



Department of Energy

Washington, DC 20585

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MEMORANDUM FOR DISTRIBUTION

FROM: ANDREW C. LAWRENCE 
DIRECTOR
OFFICE OF NUCLEAR SAFETY, QUALITY ASSURANCE AND
ENVIRONMENT
OFFICE OF HEALTH, SAFETY AND SECURITY

SUBJECT: Facility Representative Program Performance Indicators Quarterly
Report, April - June (Second Quarter CY2009)

Attached is the Facility Representative (FR) Program Performance Indicators Quarterly Report covering the period from April to June 2009. Data for these indicators are gathered by Field elements quarterly per Department of Energy (DOE) Standard (STD)-1063-2006, *Facility Representatives*, and reported to Headquarters program offices for evaluation and feedback to improve the FR Program. A summary of this quarter's FR data indicates:

77% Fully Qualified (last Quarter was 78%);
90% Staffing Level (last Quarter was 90%);
45% Time Spent in the Field (DOE goal is > 40%); and
73% Time Spent in Oversight Activities (DOE Goal is > 65%).

Percentages are based on FR staffing analyses at 210 Full Time Equivalents (FTEs) and 189 FTEs actual staffing. Fully qualified FR totals for this period broken down by program were as follows: Environmental Management (EM) had 74% fully qualified, Nuclear Energy (NE) had 100% fully qualified, National Nuclear Security Administration (NNSA) had 78% fully qualified, and Science (SC) had 84% fully qualified. The DOE goal for fully qualified FRs is greater than 80%. The Savannah River Site, in conjunction with the Office of Health, Safety and Security (HSS), sponsored a Facility Representative Fundamentals training course April 20 - May 1, 2009, to aid in qualification of new FRs in which twenty personnel from across the DOE complex participated. HSS will continue to partner with DOE Field elements to make this training course available and facilitate the qualification of new FRs to meet the Department's goals for fully qualified FRs.

FR attrition for this period was four, with two coming from NNSA, one from EM, and one from NE. These included one lateral, one transfer, and two promotions.

Current FR information and past quarterly performance indicator reports are accessible at the FR web site at [Http://www.hss.energy.gov/deprep/facrep/](http://www.hss.energy.gov/deprep/facrep/). Should you have any questions or comments on this report, please contact me or the DOE FR Program Manager, James Heffner at 202-586-3690.

Attachment: Facility Representative Program Performance Indicators Quarterly Report



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OFFICE OF ENVIRONMENTAL MANAGEMENT

Facility Representative Program Performance Indicators (2QCY2009)

<u>Field or Ops Office *</u>	<u>Staffing Analysis</u>	<u>FTEs</u>	<u>Actual Staffing</u>	<u>% Staffing</u>	<u>Attrition</u>	<u>% Core Qualified</u>	<u>% Fully Qualified</u>	<u>% Field Time **</u>	<u>% Oversight Time ***</u>
CBFO	3	3	2	67	0	50	50	46	76
ID	13	13	11	85	0	100	100	49	90
OR	19	18	17	89	1	71	71	42	57
ORP	15	15	15	100	0	73	73	53	77
PPPO	6	6	6	100	0	67	67	42	70
RL	19	19	19	100	0	84	84	45	69
SR	32	28	28	88	0	64	64	47	73
WVDP	2	2	2	100	0	50	50	37	70
EM Totals	109	104	100	92	1	74	74	46	72
DOE GOALS	-	-	-	100	-	-	>80	>40	>65

*** Field or Ops Office Key**

CBFO = Carlsbad Field Office; ID = Idaho Operations Office; OR = Oak Ridge Office; ORP = Office of River Protection; PPPO = Portsmouth/Paducah Project Office; RL = Richland Operations Office; SR = Savannah River Operations Office; WVDP = West Valley Demonstration Project

** % Field Time is defined as the number of hours spent in the plant/field divided by the number of available work hours in the quarter. The number of available work hours is the actual number of hours a Facility Representative works in a calendar quarter, including overtime hours. It does not include leave time (sick, annual, or other) or holidays, nor does it include special assignments greater than 1 week assigned by the Field Element Manager.

