MEMORANDUM FOR THE CHIEF HEALTH, SAFETY AND SECURITY OFFICER

FROM: Rickey R. Hass
Deputy Inspector General for Audit Services
Office of Inspector General

SUBJECT: INFORMATION: Audit Report on "Management Controls over Selected Aspects of the Department of Energy's Human Reliability Program"

BACKGROUND

The Department of Energy and its Federal and contractor staff are responsible for some of the Nation's most sensitive national security assets and programs. The Department implemented the Human Reliability Program (Reliability Program) to ensure that individuals who occupy positions affording access to certain nuclear materials, facilities, and programs meet the highest standards of reliability and physical and mental suitability. One aspect of the Reliability Program requires that employees who are part of the program and who consume perception or behavior altering substances be restricted or removed from performing sensitive duties until the effects of those substances have abated.

Our inspection of The Human Reliability Program at Lawrence Livermore National Laboratory (DOE/IG-0732, June 2006) disclosed weaknesses in the management of the program at that site. In particular, we found problems at the Lawrence Livermore National Laboratory (Livermore) with the selection methodology used in the drug and alcohol testing process and medical and supervisory evaluations of Reliability Program personnel. Our inspection also found that the Department-wide Reliability Program drug testing program did not include categories of drugs that were commonly abused, such as narcotic pain medications and hallucinogens. Management concurred with the report and indicated that it had initiated corrective actions.

Based on the critical nature of the duties performed by Reliability Program certified individuals, we initiated this audit to determine whether the Department's Reliability Program was being administered in an effective manner.

RESULTS OF AUDIT

Even though sites were generally meeting basic Reliability Program requirements, our audit identified inconsistencies in the application of program requirements throughout the
Department complex. These inconsistencies involved alcohol and drug-related duty restrictions and the certification of Reliability Program managers. While we did not identify specific problem cases, in a worst case scenario, these inconsistencies increase the risk that an impaired individual (sensory or behavioral) could be permitted to perform critical duties. In particular, we noted that:

- At the Pantex Plant (Pantex), medical personnel applied a blanket 8-hour duty restriction rule for employees taking prescription anti-anxiety, sedating sleep-aids, and narcotic pain relievers that did not consider the specific half-life of the drug. In contrast, the Nevada Test Site (NTS) recommended that individuals taking these types of medications be removed from critical positions until the effect of the drug had completely dissipated.

- Regulations requiring abstinence from alcohol for specified periods prior to reporting for duty were not consistently applied. At Livermore, the 8-hour abstinence rule established by the Department was applied only to those with nuclear explosives duties. All other Reliability Program certified Livermore employees were permitted to consume alcohol within four hours of assuming duty. Many other sites did not apply the established 8-hour abstinence rule; however, all sites required that employees' breath alcohol concentration be below 0.02 percent.

- The NTS did not require that Reliability Program management personnel be certified and subject to impairment related rules or work restrictions. Pantex, on the other hand, required that management personnel be certified and subject to Reliability Program requirements. According to the Department's Chief Medical Officer, this distinction is important in that management has the ultimate responsibility for determining which persons may or may not have access to nuclear explosives and Category I Special Nuclear Material.

We found that these inconsistencies occurred, in large part, because current Reliability Program regulation does not specify the types/classes of prescription medications that should disqualify an individual from performing Reliability Program duties. The regulation also lacks specificity for the application of the 8-hour abstinence rule for the consumption of alcohol prior to duty and whether Reliability Program management officials should be certified. As a general principle, the Office of Inspector General advocates a graded approach to security, one that recognizes the inherent vulnerabilities related to the distinct operation of each site. We concluded, however, that because the reliance on Reliability Program certified personnel is so significant, the application of Reliability Program requirements identified during the audit should be addressed on a uniform Departmental basis. Without additional specificity, the Department may be unable to ensure that personnel security program requirements are consistently implemented from site to site and that impaired employees are not serving in critical positions.

