



Audit of the Defense Nuclear Facilities Safety Board's Review Agendas

**OIG-DNFSB-25-A-04
August 1, 2025**



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MEMORANDUM

DATE: August 1, 2025

TO: Mary J. Buhler
Executive Director of Operations

FROM: Hruta Virkar, CPA /**RA**/
Assistant Inspector General for Audits & Evaluations

SUBJECT: AUDIT OF THE DEFENSE NUCLEAR FACILITIES SAFETY
BOARD'S REVIEW AGENDAS (OIG-DNFSB-25-A-04)

Attached is the Office of the Inspector General's (OIG) audit report titled: *Audit of the Defense Nuclear Facilities Safety Board's Review Agendas*.

The report presents the results of the subject audit. Following the June 26, 2025, exit conference, agency staff indicated that they had no formal comments for inclusion in this report.

Please provide information on actions taken or planned on each of the recommendations within 30 days of the date of this memorandum.

We appreciate the cooperation extended to us by members of your staff during the audit. If you have any questions or comments about our report, please contact me at 301.415.1982 or Avinash Jaigobind, Team Leader, at 301.415.5402.

Attachment:
As stated

cc: K. Herrera, DEDO
J. Biggins, DEDRS
G. Garvin, DEDRS



Results in Brief

Why We Did This Review

DNFSB technical staff perform reviews of Department of Energy (DOE) standards and other documents related to matters such as facility design, operations, and construction. These reviews help inform whether DOE, its contractors, and its sub-contractors are adequately implementing applicable laws, regulations, directives, DOE technical standards, and national consensus standards.

Review Agendas are developed and used to perform reviews by DNFSB headquarters technical staff. Each Review Agenda includes a specific subject, proposed start date, objective, scope, a listing of the items to be discussed, and the lines of inquiry. In addition, a standard Review Agenda includes the names of the review participants and the technical aspects to be reviewed. The details of the Review Agenda are tailored to each review's scope. Review Agendas are developed and implemented in accordance with DNFSB-developed guidance.

The audit objective was to determine the DNFSB's effectiveness in developing and applying its Review Agendas.

Audit of the Defense Nuclear Facilities Safety Board's Review Agendas

OIG-DNFSB-25-A-04

August 1, 2025

What We Found

The Defense Nuclear Facilities Safety Board's (DNFSB) Review Agenda process leads to detailed agendas and effective reviews of the Department of Energy's facilities; however, opportunities exist to improve the Review Agenda process. The OIG found approximately half of the DNFSB's planned Review Agendas for Fiscal Years 2019 through 2024 were carryovers from prior years. Some of these carryover reviews were delayed, and in those cases, justifications for delays were not consistently recorded. Moreover, the OIG found that the DNFSB does not have a structured Knowledge Management Program, and DNFSB Review Agenda guidance is not aligned with its current process.

What We Recommend

The Office of the Inspector General (OIG) makes three recommendations to update and improve the agency's Review Agenda process.

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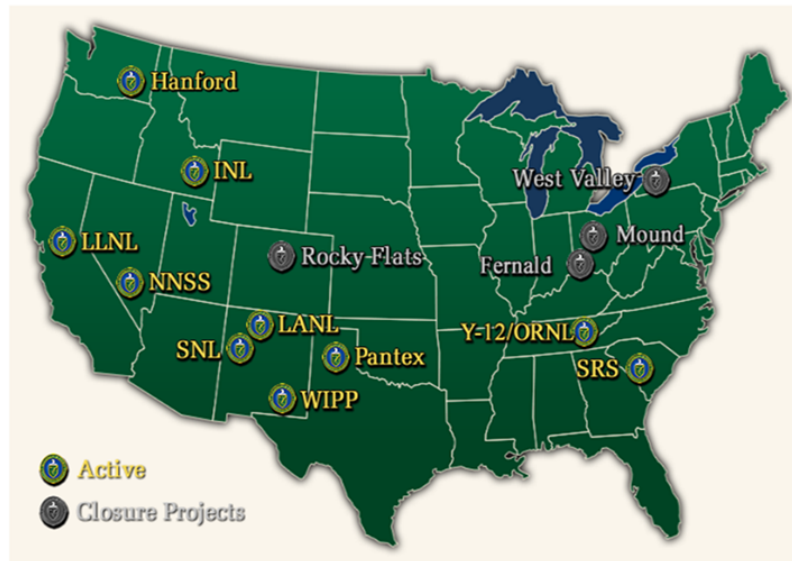
ABBREVIATIONS AND ACRONYMS

