BLI2018: CATS Database Tutorial

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In this Tutorial, you will learn:

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The Purpose of CATS

The CATS database (CATS) is an online tool that enables LBNL employees to document, track, and resolve issues and their associated corrective actions.

All issues and associated corrective actions, regardless of risk level and means of identification, are entered into CATS and tracked through resolution. This satisfies our DOE contract and LBNL policy requirements.
Entering an Issue & Associated Corrective Action

There are two ways to enter an issue and an associated corrective action(s) in CATS.

The “Add New Quick-Entry Issue” option is designed for Users who are unfamiliar with the database and/or employees who want to notify his/her Division Safety Coordinator of a problem that needs to be addressed. Once this entry is completed, your Division Safety Coordinator (or a designee) will receive a notification from the CATS Database to complete and route your entry for approval and resolution.

The “Add New Issue” option is the common method used to document a new issue and an associated corrective action(s) from start to finish, with no hand-off.
Add New Quick-Entry Issue

Use this screen to enter a new Quick Entry issue. When finished, click the Save button at the bottom of the screen to route to the

Fields marked with an * must be completed.

From the drop down menu select the Division that owns the issue and is responsible for overseeing the resolution of the issue.

Document the issue in sufficient detail so that it is clear what needs to be resolved.

Clearly identify the corrective action to address the issue.

For the drop down menu, select the Building and correlating room where the issue was identified or resides.

Click on the “Route” button to send the entry to your Division Safety Coordinator (or designee).
Add New Issue

Select the Issue Type from the drop down menu.

**Adverse Condition** are issues that are operational (e.g. financial, human resources, facilities) or safety-related deficiencies, which are identified through a formal assessment, and actual or near miss adverse events.

**Best Practices** are issues that are suggested process improvements or a division or management initiative.

**Ethics** *(A placeholder: not for use at this time.)*

**Worker Safety and Health** are safety and health-related issues, which are typically identified through safety walk-arounds, employee discovery, and actual or near miss adverse events.
This box (along with the superseded corrective action) is primarily used by the ORPS Coordinator and the Project Management Office. Most users will not check the “Superseded?” box.

1. Enter the “Discovery Date” by typing in the date that the issue was identified / discovered, or by clicking on the calendar symbol and selecting the appropriate date on the calendar.

2. If different from the “Entered By”, enter the person’s name that identified the issue by typing his/her last name in the “Initiator” field and selecting the appropriate name from the drop down menu.

3. Select the Division that owns the issue and is responsible for resolving the issue from the drop down menu in the “Division” field.

Note: Completion of the “Department” and “Program/Project” fields are optional.
Issues may be identified through several assessment mechanisms. Below is a brief discussion of the types of assessments.

**External Review** is performed by an external party independent of LBNL, for example a Berkeley Site Office or regulatory agency review.

**Internal Audit (Finance or Program/Process)** is performed by Internal Audit Services.

**Internal Independent Review** is performed by a LBNL organization independent of the assessed program management team and staff.

**Internal Self-Assessment** is performed by senior managers, line managers and staff responsible for the assessed area.

**Safety Walk-around** is performed by line management and/or a Program Manager to evaluate performance and adherence to established controls.

When an Assessment Type is selected, the “Assess. Title/No.” and “Find. Title/No.” fields are displayed. These fields require mandatory completion for the following Assessments (as denoted by the *): External Review, Internal Audit, and Internal Independent Review.

1. Select the appropriate Assessment Type from the drop down menu in the “Assess. Type” field.
2. Enter the Assessment Title and/or Number as documented on the cover of (or within) the Assessment Report.
3. Enter the Finding Title and/or Number as documented in the Assessment Report.

Entering the Issue Description and location information is the same as a Quick-Entry Issue.
Select the appropriate “Risk Level” in accordance with LBNL/PUB-5519(1) from the drop down menu. Below are examples of the issues that would fall into each risk level:

- **High:** Significant Adverse Condition (SAC) event, PAAA NTS-Reportable Incident, ORPS Category 1, R, or 2 Incident, Type A or B Accident or other significant issues as designated by management.
- **Medium:** Adverse Conditions, PAAA Internally-Reportable Incident, ORPS Category 3 Reportable Incident or other Issues as designated by management.
- **Low:** ORPS Category 4 Reportable Incident, or Worker Safety & Health Issues that do not fall into High or Medium Risk Levels.
- **De Minimis:** Issues where the level of risk is too small to be concerned with.

Select the appropriate “Issue Category” from the drop down menu. The issue category is a general description of how the issue would be classified or the area of the deficiency.

Enter the policy, procedure or standard reference that was not followed / adhered to in the “Criteria Not Met” field.

Select the appropriate “Trend Code” from the drop down menu. The trend code represents the apparent or root cause of the issue. A list of the Trend Codes can be found in the Help menu option in the CATS Database.

If applicable and known, check the “External Reporting or Significant Adverse Condition” box in accordance with LBNL/PUB-5519 (1). Generally, the PAAA or ORPS Coordinator or OCA will complete this section or provide the Enterer with guidance on how to complete this section.
Add a Corrective Action by clicking on the “Add” icon. Click on the “Add” icon to add additional corrective actions associated with an issue.

