

**OFFICE OF INDEPENDENT OVERSIGHT
APPRAISAL PROCESS PROTOCOLS**



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Preface

The Office of Independent Oversight (Independent Oversight), within the Office of Health, Safety and Security (HSS), is responsible for the majority of independent oversight activities within the U.S. Department of Energy (DOE), as dictated in DOE Orders 470.2B, *Independent Oversight and Performance Assurance Program*, and 226.1, *Implementation of Department of Energy Oversight Policy*.

DOE Order 470.2B states that Independent Oversight is the DOE focal point for independent evaluation of DOE sites, facilities, organizations, and operations in the subject areas of safeguards and security; cyber security; emergency management; and environment, safety, and health (ES&H). Toward that end, Independent Oversight conducts independent oversight appraisals to identify gaps and vulnerabilities in security, cyber security, and ES&H programs and performance to prevent events that could negatively impact workers, the public, or environment. Emergency management appraisals are conducted to minimize the impacts of events should they occur. HSS nuclear security, classified information, and cyber security oversight activities directly support DOE's mission of national security by determining whether special nuclear materials and classified information are adequately protected. HSS independent oversight of safety, health, and environmental protection helps ensure that DOE sites' activities meet applicable requirements and minimize adverse events. Such events have historically caused shutdown of operations and research and thus impacted DOE's ability to perform its mission. These appraisals also provide accurate, comprehensive information and analysis regarding the effectiveness of, and trends in, DOE programs and other functions of interest. One of the major focus areas of Independent Oversight is ensuring that DOE contractors have established and implemented effective internal systems for self-identifying deficient conditions and taking appropriate corrective actions. The information is available for the Secretary, the Deputy Secretary, the Under Secretaries, the Administrator of the National Nuclear Security Administration, Congressional committees, and other stakeholders, such as unions and local public interest groups, to provide confidence that DOE missions will be performed safely and securely. Independent Oversight appraisals are designed to complement line management's responsibility for security, emergency management, and safety program oversight and self-assessments.

These appraisal process protocols are part of a continuing effort to enhance the quality, consistency, and contribution of the office's activities and products, and to describe the general process and principal activities for evaluating both the effectiveness of DOE safeguards and security, cyber security, emergency management, and ES&H policies, and of DOE line management in implementing those policies. These protocols describe the overall philosophy, approach, scope, and methods to be used by all Independent Oversight organizations when conducting independent oversight appraisals. Subordinate Independent Oversight organizations have developed and implemented specific procedures and techniques appropriate and necessary for accomplishing their unique responsibilities in the areas of safeguards and security, cyber security, emergency management, and ES&H to complement the overall processes described in this document.

These protocols have evolved through experience and have been developed to be flexible and easily adaptable as they are applied to the various policies, sites, facilities, and activities being evaluated. As part of the continuing effort to improve its process, Independent Oversight anticipates making periodic updates and revisions to these protocols in response to changes in DOE program direction and guidance, insights gained from its activities, and feedback from customers and constituents. Therefore, users of these protocols, as well as other interested parties, are invited to submit comments and recommendations to Independent Oversight for consideration.

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Acronyms

CAP	Corrective Action Plan
CATS	Corrective Actions Tracking System
CFR	Code of Federal Regulations
DNFSB	Defense Nuclear Facilities Safety Board
DOE	U.S. Department of Energy
ES&H	Environment, Safety and Health
HSS	Office of Health, Safety and Security
ISM	Integrated Safety Management
ISSM	Integrated Safeguards and Security Management
NNSA	National Nuclear Security Administration
SBU	Sensitive But Unclassified
SSIMS	Safeguards and Security Information Management System
QRB	Quality Review Board

Definitions

Appraisal: An Independent Oversight activity conducted to evaluate the effectiveness of line management performance or the adequacy of DOE policy to include inspections, safety management evaluations, special reviews, special studies, and follow-up reviews. [470.2B]

Corrective Action Plan (CAP): A document that provides, for each finding or deficiency addressed, a thorough analysis of the underlying causal factors to determine whether systemic program weaknesses exist, steps to address the cause(s) of the finding, detailed descriptions of the corrective action(s) to resolve each finding and prevent recurrence, and a general outline for the conduct of the proposed independent corrective action effectiveness review. For each corrective action, the document shows the responsible person(s) and organizations, the date of action initiation, key milestones, the date of expected completion of the action, how actions will be tracked to closure, deliverable(s) that will signify completion, and the mechanism(s) for verifying closure. A corrective action plan may also provide a detailed discussion of longer-term enhancements and upgrades, as well as descriptions of actions taken and compensatory measures already in place.

Note: For matters pertaining to cyber security, the CAP may also be referred to as a “Plan of Action and Milestones” (POA&M).

Deficiency: A deficiency is an inadequacy that is found during an appraisal that does not meet the intent of a DOE policy, Federal or state law, or other applicable requirement (e.g., contract, standard). Deficiencies may serve as the basis for one or more findings. [470.2B]

Directives: Directives include Policies, Orders, Notices, Manuals, Regulations, Technical Standards, related documents, and Guides. [470.2B]

DOE: U.S. Department of Energy. References to DOE in this protocol, unless specifically indicated otherwise, are assumed to encompass the National Nuclear Security Administration (NNSA).

Closeout Briefing: A summary of inspection results given to DOE/NNSA management and the responsible DOE/NNSA contractor(s). Closeout briefings are normally conducted by the Independent Oversight team before departing the inspected facility.

Field Element Manager: The DOE field or Headquarters manager who has line management responsibility and is directly responsible for the development of corrective action plans and the implementation of corrective actions. [470.2B]

Findings: Findings are used to indicate significant deficiencies or safety issues that warrant a high level of attention on the part of management. If left uncorrected, such findings could adversely affect the DOE mission, the environment, the safety or health of workers or the public, or national security. Findings may identify aspects of a program that do not meet the intent of DOE policy. Findings are clearly identified in the appraisal report, define the specific nature of the deficiency and whether it is localized or indicative of a systemic problem, and identify which organization is responsible for corrective actions. Findings require resolution by management through a formal corrective action process.

Imminent Danger: Conditions or practices in the workplace where a danger exists that could reasonably be expected to cause death or serious physical harm either immediately or before the abatement of such danger. [470.2B]

Integrated Safety Management (ISM): A formal, organized process whereby DOE employees plan, perform, assess, and improve the safe conduct of work in accordance with DOE Policy 450.4, *Safety Management Systems Policy*. ISM is institutionalized through DOE directives and contracts to establish the Department-wide safety management objectives, guiding principles, and functions. The system encompasses all levels of activities and documentation related to safety management throughout the DOE complex.

Integrated Safeguards and Security Management (ISSM): A formal, organized process for planning, performing, assessing, and improving the secure conduct of work in accordance with risk-based protection strategies as defined in DOE Policy 470.1, *Integrated Safeguards and Security Management (ISSM) Policy*. These systems are institutionalized through DOE directives and contracts. The ISSM system framework encompasses all levels of activities and documentation related to safeguards and security management throughout the DOE complex and includes all topical areas of safeguards and security (e.g., personnel, physical, information, and cyber security, and nuclear safeguards) and related cross-cutting areas (e.g., export control, classification, foreign visits and assignments, and foreign travel). [470.1]

Line Management: Line management refers to that portion of the Department's organization that has a linear reporting relationship extending from the Secretary to the people in the facilities directly performing the Department's missions. It is the chain of command that extends from the Secretary to the secretarial officers, to the field element managers, to the contractors and subcontractors responsible for performing work. It is distinct from DOE support organizations, such as the Office of Management, Budget and Evaluation, which also have support responsibilities and functions important to security and safety. [470.2B]

Major Vulnerability: A vulnerability that, if detected and exploited, could reasonably be expected to result in a successful attack causing serious damage to national security. [470.2B]

National Security Interests: Activities performed at DOE or DOE contractor, subcontractor, consultant, or other facilities or installations that involve classified matter, special nuclear materials, nuclear weapons, nuclear weapons components and devices, critical infrastructure, government property of high value or that would impact DOE program continuity, or otherwise are deemed important.

Nuclear Safety: Designs, conditions, and abilities of a nuclear facility and its operating staff to prevent uncontrollable development of fission reactions; to prevent or minimize, to the maximum extent practicable, releases of radioactive substances or ionizing radiation into the working or living environment; and to mitigate the consequences of accidents and incidents. This covers nuclear reactors as well as all non-reactor nuclear facilities, the transportation of nuclear materials, and the use and storage of nuclear materials.

Opportunities for Improvement: Opportunities for improvement are suggestions offered by the Independent Oversight appraisal team that may assist line management in identifying options and potential solutions to various issues identified during the conduct of the appraisal. Opportunities for improvement are outlined in the technical appendices to the appraisal report for line management

consideration. Opportunities for improvement are not mandatory, and they do not require formal resolution by management through the corrective action process.

Performance Tests: Activities conducted to evaluate all or selected portions of safeguards and security systems or cyber security, emergency management, or ES&H, programs as they exist at the time of the test.

Policy: The term “DOE policy” or “policy” when used in lower case in this document is meant to include all documents describing the philosophies, fundamental values, administration, and operation of the Department. [470.2B]

Programmatic Review (Cyber Security Appraisals): The programmatic review represents the combined evaluation of data collected during the inspection, which includes examination of policy and documents, conduct of structured interviews with key personnel, review of data centers, sample of work stations, and the overall assessment of the management, operations, and technical controls that implement the cyber security program for a selected DOE site office or contractor site.

Ratings: Ratings are indicators of management system performance levels. The three ratings are: Effective Performance (green), Needs Improvement (yellow), and Significant Weakness (red). [470.2B]

Safety Issue: A safety issue defines a condition that, if left uncorrected, could adversely impact the environment, the safety and health of workers or the public, or the DOE mission. Under DOE Order 470.2B, *Independent Oversight and Performance Assurance Program*, and DOE Order 414.1C, *Quality Assurance*, conditions warranting corrective actions are reported as findings. [470.2B]

Secretarial Officer: The Assistant Secretary/Director responsible for a set of facilities or laboratories (e.g., Lawrence Livermore National Laboratory or Test Reactor Area at Idaho National Laboratory) within a multi-program field office.

Targeted Nuclear Safety Inspections: Smaller-scale inspections designed to address one or more specific nuclear safety review areas such as construction, safety basis development and adequacy, implementation of technical safety requirements, transportation, radioactive waste management, quality assurance, procurement, conduct of operations, design and system engineering, safety system maintenance, and other nuclear safety topical areas.

Validation: The process by which Independent Oversight ensures the factual accuracy of collected data and ensures that identified deficiencies, and their impacts, are effectively communicated to responsible managers and organizations.

Section 1 – Introduction

Vision

Independent Oversight’s vision is to provide sustained support to the DOE mission by stimulating improvements in U.S. Department of Energy (DOE) safeguards and security, cyber security, emergency management, and environment, safety, and health (ES&H) programs by providing the Secretary of Energy, senior DOE managers, and other stakeholders with independent, objective, accurate, timely, and credible information regarding the status and effectiveness of those programs; and to assist line management in the performance of its responsibilities by identifying potentially useful and effective program improvements.

Mission

Independent Oversight’s mission is to provide the Secretary of Energy, senior DOE managers, and other stakeholders with an independent assessment of the effectiveness of DOE policy and performance in the areas of safeguards and security, cyber security, emergency management, ES&H, and other critical functions, such as nuclear safety, as directed by the Secretary. This effort is designed to support all mission areas of the Department, including research and development, in a manner that promotes innovation and efficiency, while at the same time providing necessary assurances for the health and safety of workers, the public and environment and the security of national security assets. Independent Oversight is the exclusive focal point for independent evaluation of DOE sites, facilities, organizations, and operations in the subject areas of safeguards and security, cyber security, emergency management, and ES&H. Authority is established by DOE Order 470.2B, *Independent Oversight and Performance Assurance Program*, as well as other DOE directives (e.g., DOE Order 226.1, *Implementation of Department of Energy Oversight Policy*; DOE Order 151.1C, *Comprehensive Emergency Management System*; and DOE Guide 450.4-1B, *Integrated Safety Management System Guide*) that identify responsibilities for oversight in the areas of safeguards and security, cyber security, emergency management, and ES&H.

Organization

Independent Oversight is structured to meet mission requirements and consists of the Office of the Director, Independent Oversight, and four subordinate offices:

- Office of Security Evaluations
- Office of Cyber Security Evaluations
- Office of Emergency Management Oversight
- Office of ES&H Evaluations.

Independence

Independent Oversight is charged with the independent oversight of safeguards and security, cyber security, emergency management, and ES&H programs throughout the Department. Independence is assured by a direct reporting relationship to the Secretary of Energy, outside any line management reporting chain, through the Office of the Chief Health, Safety and Security Officer. Further,

Independent Oversight does not have any direct responsibility for facility operations, protection program management, information systems management, or policy formulation.

Independent Oversight exercises independence in the conduct of inspections. Scheduling of inspections is independent of line management, although valid concerns of site and DOE management are accommodated whenever possible. Evaluations are performance-based assessments of how sites implement the requirements established in DOE orders and directives, with an emphasis on the effectiveness of the program elements. Independent Oversight also provides feedback on the effectiveness of orders and directives and whether they adequately establish effective program requirements. Consequently, Independent Oversight uses the professional judgment of experienced inspectors to provide an overall evaluation of safeguards and security, cyber security, emergency management, and ES&H program status, including the impact of orders and directives governing implementation.

Roles and Responsibilities

Responsibilities for conducting the Independent Oversight program are distributed, largely along topical lines, to the subordinate offices.

