

EP-DIR-AP-10007, R2.1

**ENVIRONMENTAL PROGRAMS
PROCEDURE PREPARATION,
REVISION, REVIEW, APPROVAL
AND USE**Effective Date: 7/22/13

| | | |
|------------------|--|--------|
| Procedure Owner: | Signature: | Date: |
| Deborah Guffee | /s/Yvonne Archuleta for Deborah Guffee | 7/9/13 |

Reference

REVISION HISTORY

| Document No./Revision No. | Issue Date | Action | Description |
|---------------------------|------------|---------------|---|
| EP-DIR-AP-10007, Rev 0 | 10/21/11 | New Document | <p>This procedure supersedes the following: SOP-4007, <i>Environmental Programs Directorate, Procedure Development</i>; EP-DIV-AP-0113; <i>WDP Procedure Administration, Use, and Compliance</i>; FOD9-AP-00001, <i>Procedure Preparation Revision Review, Approval and Use</i>.</p> <p>This administrative procedure defines the Environmental Programs (EP) administrative system for the preparation, revision, review, approval and use of EP procedures generated by the EP organizations</p> |
| EP-DIR-AP-10007, Rev 1 | 2/13/12 | Major changes | <p>Added new DC SharePoint process for the Procedure Change Request System (PCRS) in Section 6.1; Added new Training Form as Attachment 1; Deleted Procedure Request Form; Incorporated sub-contractor and SME review criteria in Attachment 4; Added definition of Periodic Review; Added Lessons Learned in Section 6.1; and editorial corrections as necessary</p> |
| EP-DIR-AP-10007, Rev 2 | 6/25/13 | Minor Changes | <p>Various minor editing/grammar changes.</p> <p>Replaced Attachment 1, UTrain Required Reading/Training Roster Form with new Systematic Approach to Training (SAT) form.</p> <p>Changed Attachment 1, Document Review/Approval Matrix to Appendix 1. Removed Procedure Writer's Self-Verification Checklist, Procedure Verification Checklist, Procedure Validation Checklist, IPC & Periodic Review forms. Available in P315.</p> <p>Sec. 6.2 - Changed designation for major and minor revisions to include an incremental increase for minor revisions as opposed to a whole number increase</p> <p>Sec. 5.3 - Added responsibilities for writer/editors.</p> |

Reference

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|-----------------------|----------------|------------------------------|---|
| EP-DIR-AP-10007, R2.1 | Minor Revision | Word change in section 6.4.3 | Changed word in Section 6.4.3 from useless to unless the procedure falls under a DUSA. Updated web link to DUSA Manual in section 6.4.3. |
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Reference

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Reference

1. **PURPOSE**

This procedure establishes and defines the Environmental Programs Directorate (EP) administrative process for the preparation, revision, review, approval and use of all EP procedures and, as applicable, plans generated by EP organizations.

2. **SCOPE**

This procedure is applicable to EP subcontractors and matrixed organizations that generate, control, or use EP procedures.

The development and processing of EP Procedures, Administrative Procedures (APs), Plans, Detailed Operating Procedures (DOPs), Emergency Operating Procedures (EOPs), Abnormal Operating Procedures (AOPs), Alarm Response Procedures (ARPs), and Roundsheets (RSs) shall be performed in accordance with this procedure and LANL P315, *Conduct of Operations Manual*. **Note:** All forms not in this procedure are available in P315, *Conduct of Operations*.

3. **REFERENCES**

- DOE-STD-1029-92, *DOE Standard Writer's Guide for Technical Procedures*
- EP-DIR-AP-10001, *ADEP Document Control*
- EP-DIR-AP-10003, *Records Management Procedure for ADEP Employees*.
- P300, *Integrated Work Management*
- P315, *Conduct of Operations Manual*
- P781-1, *Conduct of Training Manual*

4. **DEFINITIONS AND ACRONYMS**

4.1 **Definitions**

Abnormal Operating Procedures (AOP) – Provide instructions for responding to events that affect several systems, threaten the safety envelope, or require action to mitigate damage.

Deactivation: A temporary withdrawal of a document from authorized use. For example, a document might be deactivated for the duration of an activity suspension or during temporary unavailability of a facility. Deactivated documents are exempt from periodic review requirements, but should be reviewed before reactivation if the normal review date had passed.

Administrative Procedures (AP) – Program-specific Administrative Procedures applicable to ADEP Directorate.

Alarm Response Procedures (ARP) – Direct the response of personnel to visible and audible alarms.

Controlled Index - Index maintained in EDMS by Document Control showing the latest approved revisions.

Document History File (DHF) — the document and any documentation associated with the review and approval process for any given completed document action.

Reference

4.1 **Definitions** (continued)

Detailed Operating Procedures/Standard Operating Procedures (DOP/SOP) - Process-specific DOPs applicable to ADEP Directorate. DOPs shall be either a Use Every Time (UET) or Reference procedure. This also includes what is currently referred to SOP within some ADEP projects.

Emergency Operating Procedures (EOP) – Provide instructions for responding to events that result in operation outside the safety envelope.

Emergency Response Procedures (ERP) – Provide instructions for responding to an emergency in progress.

