

ISSUES MANAGEMENT PROCEDURE

1.0 PURPOSE

This procedure defines the Jefferson Laboratory (JLab) process for ensuring the prompt and effective identification, reporting, correction, closure, tracking, and trending of significant issues. This includes the initiation, disposition, completion, documentation, and closure of issues in the Corrective Action Tracking System (CATS).

Issue management is an important tool for continuous improvement. Issues that can affect JLab's performance arise from many different sources: planned and responsive self-assessments, incident critiques and investigations, items identified during inspections or normal oversight of daily activities, externally identified issues, and employee concerns.

The effective resolution of issues requires a formal process to assure that issues are identified and captured, evaluated for scope and significance, and the formulation and execution of appropriate corrective actions is conducted. Issues must be tracked to assure corrective actions are completed and to assess the effectiveness of those actions; they must be trended to identify both positive and adverse trends. The continuous improvement loop must then be closed by appropriate communication of lessons learned.

By facilitating identification of issues and management of corrective actions this procedure addresses requirements of the JSA/DOE contract. DOE O 226.1 requires that contractor assurance systems include "issues management, including causal analysis, identification of corrective actions and recurrence controls, corrective action tracking and monitoring, closure of corrective actions and verification of effectiveness, and trend analysis."

2.0 SCOPE

This procedure applies to all JLab activities and shall be used by JLab employees to identify issues such as personnel and facility events, occurrences, process deficiencies, other deficiencies, regulatory or procedural noncompliances, procedure inadequacies, and other issues of interest identified during the day-to-day work activities.

So that management can focus on the more significant issues, internally identified events of low significance may, but need not be entered and tracked within CATS.

3.0 RESPONSIBILITIES

3.1 Laboratory Director:

- 3.1.1 Determines the disposition and/or closure of issues when agreement cannot be reached at a lower management level.
- 3.1.2 Reviews and gives final approval to Significance Level 4 Action Plans, including Root Cause Analyses.
- 3.1.3 Reviews and gives final approval to
 - Closure of Significance Level 4 issues
 - Extensions beyond 120 days for Significance Level 3 issues, and
 - Extensions of any length for Significance Level 4 issues.

3.2 Associate Director for Safety:

- 3.2.1 Provides oversight for the Corrective Action Tracking System.
- 3.2.2 Ensures training to this procedure is provided to appropriate Lab personnel.
- 3.2.3 Determines the disposition of issues when the Quality Assurance and Continuous Improvement (QA/CI) Department Manager and cognizant manager cannot agree.
- 3.2.4 Reviews and gives final approval to
 - Closure of Significance Level 3 issues
 - Extensions beyond 120 days for Significance Level 2 issues
 - Extensions of less than 120 days for Significance Level 3 issues.
- 3.2.5 Reviews and recommends approval of
 - Closure of Significance Level 4 issues
 - Extensions beyond 120 days for Significance Level 3 issues, and
 - Extensions of any length for Significance Level 4 issues.
- 3.2.6 Ensures sufficient personnel trained in causal analysis are available at JLab.
- 3.2.7 Reviews and approves root cause or apparent cause analysis for Significance Level 3 or 4 issues.
- 3.2.8 Approves corrective actions requiring new site training.

3.3 Associate Directors and Officers (Cognizant AD):

- 3.3.1 Designate a CATS Expert and alternate within their division.
- 3.3.2 Designate personnel to be trained to execute causal analysis for the division.
- 3.3.3 Concur with, or reject issue and categorization assignments.
- 3.3.4 Approve corrective actions and associated completion dates.
- 3.3.5 Ensure actions assigned to their divisions are completed on schedule.
- 3.3.6 Assure the proposed disposition, corrective actions, preventive actions, and compensatory measures/actions are appropriate and address the issue, address the identified cause(s) (as applicable), and are coordinated with affected groups.
- 3.3.7 Document justification for rejecting issues assigned to their division for resolution and obtain QA/CI Manager concurrence with the justification.
- 3.3.8 Promote an environment and culture to support the identification and timely resolution of issues.
- 3.3.9 Review and give final approval to
 - Extensions beyond 120 days for Significance Level 1 issues
 - Extensions of less than 120 days for Significance Level 1 and 2 issues.
- 3.3.10 Review and recommend approval of
 - Closure of Significance Level 2, 3 and 4 issues
 - Extensions beyond 120 days for Significance Level 2, 3 and 4 issues

3.4 Department Heads/Group Leaders:

- 3.4.1 Encourage JLab employees to identify issues and proficiencies for continuous improvement.
- 3.4.2 Ensure issues are entered in CATS where required by this procedure.
- 3.4.3 Establish and take compensatory measures as required for issues assigned by their Associate Directors.
- 3.4.4 Determine needed corrective actions, assign due dates, ensure action implementation.
- 3.4.5 Ensure required causal analysis is conducted for Significance Level 3 and 4 issues.

- 3.4.6 Act as cognizant manager for any action assigned to the group/department.
- 3.4.7 As cognizant manager review and give final approval to
 - Extensions of any length for Significance Level 0 issues.
- 3.4.8 Review and recommend approval of
 - Closure of Significance Level 2, 3 and 4 issues
 - Extensions of any length for Significance Level 1, 2, 3 and 4 issues.

3.5 Quality Assurance and Continuous Improvement (QA/CI) Department Manager:

- 3.5.1 Provides overall coordination of CATS issues between JLab organizations and with external organizations.
- 3.5.2 Provides a list of sources of issues to be used in CATS entries. This facilitates trending (e.g., self-identified vs. externally identified or self revealing).
- 3.5.3 Ensures compliance via oversight of the issue management process.
- 3.5.4 Identifies adverse trends and emerging issues by reviewing CATS data and through cognizance of JLab activities. Reports results to senior management.
- 3.5.5 Assists personnel who are initiating, dispositioning, and/or closing actions in CATS.
- 3.5.6 Evaluates and dispositions rejections of issues, issue assignments, or categorizations.
- 3.5.7 Ensures documentation in CATS of issues as described in Section 4.0.
- 3.5.8 Approves and justifies “administrative” closures.
- 3.5.9 Reviews and gives final approval to
 - Closure of Significance Level 2 issues
- 3.5.10 Reviews and recommends approval of
 - Closure of Significance Level 3 and 4 issues
 - Extensions of any length for Significance Level 1, 2, 3, and 4 issues.
- 3.5.11 Verifies closure of corrective/preventive actions for Significance Level 3 and 4 issues. Verifies closure of CATS issues related to subcontractor activities and those identified by independent assessments regardless of Significance Level.
- 3.5.12 Validates closure of corrective/preventive actions for Significance Level 4 issues.
- 3.5.13 Distributes CATS Status Reports to JLab management and staff.
- 3.5.14 Assigns trend codes and cause codes for identified issues, as applicable.
- 3.5.15 Maintains issue closure evidence documentation, where required. (Note: Electronic versions of any required documentation are preferred, but hardcopy documentation will be maintained if required.)
- 3.5.16 Reviews validity of issue condition descriptions and cited requirements.
- 3.5.17 Performs Trend Analysis and distributes trend reports to JLab management.
- 3.5.18 Works with Division CATS Experts on issues related to their departments.

3.6 Division CATS Expert

- 3.6.1 Assists division personnel in initiating and updating CATS items.
- 3.6.2 Assists the cognizant AD and Action Owner(s) in coordinating the resolution of assigned issues.
- 3.6.3 Maintains and tracks status of issues and corrective/preventive actions assigned to the division.
- 3.6.4 Generates and processes the status updates and closure entries, as required.
- 3.6.5 Collects evidence documentation (where required) for corrective actions in conjunction with issue closure.

- 3.6.6 Assists the QA/CI in assigning trend codes and cause codes to issues if necessary.-
- 3.6.7 Coordinates requests for extensions of due dates for actions within the-division.

3.7 Action Owner

- 3.7.1 Completes assigned actions by established due dates.
- 3.7.2 Enters status updates into CATS as appropriate.
- 3.7.3 Performs initial verification of action closure and ensures appropriate closure evidence is provided, where required, to the division CATS Expert as part of the closure package.
- 3.7.4 Ensures that item is closed when corrective action is complete.
- 3.7.5 Closes Significance Level 0 issues.

3.8 JLab Personnel:

- 3.8.1 Identify issues as defined in section 5.0 to supervisor or appropriate EH&S Division staff for documentation in CATS.
- 3.8.2 Complete assigned corrective actions by established due dates.
- 3.8.3 Report completion of corrective actions to the Action Owner.

4.0 GENERAL PROCESS REQUIREMENTS AND ACTIVITIES

4.1 General Process Requirements (applicable to all category issues):

- 4.1.1 The individuals shown in parentheses are responsible to ensure the CATS entries are made (someone else may actually make the entries). These issues include those identified by:
 - Occurrence Reporting Program System (ORPS) events (EH&S Reporting Manager),
 - Reported potential Price Anderson Amendments Act (PAAA) noncompliances (PAAA Coordinator),
 - DOE Site Office (TJSO) Operational Awareness Review (OAR) findings and observations (QA/CI),
 - TJSO "Walkthrough" issues (Manager of area),
 - Other DOE reviews and assessments that document issues (QA/CI),
 - JSA audit and assessment findings/observations (QA/CI),
 - Other external independent audit and assessment findings/observations (QA/CI),

Internally identified issues like the following are entered into CATS if they are Significance Level 2 or higher:

- Internal Independent Assessment findings/observations (Lead Assessor),
- Internal Management Self Assessment findings/observations (cognizant AD),
- Safety inspection findings/observations, if appropriate, (Inspector), and
- Internal issues meeting the definition of "issue" not documented under other internal site programs (Supervisor, CATS Expert, QA/CI).

Internally identified issues with lower Significance Levels are entered into CATS at the discretion of cognizant management.

- 4.1.2 Other internally identified issues are documented, tracked, trended and corrected within the appropriate process/program (e.g., Facilities Management Work Order system). However, it may be determined at any time that the issue's significance also warrants the initiation of a CATS entry. Closure of such items will be documented in both systems.
- 4.1.3 During the process of initiating and dispositioning a CATS entry, it may be discovered that the condition is already described in another existing entry. In these cases or similar cases, the duplicate CATS entry may be "administratively" closed. It may be determined during trending of issues that several separate CATS entries are still open and exist for the issue. These existing entries may be "rolled up" into a single entry. The cognizant AD/CATS Expert brings the issue to the QA/CI to request the "administrative" closure. An "administrative" closure requires review and approval by the QA/CI Manager. The rationale supporting the closure and the QA/CI Manager's approval are documented in CATS.
- 4.1.4 As a result of PAAA review/evaluation of a CATS issue, a PAAA noncompliance report (DOE Noncompliance Tracking System) may be issued. In the cases of PAAA and ORPS reports, the CATS issue will contain a cross-reference to the PAAA or ORPS number and will remain open until the PAAA or ORPS report is closed. The QA/CI will close the CATS issue.
- 4.1.5 Prior to the assignment of any action or responsibility to an Action Owner, the person documenting the item in CATS shall obtain the acceptance of that item, including its target completion date, from the prospective Action Owner.
- 4.1.6 All corrective actions should be completed within 120 days of the CATS issue date. The goal is to perform a thorough and accurate investigation of the issue, determine appropriate corrective/preventive actions and develop a realistic schedule for completion. Any corrective action completion date that extends beyond 120 days, whether the initial action date selected for completion, or due to an extension, will require final approval as follows: Significance Level 3 and 4 - Director, Significance Level 2 - AD for Safety, Significance Level 1 - cognizant AD, Significance Level 0 - cognizant manager.
- 4.1.7 All corrective action or preventive action extensions less than and equal to 120 days of the issue date will require final approval as follows: Significance Level 4 - Director, Significance Level 3 - AD for Safety, Significance Levels 1 and 2 - cognizant AD, Significance Level 0 - cognizant manager.
- 4.1.8 Documentation of all Significance Level 3 and 4 CATS issues and any resulting Action Plans shall be maintained in the QA/CI.

4.2 Issue Identification & Categorization

- 4.2.1 Issues identified for entry into CATS must clearly describe what the specific issue is, why it requires addressing or correcting, and what action is required. Actions must be specific – they must be discrete actions that can be understood and carried out. Entries specifying actions such as "requires improvement" are *not* acceptable.

- 4.2.2 Issues are entered into CATS by individuals trained and authorized to do so. These include the division CATS Experts and the QA/CI. ADs may designate others in their divisions to be trained and authorized.
- 4.2.3 The person documenting the issue, in consultation with the QA/CI if necessary, shall assign a Significance Level to the issue. The categorization is done based on a risk-based approach. Significance Level 1, 2, 3, or 4 will be assigned using the guidelines in Attachment A.
- 4.2.4 The CATS database will also be used to track administrative actions associated with ORPS and PAAA related issues to ensure that the administrative actions are completed in a timely manner to support the ORPS and PAAA updates/reports. For example, the need to complete a Root Cause Analysis and submit the necessary Root Cause and Action Plan information to QA/CI within 30 days for an ORPS related issue would be tracked in the CATS Database.
- 4.2.5 Notification of CATS issue entries is automatically made electronically to Action Owners and other personnel designated by the person entering the issue.
- 4.2.6 Because the Action Owner accepted responsibility for the action before it was entered (see 4.1.5), it should rarely happen that an Owner rejects an item to which he has been assigned. However if this should happen, the Owner should reject the assignment within 7 calendar days of the issue date. The Owner documents the justification for the rejection in CATS and contacts the QA/CI Manager.
- 4.3 Corrective Action Development and Establishment of Action Due Dates
- 4.3.1 The Action Owner coordinates the development of corrective actions or completion of the causal analysis for CATS issues, as required.
- 4.3.2 The level of cause determination is based on the Significance Level (1, 2, 3 or 4) and source of the issue. The causal analysis requirements are as follows:
- a) Root Cause Analysis (RCA) is required for:
 - Significance Level 4 issues and selected Significance Level 3 issues (as determined by the cognizant AD or the AD for Safety);
 - Selected Occurrence Reports (ORPS) (as required by ORPS or determined by the AD for Safety) and
 - PAAA related issues reported via the Nonconformance Tracking System (NTS).
 - b) Apparent Cause Analysis – Apparent Cause Analysis is required for Significance Level 3 issues (not covered by an RCA) and for selected Occurrence Reports (ORPS) (as required by ORPS or determined by the AD for Safety)
- 4.3.3 Personnel trained in the relevant analysis techniques perform causal analyses.
- 4.3.4 For Significance Level 3 and 4 issues, participating causal analysis personnel, the assigned CATS Expert, and the cognizant AD determine the

corrective/preventive actions necessary to resolve the issue, the Action Owner(s) for these actions, and scheduled completion dates. Corrective/preventive actions shall address the cause(s) identified and should be scheduled to be completed within 120 days of the CATS issue date. The causal analysis report and any subsequent Corrective Action Plan (CAP) are generated, reviewed, and approved in accordance with EH&S Manual Chapter 5200 or 5300 as appropriate.

- 4.3.5 For Significance Level 2 issues, the Action Owner determines the corrective actions necessary to resolve the issue. Corrective actions should be scheduled to be complete within 120 days from the CATS issue date. The determination of corrective action shall be made within 14 calendar days of the CATS issue date and documented in CATS if different from the corrective action described in the originating entry.
- 4.3.6 For Significance Level 0 and 1 issues, the Action Owner determines any corrective actions necessary. If no actions are determined to be necessary, the justification for no action required is documented in the CATS entry if cognizant management opts to document these issues in CATS (see 4.1.1). These determinations shall be made within 14 days.
- 4.3.7 The AD for Safety will review and approve corrective/preventive actions involving new site training.

4.4 Action Completion, Issue Closure and Verification

- 4.4.1 If an assigned Action Owner is unable to meet an established scheduled completion date for an assigned corrective action, an extension request shall be made to the QA/CI by the cognizant manager. The extension request provides justification as to why the extension is needed, along with a proposed new scheduled completion date. This request may be made by entering a status update in CATS and checking the box to send an update notification to the Manager of QA/CI. See steps 4.1.6 and 4.1.7 for extension approval requirements.
- 4.4.2 QA/CI or CATS Expert enters new scheduled due dates for actions upon receipt of the properly documented and approved extension requests.
- 4.4.3 As Action Owners complete their assigned actions and document those completions in CATS, they shall also gather the documentation needed to support closure. Once an action is complete and the necessary documentation has been gathered, the CATS entry can be closed as follows:
 - 4.4.3.1 Significance Level 0: The Action Owner documents that the corrective action is complete and closes the issue.
 - 4.4.3.2 Significance Level 1: The Action Owner documents that the corrective action is complete and forwards the CATS update electronically to the Evaluator for closure.
 - 4.4.3.3 Significance Level 2: The Action Owner documents that the corrective is complete and forwards the CATS update to the cognizant manager. The cognizant manager updates CATS with his approval and forwards

the update to the QA/CI Manager. The QA/CI Manager reviews the documentation and closes the issue if appropriate.

4.4.3.4 Significance Level 3: The Action Owner documents that the corrective is complete and forwards the CATS update to the cognizant manager. The cognizant manager updates CATS with his approval and forwards the update to the cognizant AD and the QA/CI Manager. The cognizant AD reviews the documentation, consults with the AD for Safety and the QA/CI Manager if appropriate, and notifies QA/CI that the issue can be closed. QA/CI documents in CATS the cognizant AD's approval of closure and then closes the item.

4.4.3.5 Significance Level 4: The Action Owner documents that the corrective is complete and forwards the CATS update to the cognizant manager. The cognizant manager updates CATS with his approval and forwards the update to the cognizant AD and the QA/CI Manager. The cognizant AD reviews the documentation, consults with the AD for Safety and with the QA/CI Manager if appropriate, and recommends to the Lab Director that the issue be closed. The Lab Director reviews the documentations with the cognizant AD and notifies QA/CI that the issue can be closed. QA/CI documents in CATS the Director's approval of closure and then closes the item.

4.5 Quality Assurance Verification & Validation

4.5.1. The QA/CI Manager shall validate all Significance Level 4 issue closures. The QA/CI Manager may also select Significance Level 2 and 3 issues for QA/CI validation. The QA/CI Manager schedules CATS issue validation. QA/CI validations are performed as scheduled and recorded within CATS.

4.5.2. QA/CI will perform a verification for all Significance Level 3 and 4 issue closures and all subcontractor-related Significance Level 2 issue closures. The QA/CI Manager may also select other Significance Level 2 issues for QA/CI verification. QA/CI verification should be completed within 30 days of issue closure and documented in CATS. The intent of QA verification is to provide timely, independent feedback to the cognizant AD's organization regarding the adequacy of completed corrective/preventive actions, issue closures, and evidence documentation.

4.5.3. If QA verification/validation determines the actions taken were not effective in correcting the original issue, the QA/CI Manager informs the cognizant AD and AD for Safety. Based on the discussion with the AD for Safety and cognizant AD, QA/CI may either initiate a new CATS entry, or revise and reopen the existing CATS entry for further disposition and processing.

4.5.4. The QA/CI Manager screens all Significance Level 3 and 4 issues to determine if an extent of condition review is needed to assure that similar issues do not exist across the lab.

4.6 CATS Issue Tracking, Trending and Status

- 4.6.1 The status of each issue is documented in the CATS database. Status updates will be used extensively to keep status current and notify interested parties.
- 4.6.2 QA/CI develops, using the CATS database, a weekly status report of open issues and distributes this report to the Director's Safety Council, which decides its content and format.
- 4.6.3 QA/CI also produces special tracking or trending reports based on the CATS database as requested by the Director's Safety Council.
- 4.6.4 The Division CATS Experts prepare and distribute tailored, specific reports as requested by Division Management.

5.0 DEFINITIONS:

- 5.1 **Action** - Can be:
Corrective Action (C/A) - An activity that will restore a service, item, component or process to a state of acceptable compliance with procedure or regulatory requirements; or Preventive Action (P/A) - An activity addressing the root/apparent cause of an issue, event or adverse trend, which will result in either the prevention or a significant reduction in the likelihood of the same problem occurring again.
- 5.2 **Action Owner** (also **Owner**): The individual assigned responsibility for completion of a corrective/preventive action identified in a CATS entry.
- 5.3 **Administrative Closure**: Closing/canceling one or more issues based on: 1) The issue is not valid; 2) The issue is already captured in an existing and open CATS entry; or 3) Several separate open issues exist for the same item, and a single CATS entry is written/revised to consolidate the similar issues into a single entry to perform further evaluation and disposition of the problem through causal analysis.
- 5.4 **Apparent Cause Analysis**: A cause derived from a structured method of investigation that provides the issue action owner with substantial assurance that the weakness that resulted in the noncompliance is understood. The person performing Apparent Cause Analysis must be appropriately trained.
- 5.5 **CATS Database**: This pertains to the computer program and database that is the overall source of a set of "issues, findings, noncompliances", etc. For instance, an independent assessment report would constitute the overall "event" in the database and would be assigned a CATS Event Number (*e.g.*, IA-2005-87). The subsequent issues included in the independent assessment would each be documented under that entry and each assigned a CATS number based on the overall "event" number (*e.g.*, IA-2005-87-01, IA-2005-87-02, IA-2005-87-03 if three findings were documented in the independent assessment report).
- 5.6 **CATS Entry**: The electronic form (see Attachment C) used to document issues identified by JLab personnel, or external sources and agencies (*e.g.* DOE, JSA, TJSO Rep. *etc.*) that demonstrate a failure to obtain desired results or comply with specifications, drawings, procedures, and work plans. This form also documents and tracks the actions and responsibilities for correction, closure, verification, and validation of an issue as applicable.

- 5.7 Cognizant AD:** The use of the title “cognizant AD” within this procedure refers to the Manager of a Division or Office containing the affected group or organization. This AD has the overall ownership of the issue, but may assign other managers or staff within the department to perform responsibilities on his/her behalf. The cognizant AD remains responsible for the issue’s ultimate correction and closure.
- 5.8 Cognizant Manager:** The use of the title "cognizant manager" within this procedure refers to the department manager or group head of the affected organizational element. This manager is responsible for ensuring that corrective/preventive actions are effectively implemented.
- 5.9 Compensatory Measures:** A short-term activity that will reduce the risk and/or mitigate the consequences associated with an issue until an action plan can be developed and implemented. Some examples include issuing a Stop Work Order, posting an area “no entry allowed”, restoring radiological control boundaries, and lockout/tag-out or removal of defective equipment.
- 5.10 Finding:** An issue that represents a non-compliance with a *requirement*.
- 5.11 Issue:** An activity such as personnel and facility events, occurrences, process deficiencies, other deficiencies, regulatory or procedural noncompliances, procedure inadequacies, and other issues identified during the day-to-day work. Additionally, an item, service, part, component or process that is not functioning correctly (out of compliance or not in accordance with applicable specifications). Examples include, but are not limited to, physical defects; test failures; incorrect or incomplete documentation; and deviations from prescribed instructions, procedures or drawings, *etc.*
- 5.12 Root Cause Analysis:** A formal structured process for defining the cause of an issue, event or adverse trend. The person conducting a Root Cause Analysis must be appropriately trained in the RCA methods used.
- 5.13 Validation:** The QA activity of reviewing and assessing the effectiveness of completed corrective and preventive actions.
- 5.14 Verification:** The QA activity of reviewing completed actions to ensure they were adequately completed.

6.0 ATTACHMENTS

- Attachment A Guidelines for Significance Code Categories for a CATS Entry
Attachment B Significance Code - Authority Summary Table
Attachment C CATS Training

ATTACHMENT A

GUIDELINES FOR ASSIGNING SIGNIFICANCE LEVELS TO CATS ENTRIES

Significance Levels for safety-related issues will be assigned using the methodology of EH&S Manual Chapter 3210. For these issues Significance Level equals Risk Code. Significance Levels for other issues will be assigned using the guidelines described below. Note that assigning Significance Levels is not an exact science. The evaluator should use his/her best professional judgment and, if in doubt, should discuss with the QA/CI Manager so that Significance Level assignments remain consistent. In any case all Significance Level 3 and 4 assignments will be made in consultation with the QA/CI Manager and AD for Safety.

Significance Level 4

Safety Related: High, an issue with a Risk Code 4. A situation posing imminent danger to life, property, or environment. This is a mandatory Stop-Work situation. See EH&S Manual Chapter 3210.

Program Related: A significant condition that is a result of a violation of the Work Smart Standards or any significant programmatic breakdown in an ISM function.

1. Any event /activity/issue resulting in a worker fatality.
2. Any occupational incident that results in inpatient hospitalization of 3 or more personnel.
3. Any near miss that could, with significant likelihood, have resulted in a fatality or serious injury to multiple personnel.
4. Any incident, issue, event or action that requires mandatory reporting to a regulatory agency, i.e. DOE, DOT, RCRA, EPA, *etc.* (*e.g.* any spill that exceeds the reportable limit for that particular agent).
5. Deliberate acts of sabotage, or misconduct.
6. Site contamination/radiation exposure to an employee or the public above a federal limit.
7. Repetitive events that have been reported as Significance Level 3 issues, and are not being adequately resolved.

Significance Level 3

Safety Related: Medium, an issue with Risk Code 3. Abatement action is required as soon as possible, normally within one working day. Extra supervisory attention is required in the interim. See EH&S Manual Chapter 3210.

Program Related: Conditions that do not meet the criteria for Significance Level 4, but that merit an Apparent Cause Analysis and remedial and/or interim action for issues that are a violation of the work smart standards.

1. Any event /activity/issue resulting in a worker injury that is classified as a lost time (days away) accident.
2. Any near miss that could, with significant likelihood, have resulted in a lost time accident.
3. A site fire due to JLab activities that requires assistance from off-site (non-JLab) emergency response or which activates a sprinkler system.
4. Adverse trends that indicate the potential for failure of an element of the ISM program.
5. Site contamination/radiation exposure to an employee or the public above the JLab established administrative limit, but below the federal limit.
6. Dropped load or electrical incident/event that has the potential to seriously injure employees.
7. Repetitive events that have been reported as Significance Level 2 issues, and are not being adequately resolved.

ATTACHMENT A

Significance Level 2

Safety Related: Low, an issue with Risk Code 2. Abatement actions can usually await normal preventive maintenance and can be managed with customary supervisory efforts and administrative procedures. See EH&S Manual Chapter 3210.

Program Related: A significance level corresponding to a minor condition to quality for which no further formal evaluation or causal analysis determination is required, but that does require correction in a timely manner.

1. Procedural violations that do not cause reporting of the incident to regulatory agencies.
2. Repetitive low-level events that have been reported as Significance Level 1 issues, and are not being adequately resolved.
3. Items/issues that require assistance from another organization to correct.
4. Any incident, event or activity that causes an unexpected release to the JLab site of small quantities of an agent, material, gases, chemical, etc. that would not otherwise be reportable.
5. Repeated failure to follow a work control document sequenced steps.

Significance Level 1

Safety Related: Minor, an issue with Risk Code 1. Situation does not justify abatement action except as part of other planned improvements. Also includes "quick fix" items that are not part of a pattern of minor safety issues.

Program Related: A condition that identifies a simple broke-fix issue, or recommendation, process improvement or observation (weakness) that, if left unresolved, may develop into a more significant issue. A Significance Level 1 is the most minor of issues and may or may not (trend only) require correction.

1. Minor procedural violations that do not cause a negative impact to safety, or require reporting to an external agency based on the items individual merit.
2. Minor safe work practice violations that do not result in injury or reportability issues, and do not represent a realistic "risk" to an employee.
3. Items/issues that can be corrected without the assistance of another organization.
4. Work control document instruction violations where no ES&H impact exists, nor is a modification required of the work control documents.
5. RWP violations that do not cause contamination or exposure related issues
6. Items where no specific procedure or regulation has been violated, but which warrant documenting and trending for potential future action.

Significance Level 1 issues if identified internally (*i.e.*, by JLab staff) typically will be documented and tracked in CATS at the discretion of management.

Significance Level 0

Used for issues that do not rise to Significance Level 1, but which management wants to document for tracking or other reasons.

ATTACHMENT B

**Significance Level - Authority
Summary Table**

Significance Level	Significance Level Assigned by	Assignment of Responsibility & Date	Causal Analysis Required	Extension	Extension beyond 120 Days	Approval for Close	Verification by QA/CI Required	Validation by QA/CI Required
4	Evaluator with QA/CI	Director	Root Cause	Director	Director	Director	Y	Y
3	Evaluator with QA/CI	Cognizant AD	Apparent Cause	AD Safety	Director	Cognizant AD	Y	N
2	Evaluator if internal, QA/CI if external	Evaluator if internal, QA/CI if external	N	Cognizant AD	AD Safety	QA/CI	Y (if sub-contractor related)	N
1	Evaluator if internal, QA/CI if external	Evaluator if internal, QA/CI if external	N	Cognizant AD	Cognizant AD	Evaluator	N	N
0	Evaluator	Evaluator	N	Cognizant Manager	Cognizant Manager	Action Owner	N	N

Evaluator: inspector, auditor, assessor, etc.

QA/CI: Quality Assurance and Continuous Improvement Department

ATTACHMENT C

CATS TRAINING

Will link to training materials Mary Jo has developed and is putting on the web.