Directive: OPM-1

Title: Establishment and Maintenance of the Office of Surface Mining Reclamation and Enforcement Directives and Standard Operating Procedures System.

Approval: Lanny E. Erdos, Acting Director  Signature: 

Transmittal Number: 1004

1. **Purpose**

The Office of Surface Mining Reclamation and Enforcement (OSM) Directive OPM-1 establishes the OSM Directives and Standard Operating Procedures (SOP) System, which is used to document and convey the Bureau’s policies, programs, and procedures. Directive OPM-1 also establishes the process and procedures for maintaining OSM’s Directives and SOP System, for modifying or removing existing directives and SOPs, and for adding new directives and SOPs to the Bureau’s inventory. This directive is established in accordance with 381 Departmental Manual, Chapter 1, Directives Management.

2. **Summary of Changes**

a. Adds procedures to comply with Section 508 of the Rehabilitation Act of 1973 (29 U.S.C. § 794 (d)).

b. Adds procedures to prepare and manage Standard Operating Procedures (SOP).

c. Modifies Change Notice procedures to clarify the action being sought.

d. Removes the *Action Request* annex.

e. Removes the *Affirmative Review* annex.

f. Removes the *Definitions* annex.

3. **Policy**

Directives are written communications used to establish OSM policy. SOPs are written communications that do not establish OSM policy, but rather prescribe procedures to be followed routinely for the performance of designated operations or in specific situations to ensure OSM adheres to existing policy provided in applicable policy documents (e.g., statutes, Department of the Interior policies, OSM directives, federal manuals and
regulations, etc.). Directives and SOPs will be organized systematically and readily available to users. They should provide users with only necessary information and be written in a clear, concise manner and in the simplest and most easily understood language for the intended audience. OSM Assistant Directors, Regional Directors, and Staff Office Heads (AD/RD/SOH) have the authority to issue, modify, or rescind an SOP. Only the OSM Director has the authority to issue, modify, or rescind a directive.

4. **Responsibilities**

a. **Director.** Responsible for signing all directives and change notices.

b. **Assistant Directors, Regional Directors, and Staff Office Heads (AD/RD/SOH).** Responsible for creating and maintaining directives and SOPs that pertain to their specific program area. The AD/RD/SOH will:

   (1) Create and maintain directives, SOPs, and supporting materials ensuring they reflect the most current statutory, regulatory, and policy requirements;

   (2) Review and resolve comments to draft directives and SOPs prepared within your program area;

   (3) Review and provide comments to draft directives and SOPs presented for review by other AD/RD/SOH offices;

   (4) Prepare final draft directive materials for the Director’s signature approving new directives and modifying or rescinding existing directives;

   (5) Issue and rescind SOPs;¹

   (6) Ensure that, in accordance with this directive, electronic and paper copies of background materials are provided to the Directives Coordinator and to the Office of Communications as appropriate; and

   (7) Conduct and document an annual review of all directives and SOPs within their program area and provide documentation to the Directive’s Coordinator.

c. **Assistant Director, Finance and Administration (AD/F&A).** Responsible for developing and maintaining the overall Directives and SOP System.

d. **Chief, Division of Administration.** Responsible for overseeing the operation of the Directives and SOP System and designating a Directives Coordinator.

¹ Assistant Directors and Regional Directors are generally the SOP issuing authority for activities within their AD/RD organization. However, this authority may be delegated to Field Office Directors, Division Chiefs, or equivalent positions within the AD/RD organization.
e. **Directives Coordinator.**

(1) OSM’s primary point of contact and subject matter expert for the Bureau’s Directives and SOP System. Works with the Director’s Office and AD/RD/SOH to develop, finalize, and disseminate new or revised directives.

(2) Retain original directive materials in accordance with prescribed records retention policies and procedures.

f. **Office of Communications (OC).**

(1) Receive new electronic directives from the Directives Coordinator. Maintain the most current electronic versions of each active directive on the OSM publicly accessible web page.

(2) Receive notices of rescinded, retired, or inactive directives from the Directives Coordinator. Maintains these products as archives on the OSM intranet.

(3) Receives notices of annual directives reviews from the Directives Coordinator and maintains the information on the OSM publicly accessible web page.

(4) Receive SOPs directly from the issuing AD/RD/SOH. Maintains the most current electronic versions of SOPs on the OSM intranet.

(5) Perform appropriate directives and SOP maintenance activities on OSM’s publicly accessible website and intranet pages as required.

5. **Procedures**

a. The following procedures will be used to prepare, process, review, revise, and rescind OSM directives.

(1) The AD/RD/SOH responsible for maintaining OSM policy necessary to support a statute, regulation, related policy, or other formal requirement based on the authorities delegated in OSM Directive OPM-5, reviews all directives within their program area annually and documents the results in accordance with fiscal year instructions issued by the AD/F&A. Reviews will consider: organizational changes; legislative changes; impact to OSM delegations of authority; and the impact of other events influencing the continued applicability of an existing directive’s content or the need for a
new directive. Annual review results are provided to, and maintained by, the OSM Directives Coordinator.

