

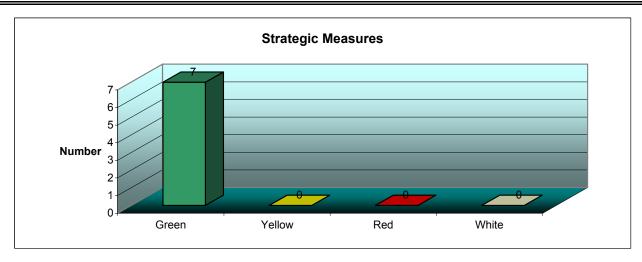
Briefing on the
FSME Quarterly Performance Report
Program: Materials and Waste
FY 2007 -- First Quarter

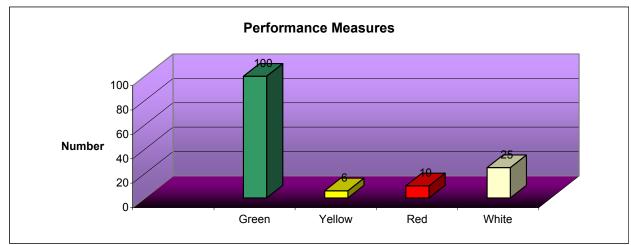
Date: Monday, January 29, 2007, 10:30 A.M., #O-17B4

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- ♦ Out-of-Standard Items
- **♦** Back-in-Standard Items
- **♦** Accomplishments

SCORE CARD





		Performance	e Measures	Total 141
Strategic Me	easures			
Green	7	Green	100	
Yellow	0	Yellow	6	
Red	0	Red	10	
White	0	White	25	

		Measure	Performano	ce Standard (Quarterly)		N	Measur	rement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
		·												
FSME	SAFS002	No inadvertent criticality events.	0	N/A	>0	G					G	G	G	
FSME	SAFS003	No acute radiation exposures resulting in fatalities.	0	N/A	>0	G					G	G	G	ı
1 SIVIL	3AI 3003	ino acute radiation exposures resulting in latanities.	0	IN/A										
FSME	SAFS004	No releases of radioactive materials that result in significant radiation exposures.	0	N/A	>0	G					G	G	G	
FSME	SAFS005	No releases or radioactive materials that cause significant adverse environmental impacts.	0	N/A	>0	G					G	G	G	
MSSA	SAFPM05a	Number of events with radiation exposures to the public and occupational workers that exceed Abnormal Occurrence Criteria 1A.	Q1 ≤ 20% Q2 ≤ 40% Q3 ≤ 60% Q4 ≤ 80%	Q1 ≥21 % ≤25% Q2 ≥41 % ≤50% Q3 ≥61 % ≤75% Q4 ≥81 % ≤25%	More than 3 for year. More than yellow values for quarters.									
WMEP	SAFPM05b	Number of events with radiation exposures to the public and occupational workers that exceed Abnormal Occurrence Criteria 1A.	0	N/A	N/A	G								
	SAFPM06a	Number of radiological releases to the environment that exceed applicable regulatory limits.	Q1: ≤ 20% Q2 ≤ 40% Q3 ≤ 60% Q4 ≤ 80%	Q1 ≥21 % ≤25% Q2 ≥41 % ≤50% Q3 ≥61 % ≤75% Q4 ≥81 % ≤25%	More than 2 for year. More than 1 by second quarter.	G 0								
WMEP	SAFPM06b	Number of radiological releases to the environment that exceed applicable regulatory limits.	0	N/A	N/A	G								
MSSA	SAFPM06c	Number of losses of control of licensed material per year.	Less than yellow totals.	Q1 > 60 Q2 > 120 Q3 > 180 Q4 > 240	Q1 > 75 Q2 > 150 Q3 >225 Q4 > 300	G 20								
MSSA	SAFPM06d	Number of events per year resulting in rad exposures from radioactive materials that exceeds applicable regulatory limits	Less than yellow totals.	Q1 > 6 Q2 > 12 Q3 > 18 Q4 > 24	Q1 > 8 Q2 > 15 Q3 > 22 Q4 > 30	G 3								

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		Measure	Performance	ce Standard (Quarterly)		- 1	Measur	ement				Divisio	n Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
MSSA	SAFPM06e	Number of medical events per year.	Less than yellow totals.	Q1 > 9 Q2 > 11 Q3 > 18 Q4 > 36	Q1 > 11 Q2 > 13 Q3 > 20 Q4 > 45	G 7								l
FSME	SAF0101	Assess lessons learned for all major regulatory activities and incorporate recommendations into regulatory processes in accordance with schedule.	Lessons learned are assessed and recommendations implemented within schedule.	implementation of recommendations slip	Lessons learned are not assessed or milestones for implementation of recommendation s slip impacting final schedule	G					G	G	G	
MSSA	SAF0102a	Materials licensing actions completed without significant technical or regulatory deficiencies as measured by IMPEPs and self-assessments	IMPEPs and self- assessments demonstrate technical quality and effectiveness of licensing programs	Based on mid-cycle reviews, IMPEPs, or self-assessments one region or FSME found "Satisfactory, but Needs Improvement," for technical quality of licensing.	Based on mid- cycle reviews, IMPEPs, or self- assessments one region or FSME found "Unsatisfactory," for technical quality of licensing.	w				No regional IMPEPs in FY07.				
MSSA	SAF0102b	Materials licensing actions completed without significant technical or regulatory deficiencies a s measured by information requests handled in accordance with P&P 1-81.	No Information Request received/handled in accordance with P&PL 1-81.	One Information Request received/handled in accordance with P&PL 1-81.	Two Information Requests received/handled in accordance with P&PL 1-81.	G o								
MSSA	SAF0103	Support regions by issuing Technical Assistance Requests	Fewer than 2 pending TARs with twice-changed due dates	2 or more pending TARs with twice- changed due dates	1 or more pending TARs > 9 months	G 1								
		Update Licensing Guidance	No more than 1 NUREG or other Licensing Guidance document is behind schedule.	No more than 2 NUREGs or other Licensing Guidance documents are behind schedule.	Three or more NUREGs or other Licensing Guidance documents are delayed without scheduling adjustments.	G 1								

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		Measure	Performano	ce Standard (Quarterly)			Measur	ement				Divisio	n Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
WMEP	SAF0105	Ensure that NRC-licensed sites (and those that could, or were, licensed by NRC) are decommissioned in compliance with all applicable requirements and when decommissioning is completed are suitable for release from regulatory control.	All sites scheduled for license termination or completion of decommissioning were decommissioned & are suitable for release from regulatory control.	≥ 1 site scheduled for license termination or completion of decommissioning may not be decommissioned & was suitable for release from regulatory control.	≥ 1 site scheduled for license termination or completion of decommissionin g may not be decommissioned OR was not suitable for release from regulatory control.	G								
WMEP	SAF0105	Complete Complex Site Decommissioning amendment requests. (Includes 30-day acceptance review) DELETED 1/1707	Amendment request review in accordance with current project schedule.	Staff milestone slips but amendment request completion should not be impacted.	Staff milestone slips and amendment completion will be impacted.	N/A				Tracked in Div level Operational Op Plan.				
DWMEP	SAF0106	Complete Complex Site Final Site Survey Reviews and perform confirmatory surveys as appropriate. DELETED 1/1707	FSSR reviewed in accordance with project schedule.	Staff milestone slips but review schedule should not be impacted.	Staff milestone slips that impact review schedule.	N/A				Tracked in Div level Operational Op Plan.				
DWMEP	SAF0106	Continue oversight of DOE West Valley Demonstration Project: Decommissioning Plan.	Maintaining project schedule.	Staff milestone slips but schedule should not be impacted.	Staff milestone slips that impact major project deliverables.	G								
DWMEP	SAF0108	Review Reactor License Termination Plans. (Includes 90-day acceptance review) Supports Enabling Goal 4: Effectiveness Performance Measure 2d. DELETED 1/1707	LTPs are reviewed in accordance with current project schedule	Staff milestone slips but review schedule should not be impacted.	Staff milestone slips that impact major project deliverables	N/A				Tracked in Div level Operational Op Plan.				
DWMEP	SAF0109	Complete Decommissioning Reactor amendment requests (Includes 30-day acceptance review) DELETED 1/1707	Amendment request in accordance with current project schedule.	Staff milestone slips but amendment request completion should not be impacted.	Staff milestone slips and amendment completion will be impacted.	N/A				Tracked in Div level Operational Op Plan.				
DWMEP	SAF0110	Complete Reactor Final Site Survey Reviews and perform confirmatory surveys as appropriate. DELETED 1/1707	FSSR reviewed in accordance with project schedule.	Staff milestone slips but review schedule should not be impacted.	Staff milestone slips that impact review schedule.	N/A				Tracked in Div level Operational Op Plan.				

