

MRSS C GOULTY FINANCE & SECRETARIAT (NUCLEAR) 1

D/DGSM/CSSE/Sec(Nuc) 5/143

Mr R Evans 6 Birtwhistle House 150 Parnell Road LONDON E3 2JY

Defence Procurement Agency

DGSM/CSSE Defence Procurement Agency. Ministry of Defence Rowan 1a, #164 MOD Abbey Wood Bristol, BS34 8JH

Switchboard: 0117 91 3000

16 June 1999

REQUEST FOR DOCUMENTS - PO 84348

The documents you requested in your letter of 30 May are enclosed. I have had to use two boxes, and have enclosed a copy of this letter in each box. This is Box One of Two.

If you wish to make a complaint that your request for information has not been properly dealt with, you should appeal to The Ministry of Defence, OMD 14, Rm 617, Northumberland House, Northumberland Avenue, London WC2N 5BP. You may at any time register a complaint with the Parliamentary Commissioner for Administration (the Ombudsman) through your Member of Parliament, but the Ombudsman will expect you to have exhausted the internal Ministry of Defence complaints procedure first.

S C GOULTY

Jour Brown Govilly



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Sear Mr Evans,

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your Sharely Saul Goulty

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Ref: AWE/DSDG/B/MN/AHSWC/185 Page No 1 of 13 Pages



MINUTES OF THE EIGHTH MEETING OF THE ALDERMASTON HEALTH AND SAFETY AT WORK COMMITTEE HELD ON TUESDAY 15th DECEMBER 1998

	•	TWGU
DA Chairman	J,	
DA	N	AEEU
DA	N	TWGU
DA	N .	IPMS.
DSD	M	IPMS
		IPMS
SED	M	11.1412
DPR		
DTech		
D Personnel		
DA Secretary		

1. OPENING REMARKS

opened the meeting and apologised for who was unable to attend. Apologies were also received from (DA), (DA)
also introduced who would be representing SED due to the retirement of N

2. ACCURACY OF MINUTES OF THE SEVENTH MEETING

was thanked for his involvement in the committee.

The following changes were agreed:

Section 1, Para 1 should readand (MSF)

Section 4, Para 2 should readMr questioned the selection of SRI investigation chairmen as problems had been encountered with delays in investigation reports and competency of the chairman.

3. ACTIONS AND MATTERS ARISING

Prior to the meeting, two separate action lists were produced, one indicating completed actions and one of action outstanding, It was agreed that actions marked as complete need not be discussed at length.

stated that the proposal for the revision of the Consultative Committee Structure was to be presented to the HSSC meeting, for endorsement, that afternoon (15/12/98).

3.2 AHSWC/11/98 — To review the policy with respect to retired AWE workers who were radiation workers - ONGOING

reported that a review of the radiation workers who had recently retired showed that they had attended medical prior to leaving site. Mean proposed that this action would be closed when a letter is included in the retirement pack from personnel to invite all staff to attend for a medical before leaving the company.

3.3 AHSWC/12/98 Manage - To carry out a review of safety responsibilities for Safety Related Post holders - ONGOING

A review has been carried out which identified that specific safety responsibilities were not identified as EPA objectives for Safety Related Post Holders. An audit of all staff in Safety Related Posts, to examine performance against EPA objectives will be carried out in the first quarter of 1999.

Mean reported that water quality was continuously measured and was found to be acceptable at all times. A proposal has been put to MoD to upgrade water supplies to the whole site. The meeting recognised that the upgrade work would be particularly complicated in A area. proposed that the action was closed, that progress with the matter should be monitored through the directorate reports, and that the unions should raise any new problems if they occurred. This was agreed by the meeting.

3.5 AHSWC/15/98 To present the details of the new Facility Emergency Management course - ONGOING

To be given at next CSSWG.

To be given at next CSSWG.

3.7 AHSWC/18/98 - To present details and improvements to the Company Corrective Action system -ONGOING

To be given at next CSSWG.

3.8 AHSWC/19/98 To examine the pedestrian access to centre site and ensure recommendations are acted on by the Roads Committee-ONGOING

reported that the path was scheduled to have been laid on 14/12/98. At the time of the meeting, the committee were unable to confirm if the work had been completed. (Secretary's Note: visited the site on Friday 8th January and confirmed that the path had been laid.)

- 3.9 AHSWC/21/98 To present the new Safety Approval Process -ONGOING
 To be given at next CSSWG.
- 3.10 AHSWC/22/98 Note: To update Trade Unions on progress with the Environmental Development Programme and Land Quality Survey COMPLETE

reported that a brief had been given to the Trades Union Representatives on 13/10/98.

