of planning for the future and setting aggressive goals. For the past two years, the Annual Plan has been required, but even if this were not the case, we would, as we have done in the past many years, take the time to evaluate our progress and establish new goals. Our annual planning process uses a balanced approach, considering the four broad areas of: 1) our mission work; 2) resources including people, training and development, financial, and technology; 3) customer service excellence; and 4) continuous improvement. Our goals are shared to a large degree with Oak Ridge, our service partner. They link directly to the five high-level goals set by the Office of Science Deputy Director for Field Operations. In the following weeks, this linkage will be complete as you and your supervisor develop your individual performance plans to this Plan.*

*We have set very aggressive goals for the upcoming year. By the end of the calendar year we will achieve implementation of the Science Management System (SCMS) and move into the maintenance and improvement phase. We are embarking on an ambitious and very exciting goal with our Oak Ridge partners to achieve ISO 9001 certification for the ISC. We will expand the processes used here at Chicago for a number of years to implement a robust workforce planning and analysis process across SC. We will fully establish the Technical Qualification Program and continue to successfully maintain excellence in our work across all disciplines. As you read this Plan, you can see the work you do every day, and understand what an important contribution you are making to our nation's science enterprise. We plan to continue to build on our achievements because of your expertise and dedicated service as we look forward to Fiscal Year 2009.*

**Roxanne Purucker, Manager**

**Office Priorities/Goals/Objectives/Measures**

This APP provides the framework for our organization's (Attachment 1 - Organization Chart) efforts to achieve best-in-class services for our customers in support of the Department's and SC's strategic plans and priorities, the DDFO's FY 2009 Performance Goals and Objectives, and in alignment with our 2006-2010 Strategic Plan issued in May 2006. ISC goals/objectives/measures are jointly developed with Oak Ridge and a collaborative effort is led by the Manager, with input and discussion by Chicago managers and staff, to establish SC-CH annual goals and objectives. These goals and objectives, in turn, flow down to Chicago management and staff performance standards. The balanced approach to development of the APP goals, as part of Chicago's overall Strategic Management System, begins with four Primary Objective Categories: Resources (human capital such as workforce planning, training and development, financial, technology); Mission (products and services); Customer Service (internal and external such as HQ, site offices, program sponsors, grantees); and Continuous Improvement (such as SCMS, ISO 9001 certification). Goals and objectives are developed to align short-term actions with long-term strategy, while considering needs across the four categories to ensure comprehensive and balanced efforts.

Throughout the year, we evaluate progress on implementing the performance plan goals and objectives and adjust course as necessary to achieve our goals. Progress is tracked in the Management Decision Support System (MDSS). This system is available at <https://chip.ch.doe.gov/mdss/>. (A user ID and password are required; contact the Chicago Office Help Desk ([DOE-CHHelpDesk@ch.doe.gov](mailto:DOE-CHHelpDesk@ch.doe.gov) or 630-252-2772) for assistance.)

Annually, we evaluate our performance and report the results to the SC DDFO in an Annual Assessment Report (AAR). This report provides an assessment of Chicago's performance against the objectives outlined in the APP, including noteworthy accomplishments, results, challenges, and any concerns which would impact future performance. It also documents support provided on SC initiatives, participation in the implementation of SCMS, and other support provided to SC during the fiscal year.

**1. DDFO FY 2009 Objectives**

The five DDFO goals and objectives are listed below with associated ISC objectives and ISC and SC-CH measures and targets:

Note: \*Denotes Joint SC-CH and SC-OR Objectives and Measures

**DDFO Goal 1: Improve our Operation**

Objective	Measure	Target	Owner
DDFO-1.a Complete implementation of SCMS by 12/31/08: Actively support the implementation and maintenance of SCMS*	DDFO-1.a.1. Time limit for conducting a pilot test, using SCMS Requirements Management Procedures*	10/31/08	STI
	DDFO-1.a.2. Time limit for training Primary and Secondary Management System Owners (MSOs/SMSOs) in requirements management responsibilities*	12/15/08	STI
	DDFO-1.a.3. Time limit for establishment of Subject Matter Expert Lists for SC requirements*	12/15/08	STI
	DDFO-1.a.4. Conduct of a pilot test of the adequacy and ease of use of specific procedures in the Benefits/Quality of Work Life Subject Area of the HR Services Management System (by 03/31/09)*	At least 80% of respondents found the procedures adequate and user-friendly	HRS
	DDFO-1.a.5. Percentage of Management Systems reviewed and updated annually*	100%	MSOs/ SMSOs
DDFO-1.b. Transfer ownership of select Management Systems/Subject Areas to SC HQ elements and complete any necessary revision to SCMS	DDFO-1.b.1. Time limit for publishing initial SCMS documentation (new material – not revisions)*	12/31/08	MSOs/ SMSOs
DDFO-1.c. Improve selected areas - Human Resources... Develop a consistent ISC approach to personnel management*	DDFO-1.c.1. Joint reminder/call memos to the SC Site Offices issued by SC-CH and SC-OR human resource (HR) organizations*	Written communication that is consistent in approach	HRS
- Budget/Finance... Develop a consistent ISC	DDFO-1.c.2. Time limit for conducting self-assessment of	01/31/09	CR

Objective	Measure	Target	Owner
approach to field budget formulation and financial management*	implementation of SCMS <b>Budget and Financial Management</b> procedures*		
	DDFO-1.c.2. Time limit for soliciting customer service feedback from Site Office, SC, and DOE Chief Financial Officer (CFO)*	03/31/09	CR
	DDFO-1.c.4. Time limit for developing action plan to implement improvement changes to SCMS based on self-assessment and customer service feedback *	06/30/09	CR
DDFO-1.d. Update SC-3 Staffing Analysis: Facilitate FY 2009 DDFO annual review of staffing levels to align human capital planning with budget formulation *	DDFO-1.d.1. Validation of results of FY 2009 Workforce Management Plans with Heads of SC-CH Elements and Site Office Managers to determine FY 2010/2011 staffing requirements (by 12/31/08)*	Adjustments made to previously identified FY 2010/2011 staffing requirements	HRS
	DDFO-1.d.2. Staffing data provided to SC-CH and Site Office Managers in preparation for DDFO meeting to develop FY 2010/2011 staffing targets for incorporation in budget planning (by 01/30/09)*	Managers have updated staffing data for development of FY 2010/2011 staffing targets	HRS
DDFO-1.e. Create and fund a staff development and succession planning program: Utilize existing recruitment and retention flexibilities to strengthen succession management *	DDFO-1.e.1. Number of FY 2009 vacancies filled through recruitment from targeted local colleges or universities by 09/30/09*	At least 1	HRS
	DDFO-1.e.2: Number of FY 2009 vacancies filled through recruitment from local or state vocational Rehabilitation Agencies or the Department of Veterans Affairs by 09/30/09*	At least 1	HRS
	DDFO-1.e.3: Number of recruitment, relocation or retention incentives (including student loan repayment) utilized to attract or retain employees for hard-to-fill mission-critical positions by 09/30/09*	At least 2	HRS

Objective	Measure	Target	Owner
DDFO-1.f. Prepare for SC wide ISO 9001 Certification by piloting this activity through Certification of the ISC: <b>Seek ISO 9001 Certification*</b>	DDFO-1.f.1. Time limit for approval of SC-CH ISO Implementation Project team charter team, including appointment of members	12/15/08	STI
	DDFO-1.f.2. Time limit for issuance of initial ISO Implementation Project Plan/Schedule	03/15/09	STI
	DDFO-1.f.3. Time limit for identifying/selecting ISO Registrar	06/30/09	STI
DDFO-1.g. Reduce the SC-3 cost of doing business	DDFO-1.g.1. Number of Telecommunications-related initiatives (such as unnecessary device removal, printer consolidation, and power management) which result in a cost savings	≥ 3 initiatives implemented	IMS
	DDFO-1.g.2. Time limit for completing move of IPL to the 3 <sup>rd</sup> floor to reduce SC-CH footprint within Bldg. 201 (Cost savings will be realized in year following incurrence of construction costs)	Schedule pending finalization of bids from ANL	STI
	DDFO-1.g.3. Percentage reduction in the FY 2009 cost of subscriptions compared to FY 2008	25% (or \$6800)	All

**DDFO Goal 2: Improve our Laboratories**

Objective	Measure	Target	Owner
DDFO-2.a. Sustain the investment in Laboratory infrastructure through continued SLI progress	N/A		
DDFO-2.b. Implement the Mission Readiness Model at all of our Laboratories	N/A		
DDFO-2.c. Hold Labs accountable for meeting the EO goals	N/A		
DDFO-2.d. Control/reduce the cost of doing business at our Laboratories	N/A		
DDFO-2.e. Work to bring	N/A		

increased consistency to the Contractor HR decisions we make with respect to each lab, and in the context of all labs in the area of Human Resources.			
DDFO-2.f. Build a requirements-based Safeguards & Security budget	DDFO-2.f.1. Participate on HQ team as directed	TBD	STI

**DDFO Goal 3: Bring Order to Chaos**

Objective	Measure	Target	Owner
DDFO-3.a. Develop a set of Integrated Management Principles and a plan to incorporate these principles into SCMS	N/A		
DDFO-3.b. Implement and strengthen SCMS Requirements Management processes to ensure disciplined implementation of Order 251.1C	See DDFO-1.a.1.		

**DDFO Goal 4: Help our Laboratories be Successful**

Objective	Measure	Target	Owner
DDFO-4.a. Improve contractor assurance systems	DDFO-4.a.1. Feedback sought on utility of CAS procedures within SCMS	100% of Site Offices conducting CAS assessments during FY 2009 in accordance with the Integrated Assessment Schedule (IAS)	STI
DDFO-4.b. Gain a better understanding of contractor safety performance and drive improvement through the implementation of periodic SC-wide safety evaluations	N/A		
DDFO-4.c. Continue improvements to the Annual Laboratory Plans by establishing a formal feedback loop	N/A		

**DDFO Goal 5: Evaluate our Contractors Fairly**

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
DDFO-5.a Implement PEMP process improvements that will provide us a better understanding of our Goals and Objectives, strengthen our evaluation process and enhance interactions among all SC organizations	DDFO-5.a.1. Number of assessments of contractor purchasing systems (PERT) actively participated on by 09/30/09	2	ACQ
	DDFO-5.a.2. Time limit for conducting an effective Site Office/Laboratory meeting or workshop to facilitate the development of FY 2009 Contractor Property Balanced Scorecard Measures	08/01/09	ACQ
	DDFO-5.a.3. Time limit for conducting an effective on-site evaluation of Berkeley Laboratory Property and Motor Vehicle Management Systems	06/15/09	ACQ
	DDFO-5.a.4. Percentage of the PEMPs reviewed for the Site Offices that SC-CH supports in accordance with PEMP guidelines and other applicable regulations	100%	ACQ
	DDFO-5.a.5. Time limit for conducting an effective Site Contracting Officer/Site PEMP Manager meeting to provide recommended procurement measures, facilitate discussion on PEMP measures and offer services for development of measures and assessment	06/30/09	ACQ

**2. SC-CH FY 2009 Objectives**

The eight SC-CH FY 2009 goals and related objectives, measures and targets are listed below.