Office of the Director

The Director, Independent Oversight, and a small staff provide strategic direction (e.g., setting priorities, establishing policies, approving appraisal plans and schedules, administering the office, and developing and maintaining the necessary infrastructure) and quality management (e.g., reviewing and approving reports, ensuring effective validation processes, and establishing Quality Review Boards). This office also provides communication, coordination, and feedback with the Secretary; the Deputy Secretary; the Chief Health, Safety and Security Officer; and other senior DOE managers to identify issues and concerns and to support interface with DOE operations offices and field elements, congressional staff, and other stakeholders.

Specifically, the Director:

1. Develops and maintains DOE safeguards and security, cyber security, emergency management, and ES&H independent oversight policies, procedures, standards, and guidelines.
2. Advises appropriate site and Headquarters managers promptly (within 24 hours) of major vulnerabilities or imminent danger identified during appraisal activities.
3. Briefs senior DOE officials, including the Under Secretaries; Secretarial Officers; the Chief Health, Safety and Security Officer; DOE policy organizations; and field element managers of DOE sites, on the results of appraisal activities.
4. Coordinates with the DOE Inspector General when appraisal activities identify concerns that may have criminal or waste/fraud/abuse implications.
5. Directs, manages, and conducts the safeguards and security, cyber security, emergency management, and ES&H independent oversight programs.

6. Coordinates the scheduling, notification, and planning of appraisals with appropriate secretarial officers and field element managers.
7. Coordinates with the applicable DOE policy organization (e.g., the Office of Emergency Operations, the National Nuclear Security Administration, and the Office of the Chief Information Officer) to resolve policy findings or deficiencies in safeguards and security, cyber security, emergency management, or ES&H and to ensure accurate interpretation of requirements.
8. Provides DOE managers with independent evaluations of safeguards and security, cyber security, emergency management, and ES&H policies, programs, and implementation. Evaluations may be provided in various written formats (e.g., inspection, management evaluation, special study, special review, targeted nuclear safety inspection, and follow-up review reports).
9. Develops and maintains protocols for conducting appraisals of safeguards and security, cyber security, emergency management, and ES&H. These protocols address appraisal priorities, frequency, and scheduling; appraisal planning; data collection, analysis, and validation methods; development of ratings, findings, and opportunities for improvement; report preparation; and follow-up activities, as appropriate.
10. Ensures that subsequent appraisal activities review the effectiveness of corrective actions and confirm that findings are appropriately closed.
11. Coordinates with the HSS Office of Enforcement when appraisal activities identify any potential non-compliance with rules, consistent with the Price-Anderson Amendments Act; Title 10 Code of Federal Regulations (CFR) 824, *Procedural Rules for the Assessment of Civil Penalties for Classified Information Security Violations*; and 10 CFR 851, *Worker Safety and Health Program*.
12. Maintains awareness of the status of findings and ratings identified during appraisals.
13. Cooperates with the Defense Nuclear Facilities Safety Board (DNFSB), including ready access to appraisal results, and responds to DNFSB inquiries and recommendations, as applicable.

Subordinate Offices

The following Independent Oversight responsibilities are common to each of the subordinate offices in the performance of independent oversight activities associated with their specific subject area:

- Developing and maintaining detailed program plans, guides, procedures, and protocols as necessary to assist in accomplishing subject-specific missions and responsibilities
- Conducting independent evaluations of DOE sites, facilities, organizations, and operations in subject-specific programs
- Developing and publishing final reports of the results of independent evaluations
- Coordinating with the applicable DOE policy organization to resolve policy findings or deficiencies and to ensure accurate interpretation of requirements

- Evaluating DOE policies related to subject-specific programs
- Performing ongoing analyses to identify trends and emerging issues in subject-specific programs
- Reviewing and commenting on the adequacy of corrective action plans developed to address findings identified in Independent Oversight appraisal reports, and ensuring that the comments are resolved or elevated to a higher organizational level for resolution—to the Deputy Secretary or the Secretary, if necessary
- Performing follow-up reviews as appropriate to evaluate progress in implementing effective corrective actions
- Performing complex-wide, cross-cutting studies of subject-specific program issues of interest
- Identifying opportunities for improving subject-specific program performance
- Reviewing other governmental and commercial subject-specific programs to provide benchmarks for DOE performance
- Providing resources, as necessary, to participate in special reviews.

Office of Security Evaluations

The Office of Security Evaluations is responsible for the independent evaluation of the effectiveness of safeguards and security policies and programs throughout the Department, including protection of special nuclear material, protection of classified and sensitive information, and foreign visits and assignments. The office develops and validates reports that identify findings, strengths, weaknesses, and opportunities for improvement. It also performs follow-up reviews to ensure that corrective actions are effective and that complex-wide issues and generic weaknesses in safeguards and security are appropriately addressed. The programs that are evaluated generally include the following functional areas:

- Protection program management
- Personnel security
- Physical security systems
- Nuclear material control and accountability
- Classified matter protection and control
- Protective force
- Classification and information control.

In addition to the generic responsibilities for all Independent Oversight subordinate offices, specific independent oversight responsibilities for the Office of Security Evaluations include:

- Performing periodic appraisals of safeguards and security programs, including the conduct of performance testing at DOE sites possessing significant amounts of special nuclear material, classified information, or other national security interests
- Maintaining the Composite Adversary Team used to perform force-on-force performance exercises

- Performing special reviews of specific or cross-cutting safeguards and security topics of interest to the Department.

Office of Cyber Security Evaluations

The Office of Cyber Security Evaluations is responsible for the independent evaluation of the effectiveness of classified and unclassified computer security policies and programs throughout the Department. The office analyzes cyber security trends and studies complex-wide issues in order to provide feedback on essential information assurance practices at DOE sites. Activities are frequently integrated with the Office of Security Evaluations when conducting cyber security inspections that also include physical and classified information security aspects.

In addition to the generic responsibilities for all Independent Oversight subordinate offices, specific independent oversight responsibilities for the Office of Cyber Security Evaluations include:

- Performing periodic appraisals (announced or unannounced) of classified and unclassified cyber security at DOE sites
- Maintaining a continuing program of remote testing to identify DOE network vulnerabilities through scanning and penetration testing
- Conducting annual evaluations of classified information security programs and providing input for the annual evaluation of unclassified information security programs for DOE as required by the Federal Information Security Management Act
- Evaluating the effectiveness of cyber security tools, when needed
- Performing special reviews of specific or cross-cutting cyber security topics of interest to the Department.

Office of Emergency Management Oversight

The Office of Emergency Management Oversight is responsible for regular independent assessments of DOE emergency management policies and programs, including assessing the completeness of the program foundation analyses, pre-determined protective actions, and interfaces and coordination with external organizations and the public. The office determines the effectiveness of program offices' monitoring of emergency preparedness and performance at DOE sites and facilities.

In addition to the generic responsibilities for all Independent Oversight subordinate offices, specific independent oversight responsibilities for the Office of Emergency Management Oversight include:

- Performing periodic appraisals of emergency management programs at DOE sites that have significant amounts of radiological, chemical, and/or biological hazardous materials
- Evaluating emergency management exercises conducted by DOE Headquarters and/or DOE facilities

- Participating in security and ES&H appraisals when appropriate to ensure that emergency management issues are considered in the context of those programs
- Performing special reviews of specific or cross-cutting emergency management topics of interest to the Department.

Office of Environment, Safety and Health Evaluations

The Office of ES&H Evaluations evaluates ES&H programs, integrated safety management (ISM) performance, and nuclear safety throughout the Department to determine the status and to provide feedback to line management for needed improvements. These activities are undertaken to ensure adequate protection of the public, workers, and the environment at DOE sites. A sampling approach is used, designed to evaluate the performance of ES&H programs in protecting workers, the public, and the environment from hazards associated with DOE sites and operations. Inspections generally include the following functional areas:

- Implementation of the core functions of ISM at the activity level
- Status of nuclear safety at DOE nuclear facilities, including functionality of vital safety systems and other nuclear safety programs and functions.
- Selected focus areas that are of interest due to known performance deficiencies, high risks, or recent changes in requirements
- Line management feedback and improvement processes.

In addition to the generic responsibilities for all Independent Oversight subordinate offices, specific independent oversight responsibilities for the Office of ES&H Evaluations include:

- Conducting periodic appraisals (e.g., ISM evaluations) of ES&H programs at DOE sites
- Performing special reviews of specific or cross-cutting ES&H topics of interest to the Department.
- Conducting targeted nuclear safety inspections, including inspections of design and construction of new facilities and significantly modified nuclear facilities as identified by the need for a DOE operational readiness review in accordance with DOE Order 425.1C, *Startup and Restart of Nuclear Facilities*.

Interface with Other Organizations

Independent Oversight places significant emphasis on working with policy organizations, Headquarters program offices, and field organizations to ensure that identified deficiencies are adequately addressed. This approach has met with considerable success because of the combined effort of DOE field and Headquarters organizations and the support of senior DOE management. Independent Oversight also interfaces with organizations external to DOE, such as Congress, the Nuclear Regulatory Commission, and the DNFSB.

Section 2 – Independent Oversight Appraisals

Introduction

The Independent Oversight appraisal program provides a disciplined and consistent process for monitoring, evaluating, and reporting the status of the implementation of safeguards and security, cyber security, emergency management, and ES&H programs within DOE. The process has been developed and refined over time and tested through repeated use during many different types of assessments. This document describes the essential elements of that process, all of which are closely tied to established Independent Oversight appraisal goals and philosophy.

These appraisal process protocols provide an overview of the Independent Oversight process that is applicable to all the subordinate organizations when conducting Independent Oversight appraisals. The subordinate offices maintain more detailed program plans, guides, procedures, and protocols as necessary to assist in accomplishing their specific missions and responsibilities.

Appraisal Scope

Independent Oversight conducts oversight activities for the entire Department, including the National Nuclear Security Administration (NNSA), except for the following (unless otherwise stated):

- Naval Nuclear Propulsion Program
- Bonneville Power Administration.

Independent Oversight conducts independent oversight activities regarding all aspects of Departmental safeguards and security, cyber security, emergency management, and ES&H programs except for the following:

- For aviation safety, independent oversight is performed by the Office of Aviation Management within the Office of Management.
- For nuclear explosives safety, independent oversight is performed by NNSA.
- For water impoundment structures and dams, independent oversight of structural integrity is performed by the Federal Energy Regulatory Commission (FERC) via a memorandum of agreement managed by HSS.

Appraisal Types

All Independent Oversight activities are designed to satisfy its mission requirements. The office's oversight function is "independent" from DOE's line program offices (line management) in that the office has no responsibility for operations or programs, policy development, or technical support to line managers.

The Independent Oversight appraisal program includes a number of activities, collectively referred to as appraisals, related to evaluating DOE policy and DOE and contractor line management performance in the areas under its purview. Appraisals can generally be grouped into four types of activities: (1) inspections, (2) follow-up reviews, (3) special studies, and (4) special reviews.

Inspections

Inspections are the primary tool for assessing the adequacy of DOE policies and the effectiveness of policy implementation. Periodic inspections are scheduled activities that determine the adequacy of program performance at a specific site or location. They are broad in their program coverage and technical span, and include performance testing to the greatest extent possible. Targeted nuclear safety inspections are usually a component of periodic inspections at sites with nuclear facilities. Special inspections are usually more limited in scope than periodic inspections, often focusing on a limited number of program elements, and may include major performance tests, evaluation of site emergency response exercises, unannounced inspections, remote scanning or penetration tests of cyber security capabilities, targeted nuclear safety inspections, or other inspection activities that may be required on a one-of-a-kind basis. A validated report is published for each inspection, findings are identified, and program performance is typically rated according to the Independent Oversight rating system, described in Section 5 of this document. When appropriate, needed improvements are identified. Proposed corrective actions are reviewed for adequacy, and findings and associated corrective actions are tracked for subsequent follow-up.

Follow-up Reviews

Follow-up reviews are conducted to determine the status and progress of corrective actions and other activities taken in response to deficiencies previously identified by Independent Oversight appraisals. Ratings may or may not be assigned as a result of follow-up reviews.

Special Studies

Special studies are conducted to address concerns that transcend performance at a specific site or location. They might address the effectiveness of program elements as implemented across DOE by analyzing complex-wide program issues, or they might analyze the implementation of a specific policy item throughout the complex. Special studies are also performed to address an area, concern, deficiency, or weakness within a program, and might focus on the status of a specific program element, the adequacy of specific policies, or the implementation status of specific policies throughout DOE. Additionally, special studies might address areas outside safeguards and security, cyber security, emergency management, or ES&H that affect those programs. A report containing conclusions and recommendations is published for each special study; however, ratings are not normally assigned.

Special Reviews

Special reviews are conducted at the request of the Secretary or other senior DOE managers, often on a “rapid response” basis, to provide specific needed information about safeguards and security, cyber security, emergency management, ES&H, or other critical DOE functions. Alternatively, Independent Oversight may propose special reviews on its own initiative if a need to do so is perceived.

Appraisal Goals

The goals of Independent Oversight appraisals are to:

- Determine whether the implementation of safeguards and security, cyber security, emergency management, and ES&H and nuclear safety programs meet the requirements established by DOE policy and whether those programs are effective.
- Determine whether DOE policies and policy guidance in the areas of safeguards and security, cyber security, emergency management, and ES&H are effective.
- Assess the impact of identified deficiencies, taking into account mitigating factors, compensatory measures, and current or planned corrective actions.
- Determine the status of actions relative to previously identified deficiencies.
- Present potential enhancements for consideration for strengthening implementation of safeguards and security, cyber security, emergency management, and ES&H programs or addressing identified deficiencies.