		Measure	Performano	ce Standard (Quarterly)		1	Measur	ement				Divisio	n Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
030	ii.	Complete review of Research and Test Reactor Plans.	Plans are reviewed in	Staff milestones slip but current schedule	Staff milestone	QT	Q2	QU	Q.T		WOOA	DILIC	DVVIVILI	TDIA
DWMEP	SAF0111	(Includes 90-day acceptance review) DELETED 1/1707	accordance with current project schedule.	should not be impacted	slips that impact review schedule.	N/A				Tracked in Div level Operational Op Plan.				
DWMEP	SAF0112	Complete Research and Test Reactor amendment requests. (Includes 30-day acceptance review) DELETED 1/1707	Amendment request review in accordance with current project schedule.	Staff milestone slips but amendment request completion should not be impacted.	Staff milestone slips and amendment completion will be impacted.	N/A				Tracked in Div level Operational Op Plan.				
DWMEP	SAF0113	Complete Research and Test Reactor Final Site Survey Reviews and perform confirmatory surveys as appropriate. DELETED 1/1707	FSSR reviewed in accordance with project schedule.	Staff milestone slips but review schedule should not be impacted.	Staff milestone slips that impact review schedule.	N/A				Tracked in Div level Operational Op Plan.				
DWMEP	SAF0107	Respond to Regional & DCD technical assistance requests in a timely fashion (Includes 10 day acceptance review)	Provide assistance within agreed schedule for => 95% of requests	< 95% of requests within agreed schedule	< 85% of requests within agreed schedule	G								
DWMEP	SAF0108	Respond to NRR technical assistance requests in a timely fashion (Includes 10 day acceptance review)	Provide assistance within agreed schedule for => 95% of requests	< 95% of requests within agreed schedule	< 85% of requests within agreed schedule	w								
DWMEP	SAF0109	Review all financial assurance submittals for materials and fuel facilities, continue to maintain proper financial instrument security, including periodic evaluations of Headquarters and Regional financial instrument security programs, and continue to review and respond to bankruptcies.	90% of reviews within 90 days unless policy/tech issues preclude completion	80-90% of reviews within 90 days unless policy/tech issues preclude completion	< 80% within 90 days unless policy/tech issues preclude completion	G								
DWMEP	SAF0110	Licensing Reviews for Uranium Recovery Facilities - Amendments				G								

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		Measure	Performano	e Standard (Quarterly)		ı	Measur	ement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
						G								
DWMEP	SAF0111	Title I Uranium Recovery Reviews												
DWMEP	SAF0112	Potential new applications and pre-licensing work for Uranium Recovery Facilities				G								
DWMEP	SAF0113	Source material license amendements				G								
	SAF0114	Complete preparation of 1 FEIS and 1 DEIS.	No more than one current milestone behind schedule	2 or more current milestones overdue but final deliverable still on schedule.	Current milestone has been missed and impacted major project deliverable.	G								
	SAF0115	Review EISs.	No more than one current milestone behind schedule	2 or more current milestones overdue but final deliverable still on schedule.	Current milestone has been missed and impacted major project deliverable.	G								
	SAF0116	Prepare EA's.	No more than one current milestone behind schedule	2 or more current milestones overdue but final deliverable still on schedule.	Current milestone has been missed and impacted major project deliverable.	G								
			99-100% completed within schedule.	90-98% completed within schedule.	< 90% completed within schedule.	G								
DWMEP	SAF0117	Review EAs and Categorical Exclusions.												

		Measure	Performano	ce Standard (Quarterly)		N	Measure	ement				Divisio	n Rating	
For Office Use	e ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
DWMEP	SAF0118	Provide technical assistance to requesting Agreement States 90 % of the time within agreed upon schedule. Effectiveness measured by timeliness of response.	Provide assistance to requesting Agreement State within agreed schedule for => 95% of requests	90 -95% of requests completed within agreed schedule	< 90% of requests completed within agreed schedule	G								
DWMEP	SAFT0119	Complete reviews for and issue as appropriate, approximately 235-325 NRC import/export authorizations (NRC licenses or amendments). Staff reviews will be completed for 100% of the cases within 60 days. Effectiveness measured by timeliness of review and (where appropriate) issuance of licensing action.	LLW reviews are completed in accordance with project schedules	Staff milestone slips but review schedules should not be impacted. Recovery plan in place	Staff milestone slips that impact major deliverables	G								
DILR	SAF0201	Rulemaking - Use PBPM prioritization process to conduct rulemaking activities while acknowledging the relative contribution of each activity to a risk-informed, performance-based regulatory framework.	Rules on schedule. Adjustments coordinated.	≤2 rules behind schedule.	≥3 rules behind schedule.	G								
DILR	SAF0202	Implement regulatory changes to implement the 2005 Energy Policy Act for licensees in accordance with Agency schedules.	1 open milestone ≥ 3 months past due	2 open milestones ≥ 3 months past due OR 1 open milestone ≥ 6 months past due	2 open milestones > 3 months past due OR 1 open milestone ≥ 9 months past due	G								

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		Measure	Performano	ce Standard (Quarterly)			Measur	ement				DIVISIO	n Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
WMEP	SAF0203	Tech Support to NRR or DILR for development of rulemakings.	Responsive to NRR or DILR requests	Not fully responsive, but not likely to have program impacts	Lack of quality or timeliness causes unnecessary delays and program impacts	w								
WMEP	SAF0301	Maintenance of regulatory framework for low-level waste disposal. DELETED 1/17/07	Continue support on EPA ANPR for disposal of low- activity waste within established milestones.	Support to EPA ANPR for disposal of low-activity waste is delayed based on staff action.	disposal of low- activity waste	N/A								
WMEP	SAF0301	Update guidance for environmental and low-level waste programs.	Proposed milestones on schedule.	Milestones delayed based on NRC staff actions.	Milestones missed and will impact final project.	G								
WMEP	SAF0401	Support RES efforts and conduct reviews of designated RES products supporting decommissioning & LLW disposal.		Staff milestone slips but review completion should not be impacted	Staff milestone slips and review completion will be impacted	G				Delete this measure in FY08.				

		Measure	Performano	ce Standard (Quarterly)		N	Measur	ement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
WMEP	SAF0402	Meet with RES to review cooperative efforts to develop state-of-the-art methods for decommissioning and LLW activities.	Meet Quarterly	No meeting scheduled within quarter	< 2 meetings per/year	G								
FSME	SAF0501	Exercise materials and waste emergency response in cooperation with DIRO (materials and other facilities) (table top or full)	2 per year	< 2 scheduled by Q2 <2 conducted by Q4	None scheduled by Q2. None conducted by Q4	w					w			
FSME	SAF0502	Ensure that all FSME staff is trained or on schedule to be trained on their emergency response role and responsibility (including using technical tools) in accordance with NSIR/DIRO requirements (trained, exercised or responded at least once every 3 yrs).	100% trained or scheduled to complete training	80 - 99% trained or scheduled to complete training	<80% trained or scheduled to complete training	G					G	G	G	
FSME	SAF0503	Following any Strategic Level event, or any other event with risk-significant generic implications, develop a Lessons Learned Plan.	Lessons Learned Plan is drafted < 6 months of report date of the event. Implementation is tracked and on schedule for significant deliverables in accordance with Operational level milestones.	LL plan is drafted 7-12 months of the date of the event. More than 2 significant milestones are behind schedule.	LL Plan is not available more than 1 year after the date of the event. Little progress is made to implement important milestones in the plan.	w					w	w	w	
MSSA	SAF0504	Conduct monthly reviews of performance measure data in accordance with Policy and Procedures Letter 1-57.	≤1 review missed	2 reviews missed	> 2 missed or Data reliability called into question.	G 0								
MSSA	SAF0505	Maintain NMED. Enter EN's, PN's, Morning reports within 2 work days.	97-100% entered within 2 days	95-96% entered within 2 days	< 95% entered within 2 days	G 98%								
MSSA	SAF0506	Update NMED records within 2 weeks of their receipt.	97-100% entered within 2 weeks	90-96% entered within 2 days	< 90% entered within 2 weeks	G 97%								

