



Department of Energy

Washington, DC 20585

QA: QA

APR 03 2002

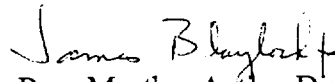
P. R. Dixon, Laboratory Lead
Los Alamos National Laboratory
University of California
P.O. Box 1663
Los Alamos, NM 87545

VERIFICATION OF CORRECTIVE ACTIONS AND CLOSURE OF DEFICIENCY REPORT (DR) BSC-02-D-058

The Office of Quality Assurance staff has evaluated the corrective actions of DR BSC-02-D-058 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 Samuel E. Archuleta at (702) 794-1476.

OQA:JB-0898


Ram Murthy, Acting Director
Office of Quality Assurance

Enclosure:
DR BSC-02-D-058



Printed with soy ink on recycled paper

*Nmisson
Wm-11*

APR 03 2002

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
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R. N. Wells, DOE/YMSCO (RW-60), Las Vegas, NV

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

8. ☒ DEFICIENCY REPORT
☐ CORRECTIVE ACTION REPORT
 NO. BSC-02-D-058
 PAGE 1 OF

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DEFICIENCY/CORRECTIVE ACTION REPORT

060 1/7/02

1. Controlling Document:

AP-SI.1Q REV 03 ICN 2

2. Related Report No.:

N/A

3. Responsible Organization:

Performance Assessment/Natural Barriers/Biosphere

4. Discussed With:

R. Andrews, W. Watson, S. Splawn, J. Mason

5. Requirement:

Section 5.11, Defect Reporting and Resolution, of the controlling document (see Item 1) requires that upon discovery of a defect in a software item that is subject to software management the appropriate steps are performed. The procedure, however, does not identify the time requirements for reporting/corrective actions.

6. Description of Condition:

Software defect in GENII-S V1.4.8.5, related to the way the code calculates percentiles of the probability distributions, was not reported until about 6 months after the initial discovery. Although the software was not used in any quality affecting activities between the time of the defect discovery and the time of reporting, and the organization/group that found the defect is the sole user of the software, it was determined that the response time was excessive. The software was used to generate input for the TSPA-SR. The preliminary impact analysis conducted upon the defect discovery indicated that the defect had no impact on the TSPA-SR results.

7. Initiator:

Maryla A. Wasiolek

9. Does a stop work condition exist? (Not required for a DR)

☐ Yes ☒ No

If Yes, Check One:

☐ A ☐ B ☐ C ☐ D

10. Recommended Actions:

NONE.

11. QA Review:

James Blaylock
QA

Date

1-16-02

12. Response Due Date:

10 working days from issuance

13. DOQA Issuance Approval:

Printed Name Ram Murthy

Signature

James Blaylock

Date

1/29/02

22. Corrective Actions Verified

QA

James Blaylock

Date

3/25/02

23. Closure Approved by:

DOQA

James Blaylock

Date

4/2/02

TYPE RESPONSE:

- ☒ Initial
☐ Complete
☐ Amended

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WASHINGTON, D.C.**

DR/CAR NO.

BSC-02-D-058

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OF

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DEFICIENCY/CORRECTIVE ACTION REPORT (RESPONSE)**14a. Immediate Actions:**

No actions needed. A Software Defect Notice (SDN) for the problems observed with the GENII-S V.1.4.8.5 was submitted on an SDN form on 12/06/01. All actions specified in AP-SI.1Q Rev 3, Section 5.11 have been completed.

Compliance Date: 12/06/01

14. Remedial Actions:

Any remedial actions in addition to the Immediate Action described above will be based on the findings from the Extent of Condition determination described below. These remedial actions will be presented in the Complete Response to this deficiency report (DR).

15. Extent of Condition:

With the help of the Software Configuration Management group (SCM), the number of SDNs not created by SCM staff and submitted since the current revision/ICN of the procedure was in place will be determined. These SDNs will be reviewed. The review will consist of comparing Date Error or Defect Encountered (SDN form Block 5) with the date the SDN is submitted to SCM (SDN form, Block 8). The length of these time intervals will be reviewed for reasonableness. Reasonableness criteria will be established based on the observed time intervals reported and on the judgement of select users and Information Compliance staff and with the concurrence of the QAR. Findings from this review will be submitted to the QAR for verification.

Completion Date: March 29, 2002

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

The cause of this deficient condition will be based on the findings from the determination of the Extent of Condition and will be described in the Complete Response to this DR. If the review described in Block 15 indicates that this deficient condition is an isolated incident, the cause of this single error will be determined and described in the Complete Response to this DR.

17. Action to Preclude Recurrence:

Actions to Preclude Recurrence will be based on the determined cause(s) and will be detailed in the Complete Response to this DR.

18. Due Date: March 29, 2002

- ☒ For submittal of complete response
☐ For completion of corrective

19. Response by: Anthony Smith

RF

Date: February 13, 2002 Phone: 5-7773

20. Evaluation: ☒ Accept ☐ Partially Accept ☐ Reject

QAR

Date 2-26-02

21. Concurrence:

DOQA

James B. Boyd Jr.

Date

2/27/02

TYPE RESPONSE:

- ☐ Initial
☒ Complete
☐ Amended

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WASHINGTON, D.C.**

DR/CAR NO.

BSC-02-D-058

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QA: QA

DEFICIENCY/CORRECTIVE ACTION REPORT (RESPONSE)

14a. Immediate Actions: N/A

14. Remedial Actions: Based on the extent of condition determination discussed in Section 15, no remedial action is warranted for this deficiency in timely reporting.

15. Extent of Condition:

Review of SDNs was conducted on February 21, 2002 with the assistance of Jeff Mason of the SCM group. The SDN review included all SDNs not created by SCM that were submitted since April 1, 2001. That date was selected because: 1) it is prior to the limited management stand-down of software development on June 7, 2001; and 2) it is the effective date of a significant change (Revision 3) to AP-SI.1Q. Review of attention to software error reporting prior to that time is considered to likely not reflect the current situation. Seven such SDNs exist to date. The date of encountering each software error or defect (SDN item 5) and the date of submitting each SDN (item 8) were compared. The findings of this review are included here. (Continued on continuation page)

16. Cause: The cause of untimely submittal of potential errors or defects in the GENII-S software by the Biosphere Department is the lack of attention to this requirement in AP-SI.1Q by the personnel involved in this software activity.

