



DEPARTMENT OF THE NAVY
COMMANDER
NAVY REGIONAL MAINTENANCE CENTER
9170 SECOND STREET, SUITE 245
NORFOLK, VA 23511-2325

CNRMCIINST 4790.12B
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CNRMCI INSTRUCTION 4790.12B

From: Commander, Navy Regional Maintenance Center

Subj: FLEET MAINTENANCE ACTIVITY ASSESSMENT

Ref: (a) COMFLTFORCOMINST 4790.3, Joint Fleet Maintenance Manual (JFMM)
(b) COMUSFLTFORCOM ltr 4700 Ser N43/057 of 11 Sep 07
(c) SECNAVINST 5040.3A, Inspections within the Department of the Navy
(d) NAVSEAINST 5040.1F, Naval Sea Systems Command Inspection Program
(e) SECNAV M-5210.1, Department of the Navy Records Management Program Management Manual

Encl: (1) Terms and Definitions
(2) FMAA Milestones
(3) Notional Assessment Week Schedule
(4) Sample Pre-brief Format
(5) Sample Out-brief Format
(6) Corrective Action Plan Requirements
(7) Corrective Action Plan Submission, Approval and Close-out Process
(8) Assessment Areas

1. Purpose. To provide policy, responsibilities and procedures for the conduct of Fleet Maintenance Activity Assessments (FMAA), as required in reference (a), Volume IV, Chapter 2, by Commander, Navy Regional Maintenance Center (CNRMCI).

2. Cancellation. CNRMCIINST 4790.12A.

3. Scope. This instruction is applicable to all Regional Maintenance Centers (RMC) and their detachments within the Naval Sea Systems Command (NAVSEA) claimancy, including both the direct report RMCs; Southwest Regional Maintenance Center (SWRMC), Southeast Regional Maintenance Center (SERMC), Mid-Atlantic Regional Maintenance Center (MARMC), and U.S. Forward Deployed Regional Maintenance Center (FDRMC) and the RMCs operating under the authority of a Naval Shipyard Northwest Regional Maintenance Center (NWRMC) and Hawaii Regional Maintenance Center (HRMC).

4. Discussion

a. The mission of CNRMCI is to oversee the operations and management of the RMCs in the execution of private sector Depot-level (D-Level) repair and modernization, technical and engineering assistance, Intermediate-level (I-Level) and D-Level production and training,

contract management services and readiness assessments on U.S. Navy Vessels. Additionally, CNRMC provides leadership to the RMCs for the development and execution of standardized maintenance processes and common policy to a global business model that will consistently provide quality, cost-wise readiness to the surface force. This includes ensuring that all RMCs, shipyard and non-shipyard, adhere to reference (a), and other pertinent instructions, policy, guidance and technical documentation. The use of inspections, specifically the FMAA, is one method employed by CNRMC to verify compliance. Reference (b) delegates responsibility for conducting FMAA for the RMCs to CNRMC.

b. For the purpose of this instruction, an inspection is defined as any effort to evaluate an organization or function by any means or method, including assessments and audits.

c. Inspection is an inherent function of command exercised at every level. Leaders use both formal and informal inspections to evaluate readiness, capability and performance. Inspections may focus on compliance with established standards or process improvement. Inspections from outside activities are necessary and useful to objectively and independently verify mission capability and performance. Reference (c) sets policy for the inspection of or by organizations within the Department of the Navy.

5. Definitions. Terms and definitions used in this instruction are provided in enclosure (1).

6. Policy

a. The primary objective of the FMAA is to evaluate the ability of the activity to execute maintenance and technical support services in accordance with applicable instructions, policy, guidance and technical directives and specifications. The FMAA provides an overall evaluation of mission readiness, performance, compliance, and alignment.

b. Secondary objectives include:

(1) Identify opportunities to improve instructions, policy, guidance, technical directives and specifications, when appropriate to do so.

(2) Determine whether personnel, programs and functions are properly organized, trained, resourced and supported to achieve required capabilities.

(3) Recognize significant achievements and innovations that positively contribute to efficient and effective mission execution.

(4) Identify systemic problems within an organization or across the RMCs.

(5) Promote knowledge and best practice sharing between the RMCs.

c. RMCs are subject to numerous inspections, such as the NAVSEA Inspector General (IG) Command Inspection, Procurement Surveillance Program (PSP), Shipyard Program Review (SPR)/Availability Program Review (APR), NAVSEA Non-destructive Testing (NDT)

Technical Compliance Review, and Engineering Technical Authority Evaluation (ETAE). Because of this, there is potential for redundancy and overlap of assessment areas and requirements. All efforts will be made to eliminate any duplication with these inspections from the FMAA.

7. Inspection Cycle. In accordance with reference (a), Volume IV, Chapter 2, paragraph 2.1.1.c, the FMAA will be conducted on an 18 month, not to exceed 24 months, cycle. Key FMAA cycle milestones are provided in enclosure (2).

8. Approach. The FMAA consists of three key elements: self-assessment, assessment, and corrective action.

a. Self-assessment. Self-assessment is a valuable tool for an organization to identify weaknesses in processes, work practices, training, oversight and management. It allows the organization to correct problems as they occur and to focus process improvement efforts in areas that will benefit the most and enhance the organization's ability to execute their mission. An organization's ability to self-assess directly results in greater compliance with statutory and regulatory requirements, judicious use of resources, and efficient and effective work processes. It is a key characteristic of high-performing organizations.

(1) As self-assessment is the key to a successful organization, it is important to evaluate an organization's ability to self-assess.

(2) RMCs will electronically submit a self-assessment report to the Navy Regional Maintenance Center FMAA coordinator no later than 30 days prior to the scheduled assessment.

(3) Elements of this self-assessment will include, at a minimum:

(a) An organizational overview describing the command structure and departmental relationships, strategic alignment and initiatives, and a summary of the command's strengths and weaknesses, including barriers and challenges to overcome those barriers. An up-to-date version of the Organizational Profile submitted in advance of the NAVSEA IG Inspection, as required by reference (d), will meet this requirement.