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		Measure	Performano	ce Standard (Quarterly)			Measur	ement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
MSSA	SAF0507	Update NMED Quarterly reports. DELETED 1/17/07	All on time.	1 past due, per Operational level schedule.	> 1 past due, per Operational level schedule.	N/A								
MSSA	SAF0507	Performance metric data correctly coded into NMED, in accordance with Strategic Plan definition of metrics and IMNS ticket 8316. DELETED 1/17/07	≥ 95 % entered without error.	90-94% entered without error.	< 90% entered without error.	N/A								
MSSA	SAF0507	Provide event rating forms for events with rating level 2 or greater (per 5/26/04 guidance) to NSIR's INES contact < 2 business days of publication of PN, or EN, if sufficient info is available to rate the event. DELETED 1/17/07	No overdue INES reports in each quarter.	1 overdue report per quarter.	> 1 overdue report in a quarter.	N/A								
MSSA	SAF0510	Agreement State event reporting info is adequate to enable preparation of AO report and NRC Performance Report information in a timely manner, and in accordance with Office procedures, and inclusive of all major areas within NMED. States requiring improvement are identified and notified. DELETED 1/17/07	Event reporting info is timely, complete and reliable	Issues are beginning to manifest which could lead to concerns about event data.	Significant concerns with respect to timeliness, completeness or reliability of event data.	N/A								
WMEP	SAF0509	Support DOE on the risk-based end state (Interagency Agreement). DELETED 1/17/07	99-100%completed within schedule.	90-98%completed within schedule.	< 90% completed within schedule.	N/A								
WMEP	SAF0507	Provide support to domestic stakeholders (NAS, LLW Forum, others).	Respond with staff/support/input to > 80% of requests.	Respond with staff/support/input to 70-80% of requests. By Q3: < 60% responsive.	< 70% responsive.	G								
WMEP	SAF0508	Provide support to visits by foreign agencies, review standards and safety guides by IAEA and others to exchange regulatory information, participate in foreign information exchange activities and conferences.	Support > 80% of requests.	Support 70-80% of requests.	Support <70% of requests.	G								
MSSA	SAF0601	Inspect materials licensees per IMC 2800. Complete inspections per IMC 2800 guidance.	<5% overdue insp./mo.	5-8% overdue	≥ 8% overdue	G <2%								

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		Measure	Performano	ce Standard (Quarterly)		N	Лeasur	ement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
MSSA	SAF0602	Update Inspection Guidance	All IMC's, Inspection Procedures are on schedule.	≤ 3 IMC or IP's delayed without scheduling adjustments.	> 3 delayed without scheduling adjustments.	О								
	SAF0603	Conduct materials program inspections without serious technical deficiencies.	IMPEPs and self- assessments demonstrate technical quality and effectiveness of licensing programs	Based on mid-cycle reviews, IMPEPs, or self-assessments one region or NMSS found "Satisfactory, but Needs Improvement," for technical quality of licensing.	Based on mid- cycle reviews, IMPEPs, or self- assessments one region or NMSS found "Unsatisfactory," for technical quality of licensing.	w								
	SAF0604	Conduct materials program inspections without serious technical deficiencies.	No Information Request received/handled in accordance with P&PL 1-81.	1 Information Request received/handled in accordance with Pol & Procedure 1-81	2 Information Requests received/handled in accordance with Pol & Procedure 1-81	w								
	SAF0605	General License Tracking	Major milestones are on schedule.	1 or more milestones are behind schedule, but recovery plan is in place.	Milestone slips occur that impact major product deliverables.	G								
MSSA	SAF0606	Implement Transition Plan to Increase Controls over Radioactive Materials Quantitites of Concern	Major milestones are on schedule.	1 or more milestones are behind schedule, but recovery plan is in place.	Milestone slips occur that impact major product deliverables.	G 100%								
WMEP	SAF0607	Inspect each complex site during significant	100% inspections in accordance with current schedule.	90-99% inspections in accordance with current schedule.	< 90% inspections in accordance with current schedule.	G								
WMEP	SAF0608		100% inspections in accordance with current schedule.	90-99% inspections in accordance with current schedule.	< 90% inspections in accordance with current schedule.	G								

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		Measure	Performano	e Standard (Quarterly)		ı	Measur	ement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
WMEP	SAF0609	Assist Region IV in inspecting Uranium Recovery Facilities	TBD	TBD	TBD	G								
	SAF0610	Complete WIR reviews for INEEL and SRS. 3 DOE WIR reviews completed.	No more than 1 milestone behind schedule based on DOE "submission of determination" initiating NRC review	2 or more current milestones behind schedule	Milestone missed that impacts project schedule.	G								
FSME	SECSO01	No instances where licensed radioactive materials are used domestically in a manner hostile to the security of the United States	0	N/A	>0	G					G	G	G	
FSME	SECPM01	Number of unrecovered losses or thefts of risk- significant radioactive sources (NSIR LEAD)				G					G	G	G	
FSME	SECPM02	Number of security events and incidents that exceed the Abnormal Occurrence Criteria 1.C. 2 (substantial case of actual or attempted theft or diversion of licensed material or sabotage of a facility) is ≥ 4 (NSIR LEAD)	> 4 per year	1 by QTR 1 2 by QTR 2 3 by QTR 3 4 by QTR 4	> 4 per year	G					G	G	G	
FSME	SECPM03	Number of security events and incidents that exceed the Abnormal Occurrence Criteria 1.C. 3 (substantial loss of SNM or any substantiated inventory discrepancy that is judged to be significant relative to normally expected performance, and that is judged to be cuased by theft or diversion or by substantial breakdown of the accountability system) is > 4 (NSIR LEAD)	> 4 per year	1 by QTR 1 2 by QTR 2 3 by QTR 3 4 by QTR 4	> 4 per year	G					G	G	G	
FSME	SECPM04	Number of security events and incidents that exceed the Abnormal Occurrence Criteria 1.C. 4 (substantial breakdown of physical security or material control that sifnificantly weakened bye protection against theft, diversion or sabortage) is ≥ 4 (NSIR LEAD)	> 4 per year	1 by QTR 1 2 by QTR 2 3 by QTR 3 4 by QTR 4	> 4 per year	G					G	G	G	
FSME	SECPM05	Number of significant unauthorized disclosures of classified and/or safeguards information.	0	N/A	> 0	G					G	G	G	
FSME	SEC0101	Number of infractions involving potential or actual inadvertent release of classified or sensitive unclassified information.	<8 infractions per year	2 by QTR 1 4 by QTR 2 6 by QTR 3	> 8 infractions per year	G 0					G	G	G	