1. Upon display of Corrective Action screen, clearly identify the corrective action to be implemented to eliminate the issue and prevent recurrence (as applicable). The corrective action should be specific, measurable and reasonable.

2. Enter the appropriate “Due Date” for the corrective action by typing in the date, or clicking on the calendar symbol and selecting a realistic date on the calendar.

3. In the “Responsible Person” field, identify the appropriate person responsible for completing the corrective action item (or overseeing its resolution) by typing the last name and selecting the appropriate name from the drop down menu. The Cognizant Manager (CM) and Division will be entered automatically based on the Responsible Person.

4. If the Responsible Person is matrixed to a different organization and the CM is different than the one identified, type in the last name of the appropriate CM and select his/her name from the drop down menu in the “Alternate CM” field.
If a work request is required to complete this corrective action, click on the “Work Request Req’d?” checkbox. The due date for a corrective action with a work request must be at least 60 days from the date of entry.

If the work request is considered to be institutional work, click on the “Institutional WR?” checkbox. “Institutional” work requests are related to services, equipment or physical space that is not owned, managed or operated by a Division.

If the work request is not Institutional, skip the “Institutional WR?” checkbox, and type in the appropriate project ID number in the “Project ID” field.

Upload objective evidence of corrective action completion, by clicking on the “Browse” button to search for the document to be uploaded, select the document to be uploaded, and click the “Upload File” button AND/OR enter the URL address and click the “Add URL” button. Repeat if multiple documents and/or URLs are to be added.

In the “Comments” field, enter comments pertaining to the issue/corrective requirements, objective evidence and/or status in clear, concise statements, as applicable.

Subject Matter Experts are automatically added as Reviewers for Worker Safety and Health and Adverse Condition Issue Types. If additional Reviewers are needed, select the additional Reviewer by typing in the last name and selecting the appropriate name from the drop down menu. Click the “Add Reviewer” button.

Once all of the applicable fields have been completed and all applicable Reviewers have been identified, click the “Route” button to send to the Reviewers for approval.
Entering an Extension Request

Extension requests are only available for approved and “Open” status corrective actions and can be made by the Enterer or Responsible Person.

A justification for extending the original due date is required and must meet Lab policy, as detailed in LBNL/PUB 5519(1).

1. Identify the person requesting the extension by typing in the last name and selecting the appropriate name from the drop down menu in the “Extension Requested By” field.

2. Enter the new due date in the “Extension Due Date” field for the corrective action by typing in the date, or clicking on the calendar symbol and selecting the appropriate date on the calendar.

3. In the “Justification” field, type in the justification for the extension request.

4. If additional reviews are needed, identify the additional Reviewers by typing in the last name and selecting the appropriate name from the drop down menu, and then click the “Add Reviewer” button.

5. Click the “Route” button to route to the Reviewer(s) for approval of the extension request.
Entering a Completion Date

Once the objective evidence is verified, the Responsible Person retrieves the applicable corrective action by selecting the “My Corrective Actions” option or “Search Corrective Actions” option on the Menu.

From the list of corrective actions, click on the corresponding “View” to open the applicable corrective action.

Once all corrective actions associated with an issue are completed, the issue and associated corrective action(s) have a “Closed” status.

Corrective actions associated with a Work Request will be closed automatically when the work order is closed in Maximo.

Enter the “Completed Date” for the corrective action by typing in the actual completion date, or clicking on the calendar symbol and selecting the appropriate date on the calendar.
Search Options

There are various ways to search for information specific to issues and corrective actions. Multiple choices may be made in drop-down boxes by holding the “Ctrl” button down and selecting the options desired.

An “Enterer” may view and edit issues and associated corrective actions that he/she has entered by selecting the “My Issues (not closed)” menu option.

This search focuses on information specific to an issue, using selected fields. In addition, use this search option to find out other information, such as all of the issues owned by a Division, all issues by Issue Category and all issues by risk level.

A “Responsible Person” may access his/her open issues and corrective actions by clicking on the link provided in the automatic email notification OR by selecting the “My Corrective Action (not completed)” menu option.

This search focuses on information specific to a corrective action, using selected fields. In addition, use this search option to find out other information, such as all of the corrective actions: by Division, Responsible Person, issue type, risk level or corrective actions with work orders.
There are a number of reports available via the CATS Database to use to manage the implementation / completion of corrective actions by Division and/or Responsible Person.

- This report is a Pie Chart that shows the completion of your corrective actions.
- This report is a Pie Chart that shows the status of corrective actions implementation by Divisions and responsible parties.
- This report is a Pie Chart that shows the status of your overdue corrective actions, as well as corrective actions that are coming due within 30, 60, 90 days, and greater than 90 days.
- This report is a Pie Chart showing the status of overdue corrective actions by Division, Department and/or Responsible Person, as well as corrective actions due within 30, 60, 90 days, and greater than 90 days.
Resources

The CATS Database is managed by the LBNL Office of Contractor Assurance (OCA) and maintained by the LBNL IT Division.

Users may contact OCA for guidance on how to complete the fields in the database or request guidance on database protocol via this email address.

The Help option on the CATS Database Menu page also contains additional resources.