

Department of Energy

Washington, DC 20585

QA: QA

FEB 1 3 2002

C. M. Sparks Bechtel SAIC Company, LLC 1180 Town Center Drive, M/S 763 Las Vegas, NV 89144

VERIFICATION OF CORRECTIVE ACTION AND CLOSURE OF DEFICIENCY REPORT (DR) BSC-02-D-057 RESULTING FROM THE OFFICE OF QUALITY ASSURANCE (OQA) AUDIT BSC-ARC-02-03

The OQA staff has evaluated the corrective action of DR BSC-02-D-057 and determined the results to be satisfactory. As a result, the DR is considered closed.

If you have any questions, please contact either James Blaylock at (702) 794-1420 or Dennis C. Threatt at (702) 794-1495.

Jame Blughol to Ram Murthy, Acting Director

Office of Quality Assurance

OOA:JB-0644

Enclosure: DR BSC-02-D-057

WM-11 NM3507



C. M. Sparks

cc w/encl:

N. K. Stablein, NRC, Rockville, MD Robert Latta, NRC, Las Vegas, NV S. W. Lynch, State of Nevada, Carson City, NV Engelbrecht von Tiesenhausen, Clark County, Las Vegas, NV R. R. Dresel, BSC, Mercury, NV, M/S 760 S. H. Horton, BSC, Las Vegas, NV R. P. Keele, BSC, Las Vegas, NV, M/S 280 D. T. Krisha, BSC, Las Vegas, NV J. E. Therien, BSC, Las Vegas, NV, M/S 280 T. J. Wall, BSC, Las Vegas, NV D. M. Kunihiro, BSC, Las Vegas, NV T. A. Peterson, BSC, Las Vegas, NV W. J. Glasser, NQS, Las Vegas, NV K. A. Hodges, NQS, Las Vegas, NV D. G. Opielowski, NQS, Las Vegas, NV D. C. Threatt, NOS, Las Vegas, NV J. R. Dyer, DOE/YMSCO, Las Vegas, NV C. E. Hampton, DOE/YMSCO, Las Vegas, NV D. G. Horton, DOE/YMSCO, Las Vegas, NV S. P. Mellington, DOE/YMSCO, Las Vegas, NV J. M. Replogle, DOE/YMSCO, Las Vegas, NV B. M. Terrell, DOE/YMSCO, Las Vegas, NV

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RADIOACTIVE WASTE MANAGEMENT U.S. DEPARTMENT OF ENERGY			REPORT NO. BSC-02-D-057
	HINGTON, D.C.		PAGE 1 OF
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DEFICIENCY/COR	RECTIVE ACTION RE	PORT	2601/3/02
1. Controlling Document		2. Related F	Report No.:
AP-2.20Q, Revision 0, ICN 1, Self-Assessments	A 81	BSC-ARC-	02-03
3. Responsible Organization:	4. Discussed With:		
BSC 5. Requirement:	Mike Sparks, Ralph Dressel, 1		
Para. 5.4.3 a) Provide a copy of the approved Self-Assessm being assessed (e.g., Director, Assistant Manager), to the S Assurance if the self-assessment is assessing the effectiven	elf-Assessment Coordinator, to ess of corrective actions, and o	the Directo thers as app	or, DOE/Office of Quality ropriate.
Para. 5.4.3 b) Enter any condition or recommendation iden Reporting/Resolution system in accordance with procedure	tified by the self-assessment in AP-REG-004.	ito the Cond	ition/Issue Identification and
Para. 6.1 QA RECORDS Individual Records: Self-Assessment Report related to QARD wor	k activities		
6. Description of Condition: Contrary to the above requirements:			1
Self-Assessment SA-SSFS-2001-010 states in Section 3.C) that the Self-Assessment evaluated the effectiveness of corrective actions for DRs LVMO-99-D-072, LVMO-00-D-076, and LVMO-01-D-013. However, Section 10 of the report does not show distribution to the Director, OQA.			
Condition # 3 in the Self-Assessment Report identified that Field Engineering sign-offs were not completed for the Work Orders evaluated. It was stated that this condition would be entered into the CIRS database as a deficiency, however, there is no evidence that this was accomplished. This condition was the subject of DR YMSCO-01-D-108 and apparently corrective action did not result in correction of the condition.			
The Self-Assessment Report was submitted to the RPC as a non-QA record although the assessment apparently involved activities subject to the QARD.			
7. Initiator. Dennis Threatt		ndition exist	? (Not required for a DR)
Dennis Threat Date 12-20-2001	If Yes, Check One:] В [] С [] Р
10. Recommended Actions: Identify in the Self-Assessment Report	when the work being a	issessed	is subject to the
QARD.			
QAR Dennis Threatt Date 1-3-	OZ 10 working day		issuance
13. DOQA Issuance Approval:	Signature James B	Ambort.	f Date 1/8/02
Printed Name Ram Murthy 22. Corrective Actions Verified	23. Closure Approved	Ьу.	
QAR Dennes Obust Date 2/5/20	02 DOQA Jama	Blaylad	
Exhibit AP-16.1Q.1		ENCLOS	

