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Remediation Services, L.L.C.  
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INDEPENDENT ASSESSMENTS

RMRS-QA-10.01  
REVISION 0  
EFFECTIVE 11/18/96  
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APPROVED:

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12 Nov 96  
MANAGER, QUALITY ASSURANCE

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1. PURPOSE

This procedure establishes the method and processes used by RMRS to plan, prepare for, perform, and document the results of independent assessments conducted to measure item quality, process effectiveness, work processes and operations, compliance with regulations, and to promote improvement.

2. SCOPE

This procedure applies to RMRS Quality Assurance (QA) personnel who plan, prepare for, perform, and document the evaluations conducted to meet the independent assessment requirements of:

- 10 CFR 830.120, *Quality Assurance Requirements*;
- DOE Order 5700.6C, *Quality Assurance*;
- Section 6.9.4 of the RMRS Quality Assurance Program Plan (QAPP).

3. REQUIREMENTS

This procedure is based on the premise that evaluations and assessment activities that fall under the umbrella of independent assessment, as defined in 10 CFR 830.120, *Quality Assurance Requirements* and DOE Order 5700.6C, *Quality Assurance*, share the following common requirements:

- Independent assessments shall be planned and conducted to measure item and service quality, to measure the adequacy of work performance, and to promote improvement. [10 CFR 830.120, (c)(3)(ii)]
- Planned and periodic independent assessments shall be conducted to measure item quality and process effectiveness and to promote improvement. [DOE Order 5700.6C, 9.b(3)(b)]
- The group performing independent assessments shall have sufficient authority and freedom from the line to carry out its responsibilities. [10 CFR 830.120, (c)(3)(ii)]
- The organization performing independent assessments shall have sufficient authority and freedom from the line organization to carry out its responsibilities. [DOE Order 5700.6C, 9.b(3)(b)]
- Persons conducting independent assessments shall be technically qualified and knowledgeable in the areas assessed. [DOE Order 5700.6C, 9.b(3)(b), 10 CFR 830.120, (c)(3)(ii)]

4. ASSESSMENT PROGRAM PLANNING

The Independent Assessment organization shall develop a quarterly assessment schedule.

ADMIN RECORD

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The schedule should be developed by compiling information from the following sources:

- Review of previous internal and external assessments.
- Contacting operations group managers for issues or concerns.
- Review of previous surveillance reports.

Quarterly plans shall be approved by the independent assessment organization lead and the QA manager.

Quarterly assessment schedules will be forwarded to the Kaiser-Hill Performance Oversight Division for inclusion to the Site integrated assessment schedule.

## **5. ASSESSMENT TEAM ESTABLISHMENT**

The QA Manager or his designee selects a Lead Assessor for each independent assessment activity who is:

- Technically qualified,
- Knowledgeable of the area to be assessed,
- Free of responsibilities in the area to be assessed,
- Free of real or perceived conflicts of interest,
- Is certified as a Lead Assessor in accordance with RMRS-QA-02.01, RMRS Qualification and Certification of Quality Assurance Personnel

Except where technical specialist are being utilized to support the assessment, the QA Manager or his designee selects Team Members who are qualified, as a minimum, as an Auditor or Assessor in accordance with RMRS-QA-02.01, RMRS Qualification and Certification of Quality Assurance Personnel.

## **7. ASSESSMENT PREPARATION**

The Lead Assessor contacts the assessed organization's management to coordinate the time and location for the required entrance meeting and invites personnel directly responsible for the area, activity, process or program to be assessed.

The Lead Assessor reviews requirements documents as appropriate to the scope of the assessment, and prepares an Assessment Plan in accordance with Appendix 1, Assessment Plan Development Guidance.

The Lead Assessor contacts the Kaiser-Hill (K-H) Assessment Coordinator to obtain a unique assessment number for the assessment.

Based on the requirements, the Lead Assessor, in cooperation with the assessment team, develops checklists. Guidance on checklist development and topics may be obtained in 4-B52-IA-003, Conduct of Independent Assessment Activities (Kaiser-Hill).

## **8. ENTRANCE MEETING**

The Lead Assessor facilitates the completion of an attendance roster.

The following topical elements should be discussed during the meeting and assignment made as appropriate:

- Purpose, scope, and schedule of the assessment
- Roles and responsibilities of each Team Member
- Identification of key personnel to serve as primary interfaces

- Obtain commitment that the assessed organization will elevate deficiencies, as or when identified, to the appropriate level of management.
- Support required from the affected organization.