The three personnel involved had last attended training on AP-SI.1Q on June 23, 2000, per TrainServe. Also, according to TrainServe, these three staff members (Anthony Smith, De (Wesley) Wu, and Maryla Wasiolek) received updated and refresher training on AP-SI.1Q shortly after the untimely SDN submittal on December 6, 2001. One person attended training on each of December 12, 13 and 17, 2001. (Continued on continuation page)

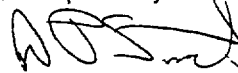
17. Action to Preclude Recurrence: : Based on the cause of this deficiency, the following are the actions to preclude recurrence:

- 1) assure the Biosphere personnel involved in software use (other than off-the-shelf programs) are trained to a version of procedure AP-SI.1Q that requires software defect reporting,
- 2) Department Manager brief the involved Biosphere personnel regarding this deficiency and its resolution, and
- 3) Department Manager reiterate to involved Biosphere personnel the need for verbatim procedure compliance.

(Continued on continuation page)

18. Due Date: ~~20 March, 2002~~ MARCH 15, 2002☒ For submittal of complete response☒ For completion of corrective ACTION

19. Response by: Anthony J Smith



Date: RF Phone: 295-4040

20. Evaluation: ☒ Accept ☐ Partially Accept ☐ Reject

QAR

Date

21. Concurrence:

DOQA

Date

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RADIOACTIVE WASTE MANAGEMENT
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WASHINGTON, D.C.

8. ☒ DR/CAR
☐ Stop Work Order

NO. BSC-XX-D-YYY

PAGE 1 OF 2
QA: QA

DEFICIENCY/CORRECTIVE ACTION REPORT/STOP WORK ORDER CONTINUATION PAGE

Item 15 (Continued)

Findings of the SDNs Review:

SDN Number	Software	Organization	Time from Encountering to Submittal (work days)
SDN008220010625	WAPDEG v 4.0	Waste Package	1
SDN001120010524	RoutineRick 1 v1.0	LBNL	0
SDN008920010727	WAPDEG v4.0	Waste Package	3
SDN009320011012	Radpro v 3.22	LLNL	19
SDN009420011221	GENII-S v1.4.8.5	Biosphere	~109
SDN009520011221	GENII-S v1.4.8.5	Biosphere	42 (see note)
SDN009620011221	GENII-S v1.4.8.5	Biosphere	3

Note: The 42 and 109-day time interval SDNs were submitted on the same day, December 6, 2001.

The review of all pertinent SDNs issued to date finds that this deficiency is effectively limited to the Biosphere Department. A trend is not indicated. In addition, based on the findings from the extent of condition determination, the impact of this deficiency is limited to the Biosphere Department and to these two codes. No other groups or staff members have used these codes. Actions beyond this group are not warranted based on the extent of condition

Item 16 (Continued)

This situation does not warrant performance of a root cause determination in accordance with AP-16.4Q. The cause analysis and results presented above are sufficient. Consideration of the pertinent procedures concludes:

- 1) the conditions specified in AP-16.1Q, Management of Conditions Adverse to Quality, for performing a root cause determination (RCD) are not present. Attachment 8, Requirements for a DR/CAR Response, Step 2 C, Cause Determination, requires this formal RCD "if the cause is not known or the condition is considered a significant deficiency...", and
- 2) AP-16.4Q, Root Cause Determination, specifies in step 5.1.1 that the responsible individual is to "determine the need to perform an RCD in accordance with AP-16.1Q" upon receipt of a DR. Instruction for that determination is addressed in AP-16.1Q, as discussed in 1) above.

The condition being addressed is not considered "a significant deficiency" and the cause is apparent, not unknown. Therefore, the determination of cause has been performed in accordance with the pertinent procedures, and without need of an RCD.

Item 17 (Continued)

As discussed in Section 16, Cause, the training required in item one has been accomplished and is reflected in TrainServe. Attached are hard copies of email demonstrating that the communication required in items two and three has been performed, and has been acknowledged by the recipients.

Upon investigating the cause and extent of condition of this deficiency, the option of a procedural feature specifying the definition of timely reporting was determined to be unwarranted to enhance compliance. Lack of attention to software defect reporting, not lack of specificity regarding reporting timing, was the cause of this deficiency. In addition, the extent of condition review indicates that organizations other than Biosphere are rather timely in their reporting of defects, without a specific timing requirement stated in the procedure. Requesting a procedure change to add a definition of timely reporting has been determined as unwarranted to preclude recurrence.

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT

QA: QA

SOFTWARE DEFECT NOTIFICATION

Complete Only Applicable Items

COPY Page 1 of 2

1. Software Tracking Number: CSCI: 30034 V1.4.8.5	2. Software Name and Version: GENII-S V1.4.8.5	3. Software Activity Number: N/A
4. Source of Error or Defect: <input type="checkbox"/> Internal to CRWMS <input checked="" type="checkbox"/> External to CRWMS (Supplier or Outside User) Name (if available) _____ Address (if available) _____ Phone (if available) _____		
5. Date Error or Defect Encountered: 7/2/01	6. Has Error or Defect Been Verified? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7. Document the environment under which error or defect occurred (such as Operating System, Switch Settings, Location in the Code, and the Input Range where the error occurred) or attach a copy of the error notice/documentation received from the supplier and include a proposed resolution: INTRODUCTION GENII-S V1.4.8.5 can generate both the deterministic output and the statistical output. The code consists of two parts, a pre-GENII and GENII-S. The type of output is selected in the Pre-GENII part. The example described in this description of the software defect uses the type of statistical output called the Statistical Committed Dose Summary, which is required for the biosphere dose conversion factor calculation. This output quantity is selected from the Pre-GENII menus (Pre-GENII Main Menu --> Select Stat. Output; Choose Output Options --> Stat. Committed Dose Summary). The GENII-S output block consists of the results of individual model realizations that include both sampled independent variables and the resulting dependent variables. The number of realizations is determined by the user, although it is limited by the size of the output block. The results for individual variables can be displayed, using an output menu, in form of the statistics. The sequence of menu selections to get the statistics is as follows: Main Menu --> Examine Output Main Output Menu --> Statistical Results Statistical Output Menu --> Examine Sample Statistics Select Output for Display --> Stat. Committed Dose Summary followed by the selection of the required variable. The displayed statistics for the selected variable include the minimum, maximum, mean, standard deviation, and percentiles in increments of 5. The user can also save the results of the individual realizations to an ASCII file and then calculate the statistics using an external software, such as Excel. The sequence of menu selections to save the results to a text file is as follows: Main Output Menu @ Other Output Other Output @ Write Output Block to ASCII File Select Output for Display @ Stat. Committed Dose Summary Enter ASCII File Name with Path DESCRIPTION OF THE DEFECT When the percentiles for the biosphere dose conversion factor data were calculated, the GENII-S values were not consistent with the percentiles calculated using Excel, although the discrepancies were not very significant. The subsequent investigation revealed that this happens when the number of realizations divided by 20 (to get percentiles in increments of 5) is not an integer number. This is because the percentile values are calculated by GENII-S for the numbers of data points which are multiples of the nearest integer obtained by dividing the number of realizations by 20 rather than for the actual number of data points contributing to a given percentile value. Moreover, the first and the last interval are not the same size as the remaining intervals. (See Addendum 1)		
8. User or Developer Name: Maryla A. Wasiolek	User or Developer Org.: PA/Biosphere	Date: 12/6/01
9. Software Status Accounting Name and Signature: Jeff Mason	Software Status Accounting SDN Number: SDN0004H20011224	Date: 12/21/2001
10. Software Configuration Management Verifier Name and Signature: Lyle Southworth		Date: 12/21/2001
11. Software Configuration Management Name and Signature: Stephen S. Sullivan		Date: 12/21/01