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For Office	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2		Q4	Remarks	MSSA	DILR	DWMEP	PBPA
FSME	SEC0102	Ensure all staff receives refresher training every year on proper handling procedures for classified and sensitive information.	< 10 % overdue as of end of Q3 or < 5% overdue by 9/30	> 10 % overdue as of end of Q3	> 5% overdue	w					w	w	w	
DILR	SEC0401	FSME Rulemaking - Use PBPM prioritization process to conduct rulemaking activities while acknowledging the relative contribution of each activity to a risk-informed, performance-based regulatory framework.	Rules on schedule. Adjustments coordinated.	≤2 rules behind schedule.	≥3 rules behind schedule.	G								
MSSA	SEC0402	Response to Terrorism: -Interim Database -National Source Tracking System -Tag/Monitor Sources -Dispose of Unsecure Rad. Sources -Conduct Inspections -Coordinate with DOE on Source Disposal -Code of Conduct -Categorization of Sources -Trilateral Initiatives -Security Rulemakings -Complete Security Assessments DELETED 1/17/07	Activities on schedule	Some staff milestones behind schedule, but major milestones on schedule. Recovery plan in place.	Milestone slips occur that impact major project deliverables.	N/A				Metric is too broad.				
FSME	OPNSO01	Stakeholders are informed and involved in NRC processes as appropriate	TBD	TBD	TBD	G					G	G	G	
FSME	OPNPM02e	Median days for responding to FOIA requests (OIS lead)	≤ 20	N/A	> 20 days	G					G	G	G	
FSME	OPNPM02f	Issue Director Decisions under 10 CFR 2.206 ≤ 120 days. Agency Metric: ≥90%	≥90% resolved in 120 days.	At least 1 open > 120 days	<90% resolved in 120 days.	G					G 100%	G	G	
FSME	OPNPM03d	Percentage of stakeholders that believe they were given sufficient opportunity to ask questions or express their views.	≥ 95%	90-94%	< 90%	G					G	G	G	

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		Measure	Performano	ce Standard (Quarterly)		1	Measur	ement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
FSME	OPNPM03e	Percentage of Category 1, 2, and 3 meetings on regulatory issues for which NRC issues public notices 10 days in advance of the meeting.	≥ 90%	80-89%	Q1-3 < 80%	Y 86%				See Remarks in Out of Standard Tab.	R 83%	G 100%	G 89%	
FSME	OPN0101	Percentage of guidance, and major meeting summaries to OIS for posting in the Federal Register, and/or on the Web within 10 working days of the meeting date Post rulemaking on web following Federal Register publication.	90% within 10 days	80-89% within 10 days	< 80% within 10 days	G					G 100%	G 100%	w	
MSSA	OPN0102	Communications plans are consistently used for activities in which external stakeholders have expressed interest or concern in NRC activities. DELETED 1/17/07	≤2 activities where communication plans were not used	≤4 activities where communication plans were not used	>4 activities where communication plans were not used	N/A								
WMEP	OPN0103	Review/revise/update site-specific communications plans each quarter. (See DCD for Site Specific Decomissioning Communication Plan). DELETED 1/17/07	>90% of final site-specific plans reviewed/revised/ updated quarterly	80-90% of final site- specific plans reviewed/revised/ updated quarterly	< 80% of final site-specific plans reviewed/revised / updated quarterly	N/A				Tracked in Div level Operational Op Plan.				
MSSA	OPN0301	Issue inspection reports in timely fashion, per IMC 610 (30 days or 45 days)	No Region outside metric	One Region outside metric	NRC total >10% outside the metric.	G 98%								
WMEP	OPN0302	Issue inspection reports in timely fashion, per IMC 0610. (30 days, or 45 days for team reports)	No regions or divisions outside the metric	One region or division outside the metric	NRC total > 10% outside the metric	G								
WMEP	OPN0303	Issue inspection reports in timely fashion, per IMC 610 (30 days or 45 days). DELETE 1/17/07	No Region or Division outside metric	One Region or Division outside metric	NRC total >10% outside the metric.	N/A								

		Measure	Performand	ce Standard (Quarterly)		ı	Measur	ement				Divisio	n Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
DILR	OPN0401	Staff relations with OAS, CRCPD and States maintain open communications and opportunities for info sharing.	Interactions are performed in accordance with Office approved schedules and in accordance with NRC and Office procedures.	Schedules slip or opportunities to exchange information are missed on more than 1 occasion, but do not result in strained relationships.	Relationships become strained due to missed opportunities to share information or poor communications.	G								
FSME	OPN0501	Ensure all staff receive annual refresher training on proper identification and handling of allegations	<10% overdue for training	11%-20% overdue	> 20% overdue for training	w					w	w	w	
	OPN0502	Conduct a public meeting to discuss ISCORS activities.	Annual meeting conducted within milestone.	Annual meeting delayed based on staff action.	Annual meeting not conducted.	w								
WMEP	OPN0503	Provide briefings on Decommissioning, Environmental, LLW or other DWMEP program activities as requested to ACNW and Commission TAs.	Staff provides briefings and attends meetings	Staff unable to provide briefing but information provided	Staff unable to provide briefing and information not provided	G								
WMEP	OPN0601	Continue to hold Public Meetings etc. with stakeholders on issues important to decommissioning.	Meeting milestones are being met	Milestones slip, but meeting will be held. Recovery plan in place.	Meetings will not be held.	G								
FSME	EERSO01	No significant licensing or regulatory impediments to the safe and beneficial uses of radioactive materials.	0	Not applicable	> 0	G					G	G		
	EERPM01	Program assessed during the fiscal year using the Program Assessment Rating Tool (PART) receive a minimum score of 85 (program is rated as effective) from OMB. (Decomm & LLW scheduled for FY07 PART review.)	85	70-84	< 70	w					w	w	w	
FSME	EERPM02	Percentage of selected processes that deliver desired efficiency improvement is 70%.	70%	N/A	< 70%	G					G	G		

		Measure	Performano	ce Standard (Quarterly)			Measu	rement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
WMEP	EERPM02d	FY2006-FY2008: Improve the timeliness of the review process for nuclear power reactor License Termination Plans by at least 30 percent over 3 yrs as compared to historical average	30%	N/A	< 30%	G								
MSSA	EERPM03a	No more than 1 instance per program where licensing or regulatory activities unnecessarily impede the safe and beneficial uses or radioactive material.	0 in QTRs 1-3; 1 in QTR 4	1 in QTRs 1-3;	>1 in QTRs 1-4;	G								
WMEP	EERPM03b	No more than 1 instance per program where licensing or regulatory activities unnecessarily impede the safe and beneficial uses or radioactive material.	0 in QTRs 1-3; 1 in QTR 4	1 in QTRs 1-3;	>1 in QTRs 1-4;	G								
WMEP	EER0101	Conduct monthly reviews of performance measure data/operating plans.	< 2 reviews missed	3-5 reviews missed	> 5 reviews missed or data reliability called into question	G								
WMEP	EER0102	Implement milestones in the Integrated Decommissioning Program Improvement Plan.	Staff milestones are being met in accordance with Operational Level plan.	Staff milestones slip but due date to Commission should be met	Staff milestone slippages occur that impact major project deliverables.	· G								
DILR	EER0201	Use a PBPM prioritization process to conduct rulemaking activities while acknowledging the relative contribution of each activity to a risk-informed, performance-based regulatory framework.	Rules on schedule. Adjustments coordinated.	≥ 2 rulemakings behind schedule	> 3 rulemakings behind schedule.	G								
DILR	EER0501	Continue to interact with EPA and ISCORS to resolve issues of mutual concern related to the regulation of radionuclides and to avoid unnecessary duplication of regulatory requirements.	≥4 meetings per year. Meets schedules for EPA/ISCORS Mtgs at Operational Level	By Q3: Fewer than 3 attended or planned for attendance.	2 or fewer meetings/yr.	w								
MSSA	EER0502	Provide assistance to States expressing interest in establishing programs to assume NRC regulatory authority under Section 274b of AEA of 1954, as amended. Includes review of requests from States for 274b agreements, or amendments to existing agreements.	Schedules for new Agreement Reviews are developed based on Office Procedures and approved by management after consultation with other program offices.	Intermediate milestones are beginning to slip that have the potential to impact major schedule milestones.	Schedule slips are the result of inadequate NRC assistance or senior NRC management is not notified of slippages in a timely manner.	G 100								