(b) Identification of specific deficiencies, weak areas, and opportunities for improvement and the plan of action to resolve them. Include the efforts in progress or scheduled as part of a published improvement plan that address these issues. The FMAA checklists should be used as the basis for this part of the self-assessment.

(c) Identification of effective tools and processes that can be considered Best Practices. Include a summary description and supporting metrics for each tool and process identified.

b. Assessment. An assessment team will conduct an on-site evaluation of the RMC according to the policy prescribed in this instruction and in references (a), (c) and (d). A notional assessment week schedule is provided in enclosure (3).

(1) The assessment team will consist of the Senior Member, Team Leader, Team Coordinator, Functional Area Leads and Subject Matter Experts (SME). NRMC personnel shall comprise the core assessment team with augmentation from both the RMCs and external commands. Roles and responsibilities of team members are discussed in paragraph 10.

(2) Prior to the start of the FMAA, the Functional Area Leads will brief NRMC leadership on assessment preparation and risk areas. Using the command's self-assessment, results from previous FMAAs, known performance problems, and systemic problems from across the RMCs to identify weak areas and potential risks to focus assessment efforts on. A sample pre-brief format is provided in enclosure (4).

(3) The assessment team utilizes standard checklists to guide the assessor through the auditing process. These checklists are not definitive. A more detailed and deeper review may be conducted if determined appropriate by the assessor. Assessment team members will typically supplement the checklist with interviews, observations, document reviews, and data collection and analysis to conduct a comprehensive review of the assessed area and to validate the self-assessment. Assessment findings may not necessarily correspond to a specific line item on the checklist; however, all findings requiring corrective action shall be substantiated by a documented requirement and be appropriately referenced in the finding.

(4) The Senior Member may conduct visits with the Type Commander (TYCOM), Immediate Superior in Command (ISIC), ships currently in an availability or have recently completed availabilities, companies holding a Master Ship Repair (MSR) agreement or Agreement for Boat Repair (ABR), Project Teams, and other stakeholders during the assessment period. The RMC will be requested to coordinate these visits.

(5) A brief will be provided at the conclusion of the assessment detailing key findings and providing an overall evaluation of the RMC's mission readiness, performance, compliance, and alignment. A sample out-brief format is provided in enclosure (5). All efforts will be made to provide a draft copy of the assessment report and findings to the RMC prior to the Team Leader/Coordinator's departure. However, if this is not feasible, a draft copy will be provided no later than three working days upon the Team Leader/Coordinator's return to NRMC. An official report will be issued by NRMC approximately 10 business days after the assessment is completed.

(6) The RMC will submit a formal Immediate Corrective Action Required (ICAR) Report, as required, to NRMC within 10 business days of the conclusion of the assessment. This report will address each ICAR finding separately, describe all actions taken to correct the deficiency and identify the long-term actions and improvement events planned to ensure continued compliance and address the apparent causes that resulted in the deficiency.

(7) All assessment areas evaluated as Not Effective, as defined in paragraph 9.b.(4) of this instruction, will be have interim reviews conducted every 6 months until an improved evaluation is formally documented. When possible, these interim reviews will be conducted during the Waterfront Execution Reviews (WERs).

c. Corrective Action. The RMC will prepare and submit a corrective action plan addressing each deficiency and the actions required to correct it. This plan should be a combination of temporary and short-term actions required to correct the immediate deficiency and a long-term plan of action designed to identify and address the apparent cause and prevent future non-compliance.

(1) The Corrective Action Plan for each finding will include the following elements. Requirements for each element are detailed in enclosure (6).

(a) Apparent Cause(s): a factor that, through a chain of cause and effect, is identified as a source of the deficiency or non-compliance.

(b) Corrective Action: a combination of temporary, short-term and long-term actions that resolve the identified deficiency and ensure continuing compliance.

(c) Effectiveness Verification Measures (EVM): metrics, Objective Quality Evidence (OQE) or other tangible substantiation that demonstrate an action has been completed and is producing the desired results.

(2) The Corrective Action Plan submission, approval and close-out process is provided in enclosure (7). Key elements of the process:

(a) The plan will be submitted on-line within 60 calendar days after completion of the assessment or 10 business days of receipt of the official assessment report, whichever is later, or as directed by NRMC. A cover letter shall be submitted to NRMC to indicate the plan is ready for review.

(b) CNRMC will approve each element of the plan.

(c) The RMC will self-report completion of corrective actions.

(d) Once the RMC has corrected the deficiency, the RMC will provide documentation of the EVM to NRMC. NRMC will review the EVM, determine whether the deficiency has been satisfactorily resolved, and close-out the finding as appropriate.

(e) The ICAR Report will be incorporated in the corrective action plan.

(f) RMCs will provide monthly progress reports on their plan. Updates are due the first Friday of the month.

(3) Corrective Action Plan Briefings

(a) Initial submission. The commanding officer will brief NRMC leadership on the specifics of the Corrective Action Plan, including, as a minimum, the following:

1. Key highlights/drivers of the plan.

2. Highlight Corrective Actions and EVMs for findings that resulted in less than Effective evaluations during the FMAA.

3. Corrective Actions and EVMs with an estimated completion date (ECD) greater than 12 months from the date of the plan and details behind the prolonged completion date.

4. Overall strategy for maintaining the improvements.

(b) Corrective Action Plan status briefs.

1. Number of findings closed versus open/burn rate.

2. Overall status of the plan.

3. Overdue items.

4. Corrective Actions and EVMs who's ECD has been extended by three or more months or has been extended past 12 months.

5. Barriers to plan accomplishment.

(c) These briefings will occur during the WERs when feasible.

9. Assessment Areas and Findings

a. RMCs are required to maintain a broad range of functions and capabilities to support the execution of maintenance and technical support services. Enclosure (8) provides a list of assessment areas that may be reviewed during the FMAA. This list is only a guide, and assessment areas may be added and removed from the FMAA as programs, policies and requirements are implemented, updated, or removed. The RMC should refer to the announcement letter for the complete list of areas to be assessed during their particular assessment.

b. Each assessment area will be evaluated as Effective, Partially Effective or Not Effective.