(2) The responsible AD/RD/SOH, based on the review results, advises the OSM Director if a new directive, or modification to an existing directive, is required.²

(3) The responsible AD/RD/SOH prepares either a new directive in accordance with the Directive Template presented in Appendix B or a change notice in accordance with the Change Notice Template presented in Appendix C to update an existing directive. Directive materials are prepared in accordance with Section 508 standards.³ When proposing changes to existing directive materials, the responsible AD/RD/SOH prepares both a “red line” version (showing the proposed changes) and a “clean” version (showing the final proposed content). The red line version will assist the reviewing AD/RD/SOH during the review process. Upon completion, provide all draft directive materials to the Directives Coordinator.

(4) The Directives Coordinator reviews draft directive materials for compliance with OPM-1. The Directives Coordinator distributes draft directive materials to the appropriate reviewing AD/RD/SOH for a review period of no less than 15 working days. If the directive materials are unusually complex, the Directives Coordinator may extend the review period. If a Change Notice is used to address minor typographical updates, or is the result of a higher-level mandated change, the Directives Coordinator and responsible AD/RD/SOH will determine if the approval process can proceed directly to paragraph 5.a.(8).

(5) The reviewing AD/RD/SOH performs a comprehensive review to ensure the materials are necessary, accurate, complete, without excessive detail, and do not conflict with other existing policies. The reviewing AD/RD/SOH provides comments to the Directives Coordinator using the Comment Form presented in Appendix D.

(6) The Directives Coordinator provides consolidated review comments to the responsible AD/RD/SOH for review and resolution.

(7) The responsible AD/RD/SOH considers each comment for inclusion or

² OSM should not issue a directive simply to restate existing policy issued by the Department of the Interior or other appropriate authority when the existing policy is otherwise suitable for use by OSM. Instead, the responsible AD/RD/SOH should consider issuing supporting Standard Operating Procedure(s) to ensure OSM adheres to the existing policy. See paragraph 5.b.

exclusion in the draft directive materials. Final resolution of each comment will be annotated on the Comment Form. Rejected comments must be supported with a reason for rejection. Unless a compelling reason exists to do otherwise, the responsible AD/RD/SOH shall communicate any rejected comments to the submitting AD/RD/SOH before finalizing the rejection decision. Upon completion, provide all updated draft directive materials, including the resolved Comment Form, to the Directives Coordinator.

(8) The Directives Coordinator transmits the final proposed directive materials to the Director for review.

(9) The Director reviews the proposed directives materials and takes appropriate action before returning the materials to the Directives Coordinator.

(10) The Directives Coordinator maintains original signed directives and all supporting materials in the OSM directives file. The Directives Coordinator also provides a copy of signed directives to the OC in a timely manner for posting to OSM’s publicly accessible website.

(11) The OC posts signed directives to the OSM publicly accessible website upon receipt from the Directives Coordinator. Additionally, the OC moves rescinded, retired, or inactive directives to archive status on the OSM intranet.

(12) The responsible AD/RD/SOH office performs ongoing review to determine the need for new or updated directives. Formal OSM-wide comprehensive directives review occurs annually in accordance with fiscal year instructions issued by the AD/F&A.

b. The following procedures will be used to prepare, process, review, revise, and rescind OSM SOPs.

(1) The AD/RD/SOH responsible for maintaining OSM procedural guidance necessary for OSM to adhere to existing policy provided in applicable policy documents (e.g., statutes, Department of the Interior policies, OSM directives, federal manuals and regulations, etc.) reviews all SOPs within their program area annually and documents the results in accordance with fiscal year instructions issued by the AD/F&A. Reviews will consider: organizational changes; legislative changes; impact to OSM delegations of authority; and the impact of other events influencing the continued applicability of an existing SOP’s content or the need for a new SOP. Annual review results are maintained by the responsible AD/RD/SOH.

4 Based on the authorities delegated in OSM Directive OPM-5, Delegations of Authority.
(2) The responsible AD/RD/SOH, based on the review results, prepares a new SOP or update to an existing SOP using the *Standard Operating Procedure Template* presented in Appendix F as a suggested guide.\(^5\) In instances where processes defined in an SOP bridge multiple AD/RD/SOH areas of responsibility, the SOP will be developed and issued by multiple AD/RD/SOH.

(3) The responsible AD/RD/SOH provides the draft SOP materials to the affected AD/RD/SOH offices for review and comment to ensure the SOP can be implemented by the intended users. If the draft SOP materials represent only minor or administrative changes (e.g., renumeration of page numbers or paragraphs, etc.), the responsible AD/RD/SOH may exercise discretion in determining if affected AD/RD/SOH review is necessary before finalizing.

