FESHM 1051: CONTROL OF ENVIRONMENT, SAFETY, HEALTH, AND QUALITY DOCUMENTS

Revision History

Author	Description of Change	Revision Date
Dave Skrivan	• Removed reference to Work Smart Standard and/or Work Smart Set (WSS). No other changes made.	August 2022
Martha Michels	 Added Quality Assurance (QA) Manual requirements. Added responsibilities for File Custodians, Records Coordinators and the Records Administrator. 	September 2017
Martha E. Michels	Reformatted the chapter	February 2013



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1.0 INTRODUCTION

This chapter describes the procedures identifying Environment, Safety, Health, & Quality (ESH&Q) documents and the protocol for controlling those documents. All ESH&Q documents shall be controlled in order to assure that the most current information is available to employees.

2.0 **DEFINITIONS**

ESH&Q Document – a policy, procedure, and any supporting forms that are required in order to maintain the ES&H Management System, the Quality Management System, and/or the Emergency Management System.

ESH&Q Records – Evidence to demonstrate conformance to a requirement specified in the ES&H, Fermilab ES&H Manual (FESHM), Fermilab Radiation Control Manual (FRCM), Quality Assurance Manual, or the Site Security Plan (SSP).

3.0 RESPONSIBLILITIES

3.1 Chief Safety Officer

- Identify the protocol for controlling documents and forms associated with the operational responsibilities of the ESH&Q Section.
- Identify the protocol for controlling documents associated with ES&H, Quality Assurance (QA), and Emergency Operations generated by the various organizations at the laboratory.

3.2 Division/Section Heads and Project Managers (D/S/P)

• Specify the protocol for controlling their internal ES&H, QA, and/or emergency operations documents in accordance with those identified by the Chief Safety Officer.

3.3 Records Administrator

- Manages the Fermilab system to retain and preserve records.
- Coordinates responses to DOE about Fermilab records.
- Provides assistance on records questions.
- Communicates records information to the D/S/P's via their Records Coordinators.
- Point of contact to archive records or retrieve records from archive.

3.4 D/S/P Records Coordinators

- Records Coordinator is the primary point of contact between the Records Administrator and the D/S/P, communicating records information to the local File Custodians.
- Clearing departing employees as part of the records checkpoint in the employee exit process. This ensures that responsibility for records under the control of the departing employee are properly transferred to an active employee.
- Records Coordinators may also function in the dual role of File Custodian if the need arises.

3.5 D/S/P File Custodians

- Act as a resource on records questions at the local workplace level.
- Assist employees in the identification, inventory and maintenance of records in the workplace.
- Schedule periodic cleanouts/housekeeping campaigns to keep the amount of non-records at a minimum and the storage of inactive records.

4.0 PROGRAM DESCRIPTION

4.1 ESH&Q Document Control

- All ESH&Q documents must go through an approval process. The review/approval and document control process for the FESHM, FRCM, and QA Manual is found in <u>FESHM</u> <u>1050</u>.
- All ESH&Q documents must be reviewed and revised as appropriate with the maximum time span being every five years. They must go through the established approval process. Applicable requirements specified in Regulations, DOE Orders, and FESHM and FRCM Chapters mandating a more frequent revision cycle shall continue to be followed.
- All ESH&Q documents shall have the revision date identified on the document. Only the most current revision shall be used. Older versions kept for information purposes must be treated as obsolete.
- Documents of external origin which are necessary for the planning and operation of the ESH&Q Section functions shall be controlled to assure the most current information is available.

4.2 Records Management

- ESH&Q records must be retained under the Fermilab Records Management Program requirements according to the appropriate DOE Records Retention Schedule.
- Paper and electronic records are treated equally and retention times should be assigned as per the applicable DOE Records Retention schedule.
- Long term retention items may either be retained on site or transferred to archival storage in the laboratory approved records retention center.
- When records reach their disposal date, they shall be reviewed and a determination made as to their historical importance and/or relevance to current operations. If there is no need to retain them past their disposal date, they shall be disposed of properly. If there is a need to retain them beyond their disposal date, they shall be transferred to the appropriate File Coordinator or the Fermilab Archivist and identified properly.