Immediate Procedure Change (IPC) – Changes limited to Administrative Procedures, Detailed Operating Procedures, Emergency Operating Procedures, Abnormal Operating Procedures, Alarm Response Procedures, that require work to continue that is in progress to support temporary modifications for critical activities.

Major Revision – Substantive modifications to a document that change the actual performance of the activity. Examples include changes in the hazard analysis or controls, the content or order of steps, the assignment of functional responsibilities, or the values of process parameters.

Minor Revisions – Nonsubstantive modifications to a document that change format, correct grammatical errors, update references or organizational names, or clarify without changing original intent. Minor revisions enhance usability but do not change the actual performance of the activity. Minor revisions:

- Must not increase risk.
- Must not alter implementation of a source requirement.
- Must not alter the purpose or scope of the document,
- Must not eliminate any required reviews or approvals, or
- Must not alter the operating, technical, design, process, regulatory, or quality requirements of a document.

Notes – Are used to call attention to supplemental information. They present information that assists the user in making decisions or improving task performance.

Periodic Review – Periodic review is conducted at predetermined intervals to ensure that the document is still required and that it accurately implements current technical and administrative requirements and guidelines.

Roundsheet – Documents the daily, weekly and monthly inspection of equipment condition, status, and select operating parameters performed during rounds. Results are compared with acceptable status and/or ranges, and are monitored for indication of adverse or abnormal trends.

Technical Procedures – Procedures that direct facility and activity-level work. Examples are activities such as equipment operation, maintenance, testing, surveillance, data collection, laboratory research, or field operations.

Validation – A field review, usually performed as a walkdown or simulation, to confirm that a document can be used as written in the environment where the task is to be performed.

Reference

4.1 Definitions (continued)

Verification – A table-top review performed to ensure that a document is technically accurate and meets editorial standards.

4.2 Acronyms

AOP – Abnormal Operating Procedure

AP - Administrative Procedure

ARP - Alarm Response Procedure

DC – Document Control

DAR – Document Action Request

DHF – Document History File

DOP - Detailed Operating Procedure

DUSA - Designated Unclassified Subject Areas

EDMS - Electronic Document Management System

EOP – Emergency Operating Procedure

FOD - Facility Operations Director

IPC - Immediate Procedure Change

PC - Procedure Coordinator

PCRS – Procedure Change Request System

QA - Quality Assurance

RLM – Responsible Line Manager

RS - Roundsheet

SME - Subject Matter Expert

SOM – Shift Operations Manager

SOP – Standard Operating Procedure

UET - Use Every Time

5. RESPONSIBILITIES

5.1 Responsible Line Managers/Document Owners

- Identifies required procedures.
- Approves procedures developed within their respective area of responsibility.
- Assigns SMEs within their respective area of responsibility for procedure development.
- Ensures that activities affecting quality are performed in accordance with documented instructions and procedures.
- Designates the required review authorities (including reviews by outside organizations) for new procedures developed within their respective area of responsibility.

Reference

5.2 Responsibilities, (continued)

- Ensures that any affected procedures developed within their respective area of responsibility are promptly revised after the issuance of new or revised QA procedures or other company-level procedures.
- Ensures that personnel are provided training on the appropriate procedures and revisions to achieve and maintain proficiency in their assigned tasks.

5.2 Technical Writer/Editor

- Collects comments from reviewers for new and revised documents.
- Works with Document Owner/Designee to resolve and incorporate reviewer comments.
- Maintains and uses current ADEP document templates to ensure formatting consistency.
- Uses technical content provided from Document Owner/Designee to develop draft documents.
- Proofs documents to ensure correctness of style, format, spelling, punctuation, grammar, terminology, readability, and consistency.
- Proofs documents to ensure that references are current and that sections within the document are appropriately numbered.
- Cross-checks and ensures correctness of acronyms, and references to figures, tables, attachments, appendices, and other documents.
- Works with Document Owner/Designee and reviewers to clarify inconsistencies.

5.3 Training Specialist

- Ensures the development and implementation of training requirements based on new or revised procedures, in accordance with P781-1, *Conduct of Training Manual*.
 - Creates new course and/or require-read numbers
 - Updates existing curricula and/or adds the requirement to the target audience
 - Notifies target audience listed on the UTrain Required Reading/Training Roster Form (Attachment 1).

5.4 Procedure Coordinator/Designee

- Coordinates and tracks the preparation, review, approval, revision and publication of all EP procedures.
- Maintains a system to track requested changes from initiation to final approval.
- Coordinates the documented resolution of review comments on procedures prior to final approval and issuance.
- Coordinates IPC Roll-Ups after the IPC has been outstanding for an extended period (e.g., greater than six months), or when the procedure has been affected by several changes (e.g., more than five), as applicable.

Reference

5.4 Procedure Coordinator/Designee, (continued)

- Maintains and revises the EP Procedure Review and Approval Matrices.
- Ensures proper document content, numbering, cancellation, formatting, and proper IPC/field changes are incorporated, as applicable.
- Submits document history file (DHF) and approved document to document control.

5.5 Project Personnel

- Performs activities in accordance with the latest revision of approved procedures.
- Reports procedure errors or deficiencies to their management.
- Initiates requests for development, revision, or cancellation of procedures when necessary.
- Prepares procedures and reviewing procedure drafts, as assigned.

