Attachment A-1

New Brunswick Laboratory A-76 Competition

U.S. Department of Energy

QUALITY ASSURANCE SURVEILLANCE PLAN

U.S. Department of Energy
New Brunswick Laboratory
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SECTION 1: INTRODUCTION

1.1 Background

The Department of Energy (DOE) initiated a competitive sourcing study of the New Brunswick Laboratory (NBL) in accordance with Office of Management and Budget (OMB) Circular A-76. Competitive sourcing involves a competition between Federal employees and prospective contractors to determine who will continue providing the services under review. The process includes the development of a solicitation, which interested contractors respond to through formal proposals and the in-house work force responds to through an Agency Tender that includes a Most Efficient Organization (MEO).

Section C of the solicitation is the Performance Work Statement (PWS), which specifies what work is to be performed. The PWS includes, as a technical exhibit, a Performance Requirements Summary (PRS), which specifies how well the work is to be performed. The competition results in a new Service Provider (SP) that shall perform the requirements stated in the PWS and the PRS. Depending on the Performance Decision at the conclusion of the A-76 competition, the SP may be the MEO—composed of federal employees—or a private sector firm.

If a contractor becomes the SP, the solicitation and the contractor's proposal are incorporated in the contract. If the MEO becomes the SP, the solicitation and the Agency Tender are incorporated in a Letter of Obligation (which is similar to a contract). Throughout this Quality Assurance Surveillance Plan (QASP), the term "contract" is used to mean either contract or Letter of Obligation.

In either scenario—contract or MEO—the Government will have an organization in place to direct the efforts of the SP, and monitor and evaluate the performance of the SP. This organization is called the Residual Organization.

1.2 Purpose

This QASP describes the procedures that the Quality Assurance Evaluators (QAEs) in the Residual Organization will use to monitor the SP's performance. It includes, as Appendix A, the PRS included in the contract. It is important to note DOE's primary concern is with the products and services provided by the SP and not with the procedures used to produce them. Therefore, the QASP focuses on examining the products and services provided by the SP and not the processes used to produce them. It is intended that the QASP be a tool to guide the QAEs in assessing SP performance. In some cases, specific metrics are used to measure SP performance, in other cases subjective judgment and evaluation by DOE personnel will be the determining criteria. This plan describes the methodology utilized to make both quantitative and qualitative evaluation of SP performance under the contract.

1.3 QASP Relation to the Contract

DOE will retain the right to change the surveillance methods and Quality Assurance (QA) procedures, or to increase or decrease the degree of surveillance efforts at any time necessary to assure contract compliance. A copy of the QASP may be provided to the SP to enable the SP to enhance its Quality Control (QC) Program, performed in accordance with its Quality Control Plan (QCP).

1.4 QASP Relation to the QCP

The QCP is a required element of the SP's technical proposal in response to the solicitation. While the QCP represents the way in which the SP will ensure its quality and timeliness of services, as defined in the PWS, the QASP represents the way in which DOE will evaluate the SP's performance. The SP's QCP and the Residual Organization's QASP should be complementary programs that ensure successful SP performance.

1.5 Revisions to the QASP

The QASP is a tool for use in Government administration of the contract and remains subject to revision at any time by the Government throughout the contract performance period. Revisions to this surveillance plan are the responsibility of the Designated Government Representative (DGR). Changes may be made unilaterally and need not be announced to the SP; the Government may provide informational copies to the SP if desired.

During the Phase-in Period, the SP will gradually assume responsibility for all tasks in the PWS. It is expected that during that time, all operational procedures and quality control measures will be tested and implemented. As the performance period progresses, the levels of surveillance may be altered for service areas in cases where performance is either consistently excellent or consistently unsatisfactory. If observations reveal consistently good performance, then the amount of surveillance may be reduced. If observations reveal consistent deficiencies, increased surveillance may be implemented.

SECTION 2: PERFORMANCE DESCRIPTION

Performance of the SP will be monitored through various surveillance methods described in *Section 4: Performing Quality Assurance*. Performance data gathered will be evaluated to assess SP performance against contract requirements.

2.1 Performance Standards and Acceptable Quality Levels (AQLs)

For selected activities in the PWS, the PRS provides a performance standard and an AQL. A performance standard is the expected level of SP performance. An AQL defines the level of performance that is satisfactory. Depending on the service evaluated and the evaluation method selected, performance standards and AQLs may be stated as a number of occurrences or as a percentage. Performance standards and AQLs for random sampling and 100 percent inspection are generally stated as percentages. For periodic inspections, performance standards may be stated as either percentages or as absolute numbers.

The contract requires the SP to perform all work as specified. Any inaccuracies or omissions in services or products are referred to as "defects" on the part of the SP. The SP shall be held responsible for all identified defects, and DOE may require a contractor to re-perform the work at no cost to the government. The AQLs take into account that in some instances an allowable level of deficiencies (deviations) is possible while overall performance continues to meet DOE's desired level of service.

2.1.1 Allowable Deviation

The AQLs define the level or number of performance deficiencies the SP is permitted to reach under this contract. AQLs take into account the difference between an occasional defect and a gross number of defects. AQLs can be expressed as a percentage of or as an absolute number (e.g., three per month). There may be instances where 100 percent compliance is required, and no deviation is acceptable (e.g., where safety is involved).

2.1.2 Substantially Complete

In some cases, service outputs are evaluated using subjective values (e.g., excellent, satisfactory, unsatisfactory). The criteria for acceptable performance and for defects must be defined for these service outputs. The concept of "substantially complete" should be the basis for inspections based on subjective scales.

Work is considered "substantially complete" where there has been no significant departure from the terms of the contract and no omission of essential work. In addition, the SP has performed the work required to the best of its ability and the only variance consists of minor omissions or deficiencies.

2.2 Non-performance

Non-performance occurs when the SP's performance does not meet the AQL for a given requirement. Requirements may contain multiple performance elements, and therefore, deficiencies may occur in one or more aspects of performance (e.g., timeliness, accuracy, completeness, etc.) or subject areas of effort.

When surveillance indicates that the SP's service output is not in compliance with the contract requirements, the QAE must determine whether the SP or the Government caused the deficiency. If the cause of the defect rests with the Government, corrective action must be taken through Government channels. If the cause of the defect is due to action or inaction by the SP, the SP is responsible for correction of the problem at no additional expense to the Government.

