Quality Management Office

FY08 Business Plan

January 31, 2008

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Manager for Quality Management Office

1. General

This Business Plan covers the FY08 scope of work for the Quality Management Office, including supporting initiatives in the Deputy Director of Operations' Business Plan, Annual Laboratory Plan, PEMP, Management System reporting and ISM/Safety Improvement Project.

2. Organizational Goals and Objectives

The Quality Managment Office supports Brookhaven National Laboratory's primary mission in Advancing the Frontiers of Science and Technology and goal to develop and sustain world-class research and development programs (R&D) that serve the needs of the nation.

The QMO has three long-term strategic goals which are aligned with the Laboratory's strategic focus areas and goals:

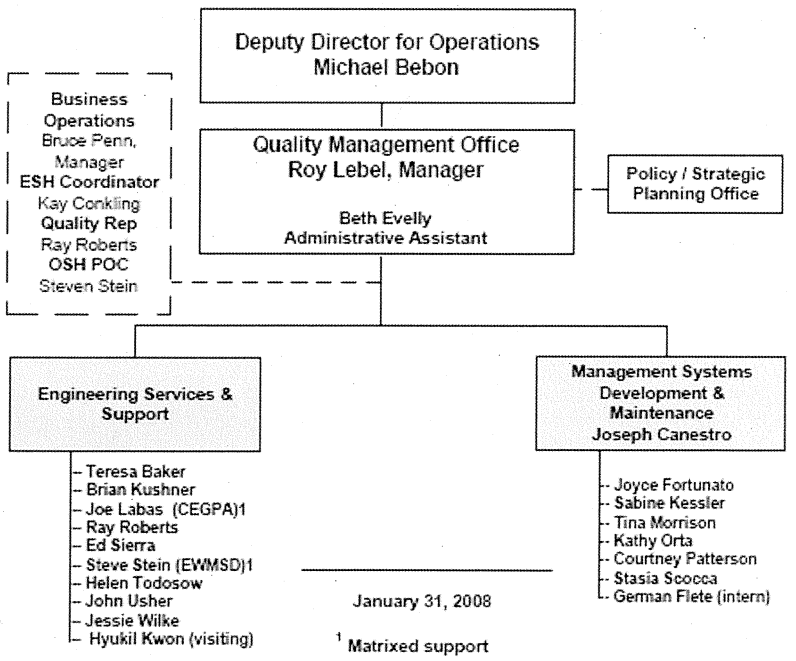
- Implement quality management methodologies to enable Laboratory science and operations to plan and perform in a reliable and effective manner to minimize the impact on the environment, safety, and health of the staff and the public;
- Standardize processes and support continuous improvement in all aspects of Laboratory science and operations; and
- Enable the delivery of products and services that meet customers' requirements and expectations.

3. Organizational Structure, Roles and Responsibilities

3.1 Organizational Structure

The QMO reports to the Deputy Director of Operations and supports the Policy and Strategic Planning Office. The QMO has two groups, the Engineering Services & Support Group and the Systems Development and Maintenance Group. An organization chart is shown in Figure 1.

Figure 1. Organization Chart



3.2 Roles and Responsibilities

The overarching roles and responsibilities of the Quality Management Office (QMO) involve the development, maintenance, improvement and deployment of laboratory-wide processes and systems tools. QMO is the steward and implementation organization for several key Laboratory programs. These include:

- Quality Assurance Program
- Quality Assurance
    - Occurrence Reporting and Processing Systems (ORPS)
    - Events/Issues Management Process
        - Fact Finding & Causal Analysis
        - Corrective Action Management
        - Assessment Tracking System (ATS)
    - Suspect and Counterfeit Items
- Standards Based Management System (SBMS)
    - Requirements Management
- Integrated Assessment
    - Contractor Assurance
- Human Performance Improvement

QMO also manages a network of Quality Representatives within Laboratory line organizations that execute quality functions for the line.

