



Performance Assurance Assessment Report

Assessment Report ASMT-1033: Department 635 FY19 Evaluate Center 600 Assessment Process

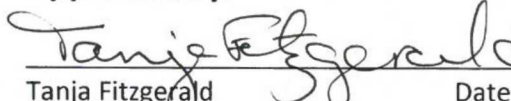
Assessment Type: Functional Area Assess Implementation

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Assessing Organization: Department 635

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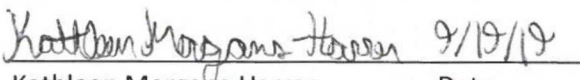
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Contents

List of Tables	ii
List of Acronyms	ii
1 Executive Summary	3
2 Purpose	3
3 Evaluation Methodology	3
4 Results	5
4.1 Controlled Documents, Job Aids, and Programmatic Tools	5
4.2 Discussion	5
4.3 Results Categorization	6
4.3.1 Findings	6
4.3.2 Observations	6
4.3.3 Acceptable Practices	7
4.3.4 Noteworthy Practices	7
Appendix A. ES&H Assessment Requirements, July 2019	9
Appendix B. Interview Questions for this Assessment	36
Resources	37
Related Laboratory Policies and Processes	37
References	37
Systems, Applications, and Websites	37

List of Tables

Table 1. Interviewees for this assessment	4
Table 2. Center 600 controlled documents, job aids, and programmatic tools used to support assessment processes	5

List of Acronyms

Acronym	Definition
AOP	administrative operating procedure
ES&H	Environment, Safety, and Health
FY	fiscal year
DOE	United States Department of Energy
NNSA	National Nuclear Security Administration
SFO	Sandia Field Office

1 Executive Summary

This assessment reviewed the Center 600 assessment process; gathered knowledge from 17 assessment points of contact across the Center; piloted an annual assessment planning process; and compared Center 600 Administrative Operating Procedure (AOP) 04-04, *Assessments*, to current practices and corporate requirements. The assessment identified two observations, three noteworthy practices, and multiple opportunities for improvement beyond the scope of the assessment.

2 Purpose

The purpose of this assessment is to identify opportunities to improve the Center 600 assessment process and to ensure that the process is consistent with corporate and center needs and guidance.

Expected outcomes from this assessment include acquiring sufficient information to do the following:

1. Simplify the Center 600 assessment process and align it with corporate practices in order to reduce complexity and redundancy in the flow down of corporate requirements to the department level.
2. Update AOP 04-04, *Assessments*, to be consistent with corporate and Center 600 needs and guidance, while ensuring that Center 600 departments have the flexibility to address unique customer or regulatory assessment needs.
3. Identify related Center 600 controlled documents, job aids, or other programmatic tools and update as needed.
4. Address, as appropriate, any process-related compliance issues identified by Assurance Information System Evaluation 76376, *00635 FY19 Assess the Quality of Center 600 Completed Assessments for Fiscal Year 2018*.

3 Evaluation Methodology

Assessors used selected results from Evaluation 76376 as a basis to direct and focus this assessment. Through review and analysis of the Center 600 fiscal year (FY) 2018 assessments, Evaluation 76376 identified multiple gaps in center-level assessment processes and documentation, particularly AOP 04-04, *Assessments*.

This assessment included review of Center 600 assessment processes and documents (see [References](#)). In particular, requirements found in CA002, *Performance Monitoring Policy* (including CA002.1, *Conduct Internal Assessments*) were tabulated, and a crosswalk was created with AOP 04-04 ([Appendix A](#)). The administrative operating procedure does not need to include all requirement statements; however, comparing requirements in the procedure with corporate requirements provided an opportunity to pinpoint potential gaps and conflicts.

This assessment complements Evaluation 76376 by including interviews with an assessment point of contact from each Center 600 department. A list of interviews completed for this assessment is shown in [Table 1](#).

During the assessment, the assessment team piloted an annual assessment planning process for Center 600 for FY20. The schedule and requirements for the annual planning were guided by communication from Risk and Issue Management (Department 9213), the organization that delivers Sandia's consolidated assessment schedule to DOE/NNSA/SFO in support of the Site Integrated

Assessment Plan (CA002.1). Throughout the annual planning process, the assessment team took note of lessons learned. The team also requested feedback on this process during interviews (Table 1).

Table 1. Interviewees for this assessment

Role	Interviewee Name	Organization
Assessment point of contact	Mark Mcnellis	622, Safety Engineering
Assessment point of contact	Cynthia Rivera	622, Safety Engineering
Assessment point of contact	Diane Morrell	627, Industrial Hygiene Program
Assessment point of contact	Martin Brennan	628, Radiation Protection
Assessment point of contact	Keith Mount	628, Radiation Protection
Assessment point of contact	Ted Simmons	628, Radiation Protection
Department manager	Marilyn Bange	632, ES&H Planning
Assessment point of contact	Brian Castillo	632, ES&H Planning
Department manager	John Nelson	633, ES&H System Integration 1
Department manager	Natalie Carter	634, ES&H System Integration 2
Assessment point of contact	Michal Butler	635, Performance Assurance
Department manager	Donald Joe	636, ES&H System Integration 3
Assessment point of contact	Margie Marley	637, ES&H System Integration 4
Department manager	Nenita Walther	637, ES&H System Integration 4
Assessment point of contact	Pascale Waffelaert	641, Environmental Compliance and Monitoring
Assessment point of contact	Mark Allen	642, Analytical Services
Assessment point of contact	Nicole Zayas	642, Analytical Services
Assessment point of contact	Pascale Waffelaert	643, Environmental Systems

4 Results

4.1 Controlled Documents, Job Aids, and Programmatic Tools

Table 2 lists the controlled documents, job aids, and other programmatic tools in use across Center 600 to support assessment processes. The assessment team identified these documents through manager queries, interviews with assessment points of contact, and assistance from a Center 600 Security Compliance and Assurance Analyst.