*** % Oversight Time includes % Field Time

EM Facility Representative (FR) Highlights:

- CBFO: Hired a third FR.
- ID: As a result of a targeted training surveillance, a WDP FR identified that facility changes, modifications, and procedure revisions were not adequately monitored and evaluated for applicability into initial and continuing training programs.
- ID: During the monitoring of a maintenance evolution, a WDP FR observed the correct installation of the Lockout/Tagout (LO/TO). However, a second worker, who would serve as the independent verification, was in the area waiting for the initial LO/TO to be completed. The FR questioned if adequate independence by the second worker was maintained as specified by the contractor's procedures (i.e., the person performing the verification will not be influenced by observation of, or involvement in, the activity that establishes the component position or status).
- ID: The Facility and Material Disposition Project (FMDP) Idaho Deactivation and Demolition (D&D) work lead FR performed an evaluation of contractor readiness and plans to receive, revise and implement safety documents for new D&D projects related to the American Recovery and Reinvestment Act (ARRA) of 2009. The FR review included nuclear safety documents, employee safety and health documents, and public safety and health documents. The review concluded that appropriate contractor plans and safety documents had been developed for new ARRA projects that, if properly implemented, would serve to meet relevant requirements for nuclear safety, employee safety and health, and public safety and health.
- ID: Two FRs completed final qualification at the FMDP. The process to hire one additional FTE is in the final stages.

- OR: A review of Isotek's Hazardous Energy Control Procedure revealed that the authorized employee performing independent verifications per their procedure was installing the energy isolation locking device and tag. This activity occurs after another authorized employee positions the device in its correct position. This practice was inconsistent with the various DOE guides on Independent Verification. As a result of a meeting, the subject matter expert (SME) for Hazardous Energy Control has agreed to revise the procedure such that the Independent Verification activities will not be related to establishing the components position or application of the lock and tag.
- OR: An FR walked down the Toxic Substances Control Act Incinerator (TSCAI) and observed operators off loading tanker E-8619 from the Materials and Energy Corporation (M&EC). Operators continued to prepare brick and empty containers for offsite shipment to Energy Solutions. A notification was received from the Facility Manager that a liquid waste tanker being shipped by Energy Solutions from the Utah facility to the TSCAI began leaking in transit. The leak appeared to have come from a small tube that runs between the tanker and an external pressure gauge near the top of the tanker. Energy Solutions is the generator and shipper and has mobilized an Incident Response team. The leak has been stopped, and actions to address the leak are being developed. No radioactive contamination has been detected and the estimated release is below reportable quantities for the hazardous waste.
- OR: During this reporting period, FRs executed 446 walkthroughs and/or assessments; reviewed in excess of 846 contractor documents; and attended in excess of 888 meetings, briefings, plan of the day (POD), and plan of the week (POW) in support of contractor activities.
- OR: FR attrition for this reporting period was one, as one FR was promoted to the Safety System Oversight Lead position. Training and qualification efforts are being implemented for five new FRs.
- ORP: An FR Finding noted that a high risk work package contained many vague work statements, such as, "as required", and "as needed." In a two page section of the work document, the FR found nine instances of such statements being used. The corrective actions from this Finding required a briefing of all work document preparers on the need to avoid the use of vague terms. The FR requested the contractor also review future work documents to evaluate the effectiveness of this briefing.
- ORP: An FR identified a lack of knowledge regarding a waste transfer operator important to the ongoing waste transfer. The contractor took prompt corrective actions.
- ORP: An FR identified several recommended improvements in the area of work control including that the Tank Farms Operations Contractor (TOC) should include a requirement to consider the need to develop industrial hygiene and safety controls in Section 4.3 of TFC-OPS-MAINT-C-01, Tank Operations Contractor Work Control, when preparing for "Immediate Recovery Work."
- ORP: An FR identified several recommended improvements in the area of work control, including a recommendation for the TOC to determine if and when telephone approval is acceptable for the release of minor work and to proceduralize the requirements if it is deemed allowable.
- ORP: An FR identified several recommended improvements in the area of work control, including a recommendation for the TOC to determine the appropriate level of radiological controls for "Immediate Recovery Work" as discussed in TFC-OPSMATNT-C-01, Tank Operations Contractor Work Control; these controls must mesh with Section 4.10 of TFC-ESHQ-RP_RWP-C-04, Radiological Work Permits (i.e. consistent terminology- "immediate recovery" vs. "emergency").