Goals for QMO in FY08 will include the following:

- Support the Battelle-led effort to develop common work flows associated with the "Next Generation SBMS" project.
- Coordinate the roll-out of the BNL Human Performance Improvement Initiative
- Upgrade the Laboratory's Integrated Assessment Management System and its implementation by all Lab organizations.
- Improve the Laboratory's Contractor Assurance System (CAS). This involves developing/implementing a Lab-wide assessment management process, a risk-based approach to issue/action management, and an integrated approach to issue trending and reporting. It also involves improving the quality of organizational and management system self-assessments. There is a need to revise/develop R2A2s for personnel performing CAS activities and ensure that these personnel are knowledgeable/qualified.
- Improve the Laboratory's receipt and inspection of high risk/significant items (A1, A2). This has been occurring as a pilot with positive results. The Laboratory needs to commit to this activity as a permanent function.
- Improve the Laboratory's Calibration Program. This involves revising the laboratory requirements and procedures for calibration and evaluating a more centralized calibration function to support better consistency in calibration practices.
- Complete Requirements Management mapping of the BSA Prime Contract. The purpose of this activity is to document how BNL satisfies the Prime Contract provisions. This activity, in conjunction with the requirements verification conducted last year, will help BNL to have a more complete understanding of the Laboratory's external requirements, and to be able to demonstrate how these requirements are satisfied.

Management System (MS) Stewards and POCs will be responsible for completing Records of Decision (RODs) for those provisions not already captured in the Requirements System. They will need to review the contract provisions that are the primary responsibility of their MS, and determine (and document) how the requirements are satisfied. The goal is to complete this activity by May 30, 2008. In order to meet this goal, commitment and cooperation from the MS Stewards, POCs, and appropriate SMEs will be necessary.

These goals are key to driving improvement in BNL's overall performance in the context of an environment where there is an expectation that the cost of doing business be reduced. In addition, achievement of these goals is a DOE customer expectation, either formally – ISM CAP, PEMP, or informally – HPI.

3.3 Organizational Funding, Staff Breakdown and Fiscal Targets

The following table shows the funding level and mechanism for the Quality Management Office for FY08., not including incremental requests.

Organizational Structure (Department Code Titles)	**FY08 Overhead (Trad & Com) Pools**	**FY08 FTEs**
Deputy Director of Operations		
Quality Management Office	$ 1,928,743	**15.6**

3.4 Diversity Characteristics

The following table shows the breakdown of current staffing levels and relevant characteristics (e.g. diversity, classifications) for FY08. The QMO also has personnel that are underrepresented at the Laboratory that are not shown in the categories below, such as 1 person with disabilities and 2 women in engineering.

Resource Type	Ethnic Title	QA
Management/Supervisor Males = 4 Females = 1	American Indian	
	Asian	
	Black	
	Hispanic	
	White	3
Total		**3**
Professional Males = 5 Females = 4	American Indian	
	Asian	
	Black	1
	Hispanic	
	White	8
Total		**9**
Technical Males = 1 Females = 0	American Indian	
	Asian	
	Black	
	Hispanic	
	White	1
Total		**1**
Scientific Males = 0 Females = 0	American Indian	
	Asian	
	Black	
	Hispanic	
	White	
Total		**0**
Admin Support/Secretarial Males = 1 Females = 2	American Indian	
	Asian	
	Black	1
	Hispanic	
	White	2
Total		**3**
Grand Total		**16**
Minority Total		**2**

3.5 Management Systems

The Quality Management Office has primary Stewardship responsibility for the following management systems:

- Integrated Assessment Program Management System

- Quality Assurance Management System
- Standards Based Management System

In addition, the QMO develops and maintains the following SBMS Program Descriptions:

- Occurrence Reporting
- Quality Assurance
- Suspect/Counterfeit Items

4. Situational Analysis

4.1 Organizational Performance

A core mission of the Quality Management Office (QMO) is to support line organizations in the development and implementation of the Laboratory's quality assurance (QA) program. Line organizations needs vary based on the type of work, but overall hands-on assistance is expected in many aspects of the QA tasks - developing assessment plans, performing assessments, reviewing requisitions, applying the graded approach, calibration, inspection and acceptance testing.

A second mission of the QMO is to analyze data and information to enable lab management decision-making. As currently resourced the QMO cannot adequately meet the missions/expectations noted above. Additional quality assurance expertise would enable the QMO to provide support to the line, especially the small science organizations. (The larger facilities, C-AD, NSLS, EWMSD are able to fund QA support). Additional quality assurance expertise will enable the QMO to meet these needs as well as support the QAP goal noted in item 1 – continuation of receiving and acceptance testing.