Page No 3 of 13 Pages

3.11 AHSWC/23/98 to organise a CSSWG meeting to address outstanding actions - ONGOING

explained that would be taking on the CSSWG role, and agreed that a date would be set for the next CSSWG meeting early in 1999. Mean stated that he was pleased to see the importance of the group had been recognised, and that a senior representative from Assurance had been assigned.

3.12 AHSWC/24/98 To organise an OHWG meeting to address outstanding actions, -COMPLETE

Recommend that a meeting had been held on 8/12/98. Details are given in Section 5 of these minutes.

3.13 AHSWC/25/98 Manual - to present the review/rationalisation of the Company Audit Process - ONGOING

To be given at next CSSWG.

A document detailing the Company Assurance Managers Organisational Structures was issued on 27/11/98. Name stated that he would like some further detail on the key posts below the Managers, and their holders.

Action AHSWC/32/98 - No provide further detail on Assurance Organisational

Structures

End date: 19/03/99

3.15 AHSWC/27/98 - to investigate into sickness absence by Personnel - COMPLETE

stated that Personnel had not carried out any further reviews of Sickness Absence Statistics. This was confirmed by

3.16 AHSWC/28/98 Mr to identify users of Laptop computers and issue with guidance on their safe use etc. - ONGOING

reported that the Company Instructions were being updated to address the use of Laptop computers. In noted that some guidance on suitable configurations for laptop computers is available in a recent update of Croners.

3.17 AHSWC/29/98 to supply TU offices with membership lists for the new NSC and WSC - COMPLETE

Details of the membership of both the NSC and WSC were issued on 2/10/98.

3.18 AHSWC/30/98 ________ - to supply TU office with a breakdown of sickness absence data between Industrial and Non Industrial staff - COMPLETE

Details were issued on 27/10/98

reported that there are sufficient Eberlines to meet the requirement. In noted that it is not always clear where replacements are held which makes replacement difficult, especially in

silent hours. DAMs were advised to report any problems with equipment availability to instrument management. In noted that staff were pleased to see action taken to rectify the situation.

4. **DIRECTORATE REPORTS**

4.1 DTech

The facility responses to the Safe System of Work issues have been reviewed by the Directorate Safety Group. These reviews have resulted in action plans for each facility. These actions are nearly all complete. The action close-out has been verified by Assurance auditors.

An initial request has identified 170 proposed Risk Assessors for DTech. The training requires that risk assessors are accredited to ensure continued competence, and this large number would not be manageable. The DTech team intend to prioritise the list to ensure that the right people are identified for training regardless of their level within the company.

The remaining SSoW issues for DTech include holding briefings for DTech service providers to ensure they understand their own roles and their responsibilities to others; holding a workshop for WCC/facility staff to get feedback; and checking competence of individuals involved in authorising work.

outlined two recent SRIs:

• Unable to perform EMITs due to embargo on safes area of due to problems with containers in vaults. An action plan for the periodicity of EMIT checks is being developed based on risk. The meeting agreed that there was still some way to go to deal with this issue.

Action AHSWC/33/98 - to report to AHSWC on technical and programmatic parts of remediation.

End date: 19/03/99

- Whilst carrying out an operation to repack RA contaminated Mercury waste packages, one bottle released a mist of powder. There were no known internal doses however the area required decontamination. The incident is still under investigation, and the facility are developing plans for the recovery operation.
- been given to view the job. The meeting agreed to address this issue through the Company level meetings held by on Safe Systems. Note that commented on the value of this, and other regular meetings, such as OHWG, since they often resolved issues which reduced the number if items to bring to AHSWC.

4.2 **DPR**

reported that the SSoW review had been completed for DPR. The review had identified an improvement in risk assessment competence was required. Additional controls have been put into place in the WCC of two facilities until further training is completed.

outlined DPRs performance in LMSIs, stating that the Deputy Director had been involved, that databases of actions had been produced and that the unions had been involved.

Two recent level 2 SRIs were outlined by

- A high reading was found on a TLD from staff member in Pulse Power facility. The facility manager had investigated the incident, without union involvement, and had established that the lab coat had been left in the facility during a firing. The FM has been asked use the information he had found to convene a Company level investigation, with union involvement.
- Elevated DU reading from H1 stack. Environment Agency have asked for a Best Practicable Means study.
- A circuit was found to be live after isolation in H27. Found to be the incorrect labelling of an isolator, probably during commissioning.