DNFSB	Defense Nuclear Facilities Safety Board
DOE	Department of Energy
FY	Fiscal Year
GAO	Government Accountability Office
LOI	Line of Inquiry
OIG	Office of the Inspector General
OP	Operating Procedure
OTD	Office of the Technical Director

I. BACKGROUND

The DNFSB is an independent organization within the executive branch responsible for providing recommendations and advice to the President and the Secretary of Energy regarding public health and safety issues at the DOE's defense nuclear facilities. The DNFSB reviews and evaluates the content and implementation of health and safety standards, as well as other requirements applying to the DOE's defense nuclear facilities.

Figure 1: DOE Facilities Subject to DNFSB Oversight¹



Source: DNFSB

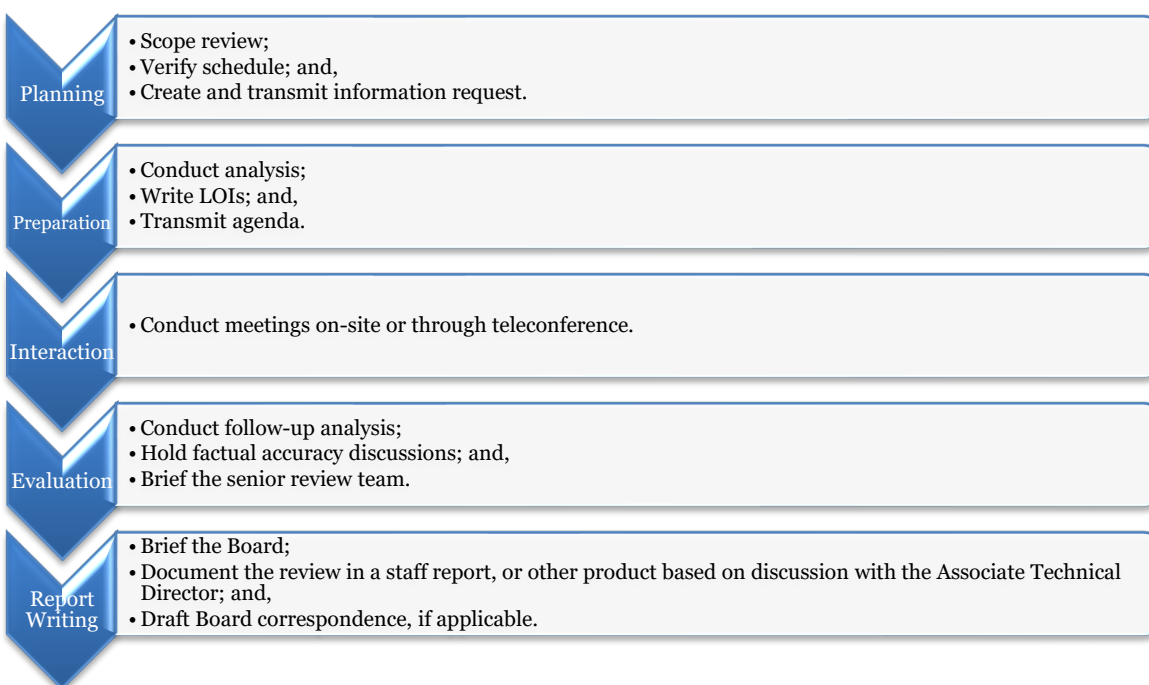
The DNFSB's headquarters is in Washington, D.C. As of May 2, 2024, the DNFSB is supported by a total of 110 staff, of which 71 hold technical positions. Of the 71 technical staff, 11 are assigned as resident inspectors at DOE facilities and are responsible for monitoring the day-to-day activities at those facilities. The remaining technical staff are assigned to DNFSB headquarters, where they are responsible for reviewing specific technical issues at the direction of the Board's Acting Chairman. The technical reviews are conducted onsite or as desk reviews at all active DOE facilities. During these technical reviews, the DNFSB's staff may identify instances where the DOE facility's procedures are inconsistent with DOE directives and need to be corrected.

¹ In general, closure projects are not subject to DNFSB headquarters staff reviews.