- Causal Analysis and Accident Investigation
- Assessment Management/Risk Prioritization of Actions/Issues
- Assessment and Information Analysis
- Human Performance Initiative

4.2 Management System Performance

4.2.1 Integrated Assessment Management System

The Integrated Assessment Program (IAP) provides BNL with feedback processes to support performance-based management, institutional feedback and improvement, and the Contractor Assurance System. IAP is used for:

- Providing scientific, operational (including environment, safety, and health), and business performance information to promote early identification and resolution of problems that may impact achievement of the Laboratory's strategic agenda, Contract Performance Measures and Directorate, Department, or Division objectives.
- Contributing to ongoing improvement in performance, including driving the Laboratory's improvement agenda by identifying strategic and tactical investments and changes to performance objectives/measures.
- Verifying expectations and requirements of stakeholders and customers to improve scientific and technological research, existing products and services, and enhance customer satisfaction.

The functional elements of IAP are Self-Assessment (organizational and management system), Peer Review, Independent Assessment, Internal Audit, Corporate Oversight, and external assessments. These elements generate information on, and results are used to encourage, excellence in scientific, technical, ESS&H, quality, community involvement, business and operational performance. This information is used to make decisions on performance and identify areas requiring improvement. Together these elements provide comprehensive and objective information used by the Laboratory in establishing strategic direction and improving performance.

The final third-party (w/DOE) report of the Evaluation of the Contractor Assurance System including Event/Issues Management was received on July 30, 2007. The assessment team concluded that Contractor Assessment and Performance Management only partially satisfied Contractor Assurance criteria. The report states, "Expectations for planning and conduct of assessment activities are generally well established in the Standards Based Management System (SBMS) and provide guidance for conduct of organization and management system self-assessment activities as well as independent oversight reviews and assessments." However, according to the report, "Evaluation of management system performance does not appear to be uniformly consistent, holistic, or mature as [are] organizational self-assessment activities; the integration of PEMP measures and other performance information that is used to establish management system performance is not clear." To supplement improvements underway prior to the evaluation, BNL is developing an action plan. It is also noted that preliminary results of the DOE/HSS Inspection of Environment, Safety, and Health Programs at BNL indicate similar findings.

An Assessment Management Workshop was held in June 2007 to finalize a framework for consistent planning and management of assessments across the institution. Procedures implementing the Assessment Management process will be incorporated into the Integrated Assessment subject area in FY 2008. Improved, more rigorous procedures for analyzing and responding to the results of assessments are being integrated into the Event/Issues Management subject area. Additionally, the recently developed and piloted process for organizational business planning will be incorporated into revised SBMS documents during FY 2008.

4.2.2 Quality Management System

The Quality Management System (QMS) provides the institution with processes and guidance to assure that appropriate quality assurance activities are applied to the Laboratory's work. The QMS describes:

- The Graded Approach to applying the ten criteria of the QA Order and Rule
- How other BNL Management Systems have incorporated quality assurance into their processes; for example, Acquisition Management, Records Management, Integrated Assessment
- The role of Quality Representatives in the line organization

The QMSD, QAPD and supporting subject areas have been reviewed and revised to reflect current requirements and expectations. External reviews have validated BNL's decentralized approach to quality assurance.

In FY06 and FY07 independent reviews indicated two areas for improvement. Both areas will be addressed in FY08. The FY06 Third Party Review cited two opportunities for improvement:

1. Training & Qualification of Quality Representatives
2. Implementation of the Calibration Program

In FY07 an Extent of Condition Review of the Calibration Program was performed by an independent team. The results noted the tendency for calibration requirements to be less rigorously implemented in the scientific areas and the concern that there was not a clear steward of the Laboratory's Calibration Program.

Initiatives in both areas – Quality Representative Training and the Calibration Program – are part of the FY08 QMO Business Plan. The QMO has begun the process of revising the QAP Overview web course, will update the QA Procurement Training, and will use the input of Quality Representatives to determine the other training areas needed.

