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CP3-QA-2002 FRev. 1B	TITLE: Surveillance	Page 1 of 17

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REVISION/CHANGE LOG

Revision/Change Letter	Description of Changes	Pages Affected	Date of Revision/Change
FR0	Blue Sheeted Version	All	10/20/2017
FR1	Incorporated Non-Intent Changes to move from Bluesheet	All	11/29/2017
FR1A	Process change to remove requirements for responsible manager's signature	3-4, 6, 9, 16-17	7/25/2018
FR1B	Clarify surveillance use for NNSS WAC.	12	8/22/2018

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1.0 PURPOSE AND SCOPE

1.1 Purpose

This procedure defines the *Four Rivers Nuclear Partnership (FRNP), LLC, Paducah Gaseous Diffusion Plant (PGDP) Deactivation and Remediation (D&R)* procedure for performing surveillances. Surveillances support assessment requirements and commitments specified in the Integrated Safety Management System and Quality Program. Surveillances provide management with observation-based assessments of work performance to evaluate personnel knowledge and skill; the quality of work being performed; adequacy of and compliance with procedures; and the state of facilities, material conditions, safety, and housekeeping practices.

1.2 Scope

The requirements of this procedure apply to all *Four Rivers Nuclear Partnership (FRNP), LLC, Paducah Gaseous Diffusion Plant (PGDP) Deactivation and Remediation (D&R)* and contractor labor resources personnel who schedule, plan, conduct, or report quality program driven surveillance activities.

This procedure applies to surveillances performed both on-site and off-site of *Four Rivers Nuclear Partnership (FRNP), LLC, Paducah Gaseous Diffusion Plant (PGDP) Deactivation and Remediation (D&R)* activities, contractors, and suppliers. This procedure does **NOT** apply to surveillances solely governed by other *Four Rivers Nuclear Partnership (FRNP), LLC, Paducah Gaseous Diffusion Plant (PGDP) Deactivation and Remediation (D&R)* procedures such as those conducted for Technical Safety Requirements (TSR) under CP3-SM-0006, *TSR Implementation*.

Surveillances in progress at FRev 1A of this procedure may use the previous version of CP3-QA-2002-F01 and N/A the block for responsible manager. Chg. A

2.0 REFERENCES

2.1 Use References

- CP2-QA-1000, *Quality Assurance Program Description*
- CP3-HS-2009, *Stop/Suspend Work*
- CP3-QA-1008, *Auditor/Assessor Qualification, Training, and Certification*
- CP3-QA-2001, *Approved Supplier Selection Evaluation Approved Supplier Maintenance*
- CP3-QA-2005, *Nonconformance Control*
- CP3-QA-3001, *Issues Management*
- JHA-9698, *JHA Site Safety Orientation* Chg. A

2.2 Source References

- 10 CFR 830.122, *Quality Assurance Criteria*
- ASME Nuclear Quality Assurance (NQA)-1-2008, *Quality Assurance Requirements for Nuclear Facility Applications* (with Addenda through 2009)
- CP3-QA-1001, *Graded Approach*
- CP3-QA-1003, *Management and Self-Assessments*
- CP3-QA-1006, *Suspect/Counterfeit Items*
- DOE O 226.1B, *Implementation of Department of Energy Oversight Policy*

- DOE O 414.1D, Admin Change 1, *Quality Assurance*
- EM-QA-001, Rev. 1, *EM Quality Assurance Program*

3.0 COMMITMENTS

None

4.0 RESPONSIBILITIES

Responsibilities are outlined in Section **6.0**.

