

FY09 Self-Evaluation  
Contractor Performance  
Evaluation and Measurement Plan



Volume 2  
Management and Operations  
Goals 4 – 8

Submitted to the U.S. Department of Energy  
September 30, 2009

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## Executive Summary

SLAC is continuing with its transition from a single purpose laboratory to a multi-program laboratory with programs aligned with BES and HEP. The science vision is continuing to evolve with close coordination with Office of Science. At the same time we have significant challenges and accomplishments in the leadership and mission support functions that underpin the achievement of the SLAC scientific mission.

- SLAC has filled key leadership positions in both the mission and mission support areas. The progress at the highest level of SLAC leadership is truly worthy of note. Nevertheless, the lack of leadership and management skills embedded within the Operations support organizations continues to hamper SLAC performance. A multi-year process is in place to ensure improved leadership and succession planning.
- Strategic and daily interaction among the leadership of SSO, Stanford and SLAC is proactive in all directions and helps ensure the implementation of the roles and responsibilities of the GOCO model and achievement of the SLAC mission.
- SLAC has conducted a major reorganization to ensure that LCLS project success is parlayed into LCLS scientific results as well as to build the foundation for accelerator research and conduct of operations.
- SLAC is in the final stages of implementing a structured work planning and control initiative and there has been some initial progress in emergency management including a major exercise with Stanford and local governments.
- SLAC has had the safest period in its recorded ES&H history, which is a period of one million work hours without a recordable injury during FY09. Unfortunately, a serious laser-related injury occurred on September 24, 2009.
- Increasing technical staffing, oversight, and aligning resources to meet ARRA project needs was particularly noteworthy.
- Standard Roles, Responsibilities, Authorities and Accountabilities have been established for positions across the Lab. SLACs performance evaluation program has been revised to focus on results rather than personal characteristics.
- SLAC is planning a bonus system aligned to the Lab's Fiscal Year objectives that rewards high achievers.
- SLAC has established at-will employment relationships with the senior leadership in Operations.
- A new activity-based Work Breakdown Structure to support cost accounting and budgeting is being planned, accompanied by a costing model for FY10, to simplify the more complex funding structure now in place at the Lab.
- Current business systems cannot support a multi-program Lab. A project will be defined to look at ERP system alternatives to address this issue.
- SLAC is experiencing unacceptable difficulties in the management of some of its facilities projects. SLAC is placing a high priority on rectifying this in an immediate and sustainable manner.
- An integrated Mission Readiness Program has been implemented to identify and prioritize mission infrastructure needs.

- SLAC's computer network, datacenter and telephone systems must be upgraded or replaced as soon as possible since many components are at end-of-life, are beginning to fail and outages will impact operations.
- Finally, SLAC leadership is dedicated and impatient in pursuing needed improvements. These will occur.

**Management and Operations Score Calculation**

Goal	Grade	Number	Weight	Score	Total
4 Provide Sound and Competent Leadership and Stewardship of the Lab	A-	3.5	25%	0.88	
5 Sustain Excellence and Enhance Effectiveness of Integrated Safety, Health, and Environmental Protection	B+	3.3	25%	0.83	
6 Deliver Efficient, Effective, and Responsive Business Systems and Resources that Enable the Successful Achievement of the Lab Mission(s)	B	2.9	25%	0.73	
7 Sustain Excellence in Operating, Maintaining, and Renewing the Facility and Infrastructure Portfolio to meet Lab Needs	C	1.9	15%	0.29	
8 Sustain and Enhance the Effectiveness of Integrated Safeguards and Security Management (ISSM) and Emergency Management Systems	B+	3.1	10%	0.31	
Total Management and Operations Score					B / 3.02

## Goal 4

Element	Grade	Number	Weight	Score	Total	
4	Provide Sound and Competent Leadership and Stewardship of the Lab (Goal Weight: 25%)					
4.1	A-	3.7	34%	1.26		
4.2	B	3.0	33%	0.99		
4.3	A-	3.7	33%	1.22		
Performance Goal 4 Total					A- / 3.47	

This goal has three objectives and 17 measures/targets.