Table 2. Center 600 controlled documents, job aids, and programmatic tools used to support assessment processes

Organization	Document
622, Safety Engineering	Three-year assessment planning schedule (no longer in use)
627, Industrial Hygiene Program	CA002.1, <i>Performance Monitoring Policy</i> IHI-00-0002, <i>Industrial Hygiene Instrumentation Quality Implementation Plan</i> IH PLA 06-01, <i>Industrial Hygiene Program Quality Assurance Plan</i>
628, Radiation Protection	RPA-08-01, <i>Assessments</i> RPA-08-02, <i>Issues Management</i> RPDP-00-03, <i>Radiation Protection Dosimetry Program Assessments</i> RPI-00-0002, <i>Radiation Protection Instrumentation Program Quality Plan</i> MN471022, <i>ES&H Manual</i> , "Radiation Protection" Chapter 13, "Feedback and Improvement"
635, Performance Assurance	AOP 04-04, <i>Assessments</i> PAJA-04-04-001, <i>Monthly Assessment Status Check</i>
637, ES&H System Integration 4 (supporting Center 4700, Infrastructure Services)	PCS-021, <i>Self-Assessment</i>
641, Environmental Compliance and Monitoring	AOP 09-07, <i>Environmental Management System Internal Audit</i>
642, Analytical Services	ASP-004, <i>Analytical Services Program Assessments</i> SMO-QAPP, <i>Quality Assurance Project Plan for the Sample Management Office</i> RPSD-00-03, <i>Radiation Protection Sample Diagnostics Program Quality Assurance Plan</i>
643, Environmental Systems	AOP 09-07, <i>Environmental Management System Internal Audit</i>

4.2 Discussion

The assessment team conducted 17 interviews (Table 1) with guiding questions (Appendix B) developed from the criteria described in the assessment plan. The assessment team learned about center and departmental practices and processes, awareness and utility of AOP 04-04, comprehension and utility of Laboratory Policy System documents and Sage, and ideas about the ES&H organization.

4.3 Results Categorization

4.3.1 Findings

No violations of policy, requirements, or standards were identified; this assessment has no findings.

4.3.2 Observations

Multiple areas could be improved, but they are not violations of policy, requirements, or standards. This assessment has two observations.

Observation: AOP 04-04 is not consistent with corporate and Center 600 needs and guidance.

AOP 04-04, *Assessments*, needs to be updated to reflect current information and practices, including training, Laboratory Policy System references, Sage, and points of contact.

In addition, some topics in CA001 and CA002 are unclear or remain open to interpretation by Members of the Workforce. AOP 04-04 does not provide clear expectations for Center 600 staff in those areas.

Interviewees and the assessment team identified multiple areas where AOP 04-04 could add clarity to the Center 600 assessment process, including:

- Required training
- ES&H coordinator role
- Annual planning process
- Center requirements and expectations for assessment plans, assessment reports, factual accuracy reviews, documentation, and corrective actions

The assessment team found that some Center 600 departments have additional detailed implementation processes for assessments, while others work only from corporate and center processes. In order to accommodate the varied departmental needs, appendices could be added to AOP 04-04, such as templates and guidance to support consistency across ES&H assessment practices, documentation, and Sage utilization.

Observation: AOP 04-04 lacks a defined process for annual assessment planning.

Planning in past years did not result in an integrated ES&H assessment schedule that was approved by the ES&H director and then submitted to Contractor Assurance (Center 9200) personnel for inclusion in the Site Integrated Assessment Plan (see CA002.1, *Conduct Internal Assessments*).

The AOP 04-04 description of the annual data call from Contractor Assurance personnel is out of date and does not provide a process for planning integrated ES&H assessments.

During the conduct of this assessment, ES&H assessment planning for FY20 was conducted using a pilot process. Multiple interviewees noted that there had been duplicate information requests related to assessments in FY19. During the FY20 planning process, Department 635 personnel assumed the lead for responding to external requests to ensure consistency in data calls and avoid redundancies. Generally, interviewees declared that the continuation of a Department 635-led annual planning process would correct duplicate requests in the future.

None of the Center 600 ES&H System Integration managers who were interviewed provided any FY20 assessments during the annual assessment planning process for Center 600 for FY20. Identifying the assessment roles for ES&H System Integration managers and their ES&H

coordinator staff may improve integration with the Line and would add clarity to the assessment planning process.

In the FY20 pilot process, risks were identified at the department level. A Labs- or center-wide risk identification and mitigation process may inform more strategically valuable assessments.

During FY20 assessment planning, Center 9200 personnel requested the ES&H assessment schedule two months ahead of the planned delivery date in support of the Site Integrated Assessment Plan. 9200 requested the schedule early with the intention of eliminating duplication and ensuring all appropriate areas were assessed. Coordinating Center 600 timelines and expectations with Center 9200 personnel may reduce complexity.

Opportunities for improvement: The team identified opportunities for improvement that fall outside of the area of responsibility for Department 635 and, therefore, outside the scope of this assessment.

Opportunities for improvement that are outside the scope of this assessment will be communicated to the responsible organizations separately, as appropriate. These opportunities are presented here as evidence of the stakeholder community's ongoing attention to continuous improvement:

- The CA001.2, *Identify and Management Issues*, resource document “[Issue Sources](#)” states: “Contractor assessment Observations and Recommendations are considered Items of Interest and are not managed as issues.” This guidance is inconsistent with CA001.2, which results in observations being tracked as issues in Sage.
- Some interviewees desire further guidance and clarification on management surveillance and lessons learned requirements and processes at corporate and center levels.
- CA001 and CA002 may be updated to specify ES&H requirements.
- There is an opportunity to improve documentation of opportunities for improvement for many of the ES&H departments. The ES&H Management System and Department 628 personnel may have strategies for this.
- Assessments suffer when resources are strained. Some interviewees would like to have the option to decline assessments and/or corrective actions if they are not driven by regulations or mandated at the corporate level.
- Some interviewees stated that the need to track and report on assessment status can disincentivize communicating assessment plans during annual planning and entry into Sage.
- Many interviewees were unfamiliar with AOP 04-04 and learned of its existence during the assessment.
- Unlike the policies, processes, and procedures in place before the Laboratory Policy System, CA001 and CA002 do not include detailed guidance documents. If organizations have experienced, trained staff to plan and conduct assessments, they may not need detailed guidance in this area. However, with the large turnover of managers and staff at the Labs, the lack of guidance combined with inexperienced staff may impact performance in this area.

