



**ENVIRONMENTAL, SAFETY & HEALTH
PROGRAMS
COMMAND PERFORMANCE INSPECTION
GUIDANCE**

December 2001

**Naval Sea Systems Command
Environmental Protection, Occupational Safety & Health Office**





DEPARTMENT OF THE NAVY

NAVAL SEA SYSTEMS COMMAND
1333 ISAAC HULL AVE SE
WASHINGTON NAVY YARD DC 20378-0001

IN REPLY TO

5040

Ser 00T/187

DEC 28 2001

From: Commander, Naval Sea Systems Command

Subj: MAJOR CLAIMANT OVERSIGHT FOR OCCUPATIONAL SAFETY AND
HEALTH AND ENVIRONMENTAL MANAGEMENT PROGRAMS

Ref: (a) OPNAVINST 5100.23E CH-1 of 5 Oct 00
(b) OPNAVINST 5090.1B CH-2 of 9 Sep 99
(c) NAVSEAINST 5040.1D of 26 Apr 00
(d) NAVSEA Occupational Safety and Health Strategic Plan
(e) OSH Metrics QMB PAT Recommendations
(f) Naval Sea Systems Command (COMNAVSEASYSKOM)
Environmental Metrics 5200 Ser NUWC-22/64 of 9 Apr 01
(g) Policy for Environmental Compliance Evaluation (ECE)
and Occupational Safety and Health Management
Evaluation (OSHME) 5090 Ser 00T/70 of 30 Mar 98
(h) Guidance for Environmental and Safety Inspections
During Command Performance Inspections 5090 Ser
00T/243 of 6 Aug 98
(i) Guidance for Environmental Programs Internal
Assessments 5090 Ser 00T/245 of 10 Aug 98
(j) Guidance for Safety and Occupational Health Program
Self-Assessments 5100 Ser 00T/244 of 6 Aug 98
(k) The Short Guide To The Environmental Quality
Assessment (EQA) Program of Jan 00

Encl: (1) NAVSEA Environmental, Safety and Health Programs
Command Performance Inspection Guidance

1. The purpose of this letter is to identify expectations for meeting the NAVSEA evaluation and assessment requirements of references (a), (b) and (c), and to advance the NAVSEA Corporation towards the stated Vision of reference (d); "Our people make safety happen by making smart decisions. Everyone has a part."

2. A key component of smart decision-making is the measurement and analysis of performance. All activities will measure and analyze their Environmental, Safety and Health (ESH) program performance consistent with the needs of their command. Activities will assess the types of data collected and examine the process by which those data are analyzed in order to make

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good ESH program decisions regarding compliance to environmental regulations and the elimination and prevention of injuries and mishaps. Accordingly, the recommendations of reference (e) and (f) may be used to tailor the development of activity-specific ESH program measurement techniques and metrics. The approach, deployment, and results of ESH program performance measurement will be assessed during the Command Performance Inspection (CPI) set forth by reference (c).

3. Reference (g) established policy for NAVSEA Environmental Compliance Evaluation (ECE) and Occupational Safety and Health Management Evaluation (OSHME) is cancelled upon receipt of this letter. References (h), (i) and (j) developed in August of 1998 to progress NAVSEA activities towards implementing and assessing effective ESH programs, are cancelled upon receipt of this letter.

4. Enclosure (1) has been developed to maintain linkage to the NAVSEAINSGEN's CPI process and consistency with Navy policies on reviewing compliance to ESH regulatory requirements. Full compliance with all applicable ESH requirements has always been the bedrock of an activity environmental and safety program and will continue to be key to achieving the vision of reference (d).

5. References (a) and (b) establish requirements for conducting ESH self-assessments. Documentation of activity self-assessments provides the necessary input to ensure the processes prescribed in enclosure (1) are tailored to meet the needs of the activity while ensuring thoroughness and appropriateness of the NAVSEA ESH oversight program. Reference (a) contains guidance for planning and conducting comprehensive Occupational Safety and Health self-assessments. Guidance for meeting the internal assessment requirements of reference (b) is contained in reference (k) available on the NAVSEA Corporate Intranet available at http://sea00t.navsea.navy.mil/refmaterials/Archives/EOA_ShortGuide.pdf. Both sets of guidance include attributes to drive organizations "beyond mere compliance."

6. As part of the CPI process an ESH compliance review will be conducted at NAVSEA commands and field activities at a minimum of every 3 years. Additional or more frequent oversight will be based on the activity's understanding and demonstration of ESH compliance requirements; status of actual compliance, the

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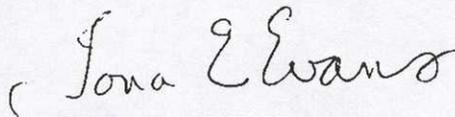
capability for consistent compliance and regular tracking of the correction of identified deficiencies. In addition, and consistent with the principles of the CPI process, the need for maintaining a systems perspective and improving ESH programs and overall business results will be emphasized.

7. Following the framework of enclosure (1), ESH professionals will assess the capability to comply with regulatory requirements and determine the effectiveness of integrating ESH programs into the overall business practices at NAVSEA activities. Compliance capability and business integration efforts are to be appropriately addressed and documented during the ESH self-assessment at each NAVSEA command. For the purpose of demonstrating regulatory compliance activity ESH self-assessments must identify:

- o which ESH programs were assessed (and how)
- o which ESH programs were not assessed (with rationale)
- o what was discovered (ESH regulatory compliance and noncompliance)
- o what is being done to correct deficiencies (actions plan/POA&M).

The ESH self-assessment submitted annually by each NAVSEA command underpins the ESH Compliance Review process by providing valuable information in defining a focus for the review and determining subsequent follow-on actions.

8. The NAVSEA point of contact is Mr. Bernie Ohalloran, NAVSEA 00T, at (707) 562-3250 or Ms. Sarita B. Levine, NAVSEA 00T, at (202) 781-1546.



IONA E. EVANS
By direction

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**NAVAL SEA SYSTEMS COMMAND
ENVIRONMENTAL, SAFETY & HEALTH PROGRAMS
COMMAND PERFORMANCE INSPECTION GUIDANCE**

December 2001

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Environmental Protection, Occupational Safety & Health Office**

Enclosure (1)

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SECTION 1. GENERAL INFORMATION

1.1 INTRODUCTION

The processes and information in this guidance handbook have been developed to assist environmental, safety and health (ESH) professionals in understanding major claimant evaluations and the Command Performance Inspection (CPI) process. The guidance is intended for those ESH professionals who are selected to serve on the Naval Sea Systems Command (NAVSEA) Environmental Protection, Occupational Safety and Health Office (SEA 00T) ESH compliance review team and as examiners on NAVSEA Inspector General (SEA 00N) CPIs. SEA 00T conducts ESH compliance reviews as part of the SEA 00N CPI.

The goal of an ESH compliance review is to ensure that ESH programs maintain the capability to comply with regulatory requirements. This goal is pursued with three objectives.

Objective 1 is to evaluate the activity's self-assessment to understand the means of self-discovery and self-determining compliance posture.

Objective 2 is to identify instances of ESH regulatory noncompliance at the activity level in order to determine trends in overall NAVSEA ESH program area effectiveness.

Objective 3 is to identify opportunities to institute more effective ESH processes and/or regulatory controls using the results of the ESH compliance review.

Headquarters commands are required to evaluate ESH program management at each of their activities every three years. ESH program management evaluations are accomplished in three distinct parts:

Part One is the ESH compliance review, which assesses the capability to comply with regulatory requirements at NAVSEA activities. ESH federal and state regulations and Executive Orders are the primary drivers in evaluating compliance capability.

Part Two is the CPI, which uses the Malcolm Baldrige National Quality Award Criteria for Performance Excellence to evaluate mission performance and readiness. The CPI develops activity-specific site visit issues (SVIs) to validate the approach, deployment, or results of key business processes and to identify strengths and opportunities for improvement (OFIs) for an activity.

Part Three is the follow-up performance assessment review (PAR), which evaluates an activity's progress toward improving areas identified by the activity in its process improvement plan.

The ESH compliance review, CPI, and PAR comprise the CPI program and work together to validate that ESH programs comply with regulatory requirements and that the principles and practices of those programs are satisfactorily integrated into the day-to-day business of executing our missions. The relationship, role, and functional responsibilities of SEA 00N and SEA 00T are defined in a partnering agreement between the two offices. More information on the CPI process is available through SEA 00N.

1.2 QUICK-REFERENCE CONTACT INFORMATION

NAVSEA 00N Inspection Branch (202) 781-3330/3338.

NAVSEA 00T Oversight Branch (202) 781-1546.

NAVSEA 00T CPI Program Manager (707) 562-3250.

1.3 ROLE OF THE ESH EXAMINER IN THE CPI

Environmental, safety and health professionals provide a needed expertise in assessing regulatory compliance and evaluating ESH program management integration into the overall business practices of the activity. The role of the ESH examiner is to “inject” his or her ESH expertise into the overall CPI process during the evaluation of an activity’s compliance posture, mission performance, readiness, effectiveness, and key process efficiency. The ESH examiner gives specific attention to ESH matters or issues generated during CPI events. It is also important to recognize that the efforts of the ESH examiner are extensive and will require patience and flexibility regarding CPI expectations and approaches to validating ESH program effectiveness.

The ESH examiner fulfills one or more of the following CPI roles for SEA 00T:

ESH Compliance Review Team Leader: Works closely with SEA 00T to tailor the ESH compliance review and structure the review team accordingly; coordinate site visit logistics and on-site operations with the activity’s ESH director or point of contact (POC) for ESH compliance reviews; guides and directs ESH media experts in the conduct and documentation of the compliance review, leading daily status briefings and in/out-brief presentations; and prepares for and performs the hand-off to the ESH examiner on the CPI team.

ESH Compliance Review Team Member: Conducts background research on the activity’s ESH program areas selected for review and determines which organizational entities, such as departments, work sites, processes, records, and documents, should be examined. This research and determination is key to an effective compliance review. These ESH professionals and media experts play an important role in conducting necessary on-site assessments, reviewing the activity’s ESH program records and documentation, and interviewing activity personnel in order to validate the activity’s capability to maintain compliance with ESH regulatory requirements. Team members also assist the ESH compliance review team leader in documenting results.

The ESH CPI Examiner: Links the ESH compliance review to the CPI process and serves as a member of the CPI team. The ESH CPI examiner validates the activity’s progress in fully integrating ESH program management into the day-to-day mission performance of the activity. This examiner will assist the CPI team in identifying ESH program strengths and opportunities for improvement and prepares an executive summary for SEA 00T or for the NAVSEA Logistics, Maintenance and Industrial Operations Directorate (SEA 04) of the findings along with a recommended score.

PAR/Follow-up Examiner: Plays a key role in validating progress on the activity’s process improvement plan. At times, depending on the complexity of the activity’s mission and ESH compliance posture, the PAR/follow-up examiner may also examine the effectiveness of an activity’s approach to correcting ESH program noncompliance and if that approach is resulting in the control or prevention of noncompliance recurrence.

1.4 ESH SELF-ASSESSMENT AND SELF-DISCOVERY

Higher authority (Office of Chief of Naval Operations (OPNAV)) establishes the requirement to conduct an Environmental Self-Assessment and a Safety and Health Self-Assessment (ESH self-assessments). Beyond being an established requirement, however, the ESH self-assessment process serves a much more important purpose: It maintains an activity's understanding and demonstration of ESH compliance requirements, determines the status of actual compliance and the capability for consistent compliance, and ensures regular tracking of the correction of identified deficiencies. The concept behind self-assessment is to promote a system of *self-discovery* through which the activity finds its own ESH problems, appropriately assesses those problems in terms of risk to mission performance, and then routinely fixes those problems through well-established business planning and corrective/preventive action processes. While the need to assess regulatory compliance can be driven by statutory and legal reasons, Navy policies and good performance management should drive activities to also assess their progress in fully integrating ESH program management into their mission and overall business practices.

Activities will be using the OPNAV Environmental Quality Assessment (EQA) and Performance Review and Measurement System (PR&MS) models to guide the development, use, and documentation of internal self-assessment/self-discovery methodologies and results.

Documented ESH self-assessment results provide important information to ESH compliance review teams and ESH CPI examiners in evaluating regulatory compliance and ESH program posture. For the purpose of demonstrating regulatory compliance, activity ESH self-assessments must identify which ESH programs were assessed, which were not and why, what was discovered (ESH regulatory compliance and noncompliance), and what is being done to correct deficiencies. In addition, the activity self-assessment must identify progress in fully integrating ESH program management into the mission and overall business practices. Activity self-assessments also provide important information to CPI examiners in determining the activity's maturity in maintaining a systems perspective and improving ESH programs and overall business results.

Prior to an ESH compliance review, activities submit their ESH self-assessment results to SEA 00T who then forwards them, along with available audit/regulatory compliance historical data, to the ESH compliance review team leader and ESH CPI examiners in a resources package prepared by SEA 00T. The ESH professionals selected to participate in CPI events use the activity's self-assessments and historical data to become familiar with the activity's self-discovery mechanism and to prepare for the on-site compliance review. The ESH self-assessment serves as the basis for the ESH compliance review and CPI by providing valuable information in defining a focus for the review and determining subsequent follow-up actions.

1.5 THE PROCESS CYCLE

The CPI process starts when SEA 00N establishes the CPI schedule (see Appendix A for the FY2002–FY2004 schedule). Six months before the activity's scheduled CPI, SEA 00N sends a "180-Day Letter" to the activity. The letter explains the purpose and approach of the CPI and provides a schedule of key events. More information on the "180-Day Letter" is available from SEA 00N.

For activities that will undergo an ESH compliance review as part of the CPI, SEA 00T will send a letter announcing the review 150 days in advance of the activity's scheduled CPI. The letter

explains the purpose of the review and requests that the activity submit its latest ESH self-assessment to SEA 00T no later than 120 days before the CPI assessment. Self-assessments that do not adequately address ESH regulatory compliance or are submitted late may result in the activity's being scheduled for a compliance-driven inspection using traditional local, state, and federal environmental or safety checklists. Details of the entire ESH compliance review process are presented in Section 5.