We also noted that even though the Department conducted a review in response to our previous report on drug testing weaknesses at Livermore, it concluded that adding additional drugs to the screening process was neither cost-effective nor necessary. The
ultimate decision not to screen for additional drugs may have contributed to delays in discovering the recently identified steroid use by Reliability Program certified protective force personnel at the Oak Ridge Complex (Oak Ridge). Our initial investigation of the potential use of anabolic steroids by protective force personnel at Oak Ridge came to light through anonymous sources and other law enforcement activities. In this case, the failure to detect the use of these drugs resulted in individuals occupying sensitive positions while using substances that are known to cause or contribute to aggressive behavior. As a result, administrative action has been taken against six Oak Ridge based protective force personnel. The actions taken have resulted in resignations, terminations, and removal from the Reliability Program. To aid the Department in addressing similar situations, we made recommendations designed to heighten awareness of reporting responsibilities and increase the likelihood of detecting unreported drug use.

The Reliability Program is managed and directed by the Department's Office of Departmental Personnel Security (Personnel Security). To its credit, Personnel Security conducts monthly conference calls with field sites to discuss program updates related to the Reliability Program. These discussions provide an opportunity for Reliability Program management officials to share best practices and any concerns. Additionally, Personnel Security is currently in the process of revising Departmental regulation for the Reliability Program. In that regard, we believe that consideration of our recommendations during the revision of the Department's policy presents Personnel Security with an opportunity to address the issues outlined in this report. Both policy makers and site-level managers should also consider whether adjustments to testing regimens and additional training could help prevent or detect problems such as those encountered at Oak Ridge.

**MANAGEMENT REACTION**

The Office of Health, Safety and Security and the National Nuclear Security Administration generally concurred with the recommendations except for a portion related to certification of Reliability Program management officials. Actions planned by management are responsive to our recommendations. Management comments are more fully discussed in the body of the report and are included in their entirety in Appendix 3.

Attachments

cc: Administrator, National Nuclear Security Administration
    Under Secretary of Energy
    Under Secretary for Science
    Chief of Staff
    Assistant Secretary for Environmental Management
    Assistant Secretary for Nuclear Energy
AUDIT REPORT ON MANAGEMENT CONTROLS OVER SELECTED ASPECTS OF THE DEPARTMENT OF ENERGY’S HUMAN RELIABILITY PROGRAM

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Management of the Human Reliability Program

Based on our survey work at two sites and our review of Human Reliability Program (Reliability Program) Implementation Plans from nine additional sites, we determined that individuals who required Reliability Program certification were enrolled in the process as necessary and were being re-certified within established timeframes. However, we noted inconsistencies in the implementation of the Reliability Program at sites reviewed that, if not corrected, could lead to issues within the program. Specifically, we identified differences in the methodologies used by Department of Energy (Department) sites to restrict Reliability Program certified individuals from performing critical duties based on the use of judgment impairing prescription medications. In addition, we noted inconsistencies in the application of the Department regulation regarding the consumption of alcohol prior to reporting for duty. Further, we noted variations in site requirements for the certification of Reliability Program management positions.

Medical Restrictions

During our review, we observed that Site Occupational Medical Directors (SOMD) had demonstrated wide interpretations regarding duty restrictions associated with the use of certain prescription medications prior to performing Reliability Program duties. At one site, according to the Department's Chief Medical Officer (CMO), a restriction used by the SOMD may not be sufficient to allow the effects of certain medications to dissipate. Additionally, differences between SOMDs in their approach to the use of these prescription medications could lead to violations if employees transfer between sites during periods of drug therapy.

To ensure that Reliability Program certified individuals are mentally and physically able to perform their duties, Department regulation requires Reliability Program certified employees to immediately report any physical or mental condition requiring medication or treatment to site occupational medical officials so that an evaluation of any potentially limiting medical conditions can be performed. Department regulation permits SOMDs to assess the use of prescription medications in relation to an individual's Reliability Program duties and make a determination if a reliability, safety, or security concern exists, and if so,
recommend that an individual be restricted or removed from duty status.

We found that SOMDs' approaches to restricting Reliability Program individuals from performing assigned duties based on prescription medications varied greatly between the sites we reviewed. For example, medical officials at the Pantex Plant (Pantex) allowed certain Reliability Program certified individuals to take prescription anti-anxiety, sedating sleep-aids, and narcotic pain relievers while off-duty as long as they waited at least eight hours before reporting for duty. According to the Department's CMO, however, using a blanket eight hour rule for prescription medication has no scientific basis since it does not consider the half-lives – how long it takes for half of the medication to be eliminated from the bloodstream – of each medication and may not allow the effects of these drugs to dissipate.

