

Process Description: Documents Management Process

Number: 10.06.001.001

Revision 2.0

Effective Date: 11/1/2022

1. Purpose

This document describes the process for managing institutional documents, which include policies and procedures, at Lawrence Berkeley National Laboratory (LBNL). It flows from the Laboratory's policy on document management, and provides a systematic approach to ensuring that LBNL staff has access to current, reliable, and concise information, so that work can be performed in a safe, efficient, and compliant manner.

2. Applicability

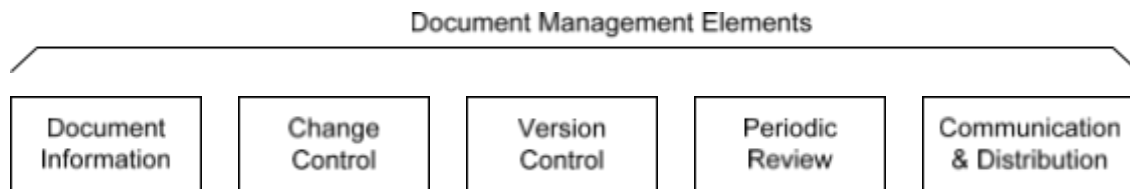
This process applies to people who develop, write, review, approve, and maintain institutional documents.

2.1 Exceptions

This process does not apply to scientific or technical publications. See Scientific and Technical Publications Requirements in the Requirements and Policies Manual (RPM).

3. Process Description

The process for document management is comprised of five main elements: document information, change control, version control, periodic review, and communication/distribution. This process, therefore, sets forth definitions and steps required to develop, organize, store, and retrieve institutional documents at LBNL.



3.1 Document Information

To enable control, certain information about the document is required. Such information includes standardization of document types, numbering and format.

3.1.1 Document Formats

Documents are developed using standard formats for each of the institutional document types. The list of templates for institutional documents can be found in Section 6.2. Sections common to all institutional documents should include: purpose or scope, persons affected or applicability, roles and responsibilities, source requirements references, implementing document references, contact information, revision history.

3.1.2 Document Numbering Convention

For institutional policies, document numbers are comprised of four fields separated by periods, and a version suffix separated by a hyphen: XX.YY.ZZZ.AAA-BB, where

XX is a two-digit number reflecting the Requirements and Policies Manual (RPM) Section

YY is a two-digit number reflecting the Policy Area

ZZZ is a three-digit number reflecting the policy number

AAA is a three-digit number reflecting the supporting or implementing document number.

BB is a two-digit number reflecting the revision number.

Institutional documents that are directly related to policies should carry a number that shows the policy root. Institutional documents already assigned LBNL Publication document numbers retain those numbers, and may be assigned a second number per the convention cited above for database tracking purposes.

3.1.3 Document Dating Conventions

The published version of every policy document carries three dates: the “effective date”, the “publication date”, and the “next review date”. The “publication date” refers to the date on which the particular revision of a document is published, or made available, to end users. The “effective date” is often the same as the original publication date, unless the document has been significantly changed, in which case the effective date may be the same as a particular publication date. The “next review date” refers to the next time the document is to be formally reviewed for possible revision (see Section 3.4 of this process document). A “last reviewed date” may be used instead of “next review”.

3.1.4 Revision History Convention

A revision history is required for each institutional document. A revision history table is one section of the document, and minimally includes a listing of the associated revisions, revision dates, who made the modification, and a brief summary of the changes made.

3.1.5 Record of Approvals

When required, approval signatures are to be collected on a Policy Approvals Form (document number 10.06.001.203) and should contain institutional document’s identifying information (document title, number, revision, issue date, as might be found in the header and footer). Email chain or an online approvals method, such as HelloSign may also be accepted for institutional documents.

3.2 Change control

Change control helps to ensure that all documents are reviewed for technical accuracy and ease of use. Change control comprises all steps related to changing a document, including introduction of a new document or retirement of a document. Documents are tracked and monitored through development, review, approval, and distribution. This is detailed in *Developing, Reviewing, Approving Institutional Policy Documents* (document number 10.06.001.102).

3.2.1 Change types

The type of change defines the level of review and approval. Table 1 describes the types of changes and the associated levels of review. For major changes, approvals may be further graded based on a significance rating, which is determined from an impact and risk analysis (see *Determining Significance Rating*, document number 04.04.001.206).