1.6 ADMINISTRATIVE REQUIREMENTS & ARRANGEMENTS

CPI Examiner Training & Preparation. The SEA 00N office requires CPI examiners to complete a three and one-half day Malcolm Baldrige training course before participating in a CPI. Prospective ESH CPI examiners that need training should contact the SEA 00T CPI program manager. ESH compliance review team members do not require Malcolm Baldrige training; however, an understanding of the Malcolm Baldrige criteria is helpful in understanding key linkages between ESH regulatory compliance and the integration of ESH processes into overall mission and business performance.

Travel Expenses. SEA 00N or SEA 00T pays for travel expenses. SEA 00N will provide travel funding for two SEA 00T examiners per CPI, and one SEA 00T examiner per CPI follow-up (PAR) assessment. SEA 00T or the ESH examiner's command will provide funding for travel to CPIs and follow-up assessments when additional ESH examiners are sent. Examiners should obtain appropriate funding documents from the SEA 00N and SEA 00T offices, but will need to submit the travel request through their own travel offices.

Dress, Personal Protective Equipment (PPE). ESH professionals selected to participate in the CPI process represent headquarters and will be interviewing workers at the activity. Consequently, business attire (ties for men) is required. For those assessment events that do not require interaction with activity personnel, dress may be business casual. Evening activities are casual, and dress is at the individual's discretion. Steel-toed shoes may be required for certain assessment activities and so should be brought along. However, if they are not owned it is advised that they *not* be bought just for the assessment. Other PPE will be supplied by the activity if necessary.

Computers. Activities are required to provide the CPI team with desktop computers and an adequate workspace. The ESH compliance review team leader is required to bring a laptop computer. All other ESH CPI examiners are encouraged to bring laptop computers, but they are not required. The use of computer technology facilitates the sharing of information and helps make the best use of limited assessment time.

1.7 IDENTIFYING LESSONS LEARNED AND OPPORTUNITIES TO IMPROVE

CPI Examiner Feedback. ESH CPI examiners provide valuable input to the identification of lessons learned and opportunities to improve both the formal CPI process and field interaction with the activities. All CPI examiners have the opportunity to provide feedback on the CPI process to help improve the process. SEA 00N provides a CPI team questionnaire for this purpose. A feedback form is also used to document comments from ESH compliance review team members so that the ESH compliance review process can be continuously improved.

SECTION 2. ESH COMPLIANCE REVIEW/CPI: PLANNING, CONDUCTING, AND RESULTS REPORTING

2.1 PLANNING AND PREPARATION

The CPI schedule published by SEA 00N (see Appendix A) identifies when and where a CPI team will be conducting an inspection and drives the planning and preparations for an ESH compliance review. For those activities that will undergo an ESH compliance review, a notification letter is sent by SEA 00T. This notification letter announces the purpose of the compliance review and makes a formal request to the activity to submit its most recent ESH self-assessment.

ESH professionals and headquarters personnel analyze ESH self-assessments submitted by the activity so that the ESH compliance review can be tailored based on the activity's approach to and results of their self-assessment discipline. Focus areas are identified so that the ESH compliance review team can make best use of the short visit (typically 2-4 days). Identifying focus areas also helps in selecting the most appropriate team of ESH professionals for a given activity.

Identifying the breadth of the requirements against which the review will be conducted, the organizational entities that will be subject to the review, and the types of evidence to be examined further refines focus areas. With a refined focus for the review, the review team Leader can then inform the activity ESH director as to what information (i.e., documents, records, plans, procedures, regulations, etc.) to have available for the review team while on site.

A disciplined approach to planning and preparation ensures that a small team of ESH professionals, in a very limited amount of time, will meet the needs and expectations of the major claimant while adding value to the activity's overall approach to self-discovery. For more information on ESH compliance review planning principles, see Appendix B.

2.2 CONDUCTING THE ESH COMPLIANCE REVIEW

Once on site, and in final preparation for conducting an ESH compliance review, team members are oriented to the review process by the review team leader. At this time, team members review the ESH compliance review process responsibilities; discuss the various tools, records, and reports; schedule and prioritize the on-site review actions; and identify deliverables. An in-brief with the activity is then conducted to introduce review team members, explain results reporting, and identify schedules and events.

During the review, daily meetings are held with the activity to inform them of compliance review observations and "areas of concern" that have been noted to date by the review team. This is done with the principle of "no surprises" in mind and to provide the activity an opportunity to discuss any noncompliances noted by the review team and to begin their investigation and assignment of corrective or preventive action as necessary.

The validation of an activity's compliance capability will normally include reviews of required site-specific reports, records, site plans, postings, permits, logs, etc. In-the-field observations of activity processes and work sites and interviews with personnel are also part of the validation. During the compliance capability validation, it is important that the review team keep the

“capability to self-discover” frame of reference. “Capability to self-discover” in this sense means that the activity is fully knowledgeable of applicable ESH regulatory requirements, has processes in place to identify noncompliance to those requirements, and then has the discipline, processes and system to correct the noncompliance.

For review team members, keeping the “capability to self-discover” frame of reference helps ensure that to some degree the effectiveness of the activity’s oversight/surveillance process is validated. In addition, the “capability to self-discover” allows the flexibility of applying the team’s knowledge and experience in managing ESH programs and judging the compliance posture of an activity.

2.3 REPORTING THE ESH COMPLIANCE REVIEW RESULTS

The ESH compliance review process is designed to provide SEA 00T with an objective view of the ESH program compliance capability conditions existing at the activity at the time of the review. While the results of the review may indicate ESH program compliance or noncompliance to the activity, reporting these results are primarily aimed at creating awareness of the value and importance of self-discovery to maintaining compliance to ESH regulatory requirements. To help create this awareness, the team generates an ESH CPI Compliance Review Team Supplemental Report to report indicators of compliance capability to SEA 00T and the activity. This supplemental report becomes a part of the CPI final report to the activity.

The “Value Assignment Criteria for Compliance Capability” in Table 2.1 are used to assign compliance capability indicators. The value assignment criteria are indicated using a continuum of red to green, where red is “lacking capability to self-discover with noncompliance indicative of a failure” and green is “fully capable of self-discovery with isolated noncompliance not indicative of a trend.” The indicators are only assigned to those ESH program areas that were subjected to the compliance review. These indicators primarily provide SEA 00T a snapshot of the compliance capability of each NAVSEA activity, as well as some indication, over time, as to where to focus resources, how to assemble teams, and which programs, corporately, are in possible need of technical assistance. Secondly, the indicators are provided to the activity to assist in the implementation and improvement of programs to achieve and maintain compliance by self-discovery.

2.4 ASSIGNING INDICATORS

The assignment of indicators using the criteria in Table 2.1 is based on objective evidence gathered by the team and four guidelines.

Guideline 1: When assigning an indicator, consider all observations, including the number of Observation Records, the examiners’ review notes pertaining to verification, witnessing, or inspection of field operations, and the examiners’ ESH professional knowledge and experience in managing field programs.

Guideline 2: All programs that will be assigned an indicator require at least one Observation Record.

Guideline 3: The review team’s observations will be considered, as well as the activity’s noncompliance history (objective evidence), when determining “trends.”

Guideline 4: The activity’s history of finding and correcting ESH noncompliances (objective evidence) plays a key role in assigning indicators. In other words, being “fully capable of self-discovery” may be of little value when there is a history (objective evidence) of reoccurring noncompliance in a particular program area. In this case the history must be factored in when determining the indicator.

TABLE 2.1

VALUE ASSIGNMENT CRITERIA FOR COMPLIANCE CAPABILITY

	Isolated observations of noncompliance— not indicative of a trend.	Multiple/related observations of noncompliance— indicative of a trend.	Widespread observations of noncompliance— indicative of a failure.
** The activity’s oversight/surveillance processes are “fully capable” of self-discovery.	Green	Green	Yellow
*** The activity’s oversight/surveillance processes are “capable” of self-discovery.	Green	Yellow	Red
**** The activity’s oversight/surveillance processes are “not capable” of self-discovery.	Yellow	Red	Red

** Objective evidence (i.e., records, plans, or data) provided by the activity demonstrates that their oversight/surveillance processes are self-discovering the same observations of noncompliance in the same ESH program area subjected to the review.

*** Objective evidence (i.e., records, plans, or data) provided by the activity demonstrates that their oversight/surveillance processes are self-discovering observations of noncompliance; however, they are not the same observations of noncompliance in the same ESH program area subjected to the review.

**** There is no objective evidence (i.e., records, plans, or data) provided by the activity that demonstrates their oversight/surveillance processes are self-discovering observations of noncompliance.

2.5 CONDUCTING THE ESH CPI AND REPORTING RESULTS

That portion of the CPI that examines the incorporation of ESH program processes and systems into the activity’s mission is conducted according to the requirements of the CPI process. In addition, ESH CPI examiners are “chartered” to do specific SEA 00T actions during the CPI hand-off as discussed in Section 3. CPI results are typically reported in terms of program strengths and opportunities for improvement (OFIs). As with the ESH compliance review, ESH CPI examiners are required to discuss observations and areas of concern with the activity’s ESH

director/manager. Significant problems observed in the ESH program, processes, and systems are addressed in a formal out-brief by a representative of SEA 00T. The ESH CPI examiner may recommend to the SEA 00T representative that (1) strengths be submitted by the activity as Best Management Practices (BMPs), (2) an action plan be developed to address OFIs, and/or (3) a follow-up assessment be made to verify improvement. However, SEA 00T senior managers will make the final decision on what actions should be taken.

On the final day of the CPI, SEA 00N provides the inspected command an overview of the results of the CPI. This overview is known as the CPI out-brief. As part of the out-brief, a SEA 00T or SEA 04 senior representative provides an ESH out-brief based on findings by the ESH CPI examiners. In preparing for the ESH portion of the out-brief, ESH CPI examiners must complete the ESH CPI Examiner Summary Sheet for ESH Out-briefer (see Appendix D, Exhibit D-5), identifying key topics for out-briefing consideration. The ESH CPI Examiner Summary Sheet reports on ESH strengths, OFIs, and/or BMPs identified during the CPI and provides a preliminary "score" for the out-briefer. Table 2.2 "CPI Scoring Criteria" summarizes the possible SEA 00T ESH results for CPI inspections and provides additional guidance to ESH CPI examiners in preparing an executive summary that identifies key topics for out-brief consideration. **ESH CPI examiners must not depart until they have debriefed the SEA 00T or SEA 04 representative on the last day of the inspection.**

ESH CPI examiners will also prepare a draft ESH CPI summary paragraph for inclusion into the CPI report to the activity. The following paragraphs provide guidance for preparing the draft ESH CPI summary paragraph for the CPI report.

FOR "RATING" OF SATISFACTORY

The Environmental, Safety and Health (ESH) program posture was satisfactory. ESH program posture is determined by the extent of ESH program integration into day-to-day business practices and (*the activity's*) capability to comply with ESH regulatory requirements. Information on the validation of ESH program integration into the business practices of (*the activity*) is contained in this report. Information on ESH regulatory compliance and subsequent required action is contained in (reference the ESH CPI Compliance Review Team Supplemental Report). This CPI and the review summarized in (reference the ESH CPI Compliance Review Team Supplemental Report) satisfy the Navy requirements for major claimants to perform ESH program assessments at subordinate commands. Goals to address all ESH OFIs must be included in (*the activity's*) PIP.

FOR "RATING" OF UNSATISFACTORY

The Environmental, Safety and Health (ESH) program posture was unsatisfactory. ESH program posture is determined by the extent of ESH program integration into day-to-day business practices and (*the activity's*) capability to comply with ESH regulatory requirements. Goals to address all ESH OFIs must be included in (*the activity*) PIP. In addition, (*the activity*) shall obtain assistance from the Environmental Protection, Occupational Safety and Health Office (SEA 00T) and provide the office with quarterly status reports of actions taken or planned to correct observations of ESH noncompliance. Information on the validation of ESH program integration into the business practices of (*the activity*) is contained in this report. Information on ESH regulatory compliance and subsequent required action is contained in (reference the ESH CPI Compliance Review Team Supplemental Report). This CPI and the review summarized in (reference the ESH

CPI Compliance Review Team Supplemental Report) satisfy the Navy requirements for major claimants to perform ESH program assessments at subordinate commands.

NOTE: All information contained in the CPI report that refers to the planning, performance, and results of the ESH compliance review will be referred to as “ESH compliance review” vice “Pre-CPI.”

TABLE 2.2
CPI SCORING CRITERIA

GRADE / RATING	RATIONALE	ACTIVITY FOLLOW-ON	SEA 00T FOLLOW-ON
Grade 1 SAT	BMPs identified. No OFIs identified. Isolated observations of noncompliance.	Address overall goal to correct/prevent ESH noncompliance in PIP. One-time status report of actions taken or planned to correct observations of ESH noncompliance.	Provide feedback to PIP and one-time corrective action status report. Review activity self-assessment in conjunction with scheduled PAR. Publish BMPs on the SEA 00T Homepage.
Grade 2 SAT	Minimal number of OFIs identified. Isolated observations of noncompliance.	Address overall goal to correct/prevent ESH noncompliance in PIP. Prioritized goals to address ESH OFIs in PIP is optional (at the discretion of the activity). One-time status report of actions taken or planned to correct observations of ESH noncompliance. SEA 00T assistance can be requested, but will not be required.	Provide feedback to PIP and one-time corrective action status report. Review activity self-assessment in conjunction with scheduled PAR. Provide assistance to activity when requested. Participation in PAR is optional (at the discretion of NAVSEA headquarters).
Grade 3 SAT	Moderate number of OFIs identified. Multiple/related observations of noncompliance.	Address overall goal to correct/prevent ESH noncompliance in PIP. Prioritized goals to address ESH OFIs in PIP. One-time status report of actions taken or planned to correct observations of ESH noncompliance. SEA 00T assistance can be requested, but will not be required.	Provide feedback to PIP and one-time corrective action status report. Review activity self-assessment in conjunction with scheduled PAR. Provide assistance to activity when requested. Participate in PAR.
SATISFACTORY THRESHOLD			
Grade 3- UNSAT	Many/repeat number of OFIs identified. Multiple/related observations of noncompliance.	Address overall goal to correct/prevent ESH noncompliance in PIP. Goals to address all ESH OFIs in PIP. Quarterly status report of actions taken or planned to correct observations of ESH noncompliance. SEA 00T assistance strongly urged.	Provide feedback to PIP and corrective action status reports. Review activity self-assessment in conjunction with scheduled PAR. Contact activity and discuss options for assistance. Provide assistance to activity when requested. Participate in PAR.
Grade 4 UNSAT	Several/repeat number of OFIs identified. Widespread observations of noncompliance.	Address overall goal to correct/prevent ESH noncompliance in PIP. Goals to address all ESH OFIs in PIP. Quarterly status report of actions taken or planned to correct observations of ESH noncompliance. SEA 00T assistance required.	Contact activity and schedule assist visit. Provide feedback to PIP and corrective action status reports. Review activity self-assessment in conjunction with scheduled PAR. Participate in PAR to validate progress on PIP. Self-assessments reviewed and SEA 00T participates in PAR.

