



ONR GUIDE			
PEER REVIEW FOR LEGAL AND TECHNICAL ASSURANCE			
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1. INTRODUCTION

- 1.1. ONR reports (NS-TAST-GD-084) are usually used to underpin key regulatory and enforcement decisions and will often be published in the public domain. It is hence of importance to assure the technical and legal quality of ONR reports and to reduce the potential for errors in technical and legal decisions. Accordingly this document provides guidance on the review process to be adopted.
- 1.2. ONR also produces other reports for external audiences (e.g. the report on the nuclear disaster at Fukushima and the Chief Nuclear Inspector's Assurance Reports). It is appropriate that these reports should also be subjected to all or part of the Peer Review process described below.
- 1.3. The Peer Review process is to:
 1. Ensure that technical and legal decisions are soundly based, consistent and proportionate;
 2. Ensure that the correct technical and legal criteria have been correctly applied;
 3. Give ONR confidence to permission appropriate licensee/duty-holder activities;
 4. Demonstrate the quality of our decision making to our stakeholders;
 5. Support staff in coming to a quality technical outcome.

2. SCOPE

- 2.1 Technical and legal outputs shall be proportionately reviewed before regulatory decisions are finalised.
- 2.2 Reviews will be:
 - Proportionate to the potential threats;
 - Transparent to the users and our stakeholders and;
 - Carried out by suitably qualified and experienced people.
- 2.3 Subject to any necessary changes, this process may be tailored to apply to other technical assurance activities, such as reviewing HOW2 documents and processes.

3. RESPONSIBILITIES

- 3.1 The relevant Delivery Lead is responsible for deciding on the type of report needed (see NS-TAST-GD-084) and if Peer Review of a report is required. The Author should identify and agree, with the relevant Professional Lead, an appropriate Peer Reviewer for the work.
- 3.2 The Author is responsible for the quality of the output submitted to Peer Review. It is not the function of the Peer Reviewer to undertake basic quality assurance checks.
- 3.3 Peer Reviewer(s) will ensure that an appropriately scoped Peer Review is undertaken and there is a clear and traceable auditable trail of their work recorded on TRIM (see "Peer Review Feedback").

4. DEFINITIONS

- 4.1 Report – A document showing the auditable trail, and the logic and judgements supporting the outcome(s) and carrying a unique designation. The three types of report ('Major Report', 'Routine Report' and 'Other Report') are defined in NS-TAST-GD-084.
- 4.2 Peer Review – the process whereby the technical and/or legal content of reports are reviewed in a proportionate manner by an individual or group who are suitably qualified and experienced (see paragraph 5.1) to ensure proportionate quality.
- 4.3 Author – The Inspector whose report(s) is to be Peer Reviewed.
- 4.4 Acceptance Reviewer – a senior ONR staff member (usually a Superintending Inspector - SI or Deputy Chief Inspector – DCI) who signs a report to formally accept the opinions/judgments recorded within the report on behalf of ONR.
- 4.5 Acceptance Review – the review process conducted as per the check sheet at Annex 1 of NS-TAST-GD-084, whereby a Professional Lead (Assessment Reports) or Sub-Programme Delivery Lead, or Programme Director (Project Assessment Reports) takes a more strategic rather than technical view of the work undertaken and formally accepts the judgments/opinions contained within the report on behalf of ONR.
- 4.6 Accepted Report – a report which has been signed in the relevant QA box to signify that it has undergone Acceptance Review by an ONR senior manager (i.e. SI or DCI) who has accepted the judgments/opinions within the report on behalf of ONR.
- 4.7 Peer Reviewer(s) – The person or group carrying out the Peer Review.
- 4.8 Professional Lead (usually a Superintending Inspector) – the person providing technical and resourcing leadership to a Sub-Specialism (see "Programme Management" section on HOW2).
- 4.9 Delivery Lead – appointed within the Operating Programmes to provide leadership and management for specific packages of regulatory work within that Operational Programme. They include Sub-Programme Delivery Leads (usually a Superintending Inspector) who are responsible for leading and managing the overall Sub-Programme.
- 4.10 Management Group – Typically the group responsible for managing a Sub-Programme.
- 4.11 TRIM – ONR's Document Management System.
- 4.12 Auditable trail – The collection of records held on TRIM, or referenced from TRIM, that demonstrate how a report and its Peer Review were progressed.
- 4.13 Excepted Work – work or tasks that require no more than a small effort, typically 1 day in total, or very small work/tasks lying outside the formal planning process (see "Programme Management" section on HOW2).