(4) The responsible AD/RD/SOH takes the following actions with the SOP and all supporting materials once finalized: (1) retain the original; (2) issue a complete copy to affected AD/RD/SOH offices; and (3) provide a complete copy to the OC for posting to the OSM intranet.

(5) The OC posts signed SOPs to the OSM intranet upon receipt from issuing AD/RD/SOH and removes rescinded, retired, or inactive SOPs from the OSM intranet.

(6) The responsible AD/RD/SOH office performs ongoing review to determine the need for new or updated SOPs. Formal OSM-wide comprehensive SOP review occurs annually in accordance with fiscal year instructions issued by the AD/F&A.

6. **Reporting Requirements**

None.

7. **Effect on Other Documents**

When issued, this version of Directive OPM-1 supersedes all previous versions and subsequent Change Notices.

8. **References**

a. [https://www.plainlanguage.gov/](https://www.plainlanguage.gov/).

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\(^5\) AD/RD/SOH should attempt to follow the SOP template’s format, however it may be more appropriate to deviate from the provided format to better communicate the SOP’s content to the reader. Final decisions on SOP format are made by the responsible AD/RD/SOH.
9. **Effective Date**

Upon signature.

10. **Distribution**

By electronic format. All OSM directives are publicly available at http://www.osmre.gov/lrg/directives.shtm.

11. **Appendices**

a. Subject Code Identification.


c. Change Notice Template.

d. Comment Form.

e. Process Flow.

f. Standard Operating Procedure Template.

12. **Contact**

Finance and Administration Directorate, Division of Administration, Directives Coordinator.
Appendix A: Subject Code Identification

<table>
<thead>
<tr>
<th>Subject Code</th>
<th>Definition</th>
<th>Responsible AD/RD/SOH</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADS</td>
<td>Administrative Services</td>
<td>Finance and Administration</td>
</tr>
<tr>
<td>AML</td>
<td>Abandoned Mine Lands</td>
<td>Program Support</td>
</tr>
<tr>
<td>BFM</td>
<td>Budget: Funds Management</td>
<td>Office of Planning, Analysis, and Budget</td>
</tr>
<tr>
<td>EEO</td>
<td>Equal Employment Opportunity</td>
<td>Office for Equal Opportunity</td>
</tr>
<tr>
<td>FIN</td>
<td>Financial Management</td>
<td>Finance and Administration</td>
</tr>
<tr>
<td>GMT</td>
<td>Grants Management Program</td>
<td>Program Support</td>
</tr>
<tr>
<td>INE</td>
<td>Inspection and Enforcement</td>
<td>Program Support</td>
</tr>
<tr>
<td>INF</td>
<td>Information Services and Program Promotion</td>
<td>Information Resources Office</td>
</tr>
<tr>
<td>IT</td>
<td>Information Technology</td>
<td>Information Resources Office</td>
</tr>
<tr>
<td>OPM</td>
<td>Organizational Planning and Management</td>
<td>Finance and Administration</td>
</tr>
<tr>
<td>PER</td>
<td>Personnel</td>
<td>Finance and Administration</td>
</tr>
<tr>
<td>REG</td>
<td>Regulatory Program Development</td>
<td>Program Support</td>
</tr>
<tr>
<td>STP</td>
<td>State and Tribal Programs</td>
<td>Program Support</td>
</tr>
<tr>
<td>TGR</td>
<td>Technical Guidance and Research</td>
<td>Program Support</td>
</tr>
<tr>
<td>TSR</td>
<td>Technical Services and Research</td>
<td>Program Support</td>
</tr>
</tbody>
</table>
Appendix B: Directive Template

Date: ________________

Directive: Enter Subject Code and directive number. See Appendix A for Subject Codes (e.g., “TSR-12”)

Title: Enter Directive Name (e.g., “Post-Act Reclamation Program”)

Approval: Enter Director’s Name, Title

Signature: ____________________________

Transmittal Number: ________________

1 Leave blank. Completed by the OSM Directives Coordinator following the Director’s signature.

1. **Purpose**

The purpose of the directive should be stated in the opening paragraph and should summarize the subject matter of the directive. This section also delineates the scope of applicability, if it is not OSM-wide.

2. **Summary of Changes**

If appropriate, simply state “This is a new directive.” Otherwise, this section is intended to serve as a “bridge” to the directive being replaced. It provides a brief abstract description of the changes since the last directive was published, if applicable. In addition, this section includes the reference to the paragraph(s) where the changes are included, if appropriate.

3. **Policy**

This section will convey the specific policy that the directive is being created to communicate.

4. **Responsibilities**

This section will contain the actions required by each party to develop the directive and implement the policy.