5.6 Document Control (DC)

- Ensures current procedure revisions are available to project personnel.
- Maintains a history file for approved procedures.
- Monitors the status of periodic review schedules for active controlled documents.
- Notifies the RLM/Document Owner and Procedure Group, 90, 60 and 30 days before the periodic review date is due.

6. PROCEDURE

6.1 Development of New Procedures, Revisions, or Cancellations

NOTE: *A Document Action Request (DAR) should be obtained from EP-DIR-AP-10001, ADEP Document Control procedure.*

EP personnel may identify the need for a new procedure, revision, or cancellation of an existing procedure by completing Section #1 of the DAR (Attachment 2) and shall forward the DAR to the RLM/Document Owner for processing approval.

The RLM/Document Owner shall complete Section #2, and if approved, complete section #3. If the request is approved the RLM/SME shall coordinate with the Procedure Coordinator/Designee to assign personnel to prepare new or revised procedure drafts.

If a DAR is disapproved, then it shall be returned to the originator with an explanation of the disapproval.

When initiating a document revision, access the Electronic Document Management System (EDMS) Procedure Change Request System (PCRS) module to review all accepted Procedure Change Request (PCRs) posted against a document, incorporate pending, accepted PCRs into the document revision and enter incorporated PCR numbers in the applicable block provided on the DAR form.

Reference

6.1 Development, of New Procedures, Revisions, and Cancellations, (continued)

The originator shall submit an electronic copy of the initial draft to the Procedure Coordinator/Designee.

Cancellation of existing procedures shall be processed by the Procedure Coordinator/Designee and shall receive the same type and level of review as the original procedure.

The RLM/Document Owner should ensure that the Lessons Learned Resources web page located at: <http://operatingexperience.lanl.gov/default.aspx> is reviewed for any applicable information that should be incorporated into the procedure.

The Procedure Coordinator/Designee may place a “Deactivation” on procedures for reasons such as temporary withdrawal of a document from authorized use, duration of an activity suspension, during temporary unavailability of a facility, or cancellation in progress, and are exempt from periodic review requirements, but should be reviewed before reactivation if the normal review date has passed.

6.2 Procedures Format/Content

Technical procedures and administrative procedures that define the specific steps used to comply with requirements to maintain the facility safety, security, and environmental envelop shall be developed using the P315 technical procedure template and DOE-STD-1029-92, Writer’s Guide for Technical Procedures.

Superseded documents shall be noted on the DAR and in the Revision History section, of the superseding document.

Administrative procedures that define the communication and coordination activities necessary to carry out the facility’s technical programs, management control programs, and design control programs. These procedures are not directly used to operate or maintain equipment or facilities, and do not require step-by-step performance and may “often” or “sometimes” be performed in any sequence. The ADEP Procedure Template (Attachment 3) can be used in formatting and developing administrative procedures. All procedures shall be uniquely identified and shall be assigned a unique identification number by document control.

All procedures shall be uniquely identifiable, retrievable, and reproducible. If a procedure is cancelled, the unique identification number shall not be used again. Procedures are controlled in accordance with EP-DIR-AP-10001, *ADEP Document Control*.

Changes incorporated into a procedure revision (e.g., Rev. 0 to Rev. 1) shall be identified via a vertical line (revision bar) in the margin of the affected text and noted in the Revision History section.

Revision bars are not required for a procedure undergoing a total rewrite. However, the procedure shall be designated as "Total Rewrite" - Revision bars not included in the Revision History section.

All major revisions shall be incremented by 1, i.e., R0 to R1 and minor revisions may be incremented by .1, i.e., R0.0 to R0.1, etc. or by 1.

Reference

6.2 Procedure Format/Content (continued)

The cover page shall include the following:

- Document identifier, including revision number
- Title
- Effective date
- Approval signatures (RLM/Document Owner)
- Usage Mode (Reference, Use Every Time “UET”)

The header for each procedure (starting on the second page) shall include the following:

- Procedure Title
- Unique identifier-Document Number
- Revision number
- Effective date
- Draft (if applicable)
- Page number and total pages (e.g., Page 6 of 26)
- Usage Mode (Reference, Use Every Time “UET”)

The initial electronic draft file of each procedure shall be identified with the assigned identification number, the proposed revision number, and clearly identified as a draft document (e.g., Draft A, Draft B, and Draft C).

The title of the position responsible for the performance of an activity shall be identified in the section that defines the requirements of the activity.

Procedures shall describe project activities in adequate detail to ensure that the steps can be performed as required

Attached forms or charts, which will be beneficial to the user in accurately comprehending and using the required standards described in the procedure, shall be labeled "Example", excluding datasheets that are required to be completed during procedure performance.