2.2.1 Documentation

Thorough documentation of unperformed or poorly performed work is essential for tracking SP performance throughout the period of performance. The QAEs, as trained inspectors, will document deficient work by compiling facts describing the inspection methods and results. A sample documentation reporting form is provided in *Appendix B: Contract Discrepancy Report*. The DGR and QAEs will develop documentation to substantiate nonconformance with the contract. The documentation, together with any recommendations, will be forwarded to the DGR. In the case of a

contractor SP, the DGR will decide whether to elevate the problem to the Contracting Officer (CO) for corrective action.

2.2.2 Remedial Actions

The Federal Acquisition Regulation allows for penalties in the event that the SP fails to perform the required services. Penalties are defined as those actions taken under the direction of the CO against the SP within the general provisions of the contract for nonconformance to the PWS and PRS.

For a contractor SP, in accordance with *FAR 52.246-6*: *Inspection—Time-and-Material and Labor-Hour*, the Government may require the Contractor to correct services that failed to meet contract requirements. The cost of correction shall be determined under the Payments Under Time-and-Materials and Labor-Hour Contracts clause, but the "hourly rate" for labor hours incurred in the replacement or correction shall be reduced to exclude that portion of the rate attributable to profit. If the Contractor fails to proceed with reasonable promptness to perform the required correction, the Government may (i) by contract or otherwise, perform the correction, charge to the Contractor any increased cost, or deduct such increased cost from any amounts paid or due under the contract; or (ii) terminate the contract for default. The CO will determine the penalty for nonconformance based upon his or her judgment and the severity of the nonconformance.

SECTION 3: ROLES AND RESPONSIBILITIES

The purpose of QA is to ensure that the customers are satisfied with the products and services received from the SP and to ensure that the SP is meeting its obligation to DOE. The roles and responsibilities of the stakeholders involved in QA are described below.

3.1 SP Responsibility

The SP is responsible for delivering products or services in accordance with the contract. The SP is responsible for implementing its QCP, which is incorporated in the contract. The QCP describes the SP's methods for ensuring all products and services provided under the contract meet established performance standards and AQLs. The SP is responsible for producing, maintaining, and providing for audit, quality control records and reports and all records associated with the investigation and resolution of customer complaints. The SP should appoint a single quality control point-of-contact to act as a central recipient of communication from the Government.

3.2 Government Responsibility

This section of the QASP briefly defines the duties and responsibilities of key Government personnel involved in contract administration and quality assurance. The key personnel who will be responsible for QA are the CO, the DGR, the QAEs, and the SP's customers.

3.2.1 Contracting Officer

When a contractor is the SP, the CO has the authority to administer the DOE NBL contract. The CO may delegate many of the day-to-day contract administration duties to the DGR and QAEs. However, certain contractual actions such as negotiation and issuance of contract modifications, resolution of SP claims and disputes, issuance of cure notices (notification that unless unacceptable performance is corrected, the Government may terminate the contract for default, IAW FAR 49.607), issuance of show-cause letters (following a cure notice, requesting facts bearing on the case), termination of the contract, and contract close-out functions are retained by the CO. Administrative actions such as invoice approval and issuance of Contract Discrepancy Reports may be, and normally are, delegated by the CO to the DGR. For tasks and/or subtasks which include incentive arrangements (award fee, shared savings, award term, etc.), the DGR shall provide recommendations to the CO for action. All communication regarding questions or issues related to QA and inspection will be directed to the CO or the DGR. The CO shall approve any revision to the QASP processes or standards.

3.2.2 Designated Government Representative

The DGR, who is a federal employee within the Residual Organization, is designated by name and/or position to act as a liaison between the Government and the SP on all issues pertinent to the daily operation of the Contract. The DGR represents the CO in the Contracting Officer's Representative (COR) functions and therefore is the SP's initial point-of-contact with the Government. In turn, the DGR may delegate some of his/her responsibilities, such as supervision of the QAEs, to another individual in the Residual Organization in order to ensure that the QA function is properly executed. If modifications to the contract are necessary, the DGR will assist the CO in preparing and negotiating the modifications. If there are problems with SP performance, the DGR will inform the SP of the problems and recommend to the CO that adverse contractual actions are appropriate (e.g., cure notice) if the SP fails to correct the problem. Also, the DGR must refer differences of contract interpretation to the CO.

3.2.3 Quality Assurance Evaluators

The QAEs play a key role in contract administration. They serve as the on-site representative of the CO and the DGR. The QAEs perform the actual contract surveillance and report to the DGR. Some of the key contract administration duties of QAEs include, but are not limited to, the following:

- Perform surveillance as required by this QASP, and make recommendations to the DGR for issuance of Contract Discrepancy Reports or letters of commendation;
- Make recommendations to the DGR for the acceptance or rejection of completed work and for

administrative actions based on unsatisfactory work or non-performed work;
- Assist the DGR in identifying necessary contract modifications;
- Make recommendations to the DGR for changes to the QASP;
- Assist the DGR in preparing reports of SP performance and cost.

The QAEs have only the authority delegated to them in writing by the DGR and/or CO. They have no authority to direct or to allow the SP to deviate from contract requirements. The QAEs also have no authority to direct or interfere with the methods of performance by the SP or to issue directions to any of the SP's personnel. These actions are reserved to the CO or to the DGR.

The QAEs may use the form provided in *Appendix D: Sampling Guide/Inspection Checklist* for each service requirement to be inspected, or such other forms as approved by the DGR. This checklist includes the specific tasks to be checked and whether the inspection results in an SP rating of excellent, satisfactory, or unsatisfactory performance. For a contractor SP, overall guidance is also provided by the Inspection and Acceptance clauses in the contract.

3.2.4 Customers

Customers are the various organizations supported by the SP. Customers may be requested to assist the QAEs and DGR in conducting QA by providing information on SP performance through a Customer Feedback Program. The information gained from the Customer Feedback Program may be used in conjunction with other methods of observation to rate the performance of the SP.

SECTION 4: PERFORMING QUALITY ASSURANCE

4.1 Surveillance Methods

The surveillance methods used in the QA process are the Government's tools to monitor the SP's products and services. The best means of determining whether the SP has met all contract requirements is to inspect the SP's service products and analyze the results. Further, documented inspection results are an effective tool in contract administration. Inspections either confirm the SP's successful achievement of all performance requirements or highlight areas where defects exist and improvements are necessary.

The surveillance methods described below include: 100 percent inspection, periodic inspection, random sampling, and customer feedback. The number of inspections conducted may be reduced in those instances where the SP has established a good performance record. In cases of poor performance, DOE may increase the level of surveillance and focus on known problem areas. In either case, the reasons for the change in surveillance will be documented.