5. GUIDANCE

Peer Review

- 5.1 In order to perform a proportionate and targeted Peer Review, the following should be noted:-

- a. The key purpose of conducting Peer Review is for the Peer Reviewer to satisfy themselves that the conclusions of the report are soundly based, consistent and proportionate.
- b. NS-TAST-GD-084 defines those reports for which Peer Review is mandatory prior to issue (i.e. 'Major Reports') and those reports for which Peer Review is not necessarily mandatory (i.e. 'Routine' and 'Other' reports). Although not mandatory, it is generally expected that most 'Routine Reports' will be subjected to Peer Review, any decision taken not to conduct a Peer Review on a 'Routine Report' should be documented in TRIM with the reasons being given.

[Note – In the case of Project Assessment Reports (PARs) there is a specific procedure on HOW2 ("Review") for PARs which must also be followed in addition to the requirements of NS-TAST-GD-085].

- c. Peer Review should observe the following:
 - Key aspects should be reviewed and peer review feedback (see paragraphs 5.11 and 5.12) resolved before the report is issued.
 - For 'Major Reports' and 'Routine Reports' (where Peer Review has been conducted) a successful Peer Review will be signified by the Peer Reviewer signing the report's signature sheet.
 - Peer review of Project Assessment Reports should include a requirement to confirm that conclusions and recommendations from assessment reports have been correctly used and interpreted. In the case of PARs supporting a Licence Instrument or an enforcement decision, the focus of the Peer Review will normally be on legal aspects rather than technical, (although the Peer Reviewer should still consider matters such as adequacy - depth, coverage etc. of the assessment and inspection work contributing to the PAR). As such, the DCI or SI signing the Licence Instrument may, when reading the PAR in order to satisfy themselves that the Licence Instrument is robustly underpinned, be in effect also acting as the PAR's Peer Reviewer, **or they could delegate a Peer Review to another SQEP inspector**. The DCI/SI, **or the delegated inspector**, should accordingly sign the 'Peer Review' box to signify this. Such allocations of Peer Reviewers do not require the involvement of the Professional Lead (e.g. to allocate the work).
 - Peer Reviews will normally be conducted as Excepted Work - as a guideline reviews of 'Routine Reports' should normally take no more than ½ of a working day, whilst reviews for 'Major Reports' will not normally exceed 1 working day. For more significant reviews, time may need to be allocated in accordance with Corporate Programme Management Office guidelines (see also paragraph 5.6). Even where Peer Reviews are carried out as Excepted Work, they should still be planned for so that required timescales for the report are met.
- d. Where there are non-standard legal decisions the Author should seek legal advice.

Peer Reviewer Selection

5.2 Peer Reviewer selection should be justified taking account of the following:-

- a) The appointed Peer Reviewer shall be demonstrably independent from the production process of the report being Peer Reviewed.
- b) Since the aim of the Peer Reviewer is to satisfy themselves that the conclusions of the report are soundly based, consistent and proportionate, then the Peer Reviewer(s) should either be in the same or very similar technical Specialism to the report Author. The Peer Reviewer should have sufficient background and experience to be able to identify the key aspects of the safety arguments independently from the Author and be able to add value through constructive comment.
- c) In some instances it may be more appropriate to select another member of the team working on that task to carry out the review, when familiarity is more important than matching the Specialism.
- d) Where the report is a PAR in support of a Licence Instrument, the report review undertaken by the Programme Director or Sub-Programme Lead (i.e. DCI or SI), delegated to sign the Licence Instrument, may address the normal requirements of a Peer Review, thus removing the need for a separate Peer Review exercise (see paragraph 5.1.c). In such circumstances the DCI or SI signing the Licence Instrument shall decide whether a separate Peer Review of the report is required or not.
- e) Where the Author is a “singleton” and therefore there is no other Inspector with appropriate technical knowledge, the choice of Peer Reviewer(s) may need to include consultants or other external experts, depending on the significance of the work to the permissioning decision. Such external Peer Reviewer(s) would only be expected for ‘Major Reports’ and they should be independent of the matters under consideration. In a few cases, this may not be practical and in such cases the Author should consult their Professional Lead, who will advise on suitable external consultants/experts.
- f) Security implications must be taken into account when choosing the Peer Reviewer.

Performing Peer Review

5.3 The overall objective is to deliver a sound basis for regulatory decision making in a timely manner. Peer Review of ‘Major Reports’ must conform fully to the following paragraphs. Peer Reviews of ‘Routine Reports’ should utilise an appropriate selection of the process, whilst Peer Reviews of ‘Other Reports’ (where required) may take account of it.

5.4 Peer Review should be carried out on final reports, or occasionally on near final reports (NS-TAST-GD-084). The Peer Reviewer should independently identify the key arguments in the report including likely omissions that could be significant to the outcome, test these and, if satisfied these are adequate (fit for purpose), the Author should be informed and a suitable record made (see paragraph 5.13).