Stanford is developing outstanding leadership and stewardship for SLAC and positioning SLAC to become a leading Office of Science multi-program national Lab. The essential element of leadership is, of course, the people in key positions. SLAC has filled most key leadership positions (SLAC Director, Vice President for SLAC, Chief Operating Officer, LCLS and PPA Directors, and leadership of ES&H, Communications, HR, CFO, CIO, Facilities, Procurement) as of year end and plans to complete the team (Accelerator and PPL Directors, Financial Controller) early in FY10. Nevertheless, progress in Lab leadership and management needs to further penetrate into the Operations Directorate. Stanford has demonstrated stewardship by having a significant role in these searches.

Leadership was demonstrated this year by merging the accelerator research and operations functions throughout the Lab into a single Accelerator Directorate that provides an integrated management team to efficiently and safely operate for the science mission directorates which use those facilities—LCLS, SSRL and the Accelerator Research Division.

Substantial effort has gone into developing SLAC’s management model including planning, business/budget goals and measures, accountability, risk assessment, prioritization, work planning for safety, and continuous improvement.

### Objective 4.1

#### PERFORMANCE SUMMARY

- The SLAC Laboratory Plan was updated following the process developed in FY08 and delivered to the Office of Science in April 2009.
- The FY09 mission support business plans were created and aligned with the Laboratory Plan and the SLAC Agenda – a one page plan outline.
- The Operations Directorate established and utilized a governance model that incorporates broad SLAC input in order to refine its business goals.
- The business planning is coordinated with the processes for the budget, departmental and personal performance goals, and the PEMP goals.
- The Operations Directorate develops and monitors progress toward goals in twice monthly leaderships meetings, quarterly update reports to the achievement of business and PEMP goals and an annual retreat to review accomplishments and to enable effective planning for the coming year.
- Business planning for FY10 began in May 2009 and anticipates starting the year with a well developed plan and budget.
- A Financial Transition Project has been launched to overhaul the Lab’s financial architecture and processes, and put the Lab on one planning framework (e.g., work breakdown structure) by October 1, 2009.

- SLAC continues to develop partnerships with LBNL, PNNL and LLNL.
- The SLAC Director attends NLDC meeting and participates in all NLDC telecons. Acting CRO (Hodgson) participates actively with SC Lab planning process. SLAC COO (Merola) participates actively in national COO activities.
- Stanford communicates regularly with congress people on issues relevant to science in the US.
- A "Communication and Involvement Plan" was developed and accepted by the SSO.
- The SLAC tour program was partially restarted in September 2009.

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**NOTEWORTHY PRACTICES**

- A modern business planning model is being established based on performance management: vision, mission, annual Lab plan and agenda, measurable business goals and objectives, governance, risk assessment, feedback and continuous improvement.
- Collaborative (with SSO) establishment of PEMP goals and notable targets are then integrated into the Lab business plans.
- The Operations Directorate is actively partnering with other laboratories to share best business practices among the SC laboratories' mission support efforts.

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**OPPORTUNITIES FOR IMPROVEMENT**

- The CFO has established a goal for FY10 to implement a centralized planning function that supports the development of an integrated budget/planning approach for the entire Lab.
- The SLAC website improvements were deferred to FY10.
- The full tour program was deferred to February 2010.

**Objective 4.2**

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**PERFORMANCE SUMMARY**

- SLAC has implemented long range strategic planning that serves to align business, budget and performance planning and safety through work planning and control. Through these processes, SLAC has begun to establish responsive and accountable leadership for management as well as scientific and professional personnel.
- The Annual Lab Plan and SLAC Agenda have been used by managers throughout the year to focus all areas of the Lab on the institutional goals and strategy.
- A Lab-wide program was established to capture position summaries, roles, responsibilities and accountabilities for 97% of the staff. This will establish a basis for establishing accountability in line management as well as higher quality staff in the Lab.
- Accountability for safety for the Director and all ALDs has been established by several means which include: staff and management meetings, monthly walkarounds (with related safety discussions), *SLAC Today* pieces, Plan of the Week, and senior management meetings.
- The Directorate gave strong support to the roll out of Work Planning and Control throughout the Lab, which was completed in August 2009, closing this long missing element for a systematic approach to implementing ISMS at SLAC.
- A major effort in FY09 has been a rigorous process to develop a clearer understanding of accountability in budgets and costs.

