



QA: QA

Mark T. Peters, Manager
Science & Engineering Testing
Bechtel SAIC Company, LLC
1180 Town Center Drive
Las Vegas, NV 89144

**VERIFICATION OF CORRECTIVE ACTION AND CLOSURE OF DEFICIENCY REPORT
(DR) BSC(V)-02-D-043 RESULTING FROM THE BECHTEL SAIC COMPANY, LLC (BSC)
QUALITY ASSURANCE AUDIT BSC-SA-02-005 OF METAL SAMPLES COMPANY**

BSC Quality Assurance has verified implementation of corrective action for DR
BSC(V)-02-D-043 and determined the results to be satisfactory. As a result, the DR has been
closed.

If you have any questions, please contact either Robert D. Habbe at (702) 295-1631 or
Daniel A. Klimas at (702) 295-2665.

A handwritten signature in cursive script, appearing to read 'D. T. Krisha'.

Donald T. Krisha, Manager
Quality Assurance

4/11/02

Date Signed

RDH:bw-0410022164

Enclosure:
DR BSC(V)-02-D-043

WMS507
W1-11

April 11, 2002

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cc w/encl:

L. H. Barrett, DOE/HQ (RW-2) FORS
L. W. Bradshaw, Nye County, Pahrump, NV
Margaret Chu, DOE/HQ (RW-1) FORS
J. R. Dyer, DOE/YMSCO, Las Vegas, NV
W. J. Glasser, NQS, Las Vegas, NV
Birdie Hamilton-Ray, DOE/YMSCO, Las Vegas, NV
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D. T. Krisha, BSC, Las Vegas, NV
Robert Latta, NRC, Las Vegas, NV
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Ram Murthy, DOE/OQA, Las Vegas, NV
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D. D. vonderLinden, BSC, Las Vegas, NV
Engelbrecht von Tiesenhausen, Clark County, Las Vegas, NV
B. L. Wilson, BSC, Las Vegas, NV

cc w/encl:

R. W. Andrews, BSC Las Vegas, NV
Rick Douglas, Metal Samples Company, Munford, AL
K. O. Gilkerson, BSC Las Vegas, NV
R. D. Habbe, BSC Las Vegas, NV
R. E. Rucinski, BSC Las Vegas, NV
Roxanne Van Dillen, BSC Las Vegas, NV

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

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8. ☒ DEFICIENCY REPORT
☐ CORRECTIVE ACTION
REPORT

NO. BSC(V)-02-D-043

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DEFICIENCY/CORRECTIVE ACTION REPORT

1. Controlling Document:

Alabama Specialty Products Incorporated (ASPI) Quality Manual, Revision 2/16/99 and implementing procedures

2. Related Report No.:

BSC-SA-02-005

3. Responsible Organization:

BSC/Metal Samples Company (MSC)

4. Discussed With:

M. Peters, BSC; R. Douglas, MSC

5. Requirement:

- A. ASPI Operational Procedure OP 11.0-1, Revision 11, Section 11.0.3.3 states in part: Equipment which is past-due for calibration shall not be used.
- B. ASPI Work Instruction WI 11.1-2, Rev. 1, Section 11.1.5.4 states in part: The Calibration Data History (Quality Form 11.1-B) shall be completed.
- C. ASPI Work Instruction WI 11.1-1, Rev. 6, Section 11.1.4.4.9 states in part: all M&TE calibration frequencies are listed at the end of this instruction and are indicated on the Calibration Data History form.

6. Description of Condition:

Contrary to the requirements:

- A. A Radiographic Analyzer serial number 99-14 has a calibration sticker that indicates that it is past due for calibration.
- B. A Calibration Data History has not been complete for the 6/25/01 calibration of Pin Gages, serial number 91-102.
- C. Precision Roughness Specimens 96-88 and 98-05 have not been calibrated by an approved supplier since they were initially calibrated on 10/24/96 and 11/20/97. The Calibration Data History record indicates that the roughness specimens are calibrated every 365 days. These standards were used to calibrate profilometers, 97-122 and 98-04, which have been used to measure surface finish on BSC samples.

7. Initiator:

Robert D. Habbe

Date 12/13/01

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:

- 1. Calibrate the radiographic analyzer and replace the calibration sticker.
- 2. Complete a Calibration Data History for the Pin Gages.
- 3. Send the precision Roughness Specimens to an approved supplier to have calibrated.
- 4. Determine the impact on services/products provided, as a result of above deficiencies.
- 5. Revise procedure(s) where applicable and provide training to applicable personnel.