Review Agenda Process Overview

A Review Agenda is the roadmap that guides the development and implementation of a review that takes place in phases, as illustrated in Figure 2. The details of the Review Agenda are tailored to the scope of each review. The process by which a Review Agenda is developed and implemented is described in DNFSB-developed guidance. A Review Agenda shall have a descriptive subject, a proposed start date, an objective, a scope, and the names of the review team members. In addition, it should include the technical aspects to be reviewed, as well as the Lines of Inquiry (LOIs).² Figure 2 represents the review process to include the development of the Review Agenda process.

Figure 2: Review Process – Phases



Source: DNFSB information flow chart, as simplified by the OIG

The Review Agenda process consists of both a development phase and an implementation phase. The process is applied by the headquarters technical staff performing reviews of DOE standards, design and operational data, facility design and construction data, and related documents to inform the Board of its findings.

² LOIs are developed by members of the review team. They are typically questions that require interaction with DOE or contracting staff. They are developed and submitted to the Lead Reviewer, who compiles and submits the agenda for approval by the cognizant Associate Technical Director before being passed to the DOE.

The Board independently uses the information to determine whether DOE facility staff, contractors, and sub-contractors are ensuring adequate protection of public health and safety.

Review Agenda Development

Development of a Review Agenda is the responsibility of the DNFSB's technical staff and is done after the DNFSB approves the fiscal year (FY) work plan. The DNFSB Office of the Technical Director (OTD) convenes a team of specialized technical staff to conduct the review. The staff member designated to lead the team, known as the Review Lead, is responsible for the development and implementation of the Review Agenda. Resident inspectors may provide input and participate in these reviews as needed; however, their primary responsibility is to focus on routine on-site activities. Development of a Review Agenda begins with the DNFSB technical staff reviewers' requests for information from DOE personnel. These formal requests for documents are submitted to the DOE site. A Review Agenda can be as short as 2 to 10 pages, but is typically 30 to 70 pages, although the length of the agenda depends on the complexity of the review and other factors. Once the technical details and LOIs for the Review Agenda are established, and the review team concurs, the Review Agenda is approved by one of the DNFSB Associate Technical Directors then submitted to DOE for scheduling.

Review Agenda Implementation

The DNFSB staff can conduct two types of reviews--desk reviews, where DNFSB reviewers verify that the DOE facility's technical documents align with DOE standards or on-site reviews, where DNFSB reviewers visit the site in addition to reviewing applicable documentation. On-site reviews include the observation of site operations by the DNFSB reviewers as well as meeting with applicable DOE and contractor staff to discuss the review. Upon completion of reviews, the DNFSB reviewer sends the DOE site a memorandum summarizing the results of the review. The DOE may take action to address potential issues, as needed.

Regulations and Guidance

Federal Regulations

The DNFSB is governed by federal regulations and guidance that help the agency provide recommendations and advice, concerning safety issues at DOE defense nuclear facilities, to the President and the Secretary of Energy. These activities are implemented under the auspices of the Atomic Energy Act of 1954, as amended. The

Atomic Energy Act mandates that the DNFSB review the content and implementation of DOE standards relating to the design, construction, operation, and decommissioning of DOE's defense nuclear facilities. The *Enabling Statute of the Defense Nuclear Facilities Safety Board*—delineates the Board's mission, membership, and responsibilities, among other items.

DNFSB Guidance

To fully develop and implement the Review Agenda process, reviewers follow the guidance detailed in Operating Procedure 530.1-3, *Developing Agendas for Technical Staff Reviews*, which outlines the development and approval of Review Agendas and describes the process and expectations for the technical staff. Implementing Review Agendas is detailed as part of Instruction 530.1, *Execution of Technical Staff Reviews*. The purpose of this instruction is to ensure that review activities performed by technical staff members result in objective, accurate, and timely information to support the Board's decisions. In addition, Instruction 530.1 describes the roles and responsibilities of all staff and management involved in executing Technical Staff Reviews. Lastly, Operating Procedure 530.1-1, *Planning and Executing Technical Staff Reviews*, describes the overall review process and expectations for the technical staff.

Responsible Offices

Office of the Technical Director (OTD): The OTD is comprised of the Board's technical staff, who support the Board by providing expertise regarding the design, construction, operation, and eventual decommissioning of defense nuclear facilities. The OTD is divided into five technical groups:

The Nuclear Materials Processing and Stabilization group's role is to perform independent and timely oversight that is intended to ensure the health and safety of the public are adequately protected as DOE disposes of excess radioactive materials, cleans up surplus defense nuclear facilities, and begins the operation of new facilities.

