

MPR 1410.1

REVISION G-1

EFFECTIVE DATE: January 31, 2013

EXPIRATION DATE: January 31, 2023

MARSHALL PROCEDURAL REQUIREMENTS

DA01

ORGANIZATIONAL ISSUANCES

With Change 1 (4/25/18)

COMPLIANCE IS MANDATORY

DIRECTIVE IS UNCONTROLLED WHEN PRINTED

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DOCUMENT HISTORY LOG

| Status (Baseline/ Revision/ Change/ Revalidation/ Canceled) | Document Revision/ Change | Effective Date | Description |
|--|---------------------------------|-------------------|---|
| Baseline | | 5/14/99 | Document contains sections pertaining to the control of Organizational Issuances from MSFC-P05.1 and supporting Centerwide Work Instructions and incorporates them into a Directive. Previous history retained in system as part of canceled or superseded ISO Document files. |
| Revision | A | 8/16/99 | Changes made to reflect new MSFC reorganization. |
| Revision | B | 4/3/00 | Corrected References, modified definition and changed 2.1.8 to add requirement for Organizational Manager to appoint an individual to update the Master Custodian List. |
| Revision | C | 10/29/2004 | Changed Format to Times New Roman. Changed Document Type to MPR (Marshall Procedural Requirements) for this and applicable documents. Changed requirements to "shall" throughout. Rewrote definitions 1.2, 1.3, 1.5, 1.7, 1.8, 1.10, 1.11 1.13, 1.15, 1.18, 1.19. Rewrote sections 2.1.2, 2.1.5, 2.1.6, 2.1.6.1, 2.1.6.6, 2.1.8, 2.2.3, 2.2.4.1, 2.2.4.6, 2.2.4.7, 2.2.5. Rewrote section 3.1 to match statements of section 2. Added records to section 4. Rewrote flow chart to match new statements of section 3. |
| Revision | D | 03/16/2006 | Updated sections P.4 and Table of Contents. Added or updated definitions for approving authority, authority for document, effective date, expiration date, organization, organizational issuance, and submittal date. Corrected organizational manager title (2.1.3). Separated and updated Organizational Manager's and Master List Custodian's responsibilities and added approval authority and effective date records requirements (2.1.6 and 2.3). Added allowance for modification of procedures (2.2.3.1). Updated information required on document to add submittal date and authority for document (2.2.4). Added expiration date requirements (2.2.8). Corrected section 3.1. Corrected Records Section to meet latest NRRS (4.). Added Appendix A to show document/Master List dates. Corrected paragraph numbering and made editorial corrections throughout. |
| Revision | E | 9/08/2008 | Revised 2. Applicability statement to address the applicability of this directive to the Michoud Assembly Facility. Corrected MIDL reference in 1.17. Updated document references. |
| Revision | F | 10/22/2009 | Corrected reference P.4.c. Deleted duplicate reference in P.5. Revised/added definitions of form, gender-neutral language, organizational issuance, and release date. Revised sections 2.1.11 to allow for lengthened expiration periods. Added sec. 2.1.12. Clarified documentation requirements in 2.2.3.1 Made allowance for cut and paste "must" and "will" in 2.2.3.2. Changed 2.2.4.2.d to allow various dates on a document. Revised the following sections: 2.2.4.2.f to allow project identifiers on OWIs; 2.2.8.1 to allow for lengthened review periods; 2.3.2.4 to allow various dates on master list; 2.3.2.6 to allow program code on master list; 2.3.2.8 to allow external document references to be in the document, and to remove the requirement for a unique number; 2.6.1 to allow for time gap between approval and placing on master list. Made nomenclature more consistent in section 3. Revised sec. 4.2.3 for periodic review records. Made nomenclature more consistent in section 5. Deleted previous Appendix A content. Moved References to Appendix A. [On 3/17/11, at the request of the OPRD, administrative changes were made on cover to correct title, at P.1 Purpose to add b., at P.5 References and Appendix A to denote deletion, at 1.12 to remove implied requirement, at 1.22 to remove purpose statement to P.1 b., at 2.2.3.2 c. to remove MAF for clarification, at 5. Flow Diagrams to add numbers, and throughout to use terms and |

