



## Department of Energy

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WBS 1.2.9.3  
QA

APR 20 1990

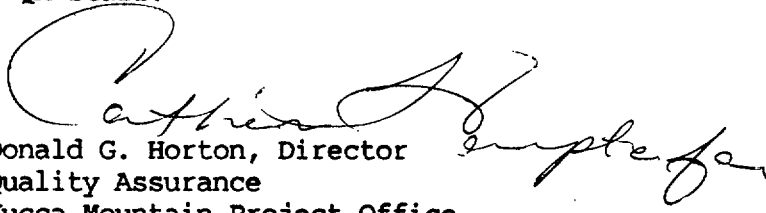
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ACCEPTANCE OF AMENDED RESPONSE TO STANDARD DEFICIENCY REPORT (SDR) 466,  
REVISION 0, RESULTING FROM YUCCA MOUNTAIN PROJECT OFFICE (PROJECT OFFICE)  
QUALITY ASSURANCE (QA) AUDIT 89-07 OF LOS ALAMOS NATIONAL LABORATORY  
(LOS ALAMOS)

The Project Office QA staff has evaluated and accepted your amended response to SDR 466, Revision 0, generated as a result of Project Office QA Audit 89-07 of Los Alamos. The SDR will be closed after verification of satisfactory completion of the specified corrective action. A copy of the SDR is enclosed for your information.

Verification of completion of your corrective action will be performed after that date.

If you have any questions, please contact Catherine E. Hampton at (702) 794-7973 or FTS 544-7973, or Amelia I. Arceo at (702) 794-7737 or FTS 544-7737, both of the Project Office QA staff.

  
Donald G. Horton, Director  
Quality Assurance  
Yucca Mountain Project Office

YMP:CEH-2840

Enclosure:  
SDR 466, Revision 0

9004270081 900420  
PDR WASTE  
WM-11 PDC

FULL TEXT ASCII SCAN

102.7  
WM-11  
NH03

**YMPO STANDARD DEFICIENCY REPORT**

N-QA-038  
4/89

Completed by Originating QA Organization	1 Date 11/17/89		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 13
	3 Discovered During Audit 89-7		3a Identified By F. Ruth/ J. Hadden		4 SDR No. 466 Rev. 0
	5 Organization Los Alamos Nat'l Lab		6 Person(s) Contacted K. Foster		7 Response Due Date is 20 Working Days from Date of Transmittal
	8 Requirement (Audit Checklist Reference, if Applicable) (Checklist Item 6-4) TWS-QAS-QP-06.1, Rev. 1, Para. 6.5, states "The holder of a controlled document removes and destroys obsolete documents in accordance with directions				
Completed by Organization in Block 5	9 Deficiency A random sample of the 59 controlled manuals were reviewed in accordance with the latest revision of the table of contents, dated October 13, 1989, to determine if all appropriate procedures had been removed or marked superceded				
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective Identify the remedial action(s) to be taken to correct the deficiencies noted in block 9. Investigate the program, process, activities or documentation, to				
	11 QAE/Lead Auditor/Date <i>S. Dana 11/30/89</i>		12 Division Manager/Date <i>Robert Hagan 12-1-89</i>		13 Project Quality Mgr/Date <i>[Signature] 12/1/89</i>
Completed by Org. QA Org.	14 Remedial/Investigative Action(s) Refer to Page 3 of 3				
	15 Effective Date <u>2/16/90</u>				
	16 Cause of the Condition & Corrective Action to Prevent Recurrence Refer to Page 3 of 3				
Comp. by Orig. QA Org.	18 Signature/Date <i>[Signature] 1/12/90</i>				
	19 Response Accepted	QAE/Lead Auditor/Date <i>S. Dana 2/21/90</i>	Division Manager/Date <i>S. Dana 2/21/90</i>	Project Quality Mgr./Date <i>[Signature]</i>	
	20 Corrective Action Verif. Satisfactory	QAE/Lead Auditor/Date	Division Manager/Date	Project Quality Mgr./Date	
	21 Remarks <i>See Ltr., Herbst to Horton, dtd 2/12/90, SDR Response Clarification &amp; Amendment and SDR response LTR, Herbst to Horton, dtd. 1/11/90. Extension Request 2/24/90-TWS-EES-13-02-90-045 - accept 3/6/90-YMP-RAC-2281 Accept Response 3/6/90-YMP-RAC-2245 Amended Response Rec'd dtd 3/30/90-TWS-EES-13-03-90-111</i>				
22 QA CLOSURE	QAE/Lead Auditor/Date	Division Manager/Date	PQM/Date		