The Calibration Subject Area will be revised to strengthen the requirement for all instruments to be calibrated or tested for accuracy. A dialogue with senior management regarding the establishment of a centralized calibration organization and facility was initiated in FY07 and will continue as a corrective action to the EOC Review of Calibration.

4.2.3 Standards Based Management System

The Standards-Based Management System (SBMS) provides BNL staff with policies, standards of performance, and Laboratory-wide procedures and guidelines (subject areas) that are current, accurate, and relevant to their work. The Laboratory develops policies, standards of performance, and subject areas based on an evaluation of external requirements (i.e., Directives and Federal, state, and local laws) and BSA policies. While the SBMS does not deliver facility-, organization-, or program-specific operating procedures, guidance, and requirements, the SBMS provides the baseline BNL requirements for developing, delivering, and controlling such internal operating procedures and documents.

Documents in SBMS are constantly being reviewed and changed as requirements dictate, or standard document review cycle dates approach. SBMS is widely used by BNL staff and is a constant source of information for laboratory wide procedures and guidelines. Currently, there has been a focus on user feedback to improve SBMS functionality. This feed back was discussed and documented at various weekly SBMS meetings. Numerous users from various functions were invited to voice their inputs and suggestions for improvement. Some of these improvements are either already incorporated or are in process.

A new, Battelle Next Generation version of SBMS is on the horizon. A pilot project was recently completed with promising results to examine the feasibility of multi-lab collaboration on establishing common workflow concepts. The Next Generation SBMS will be a system of useful, integrated, and measurable core processes that transparently deliver the expectations of management for the operation of the laboratory, while maintaining compliance. In FY08, 20 common, high level, workflows are planned to be developed using multi functional teams across all seven participating labs (BSTI, BNL, INL, NBACC, NREL, ORNL, and PNNL). These new process will clearly define the cross-cutting procedures necessary to complete tasks and provide a quicker and easier means of finding relevant and useful information for all staff. We also expect to leverage our strength of corporate partnerships to push back on burdensome requirements and enable precise mapping of internal and external requirements.

In addition, the SBMS staff will work with appropriate personnel to support the update of SBMS documents to eliminate incorrect/indefinite terminology that communicates optional compliance with requirements. For example, using words like “shall” rather than “should”. This will be an ongoing effort throughout FY08.

5. Fiscal Year Objectives and Performance Targets

Annual Laboratory Plan Support Activities

Strategic Focus Area	Objective	Target	Office Target/Activity	Owner	Contributors	Completion Dates
Achieving Excellence in ESSH	Transition BNL to a culture of injury prevention	Develop and implement Human Performance Initiative (HPI) Strategy and internal communication and stakeholder engagement plan	1. Establish and Charter the Lab's HPI Steering Committee 2. Train group of Line SMEs to then 3. Establish the HPI Implementation Team 4. Certify 5 SMEs as Certified HPI Trainers 5. Provide worker level training to select organizations 6. Develop metrics to measure "success"	J. Labas	Fisher Improvement Technologies	2 Year Project (Project Plan to be Developed)
	Transition BNL to a culture of injury prevention	New Target "Pilot an Idea System"	Pilot an Idea System	J. Labas	Alan Robinson	2 Year Project (Project Plan to be Developed)
	Revitalize Integrated Safety Management at BNL	Develop a Corrective Action Plan for the ISM Review report findings. Incorporate it into the ISM/Safety Improvement Plan	ISM Corrective Action Plan • Causal Analysis Support	R. Lebel	E. Sierra/J. Usher/J. Wilke	1/15/08
	Revitalize Integrated Safety Management at BNL	Develop a Corrective Action Plan for the ISM Review report findings. Incorporate it into the ISM/Safety Improvement Plan	Strengthen and enhance Events/Issues Management Process	E. Sierra		TBD