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DEFICIENCY/CORRECTIVE ACTION REPORT (RESPONSE)

14a. Immediate Actions:

Condition #3 identified during the Self Assessment (SA) was entered into the CIRS system as Item # 2251 and was closed 1/3/02.

Compliance Date: 12/18/01

14. Remedial Actions: Item 1) No action needed.

Item 2) See Block 14a.

Item 3) No action needed.

15. Extent of Condition:

As detailed in Block 16, CAUSE. Self Assessment SA-SSFS-2001-010 was a Non-Q Self Assessment. No Q activities were assessed and there is no impact on 'Q' quality.

16. Cause: (Attach results of root cause detemination prepared in accordance with AP-16.4Q for a significant deficiency.)

See continuation page.

17. Action to Preclude Recurrence:

The Site Operation Manager has issued a directive (see attached memo # 11621158, Sparks to Distribution) to all identified Self Assessment Lead personnel to include, in each Self Assessment Report, sufficient information (in the Purpose. Scope, Objectives section) to positively identify the Q or Non-Q applicability of the assessment.

18. Due Date: 1/16/02 □ For submittal of complete response ✓ For completion of corrective action	19. Response by	Ralph Dresel	10 JAD - 10 JAD. 02	BSC QA H FOR J. THORION 1/16/02 Dr AF Phone 5.7366
20. Evaluation: Accept Partially Accept QAR Comment Threat Date j- Exhibit AP-16.1Q.1	Reject 24-02	21. Concurrence: DOQA James	Blaylord for	Date 2/1/02 Rev. 12/20/1999

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Block 16, Cause (continued):

General comment:

During investigation activities to determine the cause of the cited conditions (see "Cause Analysis" below) two Self Assessment process factors promoting confusion were noted as follows:

a) The Self Assessment Database in the CIRS system provides a synposis of Self Assessments conducted and is for reference only. However, this database is consulted for some planning activities and it's accuracy is presumed to be sufficient for this function. Unfortunately errors do occur as was the case with Self Assessment SA-SSFS-2001-010. Although the SA was Non-Q in nature, as indicated on the report cover sheet per procedure, it was entered into the Self Assessment Database as a 'Q' assessment.

b) It is apparent that the text (Purpose, Scope, Objectives) of some Self Assessments do not adequately identify whether the SA is Q or Non-Q in nature. The only required indicator of this status is the QA designator on the report cover sheet. This lack of text information coupled with the potential for error mentioned above can lead to inaccurate conclusions such as was encountered with this DR.

Cause Analysis:

Item1) This item was identified as a deficiency because of the inappropriate use of the terms "corrective action effectiveness" and "effectiveness of corrective actions" used in SA report sections 3, 4 and 8. However, in actual application, the only activity regarding corrective actions was the review of the NCR and DR databases for repeat deficiencies as allowed by AP-2.20Q, Rev. 0, ICN 1 (AP-2.20Q), paragraph 5.2b and as stated in SA report section 8, last paragraph. It is our opinion that this review of the NCR and DR databases for repeat deficiencies does not fall under the jurisdiction of AP-2.20Q, paragraph 5.4.3a. This AP-2.20Q requirement requires a copy of the SA Report to be forwarded to the Director, OQA "if the self-assessment is assessing the effectiveness of corrective actions".

