

Refer to 1-A01-PPG-001 for Processing Instructions.
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 Mark Brooks *Mark C. Brooks* 10/14/93

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K. BENTZEN *K. Bentzen* 11/11/93

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 BY: NA
 DATE: NA

Rocky Flats Plant

2-G23-ER-ADM-18.05

REVISION 0

ENVIRONMENTAL RESTORATION MANAGEMENT SELF EVALUATION

APPROVED BY: [Signature] / S. Stiger 16-30-94
 Associate General Manager, Print Name Date
 EG&G Environmental Restoration Management

[Signature] / K. Bentzen 16-27-94
 Quality Assurance Program Manager, Print Name Date
 EG&G Environmental Restoration Management

States that to the best of my knowledge, the necessary and sufficient Requirements, Codes, and Standards are met.

CONCURRENCE BY: NOT REQUIRED / /
 Assistant Manager, Print Name Date
 Environmental Restoration Division
 DOE, Rocky Flats Field Office

Environmental Protection Agency Approval Required: Yes No

Responsible Organization: Environmental Restoration Effective Date: 7-15-94 lme

CONCURRENCE BY THE FOLLOWING DISCIPLINES IS DOCUMENTED IN THE PROCEDURE HISTORY FILE:

- Site Quality Assurance
- Remediation Project Management
- Environmental Engineering & Technology
- Geosciences
- Environmental Operations Management
- Environmental Documentation
- Solar Pond Projects
- Sample Management
- Program Integration and Reporting

USE CATEGORY 4

ORC review not required

Periodic review frequency: 1 year from effective date

DOCUMENT CLASSIFICATION REVIEW WAIVER
 PER R.B. HOFFMAN, CLASSIFICATION OFFICE
 JUNE 11, 1991

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1-20	07/15/94 mm/dd/94 lmc	

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1. PURPOSE

This procedure describes the Environmental Restoration Management (ERM)-specific requirements associated with the implementation of 1-11000-ADM-16.10, Self-Evaluation Program.

2. SCOPE

This procedure applies to the self-evaluation of ERM activities by line management, consistent with the requirements of 1-11000-ADM-16.10. This procedure is implemented by ERM management. The evaluations addressed by this procedure are applicable to ERM and its subcontractors. This procedure provides clarification of ERM-specific implementation requirements and information associated with the implementation of 1-11000-ADM-16.10. This procedure is intended to be implemented in association with the Level 1 procedure which specifies the general requirements and steps of implementation of the self-evaluation program at Rocky Flats Plant (RFP). Management By Walking Around (MBWA) (as established in HPM-083-93, Management By Walking Around) self-evaluations performed by responsible managers and supervisory personnel, and the Cost Plus Award Fee (CPAF) self-assessments performed by the ERM Associate General Manager (AGM) are also within the purview of this procedure.

3. OVERVIEW

The activities described in this procedure generate information that is submitted to the RFP Self-Evaluation Program Manager (SEPM) for inclusion in the RFP site-wide self-evaluation program.

4. DEFINITIONS

AGM Designee. The manager designated by the ERM AGM to implement the administration of this procedure. Currently, this is the Quality Assurance Program Manager (QAPM).

Direct Report Managers (DRMs). Department managers and directors who report directly to the AGM of ERM. For purposes of this procedure, the Geosciences Division and the Environmental Engineering and Technology Division are considered to be direct report managers.

4. DEFINITIONS (continued)

Quality Assurance Program Manager (QAPM). The QAPM is the individual designated by the ERM AGM to ensure implementation of the internal ERM quality program. Currently, this is the manager of Environmental Quality Support.

Responsible Manager. The ERM manager or director responsible for an activity or set of activities within the ERM management chain.

5. RESPONSIBILITIES**5.1 ERM Associate General Manager (AGM)**

Ensures implementation of the ERM Self-Evaluation program.

Ensures that the ERM self-evaluation packages and their revisions are reviewed and approved.