Strategic Focus Area	Objective	Target	Office Target/Activity	Owner	Contributors	Completion Dates
	Revitalize Integrated Safety Management at BNL	Develop a Corrective Action Plan for the ISM Review report findings. Incorporate it into the ISM/Safety Improvement Plan	Improvements to the Corrective Action Management Process (as it relates to Assessments) and ATS • Risk Prioritization • Extent of Condition • Effectiveness Reviews	B. Kushner	J. Usher	5/5/08
	Revitalize Integrated Safety Management at BNL	Execute the ISM/Safety Improvement Project Plan, including a comprehensive internal communication plan	ISM Champions Workshop	J. Wilke	H. Todosow	12/21/07
	Revitalize Integrated Safety Management at BNL	Execute the ISM/Safety Improvement Project Plan, including a comprehensive internal communication plan	Operations Management Forum - Support	J. Wilke		1/08, 5/08, 9/08
Improve Quality/ Reduce Cost of Doing Business	Effective corporate assurance	Assurance reports to corporate risk committees reflect a comprehensive and objective assessment of institutional risks	Contractor Assurance Process – Reporting support to PSP ▪ Annual Laboratory Plan ▪ 3-Year Plan ▪ Corporate Assurance ▪ PEMP ▪ Management Systems	T. Baker/ J. Usher	B. Kushner	Period Basis Aligned with BSA Board Schedule
	Revitalize Integrated Safety Management at BNL	Execute the ISM/Safety Improvement Project Plan, including a comprehensive internal communication plan	Requirements Management ▪ Contract Mapping	S. Scocca		8/08
	Meet Contract Performance Expectations	DOE Rating greater than or equal to B+	Meet performance targets (See PEMP Table)	QMO		9/08

DOE Performance Evaluation And Measurement Plan (PEMP) Support Activities

Performance Goal	Measure	Office Activity	PEMP Driver	Owner/Contributor	Completion Date
FY06 Follow-up PEMP Actions					
6.0 Deliver Efficient, Effective, and Responsive Business Systems and Resources that Enable the Successful Achievement of Laboratory Missions	Target 6.4.1.1 Corrective Action Plan Implementation	Implement Corrective Actions	Target 6.4.1.1	S. Stein/ J. Wilke	12/30/07 - Complete
FY07 Follow-up PEMP Actions					
5.0 Sustain Excellence and Enhance Effectiveness of Integrated Safety, Health, and Environmental Protection	Target 5.2.1.5 Follow-up Corrective Action Plan	Develop Contractor Assurance CAP	Target 5.2.1.5	R. Lebel/E. Sierra/J. Usher/B. Kushner	1/25/07 - Complete
FY08 PEMP Actions					
4.0 Provide sound and competent leadership and stewardship of the Laboratory	Corporate Leadership – BSA is responsible and accountable for Laboratory performance.	Support corporate leadership by providing effective stewardship and accountability of Laboratory assets, operations, systems and managers.	Target 4.2.1.1	R. Lebel	P1, P2, and P3
5.0 Sustain Excellence and Enhance Effectiveness of Integrated Safety, Health, and Environmental Protection	Target 5.1.1.1 BSA will meet the Office of Science goal of 0.25 DART cases per 200,000 hours worked	Work Safely, follow OHSAS	Target 5.1.1.1	All	9/30/08
	Target 5.1.1.2 BSA will meet the Office of Science goal of 0.65 TRC cases per 200,000 hours worked	Work Safely, follow OHSAS	Target 5.1.1.2	All	9/30/08
	Target 5.1.1.3 BSA will demonstrate a reporting culture through effective implementation of feedback and improvements processes for ES&H performance. DOE will	Monitor issues/events for appropriate categorization and effective causal analysis	Target 5.1.1.3	E. Sierra	9/30/08