In accordance with P300, Integrated Work Management, work components and processes must be defined in sufficient detail to enable the hazards and the situations or circumstances in which they could cause harm to be identified and analyzed. A documented hazard analysis (e.g., Job Hazard Analysis Tool) **SHALL** be conducted on new Technical Procedures before or in parallel with the procedure development phase to ensure that hazards are identified and controls are incorporated into the procedure. Major revisions require a review of the existing hazard analysis document (e.g., Job Hazard Analysis Tool) against the changes to the activity in order to make a determination as to whether any associated hazards or controls are affected by the activity changes. If a hazard analysis has not been performed, then the hazard analysis must be conducted. The following are exempt from this requirement:

- Minor revisions
- Administrative Procedures
- Alarm Response Procedures (ARPs)
- Abnormal Operating Procedures (AOPs)
- Emergency Operating Procedures (EOPs)
- Immediate Procedure Changes (IPCs) that implement a minor revision

Reference

6.2 Procedure Format/Content (continued)

A Facility Operations Director (FOD) or designee [e.g., Shift Operations Manager (SOM)] review and concurrence are required for all new hazard analyses and for any revision to a hazard analysis. Therefore when a technical procedure incorporates the hazard analysis the FOD or designee review and concurrence is required for any new technical procedure or major revision to a technical procedure that alters the hazards or controls associated with a technical procedure.

6.3 Procedure Review and Concurrence Process

Reviews shall be conducted on new and revised procedures per the Document/Review Approval Matrix (Appendix 1) and periodic reviews shall be performed as scheduled. Procedures are reviewed to ensure adherence to all environmental, technical, administrative and quality assurance requirements.

6.3.1 Review and Concurrence of New and Revised Procedures

Upon completion of the draft, the author shall provide the draft procedure and a completed DAR completed through Section #3 to the Procedure Coordinator for formal review distribution.

The Procedure Coordinator shall coordinate and track the review status of procedures to ensure that the reviews are scheduled, completed, and the comments are resolved in a timely manner.

During the review cycle, unapproved procedures shall be clearly marked "Draft" to indicate status.

The Procedure Coordinator/Designee will review new procedures for administrative compliance and formatting. The Procedure Coordinator/Designee shall distribute the procedure draft to the designated reviewing organizations.

Procedure reviews may be conducted during roundtable meetings with a member of the procedures group, reviewers or designees present.

NOTE: *The training organization should be included on distribution of a new or revised document in order to ensure that they are aware of upcoming changes, but not as a reviewer unless the training organization is affected by the document.*

The reviewer(s) shall document their review via email or on an approved Document Review and Concurrence Form (Attachment 4) electronically or in permanent (non-erasable) ink and sign, date, and return to the Procedure Coordinator/Designee by the required date for disposition of comments. Comments not received by the assigned reviewer on the required due date (e.g., 5 working days) may be noted "No Comment" for that reviewer and included in the DHF with approval of the RLM/Document Owner.

NOTE 1: *Essential Comments by a reviewer **MUST** include the following supporting documentation:*

- *Technical information that is necessary to satisfy the needs of the reviewer's discipline/organization/group.*
- *Requirements source documents **MUST** be identified (e.g., OSHA, Policy, Program Documents)*

Reference

6.3 Review and Concurrence Process of new and Revised Procedures (continued)

- *Justification for essential comment (e.g., technical inaccuracy)*
- *Essential comments may be downgraded to Editorial Comments if the requirements as listed above are not satisfied.*

NOTE 2: *The RLM/Document Owner has the final decision on comment resolution.*

NOTE 3: *All essential comments **SHALL** be concurred with before the document is approved.*

Review comments and comment concurrence may be submitted by electronic means (e.g., email or fax) as an acceptable alternative to the paper submittal.

Emails and faxes used to document review comments and comment concurrence will be included in the DHF.

A completed procedure review **SHALL** include the following:

- Procedure number
- Title and revision
- Date the review was completed
- Editorial comments as well as comments requiring disposition
- Disposition of comments
- Reviewer's concurrence indicating acceptance of comment disposition

The Procedure Coordinator/Designee **SHALL** assign a comment disposition due date (e.g., 10 working days) and will coordinate the disposition of comments with the author.

The authors **SHALL** disposition and incorporate comments as appropriate. The revised procedure with comments dispositioned shall be submitted to the Procedure Coordinator by the comment disposition due date.

NOTE: *A review is not complete until all comments requiring disposition are satisfactorily resolved. However, if a designated reviewer does not provide comments or requests an extension within the return due date listed on the procedure review form, (e.g., 5 working days), then that review may be noted as "No Comments" and will be included in the DHF. Comments received after the due date **SHALL** be considered for the next revision.*

The Procedure Coordinator/Designee **SHALL** seek comment concurrence via email, or **SHALL** gain comment concurrence by forwarding the revised procedure and the Document Review and Concurrence Form with the dispositioned comments to the appropriate reviewers for comment concurrence.

The reviewers who submit comments **SHALL** indicate their concurrence with the comment resolutions by signing the Document Review and Concurrence Form (Attachment 4), if used, otherwise via e-mail to the Procedure Coordinator/Designee.

Reference

6.3 Review and Concurrence Process (continued)

If there has been no response from a designated reviewer during the Review and Concurrence period, then the Responsible Manager **SHALL** note in the concurrence section of the DAR “No Response Received” for that reviewer or remove the reviewer from the DAR.

6.3.2 Procedure Validation

The Procedure Coordinator/Designee **SHALL** initiate Part # 1 of the Procedure Validation Checklist of the Conduct of Operations Manual, P315 for all documents identified as requiring a validation on the DAR. The Procedure Coordinator/Designee forwards the validation form and draft document to the RLM/Document Owner requesting a validation.