The meeting agreed that commissioning is a key activity, and that more problems may be found in the future. agreed to talk with Dr Renfrew outside the meeting regarding the performance of and during commissioning.

commented that a HAZOP of the high voltage areas of H area had already been completed and thanked for his support in this. The HAZOP had identified that some procedural changes were required. The plan is to look at the whole directorate, with the Helen laser next. commented that it is often valuable to HAZOP what is already in place, rather than waiting for a design review.

4.3 **DSD**

Commissioning and testing is on programme for 1999. Construction have acted to improve the competence of their management team. Commented that contract managers do not get feedback on audit 303s which would help to measure contractor performance. The meeting agreed that sub-contractors still present some problems.

Passport to safety is increasing team working between operations and facilities by encouraging toolbox talks, walkabouts, in addition to SSoW approvals and work performed. stated that the same standards are applied to measured term contractors and principle contractors. Training provided is tailored depending on background and experience. 350 contractors have now been through the passport entry system.

Feedback on the Fire safety video has generally been good. A Road Safety video is currently under production. stated that he had received several requests for copies of the Fire Safety video.

reported that UKAEA Dounreay are interested in defining an industry standard for competence of Contractors on Nuclear Sites, and are interested in using AWE systems as an example of good practice.

Team working and communication issues are now part of DSD programme for 1999. This is part of a three year programme on implementation and support, not on development of new systems.

was concerned by reports that AWE apprentices are being trained by contract staff.

Action AHSWC/34/98 - investigate if contract staff are training AWE apprentices, and review safety implications, and report to AHSWC.

End date: 19/03/99

4.4 SED

reported that SED team have tried to ensure a common approach to Safe Systems of Work across site.

SED have introduced a system to address budgeting for LMSI actions. commented that not all facilities have spent their budgets. He advised contacting in for information on whether money is still available.

facility has recently been embargoed due to a lack of progress in the building of bunding. The work has now been prioritised, and programmed, to ensure all high priority issues are being addressed.

• Leaking battery in building due to a problem during manufacture. The investigation has been slow due to the shift patterns of the police, but will also include emergency response capability. The battery has been replaced by a new one. The meeting noted that the incident had off-site risks, but agreed to await the outcome of the level 2 investigation.

LMSIs are generally progressing well. 61 were planned, 57 are complete. 8 did not include union representation, this was thought to be due to short notice given in invitations to attend.

No significant issues on SED facilities were raised by the SSO(PE) Inspector on his recent visit. The meeting thought that there may be some continuing problems with disposal of HE.

Action AHSWC/35/98 - No. 2 - To review progress on disposal of HE with 12 and report back to AHSWC.

End date: 19/03/99

asked about the outcome of the Burghfield electrical incident. stated that the report was complete, and had been distributed. The investigation had raised issue for the other sites to do with testing, commissioning, and back-up systems. Recommendations had been made to Mr

5. <u>REPORTS FROM COMPANY SAFETY SYSTEMS WORKING GROUP AND OCCUPATIONAL HYGIENE WORKING GROUP</u>

CSSWG has already been reported in paragraph 3.11.

reported that a meeting had been held on 8th December 1998. The meeting had agreed that the name would be changed to Occupational Health Working Group, since this more accurately described its extended role which now includes Occupational Hygiene, Radiation Protection, Occupational Health, and Health Effects.

The meeting had discussed the reduction in the intrusive site wide Asbestos survey, and its replacement by visual inspection. This would be supplemented by more intrusive inspection if further clarification is required. commented that the response to deal with loose asbestos in was very slow. In noted that Asbestos removals had been raised as an action at the OHWG. The meeting agreed that it should be raised at AHSWC if a satisfactory response was not provided by this route.

Ref: AWE/DSDG/B/MN/AHSWC/185 Page No 7 of 13 Pages

asked if it was possible for staff to see their own medical records, particularly regarding medical fitness for work. Stated that the Company is legally bound to make medical records available. He also noted that forms HPR141 and HPR2 will be relaunched in the new year, and commented that he would bring the revised forms to the OHWG before issue.

stated that the OHWG had also discussed the shelf life of box gloves, and the new first aid risk assessment process.

also commented that the report on the AWE Mortality Study was complete, and was being externally peer reviewed. He stated that a brochure would be issued to all staff in the new year.