5.0 GENERAL INFORMATION

5.1 Persons performing surveillances should have knowledge of both the area and the work that they are assessing and of the assessment process and follow the requirements of JHA 9698, *JHA Site Safety Orientation*, for tours and inspections. Chg. A

5.2 Qualification/certification of personnel performing a surveillance is based on the intent of the surveillance use and must consider the following:

- Surveillances **NOT** used to supplement the audit process - Although the performance of a surveillance should follow the requirements in ASME NQA-1-2008, *Quality Assurance Requirements for Nuclear Facility Applications* (with Addenda through 2009), Part I, Requirement 18, Section 400, "Performance", a surveillance is **NOT** an audit, and may be performed by individuals with appropriate experience and training to this procedure. As a result, most surveillances do **NOT** require NQA-1 qualified assessors or NQA-1 certified lead assessors or to meet associated NQA-1 assessment/audit requirements.
- Surveillances may be used to supplement the audit process. Although a surveillance is **NOT** an audit, a surveillance may be performed to supplement the audit process and may be used to satisfy part or all of an audit requirement provided the NQA-1 quality audit/assessment requirements are met. This includes use of a certified lead NQA-1 assessor [NQA-1a, 2009, Part III, Subpart 3.1, Appendix 18A-1(205)] according to CP3-QA-1008, *Auditor/Assessor Qualification, Training, and Certification.*
- See Appendix B, *Surveillance Guidelines*, of this procedure for examples of surveillance activities that are used to supplement the formal independent audit/assessment process and require the additional NQA-1 rigor and controls to conduct the surveillance.

5.3 Personnel assigned should have the appropriate clearances necessary to access the areas and the work that they will be observing.

5.4 **When** conducting surveillance activities, aspects such as importance to safety, hazard levels, complexity, risk to workers and the public, and other criteria as described in CP3-QA-1001, *Graded Approach*, are to be considered.

5.5 Individuals performing surveillance activities on facilities/activities with TSRs shall read and understand those requirements as they relate to access, work control, and specifically to surveillance activities.

5.6 Prior to commencing surveillance activities, the status of the work area shall be ascertained. For a work area that is a controlled or regulated area, compliance with the requirements of existing permits is necessary while performing the surveillance activity.

5.7 This procedure implements elements of a comprehensive and integrated contractor assurance system required by the Department of Energy (DOE) Order (O) 226.1B, *Implementation of Department of Energy Oversight Policy*. In addition, this procedure supports the Integrated Safety Management System by establishing a surveillance process that provides feedback and improvement of actual work activity - one of the five core functions of ISMS. In addition, this procedure complies with 10 Code of Federal Regulations (CFR) 830, Subpart A, *Quality Assurance Requirements*; DOE O 414.1D, Admin Change 1, *Quality Assurance*; EM-QA-001, Rev. 1, *EM Quality Assurance Program* and CP2-QA-1000, *Quality Assurance Program Description for the Paducah Gaseous Diffusion Plant, Paducah, Kentucky Four Rivers Nuclear Partnership*.

5.8 Surveillances are performed based on the annual assessment plan or as deemed necessary by management.

5.9 In general, a surveillance supports the Assessment/Audit Program by providing reviews, evaluations, and assessments that help direct the auditing function to areas requiring the most attention and support.

5.10 Surveillances typically focus on a single operation, activity, or process. They involve observation of real-time activities augmented by discussions and interviews with personnel, review of documentation to verify conformance with specified requirements, and evaluation of adequacy and effectiveness.

5.11 Surveillances differ from inspections because surveillances are performance-based assurance activities focusing on real-time observations of work. Surveillances should always look for improvement opportunities and should also include work being performed by subcontractors in or on *Four Rivers Nuclear Partnership (FRNP), LLC, Paducah Gaseous Diffusion Plant (PGDP) Deactivation and Remediation (D&R)* facilities.

5.12 **If** problems are found in the product or work processes, **then** the surveillance team evaluates the methods and procedures used to implement the applicable requirements to find the failure that led to the problems. Place emphasis on getting the full story on the problem before coming to a conclusion. **When** a problem is discovered, identify the extent of the problem.

5.13 Surveillance activities may **NOT** be used to replace independent assessment/audit functions or requirements unless the surveillance meets the standards of an independent audit/assessment (e.g., uses a certified independent NQA-1 lead auditor, uses surveillance plan, the report is signed by the lead assessor, and the report includes applicable effectiveness statement for assessed element(s)).

5.14 A surveillance may be used to provide a planned and purposeful review of activities, processes or procedures to verify whether an item, document, or activity conforms to specified requirements.