**SC-CH Goal 1: Successfully exercise all authorities for the Chicago Office**

Note: \*Denotes Joint SC-CH and SC-OR Objectives

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
1.1. Ensure all authorities are successfully exercised*	1.1.1. Number of critical findings or violation of federal statute, federal or departmental policies, guidance or procedures on internal independent reviews of ACQ award actions	0	ACQ
	1.1.2. Percentage of timely monthly reporting milestones for funding allotments	100%	CR
	1.1.3. Percentage of monthly, quarterly and annual milestones met in accordance with DOE Human Capital Management Accountability Program and OPM guidelines, to assure effective management and safeguarding of delegated human resource authorities	100%	HRS
	1.1.4. Percentage of Legal Management audit findings and recommendations tracked and corrected	100%	OCC
	1.1.5. Percentage of OIG FY 2009 cyber security audit findings tracked and corrected (Designated Approving Authority (DAA))	100%	OM
	1.1.6. Number of cyber security related findings resulting from external audits (Computer Protection Program Manager (CPPM))	≤ 5 Level 1 findings	IMS
1.2. Strengthen nuclear safety capability	1.2.1. Time limit for DDFO delegation of nuclear safety approval authority to SC-CH Manager	09/30/09	OM/STI

**Goal 2: Deliver on the SC complex service needs by providing a wide range of services**

Objective	Measure	Target	Owner
2.1. Implement effective and efficient service to the SC complex*	2.1.1. Completion of the review and update of the ISC Service Plan to improve efficiency and effectiveness of support to SC Operations*	02/28/09	OM
- Procurement... Provide quality and timely procurement services to SC complex	2.1.2. Percentage of customer survey responses that are satisfied or better as measured by balanced scorecard assessment	80%	ACQ
- Financial... Incorporate financial plan changes in Laboratory contract modifications and Site Office and SC-CH divisional allocations in a complete and timely manner	2.1.3. Percentage of financial plan changes and contract funding modifications completed by month-end	100%	CR
- Communications... Play a key role in support of SC communication initiatives	2.1.4. Number of successful initiatives or activities initiated and completed	2	OM-C
	2.1.5. Percentage of satisfied or better customer survey responses from managers who received support for community and stakeholder relations activities	80%	OM-C
- Technical...	2.1.6. Number of Highly Satisfied ratings from SC Facilities and Infrastructure Division (DDFO1.2) indicating successful and timely support for special assignments	2	STI
	2.1.7. Number of Highly Satisfied ratings from AMSO, ASO, BHSO, BSO, and FSO indicating successful and timely support for real estate transactions	4	STI
	2.1.8. Number of personnel security actions completed	1300	STI
	2.1.9. Percentage of adjudication cases completed within 30 days	80%	STI
	2.1.10. Average number of calendar days for submission of adjudication cases to OPM	< 14	STI
	2.1.11. Number of Classification Appraisals conducted	2	STI

Objective	Measure	Target	Owner
- Intellectual Property...	2.1.12. Number of patent applications filed on behalf of DOE	22 patent applications filed	OCC
	2.1.13. Number of inventions processed to final disposition	1050	OCC
2.2. Support assessment needs within SC*	2.2.1. Number of procurement assessments of SC contracting activities conducted	2	ACQ
	2.2.2. Leadership/support of major reviews/assessments in support of SC Site Offices <ul style="list-style-type: none"> <li>• STS</li> <li>• SSS (Security Inspections)</li> <li>• PSS (FIMS Validations)</li> </ul>	≥ 5 ≥ 5 ≥ 3	STI
	2.2.3. Percentage of financial reviews and assessments milestones met in support of SC-CH Source Evaluation Boards, Site Office financial oversight of Laboratories, SBIR's and other procurement instruments	≥ 90%	CR
2.3 Implement program/project management services	2.3.1. Effective program management services for the Office of Electricity Delivery and Energy Reliability	Complete 4 contractor assessments	STI

**Goal 3: Maintain the excellence of acquisition and assistance services provided to SC and other DOE Program Offices**

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
3.1. Successfully perform Management and Operating (M&O) Contract Competitions*	3.1.1. Timeliness of release of solicitation for management and operation of the Brookhaven National Laboratory	Meet scheduled milestone	ACQ
	3.1.2. Timeliness of execution of contract for management and operation of Princeton Plasma Physics Laboratory	On or before 03/1/09	ACQ
	3.1.3. Percentage of Site Office M&O contract administration guidance (derived from the issuance of Policy Flashes) issued within two weeks after assignment	85%	ACQ
3.2. Maintain acquisition staff expertise	3.2.1. Percentage of acquisition personnel conferred a Federal Acquisition Certification in Contracting (FAC-C) (Individuals receiving waivers from HQ are excepted)	90%	ACQ
	3.2.2. Percentage of FAC-C personnel meeting Acquisition Career Management Program (ACMP) Continuous Learning Requirement	95%	ACQ
	3.2.3. Percentage of all acquisition personnel certified under the Financial Assistance Career Development Program by 09/30/09	85%	ACQ
	3.2.4. Number of acquisition personnel provided challenging developmental assignments to enhance procurement skills	5	ACQ
	3.2.5. Percentage of CORs that met prescribed training requirements for assigned delegations by 09/30/09	100%	STI, IMS, OCC
3.3. Support the Grant Center of Excellence	3.3.1. Number of major violations reflected in Annual Balanced Scorecard Assessment and results of internal procurement reviews on internal quality control systems and policies and procedures	0	ACQ

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
	3.3.2. Percentage of PR packages for new SC Congressionally Mandated Construction Grants (CMCG) submitted to ACQ	80%	STI
3.4. Compete, select, and award actions in a timely manner	3.4.1. Percentage of FY 2009 award actions for procurement requests received by 08/01/09 that are completed by 09/30/09	100%	ACQ
3.5. Be the SC provider of unique procurements	3.5.1. Percentage of positive customer feedback in response to expert leadership and essential procurement services provided in support of SC initiatives to procure unique and innovative research and development	100%	ACQ

**Goal 4: Continuously improve the Integrated Support Center (ISC) Operations**

Objective	Measure	Target	Owner
4.1. Improve operation of the ISC*	4.1.1. Continued formulation and distribution of the SC IAS each quarter*	10/15/08 01/15/09 04/15/09 07/15/09	OM, IMS
	4.1.2. Percentage of SC-CH Functions, Responsibilities, and Authorities (FRA), SC-CH Oversight Program for New Brunswick Laboratory, and Integrated Safety Management System Descriptions (ISMSD) updated and issued by 09/30/09	100%	OM, STI
	4.1.3. Percentage of SC-CH organizations that conduct and report self-assessment of a work unit's process(es) by 06/30/09	100%	ALL
	4.1.4. Conduct of an Equal Employment Opportunity (EEO)/Diversity assessment to review the commitment and accountability for equal employment opportunity and workforce diversity (by 03/31/09)*	Barriers and opportunities for targeted recruitment identified	OM-D
4.2. Strengthen management controls by effectively planning, measuring and tracking organizational performance	4.2.1. Percentage of SC-CH organizations that submit FY 2010 APP Measures, Targets and Workload Indicators by 07/29/09	100%	ALL
	4.2.2. Time limit for completing and submitting FY 2010 SC-CH APP	09/01/09 (or date specified by DDFO)	IMS
	4.2.3. Time limit for entering quarterly performance and workload data into MDSS	≤15 days after end of quarter	ALL
	4.2.4. Time limit for completing and submitting FY 2008 SC-CH AAR	11/15/08	IMS
	4.2.5. Average time for entering data in Legal Action Tracking, Freedom of Information Act/Privacy Act(FOIA/PA), and Patents Management Information System (PATMIS) systems	≤ 10 business days of receipt of item	OCC
4.3. Improve processes and achieve cost savings	4.3.1. Percentage of SC-CH organizations that implemented a process improvement based on results of their annual self-	100%	All

	assessment		
4.4. Fully establish SC Technical Qualification Program *	4.4.1. Percentage of STI's candidate employees achieving designated certification by 09/30/09	100%	STI
	4.4.2. Percentage of STI candidate employees to achieve Office/Site Office/NBL facility-specific qualification standard by 10/31/08	100%	STI
	4.4.3. Percentage of STI candidates to complete the General Technical Base Standard including Addendum	85% - 10/30/08; 100% - 12/30/08	STI
	4.4.4. Percentage of STI candidates with specific training/proposed schedules identified and maintained in TQP files by 12/30/08	80%	STI
	4.4.5. Percentage of new TQP candidates who are provided with program notification letters within 60 days of hiring	100%	STI
	4.4.6. Rating of TQP based on self-assessment conducted by 09/30/09	Rating of program implementation is assessed as adequate or higher	STI

**Goal 5: Provide state of the art, secure information technology, records management, analytical and administrative services**

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
5.1. Implement new Information Management technologies	5.1.1. Percentage of major hardware/software technology upgrades and new functionality (defined in the SC-CH FY 2009 Information Management Operating Plan) initiated	100%	IMS
5.2. Develop business systems	5.2.1. Percentage of system development efforts (defined in the SC-CH FY 2009 Information Management Operating Plan) initiated	100%	IMS
5.3. Maintain Information Technology (IT) infrastructure	5.3.1. Network uptime	≥ 97%	IMS
5.4. Provide help desk support	5.4.1. Average Customer Survey results	≥ 4.8 (5 point scale)	IMS
5.5. Complete hardcopy Personally Identifiable Information (PII) records inventory	5.5.1. Percentage of remaining organizations inventoried	100%	IMS
5.6. Set up proactive “SWAT” team with responsibility to provide rapid support to help resolve IT/Cyber Security issues at Site Offices	5.6.1. Time limit for establishment of team and completion of preparations	06/30/09	IMS