Performance Goal	Measure	Office Activity	PEMP Driver	Owner/Contributor	Completion Date
	evaluate through assessment of a representative sample of issues/events for appropriate categorization and effective causal analysis.				
	Target 5.2.1.4 Feedback and improvement – BSA will demonstrate effective implementation of their safety observation process for Level 1, 2, and 3	Perform Safety Observations	Target 5.2.1.4	R. Lebel	9/30/08
	Target 5.2.2.1 Maintain certification of the Environmental Management System to the ISO 14001:2004 standard as determined by the third party audit.	Develop FY08 goals for QMO and continue to implement	Target 5.2.2.1	S. Stein/All	9/30/08
	Target 5.2.2.2 Maintain certification of the Occupational Safety & Health Management System to the OHSAS 18001 standard as determined by the third party audit.	Develop FY08 goals for QMO and continue to implement	Target 5.2.2.2.	S. Stein/All	9/30/08
6.0 Deliver Efficient, Effective, and Responsive Business Systems and Resources that Enable the Successful Achievement of Laboratory Missions	Target 6.2.2.2 Demonstration of successful control of laptop computers	Protect Lap Tops Computers – At BNL and Away from BNL	Target 6.2.2.2	All Lap Top Owners	9/30/08
	Target 6.3.2.1 95% of Level II Managers will complete Diversity Engagement Practices Checklist(s).	Complete checklist and implement as required	Target 6.3.2.1	R. Lebel	TBD
	Target 6.4.1.1 BSA will develop, implement and demonstrate significant progress towards completing actions responding to the FY 2007 review of the Contractor	Develop and implement Corrective Action Plan	Target 6.4.1.1	R. Lebel/T. Baker/J. Usher/E. Sierra	9/30/08

Performance Goal	Measure	Office Activity	PEMP Driver	Owner/Contributor	Completion Date
	Assurance System.				
	Target 6.4.1.2 BSA will demonstrate a more effective and consistent process for analyzing SCBNL events and issues from surveillances and assessments using defined causal analysis methodologies.	Develop and implement process for SCBNL events	Target 6.4.1.2	E. Sierra	9/30/08
8.0 Sustain and Enhance Effectiveness of Integrated Safeguards and Security Management (ISSM) and Emergency Management Systems	Objective 8.3 – Provide an Efficient and Effective System for the Protection of Special Nuclear Materials, Classified Matter, and **Property**	Protection of Property	Objective 8.3	All	9/30/08

DDO Level Activities

Objective	Activity	Responsible Manager
Consistent and effective management principles and practices	1. Continue Leadership Development Program with two additional groups 2. Complete work of Operations Hedgehog, People Process & Idea System teams 3. Integrate work of the three Operations teams with work of the Policy Council teams 4. Develop a program to introduce Lean Six Sigma principles to Operations managers 5. Initiate a Management Seminar Series to introduce leading edge ideas	M. Bebon
Improve Illness and Injury Performance	1. Develop management goals for safety observations 2. Review observation trend analyses and develop Corrective Action Plans	Bebon, Coleman, Lebel, Healey, Biegelman
	Implement an Idea System at the Division/Office level and roll-up to Directorate	Bebon, Coleman, Lebel, Healey, Biegelman
Leverage opportunities to influence emerging DOE policies and share lessons learned by networking across the DOE complex	Evaluate participation in EFCOG working groups and realign as appropriate	M. Bebon
Formalize use of the Operations Forum	Hold meetings in preparation for the three BSA Board Meetings at a minimum	L. Hill
Quality Continuous Improvement	1. Perform Configuration Control Assessment 2. Revise SBMS configuration control documentation 3. Develop a plan for addressing configuration control issue backlog 4. Assist NSLS-II to develop project quality program and provide oversight	R. Lebel
SBMS Continuous Improvement	1. Review steward and POC assignments for all Operations management systems and revise as appropriate 2. Develop R2A2s and JTAs for all stewards and POCs 3. Implement training in accordance with JTAs 4. Develop performance metrics for each Operations Management System 5. Develop a 5 year assessment plan for each Operations Management System 6. Revise SBMS documentation development process, e.g., steering committee, changing SME role vs. steering committee 7. Support Battelle initiative to create a "Next Generation" SBMS based on work sequences	R. Lebel
Integrated Assessment Continuous Improvement	Analyze results of Integrated Assessment Program workshops and develop an improvement and corrective action plan	R. Lebel