The Nuclear Facilities Infrastructure and Projects group is responsible for reviewing and evaluating the technical adequacy of complex processes and safety-related systems related to the infrastructure and projects within the DOE's defense nuclear facility complex. This includes research and development relating to the design of new or modification of existing defense nuclear facilities.

The Nuclear Weapon Programs group performs oversight of the safety of operations related to the maintenance of the nuclear weapons stockpile and weapons-related research, development, and testing.

The Nuclear Programs and Analysis group oversees the development, implementation, and maintenance of DOE regulations, requirements, and guidance for providing adequate protection of public health and safety at defense nuclear facilities, and safety programs at defense nuclear facilities. Additionally, the group is responsible for complex-wide programmatic review efforts addressing topics such as nuclear criticality safety, DOE oversight, and emergency engagement and review of DOE directives.

The Field Operations group consists of DNFSB resident inspectors who work on-site at DOE facilities. Unlike the technical staff from the other groups, resident inspectors do not have a principal role in headquarters reviews.

II. OBJECTIVE

The audit objective was to determine the DNFSB's effectiveness in developing and applying its Review Agendas.

III. FINDINGS

The DNFSB's Review Agenda process leads to detailed agendas and effective reviews; however, opportunities exist to improve the Review Agenda process by:

- Implementing a scheduling technique³ that establishes a timeliness metric and ensuring justifications for delays are consistently recorded;
- Developing and implementing a Knowledge Management⁴ program to systematically capture Review Agenda related topics in a centralized location; and,
- Updating the Review Agenda process guidance to ensure guidance documents are in alignment with the current Review Agenda process.

³ A scheduling technique is a system or method used for creating, tracking, and managing a schedule. Scheduling techniques can help improve efficiency and ensure projects are completed on time.

⁴ Knowledge Management is the process of identifying, organizing, storing, and disseminating information within an organization.

1. Approximately Half of DNFSB’s Planned Reviews for Fiscal Years 2019-2024 were Carryovers and Justifications for Delays were not Consistently Recorded

Approximately half of DNFSB’s planned Review Agendas in a fiscal year (2019-2024) were carryovers from prior years. Some of these carryover reviews were delayed, and in those cases, justifications for the delays in implementing the agendas were not consistently recorded. DNFSB management should implement a scheduling technique that establishes a timeliness metric to ensure the Review Agenda process facilitates timely reviews. DNFSB’s Review Agenda process guidance documents—Operating Procedure 530.1-3, Instruction 530.1, and Operating Procedure 530.1-1 (hereafter referred to as ‘Guidance’)—do not include a scheduling technique that establishes a timeliness metric to help staff and management assess, identify, and address process delays. The lack of a formalized scheduling technique could impede the efficiency of the Review Agenda process.

What Is Required

DNFSB Management Should Implement a Scheduling Technique for Processing Review Agendas

DNFSB management should implement a scheduling technique that establishes a timeliness metric to ensure the Review Agenda process facilitates timely reviews.

According to the Project Management Institute:⁵

Metrics need to be integrated into project life-cycle processes to support decision-making, project selection, and portfolio management and to guide product and process improvement. Metrics can serve as indicators of organizational project management maturity. Metrics help understand capabilities, so achievable plans for producing and delivering products and services can be developed. They also enable people to identify important events and trends, help separate problems, and opportunities. This can help provide better control of costs and schedules, reduce risks, improve quality, and ensure that objectives can be achieved.

⁵ Project Management Institute, *Using metrics to demonstrate the value of project management*, September 2000.

What We Found

Approximately Half of DNFSB’s Planned Reviews were Carryovers and Justifications for Delays were not Consistently Recorded

To obtain an accurate understanding of the time it takes the DNFSB to complete a Review, to include the associated Review Agenda, the OIG reviewed DNFSB’s Work Plans for FYs 2019 through 2024.⁶ The OIG found that half of all planned Reviews were carryovers from prior years. Some of these carryover reviews were delayed, and in those cases, justifications for delays were not consistently recorded.

Carryover Planned Review Agendas

The OIG analyzed DNFSB’s Work Plans for FYs 2019 through 2024 and concluded that planned Reviews were routinely carried over to the next fiscal year. Table 1 shows the number of carryovers, new reviews and completed reviews.