4.3.3 Acceptable Practices

The assessment team did not identify any acceptable practices for inclusion in this report.

4.3.4 Noteworthy Practices

The assessment team identified three noteworthy practices for inclusion in this report.

Noteworthy practice: Department 628 has a mature process for identifying and managing opportunities for improvement.

In addition to the assessment process, RPA-08-02, *Radiation Protection Department Issues Management*, and RPA-03, *Radiation Protection Department Quality Improvement*, define the methods used to identify, commit, and track field observations and quality improvement, other inputs, and opportunities for improvement. Implementation of a formal process to identify, assign resources to, and then track implementation of continuous improvement activities is considered a noteworthy practice. Anyone in Department 628 can identify a potential improvement activity. The manager reviews the potential improvement, and if accepted, resources are applied, and the activity is tracked to completion.

Noteworthy practice: Department 628 has a department-specific assessment process that supports implementation of Radiation Protection Program requirements, which drives consistency and quality in planning and conducting radiological assessments.

Department 628 has a mature assessment program that considers risk, compliance, past events, prior assessments, and other feedback. Personnel use templates; documented roles, responsibilities, authorities, and accountabilities; and training to improve consistency and quality among assessments. Team leads for assessments review detailed training on requirements and management expectations for the conduct and quality of the assessment, and use provided templates and tools to document the results. Implementation of methods that ensure consistency and quality of assessments is considered a noteworthy practice.

Noteworthy practice: Department 643 maintains an Environmental Management System that includes regular assessments of environmental programs.

Department 641 and Department 643 practices have benefited from the staff's connection to an Environmental Management System assessment point of contact.

Appendix A. ES&H Assessment Requirements, July 2019

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
<i>Order of requirements statements within source documents</i>	<i>Requirements statements from source documents</i>	<i>Source document titles</i>	<i>Specific location within source documents</i>	<i>Requirements statements from AOP 04-04</i>	<i>Specific location within AOP 04-04</i>		
1	As part of its management system, Sandia leadership must: Implement risk-based, credible assessments, including self-assessments and internal independent assessments, feedback and improvement activities, and regular performance evaluations.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #3, Internal Assessments, Laboratories Leadership	[Center director] Ensures that identified risks and/or issues are considered in the development of assessment schedules	Section 3.1, pg. 3		
2	[As part of its management system, Sandia leadership must:] Implement continual improvement and feedback, including worker feedback mechanisms (e.g., employee concerns programs, telephone hotlines, employee suggestions forms, labor organization input), improvements in work planning and hazard identification activities, and lessons learned programs.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #3, Internal Assessments, Laboratories Leadership	Implementation of this procedure will help ensure assessment quality and consistent performance, and will influence a continuous improvement process that is proactive and in line with achieving Sandia's mission efficiently and effectively.	Section 1.1, pg. 1		
3	[As part of its management system, Sandia leadership must:] Enable identification and correction of negative performance or compliance trends before they become significant issues.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #3, Internal Assessments, Laboratories Leadership			Ties to event and safety incident reporting, manual chapters, and Performance Assurance System.	Possible gap

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
4	[As part of its management system, Sandia leadership must:] Plan, develop, maintain, and update an assessment schedule that is coordinated with the Sandia Field Office. Sandia must identify the basis for the planned assessments to ensure there is transparency and clarity on risks, prioritization, and resource allocation.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #3, Internal Assessments, Laboratories Leadership	Corporate Governance, organization 750, recommends that data for the next fiscal years' planned assessments for all Center 4100 organizations be entered in AIS annually. This data call typically occurs in the third quarter of the fiscal year. Corporate Governance compiles the data and provides it to SFO by July 31 as a snapshot of assessments to be performed.	Section 6.1, pg. 7		
5	[As part of its management system, Sandia leadership must:] Plan and conduct independent internal assessments to measure item and service quality, to measure the adequacy of work performance, and to promote improvement.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #3, Internal Assessments, Laboratories Leadership	Implementation of this procedure will help ensure assessment quality and consistent performance, and will influence a continuous improvement process that is proactive and in line with achieving Sandia's mission efficiently and effectively.	Section 1.1, pg. 1		Requirement not specifically called out
6	[As part of its management system, Sandia leadership must:] Establish sufficient authority and freedom from management for independent assessment teams.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #3, Internal Assessments, Laboratories Leadership				May be outside of AOP scope
7	[As part of its management system, Sandia leadership must:] Ensure persons who perform independent assessments are technically qualified and knowledgeable in the areas to be assessed.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #3, Internal Assessments, Laboratories Leadership	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		
8	[As part of its management system, Sandia leadership must:] Create a method for assessing the effectiveness of assurance system processes.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #3, Internal Assessments, Laboratories Leadership			PAS-D	May be outside of AOP scope

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
9	[Department managers] Establish assessment schedules to evaluate the effectiveness, safety, and necessity of department practices and implement continual improvement.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #3, Internal Assessments, Department Managers	[Department managers and team leads] Develop an annual assessment schedule based on consideration of activities such as compliance requirements, prior assessments, external audits, identified risks or issues, management surveillances, or validation of corrective actions	Section 3.3, pg. 3		Requirement not specifically called out but meets intent
10	[Department managers] Perform risk-informed, credible self-assessments and provide means for department members to do the same.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #3, Internal Assessments, Department Managers	[Department managers and team leads] Develop an annual assessment schedule based on consideration of activities such as compliance requirements, prior assessments, external audits, identified risks or issues, management surveillances, or validation of corrective actions	Section 3.3, pg. 3		Requirement not specifically called out but meets intent
11	[Laboratories leadership] Ensure that management monitors quality outcomes and conducts management reviews for escalation of risks and issues, trends, preventive and corrective actions, communications, and conditions that require higher management attention.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #4, Management Review, Laboratories Leadership				Outside of AOP scope; see Laboratory Operating System
12	[Laboratories leadership] Ensure that management assesses their management processes, then identifies and corrects problems that hinder the organization from achieving its objectives.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #4, Management Review, Laboratories Leadership	[Department managers and team leads] Develop an annual assessment schedule based on consideration of activities such as compliance requirements, prior assessments, external audits, identified risks or issues, management surveillances, or validation of corrective actions	Section 3.3, pg. 3		Requirement not specifically called out but meets intent