(1) There is no single formula in evaluating the effectiveness of each assessment area. Team members must rely on their expertise and judgment when evaluating the effectiveness of each assessment area. However, a written explanation will be provided for each assessment area evaluation.

(2) Effective. Meets minimum standards; RMC is able to carry out all functions associated with the assessment area.

(3) Partially Effective. Not all standards have been met, but the RMC is capable of carrying out most functions associated with the assessment area.

(4) Not Effective. Serious deficiencies have been identified that hinder the RMCs ability to satisfactorily execute key functions associated with the assessment area.

c. Assessment findings will be classified as Immediate Corrective Action Required (ICAR), Corrective Action Required (CAR) or Recommendation (REC) provided.

(1) Immediate Corrective Action Required (ICAR)

(a) A deficiency that poses a significant safety hazard or results in a total loss or extreme degradation of the RMC's readiness to perform work or provide a service within an area of required capability; a serious violation of Federal, State or Local regulations.

(b) The references that directly address the deficiency must be cited in the finding write-up.

(c) An assessment area shall not be considered Effective with an ICAR finding.

(2) Corrective Action Required (CAR)

(a) A deficiency that poses a potential hazard to personnel safety or has a significant impact on the RMC's readiness to perform work or provide a service within an area of required capability; non-compliance with formal policy; actions or practices that may result in serious violation of Federal, State or Local regulations.

(b) The references that directly address the deficiency must be cited in the finding write-up.

(3) Recommendation (REC)

(a) An action or practice that may impact the RMC's readiness to perform work or provide a service. The RMC technically meets the requirement but is at risk for non-compliance. A recommendation may also be provided when there is an alternative established method, such as an identified Best Practice, that will improve the performance of the RMC in a particular area.

(b) The team member provides a practice or suggestion that could improve efficiency.

(c) Follow-up action by the RMC is desired but not required.

d. Team members will also be looking for processes and tools that positively impact the RMC's ability to execute their mission. These findings will be classified as either What a Great Idea (WAGI) or Best Practice (BP) nominee.

(1) What a Great Idea (WAGI)

(a) An identified process or tool that appears to improve the performance or quality of the job at hand but doesn't have the run-time or metrics to consistently demonstrate its effectiveness, or only anecdotal evidence is available to support its value.

(b) WAGIs are positive attributes that bear recognition but are not ready to be shared across the RMCs. They will be noted and reevaluated at the next FMAA as a potential BP nominee.

(2) Best Practice (BP)

(a) An identified process or tool that improves the performance or quality of the job at hand and has the run-time and metrics to consistently demonstrate its effectiveness.

(b) BPs and associated documentation will be forwarded to the appropriate code at CNRMC for further analysis and potential identification as a Best Practice. Once identified as a Best Practice, it will be disseminated across the RMCs.

10. Roles and Responsibilities

a. NRMC FMAA Coordinator. The NRMC FMAA Coordinator resides in the Corporate Operations Department, C1200, and shall:

(1) Implement policy and procedures for the execution of FMAAs across the RMCs.

(2) Coordinate with other inspection authorities, as needed, to coordinate or deconflict inspection schedules as appropriate.

(3) Publish the FMAA Schedule by November of each year.

(4) Conduct pre-FMAA coordination to include:

(a) Issue the FMAA Announcement letter with the list of assessment areas and key coordination milestones.

(b) Conduct pre-FMAA coordination meetings with Team Leader, Team Coordinator, RMC FMAA Coordinator, Functional Area Leads, and team members, as needed.

(c) Receive the RMC Self-Assessment and forward to NRMC leadership, department heads and assessment team members for review.

(d) Provide assessment team member and security clearance information to the RMC to satisfy access control requirements.

(e) Arrange group transportation and lodging, as necessary, for NRMC FMAA team members.

(f) Distribute customer satisfaction surveys to the TYCOM/ISIC, Ship Commanding Officers and MSR/ABRs. Analyze results and provide a summary to NRMC leadership, Senior Member, Team Leader, and assessment team members, as appropriate.

(g) Provide requirements for the Senior Member itinerary to the RMC to coordinate visits, office calls and meetings with TYCOM, ISICs, Ships, MSR/ABRs, Project Teams and other stakeholders.

(h) Coordinate administrative and logistics support requirements for the assessment.

(i) Provide Just-in-Time Training to assessment team members, as required.

(5) Coordinate the use of Memorandums of Agreement (MOA) between NRMC and external commands, as required, to provide SMEs for assessment team augmentation.

(6) Coordinate with department heads to identify assessment team members, both internally at CNRMC and from external commands.

(7) Implement a periodic review of assessment area checklists and coordinate with NRMC Department Heads to ensure checklists are reflective of current requirements, policy and procedures. Checklists will be revised, added or removed as needed.

(8) Work with the Assessment Team Leader to ensure the Assessment Report is clear and concise and issued in accordance with FMAA milestones.

(9) Receive post-FMAA documentation (ICAR Report, corrective action plan and progress reports) from the RMC and distribute as required to NRMC leadership, department heads and assessment team for review and approval. Track the progress of the RMC and report deficiencies as necessary.

(10) Maintain the FMAA webpage on the NRMC SharePoint Site.

(11) Manage the feedback process.

b. NRMC Department Heads. Department Heads, or designated representatives, are responsible for the assessment areas and requirements under the purview of their department and shall:

(1) Work with the FMAA Coordinator to ensure department requirements are incorporated as needed in the FMAA program.

(2) Maintain the assessment area checklists. Ensure the checklists are up to date and reflect current requirements, policies, and procedures. A review must be conducted upon the issuance of or change to a higher authority instruction or technical publication.

(3) Provide SMEs for the assessment team. This includes coordinating with both the RMCs and external commands.

(4) Provide the FMAA Coordinator with a list of specific documents, instructions, references, logs, reports, records, files, interviews or focus groups required on-site by team members to conduct an effective assessment.