**Goal 6: Improve our customers' satisfaction, partners' appreciation and stakeholders' understanding**

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
6.1. Develop and communicate customer service standards	6.1.1. Percentage of established customer service standards met	85%	All
6.2. Further develop Communications products to explain ISC/SC-CH functions	6.2.1. Update of organizational websites	At least quarterly, quarterly, annually	OCC, HRS, ACQ
	6.2.2. Number of communication products/activities to enhance internal understanding developed/conducted each quarter	1	OM-C
	6.2.3. Number of outreach activities to enhance understanding among new stakeholders conducted/presented	2	OM-C
	6.2.4. Number of presentations skills training classes conducted	2	OM-C
	6.2.5. Number of speakers from the <i>Speakers Bureau</i> placed to deliver messages to broad audiences	6	OM-C
6.3. Enhance our understanding of Site Offices and labs	6.3.1. Number of Site Office visits conducted	2 visits (CR) 6 visits (IMS) 1 visit (ACQ)	CR, IMS, ACQ
	6.3.2 Percentage of served Site Offices visited	100%	OCC
6.4. Develop a partnership initiative for SC-CH in order to increase our visibility	6.4.1. Number of partnerships developed with non-DOE groups	2	OM-C

**Goal 7: Implement human capital policies, programs and practices to meet SC mission and strategic goals and institutionalize strategic human capital management**

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
7.1. Align human capital management strategies with the SC mission, goals and organizational objectives	7.1.1. Assessment of progress made against FY 2008 SC Human Capital Management action items (by 10/5/08)	Thorough assessment	HRS
	7.1.2. Reporting of results to SC-CH senior management on accomplishments against the goals and objectives (by 10/31/08)	Demonstrated progress in addressing FY 2008 human capital priorities	HRS
	7.1.3. Development of FY 2009 strategies to mitigate mission critical occupation skills gaps identified from the FY 2009 workforce plans (by 11/15/08)	Appropriate strategies to address FY 2009 human capital priorities	HRS
	7.1.4. Implementation of strategies to mitigate mission critical occupational skills gaps (by 03/30/09)	Skill gaps reduction	HRS
	7.1.5. Issuance of annual staffing plan guidance to managers and supervisors for the development of FY 2010 workforce plans (by 04/30/09)	Comprehensive written guidance provided to managers	HRS
	7.1.6. Preparation of annual Workforce Management Plan and submittal to HRS (by 06/21/09)	FY 2010 Workforce Management Plan for each Chicago Element	ALL
7.2. Assist managers, supervisors and employees in closing competency gaps in mission-critical occupations and fulfilling certification and qualification requirements (e.g., SC TQP, DOE Acquisition Career Management Program and Project Management Career Development Program)	7.2.1. Analyzing FY 2009 Workforce Management Plans; reviewing and discussing with managers; compiling results and briefing Manager and Deputy Manager (by 10/31/08)	Executive summary of Chicago Element FY 2009 Workforce Management Plans	HRS
	7.2.2. Development of action items to address competency gaps and other priorities from FY 2009 Workforce Management Plans (by 12/31/08)	FY 2009 Action Plan developed and entered into SMART	HRS

Objective	Measure	Target	Owner
	7.2.3. Coordination with STI and the DOE Training Officers to advise SC TQP participants of appropriate training resources (by 12/31/08)	TQP participants notified of available training courses and other resources	HRS
	7.2.4. Analysis of training needs; determination that individual development plans (IDPs) are completed; and identification of priorities for development of FY 2009 Annual Training Plan (by 12/31/08)	SC-CH FY 2009 Annual Training Plan	HRS
	7.2.5. Utilization of Office of Human Capital Management curriculum to train Recruitment Committee	Trained Recruitment Committee	HRS
	7.2.6. Analysis of data on usage/effectiveness of flexibilities/appointment authorities and determination of effectiveness based upon employees' tenure	Hiring options analyzed and reported	HRS
	7.2.7. Review of minimum requirements for vacancy announcements in order to determine what requirements can be eliminated (by 11/30/08)	"User-friendly" announcements	HRS
	7.2.8. Conduct of training on navigating Hiring Management and resume preparation (by 11/30/08)	Internal applicants provided tools to enhance quality of their application packages	HRS
7.3. Ensure continuity of leadership by identifying and addressing potential gaps in effective leadership and implementing programs that capture organizational knowledge and promote learning	7.3.1. Review of SC data from the OPM Federal Competency Assessment Tool-Management (FCAT-M)	Gap analysis of team leader, supervisory and managerial competence	HRS
	7.3.2. Distribution of sample IDPs (by 10/03/08)	Team leaders, supervisors and managers prepared to develop FY 2009 IDPs	HRS

Objective	Measure	Target	Owner
	7.3.3. Review of results of FY 2009 training needs analysis and IDPs (by 12/31/08)	Training priorities identified for team leaders, supervisors and managers	HRS
	7.3.4. Identification of Federal sources of supervisory/managerial training (e.g., USDA Graduate School, OPM Management Development Centers, DOE Office of Human Capital Management, etc.) (by 10/03/08)	Training resources identified for managers, supervisors and team leaders	HRS
	7.3.5. Publication of opportunities for supervisory development in the HRS Newsletter; and for supervisory and managerial development on the Gateway	Managers, supervisors and team leaders informed of training opportunities	HRS
	7.3.6. Monitoring of training completed by supervisors and managers	Feedback on progress provided to SC-CH Senior Staff	HRS
	7.3.7. Promotion of the skills obtained by graduates of the formal career development programs (Aspiring Leader Program, New Leader Program, Executive Leadership Program, and Executive Potential Program) (by 02/28/09)	Provide opportunities for graduates to utilize skills and demonstrate return on investment for program expense	HRS
	7.3.8. Reevaluation and update of the SC-CH Mentoring Program and <i>Gateway to Advancement Program</i> (by 03/31/09)	Mentoring program and developmental program for administrative support personnel implemented	HRS
	7.3.9. Identification of recruitment sources of applicants with targeted disabilities (by 12/31/08)	Supervisors educated on hiring flexibilities for this group	OM-D

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
7.5. Results-Oriented Performance Culture: Provide mechanisms for managers and supervisors to link individual performance to organizational goals and differentiate between high and low levels of performance	7.5.1. Training on writing performance-based outcome-oriented expectations made available (by 10/20/08 pending contractor availability)	Supervisors, managers, and employees trained to write better performance plans	HRS
	7.5.2. Development of guidance on FY 2009 performance plans (by 10/23/08 contingent upon contractor training schedule)	Supervisors receive FY 2009 performance plan guidance	HRS
	7.5.3. Development of guidance on FY 2009 midyear progress reviews (by 03/31/09)	Supervisors receive FY 2009 midyear progress review guidance	HRS
	7.5.4. Development of FY 2009 final rating guidance (by 10/02/09)	Supervisors receive FY 2009 final rating guidance	HRS
	7.5.5. Conduct of annual Performance Appraisal Assessment Tool (PAAT) assessment in accordance with established guidelines from the Office of Human Capital Management	PAAT assessment of SC-CH	HRS
	7.5.6. Preparation of summary of PAAT feedback received from the Office of Human Capital Management	Managers and supervisors receive PAAT feedback	HRS

**Goal 8: Operate a safe, secure, disciplined and functional laboratory to provide the highest quality nuclear material standards and measurement evaluation services for domestic and international customers**

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
8.1. Ensure compliance with nuclear facility operational requirements for environment, safety and health (ES&H), safeguards and security, shipping, quality assurance, and infrastructure management – <i>Priority #1 in FY 2009 is Full Return to Operations</i>	8.1.1. Time limit for obtaining approval for upgrades to NBL's Documented Safety Analysis, Technical Safety Requirements, and Nuclear Criticality Safety Evaluation	06/30/09	NBL
	8.1.2. Time limit for completing necessary engineering studies for safety significant systems, structures, and components	03/31/09	NBL
	8.1.3. Time limit for completing safety significant systems, structures, and components upgrades, retrofits, installation, and/or implementation of appropriate agreed-upon compensatory/mitigative measures	09/30/09	NBL
	8.1.4. Time limit for completing required follow-on nuclear safety documentation	09/30/09	NBL
	8.1.5. Time limit for completing required upgrades to the NBL Radiation Protection Program	09/30/09	NBL
	8.1.6. Time limit for validating closure of all remaining Office of Health, Safety and Security (HSS) corrective actions	09/30/09	NBL
	8.1.7. Time limit for preparing for a DOE Operational Readiness Review	09/30/09	NBL
	8.1.8. Time limit for completing Standards Requirements Identification Documents (S/RIDs) for ES&H	09/30/09	NBL
	8.1.9. Time limit for establishing effective problem identification, corrective action, lessons learned, and root cause analysis systems	03/31/09	NBL

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
8.2. Provide new or replacement nuclear certified reference materials and meet responsibilities as the Federal Certifying Authority for nuclear reference materials	8.2.1. Number of nuclear certified reference materials issued by the end of FY 2009	2	NBL
	8.2.2. Time limit for completing domestic shipments of reference materials to customers	14 days from receipt of an official request	NBL
	8.2.3. Time limit for completing foreign shipments of reference materials to customers	28 days from receipt of an official request	NBL
8.3. Deliver enhanced measurement evaluation services	8.3.1. Time limit for shipping FY 2009 program uranium samples to customers	12/31/08	NBL
	8.3.2. Time limit for expanding Measurement Evaluation Program to include Non-destructive assay (NDA) measurements, with at least one other measurement technique evaluated	9/30/09	NBL
	8.3.3. Time limit for sending statistical evaluation reports of experimental results with comparison of accuracy and precision of the experimental results against international target values that are prepared together with cover letters to explain the evaluation conclusions to customers and their sponsors	14 working days from receipt of data from a customer	NBL
	8.3.4. Time limit for completing Annual Measurement Evaluation Program reports (Safeguards Measurement Evaluation (SME) and Calorimetric Exchange (CALEX)) by the end of the third quarter of the following fiscal year as required	06/30/09	NBL
	8.3.5. Time limits for establishing the annual Measurement Evaluation Program meeting location, participants, and technical program; and producing meeting minutes	At least 60 working days prior to the meeting (coordinating); 09/30/09 (minutes)	NBL