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
13	<p>[Laboratories leadership] Plan and carry out management assessments, taking into consideration the following inputs:</p> <ul style="list-style-type: none"> • The status of actions from previous management reviews. • Relevant changes in external and internal issues. • Information on the performance and effectiveness of the quality management system, including trends in: <ul style="list-style-type: none"> • Customer satisfaction and feedback from relevant interested parties. • The extent to which program and operational objectives have been met. • Process performance and conformity of products and services. • Nonconformances and corrective actions. • Monitoring and measurement results. • Audit and assessment results. • The performance of external providers. • The adequacy of resources. • The effectiveness of actions taken to address issues, risks, and opportunities. • Opportunities for improvement. 	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #4, Management Review, Laboratories Leadership	<p>[Department managers and team leads] Develop an annual assessment schedule based on consideration of activities such as compliance requirements, prior assessments, external audits, identified risks or issues, management surveillances, or validation of corrective actions</p>	Section 3.3, pg. 3		Requirement not specifically called out but meets intent
14	<p>[Laboratories leadership] The outputs of the management assessment shall include decisions and actions related to:</p> <ul style="list-style-type: none"> • Opportunities for improvement. • Corrective or preventive actions. • Resource needs. 	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #4, Management Review, Laboratories Leadership	If an issue is being addressed but is not yet completed, then an open corrective action shall be identified.	Section 7.5, pg. 11		Requirement not specifically called out; may be outside of AOP scope
15	<p>[All leadership] All management must conduct management reviews and perform those reviews in accordance with division, program, or policy entity requirements.</p>	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #4, Management Review, All Leadership				Possible gap; may be outside of AOP scope

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
16	[Department managers] Ensure that adequate documentation is kept during all assessments, reviews, and improvement activities.	Policy CA002, <i>Performance Monitoring Policy</i>	Requirement #5, All Performance Monitoring Activities, Department Managers	The lead assessor or designee shall enter the final results into AIS. Supporting documentation should be attached (linked) to the AIS record, such as evidence to support conclusions, findings, observations, and issues found and fixed during the assessment and evidence that supports the assessment recommendations, including opportunities for improvement.	Section 7.4, pg. 11		May be outside of AOP scope
17	[Senior leadership] Determine assessment strategy and topics in response to the annual assessment schedule data call email issued by the Risk and Issue Management department.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Determine Assessment Topics and Type	Corporate Governance, organization 750, recommends that data for the next fiscal years' planned assessments for all Center 4100 organizations be entered in AIS annually. This data call typically occurs in the third quarter of the fiscal year. Corporate Governance compiles the data and provides it to SFO by July 31 as a snapshot of assessments to be performed.	Section 6.1, pg. 7		
18	[Senior leadership] Consider the factors listed in Assessment Strategy and Topic Considerations.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Determine Assessment Topics and Type	Some topical areas that may be considered when developing the annual assessment schedule include the following: Regulatory-Driven/Corporate Required, Already Scheduled/Known Assessments, Required Activities, Areas of Concern or Risk, Timing Considerations, and Validate or Revalidate Technical Work Documents (TWDs).	Section 6.3, pg. 7		

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
19	[Managers] Use a graded approach to determine whether additional assessments are needed.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Determine Assessment Topics and Type				Update AOP to include graded approach
20	[Managers] Use a graded approach to determine whether additional assessments are needed.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Determine Assessment Topics and Type				Update AOP to include graded approach
21	[Managers] Determine assessment type: <ul style="list-style-type: none"> • Organization Assess Organization (Self-Assessment) • Functional Area Assess Implementation • Functional Area Assess Adequacy • Corrective Action Validation Assessment • Surveillance/Walkthrough 	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Determine Assessment Topics and Type	Center 4100 follows the general requirements as prescribed in CG100.6.3 for the five types of assessments defined within that document.	Section 4.0, pg. 5		
22	[Managers] Record determined assessment type in Sage.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Determine Assessment Topics and Type	[Department managers and team leads] Ensure that assessments and results are entered into the Assurance Information System (AIS) and that findings, observations, and subsequent corrective actions are assigned to solution owners	Section 3.3, pg. 3		

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
23	[Sponsoring manager] Identify and assign an assessor appropriate to the type and scope of the assessment.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	Center 4100 level one managers and team leads are responsible for identifying lead assessors and assessment team members.	Section 5.0, pg. 6		
24	[Sponsoring manager Identify and assign an assessor appropriate to the type and scope of the assessment.] For the following high-risk, high-impact assessments, assign a qualified assessor: <ul style="list-style-type: none"> Assessments required by law, DOE, or contract for regulatory compliance Assessment commitments (requested by the Sandia Field Office [SFO], Sandia Leadership Team [SLT], Board of Managers [BoM], or scheduled by Sandia's Independent Audit Organization) Effectiveness reviews required per DOE requirements, other drivers, or programmatic requirements 	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan				May need to incorporate in AOP updates
25	[Sponsoring manager Identify and assign an assessor appropriate to the type and scope of the assessment.] <ul style="list-style-type: none"> For assessments that do not meet the above criteria, assign a lead assessor and additional team members, if needed. Consider the assessor's experience, training, knowledge, and ability to plan and execute the activities appropriate to the type and scope of the assessment. 	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	Center 4100 level one managers and team leads are responsible for identifying lead assessors and assessment team members.	Section 5.0, pg. 6		