(5) Review assessment findings and corrective actions from the RMC. The initial review and approval of the Corrective Action Plan shall be conducted within ten working days of receipt of the plan, in accordance with the process defined in Enclosure (7). Department representatives should work directly with their RMC counterparts to correct any discrepancies in the corrective action plan.

(6) Review the corrective action plans from the RMCs monthly to ensure appropriate progress and timely close-out of findings. Coordinate directly with RMC counterparts to provide assistance and/or remove barriers to completion when the plan is off-course.

(7) Provide the FMAA Coordinator with information pertaining to any external inspection that is conducted on the RMCs. This will facilitate the coordination of inspection schedules with the FMAA and minimize the impact on the RMCs.

c. Regional Maintenance Centers

(1) Designate an Assessment Coordinator to act as the point of contact between the NRMC Assessment Coordinator, assessment team and the command.

(2) Provide access control requirements for all installations, facilities and controlled areas the assessment team may be required to access during the assessment to NRMC FMAA Coordinator.

(3) Submit Self-Assessment Report in accordance with FMAA milestones.

(4) Provide a list of key personnel, including command leads for each assessment area, and contact information.

(5) Coordinate Senior Member visits and meetings with TYCOM, ISICs, Ships, MSR/ABR, Project Teams, and other stakeholders as required.

(6) Coordinate all on-site administrative and logistics support requirements with the NRMC FMAA Coordinator and Team Leader and provide during the assessment, to include:

(a) Designated parking spaces for the assessment team.

(b) A dedicated work space for the assessment team.

(c) NMCI access computer(s) and connections, copy, print and telephone services and basic office supplies.

(d) Access to documents, instructions, references, logs, reports, records and files as required by the assessment team.

(e) Schedules of relevant meetings during the assessment, to include: training, production, management, Availability progress and others that relate directly to the assessment areas.

(f) Administrative support personnel to assist the Team Coordinator with documentation of assessment findings.

(7) Submit ICAR Report and corrective action plan in accordance with FMAA milestones. Provide monthly progress updates as required.

(8) Provide Corrective Action Plan briefings to NRMC leadership.

(9) Provide assessment team members to support FMAAs at the other RMCs.

d. Senior Member. The Senior Member will be Commander, Navy Regional Maintenance Center or the Executive Director and shall:

(1) Conduct the in-brief and out-brief with the RMC.

(2) Conduct daily status briefings with the RMC Commanding Officer (CO) and key personnel, as necessary.

(3) Conduct a walk-thru of the RMC, as desired.

(4) Conduct customer and stakeholder visits with the TYCOM, ISICs, ships, and MSR/ABRs, as desired. Meet with integrated Project Teams.

(5) Prepare "Senior Member Comments" for the assessment report.

(6) Resolve issues and conflicts, if required.

e. Team Leader. The Team Leader will be the NRMC Deputy Director, or designated representative, and shall:

(1) Assist the Senior Member, as required.

(2) Conduct the pre-brief with NRMC leadership prior to the assessment.

(3) Meet daily with assessment team members for status updates and significant findings.

- (4) Provide a daily status briefing to the Senior Member, RMC CO and key personnel.
 - (5) Prepare the official assessment report in accordance with FMAA milestones.
 - (6) Resolve issues and conflicts between the assessment team and RMC, as needed.
 - (7) Act in the capacity of Senior Member when CNRMC and/or the Executive Director are not available.
- f. Team Coordinator. Oversees the assessment team and manages the day to day execution of the FMAA and shall:
- (1) Conduct pre-FMAA coordination with the NRMC FMAA Coordinator and RMC.
 - (2) Assist the Senior Member and Team Leader, as required.
 - (3) Coordinate the assessment team and area assignments.
 - (4) Draft the in-brief and out-brief presentations and consolidate inputs.
 - (5) Conduct the on-site assessment team meeting prior to the start of the FMAA.
 - (6) Oversee the assigned administrative support personnel and provide tasking for the duration of the FMAA.
 - (7) Review all incoming findings and evaluations:
 - (a) Log all incoming documentation.
 - (b) Review for clarity and required information.
 - (c) Assign tracking numbers.
 - (d) Oversee entry into tracking database.
 - (8) Track assessment documentation and keep running counts of all findings and final evaluations for each assessment area.
 - (9) Communicate changes to the assessment team.
 - (10) Act as the primary point of contact for the assessment team while on-site.
- g. Functional Area Leads. The senior Team Member within a functional area, usually grouped by responsible department or code. In addition to performing the duties and responsibilities of a team member, the Functional Area Lead will be a NRMC staff member and shall:

(1) Represent the functional area at formal briefings and present findings, best practices and effectiveness evaluation results for their group.

(2) Brief the Functional Area during the FMAA pre-brief with NRMC leadership.

(3) Provide an overall evaluation of the functional area, including the RMC's ability to self-assess, with inputs from the functional area team members.

(4) Resolve issues and conflicts between their functional area assessment team and the RMC, as needed.

(5) Meet daily with Team leader to provide daily status updates for their functional area. Attend daily status briefing with Senior Member and RMC CO if necessary.

(6) Debrief CNRMC and Senior Member prior to final out-brief with the RMC.

(7) Provide functional area inputs for the final out-brief and official report.

h. Subject Matter Experts (SME)/Team Members. Team Members will be assigned by the cognizant department head and shall:

(1) Possess the following attributes:

(a) Experience in the specified technical area assigned to assess.

(b) Ability to articulate observations and findings in a professional and technically correct manner, both verbally and in writing, to the appropriate personnel.

(c) Are familiar with the technical and operational standards and reference documents for the assigned assessment areas.

(d) Knowledgeable of Navy Occupational Safety and Health and Occupational Safety and Health Administration regulations for working in industrial areas.

(e) Have current Information Assurance (IA) training and comply with all applicable government information controls.

(f) If a Contractor, your company must not be responsible for, by contract, or actively competing for, the maintenance, reliability or performance of the system or program you are assigned to assess.