Quality Management Office Activities

Objective	Activity	Owner	Contributors	Completion Date
Continuous Activities				
Improve Illness and Injury Performance	Tier 1 Inspections	R. Lebel	All, Kay Conkling	Annual
Leverage opportunities to influence emerging DOE polices and share lessons learned by networking across the DOE complex	DOE BHSO and Germantown interface	R. Lebel (All)		Quarterly
	Battelle Performance Assurance Community of Practice	R. Lebel	All	Quarterly
Staff Development	Staff Goal Planning ▪ Professional & Personal Development ▪ Provide group Under-standing of Salary adjustment process ▪ Performance Expectations ▪ Attendance Expectations	R. Lebel		10/07-2/08
	QMO Lecture/Information Series	E. Sierra (All)		Monthly
	Mentoring of "Jr." QA Persons	R. Lebel		Continuous
	Team Building Activities ▪ Team Building ▪ BBQ / Don Ho Day ▪ Breakfasts ▪ Happy Hours ▪ Ice cream Party (Year End) ▪ Walk for Beauty ▪ Sports/Games ▪ Brain teasers (FY08) ▪ Birthday lunches	R. Lebel	All	Continuous
	Explore - Develop and Implement Exercise Program	C. Patterson		11/07
Quality Continuous Improvement	Bi-Annual LL Coordinators workshop to prompt feedback, evaluate, and improve the BNL LL program.	E. Sierra		Periodic
	Maintain and Facilitate	R. Roberts		Continuous

Objective	Activity	Owner	Contributors	Completion Date
	acceptance & testing of incoming product (A1/A2) – Field Implementation and Documentation			
	Manage ORPS/Lessons Learned for BNL	E. Sierra		Continuous
	Management of Counterfeit / Suspect Items for BNL	R. Roberts		Continuous
	Effectiveness Review of Internal Controlled Documents SA and process	S. Stein		9/08
	Quality Rep Communication ▪ Training &Qualification ▪ Meetings	R. Lebel		Periodic
Integrated Assessment Continuous Improvement	Assessment Management and Analysis	R. Lebel (TBD)		Continuous
	Revise the Integrated Assessment Program MS Description and subject area	J. Usher		9/30/08
	Develop / maintain BNL Assessment Calendar	J. Usher		Continuous
DOE PEMP Management	Prepare FY07 Year-end Report (PEMP)	J. Usher/T. Baker		11/07
	Develop FY09 PEMP	J. Usher		7/08
	Prepare FY08 PEMP Period Performance Summaries	T. Baker		2/08, 6/08, 10/08
Contractor Assurance	Prepare Operations Risk Report to DDO	T. Baker	B. Kushner	2/08, 6/08, 10/08
	Develop a process for status on the Operations Business Plan by Division/ organization/SFA	J. Wilke (TBD)	B. Kushner	2/08, 6/08, 10/08
	Coordinate/Conduct FY08 Annual Review of MS for DDO	J. Canestro		8/08
	Prepare FY07 Integrated Assessment Report (OPS)	J. Wilke	H. Todoso/J. Usher/B. Kushner/R. Roberts	1/08
	Prepare Analysis of Assessment Results by MS	J. Usher	H. Todoso	2/08, 6/08, 10/08

Objective	Activity	Owner	Contributors	Completion Date
Initiatives				
Leadership Development	Provide Six Sigma Overview for DDO Management Team	J. Labas		TBD
	Coordinate Leadership Learning/Development for Senior Management	J. Labas		TBD
	People Process/Hedgehog Support	J. Wilke/J. Labas		TBD
Quality Continuous Improvement	Effectiveness Review of Internal Controlled Documents SA and process	S. Stein		9/08

FY08 Planned Assessments

Performed by	Assessment Area	Organization(s) to be Assessed	Criteria	Driver/Priority	Responsible Manager	Host Organization Hours	Other Organizations Hours/Organization	Schedule
External Assessments								
BHSO/BNL	QAP Contractor Assurance Program Review	TBD	DOE Order 226.1	DOE Order 226.1	J. Usher	40 Hours	2 Hours	TBD
BHSO	QAPD Review	TBD	DOE Order 414.1C	DOE Order 414.1C	S. Stein	40 Hours	2 Hours	TBD
BHSO	S/CI	TBD	DOE Order 414.1C 10CFR 830.120	BHSO Assessment	R. Roberts	40 Hours	8 Hours	March 31-April 4, 2008
BHSO	Software QA	TBD	DOE Order 414.1C	BHSO Assessment	S. Stein Support to Jim Pearsall	40 Hours	2 Hours	March 31-April 4, 2008
Internal Assessments								
QMO	Effectiveness of Internal Controlled Documents Review Process	All			S. Stein/J. Usher			9/08
QMO	Annual review/revision of QAP and QMS; submittal of letter to DOE	N/A- this is a review of laboratory level documents, not of organizational performance	DOE Order 414.1C	DOE Order 414.1C	S. Stein	20 Hours	NA	5/08