Addendum 1
(See continuation page)

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT
SOFTWARE CONTINUATION PAGE

QA: QA

Page: 2 of: 2

Complete Only Applicable Items

1. Software Tracking Number:
CSCI: 30034 V1.4.8.5

2. Software Name and Version:
GENII-S V1.4.8.5

3. Software Activity Number:

4. Continuation for:

☐ SOFTWARE BASELINE REQUEST

☐ SOFTWARE USER REQUEST

☒ SOFTWARE DEFECT NOTIFICATION

DESCRIPTION OF THE DEFECT (continued)

For example, for 150 data points, there are 8 data points per percentile interval ($150/20 = 7.5$, which when rounded to the nearest integer gives 8 data points). However, $8 \times 20 = 160$, which is more than the number of realizations. Therefore, only the 2nd through 19th intervals contain 8 points; the 1st and the 20th interval contain only 3 points each for the total of 150.

PROPOSED RESOLUTION

GENII-S percentiles are correct if the number of realizations is divisible by 20. If the number of realizations is not divisible by 20 then, to get the percentiles, the results should be saved to ASCII file and the percentiles should be calculated externally.

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT
SOFTWARE CONTINUATION PAGE

QA: QA

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Complete Only Applicable Items

1. Software Tracking Number:
CSCI: 30034 V1.4.8.5

2. Software Name and Version:
GENII-S V1.4.8.5

3. Software Activity Number:

4. Continuation for:

☐ SOFTWARE BASELINE REQUEST

☐ SOFTWARE USER REQUEST

☒ SOFTWARE DEFECT NOTIFICATION

Continuation page for the software defect regarding calculation of the distribution percentiles.

IMPACT ANALYSIS

The Biosphere Dose Conversion Factors (BDCFs) generated by the affected software were used as input to the TSPA-SR model. However, there is no impact of this defect on the TSPA-SR results because:

- (1) the BDCFs for the groundwater release exposure scenario that were used in TSPA-SR were developed, as distribution functions, from the results of individual model realizations and the percentiles were not used;
- (2) the BDCFs for the volcanic release exposure scenario that were used in TSPA-SR were developed by producing 160 model realizations. Since 160 is divisible by 20, the percentiles were calculated correctly.

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT

SOFTWARE DEFECT NOTIFICATION

QA: QA

Page: 1 of: 1

Complete Only Applicable Items

COPY

1. Software Tracking Number: CSCI: 30034 V1.4.8.5	2. Software Name and Version: GENII-S V1.4.8.5	3. Software Activity Number: <div style="text-align: center; font-size: 1.2em;">N/A</div>
4. Source of Error or Defect: <div style="margin-left: 20px;"> <input type="checkbox"/> Internal to CRWMS <input checked="" type="checkbox"/> External to CRWMS (Supplier or Outside User) </div> <div style="margin-left: 40px;"> Name (if available) _____ Address (if available) _____ Phone (if available) _____ </div>		
5. Date Error or Defect Encountered: 12/07/01	6. Has Error or Defect Been Verified? <div style="margin-left: 20px;"> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div>	
7. Document the environment under which error or defect occurred (such as Operating System, Switch Settings, Location in the Code, and the Input Range where the error occurred) or attach a copy of the error notice/documentation received from the supplier and include a proposed resolution: <div style="margin-left: 20px;"> <p>INTRODUCTION</p> <p>GENII-S V1.4.8.5 is the code that supports modeling of environmental transport of radionuclides in the environment. The environmental transport of carbon-14 (C-14) is addressed in GENII-S by a suite of special submodels, that are designed specifically for this radionuclide. One of the submodels concerns the C-14 transfer from water to crops. The formula used to quantify this process includes the parameter of effective removal constant for C-14 in the soil. The removal constant of carbon from soil is one of the user-defined input parameters that can be entered in the FTRANS.DAT input file.</p> <p>DESCRIPTION OF THE DEFECT</p> <p>The effective removal constant for carbon in the special model for C-14 transfer from water to crops is hard-wired into the code at 0.8 per year. The value defined by the user, which is included in the FTRANS.DAT file, is not used by the code.</p> <p>OTHER ISSUES</p> <p>With regard to the GENII-S special models for C-14, the user needs to be aware that the consumption of contaminated water by animals is not included in the model that calculates C-14 concentration in animal products, which may lead to non-conservative results. Also, the code does not consider C-14 concentration in soil as a result of irrigation with contaminated water. Therefore, the pathways that could be associated with C-14 contaminated groundwater scenario, such as inhalation of C-14 released from the soil and ingestion of contaminated soil, are not included.</p> <p>PROPOSED RESOLUTION</p> <p>The user needs to evaluate the significance of the defect and the omissions on the individual case basis.</p> </div>		
8. User or Developer Name: Maryla A. Wasiolek	User or Developer Org.: PA/Biosphere	Date: 12/12/01
9. Software Status Accounting Name and Signature: <div style="font-family: cursive;">Jeff Mason</div>	Software Status Accounting SDN Number: SDN007620011221	Date: 12/21/2001
10. Software Configuration Management Verifier Name and Signature: <div style="font-family: cursive;">Lyle C Southworth</div>		Date: 12/21/2001
11. Software Configuration Management Name and Signature: <div style="font-family: cursive;">Stephen B. Shaw</div>		Date: 12/21/01

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT
SOFTWARE CONTINUATION PAGE

QA: QA

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Complete Only Applicable Items

1. Software Tracking Number: CSI: 30034 V1.4.8.5	2. Software Name and Version: GENII-S	3. Software Activity Number: N/A
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4. Continuation for:

☐ SOFTWARE BASELINE REQUEST

☐ SOFTWARE USER REQUEST

☒ SOFTWARE DEFECT NOTIFICATION

Continuation page for software defect concerning the value of C-14 removal constant from soil.

