

CONTROL OF DRAWINGS AND SAFETY DOCUMENTS

1.0 Objective

The objective of this surveillance is to verify that the most current revisions of drawings and safety documents are available to laboratory personnel. These surveillance activities provide a basis for evaluating the effectiveness of the laboratory's program for control of and revision to drawings and safety documents and for establishing compliance with DOE requirements.

2.0 References

- 2.1 DOE 4700.1, *Project Management System*
- 2.2 DOE 5480.19, *Conduct of Operations Requirements for DOE Facilities*
- 2.3 DOE-STD-1073-93, *Guide for Operational Configuration Management*

3.0 Surveillance Activities

The Facility Representative or Environmental, Safety, and Health Support Specialist confirms that facility drawings and safety documents (e.g., Safety Analysis Reports, Safety Evaluation Reports, Interim Safety Basis Documents, Process Safety Analyses, Job Hazard Analyses, etc.) are readily available to facility personnel. The Facility Representative or Environmental, Safety, and Health Support Specialist verifies on a sampling basis that the drawings and safety documents are the most current approved revision of the drawing or safety document. The Facility Representative or Environmental, Safety, and Health Support Specialist verifies that drawings and safety documents actually in use at the laboratory are the most current approved revisions of the drawings or safety documents and that facility personnel understand and follow the process for obtaining working copies of and initiating revisions to drawings and safety basis documents.

Surveillance Guideline
CONTROL OF DRAWINGS AND SAFETY DOCUMENTS

Surveillance No.: _____

Facility: _____

Date Completed: _____

YES NO N/A

Activity 1 - Control of revision and distribution for drawings and safety documents

- | | | | | |
|----|--|-------|-------|-------|
| 1. | Are current controlled copies of drawings and safety documents maintained in the facility and readily available for use? | _____ | _____ | _____ |
| 2. | Are appropriate drawing changes or revisions initiated when drawing inadequacies or errors are identified? | _____ | _____ | _____ |
| 3. | Are controlled drawings marked up in any manner, other than through approved change control processes? | _____ | _____ | _____ |
| 4. | Do copies of drawings or safety documents include all approved temporary changes to the drawings or safety documents? | _____ | _____ | _____ |
| 5. | Are copies of drawings and safety documents available or in use at the facility the most current approved revisions of the drawing or safety document? | _____ | _____ | _____ |
| 6. | Are working copies of drawings available for use or in use at the facility? | _____ | _____ | _____ |
| 7. | Are working copies of drawings verified to be in conformance with the most current approved revision of the drawing? | _____ | _____ | _____ |
| 8. | Do facility personnel understand and follow the procedures for control and use of working copies of the drawings? | _____ | _____ | _____ |

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	<u>YES</u>	<u>NO</u>	<u>N/A</u>
9. Do facility personnel understand and use the procedures for initiating changes to drawings and safety documents when inadequacies or errors are identified?	_____	_____	_____
10. Are changes and revisions to drawings and safety documents formally communicated to facility personnel?	_____	_____	_____

OTHER:

NOTES/COMMENTS:

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PERSONNEL CONTACTED: _____

**IF MORE SPACE IS NEEDED FOR FINDINGS, OBSERVATIONS, AND FOLLOWUP
ITEMS - USE ADDITIONAL SHEETS**

FINDINGS:

Finding No.: _____

Description: _____

Finding No.: _____

Description: _____

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Finding No.: _____

Description: _____

OBSERVATIONS:

Observation No.: _____

Description: _____

Observation No.: _____

Description: _____

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Observation No.: _____

Description: _____

FOLLOWUP ITEMS:

Followup Item No.: _____

Description: _____

Followup Item No.: _____

Description: _____

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Followup Item No.: _____

Description: _____

LABORATORY MANAGEMENT DEBRIEFED AND RESULTS: _____

Signature: _____ Date: _____

Facility Representative or
Environmental, Safety, and Health Support Specialist