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
8.4. Provide nuclear safeguards, nonproliferation, and national security assistance	8.4.1. Time limit for providing quality support for specifically-assigned nuclear safeguards, nonproliferation, and national security assistance projects	Within assigned Time limit	NBL
	8.4.2. Time limit for providing fiscal and project reports	Within timeframe stated by the customer	NBL
8.5. Provide nuclear metrology	8.5.1. Time limit for developing and maintaining uncertainty calculation spreadsheets or templates that follow American National Standard for Calibration - US Guide to the Expression of Uncertainty in Measurement (GUM) guidelines for analytical work	09/30/09	NBL
	8.5.2. Time limit for developing a measurement uncertainty analysis core training course and providing two training sessions to customers	09/30/09	NBL
8.6. Provide analytical chemistry measurement services and maintain equipment to perform state-of-the-art destructive measurements	8.6.1. Time limit for identifying systemic issues with mass spectrometers, developing plan of action, and completing identified corrective actions	06/30/09	NBL
8.7. Provide analytical chemistry measurement method development	8.7.1. Time limit for reviewing special nuclear material analytical measurement methods for implementation at NBL	09/30/09	NBL
8.8. Serve on consensus standards-writing committees and working groups related to analytical chemistry and metrology	8.8.1. Time limit for providing quality support for specifically-assigned consensus standards activities	Within assigned Time limit	NBL
8.9. Ensure compliance with administrative requirements	8.9.1. Time limit for professionally updating NBL Web Page based upon the National Institutes of Standards and Technology(NIST) model for the content	09/30/09	NBL
	8.9.2. Time limit for implementing financial management software improvements	09/30/09	NBL
	8.9.3. Time limit for implementing document and records management improvements	06/30/09	NBL

<b>Objective</b>	<b>Measure</b>	<b>Target</b>	<b>Owner</b>
8.10. Provide support to NBL operations	8.10.1. Results of OM survey regarding ES&H support provided to NBL	Highly Satisfied	STI
8.11. Provide oversight of NBL operations	8.11.1. Results of OM survey regarding quality of support provided for review of safety documentation at NBL	Highly Satisfied	STI
	8.11.2. Results of OM survey regarding participation in monthly oversight meeting at NBL	Highly Satisfied	STI
	8.11.3. Results of OM survey regarding periodic ES&H evaluations of NBL operations	Highly Satisfied	STI

### 3. SC Assessment Plan and the SC Integrated Assessment Schedule

Chicago's oversight program consists of two major components. The first is focused on assessing our effectiveness in our role as the provider of a broad range of services to the SC Site Offices and to SC headquarters. The plan for conducting internal assessments is described in Attachment 1, [SC-CH M 414.1C-1](#), *SC-CH Assessment Manual*. The second major component of Chicago's oversight program is the delegated SC line management oversight responsibility for the New Brunswick Laboratory, assigned by the SC DDFO to the Chicago Manager. This oversight role is described in Attachment 2, *SC-CH Oversight for NBL Program*.

As well as jointly maintaining the Integrated Assessment Schedule with Oak Ridge, Chicago is updating internal assessment information for FY 2009-2011. The support information will continue to be updated as Site Office assessment plans are coordinated and refined. Chicago's set of assessments that are planned to be conducted to assess internal operations are listed in Attachment 3, *FY 2009 Integrated Assessment Schedule* and is also available at <https://chip.ch.doe.gov/smart/>. (A user ID and password are required; contact the Chicago Office Help Desk ([DOE-CHHelpDesk@ch.doe.gov](mailto:DOE-CHHelpDesk@ch.doe.gov) or 630-252-2772) for assistance.)

### 4. Workload Indicators

In addition to measuring and tracking performance, Chicago monitors workload indicators related to each functional area of the Office. These indicators are tracked and progress is reported by Managers in quarterly senior staff performance/progress review meetings convened by the Chicago Manager. A list of indicators planned for FY 2009 is included as Attachment 4, *FY 2009 Workload Indicators*. The workload indicators and data will be available in graphical form in MDSS throughout FY 2009. Indicator data is collected on a multi-year basis to enable trending analyses for most of the indicators. Improvements to the indicator set are considered annually and as needed throughout the year.

**MANUAL**

**SC-CH M 414.1C-1**

Approved: 07-11-08

Expires: 07-11-09

# **ASSESSMENT MANUAL**

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**U.S. DEPARTMENT OF ENERGY  
Office of Science – Chicago Office**

**July 2008**

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## ASSESSMENT MANUAL

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### 1. PURPOSE

This manual was developed by the Office of Science Chicago Office (SC-CH) to provide direction to management and staff in implementing the Office of Science Management System (SCMS) Assessment subject area within the Quality Assurance and Oversight (QA&O) management system (MS). The SCMS QA&O MS was developed by SC to satisfy the requirements in DOE O 414.1C, Quality Assurance, and Department of Energy (DOE) O 226.1A, Implementation of DOE Oversight Policy. The SCMS Assessment subject area provides additional direction and guidance for SC HQ and Field Offices in meeting the requirements in DOE 414.1C, Quality Assurance, Criterion 9, Management Assessment, Criterion 10, Independent Assessment.

### 2. CANCELLATIONS None

### 3. APPLICABILITY

This Manual applies to SC-CH employees.

### 4. SUMMARY

The SC-CH Assessment Program covers management self-assessment as well as internal independent assessments. Chapter 1 describes the SC-CH assessment procedural elements and requirements, and Chapter II describes roles and responsibilities. Attachment 1 provides a report format for documenting the outcome of assessments.

### 5. DEFINITIONS *(Note: Terms defined in this manual are either unique to SC-CH or are provided with notes to clarify and assist in this transition to SCMS. Clicking on the [Definitions](#) hyperlink will take you to the terms used in the SCMS QA&O MS.)*

Annual Performance Plan (APP) Point of Contact (APP POC): Staff appointed by each SC HQ and Field Office Manager to prepare and submit the APP for the Office. For SC-CH, the IAS Manager is the APP POC and the AAR POC.

Annual Assessment Report (AAR) Point of Contact (AAR POC): Staff appointed by each SC HQ and Field Office Manager to prepare and submit the AAR for the Office. For SC-CH, the Integrated Assessment Schedule (IAS) Manager is the APP POC and the AAR POC.

Assessment Team Lead: The name of the SC-CH Senior Staff, line manager or supervisor responsible for the preparation and conduct of a management or internal self-assessments.

External Independent Assessment: An independent assessment conducted by organizations external to SC-CH for assessing SC-CH performance in meeting DOE

requirements, directives, and other applicable laws, standards and regulations. These are assessments where SC-CH has no direct control over the planning and conduct of the assessment but is responsible and accountable for resolving any identified issues.

Internal Independent Assessment: An independent assessment sponsored by SC-CH Senior Staff but conducted by personnel not reporting to the SC-CH line manager or supervisor responsible for the work or organizational function being assessed. The assessment may be conducted by personnel from other organizations in SC-CH, or from organizations outside SC-CH.

Level 1 Findings (Concerns): These are issues of major significance that warrant a high level of attention on the part of line management. Typically these reflect a gap in addressing requirements or a systemic problem at implementing requirements. *(Note: A systemic or significant management problem identified by one or more deficiencies.)*

Level 2 Findings (Deficiencies): These are issues that represent a non-conformance and/or deviation with implementation of a requirement. Multiple determinations of deficiency at this level, when of a similar nature, may be rolled-up together into one or more Level 1 Findings. *(Note: A noncompliance with a DOE or SC-CH requirement or standard.)*

Level 3 Findings (Opportunities for Improvement): These are issues where it is recognized that improvements can be gained in process, performance, or efficiency already established for meeting a requirement. This level of finding should also include minor deviations observed during oversight activities that can be promptly corrected and verified as completed. *(Note: Recommendations for improving performance. Typically used to improve the efficiency and productivity of an organization or enhance work integration or organizational and activity interface.)*

SC-CH Senior Staff: Senior Staff is the senior leadership of the SC-CH. The Senior Staff includes the following:

- Chief Financial Officer
- Director of NBL
- Assistant Manager, Office of Safety, Technical and Infrastructure Services
- Assistant Manager, Office of Acquisition and Assistance
- Chief Counsel
- Human Capital Officer
- Chief Information Officer

## 6. REFERENCES

- 6.1 SCMS QA&O [Assessment](#) Subject Area
- 6.2 SC-CH O 414.1C Quality Assurance, dated 02-24-06
- 6.3 NBL Quality Assurance Manual, Rev 9, dated 10-05-07

- 6.4 DOE G 414.1-1A Management Assessment and Independent Assessment Guide for use with 10 CFR Part 830 Subpart A
- 6.5 SC-CH M 226.1, Oversight and Assurance Program for New Brunswick Laboratory, dated 06-27-07
7. CONTACT: Questions concerning this Manual should be addressed to Safety and Technical Services at 630-252-2303.

## CHAPTER 1. REQUIREMENTS

- 1.0 Each SC-CH organization shall assess its performance against the relevant metrics outlined in the annual SC-CH APP, and provide results to the AAR POC for inclusion in the annual SC-CH AAR.
- 2.0 Each SC-CH organization shall conduct a management assessment (self-assessment) of the processes used to perform work to assure the adequacy of the work products based on established priorities consistent with the process outlined in the SCMS [Assessment](#) subject area. *(Note: Only one functional or topical area is required to be reviewed each year unless otherwise directed by Office of the Manager (OM) or prescribed by requirements. Also, the results of an independent (internal or external) assessment can be used to meet the SC-CH requirement for conducting annual management assessments.)*
- 3.0 Each SC-CH organization shall assure an independent assessment is performed of key work activities or organizational functions at least once every three years.
- 4.0 Assessments shall be scheduled, planned, and conducted consistent with the SCMS [Assessment](#) Subject Area.
- 5.0 Assessment results should be documented using the preferred SC-CH report format in attachment 1. Copies of the final report are to be provided to the affected manager(s) and/or supervisors, and to the OM Senior Advisor.
- 6.0 Organizations that provide assessment support to Site Offices (or other organizations) shall coordinate schedules and confirm to the OM Senior Advisor the assessments that they plan to support.
- 7.0 Analyze and track issues identified in the conduct of assessments to resolution consistent with the requirements of SCMS [Issue Management](#) Subject Area.

## CHAPTER II. RESPONSIBILITIES

1. RESPONSIBILITIES:

## 1.1 SC-CH Manager

- 1.1.1 Hold Senior Staff accountable for meeting the requirements of this Manual.
- 1.1.2 Assures the annual SC-CH Annual Performance Plan (APP) is developed consistent with the SCMS Subject Area: [Performance Planning and Evaluation](#).
- 1.1.3 Conducts an assessment of SC-CH compliance with requirements of this manual on a triennial basis.
- 1.1.4 Appoints the SC-CH IAS Manager to work with the OM Senior Advisor in managing the administration of the SC-CH SMART/IAS.
- 1.1.5 Assures that the SC-CH AAR is prepared consistent with the SCMS Subject Area: [Performance Planning and Evaluation](#).