6. Support Needs and Strategic Hires

Incremental support needs and strategic hires are shown in the following table and described in detail below:

Title	Incremental Request Type	Incremental Request FY08 $ K	Incremental Request FY08 FTEs	Incremental Request FY09 $ K	Incremental Request FY09 FTEs	Priority Level
Quality Management Office						
Human Performance Improvement (HPI) - Organizational Implementation Support	1 Time/Project	$120		$180		High
HPI - Training and Workshops	1 Time/Project	$216				High
ISM Champions Workshop	1 Time Project	$30				High
Total		**$366**		**$180**		

Human Performance Improvement (HPI)

The Laboratory has decided to implement Human Performance Improvement (HPI) concepts and tools throughout BNL as a strategy to improve performance. The strategy for this initiative has been developed with input from Laboratory senior management, DOE, and an external subject matter expert. The FY08 scope of work includes:

- Retaining the services of an external consultant/HPI expert with proven experience in assisting organizations in the implementation of HPI;
- Designation of a Laboratory HPI Point of Contact (POC);
- Establishing the HP Steering Team (HPST) with existing Laboratory staff;
- Training a cadre of HPI Subject Matter Experts to deploy HPI deployment in the line organizations;
- Training of managers, supervisors, and workers in the line organizations; and,
- Revising the Work Planning & Control and Event & Issues Management processes to fully incorporate HPI concepts and tools.

The key staffing needs are the retention of an external HPI consultant and the Laboratory HPI POC (discussed below in Project Engineer Position). Incremental funding requested for an external consultant for FY08 is $336,000, a non-recurring cost. The external consultant costs include $120,000 for organizational implementation support and $216,000 for training and workshops. The use of DOE-HSS resources is considered as an option to support implementation of HPI for training and workshops. However, expertise needed in organizational implementation is best provided by a consultant. The HPI Implementation Plan will be monitored to assess progress against the project plan. A review of activities and milestones will be conducted at the end of FY08 to assess progress and determine the FY09 HPI Implementation Plan. The FY09 estimated incremental funding request is $180,000.

ISM Champions Workshop
BNL has been selected by DOE-HSS to host the ISM Champions Workshop in November, 2007. The cost to the program is $30,000. This covers printing, workshop transportation, supplies, an executive training session, and administrative support.

7. Institutional Policy Issues For Evaluation And Resolution:

- Next Generation Standards Based Management System - A Battelle Corporate directive for all laboratories to collaborate on creating common workflows to drive improvement in laboratory operations through an innovative delivery system. Create communities of practice to achieve better efficiencies by networking across laboratories. This process will also leverage collective strength to push back on burdensome orders and inconsistent DOE interpretations.

  The first phase of this project is to create 20 workflows for FY08. This process will involve a trained dedicated team of facilitators and process modelers, as well as experienced SME's and users. A separate IT team is working on creating a common framework and infrastructure to deliver the workflows to the users.

- Institutional Calibration Program - A recent review of BNL's Calibration Program surfaced weaknesses in the implementation of the program, mostly in the scientific research areas. In some instances, the cost and inconvenience of securing appropriate calibration services was noted as a reason for not performing calibration. One recommendation in the review was to consider establishing a centralized calibration function/facility to make it easy for researchers and other BNL staff to access calibration services when needed. A cost/benefit study needs to be performed in order for recommendations and options to be presented for management's decision.

- SBMS Language Changes - Work with appropriate personnel to support the update of SBMS documents to eliminate incorrect/indefinite terminology that communicates optional compliance with requirements. For example, using words like "shall" rather than "should". This will be an ongoing effort throughout FY08.

Appendix A Quality Management Office EMS and OHSAS FY08 Objectives and Targets

This document is provided on the QMO web page:

http://www.bnl.gov/qmo/linkable_files/pdf/QMO%20FY08%20EMS-OHS%20Obj%20and%20Targets.pdf