5.15 The Contractor Performance Assurance Program (CPAP) Manager may perform the function of Quality Assurance/Quality Control Program Manager (QA/QC Manager), as necessary, in this procedure (e.g., for independent purposes).

6.0 INSTRUCTIONS

6.1 Surveillance Assignment

<u>QA/QC Manager</u>

Ensure only personnel with appropriate experience who have been trained to this procedure and associated requirements are assigned to perform the surveillance.

6.2 Surveillance Planning

QA Specialist/(NQA-1 Lead Assessor if surveillance used for independent assessment requirements)

6.2.1 Determine the scope, duration, and depth of the surveillance through an evaluation of the scope of the activities being performed, emerging project issues and/or priorities, and the quality history of the facility, workers, or processes.

6.2.2 Organize the scope of the surveillance by reviewing background information pertaining to the areas being observed (see Appendix B, *Surveillance Guidance* for guidance).

6.2.3 Develop the plan to include the following:

- Prepare page 1 of CP3-QA-2002-F01, *Surveillance Checklist*, to identify the surveillance number, assigned personnel, scope (e.g., activities to be included in the surveillance), and documents to review.
- Identify the Lines of Inquiry (LOI) on Page 2 of CP3-QA-2002-F01.
- **If** the surveillance is used to meet independent assessment requirements, **then** ensure the plan includes the following:
  - Surveillance scope
  - Requirements
  - Surveillance personnel
  - Activities to be surveilled (e.g. Checklist, LOIs)
  - Organization to be notified
  - Schedule
  - CP3-QA-2002-F01, *Surveillance Checklist*

6.2.4 Obtain QA/QC Manager's concurrence of the activities to be assessed on the checklist.

6.2.5 Schedule the surveillance, via e-mail, phone, or direct discussion, with the organization being observed, responsible manager **and** include the following: Chg. A

- The activities to be covered
- The scope and plan of the surveillance
- The required assistance, to include knowledgeable personnel, assigned to accompany the surveillance personnel, to provide information and confirmation of surveillance results

6.2.6 Establish appropriate lines of communication with the organization being observed.

6.2.7 Obtain commitments for access to organizational areas and personnel.

6.3 Surveillance Performance

QA Specialist/(NQA-1 qualified assessor or NQA-1 certified lead assessor if surveillance used for independent assessment requirements)

6.3.1 Using the CP3-QA-2002-F01, witness activities, interview personnel, **and** evaluate documentation as applicable for compliance with requirements.

6.3.2 Immediately report potentially significant conditions adverse to quality and/or safety to the responsible Manager/Supervisor and to the QA/QC Manager **and** follow CP3-QA-3001, *Issues Management.*

6.3.3 Keep the responsible Manager/Supervisor informed of any conditions adverse to quality and/or safety during the surveillance so those conditions can be corrected during the surveillance, **if** practical.

6.3.4 **If** an operation or process is identified that seriously jeopardizes safety, health, or the environment, has imminent life-threatening implications, or creates a significant condition adverse to quality, **then** immediately suspend work according to CP3-HS-2009, *Stop/Suspend Work.*

6.3.5 Indicate the results of the surveillance verification activity on CP3-QA-2002-F01 with a results summary and mark as "Acceptable" or "Problem" for each checklist line item.

6.3.6 **If** findings, observations, and process improvements identified during normal surveillance activities (i.e., **NOT** independent assessment type surveillance) were fully addressed/corrected during the surveillance, **then** follow Step **6.3.9** to document the condition(s).

6.3.7 **If** findings, observations, and process improvements identified during independent assessment type surveillance activities or have **NOT** been fully addressed during the course of any surveillance (**NOT** just independent assessment type), **then**, based on the severity level and type, document according to one or more of the following as applicable:

- CP3-QA-3001, Issues Management
- CP3-QA-2005, Nonconformance Control

6.3.8 **If** associated with an applicable approved supplier, **then** document according to CP3-QA-2001, *Approved Supplier Selection Evaluation Approved Supplier Maintenance.*

NOTE:

Step **6.3.9** is required for all surveillances.