## 1.2 Assistant Manager for Safety, Technical and Infrastructure Services (STI)

- 1.2.1 Maintains and updates this manual.
- 1.2.2 Provides expertise and guidance to the SC-CH Manager, the Director of NBL, and all other SC-CH elements in the planning and conduct of assessments.

## 1.3 OM Senior Advisor

- 1.3.1 Reviews assessment plans to ensure that when compiled, SC-CH will have a comprehensive assessment plan.
- 1.4.2 Partners with Oak Ridge Office to provide quarterly IAS reports to the SC-Deputy Director for Facility Operations (DDFO).

## 1.4 Senior Staff

- 1.4.1 Identify key work activities and functions that should be considered for assessment and the assessment requirement to include, if applicable, the requisite frequency for conducting assessments. Refer to the SCMS assessment subject area procedure 1 [Analyzing and Scheduling Assessment Needs and Exhibits](#) for additional guidance. *(Note: These activities and functions are those necessary for delivering quality DOE work products in meeting mission, project, and program requirements and expectations.)*

- 1.4.2 On an annual basis, gather and analyze information/results from the following activities to provide input in identifying areas that may need further assessment:
- SC-CH Management Assessments
  - Self and Independent Assessments
  - Internal Audits or Inspections
  - External Audits or Inspections
  - Business and Strategic Plans
  - Corrective Actions and Causal Factors
  - Customer Feedback and Satisfaction Surveys
- 1.4.3 Identify assessments that external entities plan to conduct.
- 1.4.4 Assures the relevant input and documentation is provided to APP POC for the development of the APP.
- 1.4.5 Update the rolling three year assessment schedule in the SMART/IAS as well as report status of assessments at quarterly meetings and prepare the annual summary of results.
- 1.4.6 Once the assessments are completed, update SMART/IAS with the actual dates of the assessment and attach a copy of the final report.
- 1.4.7 Brief the SC-CH Manager on any Level 1 or Level 2 findings from assessments.
- 1.4.8 For the AAR, provide a brief summary of each completed assessment in early October each year to OM Senior Advisor.
- 1.4.9 Assures the relevant personnel respond to requests for assessment support, coordinate schedules with the requestor and provide confirmation of support in SMART/IAS.
- 1.4.10 Act as Assessment Team Lead (TL) in leading management self-assessments or appoint a TL. *(Note: For independent assessments, the TL can not be responsible or accountable for the work activity or organization being assessed).*

## 1.7 SC-CH IAS Manager

- 1.7.1 Develops and provides ad hoc and quarterly IAS reports.
- 1.7.2 Coordinates IAS updates with Oak Ridge Office to synchronize SMART/IAS data with ORION/IAS data.
- 1.7.3 Deletes assessments as requested by Senior Staff, upon approval of Senior Advisor.

## ASSESSMENT REPORT

Dates of Assessment \_\_\_\_\_

IAS # \_\_\_\_\_

Topic of Assessment \_\_\_\_\_

Assessment Lead \_\_\_\_\_ Other Assessors \_\_\_\_\_

### Executive Summary

A brief summary of the objective and authority for conducting the assessment with a succinct discussion of all Level 1 or significant Level 2 Findings and noteworthy practices. *(Note: Length of this section can be anywhere from 2-3 paragraphs to a page but should rarely be longer than a page.)*

### Objective and Scope

Briefly state the purpose and scope of the assessment, identifying any specific performance objectives and/or the criteria that will be used. Describe the overall scope and methods used to perform the assessment. Reference the Assessment Plan, scoping memo or organizational procedure, if applicable. *(Note: Length of this section should typically be 1-2 paragraphs.)*

### Discussion of Results

Discuss the results and conclusions of the assessment, the basis for the conclusions and overall status of the area being assessed. State the number of Level 1, Level 2 and Level 3 Findings as well as briefly discuss in summary fashion information on all findings and noteworthy practices. *(Note: Length of this section can vary considerably, from 2-4 paragraphs to 5-6 pages, based on the scope of the assessment, the type of activity assessed, and the number of concerns, deficiencies, opportunities for improvement, strengths, and noteworthy practices.)*

### Level 1 Findings (Concerns)

Number Level 1 Findings by referencing them with a L1 then a dash and a number (L1-1, L1-2...etc), the number should be referenced in the text of the report. Numbers are assigned in the order they appear in the text.

- L1-1 Describe each L1 in a concise statement. Add examples if necessary to explain or support.

### Level 2 Findings (Deficiencies)

Number Level 2 Findings by referencing them with a L2 then a dash and a number (L2-1, L2-2...etc) the number should be referenced in the text of the report. Numbers are assigned in the order they appear in the text.

- L2-1 Describe each L2 in a concise statement. Add examples if necessary to explain or support.

### Level 3 Findings (Opportunity for Improvement)

Number Level 3 Findings by referencing them with a L3 then a dash and a number (L3-1, L3-1, L3-2, etc) the number should be referenced in the text of the report. Numbers are assigned in the order they appear in the text. For each L3 identified during the assessment provide sufficient supporting information to allow the L3 to be evaluated to determine whether a corrective action is warranted.

- L3-1 Describe each L3 in a concise statement.

Strength

State the strengths in a concise statement and if necessary discuss the basis for determining why the activity is considered a strength. Number strengths by referencing them with a S then a dash and a number (S-1, S-2...etc) the number should be referenced in the text of the report

S-1 Describe each strength in a concise statement.

Noteworthy Practice

Number Noteworthy Practice (NP) by referencing them with an NP then a dash and a number (NP-1, NP-2...etc), the number should be referenced in the text of the report. Numbers are assigned as the order they appear in the text. List each noteworthy practice identified during the assessment. Provide sufficient supporting information to justify the categorization.

NP-1 Describe each NP in a concise statement.

Personnel Interview

List names and/or titles of personnel interviewed as part of the assessment.

Documents Reviewed

Provide a list of documents that were reviewed during the course of the assessment. The purpose of this list is to document the scope of the assessment and demonstrate compliance with applicable DOE requirements and commitments.

Submitted By: \_\_\_\_\_  
Assessment Team Lead

\_\_\_\_\_ Date



SC-CH Revision History

**TITLE:** SC-CH Oversight Program for New Brunswick Laboratory (NBL)

**POINT OF CONTACT:** Barbara Clouse

**SCMS MANAGEMENT SYSTEM:** [Quality Assurance and Oversight](#)

**TO BE UPDATED:** Annually

REVISION	DATE	REASON/DRIVER	DESCRIPTION
0	Sep 08	Update SC-CH oversight program description to incorporate the revisions of DOE O 226.1A and include links to SCMS	Replaced SC-CH M 226.1, <i>Oversight and Assurance Program Manual for New Brunswick Laboratory (NBL)</i> , dated 06-25-07
1	Sep 08	Hazard Category designation error	Changed Hazard Category <b>3</b> Nuclear Facility to Hazard Category <b>2</b> , on page 3, paragraph 2.0 NBL OPERATIONS

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## OFFICE OF SCIENCE CHICAGO OFFICE OVERSIGHT PROGRAM FOR NEW BRUNSWICK LABORATORY

### 1.0 INTRODUCTION

The [U.S. Department of Energy](#) (DOE) [Office of Science](#) (SC) [Chicago Office](#) (CH) is responsible and accountable for managing and overseeing the operation of the [New Brunswick Laboratory](#) (NBL), a Government-Owned, Government-Operated facility, through the *SC-CH Oversight Program for NBL*. The program is inclusive of a wide variety of methods for gaining/maintaining knowledge of laboratory operations. [Department of Energy \(DOE\) Order 226.1A, Implementation of Department of Energy Oversight Policy](#), defines “DOE Oversight” as including “...operational awareness activities, onsite reviews, assessments, self-assessments, performance evaluations, and other activities...” This *SC-CH Oversight Program for NBL* document describes SC-CH’s comprehensive oversight program, designed to address requirements specified in DOE Order 226.1A, by establishing, documenting and implementing an effective program to monitor and maintain cognizance of the status of environment, safety and health; safeguards and security; cyber security; and emergency management. The *SC-CH Oversight Program for NBL* exceeds the Order’s requirements by including business operations. This Program also implements the applicable components of the Office of Science Management System (SCMS) [Quality Assurance and Oversight Management System Description](#) and its [Line Management Oversight Program Description](#).

The *SC-CH Oversight Program for NBL* is a comprehensive set of line management oversight processes that encompass ongoing communications exchanges, assessments, operational awareness activities (such as walkthroughs), document reviews, results of external assessments, and meeting attendance/participation to obtain knowledge and maintain cognizance of the status and planned changes of the complete range of functional areas performed by NBL, such as:

- Business Operations
- Conduct of Operations
- Configuration Management
- Diversity Programs
- Emergency Management
- Engineering
- Environment, Safety and Health
- Information Technology (IT)
- Integrated Safety Management (ISM)
- Maintenance
- Project Management
- Property Management
- Quality Assurance (QA)
- Safeguards and Security/Integrated Safeguards and Security Management (ISSM)

QA, ISM, Environmental Management System (EMS), ISSM, Cyber Security, Emergency Management, and Federal Assurance System (FAS) programs are focal points of the oversight program to ensure that these cross-cutting management systems are integrated into management and work activities at all levels. The combination of planned assessments, evaluations of performance and on-going operational awareness activities provide a complete and effective *SC-CH Oversight Program for NBL*, as depicted in Figure 1.