5. **Procedures**

This section will contain instructions sufficient to convey the intent of the directive to the reader. These instructions may include specific policies, procedures, and responsibilities by position. Detailed procedures should not be included in this section, but instead attached as an easy-to-use reference for the user.
Appendix B: Directive Template

a. **Margins/Justifications.**

The borders will be one inch on the right, left, top, and bottom. Text will be left justified with a ragged right margin. Care should be taken to ensure there are no “widow” or “orphan” lines at the bottom or top of a page (one line of text separate from the rest of the paragraph).

b. **Headers.**

Directives will not include information in the page header. The header of each appendix page however will include the appendix name exactly as it is displayed in the parent directive.

c. **Page Numbering.**

Directives will include page numbers centered in the bottom footer of each page. Numbering will begin on the second page with the number “2”. Appendices will have page numbers centered in the bottom footer of each page. Numbering will begin on the first page with the appendix letter and page number (C-1, C-2, etc.).

d. **Tabs.**

All tabs will be standardized at one-half inch. Tabs will be used between line markers and line text. For example, there is a one-half inch tab between the line marker “d.” and the line text “Tabs.” in this section.

e. **Type Size and Font.**

All OSM directives will be created in Times New Roman 12-point font.

f. **Punctuation and Spacing.**

Each mark of punctuation within a sentence is followed by one space. Two spaces may follow a period ending a sentence; however, if used the practice should be consistent throughout the document.

g. **Avoiding Bias**

It can be difficult to prepare written materials without using language that can be read as biased. Adjusting how you use identifiers and other linguistic categories can improve the clarity of your writing and minimize the likelihood of offending your readers. Be aware of how word choice or terminology may come across to your reader. To avoid the bias of using gendered pronouns (she, her, he, his, etc.), consider: rephrasing the sentence; using plural pronouns such as “they” or “their”; replacing the pronoun with an article (use “the” instead of “his”); dropping the pronoun altogether; or replacing the pronoun with a noun such as “employee”, “inspector”, “visitor”, etc.
h. **Heading Levels**

Major text headings will be bold faced and underlined. Subparagraphs may contain text that is either bold faced or underlined, but the use of either method to emphasize ideas should be consistent throughout the document in order to provide ease of transition between heading levels.

\(\text{(1) AD/RD/SOH will strive to restrict headings to no more than three levels. For example, this sentence is in the third level: paragraph 5. h. (1).}\)

6. **Reporting Requirements**

This section is reserved for a listing of any reporting requirements established by the directive. It enables the reader to readily identify all reporting requirements without having to search the entire document to locate them. If there are no requirements in the directive, “None” will be entered immediately following the paragraph heading.

7. **Effect on Other Documents**

This section will indicate if the directive supersedes another or consolidates two or more existing directives into a single version. It may also indicate sections of other directives the directive supersedes or impacts. If there are no effects on other directives, “None” will be entered immediately following the paragraph heading.

8. **References**

This section may be used to cite policy documents, procedure documents, or other documents that are already in existence. Clear cross-references should be made to such material if it is generally known and readily available. All citations should enable the reader to readily locate and consult applicable references. If there are no references, “None” will be entered immediately following the paragraph heading.

9. **Effective Date**

If the directive will become effective upon the Director’s signature, “Upon signature.” will be entered immediately following the paragraph heading. Otherwise, enter the effective date in long form (September 1, 2020).

10. **Distribution**

This section will contain information regarding the distribution. In most cases, the following phrase will be entered below the paragraph heading “By electronic format. All OSM directives are publicly available at [http://www.osmre.gov/lrg/directives.shtm](http://www.osmre.gov/lrg/directives.shtm).”
11. Appendices

This section lists supporting documents related to the directive (e.g., definitions, process flow chart, checklist, handbook, etc.). Appendices will be designated alphabetically. Formatting will be determined by the authoring AD/RD/SOH and should attempt to follow the basic OSM directive format, but may be modified in a way more appropriate to communicate the information contained in the appendix. If there are no appendices, enter “None” immediately following the paragraph heading.

   a. Title of Appendix A.
   b. Title of Appendix B.
   c. Title of Appendix C.

12. Contact

Provide the AD/RD/SOH and responsible office name. For example: “Finance and Administration Directorate, Division of Administration, Directives Coordinator.”
Appendix C: Change Notice Template

Date: 1 ______________

Subject: CHANGE NOTICE

Directive: Enter Subject Code, directive number, and sequence number of change. See Appendix A for Subject Codes (e.g., “TSR-12-1”)

Title: Enter Directive Name (e.g., “Post-Act Reclamation Program”)

Approval: Enter Director’s Name, Title  
Signature: ________________________________

Transmittal Number: 1 ______________

1. **Purpose**

   The purpose of a Change Notice is to document: (1) minor changes (typographical errors, word placement, etc.) to an existing directive or appendix; (2) relevant changes to a small portion of an existing directive or appendix; or (3) rescission of an existing directive or appendix. The specific purpose of each Change Notice will be stated in the opening paragraph. If the purpose is to rescind an existing directive or appendix, provide a brief summary of OSM’s decision in this paragraph. Typically, a Change Notice will not exceed two pages. The changes reflected will be included in the parent directive during the next update, if appropriate.