2.6 ESH COMPLIANCE REVIEW TEAM AND CPI TEAM CLOSURE ACTIONS

ESH Compliance Review Team

Approximately thirty days after the activity ESH Compliance Review Team's site visit, but prior to completion of the CPI team's site visit, SEA 00T will send a letter that transmits the ESH Compliance Review Team Supplemental Report (see Section 2.2 above). The ESH Compliance Review Team Supplemental Report establishes requirements for responding to observations of noncompliance noted during the inspection. Draft copies of the Observation Records are left with the activity. (Subsequent to the site-visit and after SEA 00T approves the Observation Records, they are provided to the activity's ESH manager or designated point of contact.)

Activity Response to ESH Compliance Review Team Supplemental Report

The SEA 00T ESH Compliance Review Team Supplemental Report requires, within sixty-days, a one-time status report from the inspected activity. The activity status is to report the actions taken or planned to correct the regulatory non-compliances in the Observation Records.

NAVSEA Review of One-Time Status Report

SEA 00T will review the activity's one-time status report and based on the complexity and nature of the noncompliances observed will determine the appropriate follow-up action, if any. SEA 00T follow-up actions may include one or more of the following: checklist driven wall to wall compliance inspection, a technical assist visit, require the activity to conduct and submit new ESH self-assessments and request periodic progress reports.

Command Performance Inspection Team

The Command Performance Inspection (CPI) Report establishes requirements for the activity to respond to the opportunities for improvements (OFI's) noted during the inspection. The CPI Report references the ESH Compliance Review Team Supplemental Report (see above) and requires that the activity respond to all regulatory noncompliances noted therein.

Activity Response to the Command Performance Inspection (CPI) Report

The CPI Report requires a Process Improvement Plan (PIP), within sixty-days, from the inspection activity. The activity PIP is to address actions taken or planned to correct the OFI's selected. In addition, the PIP must address all the regulatory noncompliances referenced or identified in the CPI Report.

NAVSEA Review of Program Improvement Plan (PIP)

SEA 00N reviews activity PIP's to ensure that all required items are addressed and that long/short term goals and measurements are identified. SEA 00N may require the activity to resubmit their PIP.

SEA 00N sends Performance Assessment Review (PAR) teams to selected activities twenty-four months after their CPI. The PAR teams validate progress made on the long and short-term goals in the activity PIP.

SEA 00T views the PAR (see above) as an opportunity to formally visit activities and bring ESH issues to the level of Commanding Officer. Factors that will determine ESH professionals' participation on the PAR team are: ESH items in the PIP, progress on correcting ESH noncompliances, new ESH concerns since the CPI, and ESH items in activities' annual self-assessments.

If SEA 00T elects to participate in the PAR, a letter is sent to the activity announcing that an ESH examiner(s) will be on the PAR team. The ESH professional on the PAR team will be provided the recent activity self-assessments, past audit/compliance data and ESH metrics. Prior to the PAR, a SEA 00T representative will brief the ESH professional on headquarters concerns or issues, if any.

SECTION 3. EXAMINER SELECTION

3.1 SELECTING THE ESH EXAMINER

The ESH examiner is selected because of his or her good teaming skills and ability to be objective. The examiner is matched to the CPI event based on activity mission and the scope and focus of the given event. For example, when scheduling an ESH compliance review for a naval shipyard where hazardous waste management will be a focus, an ESH professional from a naval shipyard (typically Code 106 personnel) who is very knowledgeable or specialized in hazardous waste management will be nominated to serve on the review team. This ensures that the review team clearly understands the hazardous waste practices at a naval shipyard and how the shipyard organizes to manage the program. Matching examiners to activity mission and event scope and focus also applies when preparing for CPI events at other NAVSEA activities.

All examiners representing SEA 00T on CPI events are selected by SEA 00T. Most examiners will be selected from a pool of NAVSEA field activity ESH professionals/managers with some examiners selected from a pool of naval reserve officers and in some cases contractor personnel. Inspectors from the Naval Inspector General may also augment ESH compliance review teams. Selected examiners will serve any of the following key examiner positions:

ESH Compliance Review Team Leader. The review team leader is selected because of his or her team leadership skills, extensive knowledge of ESH technical matters and successes in managing ESH programs in the field.

ESH Compliance Review Team Member. The team members are ESH professionals and media experts selected because of their team-based skills and extensive knowledge of specific ESH program areas.

ESH CPI and PAR Examiner. The CPI/PAR examiner is selected because of his or her team-based skills and knowledge of ESH programs and Malcolm Baldrige Criteria for Performance Excellence. These examiners require specific training in the Baldrige criteria before they can be considered for CPI/PAR assignment.

Individuals selected by NAVSEA to fulfill one or more of the above CPI roles for SEA 00T must exhibit professional behavior during CPI events. They must have confidence in their methods and be willing to stand behind their results and share in the responsibility for process integrity with all CPI examiners, balancing ESH "expertise" with teaming skills. Certain desirable characteristics help in maintaining this balance. These characteristics might include:

Knowledgeable of ESH Principles and Practices	Professional	Unafraid of Being the "Bad Guy"
Patient	Good Listener	Honest
Interested	Analytical	Diplomatic
Tenacious (Strong)	Good Planner	Disciplined
	Inquisitive	Able to Communicate at all Levels
	Has Integrity	

Of course, the following characteristics are opposite of the desirable; however, it is worthwhile to recognize these also:

Argumentative
Inflexible
Gullible
Poor Planner

Opinionated
Jumps to Conclusions
Noncommunicative
Nonprofessional

Lazy
"Mr. Nice Guy"
Devious
Uninterested

SECTION 4. INFORMATION VALIDATION

4.1 GATHERING AND VALIDATING INFORMATION

After it has been determined what type of CPI event will be conducted – an ESH compliance review, CPI site visit, or PAR – the next consideration is to gather the information that will validate key components of the event such as “compliance capability” or the integration of ESH programs into the day-to-day practices of the activity. One of the most vital concerns in validating information is time. It is usually essential that the event be performed as rapidly and thoroughly as possible. At certain times it may be necessary to have a checklist, procedure or set of questions to assist in gathering and validating facts.

The primary purpose of validating information is to obtain a degree of confidence that activity programs, processes, and systems are:

- Well thought out (systematic approaches);
- Used throughout applicable elements of the organization (well deployed); and
- Effective for accomplishing the activity’s mission (results over time).

Activity personnel should be able to demonstrate a good understanding as to why each ESH program, process, or system is used, citing examples of ongoing use, showing facts and data that prove success, and so on. One or all of the following methods may be used to help validate information:

- A physical examination of products or services.
- Witnessing (watching) a process operation.
- Verifying objective evidence, normally by reviewing the data.

During information validation it is important to record the operations witnessed, the data reviewed (records, forms, and documentation numbers), and activity personnel involved. A general means for validating information might address the following questions:

- What do they do?
- How do they do it?
- Why do they do it?
- Who is involved?
- How often do they do it?
- How do they know it works?

4.2 STANDARD SITE VISIT ISSUES

When CPI examiners are validating an activity’s Unit Self-Assessment and discover that information is missing or unclear it is necessary to have a systematic way of gaining greater clarity and/or, if possible, finding the missing information. The CPI practice of finding additional information or seeking clarity is through the use of Site Visit Issues (SVIs) which are formulated into a set of standard questions that can be tailored to any given activity. SVIs are elements of

command performance that CPI examiners must validate during the CPI to determine strengths and OFIs for inclusion in the CPI report.

CPI examiners focusing on the ESH aspect of an organization will also find it necessary at times to seek greater clarity or additional information when validating an activity's ESH program posture. The SVIs pertaining to ESH program integration are provided in Section 4.3.

4.3 SVIS FOR ESH PROGRAM POSTURE VALIDATION

The ESH CPI examiner must "inject" his or her ESH expertise into the overall CPI process and provide specific attention and consultation to all ESH issues generated by the CPI team. Table 4.1 provides a list of ESH SVIs to assist the ESH CPI examiner in determining the degree to which ESH has been integrated into the activity's mission and business processes. Any SVI selected from the list will likely be tailored to the activity and then provided to the appropriate CPI Category Leader for validation. All or part of the SVIs may be used.

The SVIs in Table 4.1 are numbered and aligned with the Category and Item numbers contained in the Malcolm Baldrige 2000 Criteria for Performance Excellence. Category 6 "Process Management" focuses, in part, on the activity's self-assessment discipline. This focus is intended to drive more systematic approaches to "self-discovery" thereby identifying opportunities to enhance ESH program and business integration and improve the activity's understanding and demonstration of ESH compliance requirements, status of actual compliance, and the capability for consistent compliance.

TABLE 4.1
ESH SITE VISIT ISSUES

1	<i>LEADERSHIP</i>
1.1	<u>Organizational Leadership</u>
1.1.a.	Senior Leadership Direction
	How do senior leaders ensure that employees know and understand organizational ESH values and expectations?
	How are ESH values and expectations integrated with leadership selection/training and with performance planning and leadership assessment processes?
	Do supervisor evaluations include attributes for safety awareness?
	How are senior leaders involved in Safety Program implementation?
1.1.b.	Organizational Performance Review
	How do senior leaders ensure that the review of organizational performance and capabilities to assess organizational health includes progress relative to ESH program performance goals?
	Do organizational priorities for improvement include priorities for ESH program improvement?
1.2	<u>Public Responsibility and Citizenship</u>
	How do senior leaders ensure that the local community is aware of ESH risks associated with the organization's products, services, and operations?
	How do employees of the organization support and strengthen community relationships regarding ESH matters?

2 STRATEGIC PLANNING**2.1 Strategy Development****2.1a. Strategy Development Process**

How does the organization ensure that ESH improvement planning and goal setting processes are systematic, well organized, and include all applicable functions in the organization?

Is ESH improvement planning and goal setting done in a hierarchical fashion and at all applicable levels in the organization, starting from the top?

2.1b. Strategic Objectives

Has the command established key strategic ESH objectives and timetables for accomplishing them? If so, what are they?

2.2 Strategy Deployment

How does the command develop action plans to address key strategic ESH objectives?

What are the timetables for accomplishing them?

Has the command established short- and longer-term actions and a method to change them if necessary? If so, what are the goals and how do they change them.

Has the command established two-to-five year projections for ESH performance including key performance goals, as appropriate? If so, what are they?

Does the command have any ESH benchmarking partners and if so why did they choose this partner(s)?

3 CUSTOMER AND MARKET FOCUS**3.1 Customer and Market Knowledge**

How does the command identify those customers receiving ESH program services?

Who are those customers?

3.2 Customer Relationship and Satisfaction**3.2a. Customer Relationship**

How does the command ensure easy access to important ESH information?

How does the command manage ESH-related complaints?

3.2b. Customer Satisfaction Determination

How does the command address ESH-related complaints?

How does the command follow-up on ESH-related complaints including actionable feedback?

4 INFORMATION AND ANALYSIS**4.1 Measurement of Organizational Performance**

Has the command developed performance measures for all ESH business drivers or goals?

Are the ESH performance measures consistent across all business units and/or locations?

What key factors are used in the selection of ESH performance measures?

4.2 Analysis of Organizational Performance

How does the command assess the performance of the ESH program?

How does the command share the results of ESH program performance assessment with all work groups and/or functional levels of the organization?

5 *HUMAN RESOURCE FOCUS***5.1 Work Systems**

How does the command ensure that the design, organization, and management of work systems promote ESH awareness and cooperation among employees?

Does the command's employee performance management system include attributes for and feedback to employees to support high ESH program performance?

How is this information used?

5.2 Employee Education, Training, and Development

How does the command ensure that ESH training and education are closely tied to ESH business goals and success factors?

How does the command identify future ESH training needs of employees to promote ESH program excellence?

How does the command identify the knowledge and skills needed by employees to function in the ESH work systems and business structures used in the organization?

5.3 Employee Well-Being and Satisfaction**5.3a. Work Environment**

How does the command address and improve workplace health, safety, and ergonomic factors?

Are employees free to report on issues of workplace health, safety, and ergonomic factors without fear of reprisal?

5.3b. Employee Support Climate

How does the command assist injured employees to return to work?

5.3c. Employee Satisfaction

How does the command ensure that employee assessments of satisfaction and well-being include workplace health, safety, and ergonomic factors?

6 *PROCESS MANAGEMENT***6.1 Product and Service Processes****6.1a. Design Processes**

How does the command ensure that personnel ESH program skills, knowledge, and abilities are correctly matched to the requirements of the process?

How does the command validate or otherwise prove the capability of newly designed processes so potential ESH problems can be avoided?

6.1b. Production/Delivery Processes

How does the command ensure that the day-to-day operations of key production/delivery processes maintain compliance with ESH requirements?

6.2 Support Processes

Has the command identified ESH processes as key to the organization's mission and is ESH self-assessment/self-assessment planning included?

How are structured reviews of pertinent ESH processes, their assembled components and/or associated control methods scheduled and conducted?

How are anticipated self-assessment activities including appropriate feedback loops to all stakeholders planned for?

Is there a formal plan?

Are checklists and/or procedures used?

How often does the command provide an updated ESH self-assessment plan or a summary of significant amendments to the major claimant?