The Lead Assessor should request the appropriate manager of the area being evaluated to address the following:

- Key issues
- Organizational overview
- Overview of processes involved in the area to be evaluated
- Authorization Basis (if applicable)
- Layout and hazards associated with the area to be evaluated

## 9. PERFORMING THE ASSESSMENT

### WARNING

**Independent Assessment Team Members identifying a Stop Work Condition will take appropriate actions to protect themselves, the workers and the public and take necessary actions to ensure that the work site is placed in a safe and stable condition. Actions and notifications will be made in accordance with procedure 1-V10-ADM-15.02, *Stop Work Action*.**

The Lead Assessor, and team members as appropriate, should:

- Utilize checklists to evaluate elements and activities against requirements, objectives and criteria.
- Examine objective evidence for compliance with program and implementation requirements, as necessary.
- Determine if program requirements are being developed, documented, and implemented effectively.
- Document all results, including deficiencies, strengths, and improvement opportunities; and fieldnotes on the checklist to ensure that all pertinent data becomes a part of the permanent quality record.
- Evaluate all information to verify that sufficient evaluation and research have been accomplished and sufficient objective evidence has been gathered to substantiate identified strengths and deficiencies.
- Bring deficiencies to the attention of the management of the assessed organization on a daily basis, and afford an opportunity for the deficiency to be corrected prior to the end of the field work. If corrections occur prior to the end of the field work, note the deficiency in the assessment report (ref.: Section 11) and indicate the correction has been implemented
- Ensure that all deficiencies are documented, tracked, reported and closed in accordance with RMRS-QA-03.01, Quality Condition Report.
- Prepare for the exit meeting by providing a draft copy of the report (ref. Section 11) to the assessed organization point of contact, and, to the extent practical, scheduling the meeting to coincide with the assessed organizations availability.

## 10. EXIT MEETING

The Lead Assessor, and team members as appropriate, should:

- Direct completion of an attendance roster.
- Discuss the assessment results, including deficiencies, strengths, and improvement opportunities.

- Provide copies of deficiency documentation.
- Set a schedule for providing any comments to the draft assessment report.

If new information is presented by the assessed organization that refutes the evaluation results introduced at the exit meeting, evaluate the new information and respond accordingly by revising the report, etc.

## 11. INSTRUCTIONS — PREPARATION OF THE REPORT

The Lead Assessor should prepare a draft report in accordance with the guidance provided in Appendix 2, Assessment Report Guidance.

The report should:

- Discuss all deficiencies and include, as appropriate, any recommendations to correct deficiencies and prevent recurrence.
- Describe program strengths.
- Discuss improvement items suggested by the assessment team.

When the report has been completed, including disposition of assessed organization's comments, the report will be distributed. Distribution should include forwarding a hard-copy and electronic copy to the K-H Assessment Coordinator.

## 12. RECORDS

All records generated by this procedure will be forwarded to the appropriate records repository for maintenance.

### 12.1 Quality Assurance (QA) Records

The Independent Assessment organization should maintain and forward, as appropriate, the following as a QA record:

- Assessment Reports
- Assessment Plans
- Completed Checklists

## 13. REFERENCES

- 95-QAPP-001, *RMRS Quality Assurance Program Plan (QAPP)*
- RMRS-QA-03.01, *Quality Condition Report*
- RMRS-QA-02.01, *Qualification and Certification of Quality Assurance Personnel*
- 1-V10-ADM-15.02, *Stop Work Action*
- 10 CFR 830.120, *Quality Assurance Requirements*
- 96-IA-0007, *Independent Assessment Program*
- 4-W37-IA-002, *Planning and Scheduling of Independent Assessment Activities*
- DOE Order 5700.6C, *Quality Assurance*
- *Site Quality Assurance Manual*, Section 7, Quality Assurance Program Criteria

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**APPENDIX 1**

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**ASSESSMENT PLAN DEVELOPMENT GUIDANCE**

**Number.** Enter the unique number assigned to this activity by the K-H Assessment Coordinator.

**Objectives and Area.**

**Subject Area.** The major subject or program area which is to be evaluated. Only use Building numbers in conjunction with a specific program or activity, such as Building 707 Conduct of Operations.

**Purpose.** The objective of the evaluation.

**Scope.** Describe the category and characteristics of the evaluation and enter the specific functional or programmatic area(s) to be examined. This includes the organizational as well as the physical boundaries of the assessment.

**Schedule and Agenda.**

- Date, time, and location of the entrance meeting
- Projected dates of the field work
- Projected date, time and location of the exit meeting

**Assessment Specialists.** List the names and organization of the Lead Assessor, Team Members, and Technical Specialists. If appropriate, include assigned roles based on expertise. Resumes or summaries of qualifications may be included as an attachment to the plan, if appropriate.

**Assessment Criteria.** Identify the acceptance criteria for each major area of the evaluation. This may be accomplished as a non-specific reference to a document or more specifically to a particular subsection within that document. Checklists may be referenced and included as an attachment to the plan if developed prior to plan issue.

**Methodology.** List evaluation methods to be used during the assessment. Typical methods include:

- Tours
- Walkdowns
- Interviews
- Document Review
- Record Review
- Observations
- Sample Evaluation

**Independent Verification of Previously Identified Deficiencies.** List by tracking number and title those deficiencies in the subject area that have been certified as complete by the responsible manager **and** which will be verified during this evaluation.

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**APPENDIX 1**

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**ASSESSMENT PLAN DEVELOPMENT GUIDANCE**

**Operational Interfaces.** List any required operational interfaces. Typical interfaces include:

- Access to facilities, escort requirements, and training requirements.
- Clearance requirements of Team Members.
- Scheduled maintenance or modifications in progress in facilities.
- Support required from facility personnel.
- Special support equipment or facilities.
- Required normal operations.
- Access to documents and records.
- Radiological considerations.