- ORP: An FR participated in an Electrical Safe Practices Assessment at Tank Farms following an event at an East Tennessee facility. The FR found a work package that used improper Arc Flash (distance, PPE, and tooling) determinations. After conferring with the other assessment team members, the FR immediately approached Operations personnel at Tank Farms, and ensured a stop work was issued until the correct evaluations were performed on work previously released. This catch resulted in immediate safety improvements at Tank Farms, and cascaded into a similar review at ORP's WTP, which found their improper practices mirrored those at Tank Farms.
- ORP: An FR reviewed the rigging plan for the upending and setting of a double wall rebar curtain panel at the Pretreatment Facility. There were 20 horizontal bars in the rebar curtain with double wire saddle ties at each vertical choked rebar, therefore with safety factors applied the ties are more than adequate to support the load. Since the double wire saddle ties perform the function of distributing the load along the choked vertical rebar, verification of their installation should be included in the rigging notes. Not including verification of the double wire saddle ties on the vertically choked rebar in the rigging notes was considered an observation.
- ORP: During routine surveillances and oversight, the FR found that the reason for cancelling Standing Orders was not being documented. Corrective actions from this finding ensure that Standing Orders are cancelled only when the instructions in the order have been established elsewhere, or it is otherwise determined that the order is no longer needed. It provides a level of assurance that the controls in the orders are not dropped prematurely, and also establishes a paper trail for later examination.
- PPPO: While conducting routine oversight duties at the C-400 Interim Remedial Action (IRA) construction site, an FR identified that fasteners at flanges connecting piping and valves had loose fasteners and that some tight fasteners did not exhibit proper thread engagement required by ASME B31.3, Process Piping. The C-400 Remedial Design Report (RDR) Appendix G provides technical specification requirements for required thread engagement (i.e., one full thread through the connecting nut) and a requirement that off-site fabrication is required to be performed with on-site fabrication requirements. The C-400 IRA Contractor was notified of the condition and requested to determine if shop testing of the skids would need to be repeated.
- PPPO: While conducting routine oversight duties at the C-400 IRA construction site, an FR identified that two magnetic flow-meters were not installed in vertical piping as required by technical specification. The C-400 Remedial Design Report (RDR) Appendix G provides technical specification requirements for installing magnetic flow-meters and the requirement that off-site fabrication is required to be performed with on-site fabrication requirements. The C-400 IRA Contractor was notified of the condition and requested to determine if connecting piping configurations would maintain the flow-meters full of fluid, equivalent to that of being in vertical piping.
- PPPO: While conducting routine oversight duties at the Depleted Uranium Hexafluoride (DUF6) facility, an FR identified that a Heating Ventilation Air Conditioning (HVA) damper responsible for controlling negative pressure within the DUF6 Conversion Building was positioned within the HVA main exhaust plenum. The HVA damper was located about eighteen feet above the floor and required a scaffold to gain access to its manual hand-wheel and damper grease fittings. Recognizing that the HVA damper location would be in a radioactive contamination area, and possibly airborne radiation area, following process operations the FR investigated project records to evaluate why the "as low as reasonably achievable" concept was not applied to this damper. Manual operation of the damper is not an anticipated activity, but the damper manufacturer recommends lubricating damper bearings twice a year. A review of the Contractors controlled copies of the Piping and Instrumentation Diagram, and system plan drawings identified that damper was not installed in the proper location. A review of the Contractors system turnover book identified that the Contractor Testing organization had accepted the HVA system and that the location of this damper was not identified as a deficiency. The DUF6 Contractor was informed of the condition and references to controlled documents; the HVA damper was relocated to its correct position. Early identification of this condition precluded a potential delay in the operational readiness review process and the costs associated with routine maintenance and testing of the HVA damper over the projected facility lifetime of 25 years.

- PPPO: While conducting routine oversight duties at the DUF6 facility, an FR identified that stainless steel pipe fitting and welding was being conducted without any evidence of controlling tools (e.g., files, grinders and wire brushes) to be used exclusively on the stainless steel materials. Because carbon steel pipe fitting and welding was also being performed, the FR requested the Contractor QA organization to determine if tools used for carbon steel work had been used on stainless steel piping. Control of tools used for welding stainless steel is a standard practice to protect against contaminating the stainless steel welds with carbon steel particles which will cause a corrosive attack. The Contractor QA organization confirmed that tools were not controlled and the Contractor Engineering staff proceeded to evaluate the condition of the stainless steel welds. The subcontractor performing the work was required to implement tool control through the remainder of the work.
- RL: An FR identified issues with configuration control on installed systems across the River Corridor Project (RCP). Examples included River Remediation Sites and the Environmental Restoration Disposal Facility (ERDF).
- RL: An FR identified issues with the Plutonium Finishing Plant (PFP) contractor performing work out of scope of the work package during maintenance on the filter frames in Filter Room 310.
- RL: An FR identified numerous issues (e.g., posting, labeling, house keeping, electrical, material conditions, etc.) at 2706-T during a walk down.
- RL: An FR identified that allowable storage and use times of gloves used in glove bags potentially exceed manufacturer life expectancy at PFP.
- RL: An FR identified that the arc flash hazards/risk category used for operating Waste Receiving and Processing Facility switchgear breaker SG-13-101/F4D was not consistent with the National Fire Protection Association (NFPA) 70E, 2004 Edition Hazard/Risk Category Classification table.
- RL: An FR identified that the contractor did not perform adequate independent verifications of Lockouts at the Fast Flux Test Facility (FFTF) Sub-station.
- RL: An FR identified that the workers were wearing inadequate Personnel Protective Equipment (PPE) during electrical panel work at MO-276.
- RL: FR participated in a week long Conduct of Operations assessment at the West Valley Demonstration Project.
- RL: FRs identified issues with all the contractors not reporting events in accordance with the Occurrence Reporting system. Examples included: WCH not identifying the 327 Waste Box contacting the worker as a near miss, and an event where a Deactivation and Decommissioning (D&D) worker placed his foot through the ceiling at building 2723-W was not initially reported as an Occurrence.
- RL: Two FRs participated in a two week oversight assignment at Brookhaven National Laboratory.
- SR: An Assistant Manager Nuclear Material Stabilization Project (AMNMSP) FR identified that documentation of exhaust fan automatic damper closing times was not available. Although these dampers are not important to safety, incorrect closing times can cause excessive wear and tear. The contractor prepared a work package to correctly set the closure times and added a requirement to periodically verify timing in the preventive maintenance system.
- SR: An AMNMSP FR provided oversight for the successful start-up of the Vault Type Room (VTR) for storage of the un-irradiated FFTF fuel from Hanford; including receipt and unloading of the first shipment. Timely start-up of the VTR was important to completing the Hanford deinventory on schedule.

- SR: DOE-SR sponsored, in conjunction with HSS, a Facility Representative Fundamentals course to aid in qualification of new FRs. Twenty personnel from around the DOE complex participated.
- SR: Three vacancies were filled during this reporting period. The remaining vacancies are anticipated to be filled during the next quarter.
- WVDP: FRs conducted three monthly site assessments focused on work planning activities, safety, and waste management. Issues identified included control of working copies of controlled procedures, legibility of log book entries, hazardous material storage, housekeeping, flammable cabinet inventory maintenance, extension cord use, and compliance issues with fire doors and use of designated walkways.

OFFICE OF NUCLEAR ENERGY

Facility Representative Program Performance Indicators (2QCY2009)

<u>Field or Ops Office *</u>	<u>Staffing Analysis</u>	<u>FTEs</u>	<u>Actual Staffing</u>	<u>% Staffing</u>	<u>Attrition</u>	<u>% Core Qualified</u>	<u>% Fully Qualified</u>	<u>% Field Time **</u>	<u>% Oversight Time ***</u>
ID	11	11	10	91	1	100	80	52	82
NE Totals	11	11	10	91	1	100	80	52	82
DOE GOALS	-	-	-	100	-	-	>80	>40	>65

*** Field or Ops Office Key**

ID = Idaho Operations Office

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*** % Oversight Time includes % Field Time

NE Facility Representative (FR) Highlights:

- ID: A FR for the Analytical Laboratory discovered that a Fire System Impairment of the CO2 suppression system was not managed properly. The Fire System Impairment was in place to support personnel entry into a hot cell to install new facility equipment.
- ID: A Materials and Fuels Complex (MFC) FR observed a Waste Generator Services Employee exiting a radioactive material storage vault that is posted as a high radiation area without wearing a digital dosimeter as required by the Radiological Work Permit.
- ID: A National Security Program FR discovered laboratory personnel performing hot work (glass blowing) wearing non flame-resistant Tyvek coveralls. The hazard had not been identified in the Laboratory Instruction or hot work permit.
- ID: An MFC FR identified access being blocked to emergency response equipment at the MFC "Re-Entry Building." Access to the Supplied Air Packs (SCBA) was blocked by approximately 12 empty SCBA bottles, a 32" television, a floor buffer, and other radiological controls equipment.
- ID: An MFC FR observed a Health Physics Technician (HPT) exiting a radiologically controlled area twice without performing the required personnel contamination surveys. The HPT was stopped and the required surveys were performed.
- ID: An MFC FR observed maintenance personnel descend from a crane bridge walkway down to an unguarded catwalk without fall restraint protection during the transition. The Fall Hazards Prevention Analysis required fall restraint protection 100% of the time when the maintenance personnel were not protected from fall by engineered means (i.e. guard rails).
- ID: FRs identified multiple Lockout/Tagout (LO/TO) issues at different INL facilities including: the incorrect application of lockout devices which would not prevent operation of the devices; inadequate zero energy determination and verification; excessive time-lapse between application of LO/TO and performance of work; and failure to LO/TO all potential sources of energy prior to work.

- ID: FRs performed an assessment of Conduct of Operations at the Research and Education Complex (REC) and the Laboratory Support Complex (LSC). This effort resulted in the discovery of weaknesses in nine of the eighteen chapters of the Conduct of Operations order, including weaknesses in equipment and piping labeling, procedure use, control of activity aids, Personal Protective Equipment posting, logkeeping, and training.
- ID: One FR at the Advanced Test Reactor (ATR) Complex made a lateral transfer to perform Safety System Oversight at the same facility.

NATIONAL NUCLEAR SECURITY ADMINISTRATION

Facility Representative Program Performance Indicators (2QCY2009)

<u>Field or Ops Office *</u>	<u>Staffing Analysis</u>	<u>FTEs</u>	<u>Actual Staffing</u>	<u>% Staffing</u>	<u>Attrition</u>	<u>% Core Qualified</u>	<u>% Fully Qualified</u>	<u>% Field Time **</u>	<u>% Oversight Time ***</u>
LASO	14	14	13	93	0	62	46	48	71
LSO	10	10	7	70	0	100	100	44	68
NSO	9	9	8	89	1	88	75	46	68
PXSO	10	10	10	100	0	100	80	43	68
SRSO	4	4	4	100	0	100	75	51	80
SSO	11	11	7	64	1	100	100	40	81
YSO	12	11	11	92	0	91	91	47	70
NNSA Totals	70	69	60	86	2	89	78	46	71
DOE GOALS	-	-	-	100	-	-	>80	>40	>65

*** Field or Ops Office Key**

LASO = Los Alamos Site Office; LSO = Livermore Site Office; NSO = Nevada Site Office; PXSO = Pantex Site Office; SRSO = Savannah River Site Office; SSO = Sandia Site Office; YSO = Y-12 Site Office

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*** % Oversight Time includes % Field Time

NNSA Facility Representative (FR) Highlights:

- LASO: An FR identified a potential inadequacy with the TA-55 TSRs which allows for minor procedures revisions to be made prior to the performance of a USQ screening/determination.
- LASO: An FR identified Findings in the following areas: improper storage of SNM in un-vented drums; incorrect procedure posted in Document Control; improper round sheet preparation and use; unsatisfactory hoisting/lifting equipment; improper use of standing orders; and failure to perform required ladder inspections.
- LASO: An FR performed a SAC Assessment at TA-55 covering transient combustible TSR/SAC requirements.
- LASO: An FR performed an in-depth evaluation of bagout operations in CMR to determine the trend in radiological contamination issues.
- LASO: An FR shadowed LANL Conduct of Operations and Conduct of Maintenance implementation assessments at the Radioactive Assay Nondestructive Test (RANT) facility.
- LASO: An FR wrote an attachment A noting that the RLWTF Authorization Agreement was no longer valid due to re-categorization from a HC-2 to a HC-3 nuclear facility. This led to the deletion of the authorization agreement for the facility.
- LSO: An FR identified that two contractor personnel did not perform a whole body survey prior to exiting a radiological buffer area, a required by the posting.
- LSO: An FR participated as an observer on the contractor incident analysis team that reviewed the Building 695 glovebox over-pressurization event.

- LSO: An FR served as a member of a maintenance assessment team that assessed the maintenance program for the Radioactive and Hazardous Waste Management facilities.
- LSO: During observation of a diagnostic operation of a laser welder, an FR identified that a pressure relief device inspection was overdue.
- LSO: During observation of a punch press operation, an FR identified that two contractor employees were not current on their training. In addition, the FR identified that an annual survey of the ventilation hood was not completed.
- LSO: LSO FRs participated in the functional area reviews of DOE O 5480.19, Chapters 1, 2, and 18, resulting in identification of a weakness in the contractor's implementation of equipment and piping labeling program.
- LSO: Two NNSA Future Leaders Program candidates arrived at LSO, and fill two of the three FR vacancies.
- LSO: While observing the contractor perform troubleshooting activities of the Building 331 stack monitor bubbler system, an FR identified that this activity was not authorized through the work control process. In addition, it was identified that the modifications made to this equipment important to safety did not go through a USQ process.
- NSO: NSO hosted the 2009 DOE FR Workshop and several FRs supported the workshop activities, including a tour of the Criticality Experiment Facility.
- NSO: Regarding staffing changes, the FR Group Leader accepted a detail transfer to a position outside of the FR group. The detail is expected to become a permanent transfer once ratified by the Executive Resources Board. The DAF FR transferred to the Pantex Site Office. The DAF FR position has been temporarily filled through a matrix assignment. The Group Leader position remains vacant and is being advertised to be filled.
- NSO: The DAF/CEF FR participated in beneficial occupancy walkthroughs at the completion of CEF construction and identified critical punch list items.
- NSO: The DAF/CEF FR reviewed the DAF/CEF Con Ops Matrix and submitted valuable improvement recommendations prior to its approval.
- NSO: The Energy Physics FR performed the duties of the Nevada Site Office representative in the Emergency Management Center for a Full Participation Emergency Management Exercise.
- NSO: The High Energy Physics FR headed up a Nevada Site Office Conduct of Operations Management Self-Assessment Team.
- PXS0: A Lead FR has been detailed into the position of Acting Assistant Manager for Oversight and Assessment for the Pantex Site Office.
- PXS0: FRs supported two weapons program readiness assessments.
- SRSO: An FR determined that the work package requirement for a HEPA filtered vacuuming system had not been implemented during a grinding operation in a contamination area and that inadequate personal protective equipment had been used by standby personnel in the room. The FR photographed conditions in the room and used the photographs to brief both the contractor and SRSO management to make them aware of the unsatisfactory condition of the room and the inadequacy of the controls used to control the dust. As a result, the contractor rewrote the procedures and work package to address concerns and to include adequate controls. The FR followed up with extensive coverage when work resumed ensuring it was performed correctly.

- SSO: Attrition for this reporting period was one as an FR received a promotion to the position of Deputy Assistant Manager for Facility Operations.
- SSO: Nuclear Facility (Annular Core Research Reactor, Sandia Pulsed Reactor Facility, and Gamma Irradiation Facility) FRs participated on the SSO Independent Validation of The Implementation of Specific Administrative Controls.
- SSO: The Annular Core Research Reactor FR completed a surveillance documenting satisfactory completion of the Technical Safety Requirements annual surveillance requirements. This included trending against the prior year's calibration results and assessment of results including procedure performance.
- SSO: The Annular Core Research Reactor FR observed testing of new Large Cadmium detectors procured for installation into the Plant Protection System.
- SSO: The Sandia Pulsed Reactor Facility (SPRF) FR completed a detailed observation report of the SPRF 7% Critical Experiments. This included an executive summary, a narrative of the load-to-delayed critical with photographs documenting the reactor core loading to 1148 fuel elements, data and graphs of the inverse multiplication determination and estimated critical loading, and measured dose rates of the core assembly.
- SSO: The Sandia Pulsed Reactor Facility FR conducted the SSO Facility Operations Sandia Pulsed Reactor Facility Critical Experiments Restart Oversight Plan the week of May 11, 2009. This oversight plan documented satisfactory restart of the SPRF Critical Experiments during conduct of the initial 7% Critical Experiment. This included prerequisites and initial conditions verification, criticality safety requirements observation during loading 1148 fuel elements, and conducting independent estimated critical load calculations to determine incremental fuel loads.
- YSO: An FR identified that out-of-date HEPA Filters were in use in the Enriched Uranium Processing Facility. Process equipment was operated in violation of the engineering compensatory measure on expired HEPA filters. Continuing to use old filtration equipment without performing periodic maintenance could lead to failure, allowing the uncontrolled spread of contamination, personnel exposures and costly area equipment decontamination efforts.
- YSO: An FR overseeing waste mitigation operations recognized that the procedure being used to mix pyrophoric depleted uranium machining fines with concrete was not being followed. The FR ensured that the prime contractor clarified the expectations for procedural compliance with this subcontractor and other subcontractors working on ARRA related work.
- YSO: An FR provided oversight of a Contractor Operational Readiness Review (ORR) and led the subsequent Readiness Verification Review, in order to ensure the contractor followed its readiness process prior to bringing in a DOE/NNSA ORR Team.