Table 1: Fiscal Years 2019-2024 Planned v. Completed Reviews

FY	Rollover from Previous FY	New Reviews	Total Planned	Completed
2019	61	54	115	67
2020	48	37	85	30
2021	55	64	119	66
2022	53	38	91	50
2023	41	44	85	44
2024	41	59	100	N/A

Source: OIG-Generated based on DNFSB’s fiscal years 2019 through 2024 Work Plans

Justifications for Delays in the Completion of Review Agendas were not Consistently Recorded

At the DNFSB, the Review Lead establishes a timeline for the Review Agenda development and implementation. The Review Lead is also responsible for recording, on the agency’s internal SharePoint site, the reason(s) why a Review Agenda is put on hold or delayed. However, the OIG found that justifications for delays were not consistently recorded on the agency’s internal SharePoint site.

⁶ FY 2024 Work Plan was not publicly available during this audit, so the OIG does not have the number of completed reviews for that year.

Why This Occurred

DNFSB Review Agenda Process Guidance does not Include a Scheduling Technique that Establishes a Metric for Timeliness

The DNFSB Work Plans for FYs 2019 through 2024 state, “Uncertainties that cause delays are largely tied to DOE schedule changes, emerging work activities, and the potential for technical staff reassignment and attrition.” However, the Review process guidance does not include a scheduling technique that establishes a timeliness metric to help DNFSB staff and management assess, identify, and address process delays when needed. Additionally, there is no requirement for staff to document why Review Agendas are delayed.

During the audit, DNFSB staff stated that delays in completing the Review Agenda processes were caused by both external and internal factors. For example, the DOE has 15 business days to provide unclassified information to the DNFSB, and for classified information, the DOE has 20 business days. However, if the DOE needs more than 15 or 20 business days, they will notify the DNFSB. Additionally, if the DOE is taking an exorbitant amount of time to provide unclassified or classified information to the DNFSB, the Review Agenda lead could involve the Associate Technical Director or the Office of General Counsel to intervene.

Internal delays sometimes occur when staff need more time than expected to review additional documents received from the DOE in response to Review Agenda LOIs. Additionally, as staff review the documents received from the DOE, they may experience “scope creep”⁷ and need to develop more LOIs to comply with DNFSB’s guidance. For example, the OIG interviewed 21 DNFSB staff members, including managers and resident inspectors. Of these, 6 (29 percent) reported that they routinely experience “scope creep” during the Review Agenda process. They explained that the scope of a review is sometimes expanded either during the development of the Review Agenda or during the actual review. This additional workload creates competing priorities and resource constraints, ultimately causing delays in processing Review Agendas.

⁷ According to the Project Management Institute, scope creep is adding additional features or functions of a new product, requirements, or work that is not authorized (i.e., beyond the agreed-upon scope).

Why This Is Important

Lack of a Scheduling Technique and Timeliness Metric Could Impede the Review Agenda and Overall Review Processes

A lack of a scheduling technique and timeliness metric could impede the Review Agenda and overall review processes.⁸ Conversely, a proper scheduling technique that prioritizes the reviews would allow staff to efficiently manage the Review Agenda process and plan for timely completion, allowing management to assess, identify, and address delays that could limit what the agency can accomplish in a given period of time.

Furthermore, while the agency cannot control delays caused by external factors such as waiting on the DOE to provide classified or unclassified information, it can address internal delays by implementing a scheduling technique that sets clear timelines for the Review Agenda process. In other words, the DNFSB needs to apply project management principles to its Review Agenda process. This approach would facilitate timely, high-quality reviews that effectively identify and analyze safety issues at DOE facilities.

Recommendation

The OIG recommends the DNFSB:

- 1.1 Update the Review Agenda guidance to include a scheduling technique and a timeliness metric.

2. The DNFSB does not Have a Structured Knowledge Management Program

DNFSB management should develop and implement a Knowledge Management program to capture best practices relating to Review Agendas in a central repository and promote learning to enable internal efficiencies. The DNFSB is not systematically capturing Review Agenda knowledge in a manner known to staff. This occurred because the DNFSB does not have a Knowledge Management program to systematically record the Review Agenda process information in a centralized

⁸ The DNFSB budget request for fiscal year 2024 was \$47,230,000. In fiscal year 2023, 41 agenda reviews were carried over from fiscal year 2022, with an additional 44 scheduled for a total of 85. At the conclusion of fiscal year 2023, 44 reviews were completed (per Table 1).

location. As a result, the DNFSB's Review Agenda process could be adversely affected.

