SNS-OPM 1.A-2
SNS-OPM Plans, Policies, and Operating Procedures

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Hand Processed Changes

HPC No.	Date	Page Nos.	Initials
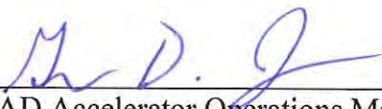
Approved: _____   2-25-13
       RAD Accelerator Operations Manager   Date

Approved: _____   02.25.2013
       RAD Division Director and SNS Operations Manager   Date

Approved: _____   2-25-2013
       RAD Instrument Operations Manager   Date

Contact: SNS-OPM Editor

SNS-OPM 1.A-2
SNS-OPM Plans, Policies, and Operating Procedure

1.   Purpose

1.1   This procedure defines the management of new or changed operating plans, policies and procedures in the SNS Operations Procedures Manual (SNS-OPM).

1.2   SNS Operating Procedures are written by cognizant systems specialists, operating personnel, or systems managers.

      1.2.1   Formats to policies and procedures are given in SNS-OPM 1.A-2.2.

      1.2.2   Instructions for reviewing, authorizing, revising, canceling, distributing, and ensuring training, are given in SNS-OPM 1.A-2.3, SNS-OPM 1.A-2.4 and SNS-OPM 1.A.2.5.

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| **NOTE:** |
| As per the SNS Accelerator Safety Envelope, the word "shall" is used to denote a requirement, the word "should" is used to denote a recommendation, and the word "may" is used to denote permission. |
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1.3   **Internal Procedures** – Internal Procedures within a working group that do not interface with other groups nor affect Operations may, at the discretion of the Group Leader, have separate internally-generated and managed procedures that are not included in the SNS-OPM. See NSCD-ADM-DMS-PR-001 "NScD Management of Controlled Documents", SNS-IO-P01 "Creation and Management of SNS Project Records", located in ProjectWise and Internal Operating Procedures located in SBMS. Internal procedures shall be reviewed at least once every 3 years.

      1.3.1   Formats for Internal Operating Procedures are not mandated but one may use the following example as an aid in writing an Internal Operating Procedure. SNS-OPM 1.A-2.2d "Internal Operating Procedure Example – Microsoft Word".

1.4 **Definitions**

1.4.1 SNS-OPM **Procedures** (see SNS-OPM 1.A-2.3)

1.4.1.1 **Yellow SNS-OPM Procedures** - Yellow or (Y) designated procedures are safety related procedures used when deviation from literal compliance could trigger consequences that break the SNS Accelerator Safety Envelope or the SNS Operations Envelope or could endanger the health or safety of any individual, OR could exceed thresholds for Quality Assurance Levels 1 "Serious Consequences" or 2- "Important Negatives" or 2+ "Important Positives" (see SNS Quality Manual (SNS-QA-P01).

1.4.1.2 **White SNS-OPM Procedures** - All other procedures that are not yellow-safety-related procedures are white procedures. These pertain to Quality Assurance Level 3 "Routine".

1.4.2 SNS-OPM **Temporary Procedures** (see SNS-OPM 1.A-2.4).

1.4.2.1 Temporary Procedures are used to allow operations to proceed at a safe but expeditious pace. An expeditious pace may be required during shifts.

1.4.2.2 Temporary Procedures follow similar review and approval steps as do Permanent Procedures; however, training requirements allow shift personnel to train without interrupting the accelerator schedule.

1.4.3 SNS-OPM **Hand Processed Changes** (see SNS-OPM 1.A-2.5)

1.4.3.1 Hand Processed Changes (HPCs) provide a convenient way to update a procedure when small edits are required.

1.4.3.2 HPCs apply to SNS-OPM Procedures and Temporary Procedures.

1.4.3.3 HPCs should not be used for large scale revisions.

2. **Responsibilities**

2.1 The appropriate **Research Accelerator Division (RAD)/Instrument and Source Design Division (ISDD)/Quantum Condensed Matter Division (QCMD)/Biology and Soft Matter Division (BSMD)/Chemical and Engineering Materials Division (CEMD)/Neutron Data Analysis and Visualization Division (NDAVD) Director** shall:

- Authorize yellow SNS-OPM Procedures, revisions and cancellations as appropriate.

2.2   The **SNS Operations Manager** shall:

- Authorize yellow SNS-OPM Procedures, revisions and cancellations as appropriate.
- Authorize safety training associated with SNS-OPM Procedures.
- Assign reviewers to review yellow SNS-OPM procedures as appropriate.
- Assign reviewers for Hand Processed Changes as appropriate.
- Authorize Hand Processed Changes as appropriate.