IMPACT ANALYSIS

If the user-developed leaching coefficient of 0.132/year were used instead of the "hard-wired" value of 0.8/year, the BDCF for C-14 would increase by about a factor of 3 compared with the value used in the TSPA-SR (the ratio of the BDCF values is about 4).

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT

SOFTWARE DEFECT NOTIFICATION

QA: QA

COPY

Complete Only Applicable Items

1. Software Tracking Number: CSCI: 30034 V1.4.8.5	2. Software Name and Version: GENII-S V1.4.8.5	3. Software Activity Number: N/A
4. Source of Error or Defect: <input type="checkbox"/> Internal to CRWMS <input checked="" type="checkbox"/> External to CRWMS (Supplier or Outside User) Name (if available) _____ Address (if available) _____ Phone (if available) _____		
5. Date Error or Defect Encountered: 9/1/01	6. Has Error or Defect Been Verified? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7. Document the environment under which error or defect occurred (such as Operating System, Switch Settings, Location in the Code, and the Input Range where the error occurred) or attach a copy of the error notice/documentation received from the supplier and include a proposed resolution: <p>INTRODUCTION GENII-S V1.4.8.5 is the code that supports modeling of environmental transport of radionuclides in the environment. One of the processes that may be included in the calculations carried out with GENII-S is the removal of radionuclides from soil by crop harvesting. Harvest removal can be switched on by setting the value of the controlling parameter called HARVST in the DEFAULT.IN file to true (HARVST = false if harvest removal is not to be included). In the current biosphere model, this parameter was set to "true" which meant that the radionuclide removal by crop harvesting was supposed to be considered for the consideration of long-term radionuclide accumulation in soil.</p> <p>DESCRIPTION OF THE DEFECT In the process of the biosphere model validation the GENII-S approach to the harvest removal process was examined. A series of tests were conducted to show if the results of GENII-S calculations were sensitive to the value of HARVST parameter. The tests were designed such that they magnified the effect of radionuclide removal by crop harvesting, by the appropriate selection of input parameters, to ensure that the effect was observable. The results of the tests indicated that the GENII-S output was insensitive to inclusion of harvest removal. In other words, it appears that the mathematical representation of this process is not effectively implemented by the code.</p> <p>PROPOSED RESOLUTION The fact that the harvest removal process is not included does not appear to be affecting the treatment of other processes by the GENII-S code. However, the user needs to be aware that the process of radionuclide removal from soil by crop harvesting is not included in the GENII-S calculations regardless of the setting of the controlling parameter. This results in more conservative output.</p>		
8. User or Developer Name: Maryla A. Wasiolek	User or Developer Org.: PA/Biosphere	Date: 12/06/01
9. Software Status Accounting Name and Signature: <i>Jeff Mason</i>	Software Status Accounting SDN Number: SDN0002001121	Date: 12/21/2001
10. Software Configuration Management Verifier Name and Signature: <i>Lyle Southworth</i>		Date: 12/21/2001
11. Software Configuration Management Name and Signature: <i>Stephen B. S.</i>		Date: 12/21/01

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT
SOFTWARE CONTINUATION PAGE

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Complete Only Applicable Items

1. Software Tracking Number: CSCI:3034 V1.4.8.5	2. Software Name and Version: GENII-S V1.4.8.5	3. Software Activity Number:
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4. Continuation for:

☐ SOFTWARE BASELINE REQUEST ☐ SOFTWARE USER REQUEST ☒ SOFTWARE DEFECT NOTIFICATION

Continuation page for the software defect concerning not including harvest removal.

IMPACT ANALYSIS

Not including harvesting as one of the processes of radionuclide removal from soil results in the BDCFs being more conservative compared to the BDCFs that take account of this process. Because it was determined that GENII-S is insensitive to the value of parameter that controls adding/removing of this process to the model, it is not possible to exactly evaluate the magnitude of the added conservatism. However, the future biosphere modeling will not include this removal process to account for the possible radionuclide recycling mechanism when the multi-year land use is considered.

NOTE

The date the defect was encountered has been entered incorrectly on the first page of this software defect notification. It should be 10/10/01, per memo from Wesley Wu who discovered the defect.




Wesley Wu

03/01/2002 01:22 PM

To: Anthony Smith/YM/RWDOE@CRWMS

cc:

Subject: Re: Recent Deficiency and the Need for Complying with Procedures Verbatim 

QA:QA Inclusionary

Thanks Tony. I have read and understand your message on the recent deficiency and reiterating the need for complying with procedures verbatim.

Wesley

From: Anthony Smith on 03/01/2002 11:38 AM

From: Anthony Smith on 03/01/2002 11:38 AM

To: Maryla Wasiolek/YM/RWDOE@CRWMS, Jeff Tappen/YM/RWDOE@CRWMS, Wesley Wu/YM/RWDOE@CRWMS

cc:

Subject: Recent Deficiency and the Need for Complying with Procedures Verbatim

QA:QA Inclusionary

The messages in this email are being communicated to the Biosphere team members to help preclude recurrence of a deficiency in our performance. While we typically perform very well, we need to enhance our attention to performance in the area of software error or defect reporting. And more generally, we need to reinforce our need to comply with procedures verbatim.

Please read this message, commit to act in accordance with it, and send me a response to that effect by Close of Business Monday 04 March 2002.

As you are aware, a Deficiency Report was issued because we did not submit a Software Defect Notification (SDN) upon encountering problems with GENII-S code. For the problem with percentiles, approximately 109 workdays passed between discovery and submittal, and for the harvest problem, 42 work days transpired before reporting. The procedure, AP-SI.1Q, states that "upon discovery" the responsible manager is to perform the two investigative steps and the three reporting steps contained in 5.11.1. We failed to timely perform these steps to conclusion.

The press of workload and the recognition that other organizations were likely not impacted are among the reasons for not having reported upon discovery. However, no reasons are satisfactory for failing to comply with procedural requirements, other than significant safety considerations in which case the work should be stopped. Lack of attention to the specific procedural requirement is the cause of the current deficiency.

The policy of verbatim compliance with all procedural requirements must be practiced by each of us in all the work we perform. We have all been taught and know this. This recent deficient performance indicates a lapse in performing in the way we know is right. We must correct any thinking that has crept in that could cause us to not practice compliance with procedures verbatim.

Cases of recognized or suspected need to comply with procedural requirements competing with demands on our time and attention may well occur again. You are instructed to bring these to my attention as the responsible manager as soon as possible. No one is authorized to make priority decisions that delay or ignore verbatim compliance. The manager must be made aware in a timely manner, which will permit

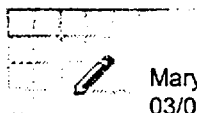
making arrangements to assure procedural compliance and satisfy work demands for which the manager is responsible.