6.3.9 For findings, observations, and process improvements include a summary of each in the "Discussion of Results" section of the report along with corresponding unique nonconformance number, issue number, or supplier issue number as applicable. In addition, ensure the details of the conditions are noted in the appropriate checklist item remarks section, as applicable.

6.3.10 **If** the surveillance is used to meet independent assessment requirements, **then** include an effectiveness statement for the assessed element in the results section.

6.3.11 See Appendix B for surveillance guidelines to include guidance on effectiveness statements for independent assessment surveillances, as necessary.

6.3.12 Identify **or** attach objective evidence to the CP3-QA-2002-F01, as necessary.

NOTE:

An email is acceptable to provide results of the surveillance to the responsible manager/supervisor.

6.3.13 Provide an out brief of the results of the surveillance to the responsible Manager/Supervisor of the function/department being observed.

6.4 Completing the Surveillance Checklist or Report

QA Specialist/(NQA-1 qualified assessor or NQA-1 certified lead assessor if surveillance used for independent assessment requirements)

NOTE:

QA Specialist must be NQA-1 qualified assessor or NQA-1 certified lead assessor if surveillance used for independent assessment requirements.

Step **6.4.1** through **6.4.5** may be completed in draft form for the execution of Step **6.3.13**.

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6.4.1 Complete all sections on the CP3-QA-2002-F01 with the appropriate information.

6.4.2 **If NOT** yet obtained, **then** obtain a number **and** log the surveillance.

6.4.3 Text Deleted

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NOTE:

If the surveillance was used for independent assessment requirements, **then** the following step is conducted by or overseen by the assigned NQA-1 certified lead assessor.

6.4.4 Summarize the results, including applicable findings, observations, and process improvements and corresponding unique non-conformance, issue or supplier issue numbers as applicable for each identified, on the CP3-QA-2002-F01 in the "Discussion of Results" section. Use Appendix B for guidance.

6.4.5 **If** the surveillance is used to meet independent assessment requirements, **then** ensure the completed checklist and report includes the surveillance scope, names of NQA-1 independent assessors and lead assessor and persons contacted, summary of audit results, effectiveness statement for assessed element, and description of each condition adverse to quality that was identified.

NOTE:

Supplier/subcontractor deficiencies identified during the surveillance are processed through their own corrective action process and copies of those forms need **NOT** be referenced or attached.

6.4.6 Reference **or** attach copies of any completed forms for tracking unsatisfactory results per Steps **6.3.12** and **6.3.13** as applicable.

NOTE:

If the surveillance was used for independent assessment requirements, **then** the following step is conducted by the NQA-1 certified lead assessor

6.4.7 Sign **and** date the CP3-QA-2002-F01.

6.4.8 Text Deleted

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6.4.9 Forward the completed and any associated documents to the QA/QC Manager for review.

QA/QC Manager

6.4.10 Review the CP3-QA-2002-F01 and associated documents for correctness, accuracy, and legibility.

6.4.11 **If NOT** acceptable, **then** return the CP3-QA-2002-F01, with comments, to the author for correction.

6.4.12 **If** acceptable, **then** sign **and** date the CP3-QA-2002-F01.

Quality Specialist/(NQA-1 qualified assessor or NQA-1 certified lead assessor if surveillance used for independent assessment requirements)

NOTE:
Typically surveillance reports are distributed within 30 days of completion of the surveillance activity.

6.4.13 Distribute the CP3-QA-2002-F01, including identified deficiencies, to the following at a minimum:

- Responsible Manager/Supervisor of the area observed
- QA/QC Manager
- Issues Management Quality Specialist (if issues are identified)
- Author
- Waste Certification Official (if the surveillance involved waste packaging or shipping activities)
- CPAP Manager **if** the surveillance was used to meet an internal independent assessment requirement
- Material Review Board chair **if** the surveillance resulted in a non-conformance report
- Other pertinent Quality Specialist(s) **if** the surveillance was used for placement or retention of a supplier on the Approved Supplier List.