Ensures that concerns, findings, and improvements identified during self-evaluations are entered into the Plant Action Tracking System (PATS).

Monitors and oversees this program to ensure its effective implementation.

Provides monthly report to the Manager, Strategic Planning, regarding CPAF self-assessments.

Ensures that copies of monthly self-evaluation reports are transmitted to the Self-Evaluation Program Manager.

5.2 AGM Designee

Acts for the ERM AGM to administer this procedure.

5.3 Direct Report Managers (DRMs)

Implement the Self-Evaluation Program for their activities.

5.4 Quality Assurance Program Manager (QAPM)

Initiates Corrective Action Documents [such as, Corrective Action Reports (CARs), Deficiency Reports (DRs), Nonconformance Reports (NCRs)] when conditions adverse to quality are identified by responsible managers or DRMs.

Acts as the ERM AGM's designee in administering the implementation of this procedure.

Provides oversight for the program implementation status.

5.5 Responsible Manager

Responsible managers for the ERM activities are responsible for the following:

- Establish and implement an internal self-evaluation, when required by their DRM.
- Perform MBWA checklist inspections as requested by RFP management.

6. INSTRUCTIONS**6.1 General Implementation**

NOTE 1 *MBWA checklist inspections do not require self-evaluation packages.*

NOTE 2 *ERM responsible managers are the same as line managers in accordance with 1-11000-ADM-16.10, Self-Evaluation Program.*

DRM

- [1] Implement 1-11000-ADM-16.10 with the clarifications provided in this procedure.
- [2] Implement the clarifications for 1-11000-ADM-16.10 summarized below:
 - Section 6.2 addresses the clarifications to Section 5.1, Self-Evaluation Plan, of 1-11000-ADM-16.10.
 - Section 6.3 addresses the clarifications to Section 5.2, Self-Evaluation Checklist, of 1-11000-ADM-16.10.
 - Section 6.4 addresses the clarifications to Section 5.3 Self-Evaluation Schedule Development, of 1-11000-ADM-16.10.
 - Section 6.5 addresses the clarifications to Section 5.5, Self-Evaluation Performance, of 1-11000-ADM-16.10.
 - Section 6.6 addresses the clarifications to Section 5.6, Verification and Closeout, of 1-11000-ADM-16.10.
 - Section 6.7 addresses the clarifications to Section 5.7, Self-Evaluation Reports, of 1-11000-ADM-16.10.
 - Section 7 addresses clarifications to Section 6.0, Records, of 1-11000-ADM-16.10.

6.2 Self-Evaluation Plan Development Details**DRMs**

- [1] Ensure the personnel implementing the program meet the following criteria:
 - Personnel are appropriately trained and qualified to perform the duties, tasks, and responsibilities assigned in this procedure.
 - Personnel training and qualification requirements for activities described in this procedure have been identified by the ERM Training and Qualification group of Environmental Quality Support.
 - RFP and subcontractor personnel meet the required training and qualifications specified by the Training and Qualification group.
 - The documentation and verification of both ERM-specific training and Performance Based Training has been documented by the Training and Qualification group.

- [2] Prepare self-evaluation plan(s) for their organization's activities, based on responsible managers' prepared performance objectives and criteria identified in self-evaluation checklists.

- [3] Submit, through the AGM designee, Self-Evaluation Plans to the ERM AGM for review and approval, as required.

- [4] **WHEN** the self-evaluation plan is approved,
THEN the DRM initiates a Self-Evaluation Package file.

- [5] Require their supporting manager(s) to prepare supplemental Self-Evaluation Plans for all performance areas.

NOTE *Part of the DRMs' Self-Evaluation process may include the supplemental Self-Evaluation Plans prepared by their supporting managers. These supplemental plans address each Responsible Manager's activities.*

6.2 Self-Evaluation Plan Development Details (continued)**Responsible Manager**

[6] **IF** a supplemental Self-Evaluation Plan is prepared by a manager who is **NOT** a DRM,
THEN implement the requirements in Steps 6.2[2] to 6.2[4] with the exceptions listed below:

[A] Do **NOT** include the ERM AGM in the review process.