If you have questions, please discuss them with me in person. I want to clear up any concerns.

I recognize that our work is of very high caliber and we are very careful about procedural compliance. This message is to help enhance performance in one area where we recently varied from that standard.

Action: As part of the DR resolution process, please reply to this message, using the Reply with History Option, with a short email to me by close of business Monday 04 March 2002. The email should state something like:- "I have read and understand your message on the recent deficiency and reiterating the need for complying with procedures verbatim." Assure that you label the response "**QA and Inclusionary**".

Thank you.



Maryla Wasiolek
03/01/2002 01:19 PM

To: Anthony Smith/YM/RWDOE@CRWMS
cc:

Subject: Re: Recent Deficiency and the Need for Complying with Procedures Verbatim

QA:QA Inclusionary

I have read and understand your message on the recent deficiency and reiterating the need for complying with procedures verbatim.

From: Anthony Smith on 03/01/2002 11:38 AM

From: Anthony Smith on 03/01/2002 11:38 AM

To: Maryla Wasiolek/YM/RWDOE@CRWMS, Jeff Tappen/YM/RWDOE@CRWMS, Wesley Wu/YM/RWDOE@CRWMS

cc:

Subject: Recent Deficiency and the Need for Complying with Procedures Verbatim

QA:QA Inclusionary

The messages in this email are being communicated to the Biosphere team members to help preclude recurrence of a deficiency in our performance. While we typically perform very well, we need to enhance our attention to performance in the area of software error or defect reporting. And more generally, we need to reinforce our need to comply with procedures verbatim.

Please read this message, commit to act in accordance with it, and send me a response to that effect by Close of Business Monday 04 March 2002.

As you are aware, a Deficiency Report was issued because we did not submit a Software Defect Notification (SDN) upon encountering problems with GENII-S code. For the problem with percentiles, approximately 109 workdays passed between discovery and submittal, and for the harvest problem, 42 work days transpired before reporting. The procedure, AP-SI.1Q, states that "upon discovery" the responsible manager is to perform the two investigative steps and the three reporting steps contained in 5.11.1. We failed to timely perform these steps to conclusion.

The press of workload and the recognition that other organizations were likely not impacted are among the reasons for not having reported upon discovery. However, no reasons are satisfactory for failing to comply with procedural requirements, other than significant safety considerations in which case the work should be stopped. Lack of attention to the specific procedural requirement is the cause of the current deficiency.

The policy of verbatim compliance with all procedural requirements must be practiced by each of us in all the work we perform. We have all been taught and know this. This recent deficient performance indicates a lapse in performing in the way we know is right. We must correct any thinking that has crept in that could cause us to not practice compliance with procedures verbatim.

Cases of recognized or suspected need to comply with procedural requirements competing with demands on our time and attention may well occur again. You are instructed to bring these to my attention as the responsible manager as soon as possible. No one is authorized to make priority decisions that delay or ignore verbatim compliance. The manager must be made aware in a timely manner, which will permit making arrangements to assure procedural compliance and satisfy work demands for which the manager is responsible.

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I recognize that our work is of very high caliber and we are very careful about procedural compliance. This message is to help enhance performance in one area where we recently varied from that standard.


Action: As part of the DR resolution process, please reply to this message, using the Reply with History Option, with a short email to me by close of business Monday 04 March 2002. The email should state something like:- "I have read and understand your message on the recent deficiency and reiterating the need for complying with procedures verbatim." Assure that you label the response **"QA and Inclusionary"**.

Thank you.

Jeff Tappen

03/01/2002 12:58 PM

To: Anthony Smith/YM/RWDOE@CRWMS
cc:

Subject: Re: Recent Deficiency and the Need for Complying with Procedures Verbatim 

QA:QA Inclusionary

I have read and understand the attached message concerning the recent deficiency and reiterating the need for complying with procedures verbatim. You have my commitment to comply with procedures verbatim.

From: Anthony Smith on 03/01/2002 11:38 AM

From: Anthony Smith on 03/01/2002 11:38 AM

To: Maryla Wasiolek/YM/RWDOE@CRWMS, Jeff Tappen/YM/RWDOE@CRWMS, Wesley Wu/YM/RWDOE@CRWMS
cc:

Subject: Recent Deficiency and the Need for Complying with Procedures Verbatim

QA:QA Inclusionary

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Please read this message, commit to act in accordance with it, and send me a response to that effect by Close of Business Monday 04 March 2002.

As you are aware, a Deficiency Report was issued because we did not submit a Software Defect Notification (SDN) upon encountering problems with GENII-S code. For the problem with percentiles, approximately 109 workdays passed between discovery and submittal, and for the harvest problem, 42 work days transpired before reporting. The procedure, AP-SI.1Q, states that "upon discovery" the responsible manager is to perform the two investigative steps and the three reporting steps contained in 5.11.1. We failed to timely perform these steps to conclusion.

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If you have questions, please discuss them with me in person. I want to clear up any concerns.

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Action: As part of the DR resolution process, please reply to this message, using the Reply with History Option, with a short email to me by close of business Monday 04 March 2002. The email should state something like:- "I have read and understand your message on the recent deficiency and reiterating the need for complying with procedures verbatim." Assure that you label the response "**QA and Inclusionary**".

Thank you.

From: Anthony Smith on 03/12/2002 05:49 PM
To: Anthony Smith/YM/RWDOE@CRWMS
cc: Jeff Tappen/YM/RWDOE@CRWMS

Subject: Re: Recent Deficiency and the Need for Complying with Procedures Verbatim 

QA:QA Inclusionary

Being one of the involved parties, I am letting you know my response to this request to acknowledge future actions with regard to the reported deficiency.

For the record, I have written, read and understand the attached message concerning the recent deficiency and reiterating the need for complying with procedures verbatim. In future I commit to comply with procedures verbatim.

From: Anthony Smith on 03/01/2002 11:38 AM

From: Anthony Smith on 03/01/2002 11:38 AM
To: Maryla Wasiolek/YM/RWDOE@CRWMS, Jeff Tappen/YM/RWDOE@CRWMS, Wesley Wu/YM/RWDOE@CRWMS
cc:

Subject: Recent Deficiency and the Need for Complying with Procedures Verbatim

QA:QA Inclusionary

The messages in this email are being communicated to the Biosphere team members to help preclude recurrence of a deficiency in our performance. While we typically perform very well, we need to enhance our attention to performance in the area of software error or defect reporting. And more generally, we need to reinforce our need to comply with procedures verbatim.

Please read this message, commit to act in accordance with it, and send me a response to that effect by Close of Business Monday 04 March 2002.

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Thank you.