6.4.14 Complete the CP3-QA-2002-F01 **and** process for record keeping.

6.4.15 Update the surveillance log with the date the distribution was made.

6.5 Follow-up Actions

Responsible Manager/Supervisor

NOTE:
Corrective actions performed by suppliers or subcontractors are processed according to their own corrective action process and verified by the Quality Specialist.

If corrective actions are required, **then** complete those actions according to CP3-QA-3001, *Issues Management* or CP3-QA-2005, *Nonconformance Control* as identified in the CP3-QA-2002-F01, as applicable.

7.0 RECORDS

7.1 Records Generated

The following records are generated by this procedure:

CP3-QA-2002-F01, *Surveillance Checklist*

Forms are to be completed according to CP3-OP-0024, *Forms Control.*

7.2 Records Disposition

The records are to be maintained according to CP3-RD-0010, *Records Management Process.*

Appendix A – Acronyms/Definitions

ACRONYMS

CFR – Code of Federal Regulations

CPAP – Contractor Performance Assurance Program

D&R – Deactivation and Remediation

DOE – U.S. Department of Energy

ESH&Q - Environmental, Safety, Health & Quality

LOI – Lines of Inquiry

NQA – Nuclear Quality Assurance

O – Order

PGDP – Paducah Gaseous Diffusion Plant

TSR – Technical Safety Requirement

DEFINITIONS

Acceptable (Satisfactory) – The item or line of inquiry/characteristic being reviewed meets specified requirements.

Checklist – A document containing a series of statements and/or questions used to gain sufficient information to determine if objectives and/or expectations have been achieved and accomplished.

Condition Adverse to Quality – An all-inclusive term used in reference to any of the following: failures, malfunctions, deficiencies, defective items, and nonconformances. A significant condition adverse to quality is one that, if uncorrected, could have serious effect on safety or operability.

Corrective Action – Those activities required to resolve identified issues and reasonably prevent or minimize recurrence.

Finding – A direct violation of an existing requirement and includes conditions adverse to quality. A series of related or "like" findings may be symptoms of an underlying systemic problem; therefore, a single issue should be developed that consolidates and cites the individual findings as evidence of a system breakdown.

Nonconformance – A deficiency in characteristic or documentation, that renders the quality of an item or activity unacceptable or indeterminate.

Noncompliance – Failure of a(n) process, procedure or implementation to meet defined project, contract or customer requirements.

Not Evaluated (N/E) – A requirement appearing on a checklist intended to be evaluated, but was **NOT**. (When this occurs, an explanation should be given as to why the requirement was **NOT** evaluated.)

Objective Evidence – Any fact, information, or record, either quantitative or qualitative, pertaining to the quality of an item, service, process, or end-product that is based upon direct observation, measurement, test, or documentation that can be verified without dependence upon hearsay or second party attestations.

Observation – Surveillance results that note a 1) weaknesses in a program or procedure that if **NOT** corrected may escalate to a finding or condition adverse to quality; 2) marginally acceptable condition(s) or conclusions that are **NOT** a deviation from a written requirement; or 3) opportunity for improvement or cost savings. A series of related or "like" observations may be symptoms of an underlying systemic problem; therefore, a single issue should be developed that consolidates and cites the individual observations as evidence of a system breakdown.

Problem (Unsatisfactory) – the item or line of inquiry/characteristic being reviewed does **NOT** meet the criteria or specified requirements and is documented as a finding.

Process Improvement – An action that will result in positive impact on a process or service.

Appendix A – Acronyms/Definitions (Continued)

Quality – A condition achieved when an item, service, or process meets or exceeds the user's requirements and expectations.

Service – The performance of activities such as design, fabrication, inspection, nondestructive examination, repair, or installation.