It should be stressed that Peer Review is different from Acceptance Review (see Section 4) and should be carried out by a different person as far as possible. A useful

benchmark is the IET code of practice for independent safety assessors (References 6.1 and 6.2).

- 5.5 If there are points of difference, these should be discussed with the Author. When these are resolved, the report should be changed as agreed and a suitable record made of the discussion and the changes i.e. to form the auditable trail (see paragraph 5.13). If the differences are significant and cannot be resolved by discussion, they should be dealt with as per the process indicated in paragraph 5.7.
- 5.6 Where it is anticipated that the time required for individual Peer Reviews will exceed the guidelines in paragraph 5.1(c) and/or staff are likely to be engaged in conducting multiple Peer Reviews as a part of their routine duties, then suitable time should be allocated in staff forward work plans, via ONR's planning process.

Issue Resolution

- 5.7 Where technical decisions are very finely balanced, or the technical decision is difficult and the nuclear hazard is significant, or where there are matters that are likely to be contentious, there is a corporate need to ensure the best decision is made. In these cases the Programme Management Group should identify an appropriate way forward, satisfying corporate requirements and minimising the risk to ONR's reputation:-

- The expectation is that resolution of the matter will generally be possible by applying expertise deployed within the Operating Programme.
- If resolution is not possible within the Operating Programme, then the matter must be referred to the relevant Professional Lead(s) for resolution.
- In the rare event that resolution of the matter is still not possible, then the matter must be referred to the Regulatory Strategy Group for a consideration.
- Any remaining major differences of professional opinion must be resolved - see NS-INSP-IN-002 (previously INS/031) for the process.

The resolution of the issue must be appropriately documented on TRIM.

Peer Review Content

- 5.8 Peer Review should consider the following questions:
- a) Does the report comply with the Enforcement Policy Statement?
 - b) Is the scope adequate for the declared subject or purpose?
 - c) Does the output or decision meet the intent?
 - d) Are the assumptions and inputs reasonable and justifiable?
 - e) Is the technical / legal content soundly based and is there adequate explanation of any uncertainties? Are such uncertainties acceptable in the light of the output / outcome and have steps been taken to reduce or mitigate any uncertainty?
 - f) Is the sampling reasonable and does it cover the critical aspects?

- g) Is the Peer Reviewer satisfied that the Report Author has considered the licensee/duty holder's ALARP arguments and has recorded within his/her report the reasons why he/she is satisfied that the licensee/duty holder has adequately considered a range of measures to make potential safety improvements and has reduced the risks ALARP?
- h) Does the output show a balanced, objective and well-argued course of action?
- i) Is there a resolution route for unresolved Regulatory Issues – are these likely to compromise the output / outcome and thereby the regulatory decision?
- j) If novel techniques are used, are they acceptable, valid and justified (further specialist advice and support may have to be sought in some cases)?
- k) Have appropriate underpinning references supporting the licensee/duty-holder's submission been proportionately assessed and are these consistent with good practice?
- l) Are the conclusions of the Author's report consistent with previous practice or if not has any significant deviation been justified?
- m) Are the methods and information used in the Author's report acceptable and proportionately applied?

5.9 The Peer Review content should be based on:

- a) The Reviewer's particular skills and background;
- b) The experience and track record of the Author;
- c) Safety significance – with a focus on safety critical aspects;
- d) Accepted relevant good practice and where relevant past precedents;
- e) Novelty and complexity related to the hazard level under consideration;
- f) The quality of underpinning research and consultation (if applicable);
- g) The perceived quality of any output from assessment carried out by the licensee or duty-holder's own internal regulator;
- h) Potentially contentious matters, particularly if they are likely to set a precedent.

5.10 Peer Review is not:

- a) An editorial activity (although editorial comments for clarity are helpful) but rather the application of technical and legal judgement to check outputs / outcomes.
- b) A way of iterating towards a final product (although there may need to be iterations to bring out all the evidence in a transparent proportionate manner).
- c) About "collecting signatures on the front page" – the Peer Review should add value.

Peer Review Feedback

5.11 To facilitate clear feedback the Peer Review should use the following categories:

Reservation A major matter that must be resolved before the report can be signed, {sub divided under the following headings – technical, legal, process, publication}

Observation Minor matters such that overall adequacy is not compromised but could do with attention e.g. matters of clarity. The report may be signed and the observation recorded (with the report if appropriate).

Comment Provided for the Author's information. The report may be signed. No formal record is required unless it adds value.