What does the command do with ESH self-assessment results?

How are results used to improve ESH programs?

How does the command ensure that the ESH self-assessment is coordinated with all affected commands to cover all processes, facilities and practices with environmental aspects within the "fence line"?

6.3 Supplier and Partnering Processes

How does the command communicate ESH standards/requirements to suppliers/partners?

What procedures are in place for periodically assessing supplier/partner processes, products, and services in relationship to ESH standards/requirements?

How does the command keep suppliers/partners informed on a regular basis of their performance relative to ESH requirements?

How does the command establish and maintain liaison between the local ESH office and other DoD activities for coordination of specialty functions such as medical, fire, security, etc.?

7 ***BUSINESS RESULTS***

The ESH CPI examiner should expect to see regulatory and compliance data presented by the activity. Results data presented should be consistent with the measures presented in the self-assessment, the ESH operational indices stated in Category 4, and the ESH measures on which the activity sets the goals described in Category 2. Consider the following when validating business results.

- The use of targets, goals, and standards by which ESH performance can be measured.
- Number of years' worth of historical data presented to show ESH trends.
- Degree to which all indices show continuous and steady ESH improvement.
- Levels and trends in measures of OSH and environmental performance and other measures of public responsibility.
- Levels and trends in regulatory/compliance results with no significant adverse findings.
- Extent of use and effectiveness in managing key performance data and information such as injury/illness rates, mishaps, regulatory compliance, and ESH program costs.

SECTION 5. ESH COMPLIANCE REVIEW PROCESS AND RESPONSIBILITIES

In this section, various requirements, responsibilities, and key roles are explained to help understand how an ESH compliance review is planned for, conducted, and then linked to the CPI process. The glossary in Appendix E defines some of the more “process unique” terminology used in this section (and throughout the entire guidance handbook).

5.1 ESH COMPLIANCE REVIEW ROLES & RESPONSIBILITIES

The ESH Compliance Review Process Owner defines the focus for an ESH compliance review by working with SEA 00T headquarters personnel and NAVSEA field ESH professionals to identify which ESH program areas to focus on. In defining a focus for the review, consideration is given to the activity’s documented ESH self-assessments, the mission of the activity, and its regulatory history. The review will also be scoped in terms of the breadth of the requirements against which the review will be conducted and the time span for the evidence that will be examined. As a means of gathering additional and supporting information the process owner will request current and historical ESH information from the NAVSEA Office of Counsel (SEA00L), Echelon 3 representatives, headquarters personnel, and technical support services as appropriate. This information helps align the compliance review to a headquarters perspective. The process owner also approves the ESH CPI Compliance Review Team Supplemental Report and Observation Records, participates selection of the review team, provides site visit tasking and resources, and takes part in CPI hand-off discussions.

The SEA 00T CPI Program Manager schedules review team visits, notifies the activity of upcoming ESH compliance reviews, and requests that the activity submit its most recent ESH self-assessment to SEA 00T. The CPI program manager assists the process owner and review team leader in providing all pertinent ESH compliance review information to the review team in advance of the activity visit. The CPI program manager participates in CPI hand-off discussions and coordinates the integration of the ESH compliance review results with the CPI process to aid in assessing the activity’s ESH program posture.

The ESH Compliance Review Team Leader (selected by SEA 00T) coordinates compliance review visit logistics and on-site operations with the activity’s ESH director or point of contact (POC). The review team leader also guides the review team in the generation of Observation Records, develops the draft ESH CPI Compliance Review Team Supplemental Report and CPI hand-off documentation, leads daily status briefings and in/out-brief presentations at the activity, and participates in CPI hand-off discussions. The review team leader is the central figure for providing unity and cohesiveness to the compliance review.

The ESH Compliance Review Team conducts the background research on the activity’s ESH program areas selected for review and determines which organizational entities, such as departments, work sites, processes, records, and documents, should be examined. This research and determination are key to an effective compliance review. The review team conducts necessary on-site inspections, reviews the activity’s ESH program records and documentation, and interviews activity personnel in order to validate the activity’s capability to maintain

compliance with ESH regulatory requirements. The review team records observations of regulatory noncompliance and assists the review team leader in preparing activity briefings and the draft ESH CPI Compliance Review Team Supplemental Report and CPI hand-off documentation.

Information Control. The information generated as a result of an ESH compliance review or CPI is related to the internal practices of the Department of the Navy and is an internal communication within the inspecting command. Reports, records, and documented information pertaining to these reviews are not releasable, nor may their contents be disclosed outside of the original distribution, nor may they be reproduced in whole or part without prior written approval of the Commander, Naval Sea Systems Command.

5.2 THE PROCESS

Table 5.1 prescribes the planning, preparation, and performance of an ESH compliance review and its integration with the CPI process. Functional roles identified in the "Responsible Party" column execute the process actions. Process steps are shown as a sequence of events; however, the steps are not intended to constrain the flexibility that may be necessary on some reviews. Cycle time indicators (e.g., T-150, T-120, T-90, etc.) are generic due dates based on the number of days before the activity's scheduled CPI. Appendices C and D contain the various letters and forms mentioned in the process.

The flowchart, Figure 5.1, can be used in conjunction with the table or in lieu of the table depending on the amount of detail needed by the user. The table contains more detail and provides important process notes to the user.

5.3 LINKING THE ESH COMPLIANCE REVIEW TO THE CPI

The primary means of ensuring good linkage between an ESH compliance review and the CPI is managed by the selection of ESH CPI examiners and their disciplined validation practices. Additionally, good linkage is fostered through a CPI hand-off, which provides the mechanism for communicating specific issues from one CPI event to the other. The hand-off identifies observations of noncompliance and areas of concern uncovered during the compliance review that require further examination through the scrutiny of the Malcolm Baldrige criteria and CPI process. Participants in the CPI hand-off discussion typically include the ESH CPI examiner(s), ESH compliance review team leader, SEA 00T CPI program manager, and a SEA 00T management representative. This hand-off ensures continuity between the ESH compliance review process and the CPI process.

**TABLE 5.1
PROCESS FOR PLANNING & CONDUCTING ESH COMPLIANCE REVIEWS WITH
CPI INTEGRATION**

Responsible Party	Step	Action
SEA 00T CPI Program Manager	10	<p>T-150.</p> <p>Send letter (Appendix C, Exhibit C-1) to notify activity of an upcoming ESH compliance review. Identify the purpose of the review, expected time span and dates, points-of-contact, and compliance review expectations.</p> <p>Request that the activity provide their most recent documentation of ESH self-assessments, which for the purpose of regulatory compliance, must identify the following:</p> <ul style="list-style-type: none"> • Which ESH programs were assessed; • Which ESH programs were not assessed and why; • What was discovered (compliance and noncompliance); and • What is being done to correct deficiencies (action assignment, implementation, tracking, and verification). <p>Send the following to the Oversight Program Manager (Process Owner).</p> <ul style="list-style-type: none"> • ESH Candidate Oversight Focus Area Nomination Form (Appendix D, Exhibit D-1). • ESH Compliance Review Fact Sheet with necessary components completed.
	15	<p>T-90.</p> <p>After receiving the activity’s ESH self-assessments send them to the review team leader and the following SEA 00T directors and program manager.</p> <ul style="list-style-type: none"> • Technical Support Director • Safety Management Director • Oversight Program Manager <p>Send the following to the review team leader.</p> <ul style="list-style-type: none"> • Candidate Oversight Focus Area Nomination Form (Form No. SEA5040/F011 (Appendix D, Exhibit D-1)). • NAVSEA Environmental, Safety & Health Programs CPI Guidance.
Review Team Leader	20	<p>T-90.</p> <p>Review the activity’s ESH self-assessments and nominate candidate focus areas for ESH compliance review on Form SEA5040/F011. Focus areas are nominated based on analysis of the activity self-assessment and knowledge of activity mission and activity-specific ESH program compliance needs. Identify on form that focus areas are for ESH compliance review.</p> <p>Send focus areas to the Oversight Program Manager (Process Owner).</p>

TABLE 5.1–Continued
PROCESS FOR PLANNING & CONDUCTING ESH COMPLIANCE REVIEWS WITH
CPI INTEGRATION

Responsible Party	Step	Action
Process Owner	25	<p>T-80.</p> <p>Review the ESH compliance focus areas provided by the review team leader and the activity’s ESH self-assessments. Based on nominated focus areas initiate the request for additional ESH program management information from SEA 00T directors. As necessary request supporting information from the NAVSEA Office of Counsel (SEA00L), Echelon 3 representative, Program Office, and/or technical support services personnel. Give appropriate consideration to such historical data and information as:</p> <ul style="list-style-type: none"> • Notices of violation • Injury/illness concerns • Relevant NEPA issues • Tech assist visits/results • Relevant contractor/contracting issues • Naval shipyard issues (shipyard reviews only) • Mishap data/information • Relevant acquisition issues • Data call/data management issues • Relevant P2 issues <p>Use the information gathered above to refine the focus areas nominated by the review team leader.</p>
	30	<p>T-80.</p> <p>Initiate a telephone conference with the review team leader and the SEA 00T CPI program manager to continue refining the compliance review focus and to select review team members.</p> <p>Complete the ESH Compliance Review Fact Sheet (Form SEA5040/F009) (Appendix D, Exhibit D-2).</p>
Review Team Leader	35	<p>T-75.</p> <p>Begin on-site coordination of review team operations (i.e., access to activity personnel, work sites, identification of ESH information to have on hand, and team protocol) with the activity ESH director/POC. Assign focus areas to review team members and send them the applicable ESH compliance review information (i.e., activity self-assessments, historical information, copy of the NAVSEA Environmental, Safety & Health Programs CPI Guidance).</p> <p><i>NOTE: The SEA 00T CPI program manager is available to assist in on-site coordination of review team operations.</i></p>

TABLE 5.1–Continued
PROCESS FOR PLANNING & CONDUCTING ESH COMPLIANCE REVIEWS WITH
CPI INTEGRATION

Responsible Party	Step	Action
Review Team	40	<p>T-60. Study all ESH compliance review information provided (i.e., assigned focus area, activity self-assessments, historical information, the NAVSEA Environmental, Safety & Health Programs CPI Guidance). Based on the assigned focus area, assist the review team leader in identifying which organizational entities (i.e., departments, work sites, processes, documents, etc.) should be subject to the compliance review, including the types of evidence to examine.</p>
Review Team Leader	50	<p>T-50. Work with the review team members and the process owner to confirm that ESH compliance review information, as a minimum, accounts for the following:</p> <ul style="list-style-type: none"> • ESH program focus areas. • Breadth of the requirements against which the review will be conducted. • Organizational entities subject to the review effort. • Types of evidence to be examined. <p>If the ESH compliance review information accounts for the above minimum then go to Step 60, otherwise revise to incorporate or change information as necessary then go to Step 60. <i>NOTE: ESH compliance review information is now referred to as the "ESH Compliance Review Plan."</i></p>
	60	<p>T-45. Confirm site-specific logistic or administrative needs and arrangements with the activity ESH director/POC and review team members. Inform the ESH director/POC what ESH information (i.e., documents, records, plans, procedures, regulations, etc.) to have available for the review team while on site. <i>NOTE: The SEA 00T CPI program manager is available to assist in securing logistical and/or administrative needs and arrangements.</i></p>
Review Team	70	<p>T-40. Arrange for travel to activity site.</p>
	80	<p>T-30. Travel to activity site.</p>

TABLE 5.1–Continued
PROCESS FOR PLANNING & CONDUCTING ESH COMPLIANCE REVIEWS WITH
CPI INTEGRATION

Responsible Party	Step	Action
Review Team Leader	90	<p>On-site Workday 1.</p> <p>Conduct a review team orientation briefing. Revise the ESH Compliance Review Plan (if necessary), prioritize on-site events, and schedule daily review team meetings.</p> <p><i>NOTE: Review team meetings are used to discuss observations and areas of concern noted to date and are held before briefing the activity ESH director/POC.</i></p> <p>Conduct an in-brief with the activity ESH director/POC. Introduce review team members, identify activity-briefing schedules, and discuss how and when results will be reported.</p> <p><i>NOTE: At some activities concerns/questions regarding the purpose of the ESH compliance review may arise. Questions dealing with purpose should be addressed with the following or similar: “The ESH compliance review process is designed to provide SEA OOT with a snapshot of activity ESH program compliance conditions existing at the time of the review. While the results of the review may indicate to an activity a degree of ESH program compliance or noncompliance, the results are primarily aimed at creating awareness as to the value and importance of self-discovery to maintaining compliance.”</i></p> <p><i>NOTE: Some activities may request that the Commanding Officer/Senior Leadership/ESH Staff participate in the in-brief.</i></p> <p>As necessary, conduct “windshield” tour of the activity and identify escorts.</p>

TABLE 5.1–Continued
PROCESS FOR PLANNING & CONDUCTING ESH COMPLIANCE REVIEWS WITH
CPI INTEGRATION

Responsible Party	Step	Action
Review Team	100	<p>On-site Workdays 1-2.</p> <p>Begin validation of activity’s compliance capability and record observations of regulatory noncompliance using the ESH Compliance Review Field Observation Record, Form SEA 5040/F002 (Appendix D, Exhibit D-2).</p> <p><i>NOTE: Validation will include:</i></p> <ul style="list-style-type: none"> • <i>Reviews of required site-specific reports, records, site plans, postings, permits, logs, etc.</i> • <i>In-the-field observations of activity processes and work sites.</i> • <i>Interviews with personnel.</i> <p><i>NOTE: Keep the “capability to self-discover” frame of reference while conducting the above validation. This requires some examination of the activity’s oversight/surveillance process as well as applying the team’s knowledge and experience in managing ESH programs.</i></p> <p>Attend review team meeting to discuss observations and areas of concern. Assign a Record Number to the Observation Records generated and mark them as “Draft Working Papers.”</p> <p><i>NOTE: Observation Record Numbers are assigned using the following convention: Activity Prefix Designator followed by numerical serialization starting with 001 (i.e., Crane001, Crane002, etc.).</i></p> <p>Prepare for briefing to activity ESH director/POC on observations and areas of concern noted to date.</p>