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		Measure	Performano	e Standard (Quarterly)		N	Measur	ement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
MSSA	EER0503a	Implement IMPEP activities and enhance cooperation with State counterparts.	IMPEP Activities (including periodic meetings) on schedule in accordance with MSSA Operational metrics for quantity, timeliness, quality and effectiveness	One of the quantity, timeliness, quality or effectiveness IMPEP metrics is out of standard.	State or Regional performance issues are the result of IMPEP program weaknesses.	G 100								
WMEP	EER0503b	Support IMPEP reviews. - Participation in Regional IMPEP	Participate in accordance with FSME schedule	Unable to participate in accordance with NMSS schedule	Unable to participate	w								
DILR	EER0504	Enhance cooperation with Federal, State, Tribal governments thru activities carried out with communication plans developed to efficiently and effectively establish and inform external stakeholders	Interactions are generally performed in accordance with Office approved schedules and in accordance with NRC and Office procedures.	Schedules slip or opportunities to communicate with external stakeholders are missed on more than 1 occasion, but do not result in strained relationships.	Relationships become strained due to missed opportunities to share information or poor communications.	G					G			
MSSA	EER0505	Ensure Agreement State regulations are compatible with NRC equivalent regulations and areas requiring changes are identified and addressed.	91-100% of State reviews in 60 days and 100% within 120 days.	85-90% of State reviews in 60 days	< 85% of State regulation reviews in 60 days or < 100% in 120 days.	G 100%								
WMEP	EER0506a	Participate in industry & AS conferences to assess key issues affecting the decommissioning of nuclear facilities.	Participate in 2 major decommissioning meetings yearly	Staff has not participated in at least 1 conference by the end of the 3rd quarter	No participation in conferences	G								
WMEP	EER0506b	Participate in industry & AS conferences to assess key issues affecting the safe management of LLW disposal	Participate in 2 major LLW meetings yearly	Staff has not participated in at least 1 conference by the end of the 3rd quarter	No participation in conferences	G				_				

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		Measure	Performano	ce Standard (Quarterly)		N	Measur	ement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
WMEP	EER0601	Conduct bi-monthly Decommissioning Management Board Meetings.	< 90% of meetings held	< 80% of meetings held	> 80% of meetings held	G								
FSME	EER0701	Participate in international activities in order to influence scientific recommendatinos and international standards so they do not become unnecessary impediments in NRC's regulatory approaches	Ensure NRC interests and positions are adequately represented in international meetings and settings.	At least one signiiciant opportunity missed to influence international positions or standards.	More than one missed opportunity.	G					G	G	G	
FSME	EER0801	Complete allegations reviews in a timely fashion, per MD 8.8.	> 80% in 150 days > 90% in 180 days > 100% in 360 days	1 or more current pending > 180 days (NMSS only)	< 80% in 150 days < 90% in 180 days < 100% in 360 days	G 100% /150 Days					G	G	G	
MSSA	EER0802	Complete new applications and amendments within timeliness goal	92% within 90 days 100% within 1 year	Pending inventory: > 25% > 90 days or > 0.5% > 270 days	< 92% in 90 days or < 100% in 1 year	G								
MSSA	EER0803	Complete renewal applications and sealed source and device reviews within timeliness goals.	92% within 180 days 100% within 2 year	Pending inventory: > 25% > 180 days or > 0.5% > 540 days	< 92% in 180 days or < 100% in 2 year	G								
WMEP	EER0804	Conduct environmental reviews within timeliness goals.	90-100% of reviews completed within schedule	80-89% of reviews completed within schedule	<80% of reviews completed within schedule									
	EER0805	Conduct performance assessment reviews within timeliness goals.	90-100% of reviews completed within schedule	80-89% of reviews completed within schedule	<80% of reviews completed within schedule									
WMEP	EER0806	Conduct reviews of DPs, LTPs and other major decommissioning submittals within timeliness goals.(See DWMEP Operational plan) Supports Enabling Goal 4, Performance Measure 2d.	90-100% of reviews completed within schedule	80-89% of reviews completed within schedule	<80% of reviews completed within schedule									

		Measure	Performano	e Standard (Quarterly)		1	Measur	ement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
MSSA	EER0901	Assemble Task Force to review materials licensing processes and make recommendations for 10% process efficiencies.	Implementation on schedule	Some milestones slip, but major milestones not impacted. Recovery plan in place.	Slippages occur that impact project deliverables.	R				See Remarks in Out of Standard Tab.				
MSSA	EER0902	Assemble Task Force to review materials inspection processes and make recommendations for 10% process efficiencies.	Implementation on schedule	Some milestones slip, but major milestones not impacted. Recovery plan in place.	Slippages occur that impact project deliverables.	R				See Remarks in Out of Standard Tab.				
	EER0903	Complete new or revised clearly-written Office procedures in accordance with management schedules.	Office Policies and Procedures are generally on schedule and clearly written.	Some product schedules slip, but no significant program inefficiencies result.	Program ineffectiveness or inefficiencies are due to incomplete or inadequate procedures.	G								
	MGT1	Percent deviation from HR-authorized office-specific FTE ceiling	+/- 2%	Q1: ≤ ±5% Q2: ≤ ±4% Q3: ≤ ±3% Q4: N/A	Q1: >± 5% Q2: >± 4% Q3: >± 3% Q4: >target	Y -3.8%				See Remarks in Out of Standard Tab.				
DILR	MGT1a	Percent deviation from HR-authorized office-specific FTE ceiling	+/- 2%	Q1: ≤ ±5% Q2: ≤ ±4% Q3: ≤ ±3% Q4: N/A	Q1: >± 5% Q2: >± 4% Q3: >± 3% Q4: >target	R -9.8%				See Remarks in Out of Standard Tab.				
MSSA	MGT1b	Percent deviation from HR-authorized office-specific FTE ceiling	+/- 2%	Q1: ≤ ±5% Q2: ≤ ±4% Q3: ≤ ±3% Q4: N/A	Q1: >± 5% Q2: >± 4% Q3: >± 3% Q4: >target	Y +4.7%				See Remarks in Out of Standard Tab.				
WMEP	MGT1c	Percent deviation from HR-authorized office-specific FTE ceiling	+/- 2%	Q1: ≤ ±5% Q2: ≤ ±4% Q3: ≤ ±3% Q4: N/A	Q1: >± 5% Q2: >± 4% Q3: >± 3% Q4: >target	Y -3%				See Remarks in Out of Standard Tab.				

		Measure	Performance	ce Standard (Quarterly)		1	Measur	ement				Divisio	n Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
PBPA	MGT1d	Percent deviation from HR-authorized office-specific FTE ceiling	+/- 2%	Q1: ≤ ±5% Q2: ≤ ±4% Q3: ≤ ±3% Q4: N/A	Q1: >± 5% Q2: >± 4% Q3: >± 3% Q4: >target	Y -5%				See Remarks in Out of Standard Tab.				
PBPA	MGT2	Percentage of office employees who participated in assessing their skills in the Strategic Workforce Planning (SWP) system.	≥80 %	N/A	Q1-Q4: <80%	R 74%				See Remarks in Out of Standard Tab.				
PBPA	MGT3	Percentage of office supervisors who participated in identifying their skills needs in the SWP system.	<u>≥</u> 80 %	N/A	Q1-Q4: <80%	R 26%				See Remarks in Out of Standard Tab.				
PBPA	MGT4	Office identifes its critical skill needs to HR by the due date established in the information call or by the HR-approved due date extension	On target	N/A	Did not meet due date or approved extension	w								
PBPA	MGT5	Percent of professionals hired at the entry level based on 3-year rolling average	On target	N/A	< 25%	G								
РВРА	MGT6	Stay under HR-assigned office-specific target percentage for GG-14s	On target	Q1: ≤ 110% of target Q2: ≤ 107% or target Q3: ≤ 104% of target Q4: N/A	Q1: > 120% of target Q2: > 117% of target Q3: > 114% of target Q4: > target	G								
PBPA	MGT7	Stay at or under the HR-authorized office-specific supervisor-to-employee ratio	On target	Q1-Q3: >110% of target Q4: N/A	Q1-Q3: >120% of target Q4 >target	G								
РВРА	MGT8	Stay at or above average of 24 hours of training per employee	On target	Q1-Q3: ≤90% of quarterly target Q4: N/A	Q1-Q3: <80% of quarterly target Q4 <target< td=""><td>w</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></target<>	w								
PBPA	MGT9	Percentage of staff completing a minimum of 24 hours of training.	On target	Q1-Q3 ≤90% of quarterly target Q4: N/A	Q1-Q3 <80% of quarterly target Q4 < target	w								