2. **Summary of Changes**

   This section will include the specific items in the parent directive addressed by this Change Notice. Include references to the directive’s paragraph(s) that are being changed, if appropriate. If the purpose of the Change Notice is to rescind an existing directive, provide additional necessary information on OSM’s decision to rescind in this paragraph, if appropriate.

3. **Effect on Other Documents**

   This section will indicate if the Change Notice supersedes or impacts other directives. If there are no effects on other directives, “None” will be entered immediately following the paragraph heading.

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1 Leave blank. Completed by the OSM Directives Coordinator following the Director’s signature.
4. **Effective Date**

If the Change Notice will become effective upon the Director’s signature, “Upon signature.” will be entered immediately following the paragraph heading. Otherwise, enter the effective date in long form (e.g., September 1, 2020).

5. **Distribution**

This section will contain information regarding the distribution. In most cases, the following phrase will be entered below the paragraph heading “By electronic format. All OSM directives are publicly available at [http://www.osmre.gov/lrg/directives.shtm](http://www.osmre.gov/lrg/directives.shtm).”

6. **Contact**

Provide the AD/RD/SOH and responsible office name (e.g., “Program Support Directorate, Division of Regulatory Support”).
Appendix D:  Comment Form

1.  **Purpose**

The purpose of this form is documenting the results of a comprehensive review of draft directive materials to ensure they are necessary, accurate, complete, without excessive detail, and do not conflict with other existing policies and procedures.

2.  **Instructions for Use**

Reviewer will provide comments in the following format. Use continuation page(s) if needed until all comments are captured. Send completed comment forms to the OSM Directives Coordinator for maintenance with parent directive materials.

   **Commenter Name:**

   **Organization:**

   **Telephone Number:**

   **Email Address:**

   **Directive Under Review:**

   **Comment Number 1**
   Section:
   Page:
   Paragraph or Line Number:
   Comment:

   **Comment Number 2**
   Section:
   Page:
   Paragraph or Line Number:
   Comment:

   *Etc...*

   Page # _____ of _____ total comment pages.
The purpose of this flowchart is visually defining the process for developing and maintaining:
- OSM Directives (E.1); and
- OSM Standard Operating Procedures (E.2)

**E.1: OSM Directives**

Start

Responsible AD/RD/SOH performs annual review of their directives; provides review results to Directives Coordinator.

E.1.1

Responsible AD/RD/SOH advises OSM Director of intent to create a new directive or modify an existing directive.

E.1.2

Responsible AD/RD/SOH prepares a new directive or change notice; provides draft materials to Directives Coordinator.

E.1.3

Directives Coordinator reviews draft materials for compliance with OPM-1.

E.1.4

Compliant with OPM-1?

E.1.5

Yes

Directives Coordinator provides consolidated review comments to responsible AD/RD/SOH for resolution.

E.1.9

No

AD/F&A publishes annual review guidance. Directives Coordinator maintains review results; provides review dates to OC for update to OSM’s publicly facing website.

Yes

Responsible AD/RD/SOH resolves comments and provides updated draft materials to Directives Coordinator.

E.1.10

Directives Coordinator provides final proposed directives package to OSM Director for review and approval.

E.1.11

OSM Director acts; returns package to Directives Coordinator.

E.1.12

Yes

Director Signed?

E.1.13

No

Directives Coordinator provides approved materials to OC for posting to publicly accessible website.

E.1.14

Yes

OC updates OSM’s publicly accessible website with approved directive materials; archive other materials as needed.

E.1.15

Yes

Period of Use. Time between comprehensive directives review periods not to exceed one-year.

E.1.16

Responsibility AD/RD/SOH offices perform ongoing review to determine need for new or updated directives. Formal OSM-wide comprehensive review occurs annually.

