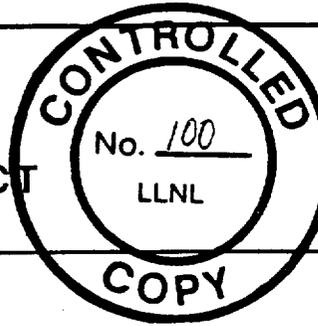


University of California



Lawrence Livermore
National Laboratory

YUCCA MOUNTAIN PROJECT
Quality Procedures



No.: 033-YMP-QP-18.1

Revision: 4

Effective Date: 7/29/92

Page 1 of 10

Subject:

SURVEILLANCES

AUTHOR:

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Training Required: Yes No

Comment: Training required for Quality Assurance personnel only.

Approved by: W. S. Lefkowitz 7/21/92
Yucca Mountain Project Leader Date

Approved by: Dean Wolfe 7/21/92
YMP Quality Assurance Manager Date

COMPLETE REWRITE

18.1.1 PURPOSE

This procedure describes the planning, performance, and documentation of QA surveillances for LLNL-YMP activities.

18.1.2 SCOPE

This procedure applies to LLNL-YMP activities at LLNL or field locations and to LLNL-YMP surveillances of subcontractors.

Surveillances are used to evaluate the quality of work subject to Quality Assurance Program requirements. Surveillances may be used to:

- Verify the quality of activities in progress,
- Evaluate the implementation and effectiveness of procedural controls,
- Review completed documentation,
- Verify timely implementation and effectiveness of corrective action,
- Investigate known or suspected non conforming conditions or problems, and
- For other purposes as deemed appropriate by the QA Manager.

18.1.3 RESPONSIBILITIES

The QA Manager is responsible for establishing a surveillance schedule and assigning appropriately qualified personnel to conduct surveillances of LLNL-YMP activities.

Surveillance Team Leaders are responsible for performance and reporting of surveillances.

18.1.4 DEFINITIONS

See Tab C, "Terms and Definitions," for definitions that apply to this procedure:

- Adverse Finding
- Condition Adverse to Quality
- Nonconformance
- Observations
- Quality Elements
- Surveillance

The relationship between Adverse Findings, Nonconformance Reports, and Corrective Action Reports is shown in Exhibit C of Procedure 033-YMP-QP 16.0.

18.1.5 PROCEDURE

18.1.5.1 Surveillance Personnel Selection

QA MANAGER:

Designates the members of the surveillance team. Surveillances may be conducted by one or more personnel. When more than one individual is assigned to conduct a surveillance, the QA Manager shall designate one person to lead the surveillance effort. The surveillance leader is responsible for coordination of the surveillance effort and compliance with requirements of this procedure assigned to the surveillance team.

The qualification of surveillance personnel should be commensurate with the area being surveyed and the scope and purpose of the surveillance. Surveillance personnel should be familiar with the area being surveyed (administrative area or technical area). The surveillance team may include one or more technical specialists. Surveillance team members shall be independent of any direct technical responsibility for the area to be surveyed and may not report directly to the immediate supervisors who are responsible for the work to be surveyed. Personnel who have direct responsibility for performing the activity to be surveyed may not participate in surveillance team selection. Surveillance personnel should have sufficient authority and organizational freedom to make the surveillance process meaningful and effective. Personnel assigned responsibilities for the conduct of surveillances should be either under the direct supervision of a qualified Lead Auditor or be qualified as a Lead Auditor in accordance with procedure 033-YMP-QP 18.2, "Qualification of Quality Assurance Audit Personnel." When a surveillance is conducted by an individual who is not qualified in accordance with YMP-QP 18.2, a supervising Lead Auditor shall be assigned by the QA Manager and shall cosign the Surveillance Report.

18.1.5.2 Surveillance Scheduling

QA MANAGER:

18.1.5.2.1

Publishes the surveillance schedule for each fiscal year. Copies of the schedule are distributed to the Project Leader, Deputy Project Leader, Associate Project Leader, Assistant Project Leaders, Technical Area Leaders, Task Leaders and the Director, QA Division - YMP. The schedule identifies those YMP and subcontractor activities for which surveillances are planned. The schedule is updated as required. When multiple surveillances for ongoing monitoring of specific activities are to be conducted, each individual surveillance activity shall be indicated.

18.1.5.3 Surveillance Numbering

QA MANAGER:

Assigns numbers when surveillances are placed on the surveillance schedule. The number consists of the letter "S" followed by the fiscal year designator and a sequential number (e.g., S92-01). If a surveillance is rescheduled, its number remains the same. If a surveillance is added to the schedule, it is given the next number in the sequence, regardless of when the surveillance is scheduled. If a surveillance is deleted, its number is not reassigned.

18.1.5.4 Surveillance Planning

SURVEILLANCE TEAM: 18.1.5.4.1 Identifies the objective and the basis for the surveillance as well as the activities or characteristics that are to be verified. As applicable, acceptance criteria are identified.