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**NOTEWORTHY PRACTICES**

- A thorough study of the costs of doing business was under taken as a precursor to improving the work planning and budget processes.

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**OPPORTUNITIES FOR IMPROVEMENT**

- Operations leadership has recently determined an approach to upgrade the second line of management, but underlying planning is only beginning.
- SLAC implement the revised ES&H Chapter 33 “Management Walkthroughs” and redesigned the SMART tracking system, which will guide accountability for monthly walkarounds in the future.
- Continuous improvement in streamlining the work planning and control process while ensuring that the workers thoroughly understand and mitigate risks.
- Some notable corrective action due dates were missed due to workload, but accountability has improved in recent months.

### **Objective 4.3**

#### **PERFORMANCE SUMMARY**

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- Stanford has now formally established a comprehensive oversight and support process run via the SLAC Board of Overseers. Each of the four committees of the SLAC Board meet regularly, review and comment on SLAC’s performance, risks, and opportunities to add value.
- The BoO Scientific Policy Committee review of LCLS and our light source strategy reinforced SLAC’s approach of partnering with LBNL and the need for a clear science leader for the LCLS.
- Using best-in-class oversight practices, Stanford has begun to provide assurance of continuous improvement into SLAC.
- Stanford has provided both financial and personnel support to SLAC as the Lab recruits and retains the talent necessary to perform its mission with distinction. The involvement has helped bring both best practices and new leadership to SLAC.
- Stanford, like all universities, is being impacted by the financial downturn in the economy. Nonetheless, SU’s financial support for SLAC’s strategic investments has gone unchanged. This is the only university account that has not been reduced by the Administration.
- The Annual Evaluation and Reporting of the Management Control Program letter was sent to SSO on May 29, 2009.

#### **NOTEWORTHY PRACTICES**

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- Stanford’s Scientific Policy Committee along with the Board of Overseers is a model for contractor oversight of the science and operations of the Lab.

#### **OPPORTUNITIES FOR IMPROVEMENT**

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- SLAC and Stanford need to find a better approach with DOE to establishing the process and content of those indirect efforts that are currently provided by Stanford.

## Goal 5

Element	Grade	Number	Weight	Score	Total	
5	Sustain Excellence and Enhance Effectiveness of Integrated Safety, Health, and Environmental Protection (Goal Weight: 25%)					
5.1	B+	3.3	40%	1.32		
5.2	B+	3.3	50%	1.65		
5.3	B+	3.3	10%	0.33		
Performance Goal 5 Total					B+ / 3.30	

This goal has three objectives and 16 measures/targets.

SLAC made significant improvements in work planning and control, emergency management and legacy hazard reduction in FY09. SLACs environmental management and integrated safety management systems have matured significantly in the last year. Total Recordable Cases (TRC) and Days Away, Restricted, Transferred (DART) cases were both reduced about 70% over the previous three year average. Unfortunately, a serious laser-related injury occurred on September 24, 2009. In addition, SLAC worked a period of one million work hours without a recordable injury during FY09. Increasing technical staffing, oversight, and aligning resources to meet ARRA project needs was particularly noteworthy. In the area of continuous improvement, SLAC has put in place the framework for improved causal analysis and lessons learned. The areas of focus in FY10 will be continued emphasis on work planning and control, subcontractor selection process, interface and oversight, and critical infrastructure improvements.

### Objective 5.1

#### PERFORMANCE SUMMARY

- SLAC has significantly stepped up its incident reporting and investigation process. During FY09, 41 investigations were launched, including 25 items submitted to the DOE ORPS system.
- ES&H and Procurement have instituted an improved subcontractor qualification scorecard to assess ES&H metrics of prospective bidders. This should help improve the selection of subcontractors that focus on safe and sustainable performance.
- The ES&H Sub-council has been actively working to develop an improved project design and review process that will result in a more efficient and effective process. SLAC will continue to work on early integration of ES&H considerations into all projects.
- TRC rate is estimated to be 0.5, below the Office of Science target of 0.65, and the DART rate is estimated to be 0.4.
- The number of TRC/DART cases through FY09 represented a reduction of 73% and 71% of the previous three-year averages, respectively. Unfortunately, a laser-related injury occurred on September 24, 2009. At the time of this report, a plan is being put in place for both incident investigation as well as a review of all laser laboratory SOPs and training of all laser personnel.