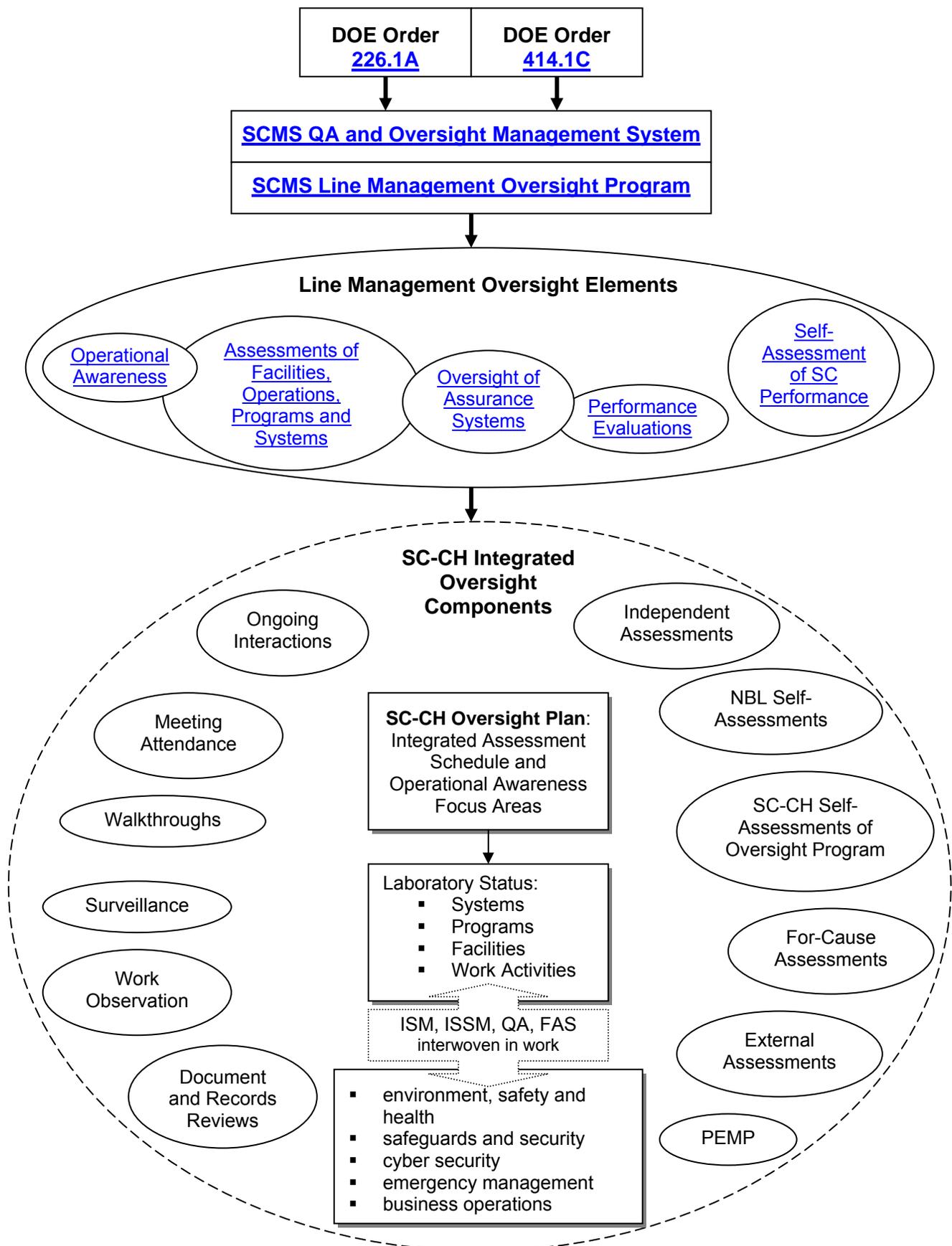


Figure 1

## 2.0 NBL OPERATIONS

NBL provides certification of standards to measure nuclear materials in an access-controlled, [Hazard Category 2 Nuclear Facility](#) and [Category IV Special Nuclear Material](#) (SNM) Facility on the Argonne National Laboratory site. NBL's policy is that the safety and health of its workers, visitors, the environment, and the public are paramount in all of its activities. NBL staff consists of approximately 40 technical (mostly chemists) and support/administrative personnel.

## 3.0 OVERSIGHT PROGRAM GOAL

The *SC-CH Oversight Program for NBL* goal is to provide the SC-CH Manager with sufficient knowledge of NBL's activities to make informed decisions concerning hazards, risks and resource allocation; provide direction to NBL management; and evaluate the laboratory's performance.

## 4.0 ROLES AND RESPONSIBILITIES

Oversight of the work performed at NBL is the responsibility of the SC-CH Manager, in a role similar to that of SC Site Office Managers who oversee contractor-operated laboratories. SC-CH personnel conducting NBL oversight must be able to assess how effectively NBL is implementing ISM, ISSM, QA Program (QAP), Federal Assurance System and other cross-cutting DOE requirements in the performance of work, as well as requirements in specific areas such as small purchases. Consequently, SC-CH personnel in oversight roles must maintain an awareness of NBL programs, operations, activities, and management systems. SC-CH oversight roles and responsibilities are specified in the [SC-CH Order 111.1a](#), *Chicago Office Functions, Responsibilities and Authorities* (FRA), [SC-CH O 414.1C](#), *Quality Assurance*, position descriptions, and individual performance plans. A chart of the SC-CH organizations with assigned oversight responsibilities and a summary of the roles and responsibilities are provided below in Figure 2 and in the following Section 4.0 paragraphs.

**SC-CH Organizations with NBL Oversight Responsibilities**

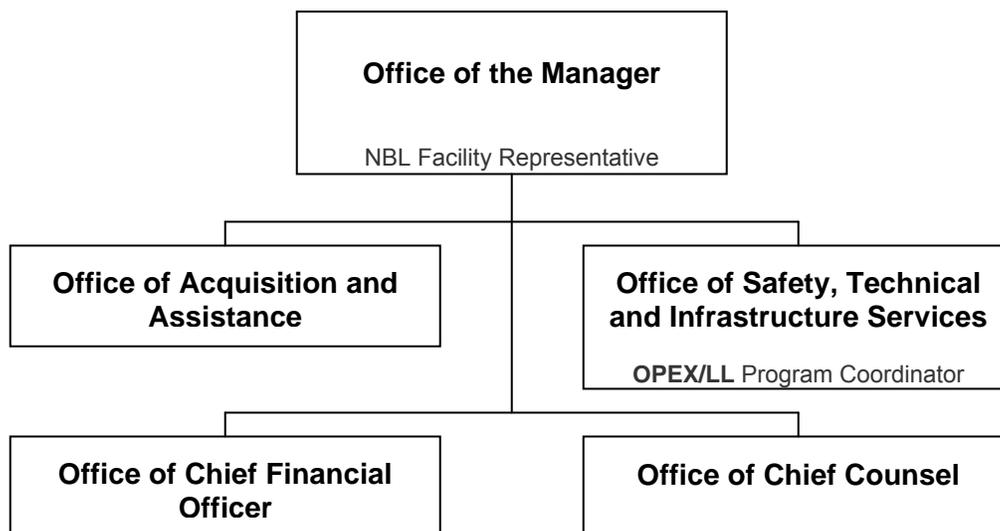


Figure 2

## 4.1 SC-CH Manager

- 4.1.1 Is the line manager, as delegated by the SC Deputy Director for Field Operations (DDFO), responsible and accountable for establishing and executing effective line oversight of NBL as described in the *SC Site Office Managers* responsibilities in the SCMS [Quality Assurance and Oversight Management System Description](#) and the [Line Management Oversight Program Description](#).
- 4.1.2 Supervises the NBL Director using the federal personnel system to set, monitor and evaluate performance expectations.
- 4.1.3 Holds SC-CH Senior Staff accountable for providing effective oversight of NBL.
- 4.1.4 Maintains awareness of the status of Level 1 and 2 Findings and related corrective actions.
- 4.1.5 Ensures that the Facility Representative and other oversight staff have unfettered access to information and facilities, as necessary to conduct an effective oversight program, consistent with applicable laws and requirements.
- 4.1.6 Periodically participates in facility walkthroughs of NBL operations conducted by the Facility Representative.
- 4.1.7 Identifies measurable oversight-related objectives to be achieved by the management and staff of SC-CH each year in the [SC-CH Annual Performance Plan](#) (APP), as described in the SCMS [Quality Assurance and Oversight Management System](#) , [SC Performance Planning and Evaluation Subject Area, Procedure 1. Preparing and Reviewing the SC Annual Performance Plan](#).
- 4.1.8 Acts as the Cognizant Security Authority (CSA) for NBL.
- 4.1.9 Reviews the results the of the annual self-assessment of the *SC-CH Oversight Program for NBL* and monitors the corrective actions for Level 1 and 2 Findings.
- 4.1.10 Develops the NBL Performance Evaluation Management Plan (PEMP) and conducts monthly meetings with the NBL Director and other appropriate staff to review the monthly PEMP updates and remain cognizant of NBL operational, performance and facility issues.
- 4.1.11 Reviews the status of metrics in the NBL Letter of Obligation (LOO) and the APP, and the workload indicator data provided by the NBL Director.
- 4.1.12 Summarizes the results of oversight activities in the [SC-CH Annual Assessment Report](#) (AAR), as described in the SCMS [Quality Assurance and Oversight Management System](#), [SC Performance Planning and Evaluation](#)

[Subject Area, Procedure 2. Preparing and Reviewing the SC Annual Assessment Report.](#)

- 4.1.13 Assesses oversight qualifications as described in SCMS [Quality Assurance and Oversight Management System, Oversight Skills Subject Area](#) and approves the qualifications of the NBL Facility Representative.
  - 4.1.14 Establishes oversight performance expectations for the NBL Facility Representative in accordance with [DOE-STD-1063-2006, Facility Representatives.](#)
  - 4.1.15 Supervises and monitors the performance of the NBL Facility Representative to maintain operational awareness and to ensure compliance with established oversight expectations.
  - 4.1.16 Reports quarterly Facility Representative performance indicator data to the Departmental Representative of the Defense Nuclear Facility Safety Board.
- 4.2 Assistant Manager for Safety, Technical and Infrastructure Services (STI)**
- 4.2.1 Is the SC-CH line manager, as delegated by the SC-CH Manager, responsible and accountable for establishing and executing an effective oversight program for NBL.
  - 4.2.2 Maintains and updates this Program document.
  - 4.2.3 Conducts and documents annual self-assessments on the effectiveness of the organization's implementation of the NBL oversight processes and activities consistent with the requirements in the SCMS [Quality Assurance and Oversight Management System, Assessments Subject Area , Procedure 2. Performing Assessments](#) and SC-CH M 414.1C-1, *SC-CH Assessment Manual*.
  - 4.2.4 Prepares the annual SC-CH ISM Declaration. This includes reviewing and recommending SC-CH Manager approval of the annual NBL ISM Declaration.
- 4.3 NBL Facility Representative (FR)**
- 4.3.1 Assesses and maintains operational awareness of NBL as described in SCMS [Quality Assurance and Oversight Management System, Operational Awareness Subject Area](#), and [DOE-STD-1063-2006, Facility Representatives.](#)
  - 4.3.2 Plans operational awareness activities as described in SCMS [Quality Assurance and Oversight Management System, Operational Awareness Subject Area, Procedure 1. Planning and Scoping Operational Awareness Activities](#); and conducts and documents walkthroughs, work observations, document and record reviews, and surveillances as described in SCMS [Quality Assurance and Oversight Management System, Operational Awareness Subject Area, Procedure 2. Conducting, Analyzing, Documenting, and Communicating Operational Awareness Activities.](#)

- 4.3.3 Provides an annual list of proposed focus areas for operational awareness to the Assistant Manager for Safety, Technical and Infrastructure Services as input to the APP.
- 4.3.4 Provides weekly briefings to communicate resulting outcomes and judgment of performance to the Assistant Manager for Safety, Technical and Infrastructure Services and participates in the SC-CH Manager's monthly meetings with the NBL Director.
- 4.3.5 Documents findings in the SMART Action Tracking System.
- 4.3.6 Conducts triennial self-assessments of the FR Program relative to the requirements in [DOE-STD-1063-2006](#).