Item 2) Failure to enter Condition #3 in the CIRS system was due to human error. The SA identified a Non-Q deficiency in that the completed Work Orders reviewed did not contain a sign-off for Field Engineering (FE) when the work completed was for a FE designed item. This condition was included in the SA Report in sections 4, 6, 7 and 8. Section 7 of the SA stated that this deficient condition would be entered into the CIRS system as a deficiency. The error occurred when each SA participant assumed that the other had made the necessary entry. Because condition 3 had been evaluated and determined to be reportable in the CIRS system, as reflected in the SA, we do not believe this to be a repeat of the situation addressed in DR YMSCO-01-D-108. Upon verification that the entry had not been made, the item was entered into CIRS as item # 2251 and was closed on 1/3/02.

See continuation page.

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Block 16, Cause (continued):

Item 3) Self Assessment # SA-SSFS-2001-010, FIELD ENGINEERING INVOLVEMENT IN WORK CONTROL AND PROCESS was confined to Non-Q activities as indicated by the procedurally required Records indicator of "QA:N/A" on the first page (reference AP-2.20Q, Rev. 0, ICN 1, SELF ASSESSMENTS, Attachment 2, SELF ASSESSMENT REPORT FORMAT AND GUIDELINES). The Self Assessment, section 4, EXECUTIVE SUMMARY, second paragraph states:

"Two (2) Field Engineering output documents were viewed for confirmation of action. These consisted of field Engineering sign off of completed Work Orders and development of Field Engineering Technical Documents (FETDs) evidencing Work Order review".

At the time of the assessment there were no completed "Q" Work Orders to review. Since none of the completed Non-Q Work Orders that were reviewed had the required Field Engineering sign-off it was considered unnecessary to list the numbers of the Work Orders reviewed since all such Work Orders were considered affected. The five (5) FETDs reviewed were Non-Q and their identification was listed.

As stated in Item 1 above, it is our opinion that the act of consulting the NCR and DR databases to see if there were any repeat "like" deficiencies does not make the assessment Q related.

Since the activity covered by this DR was Non-Q there is no impact to 'Q' related Quality.





OA: N/A

Interoffice Memorandum

То:	Distribution – Self Assessment Lead Personnel	No.:	116021158
From:	Charles M. Sparks CM	Date:	<u>16 Jan. 02</u>
Re:	Self Assessments	CC:	See below

This directive is issued to all identified Self Assessment Lead personnel to include, in each Self Assessment Report, sufficient information (in the Purpose, Scope, Objectives section) to positively identify the Q or Non-Q applicability of the assessment.

If you have questions or comments please contact Ralph Dresel at 5-7366.

CMS:ger

Distribution: Howard R. Cox, SITE/755 Randolph B. Cunningham, SITE/760 Dwayne D. Davis, SITE/763 Ralph R Dresel, SITE/760 Richard B. Foster, SITE/760 David E. Frederici, SITE/760 Errol M. Gardiner, SITE/717 William E. Goodhope, SITE/763 Rudolph L. Johnson, SITE/763 Rudolph L. Johnson, SITE/760 Terry W. Lewis, SITE/717 Gregg A. Mickelson, SITE/761 Nelson O'Connor, SUM1/423 Charles M. Sparks, SITE/763

cc: Patricia J. Jakus, SITE/760 Robert I. Law, SITE/761 Thomas M. Leonard, SUM1/423 Thomas A. Peterson, SUM1/423 Rufus L. Taylor, III, SUM1/423 RPC = 1 page

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Corrective action for this DR required Condition # 3 from Self Assessment SA-SSFS-2001-010 to be entered into the CIRS database and a memo from the Site Operation Manager to be issued to all identified Self Assessment Lead personnel to include, in each Self Assessment Report, sufficient information (in the Purpose, Scope, Objectives section) to positively identify the Q or Non-Q applicability of the assessment. A review of the CIRS database revealed that Condition # 3 was entered into CIRS as item # 2251 and was closed on 1/3/02. The memo from the Site Operation Manager (memo # 11621158, Sparks to Distribution) was issued on 1/16/2002 and a copy was attached to the complete response to this DR.

Based on satisfactory completion of corrective action, it is recommended that this DR be closed.

. Thurt 2/5/2002

Dennis Threatt, QAR

Date