		Measure	Performano	ce Standard (Quarterly)		I	Measur	ement				Divisio	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
PBPA	MGT10	Percentage of major FSME IT applications or general support systems scheduled to undergo Certification & Accreditation (C&A), which have completed the C&A process.	On target	Q1-Q3 ≤90% of quarterly target Q4: N/A	Q1-Q3 <80% of quarterly target Q4 < target	G								
РВРА	MGT11	Percent variance from baseline targets for cost, schedule, and performance for systems required to have Exhibit 300 submittals to OMB.	On target	>5% and <10%	≥10% (upon OMB approval of new baseline will become green next qtr.)					See Remarks in Out of Standard Tab.				
РВРА	MGT12	Percentage of submittals of presentation materials for foreign travel (includes speeches, papers, and viewgraph) that are on time w/o policy issues = 1 week in advance; w/ policy issues = 30 days in advance.	On target	Q1-Q3:<90% of presentations are late for less than 5 milestones per quarter Q4: N/A	Q1-Q3: <80% Q4: <target< td=""><td>w</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></target<>	w								
PBPA	MGT13	Percentage of foreign travel pre-trip notification e-mails that are on time = 30 days prior to departure (3 days if need for travel is determined less than 30 days in advance (Not required if travel is for NRC sponsored event).	> 90%	Q1-Q3:< 80-90%	Q1-Q4: <80%	Y 83%				See Remarks in Out of Standard Tab.				
PBPA	MGT14	Percentage of post-trip "quick look" summary reports that are on time = within 7 days of return.	> 90%	Q1-Q3:< 80-90%	Q1-Q4: <80%	R 67%				See Remarks in Out of Standard Tab.				
PBPA	MGT15	Percentage of foreign travel full-trip reports that are on time = within 30 days of return (Not required if trip did not involve issues of interest to Comm or if report was not requested by senior mgmt & "quick look" rpt covers pertinent info).	> 90%	Q1-Q3:< 80-90%	Q1-Q4: <80%	R 73%				See Remarks in Out of Standard Tab.				
РВРА	MGT16a	Recruit Diverse Employees at all levels	closing the gap between the percentage of minorities and women designated fro moffices to participate on agency recruitment teams and the percentage of minorities and women represented in the total NRC workforce.	TBD	TBD	w				FSME did not participate in recruiting events this Quarter				
	MGT16b	Develop and retain diverse employees by promoting an environment that values differences.	+ or - 5% of the overall percentage for NRC.	N/A	> + or - 5% of the overall percentage for NRC.	G 6%				Agency = 70%; FSME = 76%				

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		Measure	Performano	ce Standard (Quarterly)		ı	Measur	ement				Divisio	n Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
PBPA	MGT16c	External turnover rates for employees(separation from NRC excluding involuntary turnovers and retirements)	+ or - 5% of the overall percentage for NRC.	N/A	> + or - 5% of the overall percentage for NRC.	G .2%				Agency = .76%; FSME = 1.01%				
PBPA	MGT16d	Increase the diversity of employees in senior and managerial positions	+ or - 5% of the overall percentage for NRC.	N/A	> + or - 5% of the overall percentage for NRC.	G 4%				Agency = 18.81%; FSME = 13.92%				İ
PBPA	MGT16e	Employees in feeder positions (GG-13, 14, & 15)	+ or - 5% of the overall percentage for NRC.	N/A	> + or - 5% of the overall percentage for NRC.	G 4%				Agency = 69.33%; FSME = 72.83%				
PBPA	MGT17	Staff timeliness in completing annual on-line Information Security Awareness Training	100% by end of 1st QTR (12/31) ≥85% by end of 3rd QTR (06/30)	None	<100% by end of 1st QTR (12/31) <85% by end of 3rd QTR (06/30)	w								
PBPA	MGT18	Staff timeliness in completing annual on-line Computer Security Training	≥60% by 03/31/06 100% by 08/31/06	≥40% <60% by 03/31/06	< 40% by 03/31/06 <100% by 08/31/06	w								
PBPA	MGT19	Staff timeliness in completing NOFEAR Training (Required every 2 years - due FY07)	100% by end of 1st QTR (12/31)	<80% by end of 4th QTR (09/30)	<100% by end of 1st QTR (12/31)	w								
РВРА	MGT20	Promote communication among secretarial and administrative staff and between secretarial/administrative staff and managers	Activities are on schedule to achieve desired outcome	Schedules for major activities have slipped, but the desirec outocme is not affected	Schedule slips will affect achievement of desired outcome	G								l
PBPA	MGT21	Timely development and implementation of action plans resulting from the OIG Safety Culture and Climate Survey. DELETED 1/17/07	> 80% of activities completed on schedule	less than 80% and greater than 75% of activities completed on schedule	<75% of activities completed on schedule	w				Completed in FY06, obsolete in FY07.				
DILR	MGT21a	Timeliness of EDO Tickets	100%	<u><</u> 99 °	6	G 100%								
DILR	MGT21b	Timeliness of FSME Tickets	≥ 98% on time	95-97% on time	< 95% on time	G 100%								

		Measure	Performano	e Standard (Quarterly)		ı	Measur	ement				Divisio	n Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
MSSA	MGT21c	Timeliness of EDO Tickets	100%	<u><</u> 99 %	6	G 100%								
MSSA	MGT21d	Timeliness of FSME Tickets	≥ 98% on time	95-97% on time	< 95% on time	G 100%								
WMEP	MGT22e	Timeliness of EDO Tickets	100%	<u><</u> 99 %	6	G 100%								
WMEP	MGT21f	Timeliness of FSME Tickets	≥ 98% on time	95-97% on time	< 95% on time	G 99%								
DILR	MGT22a	Contract Forward Funding	Currently within + 1 month of target for number of months of forward funding	Within + 2 months of target for number of months of forward funding	> + 2 months of target for number of months of forward funding	w				Metric was not broken into Divisions only Fee-Based & WIR.				
MSSA	MGT22b	Contract Forward Funding	Currently within + 1 month of target for number of months of forward funding	Within + 2 months of target for number of months of forward funding	> + 2 months of target for number of months of forward funding	w				Metric was not broken into Divisions only Fee-Based & WIR.				
WMEP	MGT22c	Contract Forward Funding	Currently within + 1 month of target for number of months of forward funding	Within + 2 months of target for number of months of forward funding	> + 2 months of target for number of months of forward funding	w				Metric was not broken into Divisions only Fee-Based & WIR.				
РВРА	MGT23	FSME FISMA (Federal Information Security Management Act) milestones are met or on schedule	≥90% of mile-stones are met or are on sche-dule	<90% >85% of milestones are met or are on schedule	<85% of mile- stones are met or are on schedule	R				See Remarks in Out of Standard Tab.				
PBPA	MGT24	Current status and progress score on the OMB e- government scorecard	> 80% of activities completed on schedule	<80% >75% of milestones are met or are on schedule	<75% of milestones are met or are on schedule	G								
PBPA	MGT25	Operating Plan Improvement Milestones are met or are on schedule	>80% of milestones are met or are on schedule	<80% >75% of milestones are met or are on schedule	<75% of milestones are met or are on schedule	G								
PBPA	MGT26	Planning and Budgeting Milestones are met or are on schedule	>80% of milestones are met or are on schedule	<80% >75% of milestones are met or are on schedule	<75% of milestones are met or are on schedule	G								

		Measure	Performano	ce Standard (Quarterly)			Measur	ement				Divisi	on Rating	
For Office Use	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Q2	Q3	Q4	Remarks	MSSA	DILR	DWMEP	PBPA
РВРА	MGT27	National Source Tracking System milestones are met or on schedule	>80% of milestones are met or are on schedule	<80% >75% of milestones are met or are on schedule	<75% of milestones are met or are on schedule	R				See Remarks in Out of Standard Tab.				
FSME	MGT28	Pandemic Response Action Plan: Include major milestones from the pandemic action plans once they are developed	TBD	TBD	TBD	w								
FSIME	MG128													
		ID Column Descriptiion												
		Characters 1-3												
		Characters 4-5												
		Characters 6-7												
	activities are	e listed together, i.e., DILR activities first , then ities second, then WMEP activities third.												