(2) Familiarize themselves with the applicable checklist for their assigned assessment area before the assessment.

(3) Attend pre-FMAA coordination meetings as required.

(4) Attend the on-site assessment team meeting, Command in-brief and out-brief. Attend additional meetings and briefings as directed.

(5) Meet daily with the Functional Area Lead and Team Leader to provide progress reports and summary of findings.

(6) Submit assessment finding worksheets daily. Do not wait until the last moment to submit them.

(7) Notify Team Leader immediately of significant findings.

(8) Meet daily with the appropriate RMC Department Head or designated representative to explain all findings and provide assessment status update.

(9) Notify the Functional Area Lead and Team Leader, if applicable, of any conflicts and issues that have arisen, especially those that may prevent or delay completing the assessment.

(10) Not conduct training, troubleshoot, repair or operate any equipment while performing the assessment. The RMC is responsible for conducting any demonstrations and maintenance actions identified in the checklist using approved procedures.

(11) Not provide recommendations outside of existing technical and operating procedures currently approved or required for use.

(12) Provide the following items to the Team Leader before departing the assessment:

(a) Completed checklist.

(b) Assessment findings (including WAGI and BP nominees) documented on the provided worksheets. Report only one finding per worksheet.

(c) Assessment area evaluation worksheet.

11. FMAA Webpage. The FMAA webpage is available on the CNRMC SharePoint website and can be accessed at: <https://navsea.portal.navy.mil/field/CNRMC/fmaa/>. This page will contain the most recent checklists, FMAA contact information, current schedule, feedback link and any additional information pertaining to the FMAA. Each RMC has their own sub-page with FMAA Results, Corrective Action Plan and RMC-specific documentation and coordination efforts.

12. Feedback. Personnel are encouraged to provide feedback and recommendations to the NRMCM FMAA Coordinator concerning the FMAA program. A link is provided on the FMAA webpage.

a. Feedback should concern specific items and processes directly related to the execution of the FMAA. Feedback should be specific and constructive. Examples, references and

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recommendations should be provided to improve the program. Feedback will remain confidential and contact information will only be required if a response is requested.

b. Challenges to assessment findings will not be addressed through this process. They should be addressed during the assessment, and if not satisfactorily addressed by the assessor, Functional Area Lead, Team Coordinator, Team Leader or Senior Member, forwarded through the appropriate chain of command.

13. Records Management. Records created as a result of this instruction, regardless of media and format, shall be managed per reference (e). Requests for copies shall be forwarded to CNRMC for coordination and clearance.



S. A. DOUGLAS
Acting

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SRF-JRMC

Terms and Definitions

1. Apparent Cause. A factor that, through a chain of cause and effect, is identified as a source of the deficiency or non-compliance. Multiple apparent causes may be identified and may work together or independently to cause the deficiency. Each apparent cause must be addressed to effectively correct the deficiency and prevent future occurrences.
2. Checklist. A list of items or tasks for comparison, verification, or other evaluation purposes. Used as a tool to guide the team member through the assessment of each area.
3. Corrective Action. An action to resolve an identified deficiency.
 - a. Temporary Corrective Actions. Temporary actions that move a program towards compliance and reduce the risk associated with non-compliance while permanent solutions can be fully implemented.
 - b. Short-term Corrective Actions. Actions that occur in the short-term that correct the immediate deficiency identified during the FMAA but do not necessarily address the apparent cause or ensure future compliance.
 - c. Long-term Corrective Actions. Actions that address the apparent causes and, once implemented, will ensure continuing compliance. Because these actions will address the underlying causes of the problem and not just the surface issue, there may be a significant period of time before they are fully implemented; and, possibly, an even longer period of time before the effects of those actions become evident.
4. Deficiency. Does not meet established standards or non-compliance with governing directives, policies and regulations.
5. Effectiveness Verification Measures (EVM). Metrics, OQE or other tangible substantiation that demonstrate a deficiency has been resolved, and the corrective actions are producing the desired results. Documentation of the EVM will be reviewed by CNRMC to determine whether the finding will be closed-out.
6. Fleet Maintenance Activity Assessment (FMAA). A formal review of a Fleet Maintenance Activity to assess its ability to execute maintenance and technical support services in accordance with applicable instructions, policy, guidance and technical directives and specifications and to provide an overall evaluation of mission readiness, performance, compliance, alignment and identification of systemic problems.
7. Functional Area. Group of assessment areas categorized by the function performed, usually by the responsible department or code.

8. Functional Area Lead. Senior NRMC assessment team member of the functional area who represents the functional area in briefings and problem resolution.
9. Inspection. Any effort to objectively evaluate an organization or function by any means or method, including audits and assessments.
10. Master Ship Repair / Agreement for Boat Repair. Refers to a company holding either a Master Ship Repair Agreement or Agreement for Boat Repair certification with the Navy in order to provide contracted ship repair and modernization work.
11. NAVSEA Inspector General (IG) Command Inspection. An inspection used by the NAVSEA IG to assess a command or activity's overall compliance with statutory, regulatory and command requirements, and business, operational and workforce governance. It is conducted on a 36-month cycle.
12. Self-Assessment. A critical self-evaluation of organizational performance in order to identify weaknesses in processes, work practices, training, oversight and management. Organizations can effectively prioritize and systemically focus process improvement efforts in areas that will benefit the organization the most in achieving its goals and objectives.
13. Senior Member. Senior ranking officer or civilian in charge of the assessment team during the FMAA.
14. Shipyards Program Review / Availability Program Review. Periodic on-site reviews of Naval Shipyards to assess the compliance with and effective implementation of NAVSEA policies for shipyard operations. SPR is on a two-year cycle with APR conducted approximately 12 months following the SPR.
15. Subject Matter Expert. Person with great deal of knowledge about, or skill, training, or experience in, a particular field, topic, or activity.
16. Team Coordinator. Designated team member responsible for the overall coordination of the assessment team and daily administration of the FMAA during the assessment week. Provides support to the Senior Member and Team Leader.
17. Team Leader. NRMC assessment team member that represents the team during briefings and presentations and is responsible for the successful execution of the FMAA.
18. Tool. Something used as a means of accomplishing a task or purpose, performing an operation or achieving an end. This includes job aids (i.e. checklists, desk guides), hand-held or manual devices or fabricated equipment with the effect of efficient and effective completion of work.