[B] Ensure that the DRM is one of the reviewers.

[C] **WHEN** the review is complete,
THEN arrange for the responsible DRM to approve this plan.

These plans are to supplement the plan(s) addressed in Step 6.2[2].

6.3 Self-Evaluation Checklist Development**Responsible Manager**

[1] Prepare the checklist for this evaluation in accordance with 1-11000-ADM-16.10.

[2] Arrange for review and approval of the checklist with the next higher organizational manager.

[A] **IF** the DRM is **NOT** the manager responsible for preparing the checklist,
THEN the minimum number of reviewers are the management chain for this activity up to and including the DRM.

[B] **IF** the DRM is the manager responsible for preparing the checklist,
THEN the *minimum reviewer* is the ERM AGM.

[3] Ensure that the checklist is approved and maintained in the Self-Evaluation Package file.

6.4 Self-Evaluation Schedule Development

NOTE *These schedules do not require formally documented reviews.*

Responsible Manager

- [1] Prepare the schedule for the next 2 yr self-evaluations by the beginning of each fiscal year.

Initial approval of each organization's self-evaluation plan and schedule is to be completed within 30 days after the effective date of this procedure, and future schedules are to be completed by the beginning of each fiscal year.

- [2] Obtain approval for the schedules from the same ERM managers that approved the self-evaluation plan(s).
- [3] **IF** a delay in a scheduled evaluation or the elimination of items on the current year schedule is required
AND the Responsible Manager is **NOT** a DRM,
THEN obtain DRM's approval.
- [4] **IF** a delay in a scheduled evaluation or the elimination of items on the current year schedule is required,
AND the Responsible Manager is a DRM,
THEN obtain ERM AGM's approval.
- [5] Ensure that all activities are subject to self-evaluation at least once every 3 yr.

Responsible Manager

- [6] Forward copies of completed checklists to AGM Designee to facilitate tracking of scheduled self-evaluations.

AGM Designee

- [7] Track completion of scheduled self-evaluations and report results to AGM on a monthly basis.

Responsible Manager

- [8] Maintain the schedule and approved changes in the Self-Evaluation Package file.

6.5 Self-Evaluation Performance**Responsible Manager**

- [1] Conduct self-evaluations by using Self-Evaluation checklists in accordance with 1-11000-ADM-16.10.
- [2] Evaluate concerns or findings for applicability and initiation of a Nonconformance Report (NCR), Deficiency Report (DR), or Corrective Action Report (CAR).
- [3] **IF** the findings or concerns are determined to meet the criteria of an NCR, DR, or CAR,
THEN contact the ERM QAPM for initiation of those corrective action documents.
- [4] Evaluate concerns or findings to determine if they are reportable occurrences in accordance with 1-D97-ADM-16.01, Occurrence Reporting.
- [5] **IF** the findings or concerns are determined to meet the criteria of a reportable occurrence,
THEN immediately notify:
 - The manager responsible for the functional operation or Operations Manager,
 - The functional manager or Operations Manager,
 - The shift superintendent, if applicable,
 - Shift Manager, if applicable,to implement immediate actions to mitigate adverse impact.
- [6] **IF** required, based on the criteria in procedure 2-C33-ER-ADM-16.02, Stop Work Order,
THEN inform the QAPM that a Stop Work Action is appropriate.

QAPM

- [7] **IF** the QAPM makes the decision that a Stop Work Action is necessary,
THEN initiate a Stop Work Order in accordance with 2-C32-ER-ADM-16.02.
- [8] **IF** the concern or finding requires submittal to Issues Management in accordance with 1-11000-ADM-16.09, Issues Management,
THEN transmit the concern or finding to Issues Management in accordance with 1-11000-ADM-16.09.