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
26	[Sponsoring manager] Ensure the assessor, or someone on the assessment team, is technically knowledgeable about the program, system, or process being assessed.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	Each level one manager shall establish a process to ensure that lead assessors are trained (see Section 3.3). This process should also identify evidence of maintaining lead assessor and assessor knowledge and skills.	Section 5.0, pg. 6		
27	[Sponsoring manager and lead assessor in conjunction with assessment team members, if applicable] Determine the assessment scope, while considering: Purpose: Why perform the assessment?	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	An assessment plan should be developed that describes the purpose and scope, and the assessment plan should be entered into AIS.	Section 7.1.1, pg. 8		
28	[Sponsoring manager and lead assessor in conjunction with assessment team members, if applicable] Determine the assessment scope, while considering:] Expected outcome: What should be learned from the assessment?	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	An assessment's purpose is to identify the general intent (what is to be accomplished) and reason (why this activity is being carried out) for the assessment.	Section 7.1.1, pg. 8		

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
29	[Sponsoring manager and lead assessor in conjunction with assessment team members, if applicable Determine the assessment scope, while considering:] Data and methodology: What objective evidence supports the outcome, and how will that data be obtained?	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	[As outlined in the corporate guidance, each assessment plan shall:] Identify methodologies to be used for the assessment	Section 7.1.4, pg. 10		
30	[Sponsoring manager and lead assessor in conjunction with assessment team members, if applicable Determine the assessment scope, while considering:] Participants	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	[As outlined in the corporate guidance, each assessment plan shall:] Identify lead assessor and assessment team members [An assessment's scope should identify the topic or area being assessed and provide specific statements of what will be evaluated, such as:] List individuals and/or groups to be interviewed. [A schedule for the assessment should be established. Planned data collection activities should be reviewed in order to provide sufficient time to conduct the assessment. Some items to consider include the following:] Coordinate with individuals who may be involved in work observations.	Section 7.1.4, pg. 10 Section 7.1.1, pg. 8, 9 Section 7.1.3, pg. 9		

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
31	[Sponsoring manager and lead assessor in conjunction with assessment team members, if applicable Determine the assessment scope, while considering:] Assessment location, such as specific Sandia sites, Tech Areas, buildings, or other locations	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan				Include location in assessment plan templates but not specifically called out in AOP. AOP will refer to this requirement by pointing to CA002.1.
32	[Sponsoring manager and lead assessor in conjunction with assessment team members, if applicable Determine the assessment scope, while considering:] Activity schedule	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	A schedule for the assessment should be established. Planned data collection activities should be reviewed in order to provide sufficient time to conduct the assessment.	Section 7.1.3, pg. 9		
33	[Policy manager or delegate] Provide notice, when possible, at least six weeks in advance to the division, program, or policy entity being assessed by a functional area.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	Schedule interviews, providing the entities being assessed with adequate advance notice and, as appropriate, information regarding the nature of the assessment activity.	Section 7.1.3, pg. 9		AOP will refer to this requirement by pointing to CA002.1

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
34	[Policy manager or delegate] Identify techniques to ensure effective data collection, aggregation, and analysis.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	A brief description of the methodologies employed during the assessment should be provided in the assessment plan or the final assessment results.	Section 7.1.2, pg. 9		
35	[Policy manager or delegate] Target or focus on a statistically valid, or otherwise determined, sample of the assessed entity. For statistical consultation, email the Statistical Sciences department.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan				AOP will refer to this requirement by pointing to CA002.1
36	[Policy manager or delegate] Ensure that the results are based on valid information. Include evidence of the accuracy of self-reported data collected during the assessment.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	The assessment team shall organize all collected objective evidence, analyze the data, and draw conclusions based on the categories identified in Table 3, "Categorize Assessment Results," in CG100.6.3, Determine, Plan and Perform Assessments.	Section 7.3, pg. 10		AOP will refer to this requirement by pointing to CA002.1

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
37	[Policy manager or delegate] Submit assessment plan to the assessed entity or entities.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	Review, approval, and documentation of the assessment plan shall be in accordance with CG100.6.3, Determine, Plan and Perform Assessments, and, if applicable, local (organization specific) procedures.	Section 7.1.4, pg. 10		AOP will refer to this requirement by pointing to CA002.1
38	[Lead assessor] Record assessment plan details in Sage.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	An assessment plan should be developed that describes the purpose and scope, and the assessment plan should be entered into AIS.	Section 7.1.1, pg. 8		
39	[Lead assessor] Submit assessment plan to the Sponsoring Manager.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	[As outlined in the corporate guidance, each assessment plan shall:] Be submitted to the sponsoring manager	Section 7.1.4, pg. 10		

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
40	[Sponsoring manager] Review the plan, consider the resources required, and notify the lead assessor of required changes.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Develop and Submit the Assessment Plan	Review, approval, and documentation of the assessment plan shall be in accordance with CG100.6.3, Determine, Plan and Perform Assessments, and, if applicable, local (organization specific) procedures.	Section 7.1.4, pg. 10		AOP will refer to this requirement by pointing to CA002.1
41	[Lead assessor, in conjunction with the assessment team members] Complete assessment plan activities.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Conduct the Assessment and Collect Data	The assessment team shall complete the activities identified in the assessment plan and gather data, objective evidence, and other information through the activities defined in the methodology.	Section 7.2, pg. 10		
42	[Lead assessor, in conjunction with the assessment team members] Notify the Sponsoring Manager if compensatory measures are needed or have been implemented.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Conduct the Assessment and Collect Data				AOP will refer to this requirement by pointing to CA002.1