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Office of Federal and State Materials and Environmental Management Programs

FY 2007 Office Level Operating Plan - - 1st Quarter Update

		Measure	Perf	ormance Standard (Qu	uarterly)		
Org.	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Remarks
			Sa	afety Strate	gic Goal		
None							
	T		Se	curity Strate	egic Goal		
None							
	_		Оре	enness Stra	tegic Goal		
FSME	OPNPM03e	Percentage of Category 1, 2, and 3 meetings on regulatory issues for which NRC issues public notices 10 days in advance of the meeting.	<u>></u> 90%	80-89%	Q1-3 < 90%	Υ	FSME is yellow at the office level with 86% on time Out of a total of 14 meeting summaries, 2 were late. MSSA: 83% on time. Missed one posting by 1 day was given to ADM on Friday, but not posted until Monday. DWMEP: 89% on time. Staff did not post meeting notice until 2 days past the 10-day metric because of a miscommunication within DWMEP that the NRC News Release date satisfied the requirement.

		Measure	Performance Standard (Quarterly)				
Org.	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Remarks
			Effec	tiveness Str	rategic Goal		
MSSA	EER0901	Assemble Task Force to review materials licensing processes and make recommendations for 10% process efficiencies.	Implementation on schedule	Some milestones slip, but major milestones not impacted. Recovery plan in place.	Slippages occur that impact project deliverables.	R	Not implemented during reorganization needs to be revisited in view of the Continuing Resolution
MSSA	EER0902	Assemble Task Force to review materials inspection processes and make recommendations for 10% process efficiencies.	Implementation on schedule	Some milestones slip, but major milestones not impacted. Recovery plan in place.	Slippages occur that impact project deliverables.	R	Not implemented during reorganization needs to be revisited in view of the Continuing Resolution
			Mana	agement Str	rategic Goal		
FSME	MGT1	Percent deviation from HR-authorized office-specific FTE ceiling	+/- 2%	Q1: ≤ ±5% Q2: ≤ ±4% Q3: ≤ ±3% Q4: N/A	Q1: >± 5% Q2: >± 4% Q3: >± 3% Q4: >target	Y -3.8%	FSME began the fiscal year 10 FTE below its allocated staffing level. Although recruiting activities are underway, and with the CR this metric may be difficult to meet this fiscal year.
DILR	MGT1a	Percent deviation from HR-authorized office-specific FTE ceiling	+/- 2%	Q1: ≤ ±5% Q2: ≤ ±4% Q3: ≤ ±3% Q4: N/A	Q1: >± 5% Q2: >± 4% Q3: >± 3% Q4: >target	R -9.8%	DILR has an underburn rate of 9.8%
MSSA	MGT1b	Percent deviation from HR-authorized office-specific FTE ceiling	+/- 2%	Q1: ≤ ±5% Q2: ≤ ±4% Q3: ≤ ±3% Q4: N/A	Q1: >± 5% Q2: >± 4% Q3: >± 3% Q4: >target	Y +4.7%	MSSA has an overburn rate of 4.7%.

		Measure		Performance Standard (Quarterly)			
Org.	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Remarks
WMEP	MGT1c	Percent deviation from HR-authorized office-specific FTE ceiling	+/- 2%	Q1: ≤ ±5% Q2: ≤ ±4% Q3: ≤ ±3% Q4: N/A	Q1: >± 5% Q2: >± 4% Q3: >± 3% Q4: >target	Y -3.7%	Performance improved from red during Qtr 4 to yellow for Qtr 1. However, DWMEP still has an underburn rate of 3.75% (actual expenditures were 16.0 FTE versus a projected expenditure of 16.6 FTE). The underburn is due to DWMEP being under staffed, however, DWMEP recently filled 7 technical positions.
PBPA	MGT1d	Percent deviation from HR-authorized office-specific FTE ceiling	+/- 2%	Q1: ≤ ±5% Q2: ≤ ±4% Q3: ≤ ±3% Q4: N/A	Q1: >± 5% Q2: >± 4% Q3: >± 3% Q4: >target	Y -5%	PBPA has an underburn rate of 5%
PBPA	MGT2	Percentage of office employees who participated in assessing their skills in the Strategic Workforce Planning (SWP) system.	<u>≥</u> 80%	N/A	Q1-Q4: <80%	R 74%	Missing this metric is one of the results of the reorganization. There are more new hires and more supervisory vacancies. Establishing new FSME procedures and increasing staff awareness that this information should be updated, should improve office performance in the next quarter.
PBPA	м G Т3	Percentage of office supervisors who participated in identifying their skills needs in the SWP system.	≥ 80%	N/A	Q1-Q4: <80%	R 26%	Missing this metric is one of the results of the reorganization. There are more new hires and more supervisory vacancies. Establishing new FSME procedures and increasing staff awareness that this information should be updated, should improve office performance in the next quarter.

		Measure	Perf	ormance Standard (Q	uarterly)		
Org.	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Remarks
РВРА	MGT11	Percent variance from baseline targets for cost, schedule, and performance for systems required to have Exhibit 300 submittals to OMB. OIS is working to define	On target	>5% and <10%	≥10% (upon OMB approval of new baseline will become green next qtr.)	R	NSTS: Effective 11/17/06, the NSTS development contractor was granted permission to begin limited development activities. Successful completion of development server hardening verification is necessary before receiving permission to utilize those servers. Following extensive technical interchanges and clarification meetings, the NRC awaits a contractor plan for moving forward. The contractor plan is expected the week of January 24th, 2007 and will help determine the impacts to project cost and schedule. Significant delays are expected in relation to the NRC certification and accreditation process for this sensitive system. WBL: NRC has developed a WBL Path Forward plan which addresses three major areas: functional remediation, Section 508 remediation (according to the Americans with Disability Act) and IT Security compliance. Negotiations have been underway this past quarter to address these major areas with a Firm Fixed Price type of contract. Negotiations with the contractor have been halted per draft SRM (COMSECY-06-0065). Upon conclusion of these negotiations, the impacts (both cost and schedule) will be determined.
РВРА	MGT13	Percentage of foreign travel pre-trip notification e-mails that are on time = 30 days prior to departure (3 days if need for travel is determined less than 30 days in advance (Not required if travel is for NRC sponsored event).	> 90%	Q1-Q3:< 80-90%	Q1-Q4: <80%	Y 83%	Out of 12 Total Reports, 2 were late. Have encountered some office start-up difficulties with procedures and coordination activities. In addition, Since the total reporting number is so small, missing this metric results in a high percentage.

		Measure	Perf	ormance Standard (Qu	uarterly)		
Org.	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Remarks
PBPA	MGT14	Percentage of post-trip "quick look" summary reports that are on time = within 7 days of return.	> 90%	Q1-Q3:< 80-90%	Q1-Q4: <80%	R 67%	Out of 12 Total Reports, 4 were late. Have encountered some office start-up difficulties with procedures and coordination activities. In addition, since the total reporting number is so small, missing this metric results in a high percentage.
PBPA	MGT15	Percentage of foreign travel full-trip reports that are on time = within 30 days of return (Not required if trip did not involve issues of interest to Comm or if report was not requested by senior mgmt & "quick look" rpt covers pertinent info).	> 90%	Q1-Q3:< 80-90%	Q1-Q4: <80%	R 73%	Out of 11 total Reports, 3 were late. Have encountered some office start-up difficulties with procedures and coordination activities. In addition, since the total reporting number is so small, missing this metric results in a high percentage.
PBPA	MGT23	FSME FISMA (Federal Information Security Management Act) milestones are met or on schedule	≥90% of mile- stones are met or are on sche-dule	<90% >85% of milestones are met or are on schedule	<85% of mile-stones are met or are on schedule	R	FSME has been working with OIS and their support contractors to develop the 1st set of documents in the C&A process for the following systems: Nuclear Materials Events Database, License Tracking System, General License Tracking System, Center for Nuclear Waste and Regulatory Analysis and Web Based Licensing. Progress has been made for all five systems. Aggressive deadlines have affected the quality of the OIS contract support. FSME's reviews are focused on corrections and the improvement of the quality of the documents. Working with OIS to establish expectations and new timelines.