TABLE 5.1–Continued
PROCESS FOR PLANNING & CONDUCTING ESH COMPLIANCE REVIEWS WITH
CPI INTEGRATION

Responsible Party	Step	Action
Review Team	110	<p>On-site Workday 2.</p> <p>Brief the activity ESH director/POC on observations and areas of concern noted to date.</p> <p><i>NOTE: It may be appropriate for the review team leader to brief only the ESH director.</i></p> <p>Continue validation of the activity’s compliance capability and record observations of regulatory noncompliance using ESH Compliance Review Field Observation Record, Form SEA 5040/F002 (Appendix D, Exhibit D-3).</p> <p><i>NOTE: Validation will include:</i></p> <ul style="list-style-type: none"> • <i>Reviews of required site-specific reports, records, site plans, postings, permits, logs, etc.</i> • <i>In-the-field observations of activity processes and work sites.</i> • <i>Interviews with personnel.</i> <p><i>NOTE: Keep the “capability to self-discover” frame of reference while conducting the above validation. This means that some examination of the activity’s oversight/surveillance process, as well as applying the team’s knowledge and experience in managing ESH programs is necessary.</i></p> <p>Attend review team meeting to discuss observations and areas of concern. Assign a Record Number to the Observation Records generated and mark them as “Draft Working Papers.”</p> <p><i>NOTE: Observation Record Numbers are assigned using the following convention: Activity Prefix Designator followed by numerical serialization starting with 001 (i.e., Crane001, Crane002, etc.).</i></p> <p>Prepare for briefing to activity ESH director/POC on observations and areas of concern noted to date.</p> <p><i>NOTE: For some activities it may be necessary to start planning to include an extra day in the review in order to complete the review and adequately prepare for and conduct the out-brief.</i></p>

TABLE 5.1–Continued
PROCESS FOR PLANNING & CONDUCTING ESH COMPLIANCE REVIEWS WITH
CPI INTEGRATION

Responsible Party	Step	Action
Review Team	120	<p>On-site Workdays 2-3.</p> <p>Brief the activity ESH director/POC on observations and areas of concern noted to date.</p> <p><i>NOTE: It may be appropriate for the review team leader to brief only the ESH director.</i></p> <p>Complete validation of the activity’s compliance capability and record observations of regulatory noncompliance using Form SEA5040/F002.</p> <p><i>NOTE: Validation will include:</i></p> <ul style="list-style-type: none"> • <i>Reviews of required site-specific reports, records, site plans, postings, permits, logs, etc.</i> • <i>In-the-field observations of activity processes and work sites.</i> • <i>Interviews with personnel.</i> <p><i>NOTE: Keep the “capability to self-discover” frame of reference while conducting the above validation. This means that some examination of the activity’s oversight/surveillance process, as well as applying the team’s knowledge and experience in managing ESH programs is necessary.</i></p> <p>Attend review team meeting to discuss observations and areas of concern. Assign a Record Number to the Observation Records generated and mark them as “Draft Working Papers.”</p> <p><i>NOTE: Observation Record Numbers are assigned using the following convention: Activity Prefix Designator followed by numerical serialization starting with 001 (i.e., Crane001, Crane002, etc.).</i></p> <p>Check the accuracy and completeness of all data fields entered on the Observation Records (Form SEA5040/F002). Begin activity out-brief preparations.</p>

TABLE 5.1–Continued
PROCESS FOR PLANNING & CONDUCTING ESH COMPLIANCE REVIEWS WITH
CPI INTEGRATION

Responsible Party	Step	Action
Review Team Leader	130	<p>On-Site Workday 3.</p> <p>Work with review team members to prepare a draft ESH CPI Compliance Review Team Supplemental Report (Appendix C, Exhibit C-4) and a draft CPI Hand-Off Memorandum (Appendix C, Exhibit C-5). Ensure the ESH CPI Compliance Review Team Supplemental Report is identified as “Draft Working Papers.”</p> <p>Work with the review team and process owner to determine key out-brief points and what documented information will be provided to the activity as part of the ESH compliance review out-brief. If necessary, discuss the need to include an extra day in the review and prepare accordingly.</p> <p><i>NOTE: Interaction with process owner will be done via telephone conference prior to the activity out-brief.</i></p> <p><i>NOTE: At a minimum, the observation records generated by the review team and marked “Draft Working Papers” will be provided to the activity ESH director prior to the team’s departure.</i></p> <p>Conduct an out-brief with the activity ESH director/POC to convey the results of the ESH compliance review.</p> <p><i>NOTE: Some activities may request that the Commanding Officer/Senior Leadership/ESH Staff participate in the out-brief.</i></p> <p><i>NOTE: It may be appropriate and necessary to include all review team members in the out-brief.</i></p>
	135	<p>T-21.</p> <p>Send the draft ESH CPI Compliance Review Team Supplemental Report, Observation Records, and CPI Hand-Off Memorandum to the process owner and the SEA 00T CPI program manager. Ensure the ESH CPI Compliance Review Team Supplemental Report and Observation Records are identified as “Draft Working Papers.”</p>
Process Owner	140	<p>T-14.</p> <p>Review the draft ESH CPI Compliance Review Team Supplemental Report, the Observation Records, and draft CPI Hand-Off Memorandum. If the ESH CPI Compliance Review Team Supplemental Report and Observation Records are <u>approved</u>, go to step 145. If they are <u>not approved</u>, initiate a telephone conference with the review team leader and/or team members to clarify and revise as necessary for approval; then go to step 145.</p>

TABLE 5.1–Continued
PROCESS FOR PLANNING & CONDUCTING ESH COMPLIANCE REVIEWS WITH
CPI INTEGRATION

Responsible Party	Step	Action
SEA 00T CPI Program Manager	145	<p>T-10. Verify the “Draft Working Papers” marking is removed from the approved ESH CPI Compliance Review Team Supplemental Report and prepare for signature. Copy the signed final report to file. Remove the “Draft Working Papers” marking from the Observation Records and send the records to the activity ESH director/POC via email. Annotate in the email message the need for the activity to ensure agreement with all Observation Records. Copy records to file. Finalize the CPI Hand-Off Memorandum for use during the CPI hand-off conference. <i>NOTE: Observation Records are <u>NOT</u> part of the ESH CPI Compliance Review Team Supplemental Report.</i></p>
	150	<p>T-7. Send the CPI Hand-Off Memorandum, the ESH CPI Compliance Review Team Supplemental Report, and Observation Records to the ESH CPI examiner(s). Initiate a telephone conference with the process owner, review team leader, and the ESH CPI examiner(s). Use the CPI Hand-Off Memorandum, ESH CPI Compliance Review Team Supplemental Report, and Observation Records to guide discussions on ESH issues for consideration during the CPI. Review any applicable environmental and/or OSH management focus areas nominated for CPI validation on Form SEA5090/F011. Discuss necessary actions during the CPI hand-off telephone conference. Coordinate additional CPI review actions as necessary with SEA 00N.</p>
ESH CPI Examiner(s)	160	<p>T-0. Begin participation in CPI. Ensure items discussed during the CPI hand-off conference are evaluated. Work with the assigned CPI category leader and CPI team leader to appropriately address and incorporate applicable ESH matters into the CPI process/report. Prepare for the SEA 00T CPI out-briefer a summary of ESH CPI results including a preliminary score, using the ESH CPI Examiner Summary Sheet for ESH Out-briefer (Appendix D, Exhibit D-5). (See CPI Scoring Criteria in Section 2, Table 2.2 for guidance.)</p>

TABLE 5.1–Continued
PROCESS FOR PLANNING & CONDUCTING ESH COMPLIANCE REVIEWS WITH
CPI INTEGRATION

Responsible Party	Step	Action
SEA 00T CPI Program Manager	170	<p>T+ 5</p> <p>Request review team feedback using Form SEA5040/F003 (Appendix D, Exhibit D-4) for use in identifying opportunities for improving the ESH compliance review team process.</p> <p>Send “lessons learned” and improvement recommendations to the process owner.</p> <p>Provide the signed ESH CPI Compliance Review Team Supplemental Report to the SEA 00T CPI out-briefer.</p>
SEA 00T CPI Out-Briefer	180	<p>T+8</p> <p>Work with the ESH CPI examiner(s) and CPI team leader to determine key ESH out-brief topics.</p> <p>Ensure that the final signed ESH CPI Compliance Review Team Supplemental Report is provided to the activity and a copy is sent to the NAVSEAINSGEN (SEA 00N).</p> <p>Conduct the ESH CPI out-brief.</p>
Process Owner	185	<p>T+60</p> <p>Evaluate to ensure all aspects have been addressed by the activity’s response to the ESH CPI Compliance Review Team Supplemental Report and distribute to the SEA 00T Deputy Director and Technical Support/Safety Management Directors as appropriate. Copy the activity response and evaluation to file.</p>
END OF PROCESS		