4.1.1 100 Percent Inspection

The 100 percent inspection method requires complete inspection of a contract requirement and will be used for requirements that are especially critical or where there is some reason for suspecting that the performance standard or AQL is not being met (and therefore, should be more closely monitored). Evaluation schedules for 100 percent inspections will be prepared each month.

4.1.1.1 Performance Standards and AQLs

The performance standards and AQLs may be stated as either percentages or absolute numbers.

4.1.1.2 Evaluation Procedures

Observed defects for a service monitored by 100 percent inspection is compared to the performance standard and AQL.

4.1.2 Periodic Inspection

Periodic inspection provides a systematic way of looking at service outputs and forming conclusions about the SP's level of performance in accordance with a planned schedule of surveillance. Evaluation by periodic inspection is designed to inspect some part but not all of the products and services being monitored.

4.1.2.1 Application

Specific contract requirements that are to be monitored are selected for evaluation prior to their scheduled accomplishment. Periodic inspection differs from random sampling in the way in which samples are selected – periodic inspection sample selection is based on some subjective rationale and sample sizes are usually arbitrarily determined. With this type of evaluation, the QAEs are able to direct efforts to those areas where inspections are most needed, and the SP knows that those areas are more likely to be monitored than others. Periodic inspection, as compared with random sampling, provides a less sound statistical means of making comparisons between observed and overall performance, and the SP's overall level of performance. Periodic inspection is generally used in two ways. First, it can provide a one-time subjective evaluation of SP performance. Second, it can be used to detect a change in the SP's level of performance (i.e., trend analysis). This method requires that the sample selection criteria be well documented and consistently applied from period to period, and that there are no other intervening factors. The cost of periodic inspections varies with the level of inspections. Such latitude is important to manage limited resources and focus inspections on known or suspected problems areas.

4.1.2.2 Performance Standards and AQLs

Performance standards and AQLs are usually stated in terms of the number of defects detected per time period (e.g., three times per month). There is no specific relationship between sample size and performance standard/AQL. However, when the AQL is expressed as a percentage, it is recommended that the maximum sample size be chosen such that one defect does not exceed the AQL.

4.1.2.3 Evaluation Procedures

The levels of evaluation appropriate for periodic inspection are judgmental. In order to perform trend analysis from periodic inspection, criteria for sample selection should be applied consistently from period to period. To ensure valid results, the QAEs will use periodic inspection evaluation sheets and follow a detailed inspection schedule. Schedules may be developed monthly to coincide with the SP's monthly schedule of work, and regularly updated after receiving the SP's definitive weekly schedule. Observed defects for services monitored by periodic inspection will be totaled at the end of each month. For each service, the total number of defects will be compared to the performance standard and AQL.

4.1.3 Random Sampling

Random sampling evaluation is a quality assurance method designed to evaluate some, but not all, of a specific contract requirement. This method, based on statistical principles, estimates the SP's overall level of performance for a given contract requirement based on a representative sample drawn from a population. Random Sampling is most often used when the number of occurrences of a service is very high.

4.1.3.1 Application

The random sampling procedures are based on those set by the American National Standards Institute (ANSI). The random sampling procedures consider the AQL (maximum allowable deviation from the performance standard), the level (intensity) of the evaluation effort, and the population size. There are two ways of applying random sampling for QA surveillance. The first is used only for performance evaluation and allows deductions to be taken only for observed defects; the second is random sampling for performance evaluation and deduction projection (also called extrapolated deductions), which allows deductions against the whole population based on the inspection of the sample. To obtain valid results, random sampling procedures must be followed precisely.

4.1.3.2 Performance Standards and AQLs

Performance standards and AQLs may be specified as percentages or absolute numbers.

4.1.3.3 Evaluation Procedures

Random Sampling is based solely on a statistical analysis whereby a conclusion is drawn about a population based on a randomly selected sample of that population. For the conclusion to be valid, the sample selected must be representative of the population. A truly representative sample can be achieved by ensuring that the sample is selected randomly and the size of the sample is sufficient. A conclusion about SP performance can then be made based on the representative sample drawn.

4.1.4 Customer Feedback

Validated customer feedback is a quality assurance method based on customer and SP interaction. Customers continually receive the outputs of SP performance and are in a position to evaluate the SP on a recurring basis. Because customers have a clear stake in the quality of SP services, they are valuable resource for the QAEs.

4.1.4.1 Application

Customers are made aware of contract requirements and monitor the services provided by the SP, both positive and negative. Where there is a case of poor performance or non-performance, customers notify the QAEs. The QAEs then investigate the report and, if found to be valid, document their findings. The numbers of complaints and resulting inspections depend upon customer awareness and response. If the complaint is valid and caused by poor performance or non-performance by the SP, the SP must take appropriate corrective action. A valid complaint is one in which the QAE confirms that poor performance or non-performance violates contract requirements.

4.1.4.2 Customer Feedback Process

Upon contract award, the DGR should send letters to all or selected customer points-of-contact. These letters will inform them of the need for their active participation in the overall Quality Assurance Program. The DGR will also provide a Customer Feedback Record (sample at Appendix C) for the customer to use to either document performance problems or identify when superior services are received.

The QAEs will validate the Customer Feedback Records submitted. It is primarily the responsibility of the SP to investigate each complaint to determine the problem. While QAEs can also investigate customer complaints, the responsibility for initial review shall remain with the SP. At the Government's discretion, the QAE will investigate problems from customer groups and complaints involving major problems with services being provided.

The SP shall take action when a Customer Feedback Record is received. If a valid complaint exists, the SP shall re-perform the product or service. The SP may use the complaint as an indicator that the QCP needs improvement. Corrective actions shall be implemented to prevent the recurrence of similar problems in the future or detect and fix such problems before a product or service is delivered to a customer. If the customer complaint is found to be invalid, the DGR shall educate the customer regarding contract requirements as they pertain to the customer's expectations.

4.1.4.3 Evaluation Procedure

The SP shall report validated complaints each month, so the QAEs may review the valid complaints and formulate action items if necessary. Trend analysis may be used to test for variations in the number of complaints received each month and identify changes in SP performance.

4.2 Analysis and Results

When the inspections and customer feedback record validations have been completed, the QAEs will perform an analysis of the SP's performance. The purpose of the analysis is to ensure that DOE is receiving high-quality products and services from the SP. QAEs will review the results, rate SP compliance with the performance standards and AQLs, and characterize the SP's overall performance. Analysis of all types of contract monitoring will result in one of the following outcomes: outstanding performance, very good performance, satisfactory performance, or unsatisfactory performance.