Appraisal Philosophy

To accomplish its mission and achieve its goals, each Independent Oversight appraisal employs a set of carefully developed and experience-based principles.

- 1. Planning is the foundation of all appraisals.** Detailed and coordinated planning must precede all appraisals and must continue through the conclusion of each appraisal.
- 2. Coordination with DOE Headquarters elements and the field is essential.** The ultimate objective of the Independent Oversight appraisal program is to improve DOE's performance, and can best be achieved through coordination and openness at all levels.
- 3. The review of policies must be performed from a holistic and practical perspective.** In determining the adequacy of DOE policies, Independent Oversight considers such things as whether the policy sufficiently defines expectations, the expectations are clearly articulated, and the requirements are able to be implemented in real-world conditions. Independent Oversight maintains a strong dialogue with applicable policy organizations to ensure an in-depth understanding of the intent of policy as part of evaluating its effectiveness.
- 4. Program reviews must be based on established standards.** National standards established by Congress, DOE, and other executive agencies are the basic requirements with which DOE programs must comply. DOE policy is promulgated through DOE directives. Other national standards are exemplified by applicable public laws, regulations, executive orders, and other directives. Local standards are those imposed by local DOE site offices, the facility contractor, or subordinate contractors responsible for administering programs within their areas of operation. Local standards usually pertain to site-specific implementation of national requirements, but may impose more stringent requirements. These types of standards are promulgated through DOE site office implementing instructions, contractor procedures, site safeguards and security

plans, cyber security program plans, ISM plans and procedures, and emergency plans. Independent Oversight reviews use appropriate local standards to evaluate programs, especially if they differ from or cover areas not addressed by national requirements.

5. **Policy and program reviews must be fair, reasonable, factual, and balanced.** Independent Oversight strives to be fair, reasonable, factual, and balanced in conducting appraisals and interpreting how DOE policies and standards are applied to specific programs. All data used in the evaluation process are validated at multiple levels to ensure correctness.
6. **Performance is the most accurate indicator of a program's effectiveness.** Whenever possible, Independent Oversight utilizes existing performance indicators and conducts performance tests to assess the adequacy of a program or program element. Through the review of performance data and performance test results, Independent Oversight determines the effectiveness of a program in implementing the intent and objectives of DOE policy.
7. **Appraisals must provide meaningful, accurate, and current information.** The reports developed as a result of Independent Oversight appraisals must clearly present the results of the appraisal, identifying and analyzing the impacts of strengths and weaknesses. Additionally, when possible and appropriate, potential opportunities for improvement are identified for consideration.
8. **The cooperation and assistance of field elements are essential in conducting thorough, efficient, and fair appraisals.** Local representatives provide detailed site and system knowledge for planning; arrange administrative and logistical support; expedite data collection activities; and identify the local points of contact who participate during scoping, planning, data collection, validation, and closeout activities. Relationships between Independent Oversight and local representatives should be cordial, open, and professional. However, the role of local representatives must remain limited to providing assistance, with Independent Oversight determining the scope of activities and the techniques to be employed.
9. **The qualifications of Independent Oversight appraisers are of paramount importance.** It is essential that appraisal team members be knowledgeable of applicable standards, technically competent in their assigned areas, cognizant of Independent Oversight philosophies and goals, and able to successfully perform all necessary functions related to their appraisal responsibilities. Independent Oversight training programs are intended to maintain and continually improve mission performance.

Appraisal Phases

All appraisals can be characterized by four major activities or phases.

1. **Planning (including scoping).** The planning phase includes those activities necessary to prepare for all aspects of an appraisal, both on and off site. These activities include coordination within Independent Oversight and with DOE and contractor entities, as applicable; research of facilities and topical areas to be reviewed; document requests from the site and other DOE organizations; logistical arrangements; information technology resource reviews; security aspect considerations; and similar considerations. When an appraisal will not include all activities at a

site, onsite scoping activities may be conducted to identify which operations or facilities will be the subject of the review.

2. **Conduct (including validation).** The conduct phase includes that portion of the appraisal principally devoted to collecting and validating data obtained through interviews, review of reports and other operating data, observations of operations, and specific performance testing, such as tabletop and force-on-force exercises. Although the majority of data collection activity is performed on site, some activities may be accomplished via document reviews at remote locations. Collected data is validated on a continuous basis via cross-referencing sources and other means.
3. **Closeout.** The closeout phase involves data integration and analysis, deficiency and finding identification, rating determination (if applicable), draft report preparation and quality review, and management briefings. For inspections, most of this phase is conducted at the site or facility being reviewed.
4. **Follow-up.** The follow-up phase includes review and comment on the draft report, and final report preparation. For many appraisals, this phase also includes Headquarters briefings, corrective action plan reviews, and corrective action tracking.

Although these phases are identified by the primary activities they encompass, actual component activities may overlap significantly. For example, data may be collected during the planning phase, and planning (particularly for performance testing) can extend into the data collection phase. Similarly, analysis begins during data collection and continues throughout the process. Subsequent sections of this document describe the activities and expectations associated with these major appraisal phases.

Security Standards of Conduct

Independent Oversight appraisal team personnel often handle classified and sensitive but unclassified (SBU) documents and information while conducting appraisals. The information and documentation may be provided by the Office of Independent Oversight, reviewed as part of the oversight activity process, received from the facility being visited, or generated by appraisal team members. Additionally, team members may use classified word processing, scanning, copying, and destruction equipment in performing such duties as recording data and writing reports. Team members are frequently required to access security-sensitive work areas where certain electronic equipment and other prohibited items must not be introduced.

While working at DOE Headquarters facilities and field sites, team members are expected to comply with security-related postings and placards that indicate the boundaries of limited security areas as well as prohibited articles. Team members are required to comply fully with all applicable DOE and local security policies and requirements, such as restrictions on the introduction and use, in sensitive security or limited areas, of prohibited and controlled articles such as personal digital assistants, thumb drives, cell phones, and pagers. Additionally, team members also are expected to comply with all information security and cyber security policies on the use of classified and unclassified computers and the control and handling of documents containing classified or SBU information.

Professional Conduct and Relations with Site and Headquarters Personnel

As stated in the appraisal philosophy section above, the cooperation and assistance of representatives of inspected organizations, whether at Headquarters or in the field, are crucial in conducting a successful appraisal. Independent Oversight appraisals evaluate line management at the DOE Headquarters, DOE field element, and facility contractor levels. Appraisal team personnel are required to maintain the highest standards of conduct when dealing with representatives of line management, including supervisors, managers, and other personnel encountered during appraisal activities. Professional conduct and other guidelines regarding relationships with personnel subject to oversight appraisals are explained in more detail in Appendix A.

Interested DOE Headquarters organizations (such as the Office of the Chief Information Officer, the Office of Emergency Management, NNSA, and program offices)—which may or may not be in the line management chain—often send representatives to observe Independent Oversight appraisal activities. Because Independent Oversight appraisals are conducted openly, appropriate participation by such organizations is welcomed. Such representatives are encouraged to participate as observers—on a non-interfering basis—in such activities as tours, meetings, and other appropriate data collection activities; however, they are not members of the appraisal team. Appraisal team daily meetings are usually conducted without non-appraisal-team representatives.

Field Augmentation Program

Independent Oversight has implemented a field augmentation program that utilizes subject matter experts from DOE field elements and site contractors as members of Independent Oversight inspection teams and has made this program a normal part of the Independent Oversight process. The positive aspects of this program to the Department and Independent Oversight are that it:

- Provides augmentees (and through them, their managers and sites/organizations) with insight into Independent Oversight's performance-based evaluation approach that can be taken back to their sites and used to improve local survey and self-assessment programs
- Enhances working relationships between Independent Oversight inspectors and site personnel
- Facilitates increased intersite exchange of approaches, practices, and procedures when augmentees view inspected site operations and/or discuss home site operations with inspectees
- Allows Independent Oversight to take advantage of the considerable subject matter expertise and experience that resides in the field
- Broadens Independent Oversight's perspective (i.e., adds field perspective) in identifying and analyzing potential issues.

The following general program concepts are followed to ensure the integrity of the Independent Oversight process:

- Augmentees are be volunteers who are recommended by field element and contractor managers and who are selected and approved for participation by Independent Oversight.

- Augmentees are restricted from participation in inspections of their own sites or organizations; contractor augmentees are further restricted from participating in inspections of other sites operated by their employers.
- Augmentees are fully integrated into inspection teams and fully participate as members of the topic team to which they are assigned.

Section 3 – Appraisal Process Planning

Introduction

Planning within Independent Oversight is a long-range and continuous process, involving a myriad of activities and essentially all staff members. Thorough planning at the strategic, program, and individual appraisal level is the foundation of the Independent Oversight program.

This section outlines Independent Oversight's general planning processes and responsibilities for the development of the Independent Oversight appraisal schedule and for conducting individual appraisal activities. Additional details regarding program-specific planning processes are contained within the subordinate offices' program documentation.

Strategic and Program Planning

It is the goal of Independent Oversight to ensure that its appraisal activities are able to focus on Departmental facilities and programs that have high-value assets, high-risk operations, and/or conditions that have the potential to cause the Department and/or the United States irreparable harm, while maintaining assurance of the overall effectiveness of security and safety programs across the entire Department. Independent Oversight's protocol addressing site prioritization and appraisal scheduling process is outlined in Appendix B, which also includes current Independent Oversight site priority designations.

Strategic planning is the responsibility of the Director, Independent Oversight, with input from the directors of the subordinate offices. Strategic planning involves taking a long view of evolving threats and conditions and adjusting the organization's resources, processes, capabilities, and schedules to meet the strategic needs of the office and the Department. For example, the increasing number of cyber security attacks against DOE computer networks and the desire of terrorist groups to obtain special nuclear, radiological, chemical, and biological materials for use in attacks against U.S. targets require Independent Oversight to enhance its capabilities, employ new techniques, and reassess site priority designations.

Scheduling of major activities, such as cross-cutting special reviews, also requires coordination at the Director, Independent Oversight level. Several factors make this necessary: the nature and scope of some activities require the subordinate offices to support each other with both Federal staff and contractor personnel; there is a finite pool of essential computer equipment used by all subordinate offices; and the Independent Oversight philosophy encourages integrated inspections and close coordination of site visits to minimize the impact on site operations. For these reasons, the Director, Independent Oversight ultimately determines priorities and the allocation of resources.

Appraisal Planning

Thorough planning is the foundation of all appraisals. It is the goal of Independent Oversight to anticipate every action necessary to meet mission requirements and conduct the highest quality appraisals possible with the available resources. Appraisal planning requires the gathering and analysis of large amounts of information from many sources, decision-making based on that analysis, and appraisal preparation based on those decisions. The quality of planning significantly affects all other appraisal

phases. Because limited amounts of time and other resources are available for planning, these efforts must be focused and efficient.

This section outlines Independent Oversight’s planning process for appraisals and the general distribution of planning responsibilities. While the directors of subordinate organizations establish detailed planning requirements and procedures to meet their specific needs, those fall within the scope of the general process outlined here. The overall planning process described within these protocols is applicable to all appraisals regardless of the nature of the appraisal—inspection, assessment, special study, or other—or the size of the team involved. Planning requirements may vary in magnitude for different activities, but the essential elements of planning do not.

Management Planning

Management planning responsibilities are continuous throughout an appraisal’s cycle. Most of the early planning requirements are management responsibilities (rather than team planning responsibilities). Once an appraisal has been approved and tentatively scheduled, the director of the responsible office initiates planning activities, which may include:

- Contacting the affected sites and organizations to begin ongoing coordination
- Determining the tentative scope and focus of the appraisal
- Developing and coordinating a site visit schedule with the site(s)/organization(s) to be visited
- Identifying documents and other information that will be needed for more detailed planning through a data call to the organization(s) being assessed
- Conducting an initial review of available information to assist initial decisions regarding activity scope and focus
- Identifying and acquiring the personnel resources to accomplish both the technical and administrative support aspects of the appraisal, including determining whether participants in Independent Oversight’s field augmentation program (see Section 2) will be included on the appraisal team
- Identifying and satisfying logistics needs, such as onsite workspace, hotel accommodations, computer and other equipment support, and visit requests and access authorizations
- Directing and overseeing team planning activities at team planning meeting(s) or site planning visit(s)
- Overseeing necessary ongoing planning throughout the course of the appraisal.

The results of management planning activities, with appropriate input from appraisal team planning activities, are used to create a formal plan for the conduct of the appraisal. Because planning is continuous throughout an appraisal, the formal plan is a “living document,” subject to modification as the activity progresses. A sample Independent Oversight inspection plan is shown in Appendix C.

Team Planning

Detailed planning for data collection activities—the essence of all Independent Oversight appraisals—typically begins once the team has been established and continues through initial visits to the site. For some appraisal activities, Headquarters planning meetings may be convened if necessary based on the judgment of the team leader. During the course of planning, the team will normally be expected to:

- Become familiar with the results of previous appraisal activities.
- Review the objectives and proposed parameters of the appraisal, and any management guidance and expectations.
- Review and analyze available documentation.
- Walk through key facilities at the site.
- Conduct preliminary interviews with DOE and contractor field element and facility managers.
- Meet with stakeholders, as appropriate.
- Contact and conduct appropriate information exchanges with representatives from Headquarters and field personnel.
- Recommend any modifications to activity scope and focus resulting from planning activities.
- Determine appropriate data collection methods and develop detailed data collection plans, including any necessary performance test plans, safety plans, etc.
- Develop a schedule of data collection and related activities.
- Identify additional information and support requirements, and communicate them to the appropriate individuals or organizations.
- Brief or otherwise inform managers of planned activities.