#### NOTEWORTHY PRACTICES

- NA

#### OPPORTUNITIES FOR IMPROVEMENT

- Subcontractor safety and oversight has improved, but needs constant vigilance including improved UTR qualifications and skills to provide solid project implementation and oversight.

- Technical staffing has continued to improve. A next major step will be to establish skills and qualifications criteria for all ES&H professionals (including line organizations) and to implement a career path and development program.
- SLAC did not document the Operating Experience (OPEX) benchmarking as required. A specific improvement in the program management is that SLAC made a change in personnel to dramatically improve the program. A permanent staff member was hired in September 2009 to take on this role after a several month vacancy.

## Objective 5.2

### PERFORMANCE SUMMARY

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- SLAC took a holistic view of ISM and EMS implementation (ISEMS) through continued self-assessment, review of events and injuries, and operational information, and declared that ISM and EMS are implemented.
- A task force including ES&H, HR, and Finance has developed a SLAC Spot Award and Recognition Program. This program was effectively rolled out in Q3. During the development of this program it was determined that the Spot Award should not focus solely on ES&H, but on all aspects of excellent performance. At this point, over 100 Spot awards have been issued.
- SLAC made great strides in the implementation and roll-out of an efficient Work Planning and Control (WPC) program, which is now integrated into all SLAC operations.

### NOTEWORTHY PRACTICES

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- SLAC Operations initiated and fostered the development of a Plan of the Week program for key organizations around the site to communicate work activities of interest on a weekly basis. This has proven to be a very effective forum between the research directorates, Facilities, ES&H, and the DOE SSO to both elevate awareness and provide for applicable educational opportunities.

### OPPORTUNITIES FOR IMPROVEMENT

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- SLAC sponsored a comprehensive independent review of the WPC implementation in July 2009. While overall the net result indicated good awareness of WPC and use of the established framework there were some identified opportunities for improvement that SLAC will continue working on in FY10 and beyond.

## Objective 5.3

### PERFORMANCE SUMMARY

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- Cleaned six tons of PCB and lead-impacted sediments from 5,000 linear feet of storm drain lines.
- Obtained Regional Water Quality Control Board (Water Board) approval on documentation report for removal of 5,000 tons of chemically impacted soil and debris from five areas.
- *Tritium Operable Unit Remedial Investigation Report* was approved by the Water Board in June 2009.
- *Tritium Operable Unit Monitoring Plan Report* was submitted to the Water Board for review in September 2009.
- The two ground water remediation systems have extracted over 870 lbs of solvents.
- Shipped waste with no compliance issues:
  - 28,423 kg hazardous waste
  - 2,209,090 kg Class II regulated waste
  - 33,450 kg drums/transformers recycled as scrap metal
  - 105 kg of hazardous materials reused by Plating Shop and Facilities

- SLAC hosted the Household Electronic Recycling Event which generated 6,000 kg of electronic waste.
- New ES&H review process developed for purchases of toxic materials.
- Declaration of “Fully Implemented” Environmental Management System completed ahead of schedule.
- Greenhouse Gas Baseline Inventory completed ahead of mandatory requirements.
- SLAC received a bronze level award for electronics stewardship in the Federal Electronics Challenge.
- PULSE project recycled 84% of construction and demolition debris.
- Favorable inspections by regulating agencies for hazardous waste, storm water, spill prevention, tiered permitting, wastewater and air.
- The last major chiller charged with a Class I ozone depleting substance has been removed from service.

#### NOTEWORTHY PRACTICES

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- NA

#### OPPORTUNITIES FOR IMPROVEMENT

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- Over the next few years new diesel off-road vehicle emissions regulations will result in a need to upgrade or replace many of SLACs heavy vehicles, such as forklifts and cranes. ES&H and Facilities are working together to develop a plan to address this eventuality.
- SLACs lead management program needs improvement. A cross-cutting SLAC working group has been established to evaluate and improve the program.
- Revise TEAM goals due to delay in progress on energy and water reduction goals of EO1342:
  - Stop Work order on Energy Savings Performance Contract due to cost effectiveness issues.