4.2.1 Outstanding Performance

Outstanding performance is the result of the SP substantially exceeding the performance standards with significant achievements and no significant deficiencies. DOE may reduce its level of surveillance when the DGR determines that the SP provides sustained performance that significantly exceeds the requirements with no significant deficiencies.

4.2.2 Very Good Performance

When the SP's performance is very good, performance exceeds acceptable quality levels and achievement(s) exist with no significant deficiencies. Strengths in performance are substantially greater than minor performance weaknesses.

4.2.3 Satisfactory Performance

When the SP's performance is good, performance meets acceptable quality levels and deficiencies are correctable without adverse impact to mission accomplishment. Strengths and weaknesses in performance are on balance where any deficiencies are identified and corrected immediately by the SP.

4.2.4 Unsatisfactory Performance

When the performance for any service does not meet the AQL, the SP's performance is unsatisfactory, and is, therefore, unacceptable. The following responses are available to the DGR regarding that task/subtask:

- The CO and/or DGR meet with the SP to discuss discrepancies, trends, and intended corrective measures;
- The level of surveillance is increased until the SP demonstrates acceptable performance over a period of time;
- The DGR issues a Contract Discrepancy Report for each service that does not meet its AQL;
- Should deficiencies be significant and affect multiple requirements, CO action such as a 'Cure' notice may be appropriate.

APPENDIX A: PERFORMANCE REQUIREMENTS SUMMARY

The performance standards and AQLs in the nine tables below will be used to measure the performance of the SP. The nine tables were extracted from the PRS in the contract and are applicable to the nine functional areas of the PWS (sections 3.1 through 3.9):

1. Reference Materials;
2. Measurement Evaluation;
3. Nuclear Safeguards, Nonproliferation and National Security Assistance;
4. Nuclear Metrology Services;
5. Measurement Services;
6. Compliance with Nuclear Analytical Laboratory Operational Requirements;
7. Measurement Development;
8. Serve on Consensus Standards-Writing Committees and Working Groups; and
9. Laboratory Administration.

QAEs will monitor SP performance using the procedures in Section 4 above, together with the PRS tables below and the PWS sections referred to in the PRS. The PRS includes performance standards and AQLs for selected PWS sections that are intended to be representative of the entire PWS. In the process of monitoring SP performance, the QAEs and the DGR may improve the PRS by developing changes to the standards and AQLs or by developing standards and AQLs for different PWS sections. Such changes to the PRS will be documented.

These measurements will also apply to all provisions in the contract. SP performance results may be posted to an internal DOE website. The SP shall be required to comply with all terms and provisions of the contract, including the PWS and Technical Exhibits (TEs), and the post award provisions of the OMB Circular A-76.

1. Reference Materials

The following table provides the performance standards, AQLs and surveillance methods pertaining to Reference Materials. Tasks include, but are not limited to:

- Program Planning and Management;
- Production and Acquisition of Base Materials;
- Sampling, Analysis, and Certification;
- Sales, Distribution, and Customer Service; and
- Assistance to Other Reference Materials Organizations.

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.1.1.3	Customer contacts are maintained in sufficient detail to allow identification of a subgroup of customers to poll for a survey of customer needs.	Annual survey of customer needs is to be conducted based on survey criteria developed in coordination with the DGR.	100% Inspection
3.1.1.9	Storage and protection of data and vital records associated with the production, maintenance and storage of CRMs are inspected annually.	At least 90% of a random statistical sample of stored CRM records reviewed are found to be complete and in on-site storage inside fire proof containers.	Random Sampling
3.1.1.10	The inventory listing of CRM base materials and CRM units held on and off site is inspected annually for accuracy.	A list with the location of at least 90% of the CRM base materials and the number of units of each CRM stored both on and off site can be provided within two working days of a request for a list.	Periodic Inspection
3.1.2.3	Bulk materials selected for new or replacement CRM production meet specifications.	The plans for acceptance testing of bulk materials for new or replacement CRMs and, when available, the test results on those acceptance tests were comprehensively documented and available in the CRM file.	Periodic Inspection
3.1.3.1	Detailed certification plans for each new or replacement CRMs are prepared and approved prior to beginning the certification process.	The certification plans for new or replacement CRMs were comprehensively documented and available in the CRM file.	100% Inspection
3.1.3.6	Certification analyses are performed using well-characterized measurement systems with associated quality control evaluation to demonstrate system control. Inspections are performed semiannually.	At least 90% of the measurement systems (sample preparation and analysis technique) used for characterization of CRMs have statistically planned and evaluated qualifications of the system in place; any other measurement system used for characterization of CRMs must have DGR approval prior to use.	Periodic Inspection
3.1.3.8	Final reports for new or replacement CRMs are documented and approved by the DGR prior to offering the material for sale.	The new or replacement CRMs' final reports contain a complete uncertainty budget report and have been reviewed and approved prior to sale of the CRM.	100% Inspection
3.1.4.2	Customer CRM ordering and shipping records are reviewed annually. Targets for shipments are met unless the order processing is delayed by DOE, another government agency, or a foreign government.	90% of the domestic orders received are processed within 30 days of receipt of the completed order form; 90% of the international orders received are processed within 90 days of receipt of the completed order form. A statistical sample of orders is reviewed; 90% of all records reviewed are complete and in sequential order.	Random Sampling
3.1.4.6	CRM shipments' calculated values for determination of type quantity, selected container type and packaging, inclusion of Emergency Response Guide and Material Safety Data Sheet, and follow through to receipt by the customer are reviewed annually.	A statistical sample of the CRM orders is reviewed; 90% of the CRM shipments records meet the stated performance standard.	Random Sampling

2. Measurement Evaluation

The following table provides the performance standards, AQLs and surveillance methods pertaining to Measurement Evaluation. Tasks include, but are not limited to:

- Program Planning and Management Planning;
- Production of Test Materials;
- Analysis and Characterization;
- Distribution of test materials and customer service;
- Perform Statistical Evaluation of Results and Prepare Reports;
- Annual Report and Annual Meeting;
- Maintain Database;
- Assistance to Other Organizations Who Conduct Evaluation Programs; and
- Perform Periodic Re-evaluation of Test Material Stability and Values.

