

LNBL CAP

HSS Finding D3 Corrective Action Plan for LNBL Integrated ES&H Management Inspection

Owner: Ross Fisher
Analyst: Weyland Wong

Finding Statement D3: LBNL has not established sufficient processes nor implemented a fully effective investigation and reporting program for occupational injuries and illness to identify ISM deficiencies and implement effective recurrence controls as required by DOE Manual 231.1-1A, Environment Safety and Health Reporting Manual, DOE Order 414.1C, Quality Assurance and DOE Order 226.1A, Implementation of Department of Energy Oversight Policy.

Manager Responsible for Correcting Finding:

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Causal analysis: Five root causes were identified for Finding D3, as follows:

1. Existing Occupational Injury and Illness Recordkeeping and Reporting (OIIRR) program documents (PUB 3000 Chapter 5.1, procedures, forms, correspondence, training) lack sufficient detail to enact effective (identification of deficiencies and development of controls to prevent recurrence) OIIRR processes.
2. DOE and LBNL requirements for investigation and reporting have not been fully incorporated in the OIIRR program documents (PUB 3000 Chapter 5.1, procedures, forms, correspondence, and training).
3. Process participant expectations are neither sufficiently documented nor effectively communicated.
4. Current program training requirements for investigating injuries are not effective.
5. The LBNL ES&H Technical Assurance Program (TAP) has not been effectively implemented for the OIIRR program.

Immediate / Compensatory Actions:

No immediate or compensatory actions for Finding D3

Actions to Prevent Recurrence:

1. **Action:** Review internal and external requirements and identify those applicable to occupational injury and illness recordkeeping and reporting. Map the resulting requirements to the current OIIRR program requirements; noting in particular the crosswalk disconnects.

Deliverable to Close Corrective Action: Requirements crosswalk

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2. **Action:** Develop conceptual model of the restructured OIIRR processes.
- a. Prepare model of the restructured OIIRR processes that will effectively investigate and report occupational injuries and illnesses and initiate controls to prevent incident and issues recurrence.
 - b. Solicit stakeholder vision and gain stakeholder acceptance of the proposed program restructure model.

Deliverable to Close Corrective Action: Conceptual model and template for restructuring of the OIIRR program.

3. **Action:** Restructure and make required improvements to the OIIRR processes.
- a. Revise and clarify program requirements, guidance, roles and responsibilities.
 - b. Separate OSHA time-critical component deliverables from investigation, reporting and corrective actions for recurrence prevention.
 - c. Streamline investigation and reporting and recordkeeping processes.
 - d. Add program details that address gaps and issues not otherwise identified.

Deliverable to Close Corrective Action: Improved program documents, improved processes, improved reports, and improved controls to prevent recurrence.

4. **Action:** Integrate OIIRR with the other LBNL reporting systems and Issues Management Program.

Deliverable to Close Corrective Action: OIIRR Program documents are aligned with, ORPS, IMP, and NTS programs and processes. Investigation and reporting processes are coordinated, more efficient, comprehensive, and effective.

5. **Action:** Align training with revised OIIRR program requirements, guidance and roles and responsibilities. Conduct required training.

Deliverable to Close Corrective Action: Revise EHS032 and train appropriate stakeholders.

6. **Action:** Perform effectiveness review of the OIIRR processes.

Deliverable to Close Corrective Action: Revised TAP Plan, conduct assessments, and generate TAP reports that identify areas for improvement and determine program effectiveness.