What Is Required

DNFSB Management Should Develop and Implement a Review Agenda Knowledge Management Program

The Government Accountability Office has stated that Knowledge Management is the collection of methods relating to creating, sharing, using, and managing the knowledge and information of an organization.⁹

Additionally, the Knowledge Management Institute (Institute) provides Knowledge Management strategies that are used by industry and the federal government.¹⁰ According to the Institute, "To be truly successful in implementing effective Knowledge Management strategies, federal government departments and agencies need to be prepared to implement knowledge solutions that support change by (1) storing knowledge in a central repository, (2) providing secure access to support agents, employees or citizens, and (3) allowing easy access to the knowledge that's appropriate for each user community."

What We Found

The DNFSB is not Systematically Capturing Review Agenda Knowledge

The OIG analyzed 76 DNFSB Review Agendas to identify approaches used by DNFSB staff to develop and implement the phases of the Review Agenda process. Additionally, the OIG reviewed DNFSB's guidance, which provides a detailed approach to developing and implementing Review Agendas. The OIG found that information on how previous LOIs were developed by the DNFSB staff, how staff applied soft skills during reviews, and how DNFSB staff interacted with DOE staff, were not included in review guidance.¹¹

⁹ GAO Briefing to the National Science Foundation's International Conference, January 11, 2005, Washington DC.

¹⁰ The Institute is a prominent leader in Knowledge Management certification and training.

¹¹ DNFSB reviews consist of different activities, including document reviews, procedure reviews, and on-site observations and evaluations at various DOE locations, when necessary.

Training

To assess whether the DNFSB's training program adequately prepares staff to engage in the Review Agenda process, the OIG interviewed DNFSB and DOE staff and managers and reviewed different training modules and PowerPoint slides provided to new review team members and Review Leads. The OIG found that although the training materials briefed staff on the steps needed to develop and implement Review Agendas, the training modules and PowerPoint slides did not address Knowledge Management focus topics.

Additionally, staff and managers from both the DNFSB and the DOE noted that:

- New employees were sometimes unprepared for onsite reviews at DOE facilities and can take up to 50 percent longer to review documents and complete an onsite review compared to a team of experienced reviewers;
- Informal mentoring and on-the-job training are key parts of the Review Agenda process;
- To supplement staff training, only one technical group in the Associate Technical Director's office provided additional training lectures and discussed what needed to be done;
- A more unified approach to writing LOIs would be a great resource for new hires;
- Review Leads do not generally take a uniform approach to developing best practices for LOIs and the agendas; and,
- DNFSB training covers topics related to development and implementation of Review Agendas but does not cover Knowledge Management related topics.

Why This Occurred

The DNFSB Lacks a Formal Knowledge Management Program

The DNFSB does not have a formal Knowledge Management program to systematically record Review Agenda process information in a centralized location.

The DNFSB acknowledges that the agency does not have a formal Knowledge Management program. The agency's training does not fully address the Knowledge Management needs of all technical groups, and important information is shared informally on an ad-hoc basis. Additionally, the DNFSB lacks a formal, structured Knowledge Management directory for Knowledge-management related topics.

Currently, knowledge is managed through staff communications, routine knowledge sharing documented in the Review Agenda process guidance, and resources available on the agency's internal and public website.

Why This Is Important

The DNFSB's Review Agenda Process Could be Adversely Affected

Without a formal Knowledge Management program to systematically record and update review agenda process information and making it readily available in a centralized location, the DNFSB's Review and Review Agenda processes could potentially be less efficient and effective. For example, reviewers will spend additional time searching for information relevant to the Review Agenda process; responses to stakeholder requests for information could be delayed as staff would have to search for information in various locations rather than a centralized location; and, institutional knowledge may be lost as more experienced DNFSB staff depart from the agency. On the other hand, a Knowledge Management program could strengthen DNFSB's overall training practices.

Recommendation

The OIG recommends the DNFSB:

- 2.1 Develop and implement a Knowledge Management program to systematically record Review Agenda knowledge in a centralized location, to strengthen the overall training program.

3. DNFSB Review Agenda Guidance is not Aligned with the Agency's Process

Well-designed guidance documents serve many important or even critical functions in regulatory programs. However, the DNFSB's Review Agenda guidance is not aligned with the agency's current process. This occurred because the guidance for the DNFSB's revised Review Agenda process is incomplete. This could cause new DNFSB staff to implement the Review Agenda process incorrectly.