Type of Change	Definition	Review/Approval authority
Major Change	Includes the addition of a new institutional document, the retirement of an obsolete document, or revision to an existing document that significantly changes its meaning, requirements, responsibilities or method of implementation, or is an extensive rewrite of an existing document. May have a high impact on other institutional documents.	Varies depending on the type of document. See Appendix A.
Major Change/30 Day Notice [Specific to HR policies]	Major change to HR policy that affects employment terms and conditions. - 30 day comment period starts with policy notice announced in Elements	Chief Operating Officer (or designee) Chief HR Officer Legal
Minor Change	A change that makes no substantial alteration in requirements or responsibilities, in the judgment of the Sr. Line Manager and/or Policy Area Manager.	Responsible RMC representative, or Line manager
Editorial change	- Typos, format, grammar, - updating hyperlinks, doc number changes - Editing text to clarify or be consistent with existing requirements within the document and/or with other institutional documents	Responsible RMC representative, or Policy Owner

3.2.2 Comment resolution

Reviewer comments and associated dispositions should be formally recorded and reconciled. Often a Word version of the document with track changes and comments may serve as one forum for capturing comments. When submitting a policy change request, a Word document with track changes must be submitted with other applicable forms.

3.3 Version control

Version control covers the distribution and availability of the right version of a document to users. This process element includes uploading and storing in a repository, versioning, retrieval, and archiving. In keeping with LBNL's *Quality Assurance Program Description*, PUB 3111, and its quality assurance (QA) policy, LBNL institutional documents are expected to be stored with controlled access so as to prevent unauthorized changes. In keeping with LBNL archival requirements and QA recordkeeping policy, previous versions may need to be retained for legal and archival purposes, and therefore are to be suitably labeled, stored, and protected. The Sr. Line Manager with the function's policy SME(s) has responsibility to identify the specific Policy Area documents that fall under LBNL archival requirements. These selected documents are to be treated per Procedure #10.06.001.103, *Storing, Retrieving, and Archiving Institutional Documents*. The RPM falls under LBNL archive requirements and a copy of record is created every year.

3.3.1 Repository for controlled documents

The RPM resides in an application that includes version tracking, and hence in itself can satisfy the requirement for a controlled repository.

Note that potential technologies for repositories will change over time, and alternatives should be assessed every three years or so.

3.3.2 Web postings and web communication of information

On-line web-based communications are the most common method of enabling access to information contained within institutional documents. Web postings are considered “documents” (see Definitions, Section 5) and if any portions of the contents of such postings are considered institutional documents, then by Lab policy such web postings are subject to this document management process. Web postings, providing general users with access to policies and implementing documents, should link to the active master copies within the repository. Policy or requirements information for departmental, functional, and policy area web pages must be derived from the active master set. Web pages must not be used to introduce new or revised policy, but may cite or link to the appropriate page(s) of the Laboratory’s policy manual. Policy or requirements information not drawn directly from the active master set is considered uncontrolled.

The responsible functional Sr. Line manager has responsibility for ensuring currency and accuracy of the web postings and pages. To help keep track of where policy or requirement information has been duplicated, web pages may be included in the reference listing of implementing documents.

3.4 Periodic Review

Institutional documents, after first publication, are to be reviewed periodically to ensure alignment with contract requirements, LBNL policies and implementing documents and practices. Such reviews should occur at a frequency determined by the risk-based approach (see Updating the RPM (document number 10.06.001.104)). The review of an institutional document is initiated by a responsible SME, the RMC representative, and/or the Senior Line Manager, and has the main purpose of determining whether the document needs to be revised. If revision is required, then the steps of *Developing, Revising, and Approving Institutional Policy Documents* or *Developing, Revising, and Approving Non-policy Institutional Documents* must be followed. A next review date is then included in the document’s metadata set, and is adjusted each time the document is revised.

3.5 Communication and Delivery

After publication of an approved document, persons impacted by the document must be notified in accordance with the implementation plan supporting the particular document. The primary communication mechanism for Lab-wide notification is *Elements* and e-mail. Depending on the level of importance of the changes in policy or procedures as determined by risk analysis, notifications may be announced in all-hands forums at the Lab, Division and/or department levels. For those cases in which the impacted audience is smaller than the full Lab, notifications should be appropriately targeted. Notifications should include not only what the change (or new) policy or procedure is and where the document is located, but also additional details, such as training, required to implement the policy or procedure.

4. Roles and Responsibilities

The list below emphasizes the roles and responsibilities pertinent to only this procedure. For the most comprehensive and up-to-date version of Requirements Management roles and responsibilities, see *LBNL Requirements Management Governance*, document 04.04.001.002.

