



Department of Energy

Washington, DC 20585

QA: QA

MAR 06 2002

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National Spent Nuclear Fuel Program
Quality Assurance
U.S. Department of Energy
Idaho Operations Office
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Idaho Falls, ID 83401

**VERIFICATION OF CORRECTIVE ACTION AND CLOSURE OF DEFICIENCY REPORT
(DR) EM-01-D-144 RESULTING FROM THE OFFICE OF QUALITY ASSURANCE (OQA)
AUDIT EM-ARC-01-13 OF ENVIRONMENTAL MANAGEMENT**

The OQA staff has evaluated the corrective action of DR EM-01-D-144 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 Marilyn A. Kavchak at (702) 794-5423.

OQA:JB-0730

Enclosure:
DR EM-01-D-144

James Blaylock
Ram Murthy, Acting Director
Office of Quality Assurance

*Sue -
Pls add.*

*Melissa
Wyatt*



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*Melissa
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RADIOACTIVE WASTE MANAGEMENT
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ORIGINAL
8. ☒ DEFICIENCY REPORT
☐ CORRECTIVE ACTION REPORT
NO. EM-01-D-144
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DEFICIENCY/CORRECTIVE ACTION REPORT

1. Controlling Document: Program Management Procedure (PMP) 18.01, Revision 3, <i>Planning and Scheduling Assessments</i>		2. Related Report No.: EM-ARC-01-13	
3. Responsible Organization: National Spent Nuclear Fuel (NSNF) Program Quality Assurance		4. Discussed With: Don Armour	
5. Requirement: PMP 18.01, Section e (2), requires each assessment schedule to identify specific items including "a unique identification number for each scheduled assessment" and the "status of previously completed evaluation activities, including the status of open/closed findings."			
6. Description of Condition: Contrary to the referenced requirement, FY01 Quarterly NSNF Program Assessment Schedules failed to identify surveillances with unique numbers. Instead, x's were used as place markers resulting in several surveillances having the identical generic number initially assigned (i.e., 01-NSNF-S-xxx). Further, the NSNF Assessment Schedule for the 1 st Quarter FY01 identified Surveillance 00-NSNF-S-021 as "in progress" and was then dropped from subsequent issues of the Assessment Schedule before being statused as closed. Similarly, Surveillance 00-NSFN-S-006 was not tracked to completion as required.			
7. Initiator: for Marilyn A. Kavchak <i>Pat Aue</i> Date 9/20/01		9. Does a stop work condition exist? (Not required for a DR) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Check One: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	
10. Recommended Actions: Determine impact on not using assessment schedule as required by PMP. Determine if surveillances were completed.			
11. QA Review: for QAR Marilyn A. Kavchak <i>Pat Aue</i> Date 9/27/01		12. Response Due Date: 10 Working Days From Issuance	
13. DOQA Issuance Approval: Printed Name Robert D. Davis Signature <i>James Blaylock</i> Date 10/4/01			
22. Corrective Actions Verified: QAR <i>M. Kavchak</i> Date 2/25/02		23. Closure Approved by: DOE/OQA <i>James Blaylock</i> Date 3/6/02	

Exhibit AP-16.1Q.1

Rev. 12/20/1999

ENCLOSURE

1 of 3

TYPE RESPONSE:

☒ Initial☒ Complete☐ Amended

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DEFICIENCY/CORRECTIVE ACTION REPORT (RESPONSE)

14a. Immediate Actions:

Past assessments were reviewed to ensure that a unique identifying number had been assigned, all assessments were assigned a unique identifying number and were either performed or cancelled by the NSNFP program as required by procedure.

Compliance Date: Complete

14. Remedial Actions:

NSNFP procedure PMP-18.01, Rev. 3 will be revised to help preclude the chance of this condition reoccurring. PMP 18.01 will be revised by January 11, 2001.

The revised procedure will require the use of permanent identifying numbers (not place holders, i.e., XXX) for the identification of assessments. The requirement to track findings on the assessment schedule will be deleted. The use of the Corrective Action Tracking Trending System (CATTS) is the formal NSNFP process used to identify and track to closure any findings identified in assessments.

15. Extent of Condition:

A review of past issued Assessment Schedules identified that the practice of assigning XXX in lieu of a specific number had happened on several occasions during FY 2000 and FY 2001. Also, the assessment tracking condition was reviewed and appeared to exist in the assessment schedules issued during FY-2000 and FY-2001.

Both conditions, although not in compliance with procedural requirements, are considered to have no impact since all assessments were eventually accounted for, including those not permanently numbered. Also, as stated, the formal NSNFP process used to track finding to closure is the CATTS.

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

Place holders (i.e. XXX) were used in lieu of assigning specific assessment numbers for those assessment start dates that could not be defined at the time the schedule was issued. When the assessments were initiated the next sequential number was assigned and reflected on the next issue of the schedule. This practice was used to help maintain a sequential numbering system and prevent any mix-up in the timing of the assessments

The cause of the assessment tracking error was due to deleting all but the previous quarter (the last three months) assessments from the assessment schedule, as per the procedure. This made possible the clerical oversight of not identifying assessments that had not been closed or cancelled in the previous quarters.

17. Action to Preclude Recurrence:

The future surveillance schedules will track all assessments to either closure or cancellation and placeholders (XXX) will no longer be used.

Procedure PMP 18.01 was revised (Revision 4, effective date 1/15/02) to delete the requirement to status open or closed findings on the assessment schedule. The status of open and closed findings are and will be tracked by the NSNFP Corrective Action Tracking Trending System (CATTS). The CATTS issues bimonthly status reports on all open and closed items to appropriate personnel.

The appropriate NSNF staff will be required to complete training for PMP 18.01, Revision 4 prior to the effective date of January 15, 2002.

18. Due Date: January 18, 2001 2002

☒ For submittal of complete response☒ For completion of corrective action

19. Response by: Don A. Armour

Date: 12/6/01

Phone: 208-526-3512

20. Evaluation: ☒ Accept ☐ Partially Accept ☐ RejectQAR *Matawchuk*

Date 12/28/01

21. Concurrence:

DOQA *James Blythe*

Date

1/3/02

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8. ☐ DR/CAR
☐ Stop Work Order

NO. DR EM-D-01-144

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DEFICIENCY/CORRECTIVE ACTION REPORT/STOP WORK ORDER CONTINUATION PAGE

Recommendation for Closure

DR EM-01-D-144

A review of objective evidence associated with Deficiency Report (DR) EM-01-D-144 has been completed and as a result it is recommended that it be closed. The following is a summary of the documentation reviewed and/or the basis for this recommendation:

1. NSNFP Procedure PMP-18.01, Rev. 4, effective date 1/15/02 was revised as committed and my review indicates that appropriate changes were made that require the use of permanent identifying number (not place holders, ie, XXX) for the identification of assessments. The requirement to track finding on the assessment schedule was also deleted since this was not the practice. In fact the Corrective Action Tracking and Trending System (CATTs) is the document used for identify and track any finding identified in assessments. A review was also completed of the Second Quarter BY 2002 NSNF Program Assessment Schedule dated 12/19/02 to confirm that all scheduled assessment were properly numbered. Training records were reviewed that indicated training was completed as committed.
2. Documentation was provided that confirmed that a review of past assessments was completed as stated in the response in section 14a.
3. The CATTs Report dated 1/18/02 was provided by EM and it was confirmed that the method of tracking open deficiencies was being implemented.

Based on the review of documentation detailed above, it is recommended that DR EM-10-D-144 be closed.



Quality Assurance Representative

Marilyn A. Kavchak 2/15/02