What Is Required

Well-Designed Guidance is Critical for Regulatory Programs

The Office of Management and Budget’s *Final Bulletin for Agency Good Guidance Practices* states that, “well-designed guidance documents serve many important or even critical functions in regulatory programs.” Additionally, as the scope and complexity of regulatory programs have grown, agencies increasingly have relied on guidance to inform the public and to provide direction to their staff. As the impact of guidance on the public grows, there is a greater need for good guidance practices—clear and consistent agency practices—for developing, issuing, and using guidance documents.

What We Found

DNFSB’s Review Agenda Guidance is not Aligned with the Current Process

In 2023, the DNFSB completed a self-assessment and identified corrective actions related to their current Review Agenda guidance. As a result of this assessment, the DNFSB staff recommended revisions to Operating Procedure 530.1-1, *Planning and Executing Technical Staff Reviews*, to align with the current Work Plan process. Specifically, the assessment recommended revising the development of overall review plans, defining scope and objectives, and accommodating significant changes in the review scope.

Additionally, in 2023, the DNFSB updated Operating Procedure 530.1-3, *Developing Agendas for Technical Staff Reviews*, proposing improvements to the technical staff review process, the process for developing scope and objectives, and timeliness. However, the proposed changes identified in the DNFSB self-assessment, which include development of review plans, defining scope and objectives, and accommodating significant changes in review scope, have yet to be fully implemented.

Why This Occurred

DNFSB's Revised Review Agenda Guidance is Incomplete

DNFSB management is unaware of any Review Agenda guidance revisions through Standing Orders¹² and staff needs more time to implement changes identified in the 2023 self-assessment.

According to the DNFSB, the agency could begin the guidance revision process by issuing interim guidance in the form of Standing Orders. However, no Standing Orders have been issued to supplement the Review Agenda process guidance. Furthermore, a DNFSB manager stated he was unaware of any Standing Orders relating to the Review Agenda process. Similarly, a senior staff member told the OIG they were aware of the needed corrective actions but have not had time to implement them.¹³

Why This Is Important

Guidance not Aligned with the Current Process Could Cause New Staff to Implement the Review Agenda Process Incorrectly

The DNFSB, in its 2023 self-assessment, determined the guidance is not aligned with the current process. Because of this, the OIG concluded that less experienced staff could potentially follow process steps that are not aligned with current procedures. Additionally, without proper alignment of guidance and process, the Review Agenda process activities could be negatively affected, leading to inefficient use of resources.

Recommendation

The OIG recommends the DNFSB:

- 3.1 Update Instruction 530.1, *Execution of Technical Staff Reviews*, and the associated Operating Procedures to align with the current Review Agenda process and correct the deficiencies noted in DNFSB's self-assessment.

¹² Standing Orders are issued by the DNFSB to supplement or clarify existing guidance.

¹³ The DNFSB published TDSO 2025-1 in December 2024. This document addresses the findings of the DNFSB's 2023 self-assessment, which addresses issues identified relating to Review Agenda improvements.

IV. CONSOLIDATED LIST OF RECOMMENDATIONS

The OIG recommends the DNFSB:

- 1.1 Update the Review Agenda guidance to include a scheduling technique and a timeliness metric.
- 2.1 Develop and implement a Knowledge Management program to systematically record Review Agenda knowledge in a centralized location, to strengthen the overall training program.
- 3.1 Update Instruction-530.1, *Execution of Technical Staff Reviews* and the associated Operating Procedures to align with the current Review Agenda process and correct the deficiencies noted in the DNFSB's self-assessment.

V. DNFSB COMMENTS

The OIG held an exit conference with the agency on June 26, 2025. Before the exit conference, agency management reviewed and provided comments on the discussion draft version of this report, and the OIG discussed these comments with the agency during the conference. Following the conference, agency management stated their general agreement with the findings and recommendations in this report and opted not to provide additional comments. The OIG has incorporated the agency's comments into this report, as appropriate.

OBJECTIVE, SCOPE, AND METHODOLOGY

Objective

The audit objective was to determine the DNFSB's effectiveness in developing and applying its Review Agendas.

Scope

This audit focused on the Review Agenda development and implementation process described in DNFSB guidance documents. The audit team reviewed the sufficiency of the process and means by which Review Agendas are developed and implemented. We conducted this performance audit at DNFSB headquarters (Washington, D.C.) and in Rockville, Maryland, from November 2023 to May 2024.