E-1
<table>
<thead>
<tr>
<th>#</th>
<th>Process</th>
<th>Owner</th>
<th>Variation</th>
</tr>
</thead>
<tbody>
<tr>
<td>E.1.1</td>
<td>Perform annual review all directives within program area. Provide review results to Directives Coordinator.</td>
<td>Responsible AD/RD/SOH</td>
<td>Annual review guidance published by AD/F&amp;A.</td>
</tr>
<tr>
<td>E.1.2</td>
<td>Advise OSM Director of intent to create a new directive or modify an existing directive.</td>
<td>Responsible AD/RD/SOH</td>
<td>When applicable.</td>
</tr>
<tr>
<td>E.1.3</td>
<td>Prepare a new directive or change notice. Provide draft materials to Directives Coordinator.</td>
<td>Responsible AD/RD/SOH</td>
<td></td>
</tr>
<tr>
<td>E.1.4</td>
<td>Review draft materials for compliance with OPM-1.</td>
<td>Directives Coordinator</td>
<td></td>
</tr>
<tr>
<td>E.1.5</td>
<td>Decision Point – Are draft directive materials compliant with Directive OPM-1? If YES, proceed to E.1.6. If NO, proceed to E.1.3.</td>
<td>Directives Coordinator</td>
<td></td>
</tr>
<tr>
<td>E.1.6</td>
<td>Decision Point – Is review of draft directive materials necessary by AD/RD/SOH community? If YES, proceed to E.1.7. If NO, proceed to E.1.11.</td>
<td>Responsible AD/RD/SOH and Directives Coordinator</td>
<td></td>
</tr>
<tr>
<td>E.1.7</td>
<td>Distribute draft directive materials to AD/RD/SOH community for review.</td>
<td>Directives Coordinator</td>
<td></td>
</tr>
<tr>
<td>E.1.8</td>
<td>Review draft directive materials; provide comments to Directives Coordinator.</td>
<td>AD/RD/SOH community</td>
<td></td>
</tr>
<tr>
<td>E.1.9</td>
<td>Provide consolidated review comments to responsible AD/RD/SOH for resolution.</td>
<td>Directives Coordinator</td>
<td></td>
</tr>
<tr>
<td>E.1.10</td>
<td>Resolve review comments and provide updated draft materials to Directives Coordinator.</td>
<td>Responsible AD/RD/SOH</td>
<td></td>
</tr>
<tr>
<td>E.1.11</td>
<td>Provide final proposed directives package to OSM Director for review and approval.</td>
<td>Directives Coordinator</td>
<td></td>
</tr>
<tr>
<td>E.1.12</td>
<td>Action taken on proposed directive. Package returned to Directives Coordinator.</td>
<td>OSM Director</td>
<td></td>
</tr>
<tr>
<td>E.1.13</td>
<td>Decision Point – Did the Director sign the proposed directive? If YES, proceed to E.1.14. If NO, proceed to E.1.3.</td>
<td>Directives Coordinator</td>
<td></td>
</tr>
<tr>
<td>E.1.14</td>
<td>Provide approved materials to OC for posting to publicly accessible website.</td>
<td>Directives Coordinator</td>
<td></td>
</tr>
<tr>
<td>E.1.15</td>
<td>Update OSM’s publicly accessible website with approved directive materials. Archive other materials as needed.</td>
<td>OC</td>
<td></td>
</tr>
<tr>
<td>E.1.16</td>
<td>Period of use. No later than one year from previous annual review, step E.1.1 repeats.</td>
<td>Responsible AD/RD/SOH</td>
<td>Perform ongoing review and initiate appropriate actions when identifying the need for new or updated directives. Formal OSM-wide comprehensive review occurs annually.</td>
</tr>
</tbody>
</table>
E.2: OSM Standard Operating Procedures

Start

Responsible AD/RD/SOH performs annual review of their SOPs.

E.2.1

Responsible AD/RD/SOH, based on review results, prepares a new SOP or modifies an existing SOP.

E.2.2

Affected AD/RD/SOH review necessary?

E.2.3

Yes

Responsible AD/RD/SOH provides draft SOP to affected AD/RD/SOH offices for review and comment.

E.2.4

Affected AD/RD/SOH offices review draft SOP and provide comments to responsible AD/RD/SOH for resolution.

E.2.5

Responsible AD/RD/SOH resolves review comments and issues SOP to affected AD/RD/SOH offices; provides copy to OC.

E.2.6

OC updates OSM’s intranet with approved SOP materials.

E.2.7

Responsible AD/RD/SOH offices perform ongoing review to determine need for new or updated SOPs. Formal OSM-wide comprehensive review occurs annually.

E.2.8

AD/F&A publishes annual review guidance. AD/RD/SOH maintain review results locally.

Period of Use.
Time between comprehensive SOP review periods not to exceed one-year.