<u>DATE</u>	<u>RESP*</u>	<u>ASSESSMENT MILESTONES</u>
A-90	FC	Issue FMAA Announcement Letter including list of assessment areas
A-75	FC/TC/ FAL/RMC	Conduct initial Assessment Coordination meeting
A-60	FC	Issue Customer Survey Letters to TYCOM/ISIC, Ship COs, and MSR/ABRs
A-45	FC/TC/ FAL/RMC	Conduct interim Assessment Coordination meeting, as needed
A-35	FC/TC	Finalize Assessment Team and assessment area assignments
A-30	RMC	Submit Self-Assessment Report
A-20	FC/TC	Provide list of administrative and logistical support requirements and documents required on-site by the assessment team
A-15	FC	Customer Survey results are due
A-15	FC/TC/ FAL/RMC	Conduct final Assessment Coordination meeting, as needed
A-15	FC	All Security Clearance and Access Control requirements submitted
A-10	RMC	Provide Senior Member visit schedule
A-5	TL/TC/FAL	Conduct pre-brief with CNRMC leadership
A-5	FC/TL/ TC/TM	Conduct Team Coordination meeting and JIT
A-0		Assessment Week
A+15	RMC	Submit ICAR Report
A+15	FC/TL/TC	Issue FMAA Final Report
A+60	RMC	Submit Corrective Action Plan
MTHLY	RMC	Provide Corrective Action Plan progress report

* **FC:** CNRMC FMAA Coordinator
TL: Team Leader
TC: Team Coordinator

FAL: Functional Area Leads
TM: Assessment Team
RMC: Assessed RMC

Notional Assessment Week Schedule

Monday:

0800 Assessment Team Meeting
0900 FMAA In-brief with RMC
1000 Commence Assessment
1430 FALs debrief SM/TL
1530 Daily Status Update with RMC CO (SM/TL)
1630 Daily Wrap-up

Tuesday:

0800 Commence Assessment
1430 FALs debrief SM/TL
1530 Daily Status Update with RMC CO (SM/TL)
1630 Daily Wrap-up

Wednesday:

0800 Commence Assessment
1430 FALs debrief SM/TL
1530 Daily Status Update with RMC CO (SM/TL)
1630 Daily Wrap-up

Thursday:

0800 Commence Assessment
1430 Conclude Assessment, submit all documentation and prepare final out-brief
1530 Daily Status Update with RMC CO (SM/TL)



Friday:

0800 Final Out-brief preparations
1000 RMC Out-brief
PM Final documentation and report inputs (TL/TC/FAL)
PM(TBD) Provide draft report and findings to RMC (TL/TC)

SM: Senior Member
TL: Team Leader



TC: Team Coordinator
FAL: Functional Area Lead

Sample Pre-brief Format

 <p>NAVSEA NAVAL SEA SYSTEMS COMMAND</p>	<h1>(Code XXX)</h1>	
<p><u>Self-assessed:</u></p>	<p><u>Systemic (across the RMCs):</u></p>	
<p><u>Known (previous FMAAs, interactions, etc):</u></p>	<p><u>Additional Information:</u></p>	

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Sample Out-brief Format

	<h1 style="margin: 0;">CXXX – (name)</h1>	
Assessment: (effectiveness)	Trend:	Self-Assessment: (effectiveness)
(nbr)	(assessment area name)	ICAR CAR REC SA Repeat BP
	Effective ↑	# # # # # #
	Partially Effective ↔	
	Not Effective ↓	
	N/A B	
<ul style="list-style-type: none"> Highlight key observations noted during assessment Summarize findings that drive less than Effective evaluations Key recommendations for improvement Take-aways for the command 		

Corrective Action Plan Requirements

1. Each ICAR and CAR finding from the FMAA visit must be addressed in the Corrective Action Plan.
2. A minimum of 3 elements must be entered for each finding.
 - a. Apparent Cause: a factor that, through a chain of cause and effect, is identified as a source of the deficiency or non-compliance.
 - b. Corrective Action
 - (1) At least one corrective action must be identified; however, as many corrective actions can be entered as needed.
 - (2) Identify each corrective action as Temporary, Short-term or Long-term.
 - (3) Each distinct action or group of actions should be listed as separate corrective actions
 - c. Effectiveness Verification Measure (EVM)
 - (1) Metrics, OQE or other tangible substantiation that demonstrates the CAR or ICAR has been resolved and is producing the desired result.
 - (2)The EVM is ultimately what will close the CAR/ICAR.
3. All Corrective Action Plan elements will be approved by NRMC.
4. All EVMs will be closed out by NRMC.

Apparent Cause:

1. Reference Number: identify the reference number of the finding that this item applies to.
2. Element Description: describe what the Apparent Cause is for the referenced finding.
3. POC: identify the RMC point of contact(s) for this item and to whom questions can be directed.
4. Approval Status: communicate the status of the item through the approval process.
 - a. Draft: the RMC is in the process of identifying the Apparent Cause.

b. Submit for Approval: the RMC finished drafting the Apparent Cause and submitted it to CNRMC for approval.

c. Approved – CNRMC: CNRMC reviewed the item and agrees with it; item is approved.

d. Rejected – CNRMC: CNRMC reviewed the item and does not agree with it; item is not approved.

e. Resubmit for Approval: RMC has revised the Apparent Cause initially rejected by CNRMC and is resubmitting for approval.

5. CNRMC Comments: NRMC personnel provide documented feedback to the RMC. Any item rejected by CNRMC (either approval or close-out) will have an explanation provided in this space.