FIGURE 5.1

ESH COMPLIANCE REVIEW TEAM
SITE VISIT PLANNING AND CONDUCT

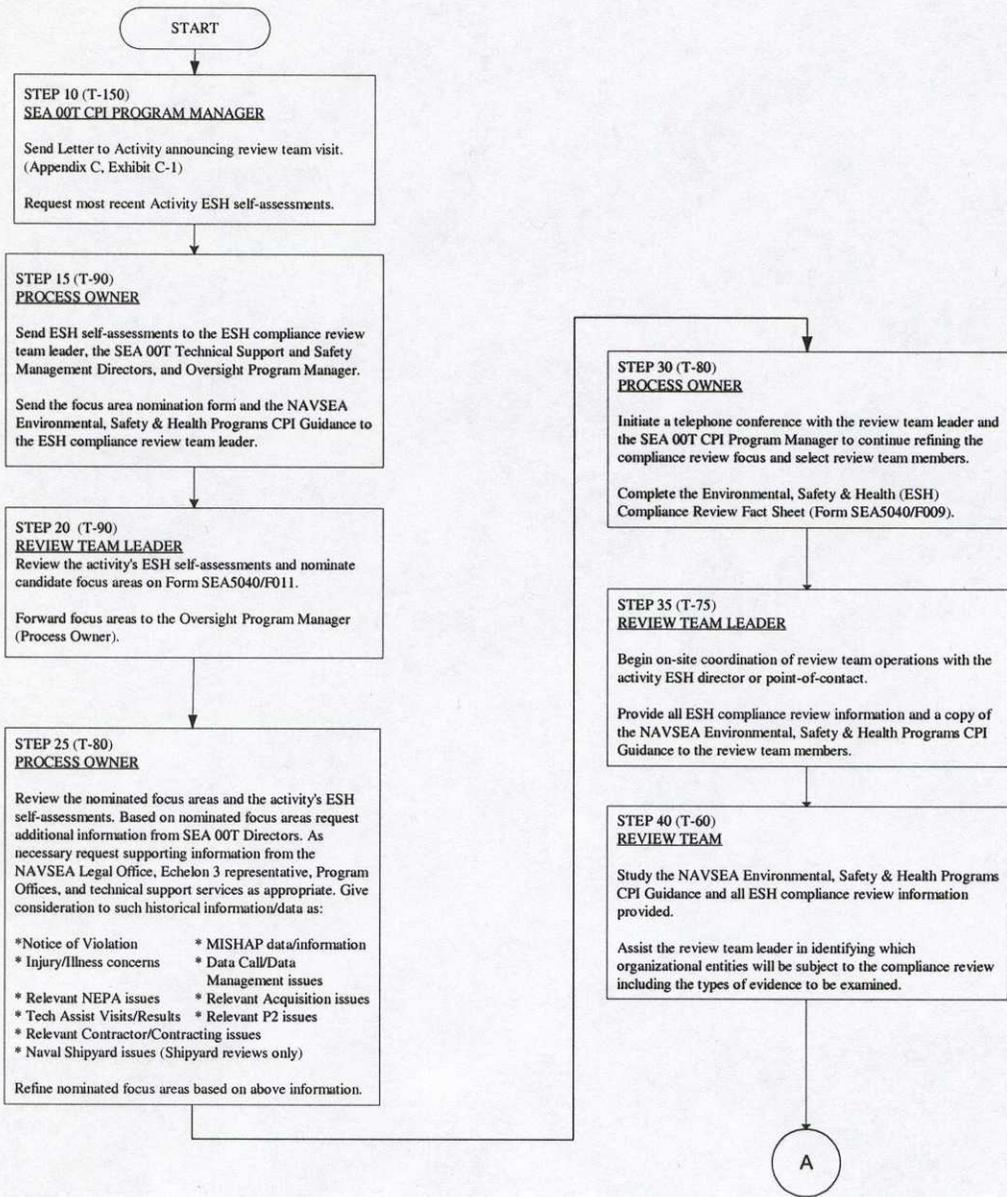


FIGURE 5.1–Continued
ESH COMPLIANCE REVIEW TEAM SITE VISIT PLANNING AND CONDUCT

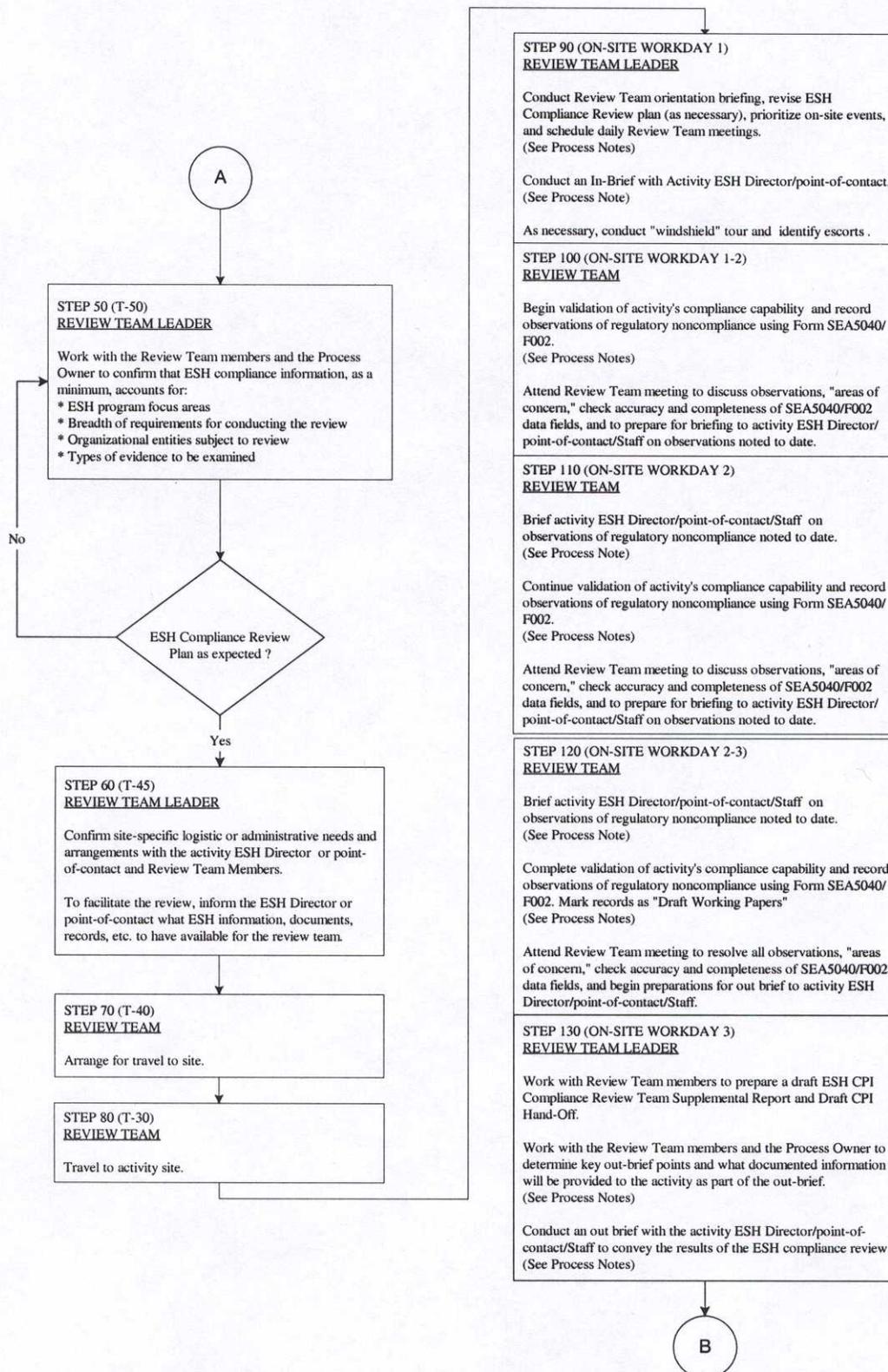
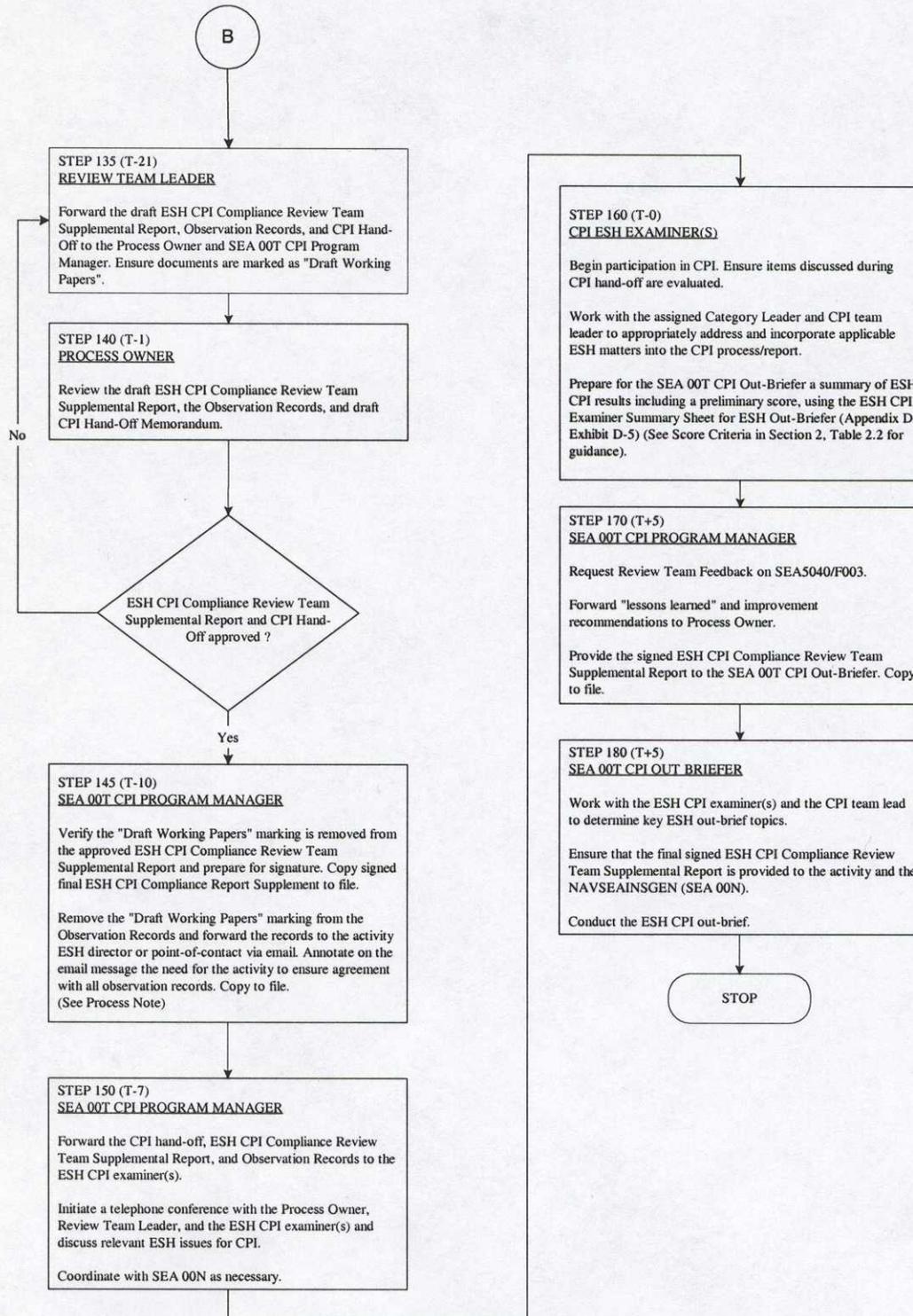


FIGURE 5.1–Continued
ESH COMPLIANCE REVIEW TEAM SITE VISIT PLANNING AND CONDUCT



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APPENDIX A
FY2002 – FY2004 SCHEDULE OF
COMMAND PERFORMANCE INSPECTIONS (CPIS) AND
PERFORMANCE ASSESSMENT REVIEWS (PARs)

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NAVSEANOTE 5040
Ser 00N

NAVSEA NOTICE 5040

From: Commander, Naval Sea Systems Command

Subj: SCHEDULE OF COMMAND PERFORMANCE INSPECTIONS (CPIs)
AND PERFORMANCE ASSESSMENT REVIEWS (PARs)Ref: (a) Naval Inspector General Memorandum on Operational
Cost Management, 8 Sep 99
(b) NAVSEAINST 5040.1D of 26 Apr 00Encl: (1) Schedule of Command Performance Inspections and
Performance Assessment Reviews for 2002
(2) Command Performance Inspections and Performance
Assessment Reviews proposed for 2003
(3) Command Performance Inspections and Performance
Assessment Reviews proposed for 2004

1. Purpose. To issue the schedule of Naval Sea Systems Command Inspector General (NAVSEAINSGEN) command performance inspections (CPIs) and performance assessment reviews (PARs) for 2002, to provide tentative schedules for 2003 and 2004, and to prescribe current procedures for CPIs within the Naval Sea Systems Command.

2. Background

a. CPIs and PARs are conducted according to policy and procedures prescribed in references (a) and (b).

b. NAVSEAINSGEN will conduct CPIs using the Malcolm Baldrige National Quality Award Criteria for Performance Excellence. This criteria is subject to annual change, to reflect continuous incremental improvement. For purposes of the CPI, NAVSEAINSGEN will use the 2001 criteria throughout calendar year 2002. The 2001 criteria will be used starting in January 2002.

3. Discussion

a. The 2002 schedule is set forth in enclosure (1). Specific dates are scheduled one year in advance.

b. The inspections proposed for 2003 and 2004 are attached as enclosures (2) and (3), respectively. These schedules may be revised by NAVSEAINSGEN as circumstances may require.

c. NAVSEAINSGEN will forward an announcement letter to the command to be inspected at least 180 days prior to the scheduled CPI and 90 days prior to the PAR.

d. Within 60 days after the receipt of the inspection report, the inspected activity will develop and submit a command improvement plan to NAVSEAINSGEN via the chain of command.

e. The inspected activity will submit a progress report to NAVSEAINSGEN within 18 months after the completed CPI. After review of this report, NAVSEAINSGEN will conduct an on-site PAR visit.

f. NAVSEAINSGEN is taking action to combine inspection requirements. Where possible, concurrent inspection of certain functions and processes will be done to lessen the impact of audits or inspections during the year on each NAVSEA command. For example, NAVSEA major claimant evaluation responsibilities for both Environmental Compliance Evaluations (ECE) and Occupational Safety and Health Management Evaluations (OSHME) will be integrated and accomplished as part of the NAVSEAINSGEN CPI process.

4. Action

a. NAVSEA field activities shall prepare themselves for inspection in accordance with references (a) and (b) and the schedules provided in enclosures (1), (2) and (3).

b. NAVSEA field activities are encouraged to review the current Malcolm Baldrige National Quality Award Criteria for Performance Excellence and start the process for development of their Unit Self Assessment. The sooner this process is started, the more effective the final product will be, particularly in the areas of strategic planning, customer and market focus, and business results. Individual copies are available free of charge from the National Institute of Standards and Technology

at (301) 975-2036, via their web site at <http://www.quality.nist.gov/> or by e-mail at ogp@nist.gov. The following is a very useful and informative Baldrige web site with information on the CPI process www.baldrigeplus.com.

c. NAVSEAINSGEN shall provide detailed information regarding the CPI process to activities and their respective sponsors selected for CPIs during 2002.

d. NAVSEAINSGEN will require resource commitments from NAVSEA Headquarters and field activities to participate as CPI team members. A commitment of resources includes completion of the three and one-half day Baldrige Examiner training for all personnel assigned to a CPI team. Following this one-time certification requirement, each CPI team member will be required to participate in a two week CPI process on site to validate the Unit Self Assessments of at least two activities within a one-year period.

e. Efforts will be made to ensure that CPI teams are representative of the various elements of the NAVSEA organization. The goal is to create a synergistic environment in which both the CPI team and the inspected activity identify and document knowledge and new ideas for process improvement.

f. For Baldrige Examiner Training information, contact Ms. Alice Edwards of the Inspections Branch. She may be reached on (202) 781-3330, DSN 326-3330, FAX 202-781-4614, or e-mail: edwardsaf@navsea.navy.mil.

5. Cancellation Contingency. This notice remains in effect until superseded by a revision or otherwise cancelled.

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NAVSEANOTE 5040

**SCHEDULE OF COMMAND PERFORMANCE INSPECTIONS
AND PERFORMANCE ASSESSMENT REVIEWS FOR 2002**

<u>DATE</u>	<u>COMMAND</u>
28 JAN-07 FEB 02	SUPSHIP PORTSMOUTH VA
25 FEB-01 MAR 02	NAVORD SAFETY AND SECURITY ACTIVITY
25 FEB-07 MAR 02	NAVSURFWARCENDIV INDIAN HEAD MD
18-28 MAR 02	SUPSHIP GROTON CT
02-05 APR 02	NAVUNSEAWARCENDIV NEWPORT RI*
15-23 APR 02	EODTECHDIV INDIAN HEAD MD
13-23 MAY 02	NAVUNSEAWARCENDIV KEYPORT WA
03-13 JUN 02	SUPSHIP NEWPORT NEWS VA
25-28 JUN 02	NAVSHIPYD PUGET SOUND WA*
19-28 AUG 02	SUPSHIP BATH ME
27-30 AUG 02	NAVSHIPYD PORTSMOUTH NH*
24-27 SEP 02	NAVSURFWARCENDIV DAHLGREN VA*
15-24 OCT 02	SUPSHIP PUGET SOUND WA
12-21 NOV 02	SUBMEPP PORTSMOUTH NH

* Indicates on-site PAR (Follow-up).

Enclosure (1)

NAVSEANOTE 5040

**SCHEDULE OF COMMAND PERFORMANCE INSPECTIONS
AND PERFORMANCE ASSESSMENT REVIEWS FOR 2003**

<u>DATE</u>	<u>COMMAND</u>
21-30 JAN 03	NAVXDIVINGU PANAMA CITY FL
18-27 FEB 03	NAVSURFWARCENDIV DAHLGREN CBTDIRSYSACT DAM NECK VA
03-12 MAR 03	AEGIS TRACEN DAHLGREN VA
31 MAR-09 APR 03	SUPSHIP BATH ME
22-25 APR 03	NAVSURFWARCENDIV CRANE IN*
12-21 MAY 03	AEGIS COMBATSYSCEN WALLOPS ISLAND VA
09-19 JUN 03	NAVSURFWARCENDIV PORT HUENEME CA
24-27 JUN 03	NAVSURFWARCENDIV CARDEROCK (NAVSSSES) PHILADELPHIA PA*
04-14 AUG 03	NWASSTA CORONA CA
26-29 AUG 03	NAVSURFWARCENDIV CARDEROCK MD*
08-19 SEP 03	NAVSHIPYD PEARL HARBOR
07-10 OCT 03	NAVSHIPYD NORFOLK VA*
27 OCT-06 NOV 03	SUPSHIP NEW ORLEANS LA
12-21 NOV 03	SUPSHIP PASCAGOULA MS

* Indicates on-site PAR (Follow-up).