E.2.8
# Process Owner Variation

## E.2: OSM Standard Operating Procedures

<table>
<thead>
<tr>
<th>#</th>
<th>Process</th>
<th>Owner</th>
<th>Variation</th>
</tr>
</thead>
<tbody>
<tr>
<td>E.2.1</td>
<td>Perform annual review all SOPs within program area. Maintain review results locally.</td>
<td>Responsible AD/RD/SOH</td>
<td>Annual review guidance published by AD/F&amp;A.</td>
</tr>
<tr>
<td>E.2.2</td>
<td>Prepare new SOP or update to an existing SOP using the <em>Standard Operating Procedure Template</em> (Appendix F) as a suggested guide.</td>
<td>Responsible AD/RD/SOH</td>
<td>When an SOP bridges multiple areas of responsibility, the SOP will be developed and issued by multiple AD/RD/SOH.</td>
</tr>
<tr>
<td>E.2.3</td>
<td>Decision Point – Is affected AD/RD/SOH office review of draft SOP necessary? If YES, proceed to E.2.4. If NO, proceed to E.2.6.</td>
<td>Responsible AD/RD/SOH</td>
<td></td>
</tr>
<tr>
<td>E.2.4</td>
<td>Provide draft SOP to affected AD/RD/SOH offices for review and comment.</td>
<td>Responsible AD/RD/SOH</td>
<td></td>
</tr>
<tr>
<td>E.2.5</td>
<td>Review draft SOP and provide comments to responsible AD/RD/SOH for resolution.</td>
<td>Affected AD/RD/SOH offices performing review</td>
<td></td>
</tr>
<tr>
<td>E.2.6</td>
<td>Resolve review comments and issue SOP to affected AD/RD/SOH offices and provide a copy to OC.</td>
<td>Responsible AD/RD/SOH</td>
<td></td>
</tr>
<tr>
<td>E.2.7</td>
<td>Update OSM’s intranet with approved SOP materials.</td>
<td>OC</td>
<td></td>
</tr>
<tr>
<td>E.2.8</td>
<td>Period of use. No later than one year from previous annual review, step E.2.1 repeats.</td>
<td>Responsible AD/RD/SOH</td>
<td>Perform ongoing review and initiate appropriate actions when identifying the need for new or updated SOPs. Formal OSM-wide comprehensive review occurs annually.</td>
</tr>
</tbody>
</table>
Appendix F: Standard Operating Procedure Template

Subject: OSM Standard Operating Procedure (SOP) XXXX-XX-XX, Title (see page F-3 of this appendix for numbering guidelines)

Version Number: Enter the current FY and the version of this SOP issued within that FY

Effective Date: Enter “Effective Upon Issuance”, or a specific future date

Responsibility: Entity the responsible office, position title, etc. for this SOP

Primary Reference(s): Appropriate statute, regulation, or policy(ies)

1. **Purpose**

   Explain in plain terms the purpose of the SOP. Provide context if appropriate.

2. **Scope**

   Explain who or what the SOP applies to and who or what it does not apply to.

3. **Summary of Changes**

   Summarize the major changes from the previous version, or simply state “This is a new SOP”.

4. **Definitions**

   a. Provide definitions to key terms the reader may not be familiar with.

5. **Procedures**

   Provide sufficient instructions to the reader.

   a. Step 1.

      (1) Sub-step 1.

   b. Step 2, etc.

6. **Contact**

   Name and contact information for additional information.
Attachments: As needed.

Issued by:

____________________________________/_________________
Issuing Authority     Date

*Administrative Note:* AD/RD/SOH should attempt to follow the SOP template’s format, however it may be more appropriate to deviate from the format to better communicate the SOP’s content to the reader. Final decisions on SOP format are made by the responsible AD/RD/SOH.
OSM SOP Numbering Guidelines:

All OSM SOPs are identified by three groups of numbers, and a title (e.g., OSM SOP XXXX-XX-XX, Title).

1. The first set of numbers identifies the organizational code of the office issuing the SOP. For example, SOP 2100-02-02, Survey Procedures, is issued by the Division of Administration (organizational code 2100), within the AD/F&A.

<table>
<thead>
<tr>
<th>OSM AD/RD/SOH Office</th>
<th>Organizational Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director’s Office</td>
<td>1000</td>
</tr>
<tr>
<td>Office for Equal Opportunity (OEO)</td>
<td>1001</td>
</tr>
<tr>
<td>Office of Communications (OC)</td>
<td>1200</td>
</tr>
<tr>
<td>Office of Planning, Analysis and Budget (OPAB)</td>
<td>1300</td>
</tr>
<tr>
<td>Information Resources Office (IRO)</td>
<td>1400</td>
</tr>
<tr>
<td>Assistant Director, Finance and Administration (AD/F&amp;A)</td>
<td>2000</td>
</tr>
<tr>
<td>Assistant Director, Program Support (AD/PS)</td>
<td>3000</td>
</tr>
<tr>
<td>Interior Region 1 and 2 (OSM Regional Headquarters)</td>
<td>4000</td>
</tr>
<tr>
<td>Interior Regions 3, 4, and 6 (OSM Regional Headquarters)</td>
<td>5000</td>
</tr>
<tr>
<td>Interior Regions 5, 7-11 (OSM Regional Headquarters)</td>
<td>6000</td>
</tr>
</tbody>
</table>

2. The second set of numbers identifies the “functional group” number. This two-digit number is assigned by the issuing office and is used to identify the higher-level function to which an SOP belongs. For example, SOP 2100-02-02, Survey Procedures, belongs to the Personal Property Management functional group 02, which is defined by the Division of Administration (the SOP’s issuing office). A functional group may hold multiple SOPs.