## Goal 6

Element	Grade	Number	Weight	Score	Total	
6	Deliver Efficient, Effective, and Responsive Business Systems and Resources that Enable the Successful Achievement of the Lab Mission(s) (Goal Weight: 25%)					
6.1	C+	2.4	15%	0.36		
6.2	B	3.0	40%	1.20		
6.3	B+	3.2	15%	0.48		
6.4	B+	3.1	10%	0.31		
6.5	B	2.8	15%	0.42		
6.6	B-	2.7	5%	0.14		
Performance Goal 6 Total					B / 2.91	

This goal has six objectives and 20 measures/targets.

In order to remedy the lack of adequate financial and human resources management systems sufficient to support a multi-program Lab, SLAC has recruited a strong leadership team, with a new Director of Human Resources, Chief Financial Officer and Chief Information Officer joining the team over this past year. A new Purchasing Director is scheduled to start on September 28. Together with the other members of the Operations Directorate, they are building their internal organizations as well as creating a partnership across organizational lines to provide the systems and support that the Lab needs to conduct its business efficiently. We have established Roles, Responsibilities, Authorities and Accountabilities for positions across the Lab. We have revised SLAC's performance evaluation program to focus on results rather than personal characteristics. We have instituted higher standards of expected performance and higher levels of accountability. We intend to implement a bonus system aligned to the Lab's Fiscal Year objectives that rewards high achievers. We have established at-will employment relationships with the senior staff leadership in Operations.

We are creating a new activity-based Work Breakdown Structure to support cost accounting and budgeting at the activity level for the newly reorganized Lab effective October 1, 2009. We are in the process of developing a more accurate, effective and transparent costing model for FY10 to accommodate the more complex funding structure now in place at the Lab.

SLACs IT business systems were developed and customized over the past decade to service a single-purpose Lab. The systems meet the Lab's minimum requirements for financials, HR, and reporting, but require significant manual intervention to operate effectively. The current systems cannot support a multi-program Lab without a significant upgrade or replacement. Despite these deficiencies, the business systems have a strong record of uptime operational performance (>99%). During FY09 we worked with Deloitte & Touche and Stanford University to assess migration and upgrade options and decided to defer further action until the new CIO and CFO were in place. A project will begin shortly to look at ERP system alternatives to address these issues so that the systems do not negatively impact the growth and operation of the Lab.

We are implementing "partner of choice" within the Operations directorate so we can confidently ask other directorates to support centrally-managed, field-deployed services such as financial analysts, IT support and web development. In addition, five work groups have been formed (led by Operations senior managers) to develop concrete plans to improve budgeting, governance and other organizational issues to ensure that we more effectively "deliver and govern efficient, effective, and responsive business systems" to the Lab.

**Objective 6.1****PERFORMANCE SUMMARY**

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- New financial leadership is in place and actively reviewing financial architecture, organization, systems, processes and data.
- Process and control improvement projects have commenced – initial emphasis on funds flow, travel, and payroll.
- Financial Transition Project launched to support activity-based costing and budgeting for the new highly matrixed Lab structure (formation of the Accelerator Directorate), specifically:
  - Well-defined financial attributes consistently applied.
  - Alignment with data elements in accounting system for planning and reporting.
  - Useful tools and processes for managing funds, costs, commitments, and resources.
  - Application over multiple years.
  - Flexibility for updates and what-if forecasting.
- New Chief Information Officer in place to advance financial systems development project.

**NOTEWORTHY PRACTICES**

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- Use of Financial Transition Project taskforce consisting of top financial people from across the Lab to define financial architecture.

**OPPORTUNITIES FOR IMPROVEMENT**

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- The new CFO is assessing the organization, staffing, processes and systems and is creating a financial organization and architecture to support the accounting, budgeting, financial reporting and business needs of a multi-program Lab, including:
  - Strengthening the Office of the CFO.
  - Building a strong, centrally-managed business management staff.
  - Defining an appropriate model for roles and responsibilities.