		Measure	Performance Standard (Quarterly)				
Org.	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Remarks
РВРА	MGT27	National Source Tracking System milestones are met or on schedule	>80% of milestones are met or are on schedule	<80% >75% of milestones are met or are on schedule	<75% of milestones are met or are on schedule	R	Effective 11/17/06, the NSTS development contractor was granted permission to begin limited development activities. Successful completion of development server hardening verification is necessary before receiving permission to utilize those servers. Following extensive technical interchanges and clarification meetings, the NRC awaits a contractor plan for moving forward. The contractor plan is expected the week of January 24th, 2007 and will help determine the impacts to project cost and schedule. Significant delays are expected in relation to the NRC certification and accreditation process for this sensitive system.

Office of Federal and State Materials and Environmental Management Programs

FY 2007 Office Level Operating Plan - - 1st Quarter Update

Back-In-Standard Items

		Measure	Perfo	ormance Standard (Quart	erly)						
Org.	ID	Description	Green (On target)	Yellow (At Risk)	Red (Out of Standard)	Q1	Remarks				
	Safety Strategic Goal										
None											
			Sec	curity Strateg	ic Goal						
None											
			Ope	nness Strate	gic Goal						
WMEP	OPN0303	Issue inspection reports in timely fashion, per IMC 610 (30 days or 45 days)	No Region or Division outside metric	One Region or Division outside metric	NRC total >10% outside the metric.	G	Performance improved from yellow during Qtr 4 to green during Qtr 1 due to inspection reports being issued on time.				
Effectiveness Strategic Goal											
None											
	Management Strategic Goal										
None											

ACCOMPLISHMENTS

Program Planning, Budgeting and Program Analysis Staff

- Submitted FY 2006 Qtr 4 fee memos to OCFO, which included closing a large number of NMSS TACs and reopening new FSME TAC Codes during Christmas week - a very time consuming task which the staff completed on an expedited basis. (M.Jenkins, J.Ward)
- IT Security significant progress made towards the development of the first five documents in the security accreditation process for five systems. The systems are: General License Tracking System, License Tracking System, Web-Based Licensing, Nuclear Materials Events Database, the Center for Nuclear Waste and Regulatory Analyses, and National Source Tracking System. (R.Kristobeck, D.DeMarco, M.Burgess)
- Support for Re-organization worked with OIS to successfully complete the split of the two new offices (NMSS & FSME) on the network. Significant progress has been made towards correction and creation of the new email distribution lists for the two offices, and IT Security to update the System Security Plans for three SFST systems. (S.Abraham, R.Kristobek, P.Dorm, C.Bajwa, J.Piotter)

Division of Intergovernmental Liaison and Rulemaking (DILR)

- Published Final Rule for the National Source Tracking (M.Horn).
- Coordinated meeting between NRC Chairman, Commissioners, EDO, FSME, NRR, OGC and Region III management and staff from the Prairie Island Indian Community (PIIC) to discuss license renewal process and issues relevant to PIIC, and to further develop the NRC-PIIC Government-to-Government relationship (Virgilio, Siurano). Also, had meeting between NRC Tribal Consultation Team and the Yukon River Inter-Tribal Watershed Council to discuss mutual activities. Tribal interests, and consultation processes related to the potential siting a reactor in Galena, Alaska. (Smith)
- Finalized the pre-licensing guidance that was developed in response to the U.S. Government Accountability Office Report, entitled, "Nuclear Security Federal and State Action Needed to Improve Security of Sealed Radioactive Sources." (T. Young) Also final rule on Secure Transfer of Nuclear Material was sent to the Commission with recommendation to publish. (F.Cardile)

ACCOMPLISHMENTS

Division of Materials Safety and State Agreements (MSSA)

- Completed three IMPEP reviews and 15 regulation review packages (McCraw, Schneider, Orendi, McGrady-Finneran, Blanton and staff).
- 2 Issued Fingerprinting Orders for Access to Material to M&Ds, Irradiators and RAMQC licensees (Quinones, Ashkeboussi) and developed White paper on DNDO interactions with States (Palotay, Harris).
- 3 Completed SECY-06-0248 Results of Staff Actions to Identify Problems in 10 CFR Part 35 (Zelac).

Division of Waste Management and Environmental Protection (DWMEP)

- Completed licensing related actions: terminated Kaiser license (J.Buckley, A.Turner-Gray), and held Public Meetings for Shieldalloy Decommissioning Plan (K.Kalman, R.Tadesse, R.Johnson, J.Hull (OGC)), and EIS Scoping (G.Suber, J.Park).
- ² Completed annual decommissioning report and briefed Commission on the 2006 Decommissioning Program (J.Buckley, K.McConnell).
- Completed WIR Activities: Issued Final TER for INL Tank Closure (X.Yin; C.Barr), and Final Report on Saltstone WIR Review Lessons Learned (A.Bradford, D.Esh, C.Ridge).

CHALLENGES

Program Planning, Budgeting and Program Analysis Staff

- Reorganization: (1) Difficulties in obtaining HR historical data or previous year awards and appraisal ratings. The actual implementation of the reorg was felt during the first quarter when accounts had to be separated and increased workloads were experienced due to carrying out duties of a temporary hybrid, (2) transferring knowledge to new PBPA/PBT staff members [2 of 4 PBT staff members are new, and the 3rd has been on rotational assignment to another PBT position], (3) Delegations for new FSME office under review and development, (4) Performance Plans needed to be developed to reflect STP work incorporated into FSME.
- ² Fully implementing FSME's proposed programs due to the impact of the continuing resolution.
- National Source Tracking System FSME continues to work with OIS and DC to ensure that the contractor's understanding of the IT Security requirements are clear. The contractor's response expected during the week of January 24th, which will help determine the impact to project cost and schedule. The uncertainty in the budget may have impact to project work.
- Web-Based Licensing There is uncertainty in the budget for FY07 and FY08. Contract negotiations have been temporarily halted until budget decisions are finalized.
- 5 Software Maintenance reduced funding in FY07 along with the continued resolution restraints limit the ability for typical maintenance activities for FSME and NMSS systems (GLTS, LTS, RITS, NSSDRS, TAPIS, RTS, etc).

Division of Intergovernmental Liaison and Rulemaking (DILR)

Due to the Continuing Resolution, the next NMSS/FSME newsletter may not go out in hard copy print. Guy Beltz from publishing informed us the Agency does not have the funds to send the letter in hardcopy out to the licensees, however, the Agency will give it the widest dissemination electronically that we can.

Division of Materials Safety and State Agreements (MSSA)

- Coordination between Headquarters and the Regions and with all 50 States on implementation of the NARM final rule, e.g., new NARM licensees in non-Agreement States.
- The logistics of the reorganization, the separation of staff from management and from one another in OWFN and TWFN create a number of administrative and management challenges for FSME, and especially DILR and DMSSA.

CHALLENGES

Division of Waste Management and Environmental Protection (DWMEP)

- Meeting Strategic and Operating Plan goals and commitments under the FY 2007 Continuing Resolution and the FY 2007 OMB budget reductions.
- Addressing issues associated with the implementation of the restricted use decommissioning option at 10 CFR 20.1403.
- Internal and external pressures require staff to prioritize workload. A low-level waste strategic assessment is being conducted to evaluate future work activities on the LLW program and focus on those key issues that will ensure a stable, reliable and adaptable LLW regulatory framework.
- In the Incidental Waste Program, we face three major challenges: finalizing the enhanced consultation process, addressing generic technical issues, and completing monitoring plan for INL Tank Farm and the Savannah River Site saltstone disposition waste determination.
- In FY2007-2008 several new applications for in-situ facilities are expected which will require environmental reviews that can take up to 2 years. Staff is presently developing a strategy to ensure efficiency and to maximize completion of environmental work that is presently underresourced to allow timely licensing actions.
- The PART review was postponed in FY 2006 and is now scheduled to occur in FY 2007 under expedited schedule.