6.5 Self-Evaluation Performance (continued)**Responsible Manager (continued)**

- [9] Document on the Deficiency/Concern Reporting Form any concerns, findings, or improvements requiring further evaluation and action that do not fit the criteria identified in Steps 6.5[1] through [4].

A sample of the contents of this form can be found in Appendix 1, Deficiency/Concern Reporting Form. The current version of the form may be found in the controlled form system or in procedure 1-11000-ADM-16.10.

- [10] Submit completed Self-Evaluation Checklists and Corrective Action documents to the next higher organizational level for review and approval.
- [11] Forward Deficiency/Concern reporting forms to the Plant Action Tracking System (PATS) database.

NCRs, DRs, and CARs are tracked in accordance with the procedures controlling them (3-21000-ADM-15.01, Control of Nonconforming Items and Activities; 1-50000-ADM-16.17, Deficiency Reporting System; and 3-21000-ADM-16.01, Corrective Action, respectively).

6.6 Verification and Closeout**Responsible Manager**

- [1] **WHEN** the concern or finding has been resolved
AND corrective action has been completed or needed improvement has been implemented,
THEN:

[A] Verify completion and implementation, as appropriate.

[B] Forward documentation to the next higher organizational manager for approval.

Approving Manager

- [2] Review and verify adequate corrective action has been completed or needed improvement has been implemented.

6.6 Verification and Closeout (continued)**Approving Manager (continued)**

- [A] **IF** satisfactory,
THEN document approval and return the documentation to the responsible manager or DRM, as appropriate.

- [B] **IF** unsatisfactory,
THEN Return the documentation to the responsible manager or DRM for rework.

- [C] Repeat Steps 6.6[1] through 6.6[2][B] until corrective action is acceptable.

Responsible Manager

- [3] Complete the appropriate Certificate of Closure for Deficiency/Concern Reporting Forms and enter it into the PATS database.

- [4] Enter a copy of all verification documentation in the Self-Evaluation Package file.

6.7 Self-Evaluation Reports**DRM**

- [1] Issue a monthly Self-Evaluation report to the ERM AGM.

This report may simply be copies of the completed Self-Evaluation Checklists and Corrective Action documents.

- [2] Ensure that two copies of the report are forwarded to the ERM Project File Center (PFC).

ERM AGM

- [3] Provide a monthly report of all ERM self-evaluations to the Self-Evaluation Program Manager.

7. RECORDS

These activities ensure that the management of all records is consistent with 1-77000-RM-001, Records Management Guidance For Records Sources.

The records generated as a result of this procedure are considered quality records. These records are managed in accordance with 2-G18-ER-ADM-17.01, Quality Assurance Records Management.

When the activity being addressed is an IAG activity, then the corresponding self-evaluation records are also part of the Administrative Record. These Administrative Records are also managed in accordance with 3-21000-ADM-17.02, Administrative Records Screening and Processing in addition to 2-G18-ER-ADM-17.01.

No nonquality records are generated by this procedure.

Responsible Manager

- [1] Ensure that the following quality-related records are transmitted to the ERM PFC in accordance with 2-G18-ER-ADM-17.01:
 - Self-Evaluation Plan(s)
 - Self-Evaluation Checklist(s)
 - Self-Evaluation Schedule(s)
 - Self-Evaluation monthly status reports
 - Any letters or memoranda addressing changes in schedules
 - Any other quality-affecting documentation associated with the implementation of this process.

The NCRs, DRs, CARs, and Deficiency/Concern Reporting Forms generated as a result of this procedure are quality records, but their management is addressed in the applicable generation procedure. However, copies of these documents must be sent to the ERM PFC for evaluation for inclusion in the Administrative Record.

- [2] Forward copies of all NCRs, DRs, CARs, and Deficiency/Concern Reporting Forms generated as a result of this procedure to the ERM PFC.