#### 4.4 Operating Experience/Lessons Learned (OPEX/LL) Program Coordinator

- 4.4.1 Issues pertinent LL information to NBL consistent with SCMS [Quality Assurance and Oversight Management System](#), [Corporate Operating Experience/Lessons Learned Subject Area](#).
- 4.4.2 Conducts assessments and maintains operational awareness of the effectiveness of the NBL OPEX/LL Program consistent with SCMS [Quality Assurance and Oversight Management System](#), [Corporate Operating Experience/Lessons Learned Subject Area](#).

#### 4.5 Senior Staff

- 4.5.1 Are accountable to the SC-CH Manager for the effectiveness of the *SC-CH Oversight Program for NBL* as specified in the SC-CH FRA.
- 4.5.2 Ensure the planning and scheduling of topical functional assessments of NBL are consistent with the requirements of the SCMS [Quality Assurance and Oversight Management System](#), [Assessments Subject Area](#), [Procedure 1. Analyzing and Scheduling Assessment Needs](#) and [SC-CH M 414.1C-1](#), *SC-CH Assessment Manual*.
- 4.5.3 Provide a qualified subject matter expert (SME) and conduct assessments in accordance with SCMS [Quality Assurance and Oversight Management System](#), [Assessments Subject Area](#), [Procedure 2. Performing Assessments](#) and [SC-CH M 414.1C-1](#), *SC-CH Assessment Manual*.
- 4.5.4 Document and track findings resulting from assessments in accordance with the SCMS [Quality Assurance and Oversight Management System](#), [Issues Management Subject Area](#), [Procedure 1. Managing Issues Identified in Oversight Activities](#).
- 4.5.5 Apprise the SC-CH Manager of Level 1 and 2 Findings and the status of related corrective actions.
- 4.5.6 Participate in self-assessments on the effectiveness of the organization's implementation of the NBL oversight processes and activities consistent with

the requirements in the SCMS [Quality Assurance and Oversight Management System](#), [Assessments Subject Area](#), [Procedure 2. Performing Assessments](#) and [SC-CH M 414.1C-1](#), *SC-CH Assessment Manual*.

## 5.0 OVERSIGHT PLAN

The SC-CH oversight plan is a rolling three-year schedule of planned assessments documented in the Integrated Assessment Schedule, and a list of focus areas for operational awareness documented in the APP.

### 5.1 Integrated Assessment Schedule (IAS)

SC-CH uses the risk-based approach described in SCMS [Quality Assurance and Oversight Management System](#), [Assessments Subject Area](#), [Procedure 1. Analyzing and Scheduling Assessment Needs](#) to select the assessments of NBL. The rationale for the schedule is documented in the SC-CH APP each year.

SC-CH's projected assessment activities, schedule, and needs are entered and updated in the SMART database at <https://chip.ch.doe.gov/smart>. Since the analysis and coordination with NBL can and does continue throughout the fiscal year, on occasion SC-CH makes changes to its schedule. Once the schedule is approved by the SC-CH Manager, assessment removal or planned start/end date changed to another year must receive prior approval by the Manager; however additional details and date changes within the same fiscal year can be entered without approval.

### 5.2 Operational Awareness Focus Areas

Areas that are slated to receive increased attention during future walkthroughs may be based on identified issues and corrective actions from previous operational awareness activities, such as walkthroughs, or based on discussions during attendance at NBL meetings. There are also inherent risks at the Laboratory that merit increased attention and areas that have been identified as needing DOE or SC-wide attention. Another factor considered is maintaining a balance of focus among reviews of systems, programs, facilities and work activities. These potential focus areas are reviewed, discussed with NBL and agreed upon annually. A minimum schedule of walkthroughs is then developed in conjunction with NBL, with the focus areas influencing the walkthrough priorities and frequencies assigned to specific programs, projects, facilities, or work activities.

## 6.0 OPERATIONAL AWARENESS ACTIVITIES

“Operational awareness” consists of a broad range of activities that provide opportunities for selective monitoring and evaluation of NBL operations and performance against expectations. These activities include evaluating work and work control processes to observe the effectiveness of NBL implementation of ISM, ISSM, and QA Programs, ensuring compliance with requirements, monitoring performance, and ensuring the adequacy of assurance systems. The types of operational awareness activities conducted include meeting attendance, walkthroughs, and surveillances. These activities are documented in reports and summaries of significant results and may be shared with SC senior management and other DOE

Headquarters offices responsible for specific functions, as appropriate. The processes for planning, conducting, documenting and communicating SC-CH operational awareness activities are described below and in SCMS [Quality Assurance and Oversight Management System, Operational Awareness Subject Area](#).

### **6.1 Meeting Attendance**

Access to operational information is available through attendance or participation in NBL management and staff meetings on research direction, management systems, resource allocation, work planning, safety programs or performance measures. SC-CH management conducts weekly meetings with NBL's senior management that provide an opportunity to gather information on current and up-coming activities, as well as communicate expectations and raise concerns. Meetings with NBL to discuss results from assessments (closeouts following reviews) and operational awareness activities (e.g., at the end of walkthroughs) provide a valuable opportunity to exchange information, discuss issues, set expectations, and set the stage for resolution of findings, concerns, and observations. The SC-CH FR documents meeting attendance in the FacRep Log where a brief summary of each meeting is recorded.

### **6.2 Walkthroughs**

Walkthroughs involve observing conditions where work is being performed, interacting with personnel responsible for performing work, and observing activities in progress. A minimum schedule of walkthroughs is developed annually with the NBL Director. SC-CH adjusts the schedule when necessary and some unannounced visits are also conducted. During the walkthroughs, general information on conditions associated with the work and on issues requiring additional evaluation is collected, providing a "snapshot" of workplace conditions. Although walkthroughs may focus on specific functional areas or disciplines, their most important use is to collect information on workplace activities, the concerns of the workforce, and the status of ongoing work. On occasion while participating on walkthroughs, observation of certain conditions or on-going activities in a work area may lead to a determination that a surveillance or more focused follow-on review is warranted. At the completion of each walkthrough, participants discuss the findings or observations. Following each walkthrough, a summary of observations and findings (if any) are documented in the SMART action tracking system and the FacRep Log. Completion of corrective actions related to previous walkthrough findings are verified during the next scheduled walkthrough, although follow-up discussions with NBL contacts in the interim may indicate that the actions have been completed. Walkthrough observations are periodically reviewed, trends are identified, and an analysis of vulnerabilities is submitted to NBL.

### **6.3 Surveillances**

A surveillance is a focused evaluation of a program, functional area, process, or job specific task to verify that the activity is effective in protecting the safety and health of the public, workers, and the environment, conforms to procedures and best practices, and is in compliance with DOE standards and requirements. Surveillances are unscheduled, NBL may or may not be notified in advance, and generally less detailed than assessments and reviews. Documentation of the event, any findings and a summary of results are entered into the FacRep Log and the SMART action tracking system.

Corrective actions are verified as completed during the next scheduled walkthrough of the area.

## 7.0 ASSESSMENTS OF NBL

Assessments of NBL are conducted in accordance with SCMS [Quality Assurance and Oversight Management System](#), [Assessments Subject Area](#), [Procedure 2. Performing Assessments](#) and [SC-CH M 414.1C-1](#), *SC-CH Assessment Manual*. A schedule of planned assessments is available for review in the IAS/SMART database at <https://chip.ch.doe.gov/smart>.

## 8.0 PERFORMANCE EVALUATION MANAGEMENT PLAN (PEMP)

The qualitative review of performance data over extended periods of time may allow for the detection of trends or patterns that could indicate an operational concern. Performance expectations are established through the development and approval of required program documents such as QAP, ISM, and ISSM. The SC-CH Manager annually develops, negotiates, and updates performance measures and metrics in a formal PEMP. The SC-CH Manager evaluates NBL performance against the PEMP measures at mid-year and year-end. Previously conducted assessments and operational awareness activities can be a data source for such an analysis. Through the PEMP process, deficiencies are documented, brought to the attention of the NBL Director and monitored to ensure that they are addressed in a timely manner.

## 9.0 CONTINUOUS IMPROVEMENT OF NBL OPERATIONS

In the course of assessments, operational awareness activities and the PEMP process, SC-CH Senior Staff are responsible for identifying actions to improve NBL operations and performance. These opportunities for improvement are documented in walkthrough and surveillance summaries, assessment reports, and performance evaluations. This information is formally provided to NBL for resolution of deficiencies through formal reports and the structured issues management process. SC-CH Senior Staff ensure that corrective actions are verified as complete and effective at resolving the underlying causes. SCMS [Quality Assurance and Oversight Management System](#), [Issues Management Subject Area](#) provides a complete description of the processes involved in managing findings identified through oversight activities.

Use of lessons learned is an important component of the SC-CH culture that is committed to continuous improvement of both SC-CH and NBL operations. The purpose of lessons learned is to share and use knowledge derived from experience to promote the recurrence of desirable outcomes and preclude the recurrence of undesirable outcomes. The SC-CH OPEX/LL Program Coordinator forwards appropriate lessons learned and oversees the NBL OPEX/LL Program as described in SCMS [Quality Assurance and Oversight Management System](#), [Corporate Operating Experience/Lessons Learned Subject Area](#).

## 10.0 COMMUNICATION

The product of the *SC-CH Oversight Program for NBL* is knowledge. An important aspect of the oversight program is the effective communication of that knowledge with SC-CH management

and staff, SC management and DOE functional area management or staff, and NBL. SC-CH management meet at least weekly with NBL management to discuss issues and follow up on the status of NBL responses to formal SC-CH requests. SC-CH conducts weekly internal Senior Staff meetings to ensure an effective communication channel remains open within the Office. For external communications, SC-CH management uses a graded approach that considers hazards and risks to determine the appropriate technical information to be shared and the appropriate distribution. When deemed appropriate, SC-CH includes NBL operational status information in weekly reports to senior SC management.