Surveillance – The act of monitoring or observing to verify whether an item, document or activity conforms to specified requirements. Surveillance also includes self-assessments performed by the WCO/AWCO in accordance with CP3-QA-1003, *Management and Self-Assessments*, which may be used for lead auditor roll-up input when performing and documenting the annual independent assessment under Section 5.10 of the NNSS WAC. Chg B

Appendix B – Surveillance Guidelines

Types of background information to be researched or reviewed might include the following:

- Previous surveillances and nonconformance data/reports
- Previous audit/assessment results
- Current performance requirements existing for the service, organization, or facility
- Current procedures, policies, or programs
- Work plans or TSRs
- Government directives or regulations
- Past corrective actions, nonconformances, or deficiencies
- Accepted Corrective Action Plans or follow-up required actions

What to consider when preparing a checklist:

- Departments, sections or other organizational units associated with the surveillance activity.
- Applicable requirements to the surveillance activity.
- Problem areas, unresolved assessment/audit results, etc.
- The principal personnel to be involved in the surveillance.
- The checklist's appropriateness as to the scope of the surveillance, work status, clarity, and relative importance.
- The scope of the surveillance in relationship to the on-going work within the observed organization.

Utilize the following guidelines, as intended, to assist in determining effectiveness for the assessed element(s), as applicable:

- Effective – the element is documented, meets requirements with only minor administrative or technical noncompliance that does **NOT** impact safety, reliability, or regulatory commitment; the element produces expected results as scheduled/budgeted, but occasional deviations occur or management intervention is necessary; and personnel report issues into issues management where required and on-going improvement occurs.
- Partially Effective – the element is documented, meets minimal requirements, but does **NOT** consistently meet expectations. Isolated errors exist which do **NOT** pose imminent safety hazard but inhibit the element from achieving its objectives. The element does **NOT** consistently meet expected results. In addition, inspection and audit processes find problems; however, the workforce is **NOT** engaged with improvement as evidenced through limited activity in the corrective action system for the element.
- Ineffective – the element is **NOT** documented in significant areas; implementation is **NOT** conducted in significant areas; errors impact safety, reliability, and/or regulatory compliance; personnel are unaware of their responsibility to perform per procedure or aware of the procedure; expected results are routinely **NOT** met; and neither the inspection, audit, nor workforce use the corrective action system for the element

Appendix B – Surveillance Guidelines (Continued)

Suggestions when performing the surveillance:

- Document both conformances and deficiencies
- A specific requirement or commitment should be used as a reference for each surveillance result
- Observing the work area and reviewing the documented evidence will help ensure implementation is, in fact, being carried out properly
- Include observations that identify a condition is **NOT** a deviation to a written requirement, but if resolved, could lead to excellence in operations
- Cross-check all results for validity and consistency

Suggestions when presenting to responsible manager:

- Overall summary of the surveillance results as well as each individual surveillance result.
- Discuss results to assure an understanding of the requirement and the result.
- Make every effort to clarify misunderstandings prior to termination of the surveillance either by reviewing the evidence or restating the surveillance results.

How should the surveillance be documented?

First, provide a concise, clear statement of the scope of the surveillance, the dates when it was performed, and a description of the requirements used in performing the surveillance.

Surveillance Scope – A brief statement of the surveillance scope and purpose, the activities observed and the applicable standards or requirements against which the surveillance was conducted.

Participants – The names, the organization and positions of those personnel who participated in the surveillance.

Second, provide a description of the surveillance results, strengths, weaknesses, deficiencies corrected on the spot, or deficiencies identified.

Summary of Surveillance Results – A summary statement highlighting both the positive and the negative results from the surveillance. Include observations, which if resolved, could lead to excellence in operations.

Details of Surveillance Results – Statements of each requirement for which there is a result followed by a concise statement:

- conformances as satisfactory (including proficiencies worthy of mentioning).
- deficiencies (findings or nonconformances).
- observations that identify a condition which is **NOT** a deviation to a written requirement, but if resolved, could lead to excellence in operations.

Third, explain what action needs to be taken by the responsible manager/supervisor of the observed organization/project.

Lastly, if the surveillance is used to meet independent assessment requirements then ensure the completed checklist and report collectively includes at a minimum the surveillance scope, names of NQA-1 independent

Appendix B – Surveillance Guidelines (Continued)

assessors and lead assessor used in the surveillance, summary of surveillance results, effectiveness statement for associated assessed elements, and description of each condition adverse to quality that was identified. CP3-QA-1004 includes guidance on effectiveness determinations for independent assessment activities.