5.12 Each of the Reservations and Observations should be referenced to the underpinning evidence. The feedback should ideally be stand alone and make clear what each matter is about and how it was resolved without the need to refer to the underpinning justification or the report being reviewed. Reservations may be sub-divided as follows:

a) Technical – where there is a shortfall in the underpinning science, engineering or legal judgement(s). This includes application of technical guides.

b) Legal – where the Peer Reviewer considers that there is a doubt as to whether the regulatory decision lies within ONR's legal vires, or where there is doubt that the use of a standard Licence Instrument is applicable and where it is considered further advice should be sought from the Treasury Solicitor's office.

c) Process – where a procedure has not been followed.

d) Publication – where the decision outcome is not in a suitable form for open publication. This excludes outcomes withheld for security or similar reasons.

5.13 Peer Reviews may be reported on the form presented at Annex 1 of this procedure and the Author, whose report is being Peer Reviewed, should respond to the Peer Reviewer's comments using the same form. Alternatively, Peer Review comments may be marked on the report itself (provided this marked up copy is filed on TRIM and the TRIM reference is supplied on the finalised version of the report). On completion of the Peer Review and when the Peer Reviewer is satisfied with the Author's responses, the Peer Reviewer should confirm in writing that the report meets the requirements of (a) to (m) in paragraph 5.8 (unless any of these points are not relevant) using the form supplied at Annex 2 of this procedure. The completed Peer Review form – Annex 1 (if used) and the Peer Reviewer's confirmation form – Annex 2 (i.e. that the report meets the requirements of (a) to (m) of paragraph 5.8), should be filed on TRIM.

5.14 Outstanding matters that cannot be resolved to the mutual satisfaction of the Author and the Peer Reviewer should follow the process identified in paragraph 5.7 so that these are fully resolved prior to the Acceptance Review (NS-TAST-GD-084) commencing. The completed Peer Review form – Annex 1 (if used) and Peer Reviewer's confirmation form – Annex 2, of the report meeting the requirements of (a) to (m) – paragraph 5.8, should be presented to the Acceptance Reviewer prior to them commencing their review.

- 5.15 Peer Reviewers should bring any generic matters of concern arising from their review to the attention of the appropriate Professional Lead and/or Management Group to engender learning.

6. REFERENCES

- 6.1 Code of Practice for Independent Safety Assessors

<http://www.theiet.org/factfiles/isa/isa-code-page.cfm?type=pdf>

- 6.2 Competency framework for ISAs

<http://www.theiet.org/factfiles/isa/comp-frame-page.cfm?type=pdf>

7. ASSOCIATED DOCUMENTS

NS-TAST-GD-084 – “Guidance on Production of Reports”

NS-INSP-IN-002 – “Resolving Differences of Professional Opinion in ONR”

ONR RQA Audit Process in HOW2

8. ANNEX 1 - PEER REVIEW PRO-FORMA

Report Title.

Produced By.

Report No.

Report Page No.	Report Para	Comment	Comment Category (See NS-TAST-GD-085 Para 5.11)	Author Response to Comment

9. ANNEX 2 - PEER REVIEW ACCEPTANCE PRO-FORMA

Report Title	
Report No./Rev	
Report Type¹	
TRIM Ref²	
Author	
Peer Reviewer	
TRIM Refs of all Author Responses to Peer Review Comments³	
TRIM Refs of all Peer Review Comments⁴	

1 – Major/Routine/Other (As per NS-TAST-GD-084)

2 –The TRIM reference supplied here should be the final version of the document i.e. the version in which the Peer Reviewer is satisfied that the Report Author has addressed all Peer Review comments to his/her satisfaction, such that the resultant report now fully meets the requirements of the latest version of NS-TAST-GD-085, Section 5.8 (a – m).

3 and 4 – A reference should be maintained on TRIM of **all correspondence** between the Report Author and Peer Reviewer with a view to demonstrating how all the Peer Reviewer's comments have been satisfactorily resolved. All 'Reservations' **must be closed** before the report can be issued. In the case of 'Observations' and 'Comments,' if the Report Author chooses not to address these then the Peer Reviewer should signify he/she is content to accept this position.

Scope of Peer Review

Peer Reviewer should include a brief description as to how they have conducted their review and in particular should describe any exclusions from that review.

Peer Review Statement

I have conducted a Peer Review of the above report as per the requirements of Section 5.8 (a – m) of the latest version of NS-TAST-GD-085 (i.e. the latest version of this procedure as obtained from HOW2). I am content that the Report Author has adequately addressed all my Peer Review comments and that a QA record is present on TRIM which demonstrates this. I am content that the report, as now presented (see TRIM Reference above), fully meets the requirements of the latest version of NS-TAST-GD-085, Section 5.8 (a – m).

Name of Peer Reviewer –

Signature of Peer Reviewer –

Date –

NB This Peer Review Form must be filed in the TRIM Folder containing the final version of the report.