11. QA Review:

QAR R. D. Habbe

Date 12/13/01

12. Response Due Date:

20 Working Days From Issuance

13. DOQA Issuance Approval:

Printed Name Donald T. Krisha

Signature

Date 12/18/01

22. Corrective Actions Verified:

QAR

R.D. HABBE

Date 4-8-02

23. Closure Approved by:

DOQA

D.T. Krisha

Date

4/11/02

TYPE RESPONSE:

- ☒ Initial
☐ Complete
☐ Amended

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DEFICIENCY/CORRECTIVE ACTION REPORT (RESPONSE)

14a. Immediate Actions:

N/A - No YMP-related work currently being performed at Metal Samples Company (MSC).

Compliance Date: N/A

14. Remedial Actions:

- A. MSC changed radiographic analyzer calibration frequency to "prior to use" and marked the equipment as such. MSC will also verify that work instruction WI 0.3-3, Radiographic Analyzer Operation, meets requirements set forth in the manufacturer's instruction manual.
- B. MSC completed a calibration data history for the 6/25/01 calibration of Pin Gages (SN#91-102).
- C. Precision Roughness Specimens are calibrated periodically by comparison to a third master standard which is traceable to NIST. The NIST traceable standard was calibrated by an approved vendor from MSC's qualified supplier list and found to be acceptable.

NOTE: Metal Samples is a division of Alabama Specialty Products, Inc. metal samples works to Alabama Specialty Products' Quality Manual. Rev 02/25/02

15. Extent of Condition:

- A. ~~No adverse condition exists.~~ *PLN 2/20/02* Analyzer is calibrated to its Titanium Standard each morning. Also, the analyzer is a third verification of material, after verification of the Certified Mill Test Report, and independent laboratory test report.
- B. ~~No adverse condition exists.~~ *Rev 2/24/02* Calibration data was present for validation of calibration and was recorded into MSC's CalMast calibration software.
- C. ~~No adverse condition exists.~~ *Rev 2/28/02* Surface Roughness Specimens 96-88, and 98-05 were calibrated by comparison to each other prior to due dates, and were found to be acceptable. Surface Roughness Specimen 98-05 has since been calibrated to NIST traceable standard and found to be acceptable.

Determination as to whether there were impacts to services/products provided will be addressed in the complete response. *PLN 3-402*

and the complete extent of condition. MTP 3/4/02

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

Complete response will address cause.

17. Action to Preclude Recurrence:

Complete response will address action to preclude recurrence.

18. Due Date: March 15, 2002

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

19. Response by: Mark Peters (Roxie VanDillen - Resp. Ind.)

Date: February 22, 2002 Phone: 5-3644

20. Evaluation: ☒ Accept ☐ Partially Accept ☐ Reject

21. Concurrence:

QAR *R.D. HABBE* *RAHABHE* Date *2-27-02*DOQA *P.T. Kish* Date *3/4/02*

04-03-02 10:07 From-Los Alamos National Laboratory 702 295 6604 T-265 P.003/003 F-361