The RLM/Document Owner **SHALL** identify SME(s) to perform the validation, and the identified SME(s) will complete the Procedure Validation Checklist.

Validations should be performed by a team composed of at least one validator and one procedure writer. If the procedure writer developed the procedure being validated, care must be taken to ensure that validator’s comments are not explained in a way by the procedure writer interpreting what the procedure was intended to direct. Instructions should not require an interpretation for an experienced and knowledgeable individual. Additional personnel (e.g., engineering, training specialist, or senior supervisory watch) may be requested to participate on the validation at the discretion of the RLM/Document Owner.

For a specific validation, the validator is assigned by the RLM/Document Owner. The validator is ideally an individual who is knowledgeable about the process and who was not involved in developing the procedure.

Typically, only Technical Operating Procedures are validated, however, Administrative Procedures may also be validated. The RLM/Document Owner determines the need for a validation and documents that need on the DAR form.

Validation is required for all new technical procedures and recommended for major revisions to technical procedures.

The RLM/Document Owner **SHALL** forward approved Procedure Validation Checklists to the Procedure Coordinator.

6.3.3 Periodic Review of Procedures

NOTE: *Periodic reviews may be conducted earlier if specified by management. It should be understood that the review date is not an expiration date and does not imply that the procedure is inactive.*

ADEP procedures **SHALL** be reviewed for accuracy, applicability, purpose, and scope on an established schedule. A periodic review of all ADEP procedures **SHALL** be conducted as follows:

| | |
|---|-------------|
| Administrative (non-safety)/Other documents | Five years |
| Technical (DOPs/SOPs): | Three years |
| Emergency Procedures: | One year |

Reference

6.3.3 **Periodic Review of Procedures, (continued)**

The Procedure Coordinator/Designee **SHALL** coordinate with management to ensure that the appropriate periodic reviews are performed and documented.

If a procedure is revised during other than the scheduled periodic review time and the requirements of the periodic review are conducted and documented, the next review is rescheduled based on the new revision date.

The Document Control **SHALL** track periodic review dates, identify and notify the RLM/Document Owner of the date for the next required document review.

6.4 **Procedure Approval**

Following completion of the procedure review(s), resolution of comments, and procedure validation (as applicable), the Procedure Coordinator/Designee **SHALL** initiate a procedure approval package that includes a copy of the final procedure, DAR, and other supporting documentation (e.g., validation form and concurrence emails).

Approval Process

The approval process **SHALL** be completed in the following order:

- [1] The RLM/Document Owner **SHALL** complete the “Training Determination completed by” section on the DAR and return the DAR to the Procedure Coordinator/Designee.
- [2] The Procedure Coordinator/Designee **SHALL** forward the procedure to appropriate personnel for USQ/USI review and ensure that the USQ/USI section of the DAR is completed.
- [3] The Procedure Coordinator/Designee **SHALL** forward the procedure to a qualified Derivative Classifier for review **unless** the procedure falls under the Designated Unclassified Subject Areas (DUSAs) guidelines, <http://int.lanl.gov/security/classification/docs/dusa-manual.pdf>, which allows the RLM/Document Owner to cite the DUSA number on the DUSA section of the DAR.
- [4] Procedure Coordinator/Designee removes “Draft” from the cover page and assembles approval package.
- [5] Procedure Coordinator/Designee forwards the approval package to the RLM/Document Owner.

NOTE: *The effective date of a procedure **SHALL** be assigned by the applicable RLM/Document Owner and **SHALL not** precede the approval date of the procedure. When determining the effective date of an approved procedure consideration **SHALL** be given to allowing time for facility preparedness, posting in the document control system, distribution, training and notification of affected organizations. A formal implementation plan may be warranted for the implementation of a procedure depending on the degree of changes in the procedure, the complexity of the new requirements in the procedure being implemented, and the degree of difficulty likely to be experienced by personnel in implementation of the new requirements. The effective date should be assigned at the time that a procedure is approved by the.*

Reference

6.4 Procedure Approval, (continued)

RLM/Document Owner but may be assigned at a later time for procedures where the actual implementation date is not known due to external influences such as readiness assessments or training requirements.

- [6] RLM/Document Owner completes section 5, Final Approval, of the DAR signs and dates the procedure, and returns the procedure to the Procedure Coordinator/Designee.
- [7] Procedure Coordinator/Designee adds effective date to procedure and removes “Draft” from all pages in the procedure header.
- [8] The Procedure Coordinator **SHALL** enter on the cover page of the electronic word copy procedure “/s/” RLM’s approval name and date, and email to Document Control along with the procedure next review date.
- [9] The Procedure Coordinator **SHALL** forward the procedure approval package (approved procedure and completed DAR) to Document Control for posting.
- [10] Procedure Coordinator/Designee **SHALL** provide completed document history file to Document Control within 3 working days of procedure being posted.
- [11] The RLM/Document Owner **SHALL** update the PCRS, as applicable.

6.5 Immediate Procedure Change (IPC)

An IPC should be limited to changes required to continue work in progress, support temporary modification for critical activities, as identified by the RLM/Document Owner. The RLM/Document Owner evaluates a proposed change to verify the need and to assess whether it is a major or minor change.