Much of the detailed planning for an appraisal is accomplished before the appraisal team arrives on site, but it should be recognized that planning is an ongoing effort and may continue well into the conduct phase of the activity. Both managers and team members are expected to remain flexible and ready to modify plans in response to unexpected circumstances that may arise during any phase of an appraisal.

Section 4 – Conducting Appraisals

Introduction

The conduct phase of an appraisal normally encompasses that period when most of the needed data is collected. This may consist of a concentrated effort during a relatively short period of time, as during an inspection, or it may occur over an extended period, as in some assessments or special studies. For some types of appraisals (e.g., inspections), the conduct phase takes place almost exclusively on site at the inspected facility; for other types of activities, such as cyber security scans and penetration tests, team members may be located remotely from the subject site. The conduct phase is tailored to the unique needs and objectives of each specific appraisal. This stage is crucial to the success of an appraisal because during this stage, team members collect most of the information upon which they will base their analyses and conclusions (and ratings and recommendations, when appropriate).

This section addresses the goal and scope of appraisal conduct, data collection methods, data validation procedures, and important related topics.

Goal

The goal of conducting an appraisal is to accomplish all planned data collection activities in a fair, impartial, professional manner and to validate the technical accuracy of the data collected.

Scope

Data collection activities generally follow the plans and schedules developed during the formal planning process. Team members normally focus on accomplishing planned activities; however, data collection activities can be adjusted to accommodate changing conditions. For example, early data collection results may necessitate reduced or expanded activities in planned areas of emphasis and investigation of areas not originally identified for review. Issues or potential issues that become apparent during the course of data collection are not ignored simply because they were not included in formal planning.

Data Collection

Since data is critical to a successful appraisal, it is essential that sufficient amounts of accurate, pertinent data be collected. To achieve this, it is important to employ the appropriate data collection methods. Five basic methods of data collection are available to team members: document reviews, interviews, observations, knowledge tests, and performance tests. Since each of these methods has inherent strengths and limitations, the specific methods employed must be carefully selected and used in combination with each other to ensure that all necessary data is collected and cross-checked.

Document Reviews

Document reviews are a basic method used in virtually every appraisal. Every DOE program that is reviewed normally has associated with it policy guidance, procedures, records, and other information in documentary form. Even in preparation for employing other data collection methods, such as performance tests, document reviews are usually essential. Document reviews are not limited to paper documents; information in computer databases, computer system directories, and automated logs of computer activity are included in this category.

Interviews

Interviews can provide useful data that is not readily available from other data collection methods. Interviews are most effective in determining perceptions and individual understanding of policies, procedures, duties, and management expectations. While both formal and informal interview techniques may be employed, deliberate preparation is necessary before any interview. Interview techniques are discussed in Appendix D.

An Independent Oversight Federal staff member should normally be present whenever a Federal manager is being interviewed; an Independent Oversight team leader or office director should be present when a senior Federal or contractor manager is interviewed.

Observations

Observations allow team members to see how personnel actually do their jobs and to evaluate their performance under normal conditions. Such observations provide valuable data about whether personnel follow established procedures, operate equipment properly, etc. However, under some conditions the observer's very presence may skew the performance being observed; consequently, observations are made judiciously and are best used to complement or round out data obtained from other sources. Observations can also be useful in determining how systems and equipment are designed, installed, operated, and maintained.

Knowledge Tests

Job knowledge may be best assessed through various techniques including interviews, observations, and performance tests. However, formal knowledge tests—particularly written tests—are an efficient and time-saving way to determine whether a large number of people possess a specific body of knowledge. Knowledge tests may be written or oral, or a combination of the two, and appropriate sampling techniques are used in selecting personnel to take the tests. Knowledge tests are developed in conjunction with site subject matter experts to ensure that they are fair and factually accurate. Team members understand that knowledge tests indicate only whether personnel are knowledgeable in certain areas, not whether they can apply that knowledge or perform related duties.

Performance Tests

Performance testing is one of the most valuable data collection methods available, and is preferred over knowledge testing. In contrast with knowledge testing, performance testing is designed to determine whether personnel have the skills and abilities to perform their duties, whether procedures work, and whether systems and equipment are functional and appropriate. Virtually any skill, duty, procedure, system, or item of equipment can be performance tested. Performance tests may vary in complexity from simple limited-scope testing (e.g., tabletop) to more complicated facility- or site-level exercises.

Some tests can be conducted under completely normal conditions, where the subject is unaware of the testing (e.g., cyber security penetration testing). Other tests must be conducted under artificial conditions, although maximum realism is always a primary consideration (e.g., force-on-force exercises). While most performance tests must, by their very nature, be conducted on site, some tests, such as cyber security scans and penetration tests, may be conducted from remote locations.

Before any performance test is conducted by Independent Oversight, all test activities are appropriately coordinated with site representatives or other responsible individuals or organizations. To promote safety and realism in performance testing, subordinate Independent Oversight organizations are required to establish formal protocols for planning and conducting certain performance tests. These are detailed in the organizational process guides or other protocol documents.

Independent Oversight personnel are not limited to the five basic data collection methods specified above. Different or hybrid methods may be used, and personnel are encouraged to employ the best techniques available for a specific task. For example, a survey or questionnaire, appropriate for some types of appraisals, may share characteristics with the document review, interview, and knowledge test methods.

Validation

Validation is the process Independent Oversight uses to verify the accuracy of the information obtained during data collection activities. It is a critical element in the conduct of all appraisals. Validation is a continuous process to ensure that:

- All collected data is factually correct and can legitimately be used to evaluate the effectiveness of the program.
- Points of contact and site management are aware of the data that has been collected. They must acknowledge its accuracy, provide correct information, request that further data be collected, or provide mitigating information. Representatives of the Headquarters program office and policy office, DOE field element, and contractor organizations should participate in validation as appropriate to provide feedback on the factual accuracy of information related to their organization.

Procedures employed by Independent Oversight include a process for ongoing validation activities. Information is validated with the point of contact as it is collected or as soon thereafter as practical; during daily validation meetings with points of contact; at daily management briefings; periodically throughout the conduct phase; during summary validation meetings at the end of data collection; and during reviews of draft reports.

Communication/Integration

Communication between team members, between the team and the site being evaluated, and between the team and Headquarters is an essential element of all appraisal activities to ensure integration of collected data and to keep site management and Headquarters informed of progress and identified deficiencies. Methods to be used include face-to-face discussions, daily team meetings, daily site management debriefs, daily reports, and mid-point “rollups.”

As data is collected by various team members during all appraisals, it is important that all appropriate information is shared among team members in a timely manner. Information collected by one team member may have a direct impact on a line of investigation being conducted by another. When teams are large—and particularly when several teams are involved and each is focusing on a different area or discipline—a conscious and deliberate effort at information integration is required. Specific methods for

achieving integration vary from formal to informal, may be dictated somewhat by the team size and type of activity involved, and may include team meetings, shared data collection notes, and daily reports to managers. Specific methods to be employed are left to the discretion of the responsible appraisal team leader.

Equally important is communication between the appraisal team leader and site management regarding the progress of appraisal activities and potential issues identified by team members. This is achieved through informal daily management debriefs, although the nature of the appraisal and the presence of external stakeholders may require more formal methods to be used. Daily debriefs provide the opportunity for the appraisal team leader to present observations identified by the team to site management and give site managers an opportunity to provide additional information.

An “Issue Form” may be used to facilitate communication between the appraisal team and site management to document emerging significant issues (such as an imminent danger, a major vulnerability, or an unacceptable emergency management deficiency) or to convey an issue that may be more clearly or more effectively communicated in writing. A sample of the Issue Form and procedures for its use are provided in Appendix E.

The appraisal team leader is also responsible for keeping senior Independent Oversight and HSS management informed of appraisal activities. Verbal and/or written reports are typically provided on a daily basis. Communication with Headquarters organizations (e.g., program office, policy office) is also conducted as appropriate to validate or clarify team observations, especially if potential deficiencies in program implementation are identified.

Usually, prior to appraisal closure, a one-page summary (the “one-pager”) is prepared that communicates to site managers the “positive attributes” or strengths and the “issues requiring attention” or weaknesses found during the appraisal. The one-page summary must be validated with site personnel to ensure factual accuracy. Additionally, after appraisal closure the one-page summary is used to communicate the results of the appraisal to senior DOE managers. A sample one-page summary can be found in Appendix E.

Response to Major Vulnerabilities or Imminent Danger

Independent Oversight is required to notify line management within 24 hours when appraisal activities indicate one of the following conditions:

1. Conditions or practices in the workplace where a danger exists that could reasonably be expected to cause death or serious physical harm either immediately or before the abatement of such danger (imminent danger).
2. A major safeguards and security or cyber security vulnerability (e.g., unacceptable risk of special nuclear material theft or diversion, radiological or industrial sabotage, espionage).

Section 5 – Appraisal Closure

Introduction

The closure phase of an appraisal normally takes place after data collection is complete (although, at times, closure activities may identify additional data needs). Data must be organized, assimilated, and analyzed in order to form conclusions and report the results. This section discusses the various tasks to be accomplished during the closure phase, including data analysis, determination of findings, assignment of ratings (if appropriate), identification of opportunities for improvement and policy weaknesses, report preparation, briefings, and internal process improvement.

Goals

The main goals of this phase are to thoroughly analyze all available data, draw valid conclusions from that analysis, and, based on the analysis and conclusions, prepare a report that accurately reflects the status of the program(s) being examined and provides managers the information they need to develop and effect necessary corrections.

Integration

The information integration discussed in the previous section continues to be important during the closure phase. During data analysis, all pertinent information, regardless of who collected it, is considered in the effort to reach valid conclusions. Not only is raw data shared, but conclusions and other results of analysis are also shared, as appropriate, among team members.

Analysis of Results

While analysis is an ongoing process during all phases of an appraisal, it culminates during the closure phase. Analysis involves a critical review of all data collection results, particularly any identified program deficiencies, strengths, and weaknesses, and leads to logical, supportable conclusions regarding how well the program functions and satisfies the intent of DOE policy.

If no deficiencies are identified, analysis is a relatively simple matter. However, if deficiencies in performance are identified, the analysis must consider these observations individually and collectively, and then must balance them against identified strengths or mitigating factors to determine the overall impact on the program's effectiveness. Factors considered during analysis include:

- Whether the observed deficiency is isolated or systemic
- Whether program managers and other line managers knew of the deficiency, and if so, what actions were taken
- The importance or significance of the deficiency in comparison to the applicable standard
- Mitigating factors, such as the effectiveness of other programs or program elements that may compensate for the deficiency
- The deficiency's actual or potential effect on mission performance or accomplishment

- The magnitude and significance of the actual or potential vulnerability to DOE interests resulting from the deficiency.

The analysis must result in—and support—conclusions regarding how successfully the program meets requirements.

Findings

One product of analysis in certain types of appraisals (e.g., inspections and follow-up reviews) is the identification of findings. Findings are used to indicate significant deficiencies or safety issues that warrant focused attention on the part of management. Team members are responsible for determining which inspection results are designated as findings. Findings are focused on improving performance and are linked to applicable requirements. Any program element or system that is not in compliance with DOE policy or that does not meet DOE performance standards may be identified as a finding; however, teams are expected to exercise judgment in determining findings. Minor and non-systemic deficiencies, while they must be appropriately identified so that they can be corrected, are normally not designated as findings.

Findings are presented in a manner that identifies both the specific problem and the appropriate DOE (or other) reference. If multiple findings each address specific aspects of a single standard, the potential findings may be "rolled up" and reported as a single finding *if* the single finding statement can clearly and completely convey the problems observed. Findings are always worded to express the specific nature of the deficiency, clearly indicate whether the deficiency is localized or indicative of a systemic problem, and clearly identify which organization (DOE Headquarters or field element, facility contractor, etc.) is responsible for corrective actions. Typically, assignment of a finding requires a discussion of the impact of the condition described, including any mitigating factors and compensatory measures. Although findings often identify conditions that adversely impact a program's rating, findings do not necessarily impact the rating.

Ratings

For inspection activities, the conclusions reached through analysis of results lead to the assignment of ratings. The teams are responsible for recommending ratings; however, final approval for ratings rests with the Chief Health, Safety and Security Officer, with input from the Director, Independent Oversight.

- **Effective Performance (Green):** Assigned when the system being inspected provides reasonable assurance that the identified protection or program needs are met (overall performance is effective). The element being inspected is normally rated Effective Performance if all applicable standards are met and are effectively implemented. An element is also normally rated Effective Performance if, for all standards that are not met, other systems or compensatory measures exist that provide equivalent protection, or if the impact of failure to fully meet an applicable standard is minimal and does not significantly degrade the protection provided. Line managers are expected to effectively address any specific deficiencies identified.
- **Needs Improvement (Yellow):** Assigned when the system being inspected only partially meets identified protection or program needs or is not sufficiently mature and robust to provide assurance that the protection or program needs are fully met. The element being inspected is normally rated Needs Improvement if one or more of the applicable standards are not met and are

only partially compensated for by other systems, and the resulting deficiencies degrade the effectiveness of the inspected system. Line managers are expected to provide sufficient attention to ensure that identified areas of weakness are effectively addressed through corrective actions and/or ongoing initiatives.

- **Significant Weakness (Red):** Assigned when the system being inspected does not provide adequate assurance that the identified program needs are met. The element being inspected is normally rated Significant Weakness if one or more of the applicable standards are not met, there are no compensating factors to reduce the impact on system effectiveness, and the resulting deficiencies seriously degrade the effectiveness of the inspected system. Line managers are expected to apply immediate attention, focus, and resources to the deficient program areas.