7. RECORDS (continued)**Responsible Manager (continued)**

- [3] IF the self evaluation activity is IAG related,
THEN ensure that the associated records listed below are managed in accordance with 3-21000-ADM-17.02,
AND transmitted to the PFC in accordance with 2-G18-ER-ADM-17.01:
- Self-Evaluation Plan(s)
 - Self-Evaluation Checklist(s)
 - Self-Evaluation Schedule(s)
 - NCRs, DRs, CARs, and Deficiency/Concern Reporting Forms
 - Self-Evaluation monthly status reports
 - Any letters or memoranda addressing changes in schedules
 - Any other quality-affecting documentation associated with the implementation of this process.

8. REFERENCES

HPM-083-93, Mann, H. P., Letter titled Management By Walking Around

1-D97-ADM-16.01, Occurrence Reporting

1-11000-ADM-16.09, Issues Management

1-11000-ADM-16.10, Self-Evaluation Program

1-50000-ADM-16.17, Deficiency Reporting System

2-G18-ER-ADM-17.01, Quality Assurance Records Management (Until this procedure is issued, use 3-21000-ADM-17.01.)

2-A65-ER-ADM-15.01, Control of Nonconforming Items and Activities (Until this procedure is issued, use 3-21000-ADM-15.01.)

2-C34-ER-ADM-16.01, Corrective Action (Until this procedure is issued, contact the QAPM for the appropriate instructions.)

8. REFERENCES (continued)

2-C33-ER-ADM-16.01, Stop Work Order (Until this procedure is issued, use
1-50000-ADM-15.02, Stop Work Action.)

APPENDIX 1

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INSTRUCTIONS FOR DEFICIENCY/CONCERN REPORTING FORM**NOTE**

Deficiencies and concerns shall be reported on individual forms when they are located in different areas. Multiple like deficiencies or concerns (i.e. same Code Number) within the same location being evaluated, surveyed, or audited (i.e. RCRA Unit, Satellite Accumulation Area, etc.) are not required to be individually reported. The number of times like deficiencies or concerns are identified within an area shall be documented in item 18, NUMBER OF DEFICIENCIES/CONCERNS.

ITEM INSTRUCTIONS

- (1) This number is computer generated and will be entered on the form when the deficiency/concern is entered into the Plant Action Tracking System (PATS) by Commitments Management (CM). This number will be obtained by contacting CM. The responsible Line Manager shall enter the number obtained from CM in this item before transmitting a copy of the form to CM.
- (2) The Origin is a file code entered on the form by the responsible Line Manager which verifies the deficiency/concern in Item 21. This code defines the origin of the deficiency/concern (i.e. self-evaluation, audit, assessment, surveillance, inspection, or walkthrough). Origin information is available from CM.
- (3) The identifier shall enter the Ref. ID code information as follows: AAA-ZZZ
AAA = Building Number, i.e. 559
ZZZ = Description code to be taken from Appendix B, Deficiency/Concern Code List

Both areas of the Ref. ID must be completed. If there are questions contact your supervisor for assistance.

The description code serves to describe the deficiency/concern that has been identified. The description code must be chosen from the list provided in Appendix B, Deficiency/Concern Code List. The code list has been developed using various surveillance report findings and concerns based on existing regulations and requirements that apply to the Rocky Flats Plant. The code list is in constant development and new codes may be added by affected organizations. If a deficiency/concern can not be described by a code in the provided list, then contact the Self-Evaluation Program Manager to discuss the concern. The code list will be updated periodically.

- (4) The identifier shall enter the title defined, on Appendix B, for the code entered in Item 3.
- (5) The identifier shall enter their name, organization, and extension.
- (6) The identifier shall enter the date of deficiency/concern was initially identified.
- (7) The responsible line manager shall enter the name of the individual who will be responsible for the completion of each task within an Action Plan to correct the Deficiency/concern. Assignment of corrective action is the responsibility of line management. If the concern is classified as a Level 5 then the definition of corrective action may be satisfied by Item 20 of this form.
- (8) The responsible line manager shall enter the Action Plan Manager's organization at the Department or Branch level. If a Director is Action Plan Manager, then enter the Director's Department name. If a group manager or individual within a group is Action Plan Manager, then enter the group name.