6. ISSUES RAISED BY SAFETY REPRESENTATIVES

6.1 Working Time Directive

described an occasion when health physics left a job because they had worked 48 hour in one week. This had been reported as an SRI. responded that this was an isolated case and that all staff should be aware that once a job has commenced it must continue to a suitable hold point, or completion. A review should be held after completion if the job took significantly longer to complete than expected. Safety Critical work must be completed as scheduled, other work should not commence if working time is likely to be exceeded. agreed that SSoW should include how long work is expected to take, what skills are needed etc, and that this will help in planning tasks in the future. also commented that feedback from industry is that the AWE is ahead of other companies in responding to the working time directive.

Action AHSWC/36/98 - To review Health Physics Working Time arrangements and report findings to AHSWC.

End date: 19/03/99

6.2 Company Safety Instructions - Awareness and Distribution

identified that CSI 602 had been updated, but that the new version was only available on the networked acrobat system. He was concerned that it takes a long time for the paper copies to be issued. He also noted that the AHSWC union members do not all have access to the network.

Action AHSWC/37/98 - To review distribution of Company Safety

Documentation at CSSWG,

End date: 09/06/99

7. FEEDBACK FROM HSSC AND SAIF

- reported the outcomes of the HSSC meeting held in early November. He noted that HSSC was scheduled to meet in the afternoon of 15th December, and that the 3rd Quarter 1998 report would be endorsed at this meeting.
- reported that the HSSC had considered the Non-routine work review programme for SSoW which was being led by

Page No 8 of 13 Pages

2725.

- ♦ The meeting had noticed a significant improvement in the close-out of Company actions recorded on form 303s.
- ♦ The meeting had considered the compliance with the Working Time Directive, and the safety issues which were revealed as a result.
- ♦ The Company Public Performance Indicators were agreed. This was presented to the AHSWC later in the meeting.
- reported that several weekly reports concerning SRIs, and Regulatory Interfaces had been rationalised down to one report at the SAIF meeting.
- ♦ The meeting had discussed the Fire Policy. In noted that Croners had recently published some Fire Safety guidance which might be useful to the Company.
- ♦ The meeting had also discussed Waste Management and Storage on the site.
- ♦ The interfaces between the site and facility emergency response arrangements had been considered.
- ♦ Finally ,improvements in measurement and reporting to Regulators of stack sampling was also discussed at the SAIF meeting.

8. COMPANY REPORT ON HEALTH AND SAFETY (3RD QUARTER 98)

reported that the report had not yet been agreed by HSSC, and so had not been formally distributed to AHSWC members. The meeting agreed that the report would be presented at the next AHSWC.

presented the performance indicators for 1999, and the current performance against the 1998 indicators, up to the end of period 3.

9. <u>INTERNAL REGULATION</u>

gave a presentation on Internal Regulation, the slides are included as Annex A.

monitor its performance. He noted that he had used the Inspectors to help in discussions regarding the potable water supplies and found them to be very helpful.

was concerned that the Facility Managers may lose some control over the facility due to the involvement of the Internal Regulators. responded that the FM retains ultimate responsibility for the facility, and are the initial point of contact for the Regulators. The Inspectors look for Company issues and lessons to be learned by walking the patch.

queried the arrangements for back-up for training and annual leave. responded that deputies, and successors were being identified asked if the Inspectors would automatically be included in SRI investigations, and if this

asked if the Inspectors would automatically be included in SRI investigations, and if this could lead to the Union Representatives being excluded. responded that the Inspectors may choose to be involved in some investigations, but would certainly not seek to replace the Union Representatives.

was concerned that the DAMs and Project Contract Managers should be involved in the feedback of findings by the Inspectors and suggested that the DAMs could be invited to the weekly team meetings on rotation.

be involved in the continued implementation of the system.

10. **A.O.B.**

reported that the LMSI for C32 had not been completed due to a lack of resource.

Action AHSWC/38/98 - - To review resourcing of LMSI and report to AHSWC.

End date: 19/03/99

noted that the Unions are no longer receiving the Awareness Issues Sheets.

Action AHSWC/39/98 - To ensure that the Unions receive Awareness Issues
Sheets.

End date: 19/03/99

♦ moted that the lighting around the canteen building was poor.

Action AHSWC/40/98 - To review lighting around the canteen building.

End date: 19/03/99

asked if the unions can get involved in the Tritium issues which are currently being discussed.

Action AHSWC/41/98 - To arrange meeting with TUs regarding Tritium,
End date: 19/03/99

* asked what progress had occurred on the BABTIE Roads Survey to ensure compliance with statute, particularly with regard to Road Signs.