3. The third set of numbers and the title identify a specific SOP. The two-digit number and title are assigned by the issuing office and are unique to a specific SOP within a functional group. For example, SOP 2100-02-02, Survey Procedures, identifies the specific SOP by number and title within a functional group.
Subject: OSM Standard Operating Procedure (SOP) 2100-02-02, Survey Procedures

Version Number: FY 2020-01

Effective Date: Effective Upon Issuance

Responsibility: OSM Personal Property Manager

Primary Reference(s): Department of the Interior Acquisition, Assistance, and Asset Policy 0111 (DOI-AAAP-0111), Stolen, Lost, Damaged, or Destroyed Personal Property.

1. **Purpose**

The purpose of this Standard Operating Procedure (SOP) is to establish procedures to determine appropriate action for OSM accountable personal property that is stolen, lost, damaged, or destroyed. Procedures include instructions to determine and execute the appropriate actions; and the process for documenting and adjudicating the theft, loss, damage, or destruction of personal property.

2. **Scope**

These procedures align with Department of the Interior (DOI) policy and apply to OSM’s accountable personal property assets. Loss of private property falls outside the scope of OSM’s survey procedures and is instead handled through the tort claims process.

3. **Summary of Changes**

This is a new SOP.

4. **Definitions**

   a. Accountable Property Officer (APO) – An individual responsible for ensuring effective personal property management within their area of assignment. Assistant Directors and Regional Directors are normally designated as APOs. The APO is responsible for designating the Property Management Specialists (PMS) when property management is a collateral duty. The APO also designates Custodial Property Officers (CPO) and Receiving Officers (RO). APOs are designated in writing by the Assistant Director, Finance and Administration (as OSM’s Senior
Appendix F: Standard Operating Procedure Template

Asset Manager). Additionally, APO responsibilities may be delegated by APOs to senior manager(s) in their organization who are not already designated as a Custodial Property Officer.

b. Cognizant Employee (CE) – An employee who is assigned personal property for use in the performance of their duties. ALL OSM employees will be identified as CEs and will be assigned personal responsibility for property used in the performance of their duties. If property is stolen, lost, damaged, or destroyed, the CE may be held financially liable.

c. Custodial Property Officer (CPO) – An individual, designated in writing by the APO, who is responsible for the control of all personal property under their custody. Division/Branch Chiefs, Field/Area Office Directors, and Supervisory Auditors are normally designated as the CPO.

d. Report of Survey – Form DI-103 used to document the circumstances surrounding stolen, lost, damaged, or destroyed property and to report findings and make determinations for the relief of accountability.

e. Reviewing Authority – An official responsible for reviewing completed Reports of Survey. The Reviewing Authority is generally a supervisory employee at the next higher organizational level than where the surveyed property was assigned. A Reviewing Authority may not be the Survey Officer acting in the survey under consideration. A Reviewing Authority may be the Accountable Property Officer (APO) for the property involved.

f. Survey Officer – An individual, designated in writing by an APO, to investigate loss of Government property when an initial determination of gross negligence is established. Survey Officers are required to complete a Report of Survey documenting the investigation, and to arrive at findings and make determinations about the disposition of the property and financial liability for the loss. A Survey Officer must not be the Cognizant Employee (CE) responsible for the surveyed property or that CE’s immediate supervisor.

5. Procedures

Stolen, lost, damaged, or destroyed property should be reported without delay to the APO. The APO—with technical assistance from the responsible OSM Property Management Specialist—should use the information provided in DOI-AAAP-0111, Stolen, Lost, Damaged, or Destroyed Personal Property, Technical Operating Procedures, Table 1.0 and Table 1.1 to proceed as described, depending on the accountable action determination.

a. No Negligence. If the accountable action determination is no negligence, the steps provided in Table 2.0 must be implemented. There is no financial liability for a no negligence determination.

b. Simple Negligence. If the accountable action determination is simple negligence, the steps provided in Table 3.0 must be implemented. There is no financial liability for a simple negligence determination.
c. Gross Negligence. If the accountable action determination is gross negligence, the steps provided in Table 4.0 must be implemented. These steps include the requirement for the APO to designate a Survey Officer to investigate the incident by which an asset is stolen, lost, damaged, or destroyed. A sample Survey Officer designation memorandum is provided with this ASOP (attachment 2).

6. Contact

For additional information or questions, contact Don Fowlkes, OSM Property Management Officer at (202) 208-2855 or dfowlkes@osmre.gov.

Attachments:
1 – Form DI-103, Report of Survey (fillable)
2 – Sample Survey Officer Designation Memorandum

Issued by:

_____________________________________________________________________/  __________________________
Sean W. Strate          Date
Chief, Division of Administration