This work has been identified as a significant goal for FY10.

- The CIO and CFO are assessing options for migration/upgrade of the Labs ERP and financial reporting systems.
- There is not yet a clear prioritization of the tactics needed to implement a centrally-managed and field-deployed service organization. This results in lack of standardized practices throughout SLAC, too frequent policy breaches, and loss of economy of scale.

**Objective 6.2****PERFORMANCE SUMMARY**

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- The Acquisitions Management System continues to improve its processes and overall support to the SLAC community.
- New AMS Director has been hired effective September 28, 2009.
- Contract file organization, structure and quality improvements have been made.
- 120 of 126 action items from October 1, 2008 have been completed with the balance to be completed within 45 days.
- Leadership, organization structure, personnel changes, staffing capability upgrades, and policy improvements have occurred in this year with the hiring of five additional staff members.
- Advanced procurement plans, contract administration plans and payment tracking logs have been implemented in each and every required subcontract.

- Successfully hired additional qualified personnel in OCFO.

**NOTEWORTHY PRACTICES**

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- Approval of procurement description.
- Development of desktop procedures.
- Additional on-site training for Procurement personnel.
- Procurement authority increased.

**OPPORTUNITIES FOR IMPROVEMENT**

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- Provide customer and central procurement staff education.
- Seek improvement in the PeopleSoft procurement system.
- Seek to award of additional B2B subcontracts.

**Objective 6.3**

**PERFORMANCE SUMMARY**

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- Property Management has updated procedures in place.
- All corrective action has been resolved.

**NOTEWORTHY PRACTICES**

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- Implemented zero tolerance on purchase card holders not meeting the 72 hour marking criteria.
- Updated the laptop brochure and the salvage form.
- Automated the property custodian emailing.

**OPPORTUNITIES FOR IMPROVEMENT**

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- NA

**Objective 6.4**

**PERFORMANCE SUMMARY**

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- SLACs HR Management System and Diversity program function is responsive to the Labs needs, but labors under inadequate technical applications that, if improved, could greatly improve customer service.
- HR implemented pro-active steps to improve performance management, realigned staff to add recruiting resources, and started human capital planning.

**NOTEWORTHY PRACTICES**

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- Critical human asset identification has been initiated with enhanced recruiting and retention practices applied for such critical staff.
- External study validated compensation practices.
- Integrated diversity planning into each directorate.
- Implemented results-based (management by objectives) performance evaluation program.
- Higher level of accountability applied to corrective actions.
- Achieving dividends from additional recruiting staff.

**OPPORTUNITIES FOR IMPROVEMENT**

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- Better define objectives and measurements of SLACs workforce development program and integrate diversity into the fabric of the Lab culture.

- Alignment of objectives that supports the One Lab concept.
- Improve electronic and web systems for recruiting, performance management, time-keeping and manager access to non-protected personnel data of their staff.
- Support for management in optimizing staff.
- Re-structure HR to better align with current Lab needs.

### **Objective 6.5**

#### **PERFORMANCE SUMMARY**

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- From audits conducted in FY09, SLAC received numerous recommendations for improvement, which are being tracked and implemented.
- Through August 31, 2009, SLAC received no material findings under these audits/reviews of SLAC internal controls and oversight.

#### **NOTEWORTHY PRACTICES**

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- NA

#### **OPPORTUNITIES FOR IMPROVEMENT**

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- OCFO FY10 goal to implement effective financial accounting control system.
- OCFO is establishing positions and job descriptions for an enhanced financial organization.

### **Objective 6.6**

#### **PERFORMANCE SUMMARY**

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- SLAC met its target of five or more newly executed collaborative technology transfer projects (P-345, P-338, P-346, P-337, P-331), with four more currently under negotiation.
- SLAC has, over each quarter, maintained a steady level of invention evaluation and protection activity (disclosures, provisional filings, patent applications, and licensing efforts) that follows historical throughput. Intellectual property management performance is average.