Action AHSWC/42/98 - To give an update to the AHSWC on the roads survey for AWE(A) and (B).

End date: 19/03/99

- commented on the late running of shifts, and the working time directive. Mr
 offered to take this up outside the meeting.
- on Acceptance Review. replied that it would be presented to NSC on 22/02/99.

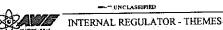
The date for the next meeting is:

19th March 1999, commencing at 09:00 in A85 Conference Room.

AHSWC Technical Secretary

...) ---

ANNEX A



-UNCLASSIFIED

- · HOLD POINTS CLEARANCE
- WASTE MANAGEMENT Minimisation LC 34/33
- SOE IMPLEMENTATION
- · EXPLOSIVE STANDARDS
- · SAFETY CRITICAL Standards/Understanding/Application
- · EMIT APPLICATION
- EXCLUSION AREAS
- · ELECTRICAL RELIABILITY
- FISSILE MATERIAL CONTROL
- · CHEMICAL INVENTORY & STORAGE
- CHANGE CONTROL Understanding and application
- SHIFT COVER Understanding of SMS/Safety Cases/Facilities

- PROCUREMENT & PROCESS - As above

DOQ/22/02 (----- 7 -

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INTERNAL REGULATION PROCESS MANAGER Dave Plummer <u>TEAM</u> Cardiff Waste Management Water Management Construction/Projects Burghfield Explosives areas

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INTERNAL REGULATION

PURPOSE

Measure the Compliance of AWE to:

SECURITY

QUALITY

ENVIRONMENT

= ASSURANCE

SAFETY

HEALTH

AGAINST

External/Company Standards & Best Practice

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INTERNAL REGULATION

933/1290 i

Internal Regulators will be:

- · ACCOUNTABLE AND RESPONSIBLE TO THE ASSURANCE DIRECTOR FOR
- ENSURING THAT <u>THEIR</u> FACILITIES ARE OPERATING WITHIN THE SAFE OPERATING ENVELOPE (SOE)COMPANY STANDARDS



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INTERNAL REGULATION

TRAINING & DEVELOPMENT

- · Inspectors have been selected on their 'track record'
- The role is a 'top drawer' activity
- Training and development will be provided



UNCLASSIFIED INTERNAL REGULATION

RESOURCE

- Regulators to spend 50% of their total time on Internal Regulation
- Process Manager to obtain Managers commitment

UNCLASSIFIED (NSQ-12-07 laws 7

UNCLASSIFIED

59 Desember 1994

ANNEX A contd.

UNCLASSIFIED INTERNAL REGULATION

METHODOLOGY

- · inspectors allocated facilities/areas
- Foster strong relationship with Facility Manager and staff
- · Talk to Safety Representative
- · Liaise with Regulator
- · Become expert on facility
 - Safety Case
 - Audit/LMSI results
 - · Regulatory issues
 - Culture
- · Become familiar with corporate issues
- Talk to SRIO and Manager Corrective Action
- Frequently walk the patch

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INTERNAL REGULATION

REPORTING

- · This is a proactive role
- · Emphasise areas of strength
- · Regulators have to use their judgement
- Areas of Concern.
 - · Feedback to Facility Managers
 - · Check progress on next visit
- Showstopper
 - · Action required report
 - SRI
 - Embargo

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INTERNAL REGULATION

RECORDING

- The Inspectors are a Team
- Regular meetings of Regulators
- . Discuss findings Bullet point report (1 sheet A4) by each Inspector
- · Identify Issues for Weeldy Assurance report
- · Discuss corporate issues
- Decide future topics
- Feedback from and to Assurance Director & Technical Authorities
- · Smart communication process

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INTERNAL REGULATION

METHODOLOGY - Back Up

- · Regulators are the focal point for the process
- Back Up will be required
- · Provided by the Technical Authorities

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INTERNAL REGULATION

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- Internal Regulators weekly meeting 27 November
- Meeting with FM

'PROGRAMME' - Week 1

- · Brief key Facility staff on the role of the Internal Regulator
- · Carry out familiarisation walk about
- . Commence review of Facility documents
- Internal Regulators weekly meeting 4 December

UNCLASSIMED INTERNAL REGULATION

In our view a strong internal Regulation Department whose staff have credibility with the site management should be able to influence the site to produce real improvements in health and safety.

Taken from the HSE Report -Safety Audit of Dougreay 1998

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Page 13 not included.

(Distribution list).