### Memorandum

QA: QA

DATE:

FEB 25 2002

REPLY TO

ATTN OF: RW-3 (Ram Murthy/4-5549)

SUBJECT:

VERIFICATION OF CORRECTIVE ACTION AND CLOSURE OF DEFICIENCY REPORT (DR) YMSCO-01-D-140 RESULTING FROM THE OFFICE OF QUALITY ASSURANCE (OQA) AUDIT YMSCO-ARC-01-14

TO: YMSCO/OIM (R. N. Wells)

The OQA staff has evaluated the corrective action of DR YMSCO-01-D-140 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.

Ram Murthy Acting Director

Office of Quality Assurance

OQA:JB-0685

Enclosure: DR YMSCO-01-D-140

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

K. G. Hess, BSC, Las Vegas, NV

T. J. Wall, BSC, Las Vegas, NV

W. J. Glasser, NQS, Las Vegas, NV

K. A. Hodges, NOS, Las Vegas, NV

D. G. Opielowski, NQS, Las Vegas, NV

D. C. Threatt, NQS, 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

J. M. Replogle, DOE/YMSCO, Las Vegas, NV

B. M. Terrell, DOE/YMSCO, Las Vegas, NV

D. R. Warriner, DOE/YMSCO, Las Vegas, NV

NMSS07 WM-11

8. DEPORT APPORT  CORRECTIVE ACTION  REPORT
NO. YMSCO-01-D-140
PAGE 1 OF QA: QA

			GE 1 OF : QA
DEFICIENCY/CORRECTIVE ACTION REPORT			
Controlling Document:  AP-6.1Q, Rev. 6, ICN 0, Controlled Distribution		2. Related Report YMSCO-ARC-0	
Responsible Organization: Yucca Mountain Site Characterization Office (YMSCO)	Discussed With: Catherine Hampto	n, Dee Jensen, D	Pavid Warriner
5. Requirement:  AP-6.1Q, Rev .6, ICN 0, Attachment 2, "Instructions for Completing the Office of Civilian Radioactive Waste Management Document Control Action Request (DCAR)" requires that in blocks 18-23, the Document Owner print and sign name, enter the date signed, and enter the Document Owner's organization, department, location, and/or mail stop, and telephone number.			
Contrary to the above requirements for AP-6.1Q, Rev. 6, ICN 0, the Document Owner is identified in the Office of Civilian Radioactive Waste Management Program Documents Database (OPDD) as Bob Wells, Office of Information Management. The individual entered on the DCAR as the Document Owner is David Keller, Records Management. For AP-17.1Q, Rev. 2, ICN 0, Record Source Responsibilities for Inclusionary Records, the Document Owner is identified in the OPDD as Bob Wells. The individual entered on the DCAR as the Document Owner is David Keller and signed for by Denise Gibson, Review Coordinator.			
7. Initiator: Leterris C. Thuatt  Dennis C. Threattt  Date 8/22/01	9. Does a stop work Yes N If Yes, Check One:	lo	ot required for a DR)
10. Recommended Actions:			
11. QA Review: (Threatt  QAR Dennis C. Threatt Date 9/19/01	12. Response Due D 10 Working Days F		
13. DOQA Issuance Approval: Printed Name Ram Murthy Signature	es Blaylord	tr	Date 9/24/01
QAR Deurns Thurst Date 2/15/2002	23. Closure Approved	900A-	Date 2 X 02
xhibit AP-16.1Q.1		•	Rev. 12/20/1999

TYPE RESPONSE:  Initial  Complete  Amended	RADIOACTIVE WA U.S. DEPARTM	OF CIVILIAN ASTE MANAGEMENT IENT OF ENERGY GTON, D.C.	DR/CAR NO. YMSCO-01-D-140 PAGE 2 OF SA QA: + PA ic	
	DEFICIENCY/CORRECTIVE	ACTION REPORT (RE	ESPONSE)	
substantive. As describ	re necessary since there is no impact on ed in section 15 below, the problem is a no impact on the proper distribution of the	result of confusing directions		
Compliance Date: NA				
	actions need to be taken. When the reviat procedure will remediate the condition		d as described in section 17 below, the	
the Responsible Manag Robert Wells has appro- does not carry out the a review of those names Assistant Managers, or Document Owner as do	Lev. 6, ICN 0, sections 3.12, Document Cer but not the Document Owner for both val authority for these procedures as the ctivities as Document Owner for these prof federal personnel listed as Document Coffice Directors who are Responsible Macribed in AP-6.1Q. See Continuation Page 1.10.	AP-6.1Q and AP-17.1Q. The Director of the OCRWM Office concedures as described in AP-Dwners on the OPDD is that the transgers but in all likely hoodage.	is conclusion is based on the fact that ice of Information Management but 6.1Q, sections 5.1 through 5.7. A hey are all either Project Manager, do not perform the tasks of a	
One, there is no clear of procedure allows that the activities used in AP-5 uses the terms "Prepared."	is of root cause determination prepared in a strinction made in AP-6.1Q between the same person could perform the two fur 1Q, Plan and Procedure Preparation, Revr and "Responsible Individual". AP-6.1 ocedure there is an overlap in activities be	Document Owner and the Renctions. Two, there is inconsiview, and Approval and AP-6 Q uses the terms "Document	sponsible Manager. In fact, the istency in the terminology and .1, Controlled Distribution. AP-5.1Q Owner" and "Responsible Manager".	
approval, and distribut	ecurrence:  -ly define and distinguish the rolls and recommon of controlled documents and to ensured, and process flow followed. Based on the	e that AP-6.1Q is integrated v	vith AP-5.1Q in terminology used,	