In contrast to Pantex, the SOMD at the Nevada Test Site (NTS) told us that he recommends that Reliability Program certified individuals not be allowed to perform their duties for the duration of the time that they are using prescription medications such as narcotic pain medications or sleep-aids. He imposed this standard because of his belief that these types of medications may cause impairment and affect the judgment or ability of the individual to safely and reliably perform assigned duties. Even if the employee takes these types of medications off-duty, the NTS SOMD and Psychologist indicated that they recommend that the employee be removed from their Reliability Program position until the drug has completely worked its way through the individual's system.

Concerns related to these differences in approach are exacerbated by the potential for Reliability Program certified individuals to temporarily transfer to another site. According to a site Reliability Program official, if a Reliability Program certified individual is temporarily assigned to another site, they remain under the policies of their permanent site in relation to performing their duties while taking prescription medications. The permanent site does not share medical information with the officials at the temporary site. In this instance, an individual may be conducting Reliability Program work while using a prescription medication in violation of site-specific policies.
Alcohol Use Approaches

We also noted varied applications of the Department's abstinence rule for consuming alcohol prior to performing Reliability Program duties. In particular, some Reliability Program certified employees are not subject to the abstinence rule. According to a Departmental Personnel Security (Personnel Security) official and the Department's CMO, given that their positions afford them access to sensitive facilities and programs, they believe that all Reliability Program persons should meet the highest standards of reliability and should be subject to the abstinence rule.

Department regulation prohibits employees who perform nuclear explosives duties and other designated employees from consuming alcohol within eight hours preceding scheduled work. In addition to the 8-hour abstinence rule, employees are not allowed to perform their duties if found to have a breath alcohol concentration of 0.02 percent or more. Reliability Program employees who do not perform nuclear explosives duties or are not designated by management are not subject to the 8-hour abstinence rule but are subject to the 0.02 percent breath alcohol concentration rule. The 8-hour abstinence rule and the 0.02 percent breath alcohol content are designed to ensure that employees report for duty alert and unimpaired.

While some sites applied these rules consistently, other sites' Reliability Program Implementation Plans revealed wide variability in their interpretations. The Office of Secure Transportation was somewhat more restrictive, using a 10-hour alcohol abstinence rule for individuals performing nuclear explosives duties, while Lawrence Livermore National Laboratory used an 8-hour restriction for all Reliability Program certified employees with nuclear explosives duties and a 4-hour alcohol restriction for all other Reliability Program certified employees. The Reliability Program Implementation Plans for the Y-12 National Security Complex (Y-12), Oak Ridge National Laboratory, Savannah River Site, Richland Operations Office, and Idaho National Laboratory had no positions designated under the 8-hour alcohol abstinence rule, but required all Reliability Program certified employees to abide by the 0.02 percent breath alcohol concentration requirement. A Personnel Security official as well as the Department's CMO believed that regardless of the Reliability Program employees' duties, based on the critical nature of their work and the potential impact on national
security, all Reliability Program employees should be subject to the 8-hour rule to ensure that they are free from the impairing effects of alcohol when reporting for duty.

**Certification of Reliability Program Management Officials**

We found that not all sites required Reliability Program management officials to be Reliability Program certified. Department regulation specifies positions that require individuals to be certified and allows sites to designate other positions critical to national security. According to the Department's CMO, consistent certification of those who manage Reliability Program individuals is important for proper supervision and decision making for highly sensitive activities.

Under Department regulation, three categories of employees must be Reliability Program certified: (1) those who access, transport, or protect certain types of special nuclear material (Category I SNM); (2) those who work with, protect, move or have any other nuclear explosives duties, and, (3) those with access to information concerning vulnerabilities in protective systems when transporting nuclear explosives, nuclear devices, selected components, or Category I SNM. Each site may designate other positions for the Reliability Program that afford the potential to significantly impact national security or cause unacceptable damage, including Reliability Program management.