**Approvals.** Signatures in this area indicate the acceptance of the scope and criteria to be used for the assessment. Assessment Plans are approved by the Lead Assessor and the Independent Assessment organization Lead or QA Manager.

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**APPENDIX 2**

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**ASSESSMENT REPORT GUIDANCE****COVER PAGE**

**Title.** Enter the major subject or program area which has been assessed. Use building numbers only in conjunction with a specific program or event.

**Report Number.** Enter the unique number assigned to this assessment.

**PAGE 2**

**Table of Contents.** Incorporate major subsections, individual assessment subject areas, if appropriate, and a list of appendixes.

**PAGE 3**

**Executive Summary.** Enter a brief summarization of the results recorded for each activity or functional area together with a brief description of general conclusions regarding the effectiveness, noteworthy practices, strengths, deficiencies, and programmatic issues of the assessed area(s) and recommended corrective actions, as appropriate. Provide a brief narrative description of the key elements and results of the assessment. Consider the following for inclusion in the executive summary, as appropriate:

- Brief statement of the assessment subject area.
- Dates during which the actual field work for the assessment was performed.
- Description of the primary functional areas which were examined.
- Brief description of deficiencies and programmatic concerns.
- Brief description and assigned corrective action responsibility for deficiencies identified during the assessment.
- Issues exhibiting generic implications
- Strengths and noteworthy practices.
- Improvement items.

**REPORT BODY**

**Purpose.** Enter the major subject or program area which has been evaluated. Enter in a narrative format the reason this evaluation was performed. Describe the category and characteristics of the evaluation and enter the specific functional or programmatic area(s) examined. This includes the organizational as well as the physical boundaries as appropriate.

**Conduct of the Assessment.** This is the main part of the report which briefly describes each functional or program area assessed and provides a description of the area's evaluation. It is divided into paragraphs titled with the program or activity assessed. Include:

- The schedule for the evaluation,
- A brief history of previous evaluations pertaining to this area,
- A summation of commitments examined during the evaluation, if any, and
- The methods used to conduct the evaluation.
- Enter the assessment schedule as accomplished by the assessment team.

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**APPENDIX 2**

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**ASSESSMENT REPORT GUIDANCE**

**Results.** Analyze each major area and include for each program, activity, system or component examined:

- What was evaluated,
- The time period covered by the examination or review, if pertinent to the results,
- A brief description of the specific activity carried out,
- The deficiencies, programmatic concerns, noteworthy practices, and strengths that were identified together with recommendations for corrective actions and improvement items. Reference the deficiency identification documentation. Provide the following information to the extent it can be objectively ascertained:
  - The apparent safety significance,
  - If there are multiple examples,
  - What corrective actions or compensatory measures were taken,
  - A judgment of the effectiveness of corrective actions or compensatory measures,
  - Generic implications.
- Other pertinent conclusions such as whether the program or activity is capable of accomplishing the function for which it was designed.

Include a specific functional area for appraisals of program documents for administrative compliance with applicable requirements.

Include a statement similar to one or more of the following which is supported by facts or observations:

- The results of this assessment appear to indicate improving (or declining) performance since the previous evaluation.
- The program or activity assessed is effective with respect to meeting the objectives of the program.
- This program area requires future review and evaluation and is considered to be an open item. (A reason should be stated.)

The information should clearly support the conclusion. Include specific observations of deficient or declining performance, unsafe practices, ineffective programs or activities, or significant weaknesses.

For commitments and /or corrective actions examined during the evaluation summarize:

- How the deficiency and corrective action was examined,
- What actions were taken or are planned to correct the deficiency,
- Whether or not those actions are effective and will they be sufficient to prevent recurrence,
- Recommend additional necessary corrective action.
- Identify closure status of corrective actions (i.e., verified, closed, reopen, deficient plan.)

**Approvals.** The Lead Assessor's, Independent Assessment Organization Lead's, and the QA Manager's signatures indicate that the assessment is complete, and that the report is factual, technically correct, and prepared in accordance with this procedure. These signatures also indicates concurrence with the professional judgments contained in the report.

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**APPENDIX 2**

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**ASSESSMENT REPORT GUIDANCE**

**Appendices.** Use to add supplemental information to the report, such as:

- Documents Reviewed.
  - Include documents which were used to establish compliance.
  - Enter by number, revision and/or change, name, issue and effective date as appropriate.
- Assessment Team Members and Personnel Contacted.
  - Name and organizations of all Team Members
  - Name and organization of all personnel who attended the entrance meeting.
  - Name and organization of all personnel who attended the exit meeting.
  - Name and organization of all personnel who significantly contributed information
  - Include the company name.
- Completed checklists which have incorporated all pertinent field notes.
- Copy of each deficiency identification document issued.
- Copy of each Commitment Verification Form and Action Plan Review Form issued.
- Any terms used in the body of the report that need to be defined to enhance understanding and correct interpretation.
- Resumes of assessment team members as appropriate.
- Supplemental information and tables which support the report.