Date October 19, 2001
21. Concurrence: 20. Evaluation: Reject Partially Accept DOQA Jan Date 10/21/2001

Bobert Wells

19. Response by:

18. Due Date: January 31, 2002

Exhibit AP-16.1Q.1

For submittal of complete response

For completion of corrective action

Date 10/29/01 Rev. 12/20/1999

Phone (9)562-6622

Stop Work Order	
YMSCO-01-D-140	
PAGE 2 OF 3	لسعيما ()

8. X DR/CAR

#### DEFICIENCY/CORRECTIVE ACTION REPORT/STOP WORK ORDER CONTINUATION PAGE

#### 15. Continuation

For example, Russ Dyer, Project Manager, is listed as the Document Owner for AP-2.19Q, Quality Assurance Requirements and Description Requirements Matrix and Impact Evaluation, AP-2.20Q, Self Assessments, AP-PMC-008, Conduct of the Project Operations Review Board, AP-REG-004, Conditions/Issue Identification and Reporting/Resolution System, AP-REG-005, Managing External Recommendations and Commitments, AP-REG-007, Occurrence Reporting and Processing of Operations Information, QAP-2.6, Readiness Review, and YAP-30.60, Documenting Decisions. The same list could be generated for Allen Benson, Lead Manager for Institutional Affairs, Steve Brocoum, Assistant Manager for the Office of Licensing and Regulatory Compliance, Suzanne Mellington, Assistant Manager for the Office of Project Execution, Victor Trebules, Director of the Office of Project Control, and Robert Wells, Director of the Office of Information Management. All of these personnel are the heads of their respective organizations and have approval authority for the procedures that flow from that function, but none of them perform the tasks of the Document Owner as described in AP-6.1Q.

Exhibit AP-16.1Q.2 Rev. 06/01/1999

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TYPE RESPONSE:  Initial Complete	☐ Initial OFFICE OF CIVILIAN ☐ Complete RADIOACTIVE WASTE MANAGEMENT ☐ Complete Com			DR/CAR NO.YMSCO-01-D-140 PAGE OF
		STON, D.C.	, [	QA: QA
	:		_	
	DEFICIENCY/CORRECTIV	E ACTION REPORT (RES	PONSE	Ξ)
14a. Immediate Action				
No Change	•			
Compliance Date:				
14. Remedial Actions:				
No Change				
15. Extent of Conditio	n·		·	
13. Extent of Conditio				
No Change				
16. Cause: (Attach r	esults of root cause determination prepa	ared in accordance with AP-16.4	Q for a si	gnificant deficiency.)
No Change				
17. Action to Preclude	e Recurrence:			
No change. Chang	e in corrective action due date only	See continuation page.		
		4		
18. Due Date: Febru	ary 15, 2002	19. Resphiso-by:		

☐ For submittal of complete response

☑ For completion of corrective action

20. Evaluation: 🗹 Accept 🗌 Partially Accept 🔲 Reject

Date

21. Concurrence:

Bob Wells

Date January 11, 2002

Phone (9)562-6622

Date 2/1/01 Rev. 12/20/1999

o. ⊠DR/C	Work Orde
NO YMSC	O-01-D-140
PAGE	OF QA: QA

#### DEFICIENCY/CORRECTIVE ACTION REPORT/STOP WORK ORDER CONTINUATION PAGE

#### REQUEST FOR EXTENDED PROCESSING:

Due to evolving issues related to this DR, additional time is needed to complete the actions to preclude recurrence. No adverse impact is expected, as these actions are mainly shortcomings within the AP-6.1Q process of which the procedure is currently undergoing the revision process.

#### REQUEST FOR EXTENSION OF COMPLETED ACTIONS:

The current corrective action due date for this DR is January 31, 2001. Due to the holiday shutdown, the procedure revision process has experienced a lag time of the preparation and review process. The procedure has since been revised and is currently undergoing the formal review process. Request an extension for the completion of the review and administrative processing until February 15, 2002.

Bob Wells

111103

Rev. 06/01/1999

<sub>NO.</sub> YMS PAGE	OF QA: \( \sqrt{Q}\)	2602/10/
8. X DR/C	AR Work Order	

#### DEFICIENCY/CORRECTIVE ACTION REPORT/STOP WORK ORDER CONTINUATION PAGE

Corrective action for the subject DR required that AP-6.1Q be revised and the OCRWM Program Documents Database (OPDD) be corrected to reflect the titles in the revised procedure. AP-6.1Q was revised with an effective date of 2/6/2002 to provide titles consistent with AP-5.1Q. A review of the OPDD indicated that titles were changed consistent with the revised AP-6.1Q.

Thurst 2/15/2002

Exhibit AP-16.1Q.2

Rev. 06/01/1999