During our review, we noted that site policies and procedures varied on certification requirements for management officials responsible for implementation of the Reliability Program. We found that both Pantex and NTS had employees that fell into the three categories above. However, Pantex designated Reliability Program management officials as positions that need to be certified, whereas NTS did not. The Department's CMO indicated that certification is significant because management has the ultimate responsibility for determining which persons may have access to nuclear explosives and Category I SNM.

**Current Guidance Not Specific**

These inconsistencies occurred because the Department lacks clear program guidance. In particular, the current regulation does not specify the types/classes of prescription medications that should disqualify an individual from performing Reliability Program duties. It also lacks specificity for the application of the 8-hour abstinence rule and whether
Reliability Program management officials should be certified. We coordinated with Personnel Security during our review and made them aware of the inconsistencies we identified.

Current Department regulation does not identify classes of prescription medications that would require individuals to be removed, whether temporarily or permanently, from the program. In addition, the regulation does not provide specific guidance or direction concerning the use of work restrictions for Reliability Program employees undergoing treatment with judgment impairing medications. Instead, the regulation leaves these decisions to each SOMD.

Our inspection of The Human Reliability Program at Lawrence Livermore National Laboratory (DOE/IG-0732, June 2006) noted that the Department-wide Reliability Program drug testing program did not include categories of drugs that are commonly abused. This report recommended that the Department review the adequacy of the current Reliability Program drug testing categories for identifying commonly abused drugs, and update the Reliability Program drug testing program, as necessary, to address additional drugs commonly abused. The Department concurred with this recommendation and commissioned a study to examine whether or not to expand its drug testing program. The study concluded that testing for additional medications was not warranted.

However, our recent investigative efforts at the Oak Ridge Complex (Oak Ridge) revealed that there may be an added benefit to expanding the Department's drug testing program. Specifically, a recent unrelated, anonymous report lead to an investigation that identified Reliability Program employees that were using anabolic steroids, commonly abused drugs that would not otherwise have been detected under the current drug testing program. Certain of the identified individuals also claimed that they were not aware of requirements to report the use of drugs of this type. The discovery is significant because steroid abuse can lead to serious side effects such as aggressive behavior, mood swings, and depression which could impair an individual's judgment and disqualify them from participation in the Reliability Program. Given the potential side effects of medications such as narcotic pain relievers, muscle relaxants and steroids, a more comprehensive listing of medications...
requiring work restrictions could serve to ensure that Reliability Program employees are performing their duties free from the impairing effects of certain prescription medications and other drugs.

Also, Department regulation does not provide specific guidance as to which Reliability Program positions should be designated and therefore subject to the 8-hour rule for the consumption of alcohol prior to reporting for duty. It also does not specify whether Reliability Program management positions need to be Reliability Program certified. These decisions are at the discretion of the site manager or other management officials. Because all Reliability Program certified employees have the ability to significantly impact national security, the CMO and a Personnel Security official indicated that all Reliability Program certified individuals should perform their duties in a responsible manner and free from impairment.

Impact on the Program

Compromise of Departmental facilities, materials, or information could seriously harm workers and the general public or adversely impact the security of the United States. Without specific guidance, Personnel Security cannot meet its mandate to ensure that personnel security program requirements are consistently and effectively implemented from site to site. The varying standard could, for example, mistakenly permit those suffering from the lingering effects of drugs or alcohol to perform critical functions which, if not faithfully executed, could have disastrous effects. Additionally, for the issues noted in this report, and the significance of the duties of Reliability Program personnel, we believe that the implementation of work restrictions should be consistent between Departmental sites.

RECOMMENDATIONS

To address the inconsistencies identified in our report, we recommend that the Director, Office of Departmental Personnel Security take the following action:

1. Revise the Department's policy to clarify: (1) the types/classes of prescription medications that warrant removal, temporarily or permanently, from the program, (2) which Reliability Program positions should be designated under the 8-hour alcohol abstinence rule, and, (3) whether Reliability Program management officials must be certified; and,
2. Given the circumstances at Oak Ridge, increase awareness of reporting responsibilities and impact of potential side effects for medications and/or commonly abused substances such as anabolic steroids through additional training and consider whether expanding the Department's drug testing program would be beneficial.