## 11.0 EMPLOYEE CONCERNS AND DIFFERING PROFESSIONAL OPINION

When applicable, employee concerns that arise during assessments or operational awareness activities may be elevated to and processed through the SC-CH Employee Concerns Program Manager, as described in the SCMS [Human Resources Services Management System, Employee Concerns Program Subject Area](#).

Differing Professional Opinions that arise during assessments or operational awareness activities are resolved in accordance with the process described in [DOE M 442.1-1, Differing Professional Opinions Manual for Technical Issues Involving Environment, Safety and Health](#).

## 12.0 SELF-ASSESSMENT OF THE SC-CH OVERSIGHT PROGRAM FOR NBL

The Office of Safety, Technical and Infrastructure Services periodically conducts a self-assessment of the *SC-CH Oversight Program for NBL* in accordance with the SCMS [Quality Assurance and Oversight Management System, Assessments Subject Area](#), [Procedure 2, Performing Assessments](#) and [SC-CH M 414.1C-1, SC-CH Assessment Manual](#) to ensure that the program complies with DOE requirements for oversight of ES&H, safeguards and security, cyber security, emergency management and business management. Resulting issues are documented in the SMART action tracking system and monitored through completion. Selected SC-CH improvement actions resulting from the self-assessment are incorporated into the SC-CH APP as commitments to SC for the following fiscal year.

Oversight program activities are conducted, reviewed and discussed regularly by SC-CH Senior Staff. In addition to discussing ways to improve the management and operation of NBL, such discussions may uncover shortcomings in the *SC-CH Oversight Program for NBL*. Potential opportunities to improve the effectiveness and efficiency of the oversight program are presented to SC-CH Senior Staff for information, discussion and action as they arise. Suggested actions to improve the program are reviewed and approved (or disapproved) by the SC-CH Manager. Approved actions are documented in the SMART action tracking system and implemented as scheduled. This assessment process results in continuous improvement of this oversight program.

## 13.0 REFERENCES

- 13.1 [DOE P 226.1A](#), *Department of Energy Oversight Policy*
- 13.2 [DOE O 226.1A](#), *Implementation of Department of Energy Oversight Policy*
- 13.3 [DOE O 414.1C](#), *Quality Assurance*

- 13.4 [DOE O 420.1B](#), *Facility Safety*
- 13.5 [DOE M 442.1-1](#), *Differing Professional Opinions Manual for Technical Issues Involving Environment, Safety and Health*
- 13.6 [DOE P 450.4](#), *Safety Management System Policy*
- 13.7 [DOE P 470.1](#), *Integrated Safeguards and Security Management (ISSM) Policy*
- 13.8 [DOE O 470.4A](#), *Safeguards and Security Program*
- 13.9 [DOE M 470.4-6, Change 1](#), *Nuclear Material Control and Accountability*
- 13.10 [DOE-STD-1063-2006](#), *Facility Representatives*
- 13.11 SCMS [Quality Assurance and Oversight Management System Description](#) and the [Line Management Oversight Program Description](#)
- 13.12 SCMS [Quality Assurance and Oversight Management System](#) , [SC Performance Planning and Evaluation Subject Area, Procedure 1. Preparing and Reviewing the SC Annual Performance Plan](#)
- 13.13 SCMS [Quality Assurance and Oversight Management System, SC Performance Planning and Evaluation Subject Area, Procedure 2. Preparing and Reviewing the SC Annual Assessment Report](#)
- 13.14 SCMS [Quality Assurance and Oversight Management System, Assessments Subject Area](#) , [Procedure 2. Performing Assessments](#)
- 13.15 SCMS [Quality Assurance and Oversight Management System, Oversight Skills Subject Area](#)
- 13.16 SCMS [Quality Assurance and Oversight Management System, Operational Awareness Subject Area](#)
- 13.17 SCMS [Quality Assurance and Oversight Management System, Operational Awareness Subject Area, Procedure 1. Planning and Scoping Operational Awareness Activities](#)
- 13.18 SCMS [Quality Assurance and Oversight Management System, Operational Awareness Subject Area, Procedure 2. Conducting, Analyzing, Documenting, and Communicating Operational Awareness Activities](#)
- 13.19 SCMS [Quality Assurance and Oversight Management System, Corporate Operating Experience/Lessons Learned Subject Area](#)
- 13.20 SCMS [Quality Assurance and Oversight Management System, Assessments Subject Area, Procedure 1. Analyzing and Scheduling Assessment Needs](#)
- 13.21 SCMS [Quality Assurance and Oversight Management System, Issues Management Subject Area, Procedure 1. Managing Issues Identified in Oversight Activities](#)
- 13.22 SCMS [Quality Assurance and Oversight Management System, Issues Management Subject Area](#)
- 13.23 SCMS [Human Resources Services Management System, Employee Concerns Program Subject Area](#)
- 13.24 [SC-CH Order 111.1a](#), *Chicago Office Functions, Responsibilities and Authorities*
- 13.25 [SC-CH M 414.1C-1](#), *SC-CH Assessment Manual*

- 13.26 [SC-CH O 414.1C, Quality Assurance](#)
- 13.27 [SC-CH Integrated Safety Management System \(ISMS\) Program Description](#)
- 13.28 [SC-CH Annual Performance Plan](#)
- 13.29 [SC-CH Annual Assessment Report](#)

**FY 2009 Integrated Assessment Schedule**

<b>SMART Key</b>	<b>Planned Start Date</b>	<b>Planned Completion Date</b>	<b>Area</b>	<b>Summary</b>	<b>Description</b>
OS-42	12/03/07	11/03/08	Business Operations	IG-KPMG Audit of Financial Statements	Annual review of financial statements
OS-1294	01/05/09	03/31/09	Diversity Programs	EEO/Diversity Assessment	ISC EEO/Diversity assessment to identify (1) any barriers to a free and open workplace competition and (2) opportunities for targeted recruitment
OS-16	01/19/09	01/23/09	Safeguards and Security/ISSM	NBL Integrated Safeguards and Security Inspection	A documented review of safeguards and security programs to include unclassified and classified cyber security when appropriate
OS-1289	04/21/09	04/22/09	Safeguards and Security/ISSM	HSS Classification and Information Control Inspection	Data collection visit
OS-6	05/01/09	05/29/09	ES&H - Construction & Industrial Safety	Annual SC-CH Workplace Safety and Health Inspection	SC-CH organization will conduct inspections of their workplaces to identify safety and health hazards
OS-959	07/13/09	07/17/09	Information Technology	Cyber Security Program Review	Cyber Security - part of Safeguards and Security Survey
OS-13	07/13/09	07/17/09	Safeguards and Security/ISSM	Integrated Safeguards and Security Inspection	A documented review of safeguards and security programs to include unclassified and classified cyber security when appropriate

**FY 2009 Workload Indicators**

<b>Office of Acquisition and Assistance (ACQ):</b>	
Procurement Requests Received	Small Business Outreach Activities/Events
Active Awards	M&O Extend/Compete & Competitive Actions Supported
Inactive Awards	Non-M&O Actions Supported
Overaged Inactive Awards	Foreign Equipment Loans Processed
Awards Retired	Excess Property Transfers Processed
Overaged Awards Retired	Property Clearances Reviewed
Small Purchases	Labor Standards Requests Processed
Alternate Reviews	Assurance of Compliance Actions Over \$200K Processed
Independent Reviews	
<b>Office of Chief Financial Officer (CR):</b>	
Funding Allotment	Accounting Transactions
Financial Review Actions	Obligation Entries
<b>Office of Human Resources Services (HRS):</b>	
Actions Processed in CHRIS	DEU Announcements
Actions Processed in HR Workflow	Merit Promotion Announcements
Actions Processed in Training Workflow	Employees Provided Retirement Counseling
Award Nominations Processed	Retirement Calculations Computed
SF-50s Processed for Actions Generated by HQ	Classification Actions
<b>Office of Information Management Services (IMS):</b>	
Application Enhancements	Energy Employees Occupational Illness Compensation Act (EEOICPA) Actions
Number of Help Desk Calls	Records Management Actions
Applications Supported	Telephone Action Requests
Application Hosting Environment (AHE) Applications Supported	Directives
Network Modifications	MDSS Users
Laptop Maintenance	MDSS Sessions
<b>Office of Chief Counsel (OCC):</b>	
M&O Major Actions	IP Contractual Agreement Close-outs
Non-M&O Major Actions	IP Procurement Reviews
GL Procurement Reviews	Invention Disclosures Received
GL Directives/SCMS Reviews	Inventions Disposed
Other GL Reviews	Patent Applications Filed
Litigation/Administrative Proceedings	Patent Application Amendments Filed
GL 450 Reviews	Confirmatory Licenses Submitted
IP WFO Reviews	Waiver Statements of Consideration Forwarded
IP CRADA Reviews	SC-CH FOIA/PA Requests Received
Copyrights	SC-CH FOIA/PA Requests Processed
<b>Office of Safety, Technical and Infrastructure Services (STI):</b>	
Personnel Security Actions	Electricity Delivery and Energy Reliability Project Reviews/Site Visits
Days of Cyber Security Support Provided	SC Assessments Led/Participated In

Days RAP Personnel Deployed	SC Plans/Documents/Analyses Reviewed/Provided Technical Comments
Construction Grants On-site Visits	Major transactions completed by Real Estate Team
PR Packages for Construction Grants Submitted	Facilities Support Services Requests
Electricity Delivery and Energy Reliability Funding Utilization	
<b>Office of the Manager, Communications (OM-C):</b>	
SO Press Releases Reviews Coordinated	SC-CH/HQ Events/Activities Supported
SO Events/Activities Supported	SC-CH/HQ Committees/Task Force Supported
SO Committees/Task Force Supported	SC-CH/HQ Management Communications Drafted
SO Advice/ Coaching/Training	Stakeholder/Community Events Supported
SO Assistance in Performance Expectations/Reviews	Public Inquiries/Interactions
SO Management Communications Drafted	Media Inquiries/Interactions
SC-CH/HQ Advice/ Coaching/Training	Web Sites/Pages Active
<b>Office of the Manager, Diversity (OM-D):</b>	
Employee Concerns Program contacts	Events/activities supported
Employees serviced	HQ data calls responded to
EEO contacts	SO assistance in Performance Expectations/reviews