#### **NOTEWORTHY PRACTICES**

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- NA

#### **OPPORTUNITIES FOR IMPROVEMENT**

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- NA

## Goal 7

Element	Grade	Number	Weight	Score	Total	
7	Sustain Excellence in Operating, Maintaining, and Renewing the Facility and Infrastructure Portfolio to Meet Lab Needs (Goal Weight: 15%)					
7.1	C	1.8	50%	0.90		
7.2	C	2.0	50%	1.00		
Performance Goal 7 Total					C / 1.90	

This goal has two objectives and six measures/targets.

SLAC is sustaining excellence in operating and maintaining the Facility and Infrastructure Portfolio. There are some capability gaps in managing and executing Facility and Infrastructure Renewal Projects. Cooling Tower 101 Project has experienced difficulties and the RSB Project has does not yet have CD-1 approval. An integrated Mission Readiness Program has been implemented to identify and prioritize the mission infrastructure needs.

SLAC's computer network, datacenter and telephone systems have performed well over the past several decades, however the aging infrastructure **must** be upgraded or replaced as soon possible since many components are at end-of-life, are beginning to fail, and outages will impact operations.

### Objective 7.1

#### PERFORMANCE SUMMARY

- The number of completed condition assessments exceeded goals.
- Facility renewal projects are almost 100% complete, even though delayed due to the continuing resolution.
- Much progress has been made toward accomplishing the short term goals of the TEAM initiative in a challenging funding environment.

#### NOTEWORTHY PRACTICES

- Site cleanup and maintenance has significantly improved and exceeded goals.

#### OPPORTUNITIES FOR IMPROVEMENT

- Fully develop and implement an integrated project prioritization process.
- Close project management capability gaps.
- The quality and quantity of project managers is insufficient.
- Many minor facilities projects are not completed either in scope, time or budget.
- Much of SLAC's general purpose facilities, including IT infrastructure, is not able to sustain the forecasted mission.

### Objective 7.2

#### PERFORMANCE SUMMARY

- A Lab Agenda was translated into action through the Facilities Department Business Plan, which describes the objectives and deliverables that provide planning for acquisition of facilities and infrastructure to support current and future Lab programs.
- The effectiveness of this effort is validated through the Mission Readiness Program, which describes the set of processes that identify and prioritize the Lab infrastructure needs and provides for the planning, execution and delivery of the structures, systems and components to support research.

- A capability gap exists in project management.

**NOTEWORTHY PRACTICES**

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- Integration of the Lab Agenda all the way through individual R2A2s.

**OPPORTUNITIES FOR IMPROVEMENT**

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- Fully develop and implement an integrated project prioritization process.

## Goal 8

Element	Grade	Number	Weight	Score	Total	
8	Sustain and Enhance the Effectiveness of Integrated Safeguards and Security Management (ISSM) and Emergency Management Systems (Goal Weight: 10%)					
8.1	B	2.8	30%	0.84		
8.2	B+	3.2	40%	1.28		
8.3	A	3.9	10%	0.39		
8.4	B+	3.1	20%	0.62		
Performance Goal 8 Total					B+ / 3.13	

This goal has four objectives and nine measures/targets.

In emergency management, the Lab established its new Emergency Response Organization (ERO) with comprehensive training to all key staff, including senior management, and testing of the ERO in August 2009 through a multi-agency exercise.

Cyber Security has provided an efficient and effective system. Technical elements of the security program performed consistent with expectations and demonstratively prevented significant compromise of site systems. When incidents occurred, they were successfully contained and reported within required timeframes.

We also continued our effective system of protecting special nuclear material (SNM) in FY09 with implementation of a radioactive material reduction plan, including the transfer out of the seven highest priority sources (accounting for 143.4 curies). All inventories, reports, and renewals were completed and submitted on time and radiological work authorization renewals and retraining were completed, as required.

In July 2009 SLAC experienced a significant act of vandalism that resulted in the loss of \$500,000 worth of science effort. SLAC responded quickly and professionally and engaged with local and federal authorities to bring the investigation to a quick conclusion. SLAC is using this event to learn and improve on security and access improvements.