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| | | | acronyms consistently.] |
| Revision | G | 1/31/2013 | Major rewrite minimized Center-level requirements. Title revised from "Document and Data Control for Organizational Issuances." Format updated to new MPR template requirements per MPR 1410.2 & MWI 1410.1. |
| Change | 1 | 4/25/2018 | On 4/25/18, at the request of the OPRD, a change was made to the cover to indicate that the directive is expired but in review. Contact Directives Manager for Direction. |
| Revalidation | G-1 | 7/18/2019 | Directive released for mandatory five year review, processing as a "Revalidation." No changes in requirements or responsibilities. Changed NPR 1441.1 to NRRS 1441.1 and removed paragraph 2.1.1.2 which was a restatement of 2.1. Example added at 2.1. |

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PREFACE

P.1 PURPOSE

To establish Center-specific requirements for implementing Agency-level policy (NPD 1400.1) in Organizational Issuances (OIs).

P.2 APPLICABILITY

- a. This MPR applies to Center personnel, programs, projects, and activities, including contractors and resident agencies to the extent specified in their respective contracts or agreements. (“Contractors,” for purposes of this paragraph, include contractors, grantees, Cooperative Agreement recipients, Space Act Agreement partners, or other agreement parties.)
- b. This MPR applies to the Michoud Assembly Facility.
- c. This MPR applies the following: all mandatory actions (i.e., requirements) are denoted by statements containing the term “shall.” The following terms also apply: “may” or “can” denote discretionary privilege or permission; “should” denotes a good practice and is recommended, but not required; “will” denotes expected outcome; and “are/is” denotes descriptive material.
- d. This MPR applies the following: all document citations are assumed to be the latest version unless otherwise noted.

P.3 AUTHORITY

NPD 1400.1, Documentation and Promulgation of Internal NASA Requirements and Charters

P.4 APPLICABLE DOCUMENTS AND FORMS

NRRS 1441.1, NASA Records Retention Schedules (NRRS)

P.5 MEASUREMENT/VERIFICATION

- a. Verification of periodic reviews.
- b. Verification of OI Master List Web page.

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P.6 CANCELLATION

MPR 1410.1F, Document and Data Control for Organizational Issuances, dated October 22, 2009.

Original signed by

Patrick E. Scheuermann
Director

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CHAPTER 1. RESPONSIBILITIES

1.1 A Direct Report of a Directorate or Office, or designee:

1.1.1 Determines the need for and ensures development of a documented internal procedure(s) in compliance with NPD 1400.1 to cover any additional requirements, or unique processes, that are necessary for the effective control of OIs within the Directorate/Office.

1.1.2 Determines the need for and establishes any special delegations of Approval Authority for OIs within respective Directorate/Office.

1.1.3 Coordinates with other Direct Reports, or designees, for appropriate Approval Authority when OIs apply to multiple Directorates/Offices.

1.1.4 Assigns an Office of Primary Responsibility Designee (OPRD) for each OI.

1.1.5 Assigns an OI Master List Custodian(s).

1.2 An Approval Authority or designee:

1.2.1 Ensures OIs are reviewed for adequacy prior to issue to perform work.

1.2.2 Renders final disposition in accordance with this MPR and documented internal procedures.

1.2.3 Signs final, approved OI. (Electronic signatures are acceptable.)

1.3 An OI OPRD:

1.3.1 Prepares a baseline, revision, cancellation, deviation, waiver or revalidation per this MPR and any Directorate/Office documented internal procedure.

1.3.2 Ensures pertinent background information is provided for review of draft baseline, revision, cancellation, deviation, waiver or revalidated OI.

1.4 An OI Master List Custodian:

1.4.1 Maintains a Directorate/Office Master List of OIs.

1.4.2 Creates and maintains distribution lists or documented records of distribution (updating as required) for OIs for which Master Lists are not readily available to the Users.

1.4.3 Ensures that draft OIs are not included on the same master list as approved documents.

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1.4.4 Ensures cancelled (invalid/obsolete) OIs are removed from the OI Master List and any other points of issue.

1.5 The MPR 1410.1 OPRD:

1.5.1 Verifies periodic reviews are being conducted.

1.5.2 Verifies OI Master List Web page is current and accurate.

1.6 A User:

1.6.1 Assures against unintended use of any previous/obsolete versions of OIs.

1.6.2 Should provide feedback on any inconsistencies or errors in OIs to an OPRD or Direct Report.

1.6.3 May participate in reviews of OIs.

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CHAPTER 2. INTERNAL PROCESSES

INTRODUCTION. OIs are part of the MSFC Management System and include, but are not limited to, organizational work instructions (OWIs), plans, procedures, guidance documents, memoranda, and organizational forms.