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
43	[Lead assessor, in conjunction with the assessment team members] Retain source evidence and documentation. Include this data in Sage or add link in Sage to external documents.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Conduct the Assessment and Collect Data	The lead assessor or designee shall enter the final results into AIS. Supporting documentation should be attached (linked) to the AIS record, such as evidence to support conclusions, findings, observations, and issues found and fixed during the assessment and evidence that supports the assessment recommendations, including opportunities for improvement.	Section 7.4, pg. 11		
44	[Sponsoring manager] Monitor progress and adjust resources and timeline as needed.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Conduct the Assessment and Collect Data	If it appears that additional actions may impact schedule, resource needs, etc., then a discussion is warranted with the manager regarding the costs and benefits of the proposed change or the possible need for a second assessment.	Section 7.2, pg. 10		AOP will refer to this requirement by pointing to CA002.1
45	[Lead assessor, in conjunction with the assessment team members] Analyze data collected during the assessment and categorize the results using the following, as appropriate: <ul style="list-style-type: none"> • Finding • Observation • Acceptable Practice • Noteworthy Practice 	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results	The assessment team shall organize all collected objective evidence, analyze the data, and draw conclusions based on the categories identified in Table 3, "Categorize Assessment Results," in CG100.6.3, Determine, Plan and Perform Assessments. For consistency, the definitions provided in the table should be used for the following categories: <ul style="list-style-type: none"> • Findings • Observations • Noteworthy practices • Acceptable practices 	Section 7.3, pg. 10		

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
46	[Lead assessor, in conjunction with the assessment team members] Review results with assessment team members for accuracy and completeness.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results	The assessment team shall complete the activities identified in the assessment plan and gather data, objective evidence, and other information through the activities defined in the methodology.	Section 7.2, pg. 10		AOP will refer to this requirement by pointing to CA002.1
47	[Lead assessor, in conjunction with the assessment team members] Review results with management responsible for the assessed work to confirm accuracy. Include self-reported data collected during the assessment.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results	After this information has been assembled, draft results should be provided to the assessed organization to obtain input and confirm the factual accuracy of the assessment results.	Section 7.3, pg. 10		
48	[Lead assessor, in conjunction with the assessment team members] Refer any disagreements within the assessment team to the Sponsoring Manager for resolution.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results				AOP will refer to this requirement by pointing to CA002.1

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
49	[Lead assessor, in conjunction with the assessment team members] Record assessment results in Sage and document findings, observations, acceptable practices, and noteworthy practices.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results	The lead assessor or designee shall enter the final results into AIS.	Section 7.4, pg. 11		
50	[Lead assessor, in conjunction with the assessment team members] When appropriate, include links in Sage to: <ul style="list-style-type: none"> Evidence such as completed checklists, interview notes, work observations, and reviewed documents. Data analysis that supports findings, observations, acceptable practices, and noteworthy practices. 	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results	Supporting documentation should be attached (linked) to the AIS record, such as evidence to support conclusions, findings, observations, and issues found and fixed during the assessment and evidence that supports the assessment recommendations, including opportunities for improvement.	Section 7.4, pg. 11		
51	[Lead assessor, in conjunction with the assessment team members] Submit final assessment results to Sponsoring Manager and the assessed division, program, or policy entities.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results	After the assessment results have been finalized, they shall be submitted to the manager or entity requesting the assessment.	Section 7.4, pg. 11		AOP will refer to this requirement by pointing to CA002.1

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
52	[Sponsoring manager or delegate] Review the final results and ensure quality of the information, including appropriate categorization of findings, observations, and noteworthy and acceptable practices.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results	After the assessment results have been finalized, they shall be submitted to the manager or entity requesting the assessment.	Section 7.4, pg. 11		AOP will refer to this requirement by pointing to CA002.1
53	[Sponsoring manager or delegate] Accept the final results.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results	After the assessment results have been finalized, they shall be submitted to the manager or entity requesting the assessment.	Section 7.4, pg. 11		AOP will refer to this requirement by pointing to CA002.1
54	[Sponsoring manager or delegate] Communicate the final results to assessment participants and stakeholders.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results	The sponsoring manager or lead assessor will assign corrective actions and other follow-on activities to specific individuals as required by AIS.	Section 7.5, pg. 11		AOP will refer to this requirement by pointing to CA002.1

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
55	[Sponsoring manager or delegate] Identify and document lessons learned at Sandia's Lessons Learned website.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Analyze Data and Categorize, Record, and Report Results				Possible gap; AOP references do include CG100.6.15, <i>Identify Operating Experience</i> , and Share Lessons Learned
56	[Sponsoring manager or delegate] Assign a responsible manager to determine appropriate action for findings and observations as required by CA001.2, Identify and Manage Issues.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Assign Findings and Observations	The sponsoring manager or lead assessor will assign corrective actions and other follow-on activities to specific individuals as required by AIS.	Section 7.5, pg. 11		
57	[Sponsoring manager or delegate] If the finding or observation is cross-entity (i.e., it requires more than one division, program, or policy entity to resolve), submit it to the Mission Assurance Associate Laboratories Director for assignment.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Assign Findings and Observations				Possible gap
58	[Sponsoring manager or delegate] If the assigned responsible management rejects ownership, facilitate and escalate as necessary to ensure an appropriate individual identifies and accepts the finding or observation.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Assign Findings and Observations				AOP will refer to this requirement by pointing to CA002.1

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
59	[Sponsoring manager or delegate] If the content or topical area is not classified, document and manage records in Sage.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Document and Manage Records	The lead assessor or designee shall enter the final results into AIS.	Section 7.4, pg. 11		
60	[Sponsoring manager or delegate] If the content or topical area is classified, document and manage records in an application or system approved for classified information.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Document and Manage Records				AOP will refer to this requirement by pointing to CA002.1
61	[Sponsoring manager or delegate] Complete entries for the upcoming fiscal year's planned assessments by the date specified in the annual assessment schedule (which is based on the annual assessment schedule process), and as identified throughout the year.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Document and Manage Records	In order to accommodate the annual data request for assessment entry into AIS, Center 4100 organizations shall enter any known assessments for the new fiscal year into AIS following the instructions provided by Department 4135.	Section 6.1, pg. 7		
62	[Sponsoring manager or delegate] Document Sandia-sponsored external audits in Sage.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Document and Manage Records	Outside entity assessments (independent assessments and external audits) are included here because the expectation for performing causal analyses and doing corrective actions as outlined in this procedure is the same for both Center 4100 assessments and outside entity assessments.	Section 1.3, pg. 1		Requirement not specifically called out