Internal controls related to the audit objective were reviewed and analyzed. Specifically, the OIG reviewed the components of the control environment, risk assessments, control activities, information and communication, and monitoring. Within those components, the OIG reviewed the principles of establishing structure, responsibility, and authority organizational structure; assigning responsibility and delegating authority to achieve the entity's objectives; and, designing control activities, including policies for achieving management objectives and responding to risks.

Methodology

The OIG reviewed relevant criteria for this audit, including, but not limited to:

- *Enabling Statute of the Defense Nuclear Safety Board*, 42 U.S.C. § 2286 *et seq.*;
- U.S. Government Accountability Office, *Standards for Internal Control in the Federal Government*;
- Instruction 530.1, *Execution of Technical Staff Reviews*;
- Operating Procedure 530.1-3, *Developing Agendas for Technical Staff Reviews*;
- Operating Procedure 530.1-1, *Planning and Executing Technical Staff Reviews*; and,
- DNFSB Training Materials (slide presentations).

The OIG interviewed 21 DNFSB staff members, including Senior Executive Service members and Resident Inspectors. In addition, the OIG interviewed 10 DOE facility points of contact involved with Review Agenda implementation aspects.

The audit team reached its conclusion by analyzing documents such as the guidance documents related to the development and implementation of the Review Agenda process. The team analyzed various data obtained from the DNFSB internal and public websites, DNFSB staff, and DOE sites' points of contact. In addition, the OIG calculated the number of days that elapsed from the date a DOE site received a Review Agenda, DNFSB transmitted the final report, and the total number of reviews carried forward into the next fiscal year, for the last 5 years. The team selected a non-probabilistic sample of reviews from the DNFSB work plan and calculated the review duration from initiation to completion.

During interviews with DNFSB staff, the audit team also verified different data entries made by staff in the DNFSB internal system as related to the development and implementation of Review Agendas to determine the accuracy and validity of the information provided during those interviews. The validity and accuracy of the information was confirmed. In addition, the OIG was provided with examples of how DNFSB's management tracks the various parts of the review and confirmed that the format was as described in the procedure.¹⁴

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Throughout the audit, auditors considered the possibility of fraud, waste, and abuse in the program.

The audit was conducted by Mike Blair, Team Leader; Avinash Jaigobind, Team Leader; Tim Wilson, Audit Manager; Roxana Hartsock, Audit Manager; and, Andy Hon, Senior Technical Advisor.

¹⁴ The Review Agenda procedure lists the sections such as scope and team members that reviewers must complete.

TO REPORT FRAUD, WASTE, OR ABUSE

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Office of the Inspector General
Hotline Program
Mail Stop O12-A12
11555 Rockville Pike
Rockville, Maryland 20852

COMMENTS AND SUGGESTIONS

If you wish to provide comments on this report, please email the OIG using this [link](#).

In addition, if you have suggestions for future OIG audits, please provide them using this [link](#).

NOTICE TO NON-GOVERNMENTAL ORGANIZATIONS AND BUSINESS ENTITIES SPECIFICALLY MENTIONED IN THIS REPORT

Section 5274 of the James M. Inhofe National Defense Authorization Act for Fiscal Year 2023, Pub. L. No. 117-263, amended the Inspector General Act of 1978 to require OIGs to notify certain entities of OIG reports. In particular, section 5274 requires that, if an OIG specifically identifies any non-governmental organization (NGO) or business entity (BE) in an audit or other non-investigative report, the OIG must notify the NGO or BE that it has 30 days from the date of the report's publication to review the report and, if it chooses, submit a written response that clarifies or provides additional context for each instance within the report in which the NGO or BE is specifically identified.

If you are an NGO or BE that has been specifically identified in this report and you believe you have not been otherwise notified of the report's availability, please be aware that under section 5274 such an NGO or BE may provide a written response to this report no later than 30 days from the report's publication date. Any response you provide will be appended to the published report as it appears on our public website, assuming your response is within the scope of section 5274. Please note, however, that the OIG may decline to append to the report any response, or portion of a response, that goes beyond the scope of the response provided for by section 5274. Additionally, the OIG will review each response to determine whether it should be redacted in accordance with applicable laws, rules, and policies before we post the response to our public website.

Please send any response via email using this [link](#). Questions regarding the opportunity to respond should also be directed to this same address.