



CHANGE NOTICE

CN No.: 16.1-2-2

Effective Date: 12/5/91

Affected Document: 033-YMP-QP 16.1, "Processing Externally Originated Corrective Action Documents"

J. Blink
Prepared by:

N/A
Approved by: (Technical Area Leader) Date

[Signature] 12/4/91
Approved by: (YMP QA Manager) Date

[Signature] 12/4/91
Approved by: (YMP Leader) Date

Training Required: Yes No

Major Changes Minor Changes

Reason for Change:

Extend the use of the QA Action Item List to include communication of adverse conditions and lessons learned to affected managers. Consolidate the QA Action Item List and QA Status Report.

- 1. Replace page 3 of 3 (See attached)

Section 16.1.4.3.1, new first and second paragraphs.

New Section added, 16.1.4.3.2 "TASK LEADERS AND OTHER MANAGERS"

NOTE: THIS CHANGE NOTICE IS TO BE FILED AT THE FRONT OF THE AFFECTED DOCUMENT



CHANGE NOTICE

CN No. 16.1-2-2¹ Dg 10/3/91

Effective Date: 10/8/91

Affected Document: 033-YMP-QP 16.1, "Processing Externally Originated
Corrective Action Documents"

I. Blink
Prepared by:

N/A
Approved by: (Technical Area Leader) Date

Royce S. Monte 10/3/91
Approved by: (YMP QA Manager) Date

W. L. Selam 10/3/91
Approved by: (YMP Leader) Date

Training Required: Yes No

Major Changes Minor Changes

Reason for Change:

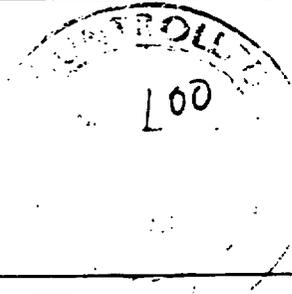
Clarification, to reflect the changed title of the sponsor's corrective action documents.

1. Sections 16.1.2 and 16.1.4.1.1, Change "Standard Deficiency Reports" to "Corrective Action Requests".
Change "(SDRs)" to "(CARs)"

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YUCCA MOUNTAIN PROJECT



No.: 033-YMP-QP 16.1
Revision: 2
Date: 9/5/90
Page: 1 of 3

Subject: PROCESSING OF EXTERNALLY ORIGINATED
CORRECTIVE ACTION DOCUMENTS

Approved by: [Signature] / for L. J. JARDINE 9/5/90
Yucca Mountain Project Leader
Approved by: [Signature] 9/5/90
YMP Quality Assurance
Manager

16.1.1 PURPOSE

This procedure provides for the processing of externally originated corrective action documents to assure that LLNL-YMP provides an appropriate response and obtains closure.

16.1.2 SCOPE

This procedure applies to all documents transmitted to LLNL-YMP that mandate corrective action on the part of LLNL-YMP as part of the response to these documents. Such documents include, but are not limited to, Standard Deficiency Reports (SDRs), and Audit and Surveillance Observations.

16.1.3 RESPONSIBILITIES

The YMP Project Leader is responsible for identifying the appropriate personnel to provide responses to externally originated corrective action documents and to implement the corrective actions, and for approving such responses.

The QA Manager is responsible for monitoring the status of externally originated corrective action documents and for maintaining file copies of official correspondence related to the responses, completion of corrective action and closure.

16.1.4 PROCEDURE

16.1.4.1 Receipt of Corrective Action Documents

YMP PERSONNEL: 16.1.4.1.1 Upon receipt of correspondence containing documents that identify the need for LLNL-YMP to take corrective action in response to identified problems, forward such documents to the QA Manager for processing and retention. Such documents include, but are not limited to, Standard Deficiency Reports, and Audit and Surveillance Observations.

16.1.4.2 Processing and Closure of Corrective Action Documents

- QA MANAGER: 16.1.4.2.1 Upon receipt of an externally originated corrective action document, accomplishes the following:
- a. Enters the document onto the QA Action Item List;
 - b. Establishes a file for collection of documentation associated with the document;
 - c. Obtains from the Project Leader assignment of a Respondent who is tasked with responding to the document;
 - d. Forwards a copy of the document to the Respondent along with a due date for the response. The due date is the lesser of the due date specified by the document, or thirty calendar days from the date of receipt by LLNL-YMP.
- RESPONDENT: 16.1.4.2.2 Prepares the response, by the specified due date, including identification of the cause and proposed corrective action, as appropriate, and forwards the response documentation to the QA Manager.
- QA MANAGER: 16.1.4.2.3 Reviews the documentation and, if acceptable, forwards it to the Project Leader for approval. If the response is inappropriate or inadequate, satisfactory resolution of the concerns is reached with the Respondent.
- PROJECT LEADER: 16.1.4.2.4 Approves and transmits the response to the originating organization.
- QA MANAGER 16.1.4.2.5 Notifies the Respondent to implement corrective actions.
- RESPONDENT: 16.1.4.2.6 Implements planned corrective action and notifies the QA Manager when completed. If corrective action cannot be completed by specified due dates, the QA Manager is notified and a revised completion date is coordinated with the originating organization.
- QA MANAGER: 16.1.4.2.7 Reviews the corrective action taken and determines its acceptability. If inadequate, the Respondent is provided with a listing of specific actions that must be taken. If acceptable, the Project Leader is notified.
- PROJECT LEADER: 16.1.4.2.8 Notifies the originating organization in writing that the corrective action has been completed and is ready for verification, if required.

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16.1.4.3 QA Action Item List

QA ORGANIZATION: 16.1.4.3.1 The status of open external CARs is monitored until satisfactory resolution through the use of a "QA Action Item List" which lists the status of CARs, NCRs, YMPO CARs, and delinquent receipt acknowledgements. The QA Action Item List also notifies affected managers of significant conditions adverse to quality and lessons learned.

This list is issued to the Project Leader, Associate Project Leader, Assistant Project Leaders and all Technical Area Leaders and Task Leaders.

TASK LEADERS AND OTHER MANAGERS 16.1.4.3.2 Consider the applicability of significant conditions adverse to quality and lessons learned to their areas of responsibility.

16.1.5 RETAINED DOCUMENTATION

16.1.5.1 Working Files

QA MANAGER: 16.1.5.1.1 Retains the following documents for a minimum of one year from date of closure for trend analysis and reference purposes:

- a. Externally originated corrective action documents;
- b. LLNL-YMP responses to such documents;
- c. Other correspondence related to the resolution of such documents;
- d. Correspondence from the originating organization related to the acceptability of LLNL-YMP responses and final closure of such documents.