Examples of surveillance activities that do **NOT** require meeting independent assessment (audit) controls of NQA-1 (e.g., does **NOT** require a NQA-1 qualified assessor or NQA-1 certified lead assessor) include use of surveillance to document routine independent oversight of subcontractor and self-perform work.

Examples of surveillance activities that should invoke the more rigorous NQA-1 surveillance controls (e.g.., use of a NQA-1 certified lead assessor) of this procedure are:

- Use of the surveillance process to formally assess an element of NQA-1 to support the independent assessment process in lieu of conducting an audit/assessment of that element. For example, surveillance of NQA-1, Part I, Requirement 12, Measuring and Test Equipment.
- Use of one or more surveillances to supplement, or provide input into, a formal independent assessment of a larger program such as the Nuclear Maintenance Management Program that requires independent assessment to meet Order or other audit requirements. This is when the surveillance(s) are used in lieu of independently assessing portions of the program that would otherwise be included in the independent assessment.
- Use of the surveillance process to verify commercial grade item or services meet acceptance criteria for identified critical characteristics of the following dedication methods of NQA-1, Part II, Subpart 2.14:
  - Method 2, Commercial Grade Survey of the Supplier.

    For this method the surveillance would be used at the supplier's facility and address the following as applicable: identify the item or service for the scope of survey; identify critical characteristics to be controlled by the supplier; verification that the supplier's processes and quality program controls are effectively implemented to control the critical characteristics (must have a documented quality program for those controls); the surveillance will document the verification activities and results and adequacy of the suppliers controls to assure that the item or service can be supplied. The surveillance is used to confirm that associated Certified Material Test Reports or Certificate of Conformance, from the supplier, referencing those controls for the critical characteristics will support acceptance and meets the criteria of NQA-1 Part I, Requirement 7, Section 503, for the certificates. This type of surveillance should **NOT** be conducted solely on distributors (e.g., must also include the manufacturer).

  - Method 3, Source Verification (Surveillance) of the Supplier

    For this method, the surveillance will verify conformance with the associated identified critical characteristics and acceptance criteria, typically at the supplier's facility. The scope will include, as applicable, activities such as witnessing fabrication and assembly processes, nondestructive examinations, performance tests, or final inspections as applicable. The surveillance will also include verification of the supplier's procurement, calibration, and material processes and control methods employed for the particular commercial grade item or service being purchased, relied on for the critical characteristics. Design would also be included if approved for design. For this method, only the actual items or services verified at the facility through the surveillance are to be accepted. The surveillance/checklist will address, as applicable, the following: item or service scope; critical characteristics and acceptance criteria; verification that the suppliers processes and controls were effectively implemented; identification of items witnessed; identification of mandatory hold points, as needed, to verify the critical characteristics; and document the adequacy of the supplier's processes and controls associated with the critical characteristics and acceptance criteria. This method may need the use of additional technical specialists to support acceptance.

CP3-QA-2002-F01 - Surveillance Checklist

Surveillance #	
Assigned Personnel:	
Time(s) or Shift: **Date(s):**	
Facility(ies): **Specific Area(s):** **Responsible Manager:**	
Scope (e.g., Activity/Process/Topic): (Include subcontractor if applicable)	
Documentation List:	
Summary of Surveillance Results (includes Conditions Adverse to Quality, if any):	
NOTE: Include effectiveness statement for associated assessed element(s) if used to meet an independent assessment requirement.	
Quality Specialist/(NQA-1 Lead Assessor if NQA-1 Lead Assessor Required)	
Signature:	Date:
Management Review/Approval	
Quality Manager Signature:	Date:

CP3-QA-2002-F01 - Surveillance Checklist (Continued)

Surveillance #			
Lines of Inquiry/Characteristics (Use Additional Pages as Necessary):			
Item	Characteristic	Result	Remarks
1		Choose an item.	
2		Choose an item.	
3		Choose an item.	
4		Choose an item.	
5		Choose an item.	
6		Choose an item.	
A = Acceptable P = Problem N/E = Not Evaluated			