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

☒ DR/CAR/QO
☐ SWO

NO. BSC-02-D-058

PAGE ____ OF ____
QA: QA

CONDITION ADVERSE TO QUALITY CONTINUATION PAGE

Verification of corrective action commitments pertaining to this Deficiency Report (DR) was conducted on March 25, 2002.

Immediate Action: Confirmed that a Software Defect Notice (SDN) had been generated on 12/06/01, and had been properly processed as specified in AP-SI.1Q, Software Management. Verified by contact with Software Configuration Management (SCM) personnel that the SDNs have been fully processed to closure. Also confirmed, through review of the final response documents, that no other problems emerged following the extent of condition determination, thus no remedial actions were required beyond the generation of the SDN.

Extent of Condition: Reviewed the data generated as the result of the extent of condition evaluation conducted with the assistance of the SCM group. Of the seven SDNs observed, only the SDNs cited in this deficiency involved what could be regarded as excessive delays in problem reporting. During this verification, also contacted SCM to determine if any other SDNs had been submitted. Only one SDN was submitted since the extent of condition study was conducted on 2/21/02. This SDN was generated by a different group and did not involve a delay in processing. The extent of condition is determined to be very limited in terms of organizations and software codes involved.

Impact: Because the codes involved in this deficiency are used by only one organization (Biosphere Department), and because that organization was aware of the problem with the codes, impact is deemed to be very limited in scope. As documented in the impact statements within the SDN, the problems in the code had no impact on Total System Performance Assessment for Site Recommendation (TSPA-SR). Impact is deemed to be negligible.

Cause: Concur with the Responsible Manager's assessment of the cause. It is deemed to be accurate and sufficiently broad to account for the conditions described in this DR. Concur that conditions are not such that a root cause determination is not required.

Actions to Preclude Recurrence: Verified that all staff members involved in the condition as described in this DR have, in fact, completed the training as stated in commitment 1. Completion of training is posted on the Train Serve web site. Also verified that management has communicated the concerns described in commitments 2 and 3. Documents submitted with the complete response include statements from staff members indicating their understanding of the issues involved in this DR, and their understanding of the requirements for verbatim procedure compliance. The return emails also contain a commitment to comply with procedural controls on a verbatim basis.

The extent of condition appears to have been thoroughly investigated. The assessment of cause is deemed to be accurate, and the actions to preclude recurrence have been effectively taken. I recommend that this DR be closed at this time.



Sam E. Archuleta
QA Representative

3/25/02
Date



Department of Energy

Washington, DC 20585

APR 03 2002

QA: QA

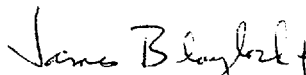
D. E. Calloway
Bechtel SAIC Company, LLC
1180 Town Center Drive, M/S 423
Las Vegas, NV 89144

VERIFICATION OF CORRECTIVE ACTIONS AND CLOSURE OF DEFICIENCY REPORT (DR) BSC-02-D-059

The Office of Quality Assurance staff has evaluated the corrective actions of DR BSC-02-D-059 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 Christian M. Palay at (702) 794-1486.

OQA:JB-0899


Ram Murthy, Acting Director
Office of Quality Assurance

Enclosure:
DR BSC-02-D-059



Printed with soy ink on recycled paper

NM5509
WM-11

APR 03 2002

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
S. H. Horton, BSC, Las Vegas, NV
C. A. Humphries-Alder, BSC, Las Vegas, NV, M/S 280
M. J. Johnson, BSC, Las Vegas, NV
R. P. Keele, BSC, Las Vegas, NV, M/S 280
D. T. Krishna, BSC, Las Vegas, NV
D. M. Kunihiro, BSC, Las Vegas, NV
Charles Sharrocks, BSC, Las Vegas, NV
T. J. Wall, BSC, Las Vegas, NV
W. J. Glasser, NQS, Las Vegas, NV
D. G. Opielowski, NQS, Las Vegas, NV
C. M. Palay, 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
R. N. Wells, DOE/YMSCO (RW-60), Las Vegas, NV

OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

8. ☒ DEFICIENCY REPORT
☐ CORRECTIVE ACTION REPORT
NO. BSC-02-D-059
PAGE 1 OF
QA: *LQR*

DEFICIENCY/CORRECTIVE ACTION REPORT

D60 11/10/02

1. Controlling Document: AP-6.1Q, Rev. 6, ICN 1, Controlled Distribution		2. Related Report No.: N/A	
3. Responsible Organization: Document Control		4. Discussed With: Marty Johnson, Michelle Prater	
5. Requirement: AP-6.1Q, Revision 6, ICN 1 Section 5.3.3 b) states, "If an effective date is required by the governing procedure for the document, set an effective date a minimum of three business days after the acceptance of the document." Section 5.4 f) states, "Prior to the effective date, transmit the controlled distribution copies to the Document Holders using"			
6. Description of Condition: Contrary to the above requirements, Document Control accepted and posted the following documents on the OCRWM Program Document Database after their effective dates: LP-OM-045Q-BSC, Rev. 0, "Concrete Batch Plant Operation" was received by DC on 12/12/01 posted 12/13/01 effective 11/10/01 TWP WIS-MD-00007, Rev. 0, "Technical Work Plan for: Igneous Activity Analyses for Disruptive Events" received 12/10/01, posted 12/12/01 effective 11/28/01.			
7. Initiator: <i>Cynthia Humphries-Alder</i> <i>Cynthia Humphries-Alder</i> Date 01/04/02		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: None			
11. QA Review: QAR <i>Chris Palay</i> Date 01/09/02		12. Response Due Date: 10 working days from issuance	
13. DOQA Issuance Approval: Printed Name Ram Murthy Signature <i>Jane Blaylock</i> Date 1/11/02			
22. Corrective Actions Verified QAR <i>Chris Palay</i> Date 03/27/02		23. Closure Approved by: DOQA <i>Jane Blaylock</i> Date 4/2/02	

TYPE RESPONSE:

- ☒ Initial
☐ Complete
☐ Amended

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

DR/CAR NO. BSC-02-D-059

PAGE 2

OF

QA: *K QA***DEFICIENCY/CORRECTIVE ACTION REPORT (RESPONSE)****14a. Immediate Actions:**

The Document Control Supervisor advised her staff of the violation and directed that no documents be accepted when the effective date is shown as before the date of delivery to Document Control. An e-mail memo was issued to this effect, and each staff member was required to sign and date a hard copy of the memo indicating acknowledgment of the directive. A follow-up letter of clarification was also issued the next day.