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.2.1.5	Historically, 6 types of uranium test materials and 3 types of plutonium test materials are characterized or verified annually. Annually review the analysis reports which provide the characterized values for each type of test material.	At least 90% of the analysis reports are completed within 7 working days after completion of the statistical analysis of the results of characterization experiments.	100% Inspection
3.2.1.8	Monthly, quarterly, and annual Measurement Evaluation Program status reports are required. SME program fiscal year reports are due by the end of December of the following FY; and the CALEX program calendar year reports are due by the end of the first quarter of the following calendar year.	At least 90% of the monthly reports are submitted within three working days of receiving the monthly activity summary reports. At least 75% of the quarterly reports are submitted by the 15th working day of the month following the end of each quarter; the grace period for the single default is an additional five working days. No annual report is delayed more than 30 days.	Periodic Inspection
3.2.2.3	The current annual level of work is about 4 uranium test materials for assay, 2 uranium test materials for isotopic abundance, 1 test material for plutonium assay, and 2 test materials for plutonium isotopic abundance prepared annually. Reports containing the characterized values for the test materials are reviewed annually.	At least 90% of the test materials are tested and characterized within the time schedule developed in coordination with the DGR to be made ready for shipping test samples to participating laboratories.	100% Inspection
3.2.3.3	The detailed analysis plans for the characterization/verification experiments for each test material, prepared with input from statisticians and guided by the ME Program Manager, are reviewed annually.	A random sample of the analysis and characterization plans prepared for the year show comprehensive detail to assure that acceptable test samples can be produced from the test materials to meet annual customer needs.	Random Sampling
3.2.4.3	Customer records (name, organization, telephone number and e-mail) are maintained electronically and in hard copies; customer records are reviewed and updated semi-annually. Experimental results, stored in the SME program and the CALEX program databases, are updated within one week of receiving new experimental results submitted for evaluation. Semi-annual inspections are performed of customer and new experimental result databases.	A random sample of customer records shows that 90% of the information is current; and a random sample of experimental results shows at least 90% of the results were entered within 7 working days after submission by the customer.	Random Sampling

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.2.5.2	Statistical evaluation of experimental results are performed, and reports, specifying the values for the test samples and comparing them to characterized values are prepared. The reports contents are evaluated annually.	At least 90% of the reports in the random sample of statistical reports show that the statistical evaluations of experimental results submitted by the participants are provided within 7 working days of receiving the data.	Random Sampling
3.2.5.4	Statistical evaluation reports of experimental results with comparison of accuracy and precision of the experimental results against international target values are prepared together with cover letters to explain the evaluation conclusions and are sent to customers and their sponsors. These reports are reviewed annually.	At least 90% of customer reports in the random sample were prepared and disseminated within 10 working days after completing the statistical evaluation of the results.	Random Sampling
3.2.6.4	Coordinate and conduct the annual Measurement Evaluation Program meeting to intercompare data.	The annual ME Program meeting location and participants are identified at least 60 working days prior to the meeting. The meeting technical program is designed/prepared and communicated to 90% of the participants at least 10 working days prior to the meeting.	100% Inspection

3. Nuclear Safeguards, Nonproliferation, and National Security Assistance

The following table provides the performance standards, AQLs and surveillance methods pertaining to Nuclear Safeguards, Nonproliferation, and National Security Assistance. Tasks include, but are not limited to:

- Nuclear Safeguards Assistance;
- Nonproliferation Assistance; and
- National Security Assistance.

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.3	Timeliness of support for fiscal management of work for others (WFOs) is reviewed semi-annually.	At least 90% of the fiscal reports for WFO funding are provided within the required timeframe stated by the customer.	Customer Feedback
3.3.1.1	Plan and coordinate the NSNS Program, and manage employee support for assistance work at other locations. NSNS Program planning and reporting is reviewed annually.	The NSNS Program plan is reviewed at least annually and updated as required. At least 90% of the monthly reports are submitted within 3 working days after receiving the monthly activity summaries. At least 75% of the quarterly reports are submitted by the 15th day of the month following the calendar quarter; the grace period for a single default is an additional five working days. No annual report is delayed more than 30 days. Project plans (for WFOs) are developed in at least 90% of the cases within one month of approval to start work.	Periodic Inspection
3.3.1.3	Safeguards directives (orders, manuals, guides), site security plans, and facility's security categorization are reviewed as requested. DOE Anomaly Review Team (DART) members are provided. Communication with sites on corrective actions is provided as needed.	At least 90% of the reviews meet the SO requested due date. DART team responds to HQ needs within 3 days of request.	Periodic Inspection
3.3.1.4	Assistance to field offices and others in Material Control and Accountability (MC&A), nuclear material measurement methods and measurement control is reviewed at least annually.	Select and assign staff within 5 working days of receiving request for assistance for at least 80% of the requests. Submit 90% of the assistance work activity work reports within 30 calendar days of the end of the assistance activity.	100% Inspection

4. **Nuclear Metrology Services**

The following table provides the performance standards, AQLs and surveillance methods pertaining to Nuclear Metrology Services. Tasks include, but are not limited to:

- Provide Traceability of Results to National and International Reference Base;
- Quality Assurance (QA); and
- Measurement Uncertainty.

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.4.1.1	Annually engage in joint measurement evaluations of reference materials to compare U.S. and other national nuclear certification facilities	Provide measurement results for at least one inter-laboratory measurement evaluation program per year for actinide elements within 60 days of the program results due date.	100% Inspection
3.4.2.1	Involvement (e.g., committees, meetings, reviews, reports, audits/inspections) in quality systems management, QA practices, audit and inspection practices, or QA standards is reviewed annually.	Demonstrate involvement by at least one NBL staff member in at least one area (e.g., committees, meetings, reviews, reports, audits/inspections) per year.	100% Inspection
3.4.3.1	Development and maintenance of uncertainty calculation spreadsheets or templates that follow ISO guidelines are reviewed for certifications.	Demonstrated use of uncertainty spreadsheets or templates that follow ISO guideline for CRMs for the major isotopic abundances and major elemental quantities certified.	Periodic Inspection

5. Measurement Services

The following table provides the performance standards, AQLs and surveillance methods pertaining to Measurement Services. Tasks include, but are not limited to:

- Administrative Measurement Services Activities;
- Sampling, Chemical Preparation, and Separation of Materials;
- Instrument and Analytical Equipment Maintenance and Upgrades;
- Elemental Analysis;
- Isotopic Abundances;
- Impurities and Trace Element Analysis;
- Other Analyses;
- Nuclear Low-level Environmental Safeguards Analysis; and
- Conversion and Analysis of UF_6