APPENDIX 1

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INSTRUCTIONS FOR DEFICIENCY/CONCERN REPORTING FORM

- (9) The responsible line manager shall enter the name of the Associate General Manager to whom the Action Plan Manager (from Item 7) reports.
- (10) The responsible line manager shall enter the name of the Associate General Manager's organization.
- (11) The responsible line manager shall enter the building number or other location identifier (i.e. PU&D yard, or RFP for the entire plant, etc.) that indicates the physical location of the deficiency/concern.
- (12) The identifier shall enter information that will add clarity to the location of the deficiency/concern. (i.e. If a deficiency/concern is identified in a building, then this space may be used to specify the room number or specify area descriptions such as RCRA Unit number, southwest corner of Building 771, etc.)
- (13) The responsible line manager shall enter a check beside the description that defines the impact that the deficiency/concern applies to operations or production.
- (14) The responsible line manager shall enter a check beside the category or categories that defines the area(s) that is(are) addressed by the deficiency/concern. [CMS class] indicated on the form is applicable only to CM.
- (15) The responsible line manager shall enter the most significant regulation or other requirements that the identifier deficiency/concern has been based. (i.e. RCRA 40 CFR 260.4(a)(1), DOE Order 5400.1 6(b), or OSHA 29 CFR 1910.1001(c)(2))
- (16) The responsible line manager shall enter a check beside the description that identifies the nature of the deficiency/concern.
- | | | |
|---|---|--|
| R | = | Regulatory requirement infraction |
| P | = | Policy and Procedure infractions |
| C | = | Commitment to perform work (Not an infraction) |
- (17) The responsible line manager shall enter a check beside the significance level that defines the level of importance for the deficiency/concern in accordance with 1-50000-ADM-18.00, Sitewide Corrective Action Program. (identified deficiencies/concerns shall be submitted to Issues Management in accordance with 1-11000-ADM-18.08, Issues Management for categorization.) [CMS severity] indicated on the form is applicable only to CM.
- (18) The identifier shall enter the number of like deficiencies/concerns within the same location being evaluated, surveyed, or audited. (i.e. the number of drums with incorrectly completed RCRA labels within a specific RCRA Unit.) Multiple like deficiencies/concerns can be identified during an audit, evaluation, or surveillance. Multiple like deficiencies/concerns are not required to be reported as individual items. Therefore, one commitment number can address multiple deficiencies/concerns. The number 1(one) should be entered if the form addresses only one deficiency/concern. The quantity entered in this item will provide required trend information.
- (19) The identifier shall enter a full and concise description of the deficiency/concern. Proposed resolution for the deficiency/concern are not to be entered in this form.

Appendix 1

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INSTRUCTIONS FOR DEFICIENCY/CONCERN REPORTING FORM

- (20) The responsible line manager shall describe the actions to be taken to correct the deficiency/concern. The corrective actions may describe a single Action Plan that has only one task or it may describe the scope of an entire Action Plan that contains multiple tasks to correct the problem. This item may address a full description of the action to be taken for the resolution of a Level 4 or 5 deficiency/concern: Concisely describe the corrective action (i.e. "The tank will be emptied, affected section removed, new section welded in place, and pressure/leak tested. After the completion of these activities the tank will be refilled." Or, "The tank will be emptied, removed and replaced with a new tank.") In addition, entries must be made in this item to describe the reasons why a concern was determined not to be classified as a deficiency. Any immediate corrective actions that are implemented to resolve an identified deficiency/concern shall be recorded in this item.
- (21) The responsible line manager shall verify the deficiency/concern, print name, sign the form and enter telephone extension in the spaces provided. The responsible line manager shall retain the original copy of the form and transmit a copy to CM.
- (22) CM shall file a completed copy of the form. CM personnel shall sign and date the form indicating the completion of the PATS entry process.