18.1.5.4.2 In general, the use of a checklist as the basis for the conduct of a surveillance is recommended, however, the purpose and scope of a surveillance and level of experience of the individual(s) assigned to conduct a surveillance influence the necessity for the use of a checklist. A checklist may not be required to verify the status of previously identified nonconformances or observations resulting from other QA surveillances and audits or when the purpose of the surveillance is to investigate known or suspected problems, or when a requirements document (Procedure, Specification, Scientific Investigation Plan, Study Plan, Activity Plan, Drawing, etc.) provides adequate guidance for the scope of the surveillance. The QA Manager will approve the methods and basis for conduct for each surveillance. The approval is documented as part of the approval of the Surveillance Report.

18.1.5.5 Performance of the Surveillance

SURVEILLANCE TEAM:

Examines objective evidence and conducts personnel interviews as necessary to determine whether QA requirements are being effectively implemented and that they are adequate for effective control of the area being surveyed. The results of the surveillance are verbally communicated by the Surveillance Team Leader to those personnel responsible for the area being surveyed before concluding the surveillance activity.

18.1.5.6 Adverse Findings

SURVEILLANCE TEAM:

Determines Adverse Findings requiring follow-up action. Findings requiring follow-up actions are identified using a Corrective Action Report (CAR) or a Nonconformance Report (NCR). Findings pertaining to items are processed as NCRs using 033-YMP-QP 15.0, "Nonconforming Items." Other findings are processed as CARs using 033-YMP-QP 16.0, "Corrective Action."

Findings identified and completely resolved during a surveillance do not normally require the issuance of NCRs or CARs¹. However, NCRs or CARs shall be documented when the deficiency concerns an item or document that has been issued off project.

18.1.5.7 Surveillance Report

SURVEILLANCE TEAM: 18.1.5.7.1 Documents the planning and results of the surveillance in a surveillance report (Exhibit A). Surveillance Reports contain the following information: surveillance number, activity being surveyed, objective and scope, basis, criteria (if applicable), surveillance dates, identification of personnel contacted during the surveillance, members of the surveillance team, a brief summary of the surveillance, and a statement concerning the effectiveness of the implementation of the quality elements that were surveyed. The surveillance report shall include a brief statement of each Adverse Finding and any CARs or NCRs issued as a result of the surveillance. The surveillance report may also contain observations, which may be in the form of comments or recommendations and are based on an auditor's experience. These do not require a followup or response.

Adverse findings which required follow-up after the completion of a surveillance always require the issuance of an NCR or CAR, as appropriate. Surveillance Reports are considered closed upon issue and do not require response or follow-up. The NCR or CAR provide for any required follow-up to surveillance activities.

QA MANAGER: 18.1.5.7.2 Reviews and approves the surveillance report indicating concurrence with the objective and scope, basis, criteria, assigned personnel, and the determination of required Adverse Finding follow-up. The surveillance report is to be issued no later than 20 calendar days after completion of the surveillance. Surveillance Reports are distributed to the appropriate Technical Area Leader and Task Leader responsible for the area surveyed, the Project Leader, Associate Project Leader, Deputy Project Leader, and Assistant Project Leaders.

¹ Resolution must include verification by surveillance personnel and be completed within the normal course of the surveillance and prior to issuance of the surveillance report.

18.1.6 Quality Assurance Records

Quality assurance records resulting from the implementation of this procedure are collected, forwarded to the Local Records Center and maintained in accordance with 033-YMP-QP 17.0, QA Records. Surveillance records include the following:

- Surveillance Schedules
- Completed Surveillance Checklists, if applicable
- Surveillance Reports

**EXHIBIT A
SURVEILLANCE REPORT**

University of California Lawrence Livermore National Laboratory	YUCCA MOUNTAIN PROJECT Page <u> 1 </u> of <u> </u>												
<h1 style="margin: 0;">SURVEILLANCE REPORT</h1>	WBS: _____ Activity No.: _____ Surveillance No.: _____ Date: _____												
1. Objective and Scope: _____ _____ _____													
2. Basis: <input type="checkbox"/> Checklist <input type="checkbox"/> Requirements Document <input type="checkbox"/> Other (See Attached) <input type="checkbox"/> None Comments: _____ _____ _____													
3. Criteria (Standard / Code / Procedure / Drawing / Specification Used): _____ _____ _____ _____ _____ _____ _____													
4. Assigned Surveillance Personnel: <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;">_____</td> <td style="width:50%; border: none;">_____</td> </tr> <tr> <td style="border: none; text-align: center;">(Leader)</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">_____</td> <td style="border: none;">_____</td> </tr> </table>		_____	_____	(Leader)		_____	_____	_____	_____	_____	_____	_____	_____
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(Leader)													
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EXHIBIT A (con't.)
SURVEILLANCE REPORT

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SURVEILLANCE REPORT

(Continuation)

7. Effectiveness of QA Program Implementation:

8. Corrective Action Requirements:

- | | |
|--|--|
| <input type="checkbox"/> None, all requirements were met | <input type="checkbox"/> Some requirements were not met, follow-up action is required and will be tracked to closure by the following CAR / NCR #(s)*: |
| <input type="checkbox"/> Some requirements were not met, however, they were not significant and were resolved during the surveillance* | <hr/> <hr/> <hr/> |

**Explain:*

Prepared by:

<hr/> Surveillance Leader Signature	<hr/> Date
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Approved by:

<hr/> QA Manager Signature	<hr/> Date
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Distribution:
