CPCCo
Central Plateau
Cleanup Company

One Focus · One Mission · One Hanford

Management Plan

CPCC-MP-RP-54981

Management of Radiological Assessments

Revision 0, Change 0

Published: 11/13/2023
Effective: 11/13/2023

Program: Radiological Protection Programs
Topic: Radiation Protection

Technical Authority: Slaugh, Don M
Functional Manager: Larson, Craig H

Use Type: Administrative

USQ Facility	USQ Review	Screener
Solid Waste Operations Complex	**Exclusion Reason:** *B.19*	
Canister Storage Building/Interim Storage Area	**Exclusion Reason:** *N/A per B-19*	
Central Plateau Surveillance and Maintenance	**Exclusion Reason:** *N/A per CPCC-PRO-NS-062 Appendix B-19*	
Waste Encapsulation Storage Facility	**Exclusion Reason:** *N/A per B-19*	
Transportation	**Exclusion Reason:** *N/A per Section 1.3*	
Capsule Storage Area	**Exclusion Reason:** *N/A per B-19*	
105 KW Facility	**Exclusion Reason:** *N/A per B-19*	
324 Building	**Exclusion Reason:** *N/A per B-19*	

JHA: Administrative
Periodic Review Due Date:11/13/2028
Publication Correction:11/16/2023
Rev. 0, Chg. 0

Change Summary

Description of Change

New management plan that describes the process for performing radiological assessments.

Publication correction (11/16/23) - Formatting update.

Management of Radiological Assessments

Published Date: 11/13/23 **Effective Date: 11/13/23**

1.0 INTRODUCTION

This management plan describes the process for performing radiation protection assessments of the Central Plateau Cleanup Company (CPCCo) Radiation Protection Program (RPP). The radiation protection self-assessment process is based upon the methods described in CPCC-PRO-QA-40090, *Self Assessment*.

1.1 Scope

This management plan applies to CPCCo Radiation Protection (RP) Program personnel in evaluation of activities defined by the CPCCo Radiological Control (RadCon) manual. Responsibility for implementing the radiological assessment process rests with the CPCCo Radiological Protection Manager (RPM).

The radiological program assessments are organized in a three-tier format:

1. Self Assessments are performed by project(s) focusing on how they are implementing the program at the project level and may use the functional areas provided in Appendix A.

2. Program level assessments are performed by the radiological assessment Company Technical Authority (CTA) following:

   a. HNF-22632, *Process Description for Safety Management Program Implementation Verification*, Attachment A, Chapter 7.0 – "Radiation Protection."

   b. 324-PRO-OP-53637, *Key Elements Assessment Plan for Safety Management Programs*, Appendix A, Item A.10. These LOIs (except for A.10.7, A.10.9, and A.10.10) are completed and combined with the LOIs in HNF-22632.

3. Triennial audits or surveillances of implementation of the 10 CFR 835, *Occupational Radiation Protection Program* rule are conducted by individuals who are organizationally independent from the organization responsible for developing the RPP. CPCC-PRO-QA-9769, *Surveillance Process*, outlines guidance through Appendix B, "Expectations for Performing 10 CFR 835, *Occupational Radiation Protection*, Triennial Assessment Activities." Radiation protection triennial surveillances are performed in accordance with CPCC-PRO-QA-9769.

2.0 ROLES AND RESPONSIBILITIES

NOTE:
- *Radiological assessments may also be performed as directed by Project Radiological Control Managers (PRCM).*
- *Assessment Project Points of Contacts (PPOC) may be assigned as team members as appropriate.*
- *Completion of CPCCo Assessment Fundamentals, CBT course 604010 is required for those participating in or leading assessments. The responsibility rests with the sponsoring manager to ensure training is completed prior to conducting assessments.*

2.1 Assessment Lead

The Assessment Lead is responsible for recording information in the Integrated Contractor Assurance System (iCAS) as outlined by CPCC-PRO-QA-40090.

2.2 Radiological Assessment Company Technical Authority (CTA)

The Radiological Assessment CTA works with the Project Assessment Coordinator (PAC) to assist in scheduling, planning, reporting, reviewing, and approving of assessments for CPCCo.

2.3 Radiation Protection Manager (RPM)

The RPM may be assigned the role of Sponsoring Manager or Responsible Manager ultimately responsible for the performance (i.e., planning, conducting, evaluating, and reporting) and completion of the assessment activities.

2.4 Interpretive Authority (IA)

The IA tracks and trends the Radiological Protection trend codes identified in iCAS and sends a report to the RPM. Adverse trends may be used as part of the criteria for lines of inquiry used in assessments. Interpretive Authority responsibilities may be assigned to another at the discretion of the RPM.

2.5 Executive Safety Review Board (ESRB)

The ESRB approves, oversees, and monitors the effectiveness of programs and processes associated with the Safety Management Programs (SMP), Quality Assurance (QA) Program, and the Price-Anderson Amendment Act (PAAA) Program.

3.0 PROGRAMMATIC INTERFACES

iCAS provides the mechanism to document the scheduling, planning, reporting, reviewing, and approving of assessments for CPCCo. Also managed within the iCAS application suite is the documentation of the subsequent corrective action management process (generating and approving Action Requests and Condition Reports for issues identified during the assessment process). Completed assessments and supporting information are uploaded to the Integrated Document Management System (IDMS), and identified issues are moved into the iCAS Issues Management module. The final report will be distributed to those placed in the Distribution List inside the iCAS Assessment Module or manually distributed by the assessor.

4.0 DELIVERABLES

Deliverables are determined by the Assessment Schedule. This includes self assessments by the project(s) as scheduled by the CTA.

Internal audits of the Radiation Protection Program, including examination of program content and implementation, shall be conducted through a process that ensures all functional elements are reviewed at least every 36 months.

Lines of Inquiry (LOIs) are generated using several factors, such as: current trends, LOIs from the QA assessment toolbox, past radiological assessment LOIs, and current procedural requirements.

5.0 RECORD IDENTIFICATION

None

6.0 SOURCES

6.1 Requirements

CPCC-00175, *Central Plateau Cleanup Company Radiological Control Manual*

Article 131, *Assessments*

Article 712.3.b, *Records Management Program*

6.2 Commitments

DOE G 441.1-1C Section 3.2.3 and 3.3

6.3 References

10 CFR 835, *Occupational Radiation Protection Program*
324-PRO-OP-53637, *Key Elements Assessment Plan for Safety Management Programs*
CPCC-PRO-QA-40090, *Self Assessment*
CPCC-PRO-QA-9769, *Surveillance Process*
DOE-0343, *Hanford Site Stop Work*
HNF-11724, *Central Plateau Cleanup Company Safety Management Programs*
HNF-22632, *Process Description for Safety Management Program Implementation Verification*

6.4 Bases

CC-PRO-QA-40091, *Integrated Assessment Planning*
CP CPCC-PRO-QA-40099, *Management Observation Program*
CPCC-MP-QA-40092, *CPCCo Assessment Program Plan*
CPCC-PRO-QA-052, *Issues Management*
CPCC-PRO-QA-246, *Management Assessment*
CPCC-PRO-QA-9662, *Independent Assessment Process*
PRC-1204-PIR-0103, 10 CFR 835, *Triennial Assessment Protocols*

Appendix A - Applicable Radiation Protection Functional Areas

ALARA

Area/Personnel Dosimetry

Clearance of Personal Property

Contamination Control

Fixed/Portable Instrumentation

Internal Dosimetry

Posting/Labeling/RMAs

RadCon Emergency Preparedness

Radiation/Contamination Surveys

Radioactive Source Control

Radiological Access Control

Radiological Shipments

Radiological Training

Radiological Work Planning

Radiologically Controlled Vehicles

Records

Routine Surveillance

Tracking and Trending

Work Place Air Monitoring

Appendix B - Expectations for Performing 10 CFR 835, Occupational Radiation Protection, Triennial Assessment Activities

1. Preparation

Radiation protection triennial surveillances will be performed in accordance with CPCC-PRO-QA-9769, *Surveillance Process*. Triennial surveillances are conducted by individuals who are organizationally independent from the organization responsible for developing the RPP.

Each team member is expected to be prepared. The only preparatory activity expected from the assessed project is to provide a point of contact. It is the responsibility of each assessment team member to:

- Know and understand the scope of the assignment.
- Know and understand applicable requirements.
- Develop an assessment plan that includes a checklist consisting of Lines-of-Inquiry directly from the applicable 10 CFR 835 requirements and corresponding information in the CPCCo Radiation Protection Program (RPP), Policy and Commitment Basis, and the CPCCo Radiological Control Manual.
- Research related performance data through the review of Condition Reports, Occurrence Reports, assessment reports, etc.
- Ensure all facility access and training requirements are met.
- Perform and document requested required reading.

2. Conduct in Field

Assessment team members are expected to conduct themselves in a professional manner throughout the assessment. Attributes include:

- Work through and coordinate with the facility point of contact.
- Do not interrupt ongoing work activities (unless the condition threatens the immediate safety of individuals, processes, or facility).
- Focus on the specific assessment topic but do not ignore safety issues. Assessors have the responsibility to execute stop work authority when conditions warrant. [DOE-0343, *Hanford Site Stop Work*]
- Discuss potential issues with facility personnel when they are identified.
- Ensure appropriate management is aware of identified issues throughout the assessment (i.e., Project Radiological Control Manager and CPCCo (RPM)).
- Keep to the schedule but have the flexibility to accommodate changes in order to conduct inspections and/or observe specific evolutions applicable to the assessment topic. This is important to demonstrate the adequacy of depth and breadth of the assessment.

Appendix B – (Cont.)

- Interface with a sufficient number of individuals that have responsibilities for implementing the topic being assessed. This includes individuals that are outside of the radiological control organization.
- To the extent possible, have someone with you to answer any questions or to confirm your observations.

3. Collection of Evidence

Proper collection of sufficient evidence is essential to support the credibility of the assessment. Capture enough information so that a third-party reviewer will clearly understand the report content and breadth/depth of the overall assessment activity.

The preference for evidence is:

- Documentation (capture some metric type for information such as “reviewed 50 surveys covering the period 1/1/2018 through 4/15/2018”).
- Obtain copies of documentation (or examples) necessary to demonstrate any issue that is identified.
- Keep track of what was reviewed, individuals interviewed/contacted, inspections, and evolutions observed (date, location, time, etc.)
- Document information that uniquely identifies equipment, instruments, radioactive material (i.e., sources), etc.
- Direct Observations (work in progress or physical condition) to include date, location, time, etc.
- Interview (interviews are rarely sufficient as standalone evidence. Efforts should be made to verify information received through interviews by review of documentation or by direct observation).
- Obtain enough information to reach and support sound decisions and identification of issues or good practices.

4. Reporting Documentation

The main product of the assessment is the final report. To be successful, the following attributes are needed:

- Write the report in a format so that a third-party reviewer could easily understand the content and interpret the results. Make very apparent the direct correlation between each 10 CFR 835 requirement provided in the CPCCo RPP, supporting CPCCo Policy & Commitment Basis statement, and CPCCo Radiological Control Manual requirement that were assessed. This provides a clear demonstration on the depth and breadth of the assessment.
- Identify areas within the element (see above) that were NOT assessed due to schedule or unable to observe activity.
- The report should also include a summary statement of compliance, sufficient content to support the conclusion, and a clear listing of any identified issues with supporting narrative.

Appendix B – (Cont.)

- The report should include a completed checklist (see above) that contains narrative discussion on results and how the information was obtained (i.e., document review, interview, and/or observation/inspection).

Include tables and/or attachments that provide specific information on the number of documents reviewed, individuals contacted, inspections performed, and evolutions observed.