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
63	[Sponsoring manager or delegate] Verify that only one assessment record is created to avoid double counting of results and duplication of reporting.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Document and Manage Records				AOP will refer to this requirement by pointing to CA002.1
64	[Sponsoring manager or delegate] When business needs and risks change, adjust planned start and completion dates, and record reasons.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Document and Manage Records				AOP will refer to this requirement by pointing to CA002.1
65	[Sponsoring manager or delegate] When planned assessments are not conducted, cancel Sage assessment records and record the reason.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Document and Manage Records				AOP will refer to this requirement by pointing to CA002.1
66	[Sponsoring manager or delegate] Delete duplicate or erroneous records.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Document and Manage Records				AOP will refer to this requirement by pointing to CA002.1

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
67	[Sponsoring manager or delegate] Ensure proper marking of any reports generated from Sage that contain Unclassified Controlled Information (UCI) or other sensitive unclassified categories.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Plan, Perform, Analyze, and Record Assessments; Process Diagram; Document and Manage Records				AOP will refer to this requirement by pointing to CA002.1
68	The Assessor Qualification Program (AQP) uses a graded approach for qualification and is limited to the following types of assessments: <ul style="list-style-type: none"> • Organization Assess Organization (includes independent appraisal and readiness assessment type activities) • Functional Area Assess Adequacy • Functional Area Assess Implementation • Corrective Action Validation 	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification				May need to incorporate in AOP updates
69	Following the graded approach, an assessor must be qualified for the high-risk and high-impact assessments outlined in the "Develop and Submit the Assessment Plan" step in the "Plan, Perform, Analyze, and Record Assessments" section of this process.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		May need to incorporate in AOP updates; AOP does not currently address risk and/or impact in discussion on assessor selection
70	A qualified assessor is not required when performing the evaluation type: Surveillance/Walkthrough.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification				May need to incorporate in AOP updates

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
71	<p>[Assessor candidate] Complete the following trainings:</p> <ul style="list-style-type: none"> • AT200, Assessment Fundamentals online training • AT201, Effective Assessments classroom training 	<p>Process CA002.1, <i>Conduct Internal Assessments</i></p>	<p>The Process; Standard Assessor Qualification</p>	<p>Center 4100 training requirements are presented in Table 1. These classes are recommended CG100.6.3. Table 1. Center 4100 training requirements</p> <p>1. Responsible Individual: Assessors and Center 4100 assessment team members Required: Yes Training: Assessment Fundamentals (AT200*) or equivalent**</p> <p>2. Responsible Individual: Lead assessors and managers Required: Yes Training: Assessment Fundamentals (AT200*) or equivalent** ; Determine and Take Action (DTA200) or equivalent</p> <p>* If an individual has taken the archived AT101 or AT102 then the requirement for taking AT200 has been met. Required training courses can be accessed through TEDS.</p> <p>** Equivalent training shall be determined by the level one manager and shall be documented in training records.</p>	<p>Section 5.0, pg. 6</p>		<p>AOP requirements are somewhat conflicting with corporate policy. AT courses mentioned in AOP are no longer recommendations from corporate policy but requirements to become a qualified lead assessor. DTA200, <i>Determine and Take Action</i>, is not mentioned in corporate policy for lead assessor qualification. Updating AOP to align with corporate requirements for training.</p>

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
72	[Assessor candidate] Within 12 months of requesting assessor qualification, lead at least one assessment OR assist with two assessments under the direction of a qualified assessor.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		AOP will refer to this requirement by pointing to CA002.1
73	[Assessor candidate] Document assessment(s) in Sage, or other assessment tools, as applicable.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		AOP will refer to this requirement by pointing to CA002.1
74	[Assessor candidate] Submit email request along with assessment documentation (include record number and linked evidence) to the Assessment Subject Matter Expert (SME) to begin the quality review process.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		AOP will refer to this requirement by pointing to CA002.1

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
75	<p>[Assessor candidate] Receive an assessment quality review score in writing for the completed assessment(s).</p> <ul style="list-style-type: none"> • If score is 2.5 or greater, the Assessment SME sends an email to the requestor notifying of the qualification. The requestor will be added to the Qualified Assessor List posted in EIMS and linked in Sage. • If score is less than 2.5, the Assessment SME sends the requestor an email that outlines unmet requirements. Additional proficiency may be required under the mentoring of a Qualified Assessor or Assessment SME to address deficiencies before resubmitting new documentation for a reassessment. 	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		AOP will refer to this requirement by pointing to CA002.1
76	<p>[Qualified assessor] To maintain an existing qualification, lead at least one assessment that receives a quality review score of 2.5 or greater every 12 months after qualification approval date, following the steps below:</p>	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		AOP will refer to this requirement by pointing to CA002.1
77	<p>[Qualified assessor] To maintain an existing qualification, lead at least one assessment that receives a quality review score of 2.5 or greater every 12 months after qualification approval date, following the steps below:] Document assessment(s) in assessment tool (e.g., Sage, e-Bridge).</p>	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		Requirement not specifically called out

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
78	[Qualified assessor] To maintain an existing qualification, lead at least one assessment that receives a quality review score of 2.5 or greater every 12 months after qualification approval date, following the steps below:] Submit assessment documentation (use assessment record number with linked evidence) to the Assessment SME to begin the assessment quality review process.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		Requirement not specifically called out
79	[Qualified assessor] To maintain an existing qualification, lead at least one assessment that receives a quality review score of 2.5 or greater every 12 months after qualification approval date, following the steps below:] Receive an assessment quality review score of 2.5 or greater for the completed assessments.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Standard Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		Requirement not specifically called out
80	[Assessor candidate] To apply for alternate qualification, submit a written (e.g., email, letter, memo, etc.) request to the Assessment SME to determine acceptability of alternate training and relevant experience.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Alternate Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		Requirement not specifically called out
81	[Process manager or delegate] Approve or reject request and notify the Assessor Candidate of the outcome. If denied, inform the Assessor Candidate of the need to follow the standard qualification requirements.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Alternate Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		May be outside of AOP scope since AOP is not directed at process manager or delegate

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
82	[Qualified assessor] To maintain an existing qualification, lead at least one assessment that receives a quality review score of 2.5 or greater every 12 months after qualification approval date, following the steps below:	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Alternate Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		Requirement not specifically called out
83	[Qualified assessor] To maintain an existing qualification, lead at least one assessment that receives a quality review score of 2.5 or greater every 12 months after qualification approval date, following the steps below:] Document assessment(s) in assessment tool (e.g., Sage, e-Bridge).	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Alternate Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		Requirement not specifically called out
84	[Qualified assessor] To maintain an existing qualification, lead at least one assessment that receives a quality review score of 2.5 or greater every 12 months after qualification approval date, following the steps below:] Submit assessment documentation (use assessment record number with linked evidence) to the Assessment SME to begin the assessment quality review process.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Alternate Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		Requirement not specifically called out
85	[Qualified assessor] To maintain an existing qualification, lead at least one assessment that receives a quality review score of 2.5 or greater every 12 months after qualification approval date, following the steps below:] Receive an assessment quality review score of 2.5 or greater for the completed assessments.	Process CA002.1, <i>Conduct Internal Assessments</i>	The Process; Alternate Assessor Qualification	It is also the responsibility of the level one managers and team leads to ensure that a lead assessor completes required assessor training prior to conducting assessments and that the skill should be maintained appropriately while the individual is in a lead assessor role.	Section 5.0, pg. 6		Requirement not specifically called out

Location Order	Requirement Statement	Source	Location	AOP Requirement Statement	AOP Location	Other ES&H Process/ Procedure/ Documentation	Notes
86	<p>[Laboratories director, deputy Laboratories director, associate Laboratories directors, senior directors, or delegate]</p> <ul style="list-style-type: none"> Cover the following, as applicable to the review: <ul style="list-style-type: none"> Review statuses and results of audits and assessments. 	Process CA002.3, <i>Management Review Process</i>	The Process, Executive Management Reviews (Strategic Management Review [SMR], Program Management Review [PMR], and Operational Management Review [OMR])	[Center director] Reviews assessment results quarterly through the Management Assurance Review/Executive Management Review (MAR/EMR) or an equivalent center process	Section 3.1, pg. 3		

Appendix B. Interview Questions for this Assessment

1. What process is used to support ES&H assessment annual planning? Is it effective?
2. What process does your department use to identify the basis for planned assessments identified? Does the process result in transparency and clarity on risks, prioritization, and resource allocation?
3. Do your assessments evaluate departmental practices and facilitate continual improvement? Are you collecting user experience for services your department provides?
4. How and where does your department document and store assessments, reviews, and improvement activities?
5. How does your department support ES&H Strategic Plan Goal 2, “Strengthen the learning culture within the ES&H organization and the Laboratories”? Do your assessments support this objective?
6. Do you feel you have clear corporate and Center expectations for planning and performing assessments? Do you feel the processes are as free of complexity and redundancy as practical? Are there conflicts with unique customer or regulatory assessment needs? What would you like to see clarified, simplified, or improved?
7. Do you have any controlled documents, job aids, or other programmatic tools necessary to support effective implementation of CA002.1, *Conduct Internal Assessments*, or the ES&H “learning culture” organization goal?

Resources

Related Laboratory Policies and Processes

- [CA002](#), *Performance Monitoring Policy*, Section 3, “Internal Assessments,” and Section 5, “All Performance Monitoring Activities”
- [CA002.1](#), *Conduct Internal Assessments*
- [ESH001](#), *Environment, Safety, and Health Policy*
- [ESH001.1](#), *Integrate ES&H into Work Planning and Control*

References

- [AOP 04-04](#), *Assessments*, Revision 9
 - [PAJA-04-04-001](#), *Monthly Assessment Status Check*
- [AOP 09-07](#), *Environmental Management System Internal Audit*
- [ASP-004](#), *Analytical Services Program Assessments*
- Evaluation 76376, 00635 FY19 *Assess the Quality of Center 600 Completed Assessments for Fiscal Year 2018*
- [DOE G 414.1-1C](#), *Management and Independent Assessments Guide*, Section 4, “Guidelines”
- [DOE O 226.1B](#), *Implementation of Department of Energy Oversight Policy*, Attachment 1, “Contractor Requirements Document”, Paragraph 2, “Requirements,” b.(2)
- [DOE O 414.1D](#), [Chg 1](#), *Quality Assurance*, Attachment 2, “Quality Assurance Criteria,” Criterion 9, “Assessment/Management Assessment”
- [FY19 Environment, Safety, and Health Strategic Plan](#), Goal 2, Objective 1
- [IHI-00-0002](#), *Industrial Hygiene Instrumentation Quality Implementation Plan*
- [IH PLA 06-01](#), *Industrial Hygiene Program Quality Assurance Plan*
- [MN471022](#), *ES&H Manual*, “Radiation Protection” Chapter 13, “Feedback and Improvement”
- [NNSA SD 226.1B](#), *NNSA Site Governance*, Attachment 1, “Contractor Requirements Document (CRD) NNSA SD 226.1B, NNSA Site Governance,” paragraphs 1 and 5
- [RPA-03](#), *Radiation Protection Department Quality Improvement*
- [RPA-08-01](#), *Radiation Protection Department Assessments*
- [RPA-08-02](#), *Radiation Protection Department Issues Management*
- [RPDP-00-03](#), *Radiation Protection Dosimetry Program Assessments*
- [RPI-00-0002](#), *Radiation Protection Instrumentation Program Quality Plan*
- [RPSD-00-03](#), *Radiation Protection Sample Diagnostics Program*
- [SAND 2018-7116](#), *Contractor Assurance System Description (CAS-D): Sandia National Laboratories*, Revision 1.2
- [SMO-QAPP](#), *Quality Assurance Project Plan for the Sample Management Office*

Systems, Applications, and Websites

- Assurance Information System
- [Center 4700 Processes](#)
- Sage