2.1 Internal processes shall be documented for controlling OIs when additional organizational requirements are established by the Directorates/Offices (e.g., IS01-OWI-001).

2.1.1 PREPARATION.

2.1.1.1 Draft baselines, revisions, cancellations, deviations, waivers, and revalidations shall be prepared according to this MPR and any organizational specific documented control procedures.

a. Every OI shall have an OPRD assigned by the Direct Report or designee.

Note: An optional OI template is available from the OI Master List Web page.

2.1.1.3 Requirements for requirement statements are documented in NPD 1400.1.

2.1.1.4 Draft OIs shall be clearly identified as “Draft.”

Note: Changes/Revisions should be identified in the OI or in an attachment where feasible.

2.1.1.5 Forms and memoranda (used to serve as work instructions) shall include a:

a. Unique number.

b. Revision level or date.

2.1.1.6 OWIs and procedures shall include a:

a. Unique number.

b. Revision level.

c. Title.

d. A date (an effective date, release date, or other appropriate date as identified in the Directorate/Office’s procedures).

Note: The title of the date (i.e., type of date) is noted in each OI.

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e. An Approval Authority cited by name and/or title.

Note: The Approval Authority name and/or title may be identified on the organizational master list instead of directly on the OI itself.

(1) Any Approval Authority from other Directorates/Offices performing activities as a part of a documented process shall be included.

f. Office of Primary Responsibility (OPR) office code or project name, or other identification.

Note: OPR office code, project name or other identification ensures the unique identification of OIs, and aids the User in identification of OIs for use in the performance of work.

2.1.2 REVIEW.

2.1.2.1 OI baselines, revisions, cancellations, deviations, waivers, and revalidations shall be reviewed for adequacy prior to issue to perform work.

2.1.2.2 Pertinent background information shall be included as part of the review process.

2.1.2.3 Objective evidence of reviews shall be maintained as a record per NPR 1441.1.

2.1.2.4 Any additional requirements established by Directorates/Offices for the review process shall be documented in the Directorate/Office's internal procedures.

2.1.3 DISPOSITION.

2.1.3.1 Draft baselines, revisions, cancellations, deviations, waivers, and revalidations shall be dispositioned by an Approval Authority designated by a Direct Report or designee.

Note: The Approval Authority is normally the NASA manager with authority over an organizational element or activity.

2.1.3.2 A final, approved OI shall be signed by the Approval Authority or designee.

2.1.3.3 Any OI jointly issued with another Directorate/Office shall be dispositioned by all designated Approval Authorities.

2.1.3.4 The Approval Authority disposition shall be maintained as a record.

2.1.4 AVAILABILITY.

2.1.4.1 An OI Master List shall be maintained by a Master List Custodian.

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2.1.4.2 A Master List Custodian shall be assigned by a Direct Report.

2.1.4.3 Each Master List location and custodian information shall be provided for the Marshall Integrated Document Library (MIDL) via the Center Directives Manager.

2.1.4.4 OIs shall be legible/readable.

2.1.4.5 All Master Lists shall provide the following information for each OI:

- a. Unique number.
- b. Revision level of the correct version.
- c. Title.
- d. Date (with type of date used).
- e. OPR office code or project name or other identification.

2.1.4.6 All of the following information shall be provided on the OI Master List (or within the OI itself) for each applicable document cited in an OI that is not available through the MIDL or an official public Web site (e.g., for state or local laws and regulations):

- a. Document number.
- b. Document title.
- c. A pointer to the location where the correct version may be found.

Note: A pointer may be a physical location or point of contact. Examples of document types that may be applicable include external standards, books, equipment operating procedures/manuals.

2.1.4.7 All Master Lists shall be readily available to Users to preclude the use of invalid and/or obsolete documents.

2.1.4.8 Back-up of the correct version(s) of OIs shall be readily available in contingency situations (when time criticality of information in an OI warrants).

Note: Back-ups of the correct version(s) of OIs may be in any format.