Additionally, we recommend that the Director, Office of Departmental Personnel Security in conjunction with the Director, Office of Independent Oversight take the following action:

3. Ensure that the program requirements revised based on the recommendations above are consistently applied across the Department's field sites with Reliability Program certified employees.

**MANAGEMENT REACTION**

The Office of Health, Safety and Security (HSS) and the National Nuclear Security Administration (NNSA) generally concurred with the recommendations except for part 3 of Recommendation 1 regarding the certification of Reliability Program management officials.

HSS concurred with parts 1 and 2 of Recommendation 1 and with Recommendations 2 and 3. HSS identified actions it plans to complete to address each of these recommendations, including clarifying policies and guidance and establishing a working group to evaluate whether the Department's drug testing program should be expanded. In response to part 3 of Recommendation 1, HSS indicated that it is in the process of revising the policy governing the designation of Reliability Program positions; however, it believed that a blanket policy may not be appropriate.

NNSA concurred with the premise of Recommendation 1 and stated that it plans to work with Personnel Security on revisions to Department policy. However, NNSA did not agree that Reliability Program management officials need to be included in the program. NNSA indicated that there are no identified significant risks associated with Reliability Program management officials not being certified.

**AUDITORS COMMENTS**

We consider management's comments and planned actions to be responsive to our recommendations. While the Office of Inspector General recognizes that the designation of positions should be based on risk/vulnerability
assessments, we believe that in a number of situations, the certification of management officials can be vital to implementation of the Reliability Program. As outlined in the report, these individuals are ultimately responsible for determining which individuals have access to nuclear explosives and Category I SNM. We included the full text of management's comments in Appendix 3.
OBJECTIVE
To determine whether the Department of Energy’s (Department) Human Reliability Program (Reliability Program) is being administered in an effective manner.

SCOPE
We conducted the audit from December 2008 to September 2009 at Department of Energy Headquarters in Washington, DC and Germantown, MD; the Pantex Plant (Pantex) in Carson County, TX; and the Nevada Test Site (NTS) in Nye County, NV. In addition, we collected information from nine additional field site locations with Reliability Program certified individuals.

METHODOLOGY
To accomplish the audit objective, we:

- Reviewed applicable Federal and Departmental regulations related to the Reliability Program and workplace substance abuse programs;
- Reviewed documentation such as site Reliability Program Implementation Plans, Site Occupational Medical Director annual reports, and site-level procedures;
- Performed sample test work of Reliability Program certified individuals at Pantex and NTS to ensure that individuals were properly enrolled and re-certifications were within established timeframes;
- Held discussions with officials from Pantex and NTS regarding administration of the Reliability Program; and,
- Held discussions with Headquarters officials regarding management of the Reliability Program and programmatic responsibilities.

We conducted this performance audit in accordance with generally accepted Government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. Accordingly, the audit included reviews of Department and regulatory policies and procedures related to
the Department's management of the Reliability Program. We assessed performance measures in accordance with the Government Performance and Results Act of 1993 and concluded that the Department had not established performance measures related to administration of the Reliability Program. Because our review was limited, it would not necessarily have disclosed all internal control deficiencies that may have existed at the time of our audit. We conducted a limited reliability assessment of computer-processed data sufficient to achieve our audit objective.

Both the Department and NNSA waived an exit conference.
PRIOR REPORTS

Office of Inspector General Report

- *The Human Reliability Program at Lawrence Livermore National Laboratory* (DOE/IG-0732, June 2006). The purpose of the review was to determine if the Lawrence Livermore National Laboratory Human Reliability Program (Reliability Program) was administered in accordance with existing policy requirements. The review found that the Reliability Program was not administered in full accordance with applicable requirements. Specifically, the report noted that: (1) the methodology used to select individuals for drug and alcohol testing did not ensure that the tests were random; (2) some personnel who were called into work for unscheduled Reliability Program duties were not questioned about whether they had consumed alcohol; and, (3) Reliability Program medical reviews were not always as comprehensive as required by Department regulations.