2.3   The appropriate **RAD Accelerator/Instrument Operations Manager** shall:

- Authorize yellow SNS-OPM Procedures, revisions, and cancellations as appropriate.
- Authorize white SNS-OPM Procedures, revisions, and cancellations.
- Assign reviewers to review yellow and white SNS-OPM procedures as appropriate.
- Assign reviewers for Hand Processed Changes as appropriate.
- Authorize Hand Processed Changes as appropriate.

2.4   The **SNS-OPM Editor** shall:

- Review SNS-OPM Procedures and Temporary Procedures and HPCs.
- Cancel SNS-OPM Procedures and Temporary Procedures.
- Convert HPCs in the HPC log to SNS-OPM Procedure revisions.
- Track procedure revisions, cancellations and Hand Processed Changes to ensure that reviews, editing, and authorizations are completed.
- Ensure that the SNS-OPM is updated when changes occur, including HPCs.
- Update Table of Contents of SNS-OPM.
- Ensure that all completed procedure forms are maintained.
- Direct discarding of cancelled procedures.
- Undertake a complete review of the SNS-OPM every three years to add, delete or revise procedures if needed.

2.5   The **Operations Coordinator** shall:

- Coordinate training for procedures.
- Ensure that personnel are trained.
- Ensure required readings regarding procedures are issued through the Electronic Logbook.
- Ensure that training exams and course documents are maintained.

2.6 **Technical Reviewers** shall:

- Review new or revised SNS-OPM Procedures.

2.7 **Procedure Authors and Writers** shall:

- Conduct the training required by Temporary Procedures.
- Obtain a HPC number from the OPM Editor or the Operations Coordinator.
- Complete the training requirements for HPCs.
- Follow format as outlined in SNS OPM 1.A-2.2.

3. Prerequisites

3.1 None.

4. Precautions

4.1 None.

5. Procedure

5.1 Use SNS-OPM 1.A-2.3 in order to process SNS-OPM **Procedures**.

5.2 Use SNS-OPM 1.A-2.4 in order to process SNS-OPM **Temporary Procedures**.

5.3 Use SNS-OPM 1.A-2.5 in order to process SNS-OPM **Hand Processed Changes**.

6. Documentation

6.1 The above listed responsible persons (in Section 2) shall provide the documentation specified above.

7. References

7.1 SNS-QA-P01 "SNS Quality Manual".
http://neutrons-staff/sites/qa/Shared%20Documents/SNS-QA-P01-R06%20SNS%20Quality%20Assurance%20Manual.pdf

7.2 SNS-OPM 1.A-2.2. "Format of SNS Policies and Procedures".
http://ns-staff.ornl.gov/operations/SNS-OPM/01-A-02-02.pdf

7.3 SNS-OPM 1.A-2.3. "Procedure for Implementing New, Revised or Canceled Permanent Procedures".
http://ns-staff.ornl.gov/operations/SNS-OPM/01-A-02-03.pdf

7.4 SNS-OPM 1.A-2.4. "Procedure for Implementing or Canceling Temporary Procedures".
http://ns-staff.ornl.gov/operations/SNS-OPM/01-A-02-04.pdf

7.5 SNS-OPM 1.A-2.5. "Procedure for Implementing Hand Processed Changes".
http://ns-staff.ornl.gov/operations/SNS-OPM/01-A-02-05.pdf

7.6 NSCD-ADM-DMS-PR-001 "NScD Management of Controlled Documents" located in ProjectWise folder "Record Copy\NScD Controlled Documents\Procedures and Guides".
https://pw.ornl.gov/default.aspx?default=ECObjects%7cBentley_DMS%7cDMSFolder%7c58882

7.7 SNS-IO-P01 "Creation and Management of SNS Project Records" located in ProjectWise folder "Record Copy\Spallation Neutron Source Project\SNS Procedures, Plans, Guides\Project-Wide Procedures".
https://pw.ornl.gov/default.aspx?default=ECObjects%7cBentley_DMS%7cDMSFolder%7c15770

7.8 SNS-OPM 1.A-2.2d "Internal Operating Procedure Example – Microsoft Word".
http://ns-staff.ornl.gov/operations/SNS-OPM/01-A-02-02-d.doc

7.9 SNS Accelerator Safety Envelope.
http://ns-staff.ornl.gov/operations/SNS-OPM/SNS-ASE.pdf

8. Attachments

8.1 None.

9. Revision History

- Rev. 03 February 25, 2013 – Updated the procedure to reflect the reorganizational changes recently made for the signatory page and in section 2 "Responsibilities". In section 1.3 added in an example template to aid in Internal Procedure development and layout and also state that these procedures shall be reviewed at least once every 3 years. In section 2.4 added in words to better define the 3 year review and revision process and moved the bullet "Ensure required readings regarding procedures are issued through the Electronic Logbook" to Operations Coordinator section 2.5. The links throughout this document have been updated. Added section 9 revision history.