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.5.1.3	Demonstrated use of reference materials as comparator/quality control samples for reported measurements is reviewed semi-annually.	100% use of reference materials as quality controls in each set of reportable measurements utilizing approved procedures in making the measurements. Any software used for calculations associated with the measurements have 100% appropriate quality controls in place.	Random Sampling
3.5.2.2	Demonstrated use of qualified or approved procedures for preparing a range of sample types is reviewed annually.	100% of certifications, verifications and reported samples are prepared using qualified/approved procedures.	Random Sampling
3.5.3.1	Demonstrated instrument repair, required maintenance records, tracking of associated time for repair and maintenance, and notations on poor instrumental performance with associated problem resolution are reviewed annually.	100% of performance and log books (paper or digital) on instrument maintenance and repairs are performed to assure the least amount of equipment inoperability time.	Random Sampling
3.5.3.4	Demonstrated semi-annual balance service and certification.	100% compliance with semi-annual balance service and certification requirements as evidenced in the service record and data on the associated master weights, secondary weights and quality control reports.	Random Sampling
3.5.4	Review annually the demonstrated achievement of, or approach to, state-of-the-art elemental measurement capability for the identified methods.	100% Compliance that for a pure uranium reference material the repeatability of five high precision titration measurements (1 sigma) is less than 0.04% and that for a pure plutonium reference material the repeatability of five coulometry measurements (1 sigma) is less than 0.1%.	Periodic Inspection
3.5.5	Review annually demonstrated achievement of, or approach to, state-of-the-art isotopic measurement capability in identified methods.	100% compliance that for a pure uranium reference material with a 235U/238U ratio between 0.1 and 1, repeatability of ten accepted TIMS or UF6 measurements (1 sigma) is below 0.05% and that for a pure plutonium reference material with a 240Pu/239Pu ratio between 0.1 and 1, repeatability of ten accepted TIMS measurements (1 sigma) is below 0.05%.	Periodic Inspection
3.5.6	Review annually demonstrated achievement of, or approach to, state-of-the-art impurities and trace element measurement capability.	100% capability to detect uranium in a simple matrix at or below 10 pg/g. Validate that an acceptable plan is in place and being followed to achieve the demonstrated capability to measure 60% of the transition plus the rare earth elements by December 2008.	Periodic Inspection
3.5.7	Review annually demonstrated capability to screen samples and provide quantitative gamma-ray measurements of americium.	100% facility capability to measure americium in a plutonium sample or calibration standard to within 2% (1 sigma) uncertainty for Am contents greater than 2% .	Periodic Inspection
3.5.8	Review annually demonstrated capability to measure nuclear, low-level environmental or comparable samples	100% facility capability to measure amounts of >100 pg but less than 1 ng of Pu and >0.3 ng but less than 3 ng of U with uncertainties of 3% or better.	Periodic Inspection
3.5.9	Review annually the UF6 conversion apparatus capability of the facility.	The apparatus shall be capable of converting uranium oxides to UF6 and providing results from UF6 or TIMS measurements that agree to within 0.1% (2 sigma)	Periodic Inspection

6. Compliance with Nuclear Analytical Laboratory Operational Requirements

The following table provides the performance standards, AQLs and surveillance methods pertaining to Compliance with Nuclear Analytical Laboratory Operational Requirements. Furthermore, this portion of the PRS describes the standards by which the SP shall meet the task assignments. Tasks include, but are not limited to:

- Environmental Safety and Health;
- Safeguards and Security Activities;
- Quality Assurance and Control;
- Statistical Analysis of Measurement Uncertainty; and
- Packaging and Shipping.

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.6	Review follow-up actions for reviews, audits and inspections of operational requirements to meet reporting schedules.	All external reviews, audits and inspections required to monitor the compliance of facility operations with applicable statutes, regulations, orders policies and guidelines are supported at the request of the DGR. At least 90% of the follow-up actions meet the agreed-to schedules, or the DGR has agreed, in writing, to an alternate schedule.	Periodic Inspection
3.6.1.1.6	Review program to monitor and control radiation in the workplace in accordance with 10CFR 835 (Occupational Radiation Protection) annually.	Facility exposure goals are met 95% of the time. Any instance of exposure above the facility goal is reported to the DGR and reviewed by the SP to determine if processes or procedures should be changed to assure that the cause does not result in additional exposure. Lost/Restricted Work Day case rates are below the mean for Standard Industrial Classification (SIC) system code 8734, Testing Laboratories.	Periodic Inspection
3.6.1.2.3	All existing and new projects and activities will be reviewed to determine if they are bounded by the facility safety envelope. The process used shall be in accordance with 10 CFR 830.203, Unreviewed Safety Question Process.	95% of ongoing and new projects and activities have been screened. Should an unscreened ongoing or new project or activity be identified, the failure to screen the project or activity is identified and reported as required, and the project or activity is then screened.	Periodic Inspection
3.6.1.7.2	Safety Significant Systems and the facility's Documented Safety Analysis are reviewed annually for compliance. All non-conformance issues, reported in accordance with DOE O 231.1A, Environment, Safety and Health Reporting, are reviewed monthly.	Safety significant systems are operated/maintained in accordance with DSA 95% of the time. Non-conformances are reported within the time limits specified in DOE M 231.1-2 90% of the time.	Periodic Inspection
3.6.1.9.1	Unreviewed safety questions for all chemical and safety hazards, radiation protection and monitoring, safety system requirements, and waste disposal paths identified for any new or ongoing project are reviewed when identified and before starting work.	All required reviews have been completed before any laboratory operation begins for 95% of the ongoing or new projects or activities. Any laboratory operation that is begun before all required reviews have been completed is stopped, reported as required in DOE M 231.1-2 90% of the time, and the review is completed before laboratory operations continue on the project or activity.	100% Inspection