Submittal Page <u>1</u> of <u>1</u>	OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT U.S. DEPARTMENT OF ENERGY WASHINGTON, D.C.	1. DR/CAR NO. <u>BSC(V)-02-D-043</u> PAGE <u>3</u> OF <u>4</u> QA: QA
2. Check if Amended <input type="checkbox"/> Check if also Initial Response <input type="checkbox"/>		ORIGINAL red
3. Extended Processing <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If yes, submit Extended Processing request)		
DEFICIENCY REPORT/CORRECTIVE ACTION REPORT COMPLETE RESPONSE		
4. Extent of Condition: (Amended response will be required if all Extent of Condition investigations are not complete and documented herein) A. The radiographic analyzer identified in this deficiency report is the only radiographic analyzer used on YMP-related activities. B. The pin gages identified in this deficiency report were the only pin gages used in YMP-related activities. C. The roughness specimens identified in this deficiency report are the only standards used to calibrate profilometers 97-123 and 98-04, which have been used to measure surface finish on YMP samples.		
NOTE: THIS RESPONSE SUPERCEDES THE INITIAL RESPONSE SUBMITTED ON 03/15/02 AS NOTED IN BLOCK 19 OF PAGE 2 OF THE DR.		
5. Impact: (Provide an impact statement relative to waste isolation and safety, and impact to other work, if any) A. Because the radiographic analyzer self-calibrates each morning, there is no impact to YMP-related products due to this deficient condition. B. Calibration data was present for validation of calibration, it just wasn't recorded on the proper form. Therefore, there is no impact to YMP-related products due to this deficient condition. C. Because the Master Standard was found to be acceptable at re-calibration, there is no impact to YMP-related products due to this deficient condition.		
6. Remedial Actions: (Document all actions necessary to address the results of the Extent of Condition) A. MSC changed radiographic analyzer calibration frequency to "prior to use" and and marked the equipment as such. The analyzer is calibrated to its Titanium Standard each morning. B. MSC completed a calibration data history for the 6/25/01 calibration of Pin Gages (SN#91-102). C. Precision Roughness Specimens (96-88 and 98-05) are calibrated periodically by comparison to a third master standard (SN#17869, Model #PMD-90101) which is traceable to NIST. The NIST traceable standard was calibrated by an approved vendor from MSC's qualified supplier list and found to be acceptable. NOTE: Metal Samples is a division of Alabama Specialty Products, Inc. Metal Samples Company works to Alabama Specialty Products Quality Manual. (See Addendum 1)		
7. <input type="checkbox"/> Root Cause (For a significant CAQ, attach results of formal root cause determination prepared in accordance with AP-16.4Q) <input checked="" type="checkbox"/> Apparent Cause Former calibration technician's lack of attention to certain calibration process details.		
8. Action to Preclude Recurrence: (Address those actions necessary to prevent the identified cause from recurring) MSC will not be used for future YMP-related activities. There is currently a restriction on the QSL preventing the YMP project to use MSC's services at this time.		
9. Due Date for Completion of Corrective Action: March 28, 2002	10. Responsible Manager: Mark Peters <u>Don Olive for m.p. 4-3-02</u> Printed Name Signature Date	
11. QAR Evaluation: <input checked="" type="checkbox"/> Accept <input type="checkbox"/> Partially Accept <input type="checkbox"/> Reject <u>R.D. HABBE</u> <u>R.D. Habbe</u> <u>4-8-02</u> Printed Name Signature Date	12. QAM Concurrence: <u>DONALD T. KRISHA</u> <u>D.T. Krishna</u> <u>4/11/02</u> Printed Name Signature Date	

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CONDITION ADVERSE TO QUALITY CONTINUATION PAGE

Verification of Corrective Action and Closure of DR BSC(V)-02-D-043.

This verification was based on a review of documentation provided by Science Engineering & Testing (SE&T) and Metal Samples Company (MSC).

Verification of Immediate Actions:

The QAR verified that Sharon Silva, BSC Buyer, sent an email to MSC on 11/15/2001 to stop work on Yucca Mountain Project samples and followed up with a letter to MSC on 12/05/2001 repeating the same.

Verification of Remedial Actions:

A. The QAR performed a review of MSC Work Instruction WI 10.3-3, Revision 1, and verified that the Radiographic Analyzer is measured (calibrated) against the Titanium Standard at least once per shift or prior to use. Reviewed the Calibration Data History for Radiographic Analyzer Identification Number (ID) 99-14 and found that the calibration interval has been changed to calibrate daily or prior to use.

B. The QAR performed a review of the Calibration Data History for Pin Gage set Identification Number (ID) 91-102 and found that the Calibration Data History form has been completed for the 06/25/2001 calibration of the Pin Gage set.

C. The QAR performed a review of the Calibration Data History for Precision Roughness Specimens Identification Numbers (ID) 98-05 and 96-88 and found that both instruments were found to be in tolerance when compared to the Master Standard ID 17869. The QAR performed a review of the Report of Measurement from MAHR Federal documenting that Precision Roughness Specimen ID 17869 was calibrated by an approved vendor from MSC's qualified supplier list.


Verification of Action to Preclude Recurrence:

Verified that the OCRWM Qualified Suppliers List has a restriction that prohibits MSC from performing any Quality work for OCRWM.

A review of the extent of condition did not indicate that this DR is a significant condition.

The documentation provided and the corrective actions taken provide satisfactory implementation of correction actions for this DR. Based on the above, this DR is considered closed.


Robert D. Habbe


Date Signed

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