Role	Responsibilities
Document Author	<ul style="list-style-type: none"> ● Ensures clarity, accuracy and usability of policy document(s). ● Provides technical expertise to support the interpretation and implementation of requirements. ● Gathers information from other functional and/or policy areas that have knowledge or expertise relevant to policy document(s). ● Prepares policy document(s) for review and approval by others. ● Prepares policy document(s) for publication. ● Has responsibility for all technical content and the integrity of any links.
Subject Matter Expert (SME)	<ul style="list-style-type: none"> ● A Laboratory employee or consultant with specialized knowledge about a certain topic or field of interest. ● Provides technical expertise as it relates to the interpretation and implementation of requirements, including the development and review of policies and implementing documents. ● May be a Working Group member, may be an author or reviewer\ ● Has ownership and accountability for the technical content, accuracy, and completeness of policies. ● Identifies and translates requirements. ● May lead the development and/or revision of policy and implementing documents ● Coordinates document reviews, comment resolution, and implementation actions. ● May be delegated by Sr. Line Manager to approve certain institutional documents upon completion of required reviews. ● Communicates progress, actions and/or assignments to respective Division Sr. Line Manager on a regular basis.

Role	Responsibilities
Requirements Management Committee (RMC)	<ul style="list-style-type: none"> ● Provides centralized coordination and communications on Contract 31 requirements and related Lab policy matters. ● Applies the RM process in the review and disposition of Requirements Review Cases related to requirements, Laboratory policies, and on a case-by-case basis Laboratory implementing documents. Ensures that flow-down from requirement into implementing documents is addressed. ● Reviews and recommends best qualified cross-functional team to address requirements analyses, implementation mechanisms and plans, policy and procedure documents. ● Reviews and applies cross-functional knowledge and judgment on WG, SME work products (analyses, implementation plans, policies). ● Advises responsible Sr. Line Manager on WG/ /SME work products. ● Reviews communications plan to ensure effectiveness and thoroughness.
Requirements Management Program Manager (RM PM)	<ul style="list-style-type: none"> ● Manages the Laboratory's requirements management and institutional document management processes. Is the main driver and champion of these processes. Has author/review/recommendation responsibilities for quality and completeness of RM process and institutional document management process documentation. ● Serves as the Laboratory's contact point on requirements and institutional document management-related matters. ● Coordinates inputs from the RMC members, the Working Groups, and the responsible Sr. Line Manager. ● Oversees management of Laboratory's Requirements and Policy Manual. ● Maintains the Requirements Management (RM) database for tracking requirements, their associated policy areas (PA), owners, records of implementing mechanisms, and their flow down to implementing documents.
Sr. Line Manager	<ul style="list-style-type: none"> ● Has responsibility and accountability for managing Laboratory requirements that pertain to his/her area of responsibility, including identification of what the requirements are and implementing them through policies, programs, procedures, etc. ● Has full responsibility and authority to make and enforce policies related to his/her respective area of expertise and responsibility ● Ensures compliance with LBNL requirements and document management policies and procedures. ● Has ownership and accountability for the technical content, accuracy and completeness of respective Function's documents. Approves institutional documents ● upon completion of required reviews. ● Reviews and approves policy recommended by a Working Group and the RMC. ● Has the option to delegate approval authority to SME or RMC member.
Chief Operating Officer (COO)	<ul style="list-style-type: none"> ● Has full responsibility and authority to make, implement, and enforce policies related to the Laboratory Operations. ● Reviews and approves policy and detailed implementation plans recommended by the Sr. Line Managers and the RMC. ● Reviews and approves institutional documents, as required.