Corrective Action:

1. Reference Number: identify the reference number of the finding that this item applies to.

2. Corrective Action Type: identify whether the Corrective Action is Temporary, Short-Term or Long-Term.

a. Temporary: temporary actions that move a program towards compliance and reduce the risk associated with non-compliance while permanent solutions can be fully implemented. Must be accompanied by a permanent action.

b. Short-term: actions that occur in the short-term that correct the immediate deficiency identified during the FMAA but do not necessarily address the apparent cause or ensure future compliance.

c. Long-term: actions that address the apparent causes and, once implemented, will ensure continuing compliance.

2. Element Description: describe what the Corrective Action is for the referenced finding.

3. Estimated Completion Date: convey the goal date for completion of the Corrective Action.

4. POC: identify the RMC point of contact(s) for this item and to whom questions can be directed.

5. Approval Status: communicates the status of the item through the approval process.

a. Draft: the RMC is in the process of identifying the Corrective Action.

Enclosure (6)

b. Submit for Approval: the RMC finished drafting the Corrective Action and submitted it to CNRMC for approval.

c. Approved – CNRMC: CNRMC reviewed the item and agrees that the Corrective Action will resolve the deficiency; item is approved.

d. Rejected – CNRMC: CNRMC reviewed the item and does not agree that the Corrective Action will resolve the deficiency; item is not approved.

e. Resubmit for Approval: RMC has revised the Corrective Action(s) initially rejected by CNRMC and is resubmitting for approval.

6. Status Update: provide written progress updates to the Corrective Action in this field to CNRMC no less than once a quarter.

7. Revised Completion Date: convey a change to the initial Estimated Completion Date originally approved by CNRMC.

8. Estimated Percent Complete: indicate how far along the Corrective Action is to completion during the periodic status updates.

9. Completion Status: indicate the Corrective Action is complete.

a. In Progress: the RMC is in the process of carrying out the identified Corrective Action(s)

b. Complete: the RMC has completed the corrective actions and self-reports completion.

10. Actual Completion Date: indicate the actual date the Corrective Action was completed.

11. CNRMC Comments: NRMC personnel provide documented feedback to the RMC. Any item rejected by CNRMC (for either approval or close-out) will have an explanation provided in this space.

Effectiveness Verification Measure (EVM):

1. Reference Number: identify the reference number of the finding that this item applies to.

2. Element Description: describe what the EVM is for the referenced finding.

3. Estimated Completion Date: convey the goal date for completion of the EVM.

4. POC: identify the RMC point of contact(s) for this item and to whom questions can be directed.
5. Approval Status: communicate the status of the item through the approval process.
 - a. Draft: the RMC is in the process of identifying the EVM.
 - b. Submit for Approval: the RMC finished drafting the EVM and submitted it to CNRMC for approval.
 - c. Approved – CNRMC: CNRMC reviewed the item and agrees that the EVM will validate that the Corrective Action(s) have produced the desired result; item is approved.
 - d. Rejected – CNRMC: CNRMC reviewed the item and does not agree that the EVM will validate that the Corrective Action(s) have produced the desired result; item is not approved.
 - e. Resubmit for Approval: RMC has revised the EVM initially rejected by CNRMC and is resubmitting for approval.
6. Status Update: provide written progress updates to the EVM in this field to CNRMC no less than once a quarter.
7. Revised Completion Date: convey a change to the initial Estimated Completion Date originally approved by CNRMC.
8. Close-out Status: communicate the status of the EVM/finding throughout the close-out process.
 - a. In Progress: the RMC is in the process of carrying out the identified Corrective Action(s) or validating the outcome of the Corrective Action(s).
 - b. Submit for Close-out: the RMC completed the Corrective Action(s), provided documentation that demonstrates the initial finding has been resolved and the Corrective Actions(s) are producing the desired results, and submitted it to CNRMC for final close-out.
 - c. Closed-out – CNRMC: after all the Corrective Actions have been completed, CNRMC reviewed the provided documentation and concurs that the initial finding is satisfactorily resolved; the finding is closed-out.
 - d. Rejected – CNRMC: after all the Corrective Actions have been completed, CNRMC reviewed the provided documentation and does not concur that the initial finding is satisfactorily resolved; the finding is not closed-out.

Enclosure (6)

e. Resubmit for Close-out: RMC is resubmitting documentation for an EVM whose close-out was initially rejected by CNRMC.

9. Actual Completion Date: indicate the date the EVM was submitted to CNRMC.

10. CNRMC Comments: NRMC personnel provide documented feedback to the RMC. Any item rejected by NRMC (either approval or close-out) will have an explanation provided in this space.

11. Finding Closed: NRMC personnel indicate that the finding has been satisfactorily resolved and no further action is required. If more than one EVM has been submitted for a finding, all EVMs must be closed-out before the finding is considered closed.

12. Date Closed by CNRMC: Convey the actual date that NRMC closed the finding.

Business Rules:

1. All 3 elements (Apparent Cause, Corrective Action, and EVM) must be included for each finding for the elements to be approved. If one is missing, the NRMC reviewer will reject the other elements for that particular finding.