Enclosure (2)

NAVSEANOTE 5040

**SCHEDULE OF COMMAND PERFORMANCE INSPECTIONS
AND PERFORMANCE ASSESSMENT REVIEWS FOR 2004**

<u>DATE</u>	<u>COMMAND</u>
FEB 04	SUPSHIP SAN DIEGO CA
MAR 04	NAVSURFWARCENDIV INDIAN HEAD MD*
MAR 04	NAVSEALOGCEN MECHANICSBURG PA
APR 04	NAVSHIPYD PUGET SOUND WA
APR 04	NAVUNSEAWARCENDIV KEYPORT WA*
MAY 04	NAVUNSEAWARCENDIV NEWPORT RI
JUN 04	NAVSHIPYD PORTSMOUTH NH
AUG 04	NAVSURFWARCENDIV DAHLGREN CSS PANAMA CITY FL
SEP 04	NAVSURFWARCENDIV DAHLGREN VA
OCT 04	SUPSHIP JACKSONVILLE FL
NOV 04	NAVORD SAFETY AND SECURITY ACTIVITY INDIAN HEAD MD

* Indicates on-site PAR (Follow-up).

Enclosure (3)

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APPENDIX B
ESH COMPLIANCE REVIEW PLANNING PRINCIPLES

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ESH COMPLIANCE REVIEW PLANNING PRINCIPLES

ESH Compliance Review planning is an essential part of the ESH compliance review process for two compelling reasons:

1. From a formal standpoint, on-site observations tests the assumptions that system "A" provides adequate controls to satisfy the regulatory requirement(s), or that operation "a" is being performed in accordance with the requirements specified by system "A."
2. From a practical standpoint, the ESH compliance review team must evaluate the activity's capability to comply with regulatory requirements in every area of an ESH program deemed as subject to the compliance review by NAVSEA 00T. Site visits in which parts of the regulatory requirements/identified program areas are omitted from observation by oversight defeats the intent of the ESH compliance review process to that extent. Planning provides insurance against such oversight.

Preparation and Planning

Defining Purpose. Validating the activity's compliance capability with a purpose provides the review team with unity and coherence. Before any effective planning for a review can be done, there must be a clear understanding of the purpose. With most formally scheduled examinations there is a well-established purpose to verify the effectiveness of the program, process, or operation. However, for a review that either is not included in a formal schedule or is being taken out of sequence there is a suggestion of purpose(s) other than routine. As a matter of habit, for every review the review purpose should be confirmed and/or defined.

Defining Scope. A key fundamental element of validating the activity's compliance capability is defining the scope of the individual review. Scope should be defined in terms of the ESH program areas to be reviewed, the breadth of the requirements against which the review will be conducted, and the time span for the evidence that will be examined.

Requirements Baseline. Establishing a requirement baseline is a function of the scope of the review. Identifying which level or levels of the requirements hierarchy will be involved, which documents of the hierarchy will be involved, and the relevant paragraphs within documents is critical to effective compliance reviews.

Background Research. Few compliance reviews are born in a vacuum. It is essential to determine something of the background of the activity and program areas about to be reviewed. Such information will normally include the history of previous reviews of the same activity/program areas, recent problems involving those activity's/program areas or affecting them, cost or schedule pressure in affected areas of the program, and the current status of the program.

Identifying Entities. The statement of review scope will have established which organizational units are to be reviewed. It is desirable to determine during the planning phase which organizational entities, such as departments, work sites, processes and documents are subject to the current review effort. It is during this part of the planning that points-of-contact for the review team should be established.

Determining Evidence. The technical core of the planning effort is determining the types of evidence to be examined. Although this will not always be possible (or feasible within the available time) to make a before-the-fact list of every type of evidence to be encountered, that should be the goal.

Data Fields. Most evidence that is examined during the review consists of some kind of documentation (objective evidence), and as such, becomes part of the data for the current review. Documentation and pertinent data fields need to be defined and a determination made as to whether all of the documents and data of a particular type will be subject to review. It is helpful to have an understanding of how each type document is prepared and controlled so the review team can choose from the most current document and data files or those of historical nature. It is also desirable to determine during planning how large each data field is. The review team often has to work with an order-of-magnitude estimate, but even that is helpful in establishing a sampling plan.

The Sampling Plan(s). Having prepared a list of the kinds of evidence to be examined during the review and having at least estimated how many of each type are pertinent to the review, the review team considers sampling plans. Formal or informal, there will be one such plan for each kind of data. The review team decides whether to do judgment or statistical sampling and determines how large each sample must be. If statistical sampling is to be employed, the review team normally selects the required random number array for each sample at this time.

Reviewing Sequence/Schedule. Every "review plan" should include at least a tentative schedule of events. The sequence of events may be of little or no real significance, but it does provide a time saving transition when the review team completes the compliance review in one area and is ready to move to another. As an incidental bonus, the act of thinking out a schedule helps the review team to decide whether the sequence in which the evidence is examined (or the various departments, work sites, processes and documents are reviewed) is likely to affect the review results.

Review Check Lists/Procedures. It is possible to perform a valid review without the use of a check list or review procedure. The practice is neither advisable nor desirable. The review team may have standard checklists or procedures available, or it may be necessary to generate a wholly original checklist for each review. Even in the case in which a standard check list or procedure is available, the review team will usually have to delete certain inspection points as not being applicable and add certain others to tailor the check list or procedure to the specific review. At this point the review team may sometimes find it more effective to prepare the checklist before addressing the question of kinds of evidence. Check list items (inspection points) often tend to spotlight the kind of evidence required.

The Plan. The "review plan," based on the 10 steps of the planning effort listed above, provides discipline for the anticipated compliance review. In practice, the plan tends to be brief. It references the checklist and/or procedure, tells what kind of sampling is intended, and contains the basic review sequence. It is seldom an in-depth treatment of the material the review team has considered or generated, as most of what is important will be reflected in documentation of the review as it is performed.

APPENDIX C
CORRESPONDENCE EXHIBITS

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Exhibit C-1
ESH Command Performance Inspection (CPI) Announcement Letter

5090
Ser 00T/

From: Commander, Naval Sea Systems Command
To: Commander, (NAVSEA Field Activity)

Subj: ENVIRONMENTAL, SAFETY AND HEALTH (ESH) ASSESSMENT DURING
THE COMMAND PERFORMANCE INSPECTION OF THE (NAVSEA FIELD
ACTIVITY)

Ref: (a) OPNAVINST 5090.1B, CH-2, dtd 09 Sep 99
(b) OPNAVINST 5100.23E, CH-1, dtd 05 Oct 00

1. The purpose of this letter is to announce the environmental, safety and health (ESH) assessment during your Naval Sea Systems Command's (NAVSEA's) Command Performance Inspection (CPI) of (NAVSEA Field Activity), 00 through 00 Month/Year. References (a) and (b) require activities to conduct annual ESH self-assessments and major claimants to conduct ESH inspections every three years.

2. Your most recent annual ESH self-assessment reports will be key sources for the ESH professionals on the CPI team to evaluate your Command's current program effectiveness. A (Number of ESH Professionals) person ESH compliance review team will visit your site (00 through 00 Month/Year). The team will validate ESH regulatory compliance through document review and workplace observations. The ESH compliance review team will brief the Shipyard's ESH Office on their observations and provide them to the CPI team for inclusion in the (NAVSEA Field Activity's) final CPI report.

3. Request that the most recent (NAVSEA Field Activity) ESH self-assessments, workplace deficiencies and corrective action plans are forwarded, by email, to NAVSEA 00T and NAVSEA 00N by 00 Month/Year. The NAVSEA 00T point of contact is (CPI Program Manager).

SIGNATURE
By direction

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Exhibit C-2
ESH Performance Assessment Review (PAR) Announcement Letter

5090
Ser 00T/

From: Commander, Naval Sea Systems Command
To: Commanding Officer, (NAVSEA Field Activity)

Subj: ENVIRONMENTAL, SAFETY AND HEALTH (ESH) PROGRAM ASSESSMENT
DURING THE PERFORMANCE ASSESSMENT REVIEW (PAR) FOLLOW-UP
INSPECTION OF THE (NAVSEA FIELD ACTIVITY)

Ref: (a) OPNAVINST 5090.1B, CH-2, dtd 09 Sep 99
(b) OPNAVINST 5100.23E, CH-1, dtd 05 Oct 00

1. The purpose of this letter is to announce the environmental, safety and health (ESH) assessment during your Naval Sea Systems Command's (NAVSEA's) Performance Assessment Review (PAR) Follow-up on 00 through 00 Month/Year. References (a) and (b) require activities to conduct annual ESH self-assessments and major claimants to conduct ESH inspections every three years.

2. The safety and environmental professional(s) on the CPI follow-up team will focus on improvement actions since your Command's ESH inspection in (Year of Last Inspection). Your annual safety and environmental self-assessment reports will be key sources to evaluate current program effectiveness and integration into the Command's mission performance.

3. Request that the most recent (NAVSEA Field Activity) ESH self-assessments, workplace deficiencies and corrective action plans are forwarded, by email, to NAVSEA 00T and NAVSEA 00N by 00 Month/Year. The NAVSEA 00T point of contact is (CPI Program Manager).

SIGNATURE
By direction

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Exhibit C-3
ESH Team Member Nomination Letter5090
Ser 00T/

From: Commander, Naval Sea Systems Command
To: Commander, (NAVSEA Field Activity)

Subj: TEAM MEMBER NOMINATION FOR COMMAND PERFORMANCE INSPECTION
OF (NAVSEA FIELD ACTIVITY)

1. A member of your command has been nominated to participate in the Naval Sea Systems Command's (NAVSEA's) Command Performance Inspection (CPI) of (NAVSEA Field Activity), 00 through 00 Month/Year. (Name of Examiner), has the requisite training and experience to be a CPI team examiner. As an environmental, safety and health (ESH) professional on the NAVSEA Inspector General's (IG's) Team, (Name of Examiner) will be a key person for conducting the ESH inspection of (NAVSEA Field Activity).

2. In an effort to eliminate redundancy and to reduce the number of inspections at activities, NAVSEA now conducts ESH inspections during CPI's. (Name of Examiner) will evaluate the ESH improvement actions taken by (NAVSEA Field Activity), since their last CPI in (Month/Year). (Name of Examiner) will gain valuable experience that can be used to improve your command's ESH program.

3. If (Name of Examiner) is available to serve as a CPI team examiner, please contact (CPI Program Manager).

SIGNATURE
By direction

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Exhibit C-4
ESH CPI Compliance Review Team Supplemental Report

5040
Ser 00T/
(Date)

From: Commander, Naval Sea Systems Command
To: Commander, (Activity)

Subj: ENVIRONMENTAL, SAFETY AND HEALTH (ESH) COMPLIANCE REVIEW
OF (Activity)

Ref: (a) OPNAVINST 5090.1B, CH-2, dtd 09 Sep 99
(b) OPNAVINST 5100.23E, CH-1, dtd 05 Oct 00
(c) NAVSEAINST 5040.1D, dtd 26 April 00

Encl: (1) ESH CPI Compliance Review Team Supplemental Report,
(Activity)

1. References (a) and (b) require major claimants to perform triennial environmental, safety and health (ESH) program assessments of activities. Reference (c) requires Command inspections to be merged with the Command Performance Inspections (CPI's) where practicable. As part of the CPI process, an ESH compliance review team visited (Activity), (schedule/dates). Reference (c) also requires that findings of statutory and regulatory noncompliance must be addressed in the activity's Process Improvement Plan. Enclosure (1) contains the approach, the team composition, the programs reviewed and values assigned by the ESH compliance review team.

2. The ESH Compliance Review Team examined elements of your ESH programs to validate the capability at (Activity) to comply with ESH regulatory requirements. The Review Team discussed their observations of ESH noncompliances with (Activity) ESH managers and provided them with the following ESH noncompliance observation records:

- (Observation record Number) (Program Area Reviewed)
- (Observation record Number) (Program Area Reviewed)
- (Observation record Number) (Program Area Reviewed)
- (Etc.)

Exhibit C-4-Continued

3. Request that a short and long-term goal be identified in the (Activity) Process Improvement Plan (PIP), for the regulatory noncompliance identified in paragraph (2) above. In addition, a one-time status report of actions taken or planned to correct the ESH noncompliances identified in paragraph (2) above is requested by (Date). Please provide the one-time status report to CPI Program Manager.

SIGNATURE

By direction

Exhibit C-4-ContinuedESH CPI Compliance Review Team Supplemental Report
(Activity)
(date)1. APPROACH.

- a) Elements of the (Activity's) Environmental, Safety and Health (ESH) programs that were subjected to the ESH compliance review were selected based on the (Activity's) mission, regulatory history, and activity-prepared ESH information.
- b) The ESH compliance review focused on (Activity's) capability to comply with regulatory requirements. Compliance capability is determined by analyzing activity-prepared ESH information and reviewing required site-specific documents, conducting work site surveillance, and interviewing (Activity's) personnel while on site.
- c) The degree of compliance capability is identified in each ESH program element subjected to the review and is based on the number of observations of noncompliance and (Activity's) demonstrated capacity for self-discovery. Indicators are assigned using a continuum of red to green, where red is "lacking capability to self-discover with noncompliance indicative of a failure" and green is "fully capable to self-discover with isolated noncompliance not indicative of a trend." These indicators primarily provide SEA 00T a snapshot of the review which indicates the compliance capability in selected program areas at each NAVSEA activity, as well as some indication, over time, as to where to focus resources, how to assemble future teams, and which programs, corporately, are in possible need of technical assistance. Secondarily, the indicators are provided to your activity to assist in the implementation and improvement of programs to achieve and maintain compliance by self-discovery.
- d) Observations were discussed with the (Activity) ESH Director while on site.

Exhibit C-4-Continued

2. ESH COMPLIANCE REVIEW TEAM COMPOSITION.

The Review Team was comprised of the following:

Review Team Leader: (Name)
 (Organization)
 (Commercial Telephone) (DSN)
 (Email)

Review Team
Media Experts: (Name)
 (Organization)
 (Commercial Telephone) (DSN)
 (Email)

(Name)
(Organization)
(Commercial Telephone) (DSN)
(Email)

(Name)
(Organization)
(Commercial Telephone) (DSN)
(Email)

Exhibit C-4-Continued3. ACTIVITY ESCORTS.

The Review Team (was/was not) escorted by members of the (Activity's) (Environmental), (Safety) and (Health) staff.