5. Definitions

Term	Definition
Contract 31	“Contract 31” is short for Contract No. DE-AC02-05CH11231 between the U. S. Department of Energy and the University of California describing the terms for management of LBNL. The Contract includes a statement of work (SOW) for the science missions and it details the requirements for managing the operations and business of LBNL.
Disposition	Actions taken regarding records no longer needed to conduct regular, current business.
Document	Written, visual, audio-video-recorded information stored in the form of hard copy, electronic data, or in an on-line, web-based format
Document Information	Also referred to as document metadata, and includes (but not limited to) titles, owners, document numbers, revision dates, and for traceability, the related source requirements and implementing documents’ information.
Document Management	A business management process that ensures organization access to current, reliable, and concise information. Document management process includes document control, change control, configuration control, periodic review, and communication/distribution.
Functional area	A grouping of individuals on the basis of the function each performs in the organization (for example, human resources or IT). A Division, Department, or Office at the Laboratory. Functional areas may have oversight of one or more policy areas, or may share responsibility for a policy area with another function.
Institutional document	A publication authorized by Laboratory management that delineates laboratory-wide or multi-departmental policy, procedures, regulations, programs, plans, and so forth. Scientific and technical publications and reports are not included in this definition.
Laboratory Driving Requirement	Institutional documents that (1) are mandated by the contract, applicable regulations, or UC, and approved by at least Berkeley Lab senior management, and (2) drive institutional policies, processes, or other documents. These driving requirements do not include Laboratory policies, and are typically program or system descriptions.
Policy	Statements or directives from the federal, state or local government; the University of California; or Berkeley Lab senior management that set a course of action, define acceptable conduct, or implement governing principles.
Policy Area (PA)	A grouping of related policies. Policy areas are organizationally neutral; that is, they do not reflect organizational structure. Though organizationally neutral, Policy Areas typically are assigned to an Operations function. Some policy areas may span across more than one function, and a primary functional owner is therefore assigned.
RM Database	A database tool for managing requirements and related information, including tracking requirements, their associated policy areas, owners, records of implementing mechanisms, and their flow down to implementing documents.
Record	All books, papers, maps, photographs, machine-readable materials, or other documentary materials, regardless of physical form or characteristics, made or received that are preserved or appropriate for preservation that serves as evidence of the organization, functions, policies, decisions, procedures, operations, or other activities.
Requirement	A specific obligation to perform an action mandated by LBNL senior management or the federal, state, or local government; or to comply with the Laboratory’s contract with the Department of Energy; or to comply with agreements made between the Laboratory and its corporate manager, the University of California.

Requirements review case	An instance or a question related to a requirement that has been logged into the Requirements Management database for disposition by the RM Committee.
Significance Rating or Level	A value that reflects the significance of a new or revised institutional policy, program, process or other document. The value provides a means to grade (a) the approach for development (or revision) of the policy or program, (b) the amount of rigor associated with the various steps of the process, and/or (c) the level of approval authority for the policy or program.
Source requirements document	A high level document that establishes performance expectations as a result of a citable policy, directive, law, regulation, or contract. Examples: Clause H.18, <i>Application of DOE Contractor Requirements Documents</i> ; 10 CFR 851, <i>Work Safety and Health Program</i>
Senior Line Manager	The highest level or most senior level of authority within a division or office. For example, the EHS Division Director or the Chief Human Resources Officer or Chief Financial Officer, or Public Affairs Department Head.
Revision	The act of altering or modifying a document.
Version	An altered or modified document, which is the result of revising.

5.1 Acronyms

ALDO/COO	Associate Laboratory Director of Operations/Chief Operating Officer
LM	Line Manager (Senior)
PA	Policy Area
RM	Requirements Management
RM PM	Requirements Management Program Manager
RMC	Requirements Management Committee
ROD	Record of Decision
RPM	Requirements and Policy Manual
SME	Subject Matter Expert
WG	Working Group

6. References

6.1 Source Requirements Documents	
Requirement ID	Title
DOE Order 414.1D	<i>Quality Assurance</i>
LBNL/PUB 3111	<i>LBNL Quality Assurance Program Description</i>
04.03.001.000	<i>RPM, Quality Assurance Policy</i>
10.06.001.000	<i>RPM, Document Management Policy</i>
04.04.001.000	<i>RPM, Requirements Management Policy</i>

6.2 Related Implementing Documents	
Document Number	Title
04.04.001.003	<i>LBNL Requirements Management Process</i>
10.06.001.202	<i>Form – LBNL Policy Template and Information</i>
10.06.001.203	<i>Form – Policy Approval</i>
04.04.001.206	<i>Form – Determining Significance Rating</i>

7. Contact

Requirements Management Program Manager
Office of Institutional Assurance and Integrity

8. Revision history

Date	Revision	By whom	Revision Description	Section affected
11/24/10	0.0	L.Young	Initial	
1/31/11	0.1	L.Young	Align with RM governance	all
2/10/11	0.2	L.Young	Simplify numbering	3.1.3
3/11/11	0.3	L.Young	Align with existing Archive & Records Office practices	3.3
3/18/11	0.4	L.Young	Include M.Gravois inputs – change “Doc Control” & Config Control names	
4/13/11	0.5	L.Young	Clean up	all
10/21/11	0.6	L.Young	More clean up	Definitions, R&R
12/12/11	0.7	L.Young	Prepare for signature, pre-release to OCA web	
8/1/2014	1.0	L.Young	Align with current practice. Remove Policy Area Manager role; adjust roles, definitions.	all
1/11/2022	2.0	D.Soustin	Align with document management practices of the RPM.	all