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.6.2.1.4	Review the NBL accounting ledger of all external transactions involving nuclear material (reportable and non-reportable) annually.	At least 95% of transactions are logged on the same day as the transaction. When a transaction cannot be logged on the same day as the transaction, a reason is identified in the ledger. When a transaction has not been logged on the same day and the fact is identified, the transaction is logged with the date of the log-in and the date of the transaction is also noted in the ledger.	Random Sampling
3.6.2.1.11	Export controls meet DOE requirements.	The sensitive subjects list provided contains at least 90% of the sensitive subjects covered by the laboratory. A sample of at least one document of each type requiring export control approval is reviewed and found to have the appropriate authorizations.	Random Sampling
3.6.2.2.5	Receipt and handling of classified information in accordance with DOE O 471.2A (Information Security Program) or its successor(s) is reviewed annually. Incidents of concern are reported per DOE O 471.4 (Incidents of Security Concern) or its successor(s).	At least 95% of the classified material is handled in accordance with requirements. Non-conformances are reported within the time limits specified in DOE 0 471.4 90% of the time.	Random Sampling
3.6.2.3.2	Cyber security risks management to meet DOE requirements is reviewed annually.	Cyber security risks are assessed and mitigated or submitted to the DGR for acceptance and approved before new software or hardware are installed or cyber systems are exposed to the risk; cyber security documentation updates are provided within 30 days of the requested due date.	Periodic Inspection
3.6.2.4.5	Information regarding foreign visits to NBL, entered into FACTS or its replacement, is reviewed prior to the visit. Recordkeeping for DOE O 142.1 (Classified Visits Involving Foreign Nationals) and DOE O 142.3 (Unclassified Foreign Visits and Assignments) or their successors, is reviewed annually.	All foreign visitors are logged into FACTS before coming on site. At least 90% of visitors from sensitive counties are logged into FACTS at least 45 days in advance of the beginning of the visit. At least 90% of visitors from non-sensitive countries are logged into FACTS at least 30 days in advance of visit. At least 80% of visits are closed out in FACTS by 90 days after the visit has ended. Records accurately reflect foreign visitor documentation as required in DOE O142.1.	Periodic Inspection
3.6.2.4.6	The facility security program to meet requirements of DOE O 471.1, Change 1 (or its successor(s)), is reviewed annually.	Facility security by external and internal reviews is satisfactory as defined in DOE O 471.1, Change 1.	Periodic Inspection
3.6.2.6.6	The facility self assessment and audit program is reviewed annually. Attend all close-out meetings of senior management personnel where findings, observations and recommendations are presented.	SP self assessments and audits are completed within 2 months; a written report is provided within one week of close out meeting. The SP reviews corrective actions within two weeks of completing their completion.	Random Sampling
3.6.3.1	Review the quality management system which includes document control, training qualification assurance, corrective action tracking and records management annually.	For 90% of the reviewed plans and operating procedures, the approvals were documented and in place. For 90% of the reviewed training, the required training was performed within 15 working days of the due date, or the authority of the person to perform the function was removed. For 90% of the completed corrective actions reviewed, responses were documented and closed. For 90% of the records reviewed, the records were accurately filed.	Random Sampling
3.6.3.5	The deficiencies tracking system is reviewed, from identification to closure, annually.	A statistical sampling of the records for quality deficiencies is reviewed; 90% of the QA deficiencies reviewed have documentation which accurately reflects the status at the time of the review.	Random Sampling

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.6.3.9	Review of demonstrated quality control of measurements and instrument calibrations with statistical analysis of quality control samples over time for trend analysis is performed annually.	At least 90% of the QC measurements (elemental and isotopic) for techniques with a sufficient number of QCs for evaluation were reviewed and documented at least annually for trends in reported results.	100% Inspection
3.6.3.10	Review facility documentation annually to determine if established review cycles exist and if the review cycle meets DOE requirements.	A statistical sampling of facility plans and analytical procedures is reviewed; 90% of the documents reviewed have an established review cycle which meets DOE requirements and of those, 90% have been reviewed or revised as required within 30 days of the required date.	Random Sampling
3.6.3.15	Annually review the training and qualifications program developed in accordance with DOE O 5480.20A - Change 1 (Personnel Selection, Qualification, and Training Requirements for DOE Nuclear Facilities) or its successor(s).	At least 90% of training requirements are completed within 15 working days after the required training or re-training date. Findings associated with training and qualification of NBL personnel which are discovered during self-assessments have solutions identified which are incorporated into the training plan within 90 days.	Random Sampling
3.6.4	Annually review the capability to perform statistical analysis of data for qualification of new analytical techniques and whether or not ISO and ANSI guidelines are met for uncertainty budget calculations.	A statistical report or description of statistical methods and results is provided for each new qualified techniques and each reference material certified. ISO and ANSI guidelines are met for uncertainty budget calculations.	100% Inspection
3.6.5.7	Annually review shipping documentation for all hazardous materials; these should meet 49 CFR and IATA requirements.	At least 95% of the paperwork prepared for shipping hazardous materials is compliant with regulations. When errors in paperwork are identified, notifications are made to the DGR and to others as required by shipping authorities. The errors are reviewed to determine if processes or procedures need to be changed to assure that the same error does not occur again.	Random Sampling
3.6.6.3	Annually review Emergency Plans and implementing procedures to assure that planning and resources are adequate to meet DOE requirements, maintained and exercised.	Document reviews are completed within 30 days of the due date which meets DOE requirements, or approval for delay of the review or revision will be obtained in writing from the DGR. Emergency exercises are held in collaboration with the ANL site Emergency Operations Center as required. There are no incidents of failure to cooperate with site emergency personnel.	Periodic Inspection

7. Measurement Development

The following table provides the performance standards, AQLs and surveillance methods pertaining to Measurement Development. Tasks include, but are not limited to:

- Reference Material Production and Certification Methods;
- Chemical Analysis and Separation Methods;
- Mass Spectrometry, Impurities, and Trace Element Analysis Methods;
- Cleanroom and Low-level Environmental Chemical Processing Techniques;
- NDA Techniques;
- Capital Equipment Improvements;
- Publications; and
- Meetings with the Scientific Community.

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.7.1.4	Annually review the plans and processes for producing new, synthetic calibration materials for isotopic CRMs which are traceable to the national reference base.	Within one year, prepare plans, documents, or reports that describe the production or use of new synthetic calibration materials for isotopic CRMs.	100% Inspection
3.7.2.2	Annually review efforts to expand or improve elemental measurement capabilities.	Within one year, prepare plans, documents, or reports that describe the development or use of at least one new elemental analysis technique.	100% Inspection
3.7.2.3	Annually review efforts to expand or improve chemical separation capabilities.	Within one year prepare plans, documents, or reports that describe the development or use of at least one new chemical separation technique.	100% Inspection
3.7.3.3	Annually review efforts to expand or improve ICPMS capabilities	Within one year prepare plans, documents, or reports that describe the development or use of new ICPMS techniques.	100% Inspection
3.7.6	Review annual recommendations for capital equipment replacements or improvements.	Provide or maintain an annual list of capital equipment needs that details the type of equipment, specifications, approximate cost, and estimated associated costs for installation (including building modification, factory installment, etc.).	100% Inspection

8. Serve on Consensus Standards-Writing Committees and Working Groups

The following table provides the performance standards, AQLs and surveillance methods pertaining to Serving on Consensus Standards-Writing Committees and Working Groups Tasks include, but are not limited to:

- Service on Consensus Standards; and
- Service on Government Working Groups.