Opportunities for Improvement

Independent Oversight inspectors have a broad range of knowledge in their individual topical areas of expertise, and also have the advantage of observing methods of program implementation across the entire DOE complex. When deficiencies, issues, or inefficiencies in program implementation are identified during an Independent Oversight activity, it is useful for inspectors to provide insight on approaches that could be adopted by line management to improve program performance. Often these are based on successful approaches observed at other DOE sites. Specific opportunities for improvement are identified for inclusion in Independent Oversight reports; however, they are provided only in the context of recommendations for consideration by line management, not as directed action. Opportunities for improvement that correlate to findings are normally provided to offer suggested approaches that line management may consider in their corrective action plans. Additionally, opportunities for improvement may be provided for conditions or performance deficiencies that do not rise to the level of a finding.

Policy Weaknesses

Occasionally during appraisals, deficiencies or issues are observed that stem from policy weaknesses (e.g., lack of policy, lack of clarity in policy, ambiguous or contradictory policies, inappropriate policy, or inappropriate implementation guidance). When such policy weaknesses are identified, they are communicated to the Headquarters element responsible for the policy in question, either via the appraisal report or in a separate written policy issue paper or form (see Appendix E) that identifies the subject, provides necessary background information, states the problem, discusses its implications, and, if appropriate, recommends a course of action. If appropriate for the circumstances, a finding may be written against the policy organization to ensure that corrective actions can be tracked to completion.

Report Preparation

A report is issued as the formal product of any appraisal. Reports are the only published records of specific appraisals, and are intended for dissemination to the Secretary and appropriate managers at DOE Headquarters and field elements (including, when appropriate, facility contractors). Appraisal reports may vary in format, and the most appropriate format for the specific purpose is used. Appendix F provides guidance for preparing the portions of appraisal reports that are targeted at senior management.

Under most circumstances, reports are required to be prepared in accordance with the following process and timelines. However, the Director, Independent Oversight may modify the prescribed time frames

when appropriate (e.g., to evaluate multiple sites or organizations requiring extensive coordination among various field elements and to address special needs).

Initial Draft Report

During the later stages of an appraisal, an initial draft report is developed that includes all the necessary elements of the final report.

The initial draft report is reviewed by a Quality Review Board (QRB) to ensure that it is readable and logical, and that it contains adequate, balanced information to support conclusions (and, if appropriate, ratings). The QRB normally consists of managers and senior personnel (usually former senior managers) from Independent Oversight and support contractors. The QRB is responsible for providing a “reality check” by knowledgeable individuals who have not been close to the data collection effort, and who can therefore evaluate the report’s contents and presentation through fresh eyes, and on its own merits.

The QRB review may be conducted at the site, at Headquarters, or at another location, depending upon the travel schedule of the QRB members and the appraisal schedule. The initial draft report may be altered or revised based on the comments and recommendations of the QRB.

After the QRB review and approval by the Director, Independent Oversight and the Chief Health, Safety and Security Officer, a copy of the initial draft report is provided to the responsible field element manager and Headquarters program office representative, as appropriate, who complete their factual accuracy review based on an agreed-upon schedule. All comments are reviewed, and appropriate changes are made to the initial draft report.

Final Draft Report

After making the appropriate revisions to the initial draft report, a final draft report is distributed for formal review and comment, typically at the closeout briefing. The final draft report is provided to the responsible DOE field element and contractor managers (for an inspection, typically at the closeout meeting with site management), the applicable secretarial officer, the Under Secretary, and the applicable DOE policy organization (based on the appraisal results). These organizations then have ten working days to provide comments to Independent Oversight.

Line management organizations and other responsible DOE organizations may provide the initial draft and the final draft reports to personnel within their organizations for review.

One-Page Summary

Appraisal team leaders will develop and provide to the Director, Office of Independent Oversight a one-page summary of the appraisal after the final draft report is produced in preparation for the site briefings.

Briefings

The closure process for appraisals often includes a briefing to appropriate managers on the progress, results, and conclusions of the activity. Inspection-related briefings fall into several categories:

- Site briefings provide the appraisal results and conclusions to Federal and contractor managers of organizations undergoing an appraisal. The final draft report is typically provided to the site management during site closeout briefings.
- Headquarters briefings are normally conducted for key Headquarters managers after the report has been formally validated with the site.
- External briefings to key stakeholders, such as Congressional staff and the DNFSB, are conducted if appropriate only after validation, release of the final report, and all internal DOE briefings have been completed.

The need for briefings associated with non-inspection-related appraisals depends upon the specific nature of the activities. The structure, level of detail, and specific content of briefings are tailored to the needs of the audience and the specific information that needs to be communicated.

Process Improvement

Independent Oversight consistently strives to improve its internal processes as part of its continuing effort to improve its products and the value it provides to DOE. During the closure phase of each major appraisal, managers are expected to solicit information from team members that can be used for process improvement. The format for such solicitations (questionnaire, roundtable discussion, after-action report) is determined by the responsible managers, and may vary depending on the type of appraisal being reviewed and the perceived need for improvement.

Section 6 – Appraisal Follow-up

Introduction

Much work remains to be done after the completion of the onsite portion of an appraisal. This section addresses such responsibilities and tasks as finalizing the appraisal report, conducting necessary briefings, reviewing corrective action plans, and tracking findings for follow-up purposes. All of the responsibilities and tasks addressed in this section apply to inspection activities; some do not normally apply to other types of appraisals, and would be applied only when appropriate.

Goals

The primary goals of the follow-up phase are to prepare and disseminate an accurate account of the appraisal results through a final report and appropriate briefings; to review proposed corrective actions for adequacy; and to provide policy issue discussions to the senior managers of appropriate Headquarters organizations.

Headquarters Coordination

As appropriate, Independent Oversight coordinates with Public Affairs, Congressional liaison, the secretarial officer, DOE line management organizations, HSS, the applicable Under Secretary, and the Office of the Secretary to develop an approach for providing results to external stakeholders.

Policy Issue Papers

Upon returning to Headquarters, the responsible Independent Oversight organization completes, if necessary, any policy issue papers and provides them to the manager(s) of the appropriate Headquarters organization(s). Independent Oversight responds, as needed, to requests for discussions or for additional information pertinent to the issue(s) raised.

Final Report

The secretarial officer and the field element manager have ten working days from receipt of the final draft report to provide Independent Oversight with their consolidated comments regarding its factual accuracy. Independent Oversight reviews comments, holds consultations between managers and the appropriate staff members, and determines action on each. The final report is then prepared ten working days after receipt of the consolidated comments.

Typically, the final report is distributed to the Office of the Secretary, HSS, the secretarial officer, and the field element manager. Independent Oversight coordinates with the Office of the Secretary to determine the appropriate distribution of the final report to other DOE and external organizations.

Corrective Action Plans

Responsible field element managers, with the approval of the applicable secretarial officer, are required to develop and implement corrective actions to address findings identified in the appraisal report. When the finding addresses DOE policy, the applicable policy organization is required to develop and

implement appropriate corrective actions. For security, cyber security, and emergency management findings, the corrective action plan (CAP) process utilizes a two-phase approach with the development of an interim CAP and a final CAP. Interim CAPs are not required to be developed for ES&H appraisal findings.

Interim CAPs

The responsible organizations (line and policy), as identified in the findings, are required to prepare and submit an interim CAP for all security, cyber security, and emergency management findings to their respective secretarial officer and Independent Oversight within 30 calendar days of the issuance of the final report. The interim CAP includes an analysis of each finding to ensure that the corrective actions address the cause(s), as well as any systemic program weaknesses; describe ongoing and planned corrective actions (including milestones) for each of the findings; and identify individuals accountable for each action.

Within 15 calendar days of receipt of the interim CAP, Independent Oversight is required to review and provide comments to the responsible organization, with a copy to the secretarial officer, regarding the adequacy of the proposed corrective actions.

Final CAPs

The applicable secretarial officer (or designee) and/or policy organization is required to approve a final CAP for all security, cyber security, emergency management, and ES&H findings within 60 calendar days of the issuance of the final report. When the findings involve multiple sites or secretarial officer organizations, the responsible organizations are required to coordinate in the development and approval of a comprehensive final CAP. The field element manager, in coordination with the secretarial officer and applicable policy organizations, is required to develop a comprehensive final CAP in a timely manner to permit approval by the secretarial officer within 60 calendar days of the issuance of the final report.

The final CAP must address Independent Oversight's comments on the interim CAP (as applicable), include both field and Headquarters actions (as appropriate), and indicate the following for each finding:

- Extent of condition
- A thorough analysis of the underlying causal factors to determine whether systemic program weaknesses exist
- Deliverables/actions that are tailored to address the cause(s) of the finding
- Deliverables/actions that are planned to prevent recurrence of the finding
- Responsible individuals and organizations
- Dates actions will be initiated
- Dates actions are expected to be completed

- How actions will be tracked to completion
- Mechanisms for independent verification of closure to ensure that the actions are effective in addressing the finding and preventing recurrence of the finding.

Within 30 calendar days of approval of the final CAP, Independent Oversight is required to review and provide comments to the responsible organization, with a copy to the secretarial officer, if it is determined that the final CAP does not provide timely or adequate corrective actions for the identified findings. No comments from Independent Oversight are required if the final CAP is complete and adequate, and provides for timely resolution of the findings.

The approval authority is required to resolve any comments provided by Independent Oversight and to provide a revised final CAP, as necessary, to Independent Oversight indicating how the comments were resolved.

Comments that cannot be resolved are required to be raised to the Deputy Secretary and/or the Secretary for resolution.

Classified CAPs (e.g., addressing safeguards and security and cyber security deficiencies) and unclassified CAPs (e.g., addressing emergency management and ES&H deficiencies) may be submitted in separate documents to avoid unnecessary classification of unclassified plans.

Corrective Actions and Follow-up

Independent Oversight is responsible for ensuring that findings are entered into the appropriate Headquarters databases – the Safeguards and Security Information Management System (SSIMS) for safeguards and security and cyber security findings, and the Corrective Actions Tracking System (CATS) for emergency management and ES&H findings – in a timely manner (e.g., within five days following the transmittal of the final report).

The field element manager and the responsible policy organizations are responsible for completing the corrective action data fields for the approved final CAPs in SSIMS and CATS, as appropriate, and for updating the status of actions within SSIMS and CATS until the finding is closed.

Independent Oversight may review the timeliness and adequacy of corrective actions, validate the effectiveness of the corrective actions, and confirm the closure of the finding as part of appraisal activities. Independent Oversight is required to develop a new finding when a CAP has not resolved the original finding.

Section 7 – Records Management

Introduction

Independent Oversight final appraisal reports provide a formal, permanent record of the results of Independent Oversight activities. However, much of the detailed information regarding the conduct of appraisal activities, the results of data collection efforts, and the deliberations and analyses of team members is not specifically included in the final reports. While Independent Oversight's goal is to include sufficient detail in each report to fully justify its conclusions and enable the report to stand on its own, there is a need to retain some documentation that provides additional detail regarding various aspects of an appraisal activity. Consequently, it is Independent Oversight's policy to archive certain types of information associated with appraisal activities to enable an accurate response to potential queries for additional detail.

Records Retention Requirements

The Office of Independent Oversight follows the DOE Administrative Records Schedules found at <http://cio.energy.gov/records-management/adminrs.htm> that are maintained by DOE's Office of the Chief Information Officer. Records associated with each appraisal activity are assembled and archived for a period of ten years from the date of the final report of the activity. At a minimum, the archives contain the following types of information, in either electronic or hard copy form:

- Inspection Plan
- Correspondence pertinent to the appraisal, as determined by each Office Director
- Performance test documentation, if applicable
- Issue Forms, if utilized
- Site's written response to any Issue Form utilized
- Site/field element/program office comments on draft report(s)
- Final report.

Additional information may be retained as necessary to fully document an appraisal activity. Directors of the Independent Oversight subordinate offices identify, in their individual office appraisal process protocol document, the types of records that are to be collected and archived, including the minimum set of records listed above.

Appendix A – Professional Conduct

Independent Oversight inspectors occupy sensitive and highly visible positions and must maintain the highest standards of personal and professional conduct. While conducting appraisals, team members are considered official representatives of DOE Headquarters. Their behavior must always be beyond reproach. This includes being tactful, courteous, and properly attired. An inspector's conduct should always enhance the professional stature of the appraisal team and Independent Oversight.

While on site, inspectors must follow all local rules, entry and exit procedures, safety regulations, parking requirements, and other employee and visitor guidelines. Inspectors are responsible for familiarizing themselves with all local policies. When in doubt, they should ask their immediate supervisor or the manager of the Independent Oversight activity. If they encounter problems or if local requirements alter essential inspection activities, the inspector should inform the Independent Oversight activity manager as soon as possible.

Inspectors come into contact with numerous individuals during inspection activities, including supervisors, managers, and other site personnel who are not members of the programs being inspected. Independent Oversight personnel must be well received and looked upon as professionals. Professional image and support can quickly erode when inspectors openly criticize the site or its personnel or make unfavorable comparisons with other sites. If criticism of the site is warranted, it should be included in the proper section of the inspection report.

Inspectors are responsible for promoting good relations with site personnel. Inspectors work especially closely with points of contact, trusted agents, and operations office, facility, and site contractor personnel who have been assigned specific inspection responsibilities. During initial meetings, inspectors should ensure that each of these individuals fully understands what is expected. In dealing with points of contact and trusted agents, inspectors should be open, candid, and straightforward. A close working relationship is necessary and desired, but must be kept on a professional level. Inspectors need to be sensitive to the pressures and stress experienced by the people being inspected. Their stress is amplified further when significant problems are identified. At these times, inspectors can be the object of intense scrutiny, and may be questioned or criticized by personnel from the inspected facility. Establishing good relations at the outset can significantly relieve these stressful situations.