Government Accountability Office Report

- *Nuclear and Worker Safety: Actions Needed to Determine the Effectiveness of Safety Improvement Efforts at NNSA’s Weapons Laboratories* (GAO-08-73, October 2007). This report found that the three National Nuclear Security Administration (NNSA) weapons laboratories have experienced persistent safety problems – including accidents and violations of nuclear safety rules designed to protect workers and the public – stemming largely from long-standing management weaknesses. Since 2000, nearly 60 serious accidents or near misses have occurred at these laboratories. The report noted that factors contributing to these safety problems generally fell into three key areas: (1) a relatively lax attitude toward safety procedures; (2) weaknesses in identifying safety problems and taking appropriate corrective actions; and, (3) inadequate oversight by NNSA site offices. The report noted that NNSA and its contractors had been taking some steps to address weaknesses in these three key areas. However, NNSA faced two principal challenges in its continuing efforts to improve safety at the laboratories. First, the agency lacked a way to determine the effectiveness of its safety improvement efforts, in part because those efforts rarely incorporate outcome-based performance measures. Second, because of the long-standing safety problems at the laboratories, concerns had been raised over the agency's shift in its oversight approach to rely more heavily on contractors' own safety management controls.
Appendix 3

Department of Energy
Washington, DC 20585

November 4, 2009

MEMORANDUM FOR GREGORY H. FRIEDMAN
INSPECTOR GENERAL

FROM:
GLENN A. PODONSKY
CHIEF, HEALTH, SAFETY AND SECURITY OFFICER
OFFICE OF HEALTH, SAFETY AND SECURITY

SUBJECT: COMMENTS FOR IG DRAFT AUDIT REPORT: "Management Controls over Selected Aspects of the Department of Energy's Human Reliability Program" (IG-AO09PT029)

The Office of Health, Safety and Security (HSS) has reviewed your October 7, 2009, memorandum and provides the following responses to the recommendations outlined in your draft report. HSS solicited input from our Office of Independent Oversight as well as Offices of Science, Environmental Management, Nuclear Energy and the National Nuclear Security Administration as the Department of Energy (DOE) organizations supporting the majority of the Human Reliability Program (HRP) activities.

HSS views this report as timely and generally supportive of policy and procedural changes currently under consideration. The HSS Office of Departmental Personnel Security is in the process of revising 10 C.F.R. 712. We are reviewing and assessing every requirement to ensure the DOE HRP provides the level of surety that the mission demands for both personnel reliability and security purposes. We have opened a dialogue with the sites and other stakeholders. We anticipate the changes being developed will improve program management and reduce unnecessary position designations while allowing sites and programs to concentrate program resources on the most critical and sensitive HRP positions.

Recommendation 1:

Revise the Department's policy to clarify: (1) the types/classes of prescription medications that warrant removal, temporarily or permanently, from the program; (2) which Reliability Program positions should be designated under the 8-hour abstinence rule; and, (3) whether Reliability Program management officials must be certified.

Management Response:

Specific responses keyed to the sub parts of this recommendation are as follows:

(1) Concur. While it is impossible to keep highly transitory lists of specific prescription medications current in a rule or manual, our plan is to work with the HRP medical community and other stakeholders to identify classes of medications that warrant removal from the program.
Appendix 3 (continued)

(2) Concur. We are addressing this issue as part of our ongoing policy review and will clarify policies and guidance as necessary. It is noted that while it is the responsibility of the sites to carefully assess their HRP positions and make determinations on a case-by-case basis, our policy must provide adequate guidance on how such assessments should be made by setting forth qualifying criteria as appropriate.

(3) Partially concur. We are in the process of revising the policy governing the designation of HRP positions. Some management positions may warrant consideration for HRP status. However, a blanket policy may not be appropriate. The sites are required to continually assess their HRP positions and make their determinations based on mission criticality and sensitivity.

Recommendation 2:

Given the circumstances at Y-12, increase awareness of reporting responsibilities and impact of potential side effects for medications and/or commonly abused substances such as anabolic steroids through additional training and consider whether expanding the Department’s drug testing program would be beneficial.

Management Response:

Concur. We agree that training and awareness in this area would be beneficial. We will provide educational information to assist the sites in their ongoing training programs.

The Office of Departmental Personnel Security plans to establish a working group to evaluate whether the Department’s drug testing program should be expanded to include testing for anabolic steroids.

Recommendation 3:

Ensure that the program requirements revised based on the recommendations above are consistently applied across the Department’s field sites with Reliability Program certified employees.