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.8	Annually review efforts to write or support those writing consensus standards for the nuclear industry.	At least two persons participate at least annually as subject matter experts on panels, committees or subcommittees writing consensus standards for the nuclear industry.	Periodic Inspection

9. Laboratory Administration

The following table provides the performance standards, AQLs and surveillance methods pertaining to Serving on Consensus Standards-Writing Committees and Working Groups Tasks include, but are not limited to:

- Finance and Budget;
- Timekeeping and Accounting for NBL Programs, Projects, and Activities;
- Records Management;
- Computer Systems Management;
- Web Page Management;
- Travel Processing and Coordination;
- Activity Status Reports;
- Property Management;
- Procurement;
- Public Relations and Marketing;
- Stockroom; and

- Administrative Support Activities.

PWS Section	Performance Standard	Acceptable Quality Level (AQL)	Surveillance Method
3.9.1.2	Annually review financial and other resource records for adequacy.	Financial and other resource records requested by the DGR are available 90% of the time within the agreed to deadline.	Periodic Inspection
3.9.3.1	Annually review document filing and storage for adequacy.	A statistical sample of documents prepared during the year are selected for review. 90% of the documents reviewed were properly filed in the central filing system.	Random Sampling
3.9.8	Annually review property records for adequacy.	The status of a random selection of property items from each category is evaluated based on the last inventory. At least 90% of the items reviewed were appropriately accounted for in the most recent inventory of that category of items.	Random Sampling

APPENDIX B: SERVICE PROVIDER DISCREPANCY REPORT

SERVICE PROVIDER DISCREPENCY REPORT			**1. DISCREPENCY REPORT NUMBER**
2. TO: (*Service Provider and Manager Name*)		**3. FROM:** (*Name of DGR*)	
DATES			
PREPARED	**ORAL NOTIFICATION**	**RETURNED BY CONTRACTOR**	**ACTION COMPLETE**
4. DISCREPENCY OR PROBLEM (*Describe in Detail. Include PWS references. Attach Continuation Sheet if Necessary.*)			
5. SIGNATURE OF DGR			
6. TO: (*Name of DGR*)		**7. FROM:** (*Service Provider*)	
8. SERVICE PROVIDER RESPONSE AS TO CAUSE, EFFECT, CORRECTIVE ACTION AND ACTIONS TO PREVENT RECURRENCE. (*Attach Continuation Sheet if necessary. Cite applicable SP QC program procedures or new QC procedures.*)			
9. SIGNATURE OF SP REPRESENTIVE		**10. DATE**	
11. GOVERNMENT EVALUATION (*Acceptance, partial acceptance, or rejection. Attach Coordination Sheet if necessary.*)			
12. GOVERNMENT ACTIONS (*Cure notice, show cause, other.*)			

CLOSE OUT			
	NAME AND TITLE	**SIGNATURE**	**DATE**
SP NOTIFIED			
QAE			
DGR			

APPENDIX C: CUSTOMER FEEDBACK RECORD

CUSTOMER FEEDBACK RECORD	
DATE AND TIME OF COMPLAINT	
SOURCE OF COMPLAINT ORGANIZATION INDIVIDUAL	
NATURE OF COMPLAINT	
PWS REFERENCE	
VALIDATION	
DATE AND TIME SERVICE PROVIDER INFORMED OF COMPLAINT	NAME OF SP REPRESENTATIVE INFORMED OF COMPLAINT
ACTION TAKEN BY SERVICE PROVIDER *(Responsible officer)*	
RECEIVED AND VALIDATED BY	
Determination: *Complaint Valid* ☐ *Complaint Invalid* ☐	

APPENDIX D: SAMPLING GUIDE/INSPECTION CHECKLIST

SERVICE FUNCTION: _____
PWS SECTION: _____

NOTE: **E** = Excellent Performance **S** = Satisfactory Performance **U** = Unsatisfactory Performance **N/A** = Not Applicable

1	**Method of Surveillance:**			
2	**Lot Size:**			
3	**Sample Size:**			
4	**Performance Requirement:** Performance is excellent (E) when _____ or fewer defects are discovered per month. Performance is satisfactory (S) when _____ or fewer defects are discovered per month. Performance is unsatisfactory (U) when _____ or more defects are discovered per month.			
5	**Sampling Procedure:** Instructions on how to select the sample must be clear and complete			
6	**Inspection Procedure:** The procedure must be detailed enough to allow a yes/no objective decision as to the acceptability of performance by anyone making the inspection. Explain when evaluation is to occur and what is acceptable/unacceptable			
		Performance: Excellent (E), Satisfactory (S), Unsatisfactory (U), Not Applicable (N/A)		
	PRS Requirements	**Timeliness**	**Quality of Work**	**Notes**
.				
	Overall Rating Of Inspection (E, S, U, or N/A)			

Inspector Comments: _____

_____

SP Signature: _____ **Date:** _____

QAE Signature: _____ Date: _____

APPENDIX E: ACRONYMS

ANSI	American National Standards Institute
AQL	Acceptable Quality Level
CO	Contracting Officer
COR	Contracting Officer Representative
CRM	Certified Reference Material
DART	DOE Anomaly Response Team
DGR	Designated Government Representative
DOE	U.S. Department of Energy
HQ	Headquarters
ICPMS	Inductively Coupled Plasma-Mass Spectrometry
MC&A	Material Control and Accountability
ME	Measurement Evaluation
MEO	Most Efficient Organization
NBL	New Brunswick Laboratory, Argonne, IL
NSNS	Nuclear Safeguards and Noproliferation Support, Program at NBL
OMB	Office of Management and Budget
PRS	Performance Requirements Summary
PWS	Performance Work Statement
QA	Quality Assurance
QAE	Quality Assurance Evaluator
QASP	Quality Assurance Surveillance Plan
QC	Quality Control
QCP	Quality Control Plan
SME	Safeguards Measurement Evaluation, Program at NBL
SO	Office of Security
SP	Service Provider
TE	Technical Exhibit
WFO	Work for others