Improper conduct of any kind cannot be tolerated. It is important that all inspectors understand that Independent Oversight fully supports the prevention of sexual harassment. All Independent Oversight managers and inspectors should be alert to conditions, regardless of how innocent they appear, that could produce an incident of sexual harassment. Immediate action must be taken to correct problems, respond to requests for assistance, and prevent future occurrences. It is imperative that all Independent Oversight personnel understand their right to a harassment-free work environment and their responsibility for eliminating conduct that could lead to sexual harassment. One of the most important factors in determining what constitutes "unwelcome behavior" and "sexual conduct" is that it depends more on effect than intent, and effect can only be determined by the recipient. Thus, whether the perpetrator intentionally or unintentionally sexually harasses another person is not the only issue. How that behavior is received is central in determining whether harassment took place.

Team members may socialize and relax at appropriate times and locations while on inspections. However, these activities should be in good taste. Inspectors must be particularly circumspect when

socializing with personnel or friends from the inspected facility to minimize the chance of social contacts being perceived as compromising the objectivity of the inspection.

Contractors serving as inspectors must be extremely careful to avoid any conflict of interest, potential conflict of interest, or appearance of a conflict of interest. Discussing future work possibilities at the site, mentioning individual or corporate capabilities and experience as they apply to current site problems, and any other similar activity is unacceptable. Such actions cast doubt on inspection objectivity and Independent Oversight's mission, and can result in the inspector's removal from the site. If any potential conflict of interest is encountered, it must be reported to the responsible Independent Oversight manager immediately.

The information provided in this section is not intended to be an exhaustive discourse on personal and professional conduct, or on ethical standards. The intent is to provide a condensed treatment of these subjects as they pertain to Independent Oversight. On the whole, professional conduct stems from good judgment, consideration for others, civility, and a genuine concern for the prestige of the organization one represents. Inspectors should treat others the way they themselves wish to be treated, and should behave and dress in a way that presents the best possible image of their capacities. It follows, therefore, that a highly visible organization responsible for inspection and oversight of programs designed to protect some of the most critical elements in existence, nuclear weapons and material, would expect the highest standards of conduct from those who represent it.

A Standard of Professional Conduct for Independent Oversight Inspectors

- As an official representative of DOE Headquarters, your behavior should always be beyond reproach.
- Be tactful, courteous, and properly attired.
- While on site, comply with all local rules and regulations.
- Avoid criticizing the site or site personnel.
- Avoid adversarial relationships.
- Be sensitive to the pressures and stress experienced by the people being inspected.
- Establish good relationships with site personnel.
- Avoid actions that could be interpreted as sexual harassment.
- Be discreet when socializing.
- Contractors must be careful to avoid any conflict of interest or appearance of conflict of interest.
- Keep all initial planning internal to Independent Oversight.
- Develop a good, professional relationship with points of contact and trusted agents.

Appendix B – Facility Prioritization and Inspection Scheduling

Purpose

This protocol describes the processes employed by Independent Oversight to establish the frequency of, and develop the schedules for, periodic inspections of security, cyber security, emergency management, and ES&H programs at DOE sites.

Overview of Prioritization and Scheduling Process

Independent Oversight employs a formal process through which it prioritizes each site based on a standard set of criteria – one for each discipline, i.e., security, cyber security, emergency management, and ES&H. The priority assignments are used to develop appraisal schedules by providing a guideline for determining how often a site will be subject to scheduled Independent Oversight appraisal activities as indicated in Table B-1. The current site priority designations are provided in Table B-2 at the end of this appendix.

Table B-1. Independent Oversight Appraisal Periods

Priority	Site Risk	Appraisal Period
I	High	24 to 30 Months
II	Moderate	36 to 48 Months
III	Low	As Determined by HSS Management For sites with nuclear facilities that are not otherwise Priority I or II: 48 to 60 Months for nuclear safety inspections

However, a number of factors (e.g., a facility’s recent inspection results; recent site, Departmental, or national events; and available resources) may affect how often a given site is subject to a particular appraisal.

Priority Assignment Process

Each site subject to independent oversight is assigned a priority designation based upon an analysis conducted by the relevant Independent Oversight organization. The analysis is based on the various criteria described below, which are applied using available empirical data and the professional judgment of the analysts. Recommended priority assignments are submitted to the Director, Independent Oversight, for final approval.

A review of a site’s priority designation is conducted when significant changes occur in the site’s physical plant, mission, or operations. The standard set of criteria is used to analyze the site status, and the priority designation may be changed as appropriate.

A review of all site priority designations is conducted on an ongoing basis to ensure that they are valid.

Criteria for Determining Security Priority Designations

- Priority I: Sites with high-value assets or with high risk; includes all sites with Category I special nuclear material in accessible and transportable form.
- Priority II: Sites with medium-value assets or with medium risk; includes Category II or III special nuclear material in accessible and transportable form.
- Priority III: Sites; primarily non-national defense missions, with no Category I or II quantities of special nuclear material and limited classified information.

Other factors to be considered in determining the priority:

- Amount of special nuclear material present on site
- Amount and sensitivity of classified matter on site
- Amount and sensitivity of unclassified information on site
- Other assets that require protection
- Identified risks/risk levels associated with the protection system
- Compensating or mitigating factors
- Management and program stability.

Criteria for Determining Cyber Security Priority Designations

- Priority I: Major weapons production sites, weapons laboratories, and scientific laboratories with large classified and unclassified computer networks containing high-value information assets, and/or information systems requiring a high degree of assurance of data integrity or availability.
- Priority II: Large or moderate sites with classified computing assets and substantial unclassified computer networks containing controlled unclassified information, and/or information systems requiring a high or moderate degree of assurance of data integrity or availability.
- Priority III: Sites containing only moderate or small unclassified computer networks with a limited amount of controlled unclassified information, with most systems only requiring a low degree of assurance of data integrity or availability.

Other factors to be considered in determining the priority:

- Amount and sensitivity of classified information (e.g., Restricted or Formerly Restricted Data, weapons design information)
- Amount and sensitivity of controlled unclassified information (e.g., personally identifiable information, Unclassified Controlled Nuclear Information, Official Use Only information)
- Use of supervisory control and data acquisition (SCADA) systems for control of large scale electrical power distribution or control of critical nuclear and non-nuclear facility operations

- Effectiveness of management, operational, and technical controls to mitigate cyber security risks
- Compensating or mitigating factors
- Management and program stability.

Criteria for Determining Emergency Management Priority Designations

- Priority I: Sites with operations involving significant radiological, chemical, and/or biological hazardous materials with the potential for offsite impact or impact to a significant portion of site workers. This also includes operations offices with primary responsibility for emergency response for such sites.
- Priority II: Sites with significant hazardous materials, but with more moderate risks where the potential for impact is confined to smaller portions of a site and/or facility within a site.
- Priority III: Low-risk sites posing only localized or very low potential impacts to site/facility workers from the release of hazardous materials.

Other factors to be considered in determining the priority:

- Current operations – current types and levels of activities (e.g., construction, new starts, production, re-starts, remediation, decontamination, and decommissioning)
- Process complexity – complexity (and uniqueness, if applicable) of activities at the facility
- Facility conditions – general material/physical condition of facilities (e.g., age of facilities and equipment, life cycle considerations)
- Hazards – hazards at the facility that could adversely affect workers, the public, or the environment (e.g., fissile or radioactive materials, chemicals, industrial hazards, or waste)
- Compensating or mitigating factors
- Management and program stability.

Criteria for Determining ES&H Priority Designations

- Priority I: Sites/facilities/offices that are considered the most complex and hazardous in terms of the number of facilities, diversity of missions, and the highest potential for offsite exposure risk to the public and the highest onsite exposure risk to collocated workers from active nuclear and radiological facilities.
- Priority II: Sites/facilities/offices that are considered to have medium complexity and hazards in terms of the number of facilities, diversity of mission, and low potential for offsite risk to

the public, but a significant onsite exposure risk to collocated workers from active nuclear and radiological facilities.

Priority III: Sites/facilities/offices that are considered to have minimal complexity and hazards in terms of the number of facilities, diversity of mission, and little or no potential for offsite risk to the public or to collocated workers because of the lack of active nuclear and radiological facilities. Sites with nuclear facilities not otherwise meeting the criteria for Priority I or II.

Other factors to be considered in determining the priority:

- Current operations – current types and levels of activities (e.g., construction, new starts, production, re-starts, remediation, decontamination, and decommissioning)
- Process complexity – complexity (and uniqueness, if applicable) of activities at the facility
- Facility conditions – general material/physical condition of facilities (e.g., age of facilities and equipment, life cycle considerations)
- Hazards – hazards at the facility that could adversely affect workers, the public, or the environment (e.g., fissile or radioactive materials, chemicals, industrial hazards, or waste)
- Compensating or mitigating factors
- Management and program stability.

Schedule Development Process

Annually, approximately six months prior to the beginning of the new calendar year, the subordinate offices of Independent Oversight:

1. Identify periodic inspection and other requirements (e.g., follow-up activities, special reviews, or special studies) in their areas of interest for the following calendar year. This activity includes identification of recommended adjustments to the priority-based inspection cycle of facilities whose performance merits adjustment, as follows:
 - Facilities that have demonstrated effective self-assessment programs and that have demonstrated strong performance (e.g., no ratings below Effective Performance) on two consecutive Independent Oversight periodic inspections may be placed on extended inspection cycles. For example, Priority I facility cycles may be extended to 36-month intervals and Priority II facility cycles to 60-month intervals.
 - Facilities that have demonstrated weak or ineffective self-assessment programs or that have demonstrated poor performance on an Independent Oversight periodic inspection (e.g., less than Effective Performance ratings in one or more significant areas, or findings that affect protection capabilities) may be placed on a shortened inspection cycle. For example, Priority I facility cycles may be shortened to a 12- or 18-month interval and

Priority II facility cycles to a 24- or 30-month interval, as deemed appropriate by the circumstances.

2. For design and construction of new facilities or significantly modified nuclear facilities (as identified by the need for a DOE operational readiness review in accordance with DOE Order 425.1C, *Startup and Restart of Nuclear Facilities*), the Office of ES&H Evaluations identifies needed targeted nuclear safety inspections. Plan inspections at critical milestones of the construction and commissioning process based on the magnitude and construction stage of the project (i.e. design reviews, procurement activities and programs, physical construction, and operations and administrative programs should be targeted at the appropriate times of the project).
3. Meet with representatives from the Office of Enforcement (HS-40), Office of Corporate Safety Analysis (HS-30) and associated policy offices to provide a forum for input based on policy revisions or changes, analysis of operational data and metrics and analysis of Nonconformance Tracking system data. Based on this input, schedule, scope and focus areas are established. .
4. Submit the proposed schedule, with recommendations and rationale for interval adjustments and deferred activities, to the Director, Independent Oversight and Chief Health, Safety and Security Officer for approval.
5. Conduct coordination with Headquarters, field managers, and key points of contact to identify scheduling conflicts to be addressed.

Upon approval, normally by October 1 of each year, the schedule for the following calendar year is published and distributed to Headquarters and field elements.

Table B-2. Current Independent Oversight Site Priority Designations

The following shows the current Independent Oversight facility priority designations as of July 10, 2009.

Program	Site/Facility/Office	Safeguards & Security Priority	Cyber Security Priority	Emergency Management Priority	ES&H Priority
NNSA	Kansas City Plant (KCP) / Site Office	II	II	III	III
NNSA	Lawrence Livermore National Laboratory (LLNL) / Site Office	I	I	I	I
NNSA	Los Alamos National Laboratory (LANL) / Site Office	I	I	I	I
NNSA	Nevada Test Site (NTS) / Site Office	I	I	I	I
NNSA	NNSA Service Center (NNSA-SC)	II	II	III	III
NNSA	Office of Secure Transportation (OST)	I	II	II	III
NNSA	Pantex Plant / Site Office	I	I	I	I
NNSA	Remote Sensing Laboratory (RSL) NV/MD	II	II	III	III
NNSA	Sandia National Laboratories - CA (SNL-CA)	II	I	III	*

Program	Site/Facility/Office	Safeguards & Security Priority	Cyber Security Priority	Emergency Management Priority	ES&H Priority
NNSA	Sandia National Laboratories - NM (SNL-NM) / Site Office	II	I	I	I
NNSA	Savannah River Site (SRS) Defense Program Operations/ Savannah River Site Office (SRSO)	II	II	III	I
NNSA	Tonopah Test Range (TTR)	III	III	III	III
NNSA	Y-12 National Security Complex (Y-12) / Site Office	I	I	I	I
Science	Ames Laboratory / Site Office	III	III	III	III
Science	Argonne National Laboratory (ANL) / Site Office	II	II	II	II
Science	Brookhaven National Laboratory (BNL) / Site Office	II	II	III	III
Science	Chicago Office (CH)	II	II	III	III
Science	Fermi National Accelerator Laboratory / Site Office	III	III	III	III
Science	Lawrence Berkeley National Laboratory (LBNL) / Site Office	III	III	III	III
Science	Oak Ridge Institute of Science and Education (ORISE)	III	III	III	III
Science	Oak Ridge National Laboratory (ORNL)	I	II	I	I
Science	Oak Ridge Office (OR)	II	II	I	III
Science	Office of Scientific and Technical Information (OSTI)	II	II	III	III
Science	Pacific Northwest National Laboratory (PNNL) / Site Office	II	II	II	II
Science	Princeton Plasma Physics Laboratory (PPPL) / Site Office	III	III	III	III
Science	SLAC National Accelerator Laboratory /Site Office	III	III	III	III
Science	Thomas Jefferson National Accelerator Facility (TJNAF) / Site Office	III	III	III	III
Science	New Brunswick Laboratory	*	*	*	III
Energy	Ashtabula Closure Project (DOE-ACP)	III	III	III	III
Energy	Columbus Closure Project	III	III	III	III
Energy	East Tennessee Technology Park (ETTP)	III	III	III	*
Energy	EM Activities at ETTP, Y-12, and ORNL	*	*	*	I
Energy	EM Consolidated Business Center	III	III	III	III
Energy	Energy Technology Engineering Center (ETEC)	III	III	III	III
Energy	Golden Field Office	III	III	III	III
Energy	Grand Junction Office	III	III	III	III
Energy	Hanford Site / Richland Operations Office (RL)	I	II	I	I
Energy	Idaho National Laboratory (INL) / Idaho Operations Office (ID)	I	II	I	I
Energy	Idaho Cleanup Project	*	*	*	I
Energy	National Energy Technology Laboratory (NETL)	III	III	III	III