Primary Escorts:

(Name)
(Organization)
(Commercial Telephone) (DSN)
(Email)

(Name)
(Organization)
(Commercial Telephone) (DSN)
(Email)

Exhibit C-4–Continued

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Exhibit C-4-Continued

ENVIRONMENTAL PROGRAM ELEMENTS REVIEWED

Indicator *	Policy, Org. & Funding	NEPA Implementation	Pollution Prevention	EPCRA Implementation	Clean Air Ashore	Drinking Water Systems	Oil Management Ashore	Oil & Hazardous Substance Spills	Hazardous Waste	PCB Management Ashore	Pesticide Compliance Ashore	Solid Waste Mgt. & Recovery	Installation Restoration	Storage Tanks	Noise Prevention Ashore	Overseas Environmental Compliance Ashore	Environmental Compliance Afloat	Environmental Quality Assessment Ashore	Ocean Dumping	Natural Resource Mgt.	Historic & Archeological Resource Protection	Environmental & Natural Resources Training	Sampling & Laboratory Testing	Natural Resource Damage

* No entry indicates the program area was not subjected to the review.

Note: This listing is not comprehensive and will be tailored to the activity being reviewed.

G	Green
Y	Yellow
R	Red

Exhibit C-4—Continued

OCCUPATIONAL SAFETY AND HEALTH PROGRAM ELEMENTS REVIEWED.

Indicator *	
	Command Documentation (29CFR1960)
	Mishap Prevention
	Training
	Hazardous Material Control
	Hazardous Material Communication
	Medical Surveillance
	Industrial Hygiene/workplace Monitoring
	Employee Reports of UWC
	NAVOSH Inspection Program
	Hazard Abatement Program
	Mishap Investigation/Reporting
	Confined Space Safety /Gas Free
	Energy Control (LOTO)
	Respiratory Protection
	Personal Protective Equipment
	Hearing Conservation and Noise
	Sight Conservation
	Lead
	Asbestos/MVVF
	Radiation
	Access to Medical Records (1910.1020)
	Substance Specific as Applicable
	Substance Specific as Applicable
	Bloodborne Pathogens
	Chemical Hygiene
	Process Safety Management

* No entry indicates the program element was not subjected to the review.

Note: This listing is not comprehensive and will be tailored to the activity being reviewed.

G	Green
Y	Yellow
R	Red

Exhibit C-5
CPI Hand-Off Memorandum5040
Ser 00T/
Date

MEMORANDUM

From: SEA 00T CPI Program Manager
To: SEA 00T CPI ESH Examiner(s) *(Name(s))*

Subj: ENVIRONMENTAL, SAFETY AND HEALTH COMPLIANCE REVIEW
LINKAGE TO COMMAND PERFORMANCE INSPECTION

Ref: (a) Environmental, Safety and Health Compliance Review
at *(Activity)*

Encl: (1) Observation Records (Draft Working Papers)
(2) CPI Report ESH Executive Summary Boilerplate
Paragraphs
(3) CPI Scoring Criteria

1. Reference (a) was conducted on *(dates)*, which reviewed the capability of *(Activity)* to comply with Environmental, Safety, and Health (ESH) regulatory requirements. Enclosure (1) provides the observations records (draft working papers) generated during this capability review. Enclosure (2) provides boilerplate paragraphs for use in tailoring language for the ESH program element in the CPI final report. Enclosure (3) provides criteria for developing preliminary ESH CPI scores as well as activity and SEA 00T follow-on expectations.
2. To assist in maintaining linkage between the Command Performance Inspection (CPI) process and reference (a) it is requested that the CPI ESH Examiner during the *(Activity's)* CPI validate the approach, deployment and results of the following systems/processes.
 - a) Determine how the "corrective action system" at the *(Activity)* maintains the activity's capability to correct identified ESH program deficiencies. Corrective action in this sense is specific to regulatory noncompliance. Determine how the organization systematically identifies and prioritizes plans to mitigate risk and then assign,

Exhibit C-5-Continued

track, and verify action to correct/prevent ESH noncompliance irrespective of how the noncompliance was identified. Approach and deployment strengths and/or opportunities for improvement generated from this validation should be reported in Category 6.2. Any results should be reported in Category 7.5

Rationale: Since the activity's "capability to self-discover" (identify program deficiencies) was the target of the ESH compliance review it is now important to determine if the activity also has the "capability to self-correct" (identify and prioritize plan to fix). Well-disciplined and well-manage ESH programs have both of these critical elements in their foundation.

b) Determine how ...

Rationale:

c) Determine how...

Rationale:...

3. As an ESH CPI Examiner you must "inject" your Environmental and Occupational Safety and Health (OSH) expertise into the overall CPI process and provide specific attention and consultation to all Environmental and OSH issues generated by the CPI team. The ESH Site Visit Issues (SVIs) provided in the NAVSEA Environmental Protection, Occupational Safety and Health Office CPI Guidance, Section 4, should be reviewed for use in providing consultation in the address of Environmental and OSH issues. It is expected that any SVI selected from Section 4 of the guidance handbook will be tailored specific to the activity and provided to the appropriate CPI Category Leader for validation.
4. It is important to recognize that your role as ESH CPI Examiner may be extensive and will require patience and a willingness to be flexible regarding CPI process expectations and SEA 00T approaches to validating ESH program effectiveness. Questions or concerns regarding your role as an ESH CPI examiner may be directed to the NAVSEA 00T point of contact, (*CPI Program Manager*).

APPENDIX D
ESH COMPLIANCE REVIEW/CPI FORMS

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Exhibit D-1 ESH Candidate Oversight Focus Area Nomination Form

CANDIDATE OVERSIGHT FOCUS AREA NOMINATION FORM		Form No. SEA5040/F011	
* Activity:			
* Send Candidate Oversight Focus Areas to Oversight Program Manager Not Later Than:			
SECTION A "Top 5" Candidate Occupational Safety and Health Program Focus Areas			
<i>Based on review and analysis of the activity OSH self-assessment and knowledge of activity-specific OSH problems/issues identify candidate safety program focus areas for ESH compliance review and/or CPI validation.</i>			
Focus Area #1:	Indicate which Oversight Event this Focus Area is Nominated for		
	ESH Compliance Review	CPI Validation	PAR/Follow-Up
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Focus Area #2:	Indicate which Oversight Event this Focus Area is Nominated for		
	ESH Compliance Review	CPI Validation	PAR/Follow-Up
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Focus Area #3:	Indicate which Oversight Event this Focus Area is Nominated for		
	ESH Compliance Review	CPI Validation	PAR/Follow-Up
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Focus Area #4:	Indicate which Oversight Event this Focus Area is Nominated for		
	ESH Compliance Review	CPI Validation	PAR/Follow-Up
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Focus Area #5:	Indicate which Oversight Event this Focus Area is Nominated for		
	ESH Compliance Review	CPI Validation	PAR/Follow-Up
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SECTION B "Top 5" Candidate Environmental Program Focus Areas			
<i>Based on review and analysis of the activity environmental self-assessment and knowledge of activity-specific environmental problems/issues identify candidate environmental program focus areas for ESH compliance review and/or CPI validation.</i>			
Focus Area #1:	Indicate which Oversight Event this Focus Area is Nominated for		
	ESH Compliance Review	CPI Validation	PAR/Follow-Up
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Focus Area #2:	Indicate which Oversight Event this Focus Area is Nominated for		
	ESH Compliance Review	CPI Validation	PAR/Follow-Up
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Focus Area #3:	Indicate which Oversight Event this Focus Area is Nominated for		
	ESH Compliance Review	CPI Validation	PAR/Follow-Up
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Focus Area #4:	Indicate which Oversight Event this Focus Area is Nominated for		
	ESH Compliance Review	CPI Validation	PAR/Follow-Up
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Focus Area #5:	Indicate which Oversight Event this Focus Area is Nominated for		
	ESH Compliance Review	CPI Validation	PAR/Follow-Up
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Focus Areas Nominated By:		Date:	
Focus Areas Updated By:		Date:	
Oversight Program Representative:		Date:	

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**Exhibit D-2
ESH Compliance Review Fact Sheet for (Activity Name)**

Form SEA 5040/F009

ESH Compliance Review/CPI Linkage			
Review Dates	Team Meeting Date/Time	In-Brief Date/Time	Out-Brief Date/Time
KEY SEA 00T Personnel			
ESH Compliance Review Team Leader			
Name	Organization	Telephone	Email Address
ESH Compliance Review Team Members/Media Experts			
Name	Organization	Telephone	Email Address
KEY ACTIVITY PERSONNEL			
Commander			
Name	Organization/Code	Telephone	Email Address
Head Civilian			
Name	Organization/Code	Telephone	Email Address
ESH Office Director/Department Head			
Name	Organization/Code	Telephone	Email Address
ESH Compliance Review Team Point-of-Contact			
Name	Organization/Code	Telephone	Email Address

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**Exhibit D-3
ESH Compliance Review Field Observation Record**

ESH COMPLIANCE REVIEW FIELD OBSERVATION RECORD Form SEA 5040/F002	
Number:	
SECTION A – PROGRAM INFORMATION	
PROGRAM MEDIA AREA / PROGRAM ELEMENT	
REGULATORY REQUIREMENT	
SECTION B – ACTIVITY POINT-OF-CONTACT INFORMATION	
NAME	
ORGANIZATION/CODE	
TELEPHONE	
SECTION C – OBSERVATION INFORMATION	
OBSERVATION NARRATIVE	
OBSERVATION COMMENT	
OBSERVATION LOCATION	
OBSERVED BY	DATE

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**Exhibit D-5
ESH CPI Examiner Summary Sheet for ESH Out-briefer**

Activity:	
ESH Compliance Review Site Visit Dates:	
CPI Dates:	
ESH Program's Strengths, Best Practices, Great Ideas:	
ESH Program's Opportunities for Improvement:	
Overall Grade of ESH Program and Rationale (See Section 2.5 in ESH CPI Guidance):	
ESH Linkage to Overall Activity Performance (From CPI Team's Linkage/Scoring Meeting on Day 7):	
Recommendations for NAVSEA Follow-up Actions:	
Examiner(s):	

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APPENDIX E
GLOSSARY OF TERMS

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GLOSSARY OF TERMS

Command Performance Inspection (CPI): Four phase process including (Phase I) the inspected NAVSEA Command's completion of the Unit Self Assessment (USA); (Phase II) the review and validation of the USA by the designated NAVSEA authority; (Phase III) the development of a Command Improvement Plan by the inspected Command; and (Phase IV) the Performance Assessment Review (PAR) (follow-up review) of the Command Improvement Plan.

Compliance Posture: A validation achieved through the analysis of activity-prepared ESH self-assessments, regulatory history, and on-site reviews of required ESH records, work sites, and interviews with personnel of the activity's capability to comply with regulatory requirements in ESH program areas subjected to the ESH compliance review.

Corrective/Preventive Actions: A compilation of documented information that clearly identifies the activity's commitment to assign and track action to corrective ESH noncompliance regardless of how the noncompliance was identified and to verify that the corrective action is effective. The need to require institution of some kind of action to investigate causes of ESH noncompliances to prevent recurrence or valid rationale in accepting associated risk should also be identified.

CPI Hand-Off: Information given to the ESH CPI examiner(s) that identifies areas requiring further review through the scrutiny of the CPI process. This hand-off provides a "charter" for the ESH CPI examiner(s) and helps to ensure that observations identified during the ESH compliance review as needing a process or systems review are included in the CPI. The CPI hand-off is also the linkage between the ESH Compliance Review Process and the CPI Process.

CPI Report: The NAVSEA IG written report that addresses strengths, opportunities for improvement, best practices, innovations, headquarters issues, and other performance measures. It is based on a unit's USA submission and an on-site inspection/validation by the NAVSEA IG CPI team.

ESH Compliance Review: An on-site validation inspection that is conducted to ensure that Command ESH programs maintain the capability to comply with regulatory requirements.

ESH Compliance Review Team: The team designated and chartered by SEA 00T to conduct the ESH compliance review. The ESH compliance review team is comprised of a review team leader and ESH professionals. The extent and complexity of the review determine the number of team members and required ESH professionals.

ESH CPI Compliance Review Team Supplemental Report: Information that identifies the review team, the ESH Compliance Review approach, and program matrices to assist in compliance review analysis. This supplement is provided to the ESH CPI examiners to assist in their efforts to further assess/analyze ESH programs and becomes a part of the NAVSEAINSGEN CPI Report to the activity.

ESH Program Posture: A condition determined through the combined results of the activity's ESH Compliance Review and Command Performance Inspection.

Independent SEA 00T Follow-up: A follow-up to an ESH Program Compliance Review that can vary from a one-person visit to a complete reevaluation of the activity's ESH compliance

posture. This type of follow-up may be part of a technical assist visit. An independent SEA 00T follow-up is not part of the normal PAR cycle. The follow-up is driven by the complexity and nature of the ESH noncompliance and the urgency to verify that specific corrective action has been planned and/or has been implemented and is effective.

Malcolm Baldrige Criteria for Performance Excellence: An integrated and balanced system of performance evaluation standards. The criteria address key business processes and results for diagnosis and feedback in improving performance.

Observations: Instances of ESH regulatory noncompliance that were observed during the on-site ESH Compliance Review.

Observation Records: Observations of ESH regulatory noncompliance that were documented during the on-site ESH Compliance Review.

Performance Assessment Review (PAR): The process used to track the progress of the CPI; usually includes an on-site visit 18 to 24 months after the CPI.

Process Improvement Plan (PIP): The written plan that the activity command develops to accomplish desired improvements based on the CPI inspection report. The PIP should include a prioritized listing of the process improvement, identification with a short- or long-term goal, linkage with the business and/or strategic plan, and the strategy for deployment.

Review Plan: Information that identifies the scope, time span, and sequence of events for structured compliance reviews of an ESH program, process, its assembled components and/or associated control methods in order to validate an activity's capability to comply with established regulatory requirements.

Site Visit Issues (SVIs): Elements of command performance that CPI team personnel must validate during the CPI to determine strengths and opportunities for improvement (OFIs) for inclusion in the CPI report.