2.1.4.9 Distribution lists or documented records of distribution shall be created and maintained (updating as required) for OIs for which OI Master Lists are not readily available to Users in accordance with the Directorates/Offices documented internal procedure(s).

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2.1.4.10 Draft OIs shall not be included on the same Master List as approved OIs.

2.1.4.11 Any inconsistencies or errors in an OI should be reported to the OPRD or Master List Custodian.

2.1.4.12 Cancelled (invalid/obsolete) OIs shall be removed from the Master List (and any other point of issue) upon disposition by an Approval Authority.

2.1.4.13 An annual verification of the currency and accuracy of OI Master List Web page shall be issued to each Directorate/Office by the MPR 1410.1 OPRD.

2.1.5 ASSURANCE AGAINST UNINTENDED USE OF OBSOLETE OIs.

2.1.5.1 To assure against unintended use of any previous/obsolete version of any OI on a Master List, Users shall comply with one of the following:

- a. Checking the Master Lists or other appropriate documented authority.

Note: Contractual or customer agreements may supersede internal requirements.

- b. Destroying obsolete copies of OIs.

- c. Marking on the front of an OI or its storage location, as appropriate, “FOR HISTORICAL PURPOSES ONLY,” “FOR LIMITED APPLICABILITY,” “REFERENCE,” “SUPERCEDED,” or other identifying status.

Note: An OI is uncontrolled when downloaded (printed or copied).

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CHAPTER 3. PERIODIC REVIEWS

3.1 OI internal procedures shall document any additional requirements (as determined by the Directorate/Office) to supplement the process and requirements for periodic review provided by this MPR.

3.2 The maximum period of time between reviews shall be no more than 1 year for OIs containing hazardous or critical operations.

3.3 The maximum period of time between reviews shall be no more than 3 years for OIs which delineate organizational instructions/procedures.

Note: OIs should be reviewed and updated any time there are changes in the Directorate/Office or re-organizations.

3.4 The maximum period of time between reviews shall be no more than 20 years for facility or hardware operation procedures.

Note: Facility or hardware reviews are necessary to ensure that OIs reflect current facility, equipment, and/or hardware operations over time.

3.5 Documentation of periodic reviews shall be maintained as records.

Note: Periodic review documentation may consist of memos, checklists, annotations on a copy of a document, or any other substantiation, and should include the review date, disposition, and Approval Authority.

3.6 An annual verification of periodic reviews shall be conducted by the MPR 1410.1 OPRD.

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APPENDIX A

DEFINITIONS

Applicable Document. A document called out in the body of an OI which is required to carry out the OI and may be a customer and/or external document.

Approval Authority. The individual(s) who has the authority to approve an OI for use.

Correct Version. The current controlled version (or identical copies thereof) of an OI cited on respective Directorate/Office Master List. In the case of customer or external document, the one identified as correct on respective Master List.

Effective Date. The date on which an OI is approved, or a pre-determined date for implementation.

OI. A document providing instructions for internal use within a Directorate/Office, or two or more Directorates/Offices if issued jointly.

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APPENDIX B

ACRONYMS

| | |
|------|---|
| MIDL | Marshall Integrated Document Library |
| OI | Organizational Issuance |
| OPR | Office of Primary Responsibility |
| OPRD | Office of Primary Responsibility Designee |
| OWI | Organizational Work Instruction |

APPENDIX C

(Reserved for Verification Matrix)

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APPENDIX D

RECORDS

Records are maintained per NRRS 1441.1 as follows:

D.1 For OIs which document organizational processes, maintain the case file per NRRS 1/72/B/2(b); Temporary-Destroy when OI is destroyed.

D.2 For OIs which document Program/Project data or processes (analyses, as-run test procedures, etc.), maintain per NRRS Schedule 8. Reference the NRRS to determine the correct schedule, retention and disposition of the item, as it is dependent on the type of OI or data.

D.3 Review of OIs. Maintain per NRRS 1/26.5/B; Temporary-Destroy when 5 years old.

D.4 Distribution Lists. Maintain the same as the OIs for which they are applicable.

D.5 Master Lists.

D.5.1 If not needed as a record of effective dates, maintain per NRRS 1/77/C; Temporary-Destroy when no longer needed.

D.5.2 If needed as a record of effective dates, maintain the same as the OIs for which they are applicable.