Management Response:

Concur. While we agree that HSS has a role to assist and monitor site program performance, the report should recognize that the ultimate responsibility for compliance and oversight of the program, however, rests with the line organizations that are responsible for mission accomplishment.

cc: Ines Triay, EM-1
    Thomas D’Agostino, NA-1
    Warren Miller, NE-1
    William Brinkman, SC-1
MEMORANDUM FOR Rickey R. Hass  
Deputy Inspector General  
for Audit Services  

FROM: Michael C. Kane  
Associate Administrator  
for Management and Administration  

SUBJECT: Comments to the IG’s Draft Report on DOE’s Human Reliability Program; Proj. No. A09PT029; IDRMS No. 2008-03643

The National Nuclear Security Administration (NNSA) appreciates the opportunity to provide the Inspector General (IG) comments to their draft report, Management Controls over Selected Aspects of the Department of Energy’s Human Reliability Program. I understand that the IG performed this audit to determine whether the Department is administering the program in an effective manner.

The report notes that there are inconsistencies in how certain elements of the Human Reliability Program (HRP) guidance/requirements are interpreted and implemented across the complex. While NNSA agrees with that basic premise, we also believe that we are in compliance with the guidance/requirements as it is currently written.

Below are NNSA management comments to the IG recommendations; we have also attached technical comments for your consideration.

Recommendation 1: Revise the Department’s policy to clarify……

NNSA Response: Management concurs that policy must be clarified and revised in some instances. NNSA’s Office of Defense Nuclear Security is currently working with the Office of Departmental Personnel Security in revising 10 CFR 712 and addressing concerns raised in the IG report. NNSA offers the following observations on the three parts of recommendation 1:

1. It would be extremely difficult from a policy perspective to maintain a list on the types/classes of prescription medications especially given the Department’s RevCom and Rulemacs making process. NNSA believes that Site Office Medical Directors are in the best position to make determinations as to which prescription medications warrant removal. NNSA does support the specification of general classes of medication that could warrant removal.
2. The current rule establishes positions subject to the 8-hour alcohol abstinence rule by position duties. In resolving this concern, NNSA is currently reviewing all of its site HRP implementation plans and will address any ambiguities in the 8-hour abstinence rule for the upcoming biannual plan submission. Due to the varying mission and scope of NNSA sites, we believe that ultimately Site Office Managers should retain flexibility in determining any additional positions subject to the 8-hour alcohol abstinence rule.

3. NNSA does not agree that HRP management officials need to be included in the HRP program. There are no current identified significant risks associated with HRP management officials being non-HRP certified. HRP management officials requiring continuous unescorted access to areas that have been identified as HRP areas are placed in the HRP program. Any decision to include HRP management officials in covered HRP positions should be based on a viable risk/vulnerability assessment.

**Recommendation 2:** Given the circumstances at Y-12, increase awareness.....

**NNSA Response:** Management concurs with the recommendation of increasing awareness of reporting responsibilities and impacts of commonly abused substances. It is also important to note that the presence of anabolic steroids in testing results may not indicate misuse of a controlled substance. Recent testimony by the Deputy Assistant Administrator for Diversion Control, Drug Enforcement Agency to the Subcommittee on Crime and Drugs, Senate Judiciary Committee, indicates that many people may take anabolic steroids without knowing. Some over the counter dietary and body building supplements contain steroids without labeling them on the product.

**Recommendation 3:** Ensure that the program requirements revised.....

**NNSA Response:** NNSA will support revised HRP requirements, however, any new requirements should be carefully considered through cost benefit analysis and risk/vulnerability assessments. The rule establishes a baseline requirements program and provides for individual sites to go above and beyond those requirements. All NNSA sites meet this baseline requirement and typically provide additional requirements to their programs due to site specific mission needs and/or circumstances.

If you have any questions concerning this response, please contact JoAnne Parker, Acting Director, Policy and Internal Controls Management at 202-586-1913.

Attachment
cc:  Associate Administrator for Defense Nuclear Security
     Director, Service Center
     Senior Procurement Executive
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4. What additional actions could the Office of Inspector General have taken on the issues discussed in this report which would have been helpful?

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