6.5.1 IPC Numbering

IPC numbering must be sequential and specific to the affected revision number. The revision number does not change (e.g., DOP 00001, Rev 2 IPC-1). The RLM ensures that the IPC information is entered in the IPC Log, located in the Operations Center for an IPC not posted on the EDMS.

6.5.2 IPC Initiation

The Originator marks the document to be changed as follows:

- Draw a single line through content to be deleted or changed, initial and date the change or electronically update the document.
- Enter the proposed content legibly; ensuring that reproduced copies will be legible. If additional pages are needed, attach them as insertable pages. Mark the added pages with the appropriate document header information and number them to indicate the insertion point (for example, following page 13, an inserted page would be 13A). Clearly mark the document at the specific location where the additional pages should be inserted.
- Place a vertical line (revision bar) in the margin, running the length of all changes. The IPC revision bar should be separate and distinct from any existing revision bars within the document.

Reference

6.5.2 **IPC Initiation, (continued)**

- Enter the IPC number next to each revision bar.
- Record the IPC number (e.g., IPC-1, IPC-2) next to the revision number on the title page.

The Originator completes Section 1 of the Immediate Procedure Change Cover and forwards the Cover Sheet, marked-up document, and any additional pages to the RLM/Document Owner.

6.5.3 **IPC Review**

The RLM/Document Owner reviews the IPC, assigns and obtains SME review and validation as deemed necessary to ensure the need, technical accuracy, and completeness of the proposed document modification. If the changes may be safety-basis related, Safety Basis (USQ) must review and concur with the changes.

6.5.4 **IPC Approval**

If the RLM/Document Owner approves of the proposed change, he or she **SHALL** complete Section 3 of the IPC Cover Sheet after the appropriate reviews have been completed, including USQ processing, as required. If the IPC will be incorporated into the next document revision, the checkbox for “Permanent” is marked. If it is for short-term use, the RLM/Document Owner marks “Limited Use” and enters the expiration date and time, if applicable. Further explanation may be entered in the Comments field and documented in the IPC Log book, as applicable.

6.5.5 **IPC Implementation**

If work was paused contingent on the document change, the RLM/Document Owner **SHALL** notify the Originator and ensure affected personnel are cognizant of the changes prior to resuming the work according to the changed document. Copies of the IPC Cover Sheet are attached to the front of marked-up copies of the document until the document is issued by the Document Control.

6.5.6 **IPC Control**

If the shift ends before the IPC can be processed by the Procedures Group and issued by a Document Control, then the RLM/Document Owner **SHALL** ensure that the IPC is included in the shift turnover, as applicable. The IPC Log may be used to facilitate tracking and communication of approved IPC's.

As soon as practicable, and not to exceed three working days, the RLM/Document Owner **SHALL** forward the changed document and associated IPC Cover Sheet to the Document Control for posting on the EDMS.

6.5.7 **IPC Roll-Ups**

Procedure revisions should be initiated when an IPC has been outstanding for an extended period (e.g., greater than six months), or when a procedure has been affected by several changes (five IPC's or more), or when the changes obscure the interpretation of the instruction. All currently effective IPC's should normally be incorporated when the procedure is revised.

Reference

7. RECORDS PROCESSING

- [1] Copies of approved procedures and history records are submitted to a DC in accordance with EP-DIR-AP-10001, ADEP Document Control.
- [2] DC ensures that documents generated by the performance of this procedure are processed as follows:

| Record Identification | Record Type Determination | Protection/Storage Methods | Processing Instructions |
|---|----------------------------------|--|---|
| Attachment 2, <i>Document Action Request, (DAR)</i> | Quality Assurance (QA) | Submit records in accordance with EP-DIR-AP-10003, <i>Records Management Procedure for ADEP Employees.</i> | When the records are ready for final disposition, the record is transferred to Records Management in accordance with EP-DIR-AP-10003, <i>Records Management Procedure for ADEP Employees.</i> |

8. APPENDICES

Appendix 1 Document Review/Approval Matrix (Example)

9. ATTACHMENTS

- Attachment 1 Systematic Approach to Training Form
- Attachment 2 Document Action Request (DAR) (Example)
- Attachment 3 ADEP Procedure Template (Example)
- Attachment 4 Review and Concurrence Form (Example)

Reference

[Click here for "Required Read" credit.](#)