Program	Site/Facility/Office	Safeguards & Security Priority	Cyber Security Priority	Emergency Management Priority	ES&H Priority
Energy	National Renewable Energy Laboratory (NREL)	III	III	III	III
Energy	Paducah Gaseous Diffusion Plant	III	III	III	II
Energy	Portsmouth Gaseous Diffusion Plant	III	III	III	II
Energy	River Protection Project (RPP) / Office of River Protection (ORP)	III	II	I	I
Energy	Savannah River Site (SRS) / Savannah River Operations Office (SR)	I	I	I	I
Energy	Strategic Petroleum Reserves Operations (SPR)	II	II	III	III
Energy	Waste Isolation Pilot Plant (WIPP) / Carlsbad Site Office	III	III	II	II
Energy	West Valley Demonstration Project	III	III	III	III
Energy	Yucca Mountain Project / Site Office	III	III	III	II
PMA	Bonneville Power Administration (BPA)	III	II	III	III
PMA	Southeastern Power Administration (SEPA)	III	II	III	III
PMA	Southwestern Power Administration (SWPA)	III	II	III	III
PMA	Western Area Power Administration (WAPA)	III	II	III	III
MA	Headquarters (GTN & FORS)	III	I	III	III
IN	Special Technology Laboratory (STL)	II	II	III	III

*These sites are included within the scope of inspection activities for other listed sites.

Appendix C – Sample Inspection Plan

DEPARTMENT OF ENERGY
OFFICE OF HEALTH, SAFETY AND SECURITY
OFFICE OF INDEPENDENT OVERSIGHT
INSPECTION PLAN
FOR [TOPIC]
AT THE [____] SITE OFFICE AND [SITE]

Date

Approved by:

Appraisal Team Leader

Date

Director
[Independent Oversight Subordinate Office]

Date

Director
Office of Independent Oversight

Date

**DEPARTMENT OF ENERGY
OFFICE OF HEALTH, SAFETY AND SECURITY
OFFICE OF INDEPENDENT OVERSIGHT
INSPECTION PLAN
FOR [TOPIC]
AT THE [____] SITE OFFICE AND [SITE]**

Date

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Attachment: Office of Independent Oversight Inspection Team X

NOTE: Inspection Criteria and Activities are maintained on the HSS web site

**DEPARTMENT OF ENERGY
OFFICE OF HEALTH, SAFETY AND SECURITY
OFFICE OF INDEPENDENT OVERSIGHT
INSPECTION PLAN
FOR [TOPIC]
AT THE [____] SITE OFFICE AND [SITE]**

Date

I. INTRODUCTION

This document outlines the activities currently planned by the Office of Independent Oversight, within the Office of Health, Safety and Security (HSS), for evaluating line management of [topic] activities at the [Site]. Additionally, Independent Oversight will inspect activities at the [____] Site Office that directly support the [Site] [topic] program. This inspection will be conducted according to Department of Energy (DOE) Orders, including 470.2B, *Independent Oversight and Performance Assurance Program*, which establishes the foundation for the Independent Oversight inspection program. While this plan outlines projected evaluation activities, it should be understood that changes to specific activities and inspection focus areas will be made in response to emerging concerns and requests from key Site Office, [Site], and Headquarters managers. Site representatives will be kept informed of significant changes in proposed activities and inspection focus areas.

II. SCHEDULE

The inspection process is divided into several stages, including offsite and onsite planning, onsite inspection activities, report writing, and validation and closeout. The planning activities expected to be conducted prior to the onsite inspection visit include team orientation, facility tours, preliminary document reviews, and Headquarters interviews.

The onsite inspection visit will be conducted in [inspection timespan]. During this period, inspection activities, such as interviews, facility walk-downs, limited-scope performance tests, and document reviews, are planned. Following completion of the onsite inspection period, a draft report will be prepared and made available to line management for review and feedback. Finally, inspection results will be briefed to key managers, consistent with Independent Oversight protocols. The overall schedule is provided below.

Scoping Visit	[Dates]
Planning Visit	[Dates]
Onsite Inspection Visit	[Dates]
Report Validation and Closeout	[Dates]
Draft Report Site Comments Due	[Dates]

III. INSPECTION TEAM RESPONSIBILITIES AND ASSIGNMENTS

[Name/Title] will be the senior DOE official managing the inspection activities and the senior Independent Oversight point of contact with site management. He will be assisted by a staff of technical specialists and administrative support personnel. The inspection leader and his staff will

ensure that the inspection is conducted fairly and in accordance with approved procedures. The inspection team will be divided into several subject areas. The inspection will focus on:

[list focus areas]

DOE Order 470.2B assigns responsibility to the Heads of Field Elements to assist Independent Oversight in performing an effective and valid inspection. This responsibility includes the provision of (1) site access and support, (2) points of contact, and (3) validation of the factual content of the inspection data and report.

The team list and assignments are provided on page x of this plan.

IV. INSPECTION PROCESS

Independence

Independent Oversight is charged with the independent oversight of safeguards and security; cyber security; emergency management; and environment, safety and health (ES&H) programs throughout the Department. Independence is assured by its direct reporting relationship through HSS to the Secretary of Energy (i.e., outside any line management reporting chain). Further, Independent Oversight does not have any direct responsibility for site operations, policy formulation, or emergency management and ES&H program implementation.

Independent Oversight exercises independence in the conduct of appraisals. Inspection scheduling is independent of line management, although valid concerns of site and DOE management are accommodated, whenever possible. Inspections are performance-based assessments of site implementation of the requirements established in Federal, state, and local regulations and DOE orders and directives. Independent Oversight also provides feedback on the effectiveness of orders and directives and whether they adequately establish effective program requirements. Consequently, Independent Oversight employs the professional judgment of experienced inspectors to provide an overall evaluation of program status, including the impact of orders and directives governing implementation.

Emphasis on Management

The primary purpose of Independent Oversight assessment activities is to provide timely information to the Secretary of Energy and other senior Departmental managers on the status of DOE safeguards and security, cyber security, emergency management, and ES&H programs. This information must be presented in a manner that supports and facilitates Secretarial-level actions to address identified shortcomings. Therefore, an emphasis is placed on evaluating management performance, particularly Federal management direction and guidance for implementing programs and for resolving cross-cutting issues, which is of particular interest to the Office of the Secretary. Evaluation of the adequacy of DOE and contractor self-assessment and issues management processes (feedback and improvement) is an important aspect of Independent Oversight's emphasis on management effectiveness. At the same time, the most fundamental management performance measure is the extent to which programs are effectively implemented. Thus, a central feature of Independent Oversight assessments is the consideration of program effectiveness through limited-

scope performance tests, facility walkthroughs, and analysis of program documentation. While Independent Oversight inspections provide a “snapshot in time” of performance, the analysis of results highlights program trends and provides evidence of progress or decline in overall performance whenever such trends and evidence are discernable.

“Top-Down” Approach

Independent Oversight’s role is not to duplicate assessments of [topic] program elements conducted by other organizations. Rather, Independent Oversight’s role is to provide an independent evaluation of program effectiveness, which gives line management essential feedback on program status and direction. This leads to a “top-down” approach to inspection planning that focuses on overall program effectiveness across the breadth of the program. However, as part of this approach, Independent Oversight recognizes the need to conduct carefully targeted, in-depth reviews of particular aspects of program implementation to effectively evaluate performance. Independent Oversight assessments are designed to balance the need for breadth and depth.

V. SCOPE OF THE INSPECTION

The Independent Oversight inspection will evaluate the performance of line management responsible for [topic] programs at [Site]. This includes NNSA/DOE personnel at DOE Headquarters and [____] Site Office and [Site] contractor managers and staff.

[indicate scope of inspection as appropriate, often by listing the subtopics/program elements to be inspected]

ATTACHMENT
OFFICE OF INDEPENDENT OVERSIGHT
[SITE] INSPECTION TEAM

Dates

Team Leader

Inspection Team

Administrative Support

Appendix D – Interview Techniques

The interview is an invaluable instrument for obtaining data and information. Although there are several different types, Independent Oversight inspectors are primarily interested in the data determination interview, used to secure data and information from the interviewee.

Obviously, each interview will be different depending on the type of interview, the needs of the parties involved, and the complexity of the topics discussed. However, to be successful, every interview should be two-way and *properly planned*.

Frequently, the goals of the two parties may be dissimilar or even opposite. One of the purposes of the interview would then be to find a common ground for discussion. At times, the personalities of the individuals involved may be quite different, which can create barriers. To alleviate, if not eliminate, these type of issues, the inspector needs to plan the interview, designate the objectives to be achieved, and be sensitive to the other person's needs and feelings. During the interview, the inspector also needs to listen intelligently and understandingly and use all of the tools of interviewing effectively.

Planning the Interview

Often, interviews are conducted without planning. Almost all interviews will be more successful if time is taken to establish objectives and review general methods and techniques. The experienced inspector devotes time and effort to the following areas.

Purpose

In many cases, the inspector will try to discuss too wide a variety of topics or confine the discussion to topics that are not applicable. This is not an efficient use of time and may unnecessarily open up areas of disagreement or misunderstanding. It is true that one must be flexible during an interview, but it is also wise to plan ahead. The inspector may wish to establish objectives with the interviewee, reach decisions, secure facts, or select a specific course of action.

Research

Too many interviews reach an impasse because "I don't have the DOE policy clarification memoranda on this subject," or "I had no idea all the data on this system would be needed." In almost every case, the necessary data is easily available if the inspectors simply do their "homework."

Key Questions

It is often vital to get interviewees to express themselves freely. This may be done by asking the right kind of questions. But such questions often do not come quickly and easily; they, too, require pre-planning. Queries such as "How would you reorganize the operation?" or "What action do you recommend for solving the problem?" may motivate the interviewee to respond openly and freely.

Sensitivity

The inspector should recognize the interviewee's perceptions, expectations, and personality. Everyone reacts to interviews differently. Some will respond openly and freely with one approach; others respond better to another. A moment or two spent prior to the discussion in attempting to determine the individual's personality, perceptions, and needs is often time very well invested.

There are other actions that the inspector may take to prepare for the interview. The point is that proper planning will almost always result in a fruitful interview.

The Interview in Action

The inspector will certainly adapt the interview to the persons involved. However, in every instance, it is important to use the tools of interviewing to their maximum effectiveness:

- Questioning
- Listening
- Observing
- Evaluating.

In addition, the inspector should attempt to:

1. **Establish a comfortable climate.** When people are treated courteously, honestly, and respectfully, they usually respond positively. If the exchange is to be open, honest, and free, the climate must help to attain those goals.
2. **Articulate the purpose of the interview.** It is helpful to both parties if a common understanding is reached as to the purpose of the interview and the subjects or issues to be discussed.
3. **Secure the interviewee's input.** Because of the nature of inspections, there is a tendency on the part of both the inspector and the interviewee to allow the inspector to dominate the discussion. That is wrong. The interviewee should participate freely and thoroughly. Without this participation, it will be difficult for the inspector to gather the data necessary to accurately evaluate the area being inspected.
4. **Question, listen, observe, evaluate.** These points are the keys to the successful interview. Questions should be carefully worded and should make the interviewee want to talk. And it is here that the inspector must resist the temptation to argue, correct, explain, or preach. It is a time to listen—listen attentively, understandingly, skillfully, and sensitively. And in listening, of course, one must also observe the nonverbal communication of the interviewee. As a result of tactful questioning, sensitive listening, and thoughtful observing, the inspector should now be in a position for accurate evaluating.
5. **Terminate effectively.** Interviews are often terminated too abruptly, and whatever cooperative climate was developed between the inspector and interviewee is likely to be lost. An effective termination is important, especially if the interviewee is going to participate in the validation process.

The interview can be among the most important of all the inspector's communication tools. There is no better way of determining the facts and confirming or refuting information gathered.

Interviews require time, but this is usually time well spent. A good exchange will often give the inspector valuable information. Interviewees have the opportunity to express themselves and the satisfaction of having someone listen. This is particularly true if the individuals being inspected are proud of their achievements and of their areas of responsibility.

Table D-1 summarizes the protocols for conducting effective interviews.

Table D-1. Interview Protocols

- Prepare questions and lines of inquiry in advance.
- Assure prompt team attendance at scheduled interviews.
- Do not "lead" interviewees in answers and conclusions.
- Typically conduct interviews in the interviewees' work location to promote easy access to applicable documents.
- Limit team attendance to one or two interviewers. Limit attendance by line personnel to the interviewee, unless the interviewee requests the attendance of a manager or union representative.
- Ask attendees not to respond to questions asked of the interviewee but to provide only advice and support to the interviewee.
- To ensure an open and candid interview and exchange of information, requests from individuals, including managers, to attend interviews are not normally entertained unless requested by the interviewee.
- Explain the purpose of the interview.
- Pace questions to allow full response, and avoid a "third degree" atmosphere, particularly when multiple interviewers are involved.
- Question tactfully, listen sensitively, observe thoughtfully, and evaluate accurately.
- Take good interview notes. Do not rely on memory.
- Summarize the interview at the end to assure that interviewer conclusions and interviewee concerns are appropriately captured.

Appendix E – Sample Issue Form and One-Page Summary

E.1 Issue Form Use and Sample

In accordance with DOE Order 470.2B, Independent Oversight is required to notify line management promptly (within 24 hours) when appraisal activities indicate one of the following conditions:

- An imminent danger (unmitigated hazard) situation that presents an unacceptable immediate risk to workers, public health, or the environment,
- A major safeguards and security or cyber security vulnerability (e.g., unacceptable risk of special nuclear material theft or diversion, radiological or industrial sabotage, espionage)
- Emergency management deficiencies that present an unacceptable immediate risk to workers, the public, or the environment, or national security.

A sample issue form, shown on the next page, can be used during inspections to document and communicate these conditions. However, preparation of the issue form should not be allowed to delay verbal notifications to line management.

The issue form can also be used at the discretion of the team leader to document emerging significant issues. The team leader should consider using the issue form to:

- Document and communicate particularly complex issues to the site being inspected
- Document weaknesses requiring time-critical mitigative and/or compensatory actions by site personnel
- Solicit a written response from line management on a time-critical issue associated with an inspection activity to aid the team's understanding of the site's perspective
- Clearly communicate issues to site personnel that could adversely affect an inspection rating, particularly those that could result in an area being rated as Significant Weakness
- Help improve communications between the inspection team, DOE line management, and contractors.

**INDEPENDENT OVERSIGHT
ISSUE FORM**

The purpose of this issue form is to convey to key site managers potentially significant information from the current ongoing inspection activity and solicit feedback. It is requested that additional information that may shed light on this issue (including mitigation actions, if appropriate) be provided, along with the site management's comments on factual accuracy. The information on this issue form is preliminary inspection team data that is not meant to communicate the entire picture of performance at the site. Consequently, this form should be provided only to those who have a need to know the information, and used only in the context of ensuring effective communications between the site and the inspection team.

SITE: _____

SUBJECT: _____

1. Issue:

2. Impact:

3. Requirement/Standard:

Approval:

Inspection Team Originator _____ Date _____

Inspection Chief _____ Date _____

E.2 Sample One-Pager

Usually, prior to appraisal closure, a one-page summary (the “one-pager”) is prepared that communicates to site managers the “positive attributes” or strengths and the “issues requiring attention” or weaknesses found during the appraisal. The one-page summary must be validated with site personnel to ensure factual accuracy. Additionally, after appraisal closure the one-page summary is used to communicate the results of the appraisal to senior DOE managers. A sample is shown below.

**OFFICE OF INDEPENDENT OVERSIGHT
HIGHLIGHTS OF THE [DATES] INSPECTION OF
ENVIRONMENT, SAFETY, AND HEALTH (ES&H)
AT THE [SITE]**

The following information is being distributed in keeping with the commitment to provide a summary of the results of Independent Oversight inspections. Line management, including the [Organization] and [Organization] management and operating contractor, has reviewed the results contained in this summary.

Positive Attributes

- Since the previous Independent Oversight inspection, [Organization] has made significant progress in strengthening their oversight processes in such areas as staff capabilities, the Facility Representative program, the Technical Qualification program, the Operating Experience/Lessons Learned program, and the Federal Employee Occupational Safety and Health program.
- [Organization] has substantially improved its safety basis processes and documentation for nuclear facilities. The additional safety basis analyses were an important aspect of [Organization] successful efforts to address most nuclear safety system functionality findings from the previous Independent Oversight inspection.
- The [Organization] Integrated Safety Management program has been improved in a number of areas, including: an ambitious baseline exposure assessment program, robust engineering controls, a rigorous process for hands-on waste sorting and treatment, effective work control processes, strengthened construction work control programs, effective hazardous waste management practices, and development of the Integrated Laboratory Management System.

Issues Requiring Attention

- Some [Organization] organizations do not have a defined work control process, while others rely upon mechanisms that are not adequate to communicate hazards and controls to workers. [Organization] efforts to establish work planning and control processes have not been effective for all areas in ensuring that the requirements are always understood, accepted, and effectively implemented for all work activities.
- Weaknesses are evident in a number of aspects of essential safety systems. The [Facility] safety basis has potential non-conservatism in defining a bounding condition for reactor fuel cladding.

Implementation of DOE requirements for configuration management, the cognizant system engineer program, and safety software quality assurance for various facilities have not been timely. Formality of some activities needs improvement.

- Although progress has been made, feedback and improvement processes have not been fully implemented. [Organization] establishment of a fully effective assurance system has been hindered by weaknesses in the analysis of deficiencies, communication of requirements, and insufficient attention to the adequacy of implementation. Some system-based Site Office oversight program elements are not yet sufficiently mature and/or fully functional. The [Organization] contractor assurance system, essential to the Site Office model for oversight program effectiveness, is in need of improvement.

Appendix F – Guidance for Preparing Portions of Independent Oversight Appraisal Reports Targeted for Senior Management

To meet its oversight obligations, Independent Oversight conducts numerous activities of varying scope and intensity. These include conducting routine inspections of safeguards and security, cyber security, emergency management, and environment, safety, and health programs. Independent Oversight also conducts such activities as special reviews, special studies, and follow-up reviews. These activities share some common elements, but each type of activity is also different in significant ways. It is appropriate that the reports issuing from these various activities be tailored to best represent and communicate the essential facts relating to the activity.

Reporting is one of Independent Oversight’s most important responsibilities. Independent Oversight appraisal reports represent the primary product, and if Independent Oversight does not do a good job of reporting, the considerable effort and resources devoted to planning, data collection, and analysis will not achieve the overall objective of providing information that can be used to make improvements. Independent Oversight appraisal reports provide sufficient information about what was done, what was found, the significance of what was found, and the areas that are in need of corrective actions and management attention. Such information is very useful to the managers, supervisors, and staff who administer and operate the various programs.

However, senior managers often do not have the time, the inclination, or the need to read the technical details contained in the body of a report. Their needs are better served by a concise but thorough explanation that allows them to understand the significant results of the appraisal without having to read the technical details. Senior managers are an important audience that Independent Oversight needs to reach. They often make or influence the decisions regarding policy, funding, and concentration of effort that are necessary to correct the problems that Independent Oversight identifies. If Independent Oversight reports are not successful in alerting senior managers to problems, the chance that the problems will be effectively corrected diminishes. Consequently, Independent Oversight needs to ensure that it does the best possible job of providing the appropriate information to senior managers in its reports.

The overwhelming majority of reports that Independent Oversight produces can be divided into two categories:

- Long reports, often including numerous appendices and containing considerable detail, such as reports of periodic inspections
- Shorter reports, often 5 to 25 pages, usually associated with efforts of narrower scope, such as follow-up reviews, special studies, special reviews, or smaller scope inspections.

For the longer reports that address several program areas and usually contain considerable detail, it is appropriate to write a formal report “front end” that incorporates the essence of the significant details reported in the appendices and provides an overall analysis of program status and needs, as well as conclusions regarding the adequacy (rating) of the inspected program(s). The “front end” is typically five to ten pages long. Usually, a report that has a “front end” does not have a separate executive summary. An annotated outline of a typical front end for such a report is provided in Section F.1.

For the shorter reports of more narrowly-scoped activities—reports that often fall into the 5 to 25 page range, and usually provide detail in the body of the report rather than in appendices—an executive summary is the appropriate vehicle for reaching the senior management audience. Guidance for preparing executive summaries is provided in Section F.2.

F.1 Annotated Outline for “Front End” of Longer Appraisal Reports

1.0 INTRODUCTION

The introduction should be short, probably no more than two pages, and succinctly written. It should normally include the following types of information:

- The type of activity, the office that conducted it, and where and when it was conducted. It also identifies the responsible organizations, such as secretarial office/lead program office, field element manager, and major contractors.
- Limited background information concerning past performance, including significant problem areas and ratings associated with most recent inspections, surveys, etc. If there were significant problems, the introduction may include a brief comment on what corrective (particularly management) actions have been taken.
- Any recent major changes: significant budget changes, mission changes, etc.
- The scope and focus of the activity and, if appropriate, why the activity was conducted. (For example, was the inspection a routine periodic visit, or was it conducted in response to a particular incident/condition, or at the Secretary’s direction?)
- An explanation of where in the report (e.g., front end section, appendices) various types of information (e.g., overall results, detailed results, ratings) can be found.

2.0 RESULTS

This section provides a summary assessment of results of the appraisal activity. Significant results of the topical area inspections are addressed; less-significant results may not be specifically mentioned in this section. This section does not address the results by topic area, but attempts to combine the results of all areas—particularly trying to identify commonalities or trends across topic areas—and provides a balanced discussion of positive and negative attributes and how they affect overall program performance.

2.1 Positive Program Attributes

This subsection describes significant things that the responsible organizations (Headquarters, field element, or contractor) have been doing well, and that contribute to program improvement or strength. It may include such things as initiatives or good, solid performance in program areas, appropriate management attention, and particular actions taken to correct past deficiencies. If applicable, it should include one or more paragraphs that summarize the positive aspects of integrated safeguards and security management (ISSM) and/or integrated safety management (ISM) at the site and the benefits that have been achieved through these programs. Use of a “bolded bullet” approach (i.e., a bold topic sentence that

provides the essence of the positive aspect, followed by supporting detail and examples) is a technique that is effective for communicating to managers.

2.2 Program Weaknesses and Items Requiring Attention

This subsection identifies and discusses weaknesses that warrant management attention. Not all weaknesses identified in the detailed appendices need to be individually mentioned in this section; some weaknesses (particularly weaknesses in the same topic area) may be grouped and discussed in a broader context. The problem or problem area should be sufficiently explained (including examples, if necessary) to promote understanding; significant mitigating circumstances should be explained; and any significant immediate corrective actions should be identified. The impact or potential consequences of these weaknesses should be identified, if appropriate. If applicable, include one or more paragraphs addressing the guiding principles of ISSM and/or ISM as they relate to the identified weaknesses. Use of a “bolded bullet” approach (i.e., a bold topic sentence that provides the essence of the weakness/issue, followed by supporting detail and examples) is encouraged.

3.0 CONCLUSIONS

This section should briefly state the overall conclusions drawn from the appraisal activity. It should discuss the overall program status and should be relevant to the scope of the appraisal activity. It may discuss whether the program is improving or getting worse. It should identify significant areas that require correction and/or need management attention. It should state the cumulative impact of the (good and bad) results on the overall adequacy of program performance.

4.0 RATING

This section provides the rating statement(s) for the program and program elements being evaluated.

F.2 Guidance for Preparing Executive Summaries

INTRODUCTORY and BACKGROUND INFORMATION

Introductory and background information may typically include:

- What appraisal activity was conducted, where and when it was conducted, and by whom
- The scope of the activity
- The reason for the activity (e.g., past problems, special event, routine periodic activity)
- Any other information necessary to prepare the reader for the information that follows.

This information should be provided as succinctly as possible, and may range in length from a minimum of a single paragraph to several paragraphs.

The next two categories of information deal with results of the appraisal activity. When writing about results in the executive summary, do not discuss each topical or subtopical area individually. Rather, extract the significant information from all the topical/subtopical areas and address them in an integrated

manner, concentrating on their overall impact on the evaluated program. Roll all results up to a discussion of the overall program being evaluated.

POSITIVE RESULTS

List and discuss here the significant positive results—things that have been accomplished, initiatives that have contributed to the evaluated program, deficiencies that have been corrected. Roll up individual positive results as appropriate and treat them in general terms here. However, provide enough information or examples to enable the reader to understand what has been accomplished or why the things that are being done are good. It is not sufficient to just state that “a number of program improvements have been made.” Provide sufficient descriptive information without getting into the level of detail contained in the body of the report. This information may require as little as a single paragraph, or up to several paragraphs. Be brief, but include enough to get the necessary points across. Use of bullets here is acceptable, and the “bolded bullet” approach (i.e., a bold topic sentence that provides the essence of the positive aspect, followed by supporting detail and examples) is often effective.

WEAKNESSES NEEDING ATTENTION

List and discuss here significant problems or cumulative weaknesses that require corrective actions and/or management attention. If applicable, include one or more paragraphs addressing the guiding principles of ISSM or ISM as they relate to the identified weaknesses and/or root causes of identified weaknesses. Whenever possible, roll up individual weaknesses and treat them in more general terms, at a higher level. Provide enough details or examples to enable the reader to understand what is wrong and why it is important that it be fixed. It is not enough to merely state that “a number of significant program deficiencies were identified.” Provide enough detail to convey the nature and gravity of the problems, without duplicating the detail contained in the body of the report. Be brief, but include whatever is needed to provide sufficient description and explanation. Use of bullets here is perfectly acceptable, and the “bolded bullet” approach (i.e., a bold topic sentence that provides the essence of the weakness/issue, followed by supporting detail and examples) is often effective.

CONCLUSIONS

This section should sum up the impacts of the good and the bad, and communicate the overall conclusion reached concerning program status. It may indicate whether the program is showing an improving or declining trend, and should identify areas that may require significant management attention. The bottom line regarding program adequacy should be stated here. The conclusion discussion can often be limited to a single paragraph. If applicable, it should include conclusions about the status and ongoing efforts related to ISSM or ISM. If the activity is rated, the rating can be included at the end of this category of information.