2. All elements of the plan must be approved before a finding can be closed-out.

3. All Corrective Actions must be completed before a finding can be closed-out.

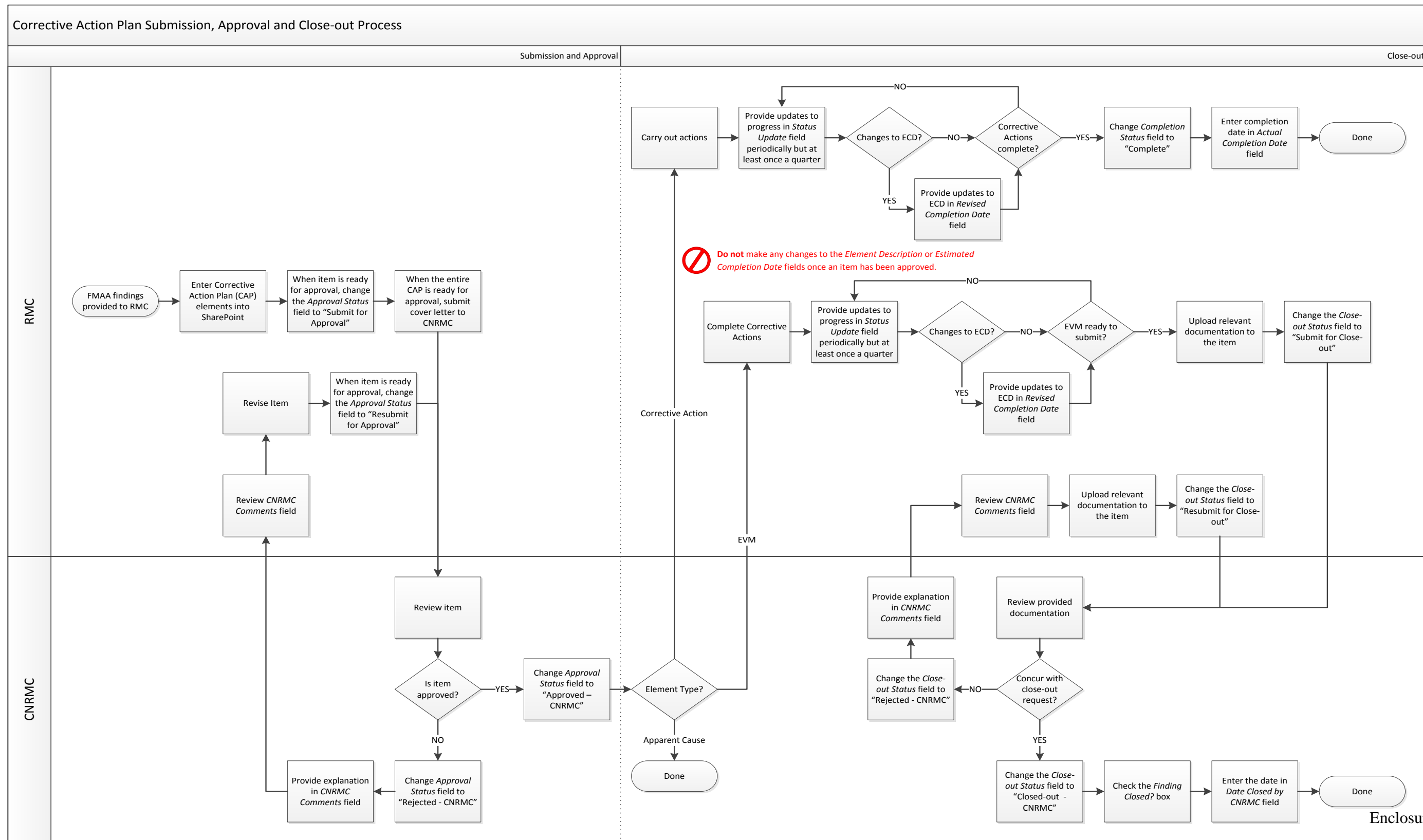
4. Temporary Corrective Actions cannot stand alone. There must be a permanent (i.e., Short-term and/or Long-term) Corrective Action associated with it.

5. RMC will self-report completion of Corrective Actions.

6. Once the element has been approved, do not make any changes to the "Element Description" or "Estimated Completion Date". Utilize the "Revised Completion Date" for ECD changes or "Status Update" field to make changes to the element.

7. Begin each entry in the "Status Update" field with the date; new entries get entered at the beginning/start of the field.

8. CNRMC will not take action unless the appropriate "Status" field has been changed to "(Re) Submit".



Do not make any changes to the Element Description or Estimated Completion Date fields once an item has been approved.

ASSESSMENT AREAS

<u>DEPT</u>	<u>ASSESSMENT AREA</u>
130	Contract Administration Quality Assurance Program
130	RMC Quality Assurance
130	In-Process Quality Assurance
130	Critiques and Trouble Reports
200	Technical Library
200	Total Ship Readiness Assessment
200	Test Program
200	Fleet Technical Assist
200	Key Event and Avail Work Certification
200	Industrial Ship Fire Safety
300	Waterfront Operations
300	Maintenance Availability Planning
300	Maintenance Availability Execution
300	Maintenance Availability Close-out and Records Retention
300	Shipbuilding Specialist (SBS) Practical Demonstrations
300	Project Manager (PM) Practical Demonstrations
300	Deployed Maintenance Planning and Execution
300	Regional Maintenance and Modernization Coordination Office
300	Integrated Project Team Development
300	Risk Assessment and Management
500	Integrated Logistics Support
500	Supply Chain Material Support
500	Integrated Logistics Overhaul and Phased Maintenance Review
600	Comptroller Organization
600	Monthly Mission Execution Review
600	Repair Activity Funds Execution
600	Loans and Borrows Process
600	Reimbursable Work Order – Grantor/Performer
600	Programming, Budget and Execution
900	Maintenance Assist Team
900	Material Control
900	3-M Program
900	Welding and Brazing
900	Structural Repair
900	I-Level Planning and Estimating

<u>DEPT</u>	<u>ASSESSMENT AREA</u>
900	Industrial Plant Equipment
900	Test and Measurement Systems Calibration Management
900	Electronics Repair
900	Electric Motor Repair
900	Electrical Safety and Tool Issue
900	Cableways
900	Gas Turbines
900	Hydraulics
900	Internal Combustion Engine
900	Governor and Injector
900	Flex Hose Repair
900	AC&R Repair
900	Pump Repair
900	Valve Repair
900	Weight Test Handling Equipment
900	Rigging
900	Sail Loft
900	Inside Machine
900	Outside Machine
900	Corrosion Control and Powder Coat Shop
900	Life Raft
900	Fire Control and Weapons Systems
900	Production Shop Safety
1100	Military Training and Development
1100	Navy Afloat Maintenance Training Strategy / Job Qualification Requirement
1100	Civilian Training and Development
1200	Command Mission Requirements
1200	Project Management and Project Support
1200	Project Financials and Audits
1200	Advanced Industrial Management System Management