Compliance Date: 12/18/2001 and 12/19/2001(Follow-up)

14. Remedial Actions:

No remedial actions were performed on the documents cited by this DR, as their condition is documented by this DR. A "Memo to File" will be placed in the records file of both documents, as well as in the files of any other documents found having this condition. The memo will reference this DR to indicate awareness of the discrepancy between the effective dates and the DC posting dates. The Document Control Supervisor will accomplish this by February 1, 2002.

15. Extent of Condition:

Document Control reviewed the records log of all TWP's issued between October 1, 2001 and the date of the new directive issued by the Document Control Supervisor -- 12/18/01. October 1 was selected because TWP's would need updating for FY02 and would be candidates for urgent completion when funding was finally available after "continuing resolution." Of 36 TWP's issued during the period, only three (3) had effective dates before the "DC Received" date. One TWP is cited by this DR, and the two others are TWP-HBS-ST-000001 Rev. 0, and TWP-MGR-MD-000025, Rev. 0.

The records log for procedures was also reviewed for similar conditions during the same period. Only the procedure cited in this DR had an effective date before delivery to Document Control.

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

According to AP-6.1Q, an effective date is defined as "the date set AFTER acceptance of the document for controlled distribution." Contrary to this definition, document owners had set effective dates prematurely, and further compounded the condition by delaying document delivery to Document Control for controlled distribution until after the unauthorized effective date. In their efforts to accommodate, and with seemingly no other recourse, DC violated AP-6.1Q by accepting and honoring the previously set effective dates. AP-6.1Q authorizes only Document Control to set effective dates, although Document Control has historically tried to meet dates required to support work efforts.

17. Action to Preclude Recurrence:

The Document Control Supervisor has instructed the staff (via memo dated 12/18/01) to reject any document with an effective date that has passed prior to delivery to DC. Document Control will no longer accept documents when: (1) Proposed effective dates precede delivery to DC, and (2) proposed effective dates are too close to allow timely controlled distribution processing. To achieve document acceptance, the document must have either no effective date set, or the document owner's proposed effective date allows sufficient time for DC processing in accordance with AP-6.1Q.

The Manager of Document Control will issue a memo to Department Managers to inform them that AP-6.1Q does not permit effective dates to be set without consultation with Document Control. This will be completed by February 15, 2002.

18. Due Date: 2/15/02

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

19. Response by: David Calloway *RPK-BSC OF DEC for*

DE Calloway
Date 1/29/02

Phone 295-5562

20. Evaluation: ☒ Accept ☐ Partially Accept ☐ Reject

QAR

Date

01/30/02

21. Concurrence:

DOQA

James Blaylock
Date 2/1/02

Date

2/1/02

TYPE RESPONSE:

- ☐ Initial
- ☒ Complete
- ☐ Amended

OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

DR/CAR NO. BSC-02-D-059

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OF

QA: X QA

DEFICIENCY/CORRECTIVE ACTION REPORT (RESPONSE)

14a. Immediate Actions:

See Initial Response dated 1/29/02

Compliance Date: 12/18/2001 and 12/19/2001 (Follow-up)

14. Remedial Actions:

See Initial Response dated 1/29/02

15. Extent of Condition:

See determination of Extent of Condition in Initial Response dated 1/29/02, in which it was documented that three TWP's and one procedure (were processed as described in this DR.

There is no other way DC can ascertain the impact of this deficiency other than contacting the authors to determine if work was performed to the documents before controlled distribution. The authors of the four documents assured DC that no work was performed. Therefore, this deficiency had no impact on work performance or work products.

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

See Cause provided in Initial Response dated 1/29/02.

17. Action to Preclude Recurrence:

The Manager of Document Control committed to issue a memo to Department Managers to inform them that AP-6.1Q does not permit effective dates to be set without consultation with Document Control. This action was completed February 15, 2002.

18. Due Date: February 15, 2002

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

19. Response by: David Calloway

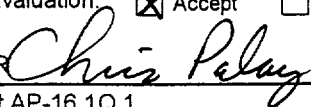


Date 15 Feb 02 Phone 295-5562

DECLINE for
Cindy Humphries-Alden
2/15/02

20. Evaluation: ☒ Accept ☐ Partially Accept ☐ Reject

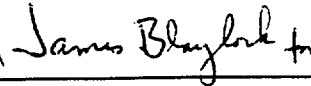
QAR



Date 02-19-02

21. Concurrence:

DOQA



Date

2/27/02



Interoffice Memorandum

QA: NA

To: Distribution
DE Calloway
From: David E. Calloway
Re: Establishing Effective Dates

No.: 0215021513
Date: 2/15/02
CC: M. L. Prater, SUM1/423
RPC = 2 pages

The purpose of this memo is to clarify the conditions for acceptance of newly approved controlled documents at the Document Control Center.

AP-6.1Q, "Controlled Distribution," Section 5.3.3 b, requires that Document Control (DC) set the effective dates of controlled documents after acceptance of the document. As a courtesy when contacted in advance by document authors, DC has historically performed expedient processing on controlled documents having effective dates within three business days.

Recently, in efforts to accommodate document authors, DC violated AP-6.1Q by accepting and issuing several controlled documents having effective dates that preceded document delivery to Document Control. Consequently, Deficiency Report (DR) BSC-02-D-059 was issued against Document Control.

Document Control will not repeat this violation. Given that AP-6.1Q authorizes ^{by} Document Control to set effective dates, Document Control staff has been instructed to reject any document that jeopardizes compliance with AP-6.1Q. We will no longer accept documents for controlled distribution when: (1) proposed effective dates precede delivery to DC, and/or (2) proposed effective dates do not allow sufficient time for controlled distribution processing.

As always, Document Control will continue to provide urgent processing on a case-by-case basis when necessary to support project priorities. To ensure acceptance under those circumstances, document authors must negotiate an acceptable effective date in advance of document delivery to Document Control department.

Please advise your document authors that DC must fully comply with the requirements of AP-6.1Q. Requests to the contrary will not be honored.

If there are any questions, contact Michelle Prater at (702) 295-7162.