Reference

APPENDIX 1
Document Review/Approval Matrix

PROCEDURE REVIEW DISCIPLINES

NOTE *The table is provided to assist the Responsible Manager with selecting specific reviewing organizations in order to ensure that the document is accurate, correct, compliant, and complete. This list is not all-inclusive.*

| Organization Name | Request Review and Concurrence for Documents that: |
|-------------------------------------|--|
| Facility Operations Director | All division level procedures and procedures that require a division level review and concurrence to maintain the facility safety and compliance envelop. |
| Engineering Management | Involve engineering policy or practices. |
| Operations Manager | Authorizes/releases all work within their scope to maintain the facility safety and compliance envelop. Review responsibilities may be delegated to the Shift Operations Manager. |
| Maintenance Manager | Ensures that both nuclear and nonnuclear facilities have safe, reliable, and efficient infrastructure maintenance and utilities support program. |
| Senior Shift Operations Manager | Implements multiple facility safety and compliance envelops and adheres to authorized safety basis and other regulatory requirements. Review responsibilities may be delegated to the Operations Manager |
| Shift Operations Manager | Activities are performed safely and in accordance with approved procedures and within the requirements of the Technical Safety Requirements. Review responsibilities may be delegated to the Shift Operations Supervisor. |
| Shift Operations Supervisor | Ensures work is being performed in a safe manner. Supervises and monitors Nuclear Operations performances. |
| Person-In-Charge | Assigned responsibility and authority for validation, coordination, execution, and closeout of a work activity in accordance with Integrated Work Management. |
| Cognizant Systems Engineer | Involve interaction with Vital Safety Systems (e.g., safety class or safety significant) and safety basis-related requirements (e.g., surveillance requirements). |
| Engineering | Involve interaction with systems/processes facility, facility design basis, and operational requirements. |
| Criticality Safety Engineer/Officer | Describe the receipt, handling (e.g., venting, storage, and transfer), non-destructive measurement (e.g., assay and real-time radiography) of fissionable material bearing containers (e.g., 55-gal drums and 85-gal drums). |
| Environmental | Describe the handling, processing, use, storage, transfer, measurement, or inventory of hazardous chemicals, waste, and gases. Changes or modifications to Resource Conservation and Recover Act (RCRA) Treatment, Storage, and Disposal (TSD) facility permit requirements such as facility emergency equipment, communications equipment, and facility structure or equipment. |
| Fire Protection | Affect fire safety, including fire protection engineering, fire response, fire protection, and fire system inspection, testing, and maintenance and all related documents in accordance with the National Fire Protection Association requirements. |
| Industrial Hygiene | Concern issues associated with industrial hygiene and occupational safety. |
| Quality Assurance | Potential impact to QA requirements |
| Radiological Protection | Affects radiological or radioactive systems/processes or alter systems or components that monitor/mitigate the consequences of a radiological accident. Work activities performed within a Radiological Controlled Area. |
| Security | Address: <ul style="list-style-type: none"> • Protection of or access to classified matter • Physical or administrative access controls or boundaries of security areas • The installation, modification or removal of security systems (e.g., alarms) • Access or work performed by foreign nationals |
| Subject-matter Expert | All documents to ensure that the document can be performed correctly, safely, and effectively as written |
| Software QA | Requires the use of any software. |
| Sub-contractor | Documents affecting the operations of a sub-contract organization performing work activities within a LANL facility or within the property boundary of the LANL Site. |
| Packaging and Transportation | Involve packaging, onsite transfer, or off-site shipment of material. |
| Affected Organization | Documents affecting the operations of an organization within a facility. |
| Training | Completes the Training Level Determination Form for every document. |

Reference

ATTACHMENT 1

Systematic Approach to Training Form

Document Number: CT-ADEP-SAT-001-R00
Title: ADEP Systematic Approach to Training (SAT) Determination Form
Effective Date: 3/7/2012

Revision: 0

ADEP Systematic Approach to Training (SAT) Determination Form

| Section 1: To be completed by Document Owner or Manager (or Designee) | |
|--|--|
| <i>Document/Activity Title</i> | <i>Document Number</i> |
| <i>Document Owner, Manager or Designee</i> | |
| 1. Does the document/activity: | |
| Change or implement new policy, process, intent, scope, purpose, or responsibilities; or change safety or technical content in a document or process? <i>If yes, then SAT <u>may</u> be applicable.</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Documents only: Change editorial and grammatical content <u>only</u> ? <i>If yes, then SAT <u>is not</u> required. Dissemination of information may be handled in a less formal manner</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Target Audience (Who is affected by the document or activity?). Use page 3 of this form <u>ONLY</u> if you are required to identify the target audience by name and Z#, rather than by facility and position (e.g RANT Operators, RCTs, etc). | |
| 3. Is there a specific driver that mandates training (e.g. the procedure requires training to be performed)? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, SAT <u>is</u> applicable. Identify driver: _____</i> <i>If no, continue with analysis to determine if SAT <u>is</u> applicable.</i> | |
| 4. | |
| a) Could an <u>incumbent worker</u> in the target audience perform the task/activity based on their <u>current</u> knowledge, skills, or abilities? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b) Could a <u>new worker</u> in the target audience perform the task/activity based on their <u>current</u> knowledge, skills, or abilities? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <i>If yes, to both questions, SAT <u>is not</u> required. Transmission of information can be completed in a less formal manner (e.g. required reading, briefing, discussion, etc.) in accordance with P315, Conduct of Operations Manual.</i> <i>If no, to either question, SAT <u>may</u> be applicable.</i> | |
| 5. Has the audience been trained previously on the activity (consult with training coordinator) or has an item number been created for this document (including previous revisions)? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Identify Course/Item #: _____ Continue with analysis.</i> <i>Are other non-training options appropriate?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, SAT <u>may</u> be applicable.</i> | |
| Determination | |
| Is formal communication of the documented information/process required? If yes, answer next question. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Is SAT applicable? <i>If the answers above do not imply SAT is required, skip to Section 2 to obtain approval</i> <i>If yes does it impact an approved qualification (consult with training staff)?</i> <i>Identify the qualification: _____</i> <i>If No, then identify the appropriate method of communicating the information (e.g. briefing, discussion, etc.) in accordance with P315, Conduct of Operations Manual.</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No |

Reference

ATTACHMENT 2
Document Action Request (DAR)

| Document Action Request | | | |
|--|----------------|--|------------------------|
| Section 1 – Originator Request | | | |
| Document No.: | | Revision No.: | |
| Title: | | Page <u> 1 </u> of <u> </u> | |
| Description of requested action (Attach numbered additional sheets if needed.): | | | |
| Originator Name (print): | | Z#: | Organization: Date: |
| Section 2 – Responsible Manager Approval for Processing (see P315, Att. 16, Section 16.5.1.c) | | | |
| <input type="checkbox"/> New Procedure | | <input type="checkbox"/> Minor Revision <input type="checkbox"/> Deactivation | |
| <input type="checkbox"/> Major Revision | | <input type="checkbox"/> Cancellation <input type="checkbox"/> Perform Concurrent Periodic Review? | |
| <input type="checkbox"/> Superseded Document(s) and Revision Number: | | | |
| <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved (return to originator) | | Comments: PCRs | |
| Signature: | | Print Name, Title: Z#: Date: | |
| Section 3 – Hazard Grading (see P315, Att. 16, Section 16.5.1.f) | | | |
| Hazard Determination: <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High/Complex <input type="checkbox"/> N/A | | | |
| Document is authorized to serve as IWD? <input type="checkbox"/> Part I only <input type="checkbox"/> Full IWD <input type="checkbox"/> N/A | | | |
| Section 4 – Required Reviews (see P315, Att. 16, Section 16.5.3) | | | |
| Discipline: | Name: | Signature: | Date: |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Validation Required: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Waive Comment: | | | |
| Scope of Validation: <input type="checkbox"/> Entire Procedure <input type="checkbox"/> Change Only | | | |
| Validation Method: <input type="checkbox"/> Walkdown <input type="checkbox"/> Simulation <input type="checkbox"/> Tabletop | | | |
| Training Determination completed?: <input type="checkbox"/> Yes <input type="checkbox"/> N/A Completed by: | | | |
| USQ/USI Number (if needed): | Signature: N/A | Z#: N/A | Date: N/A |
| Derivative Classifier: <input type="checkbox"/> Unclassified <input type="checkbox"/> OOU <input type="checkbox"/> UCNI <input type="checkbox"/> Classified | Signature: N/A | Z#: N/A | Date: N/A |
| <input type="checkbox"/> DUSA DUSA # | Signature: N/A | Z#: N/A | Date: N/A |
| Section 5 – Final Approvals | | | |
| <input type="checkbox"/> Release | | Details: | |
| <input checked="" type="checkbox"/> Hold | | Release on effective date. | |
| Responsible Manager Signature: | | Print Name, Title: Z#: Date: | |

Reference

ATTACHMENT 3
ADEP Procedure Template

Document Number, Revision No.
(e.g., EP-AREAG-FO-DOP-0206, R.0)

DOCUMENT TITLE

EXAMPLE

Effective Date: _____

Refer to DIV-GUIDE-0102, NWS Procedure Writer's Guide, and DOE STD-1029-92, Writer's Guide for Technical Procedures, for additional information.

| | | |
|------------------|------------|-------|
| Procedure Owner: | Signature: | Date: |
|------------------|------------|-------|

This document fully satisfies the requirements of P300, Integrated Work Management, in order to systematically describe the work activity, the associated hazards, and the controls that **MUST** be employed to mitigate the risks.

Reference

ATTACHMENT 4
Document Review and Concurrence

Document Review and Concurrence

| | | | | | | | |
|---|-----|------------------|---------|---|--|---------------|--|
| Document Title | | Number: | | Revision: | | Draft: | |
| Document Action: <input type="checkbox"/> New <input type="checkbox"/> Revision <input type="checkbox"/> Deactivation <input type="checkbox"/> Cancellation | | | | | | | |
| Comments due by: | | | | Concurrence due by: | | | |
| Reviewer Name: | | | | Z#: | | Discipline: | |
| <small>Instructions: Number comments sequentially. Designate as essential (E) or suggested (S). Only essential comments require concurrence with the disposition. Use extra sheets as needed, including the document information in the header and numbering the pages. For revisions, limit comments to the content that has changed. For no comments, check the applicable box and sign the form. Return the completed form to the Point of Contact listed below.</small> | | | | | | | |
| <input type="checkbox"/> No comments | | | | <input type="checkbox"/> Waive (Document has no impact or relevance to our discipline or organization.) | | | |
| # | E/S | Document Section | Comment | | | Disposition | |
| Example | | | | | | | |
| Reviewer Signature: | | Print Name: | | Z#: | | Date: | |
| Dispositioner Signature: | | Print Name: | | Z#: | | Date: | |
| Concurrence Signature: | | Print Name: | | Z#: | | Date: | |
| Return to Point of Contact: | | | | Z#: | | Organization: | |