### Objective 8.1

#### PERFORMANCE SUMMARY

- SLAC established its new ERO, consisting of field Emergency Response Team (ERT), Emergency Operations Center (EOC), and Recovery Management Team (RMT), including training of key personnel and documentation and testing of operating guides.
- An initial EOC activation exercise was conducted in February 2009 in conjunction with Stanford University's disaster exercise.
- SLAC successfully tested its entire integrated ERO in August 2009 with a full-scale, realistic, disaster scenario involving an active shooter/hostage situation.
- SLAC completed its first Emergency Planning Hazard Assessment (EPHA) for the plating operation (B025) and will be completing the corresponding implementation plan (EPIP) for that operation in September 2009.
- SLAC Security also successfully responded to and managed several emergency and security related incidents:
  - A severe vehicle accident at the Sand Hill Gate;
  - Two union-led demonstrations;

- A significant vandalism event affecting SSRL. Rapid action and interaction with local and federal law enforcement led to the successful apprehension of a suspect a week after the vandalism event.

**NOTEWORTHY PRACTICES**

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- NA

**OPPORTUNITIES FOR IMPROVEMENT**

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- The exercises in 2009 were well done and tested the system in a comprehensive manner. As expected, some key items were identified for improvement including communication (equipment and process such as building management, staff, subs, etc.) and site evacuation planning.

**Objective 8.2****PERFORMANCE SUMMARY**

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- SLAC management has evaluated the Cyber Security safeguards that are in place and has used a risk-based approach to balance investment in additional IT security personnel, software, and resources with the corresponding reduced investment in science.
- The POA&M continues to be effective.
- The Cyber-Security Basics CBT course has been added to the existing training management system and added as a mandatory requirement for all computer account holders within 30 days of getting the account. As of September 1, 2009 100% of SLAC staff computer account holders completed the required basic computer security awareness course
- The Red Team exercise in December 2008 did not highlight any unknown or significant systemic deficiencies and is evidence of the strides the Cyber Security program has taken in FY09.
- While there is recognition that the program and technical capabilities need to continue to evolve in the face of the changing threat and Lab environment, there were no new findings or significant deficiencies determined.
- Expanded use of routerblock and “suspend” capabilities have decreased time to containment for detected incidents.

**NOTEWORTHY PRACTICES**

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- NA

**OPPORTUNITIES FOR IMPROVEMENT**

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- We expect some significant changes and expansions in our requirements with the revised SC PCSP.
- We will likely expand the number of POA&Ms to be managed. The PCSP collaborative between SC and various Lab representatives seems to be moving in a positive direction building in clearer requirements and program flexibility that is more consistent with our science mission.
- Planned capability improvements should improve our ability to discover potential incidents but this will introduce increased operational workload. We are expecting to regain some effort in efficiency with improved third party patching, cleaner configuration baselines, and better audit and log analysis.

**Objective 8.3****PERFORMANCE SUMMARY**

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- Performance in this measure far exceeded the milestones, not only in meeting specific target dates, but in its implementation.

- The two year plan was developed, submitted, approved, and implemented in advance of the target milestone dates.
- Successfully negotiated and managed the transfer of the seven highest priority sources, which accounted for 143.4 curies (99.4%) of the total planned disposal activity, to LANL under the Off-site Source Recovery Program (OSRP) in the first and second quarter of FY09. Disposal of these seven sources significantly reduced the SLAC SNM inventory.
- Negotiated a return to manufacturer agreement and successfully returned 28 sources (43.1e-6 curies) to Isotope Products Laboratories.
- Shipped 575 cubic feet of low level and mixed waste.
- Listing radioactive materials in the DOE excess database (once determined to be unneeded for the Lab mission and prior to declaring as waste) demonstrates SLACs commitment to waste minimization.
- Encouraging leasing sealed sources from manufacturers to reduce the number of sources at SLAC.
- Started search for commercial outlets for re-use of sealed sources.

**NOTEWORTHY PRACTICES**

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- NA

**OPPORTUNITIES FOR IMPROVEMENT**

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- A systematic and scheduled evaluation of stored materials to determine their continued usability would help to reduce excess materials on site.

**Objective 8.4**

**PERFORMANCE SUMMARY**

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- There were no instances of a release of sensitive information during FY09.
- SLAC continues to make progress in securing personal information with enhanced security controls.

**NOTEWORTHY PRACTICES**

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- NA

**OPPORTUNITIES FOR IMPROVEMENT**

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- NA