0215021513
February 15, 2002
Page 2

Distribution:

R.W. Andrews, SUM1/423
G. S. Bodvarsson, SUM1/423
Maxie Carver, SUM1/423
S. J. Cereghino, SUM1/423
J. D. Cloud, SUM1/423
M. J. d'Ouille, SUM1/423
D. D. Davis, SITE/763
R. R. Dresel, SITE/763
Leon Fossum, SUM1/423
E. M. Gardiner, SITE/717
R. S. Hajner1/423
Jeff Halliday, SUM1/423
R. G. Helms, SUM1/423
Ken Hess, SUM1/423
M. A. Jaeger, SUM1/423
M. J. Johnson, SUM1/423
Jerry King, SUM1/423
M. F. Knop, SUM1/423
Eric Koppitsch, SUM1/423
R. G. Kovach, SITE/735
D. T. Krisha, SUM1/423
R. I. Law, SITE/761
Lannie Lingle, SUM1/423
J. S. Martin, SITE/280
M. M. Maxfield, SUM1/423
Collin Moller, BSC/1
Hank Montizaan, SUM1/423
L. R. Morrison, SUM1/423
P. D. Munson, SUM1/423
L. D. Neddo, SUM1/423
M. P. O'Donnell, SUM1/423
J. F. Pelletier, SUM1/423
T. A. Peterson, SUM1/423
M. T. Peters, SUM1/423
B. E. Reilly, SUM1/423
Ricky Robinson, SUM1/423
V. M. Rochester, SUM1/423
R. P. Saval, SUM1/423
C. S. Sharrocks, SUM1/423
Ardyth Simmons, SUM1/423
C. D. Sorensen, SUM1/423

C. M. Sparks, SITE/T-7009
Christine Stockman, SUM1/423
Robert Stoner, SUM1/423
J. E. VanBibber, SUM1/423
M. D. Voegle, SUM1/423
D. D. von der Linden, SUM1/423
Bruce Wells, SUM1/423
Wiley Wells, SUM1/423
J. S. Whitcraft, SUM1/423
N. H. Williams, SUM1/423

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☒ DR/CAR/QO
☐ SWO

NO. BSC-02-D-059

PAGE OF
QA: QA

CONDITION ADVERSE TO QUALITY CONTINUATION PAGE

Verification of Corrective Actions for Deficiency Report (DR) BSC-02-D-059

The complete response outlined corrective actions requiring QAR verification for the following:

14a. Immediate Actions

The BSC Document Control Supervisor committed to directing the document control staff (via electronic mail message to the staff, dated 12/18/01) to not accept documents when the effective date precedes the delivery of that document to Document Control. A follow up message (e-mail dated 12/19/01) was also committed to be sent to reiterate the direction to the staff. These messages were verified by a hardcopy (see attached) of the follow up message sent on 12/19/01 at 8:22 AM that also forwards the first direction e-mail sent on 12/18/01 at 6:43 PM.

14. Remedial Actions

BSC committed to supplement the record packages of the deficient controlled documents (see extent of condition) with a "Memo to File". These memos (MOL.20020204.0110, MOL.20020204.0111, MOL.20020204.0112, & MOL.20020204.0113) reference this deficiency report to indicate the recognition of the discrepancy between the effective dates and the Document Control posting dates. This was verified by reviewing the memos from the Records Processing Center.

15. Extent of Condition

There were four identified documents found with the discrepancy between the effective dates and the Document Control posting dates. The "Memo to File" records for the remedial actions were confirmed as cross referenced in the Record Information System to those four deficient documents (MOL.20020201.0110, MOL.20020204.0111, MOL.20020204.0112, & MOL.20020204.0113)

17. Actions to Preclude Recurrence

The Manager of Document Control committed to issue a memo to the BSC Department Managers informing them of the procedural requirements of AP-6.1Q for Document Control to set the effective dates for controlled documents. This memo was verified by the hardcopy transmitted with complete response to this deficiency report. The complete response was accepted by the Office of Quality Assurance on 02/27/02 and the Interoffice Memo from the Documental Control Manager, David E. Calloway, was signed and dated on 02/15/02.

Based on the above evaluation, the QAR recommends closure of DR BSC-02-D-059.

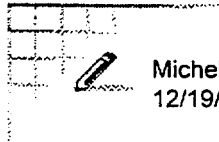


QAR Signature

03/27/02

Date

Submittal Page 2 of 2



Michelle Prater
12/19/2001 08:22 AM

To: Annette Alvarez/YM/RWDOE@CRWMS, Scott Bowlinger/YM/RWDOE@CRWMS, Patricia Gibson/YM/RWDOE@CRWMS, Edythe Hudy/YM/RWDOE@CRWMS, Heather McAndrews/YM/RWDOE@CRWMS, William Olson/YM/RWDOE@CRWMS, Bunny Washington/YM/RWDOE@CRWMS, Ann Anders/YM/RWDOE@CRWMS, Debbie Lawson/YM/RWDOE@CRWMS, Judith Wetzel/YM/RWDOE@CRWMS, Joy Riley/YM/RWDOE@CRWMS, Heidi Neff/YM/RWDOE@CRWMS, Susan French/YM/RWDOE@CRWMS
cc: Marty Johnson/YM/RWDOE@CRWMS, Cynthia Humphries-Alder/YM/RWDOE@CRWMS, David Calloway/YM/RWDOE@CRWMS

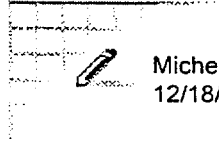
Subject: Documents with Effective Dates

QA:N/A Exclusionary

For clarification: All documents received after it's effective date will **NOT** be accepted, distributed or electronically posted, by Document Control. This includes all Technical Work Plans (note: the effective dates on TWPs are located on the Revision History Page).

Michelle

----- Forwarded by Michelle Prater/YM/RWDOE on 12/19/2001 08:20 AM -----



Michelle Prater
12/18/2001 06:43 PM

To: Annette Alvarez/YM/RWDOE@CRWMS, Scott Bowlinger/YM/RWDOE@CRWMS, Patricia Gibson/YM/RWDOE@CRWMS, Edythe Hudy/YM/RWDOE@CRWMS, Heather McAndrews/YM/RWDOE@CRWMS, William Olson/YM/RWDOE@CRWMS, Bunny Washington/YM/RWDOE@CRWMS, Ann Anders/YM/RWDOE@CRWMS, Debbie Lawson/YM/RWDOE@CRWMS, Judith Wetzel/YM/RWDOE@CRWMS, Joy Riley/YM/RWDOE@CRWMS, Heidi Neff/YM/RWDOE@CRWMS, Susan French/YM/RWDOE@CRWMS
cc: Marty Johnson/YM/RWDOE@CRWMS, Cynthia Humphries-Alder/YM/RWDOE@CRWMS, David Calloway/YM/RWDOE@CRWMS

Subject: Documents with Effective Dates

QA:N/A Inclusionary

Effective immediately, documents (which require effective dates) which are submitted to Document Control with "Effective Dates" **after the effective dates** will **NOT** be accepted, distributed or electronically posted, by Document Control. This includes all Technical Work Plans (note: the effective dates on TWPs are located on the Revision History Page).

If you receive any documents or TWPs with effective dates that are **after the effective dates** bring them to myself or Marty Johnson.

Print this e-mail out and sign and date it indicating that you understand this direction. Bring your signed and dated copies to me.

If you have any questions contact me.

Michelle