OFFICE OF SCIENCE

Facility Representative Program Performance Indicators (2QCY2009)

<u>Field or Ops Office *</u>	<u>Staffing Analysis</u>	<u>FTEs</u>	<u>Actual Staffing</u>	<u>% Staffing</u>	<u>Attrition</u>	<u>% Core Qualified</u>	<u>% Fully Qualified</u>	<u>% Field Time **</u>	<u>% Oversight Time ***</u>
AMES	1	1	1	100	0	100	100	23	80
ASO	5	5	4	80	0	100	100	26	80
BHSO	4	4	4	100	0	100	75	41	80
FSO	2	2	2	100	0	50	50	47	76
OR	5	5	5	100	0	80	80	40	76
PNSO	3	3	3	100	0	100	100	42	75
SC Totals	20	20	19	95	0	89	84	37	78
DOE GOALS	-	-	-	100	-	-	>80	>40	>65

*** Field or Ops Office Key**

AMES = Ames Site Office; ASO = Argonne Site Office; BHSO = Brookhaven Site Office; FSO = Fermi Site Office; OR = Oak Ridge Office; PNSO = Pacific Northwest Site Office

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*** % Oversight Time includes % Field Time

SC Facility Representative (FR) Highlights:

- BHSO: FRs completed a site-wide compressed gas surveillance which identified 20 Findings.
- BHSO: FRs participated in an NSLS-II Project Status Review.
- BHSO: One Interim Qualified FR is scheduled to become Fully Qualified in early August 2009. This action will increase the Fully Qualified FR level to 100%.
- FSO: Core Qualification and familiarization with assigned organizations, facilities, and staff is underway for the FR who started in March 2009.
- FSO: Core Qualification is underway for the FR who started in March 2009.
- FSO: FRs participated in a follow-up to the March 2009 Office of Science Accelerator Safety Review.
- FSO: FRs participated in an FSO/ Fermilab Safety Documentation Working Group.
- FSO: FRs participated in the Fermilab Accelerator Maintenance Shutdown planning and oversight.
- OR: A coordinated assessment was conducted of four chapters of DOE Order 5480.19, Conduct of Operations, at the ORNL nuclear facilities and the SNS. This assessment was completed jointly by the FRs, and an overall assessment report was prepared.
- OR: During this reporting period, 74 FR surveillances were conducted and documented in the ORION tracking system. Seven of these walkthroughs were conducted jointly with ES&H subject matter experts.

- PNSO: An FR completed an assignment to the Safety Basis Review Team reviewing the upgraded DSA/TSRs for the Hanford 325 Building. The new safety basis was approved in June 2009.
- PNSO: An FR evaluated the Hanford 325 Building facility table top drill, and closed outstanding facility emergency preparedness issues.
- PNSO: An FR followed contractor response to the spill of molten glass in a leased facility laboratory. Work planning, protective clothing, and emergency response issues were all present in the event. Long-term corrective actions are awaiting completion of formal causal analysis.
- PNSO: An FR identified issues with upgraded Hanford 325 Building DSA/TSRs, and worked with review team to resolve the issues.
- PNSO: Two FRs teamed to complete a surveillance on the movement to and use of radiological sources at the Hanford HAMMER facility (offsite from Laboratory). No non-compliances existed, but the surveillance identified that: galling of the closure ring threaded lug might compromise the shipping container's integrity, the torque wrench needed to be verified prior to use, and the packaging procedure should completely describe the closure process being performed.
- PNSO: While touring the Hanford 331 Building, an FR observed researcher actions that were inconsistent with the contractor's hazardous energy control process. The FR discussed his observations with the contractor's subject matter expert. Based on these discussions and the contractor's follow-up, the contractor determined that the Hazardous Energy Control process was not followed and reported this event as an ORPS reportable occurrence.