File dtd 1/11/90 - TWS-EES-13-03-90-111

YMPO STANDARD DEFICIENCY REPORT  
CONTINUATION SHEET

N-QA-038  
12/88

SDR No. 466

Rev. 0

Page 2 of 13

DPH

8 Requirement ( continued )

given in the receipt acknowledgement form. If the holder of a controlled document prefers to keep obsolete revisions, he may do so, but he must mark "superceded," "obsolete," or a similar expression on the cover page of the outdated version and note this action on the receipt acknowledgement form."

9 Deficiency ( continued )

or obsolete as required. During the review, procedures were found which should have been removed or marked obsolete. In one case (#90), one procedure was missing from the manual.

Note: The following is a list of the controlled manuals that were reviewed and all discrepancies discovered during the review were corrected during the audit:

- #4
- #5
- #27
- #40
- #48
- #50
- #85
- #86
- #90

10 Recommended Actions ( continued )

determine the extent and depth of similar deficient conditions listed as examples on the SDR. Identify these deficiencies and provide the measures required to correct them. Identify the cause of the condition and the planned corrective action to prevent recurrence.

14 Remedial/Investigative Action(s)

Remedial Actions: No action is required because the manuals referenced in Block 9 of the SDR were corrected during the audit.

Investigative Actions: All controlled manual holders will be directed to review their controlled copies and verify in writing that it is complete and up to date with the correct revisions and change requests.

16 Cause of the Condition & Corrective Action to Prevent Recurrence

Cause of the Condition: Failure of the copy holders to update their manuals as instructed by the controlled distribution system.

Corrective Action to Prevent Recurrence: All manual holders will be retrained in QP-06.1, Document Control. The LANL QAS will verify a random sample of QA Manuals each calendar quarter to achieve a 95% confidence level.

SDR 463-Clarification

1. Add the following to Block 16-Cause of Condition & Corrective Action to Prevent Recurrence:

"Training will be provided to reviewers to identify the relationship of QP03.2 and QP03.16 and emphasize appropriate use of these procedures during the review process."

SDR 464-Amendment

1. Change Block 16-Cause of Condition and Corrective Action to Prevent Recurrence to read as follows:

"Cause-Study plans were not checked after changes(additions) were made to ensure changes did not impact technical content. These changes were made at the verbal direction of the Project Office."

"Corrective Action to Prevent Recurrence-Remaining Study Plans will be checked by Technical Reviewers to ensure any changes or additions do not impact technical content of the Study Plans prior to submittal to the Project Office."

SDR 465-Amendment

1. Change Block 14-Remedial\Investigative Action(s) to read as follows:

"Remedial Action-The DPs listed in Block 9 of the SDR will be reviewed and corrected as necessary to address acceptance and reject criteria or limits."

"Investigative Action-All remaining DPs will be reviewed to ensure that acceptance and reject criteria or limits are adequately addressed in these procedures. Corrections to remaining DPs will be made as necessary."

SDR 466-Amendment

1. Change Corrective Action to Prevent Recurrence in Block 16 to read as follows:

"All manual holders will be retrained in QP06.1 document control requirements. During the following quarter, the LANL QAS will verify from a random sample of QA Manuals that a 95% confidence level for the manuals has been achieved. In addition, an overview of QA Manuals for

*See dtdl 2/12/90 - TWS-EES-13-02-90-033*

proper document control will be performed by the QAS each calendar quarter. The requirements for this overview will be documented in a change to QP06.1."

**SDR 467-Clarification**

1. Add the following to Block 16-Cause of Condition and Corrective Action to Prevent Recurrence:

"Cause-It was intended to issue semi-annual Trend Reports rather than quarterly Trend Reports as required by QP16.2."

"Corrective Action to Prevent Recurrence-QP16.2 will be revised to specify issuance of semi-annual Trend Reports rather than quarterly reports."

**SDR 468-Amendment**

**Block 14-Remedial/Investigative Action(s)**

"Remedial-Review generic deficiencies identified in Block 9 for the corrective action process as well as those identified for specific CARs. The QAPL will then determine what remedial action is appropriate for each identified deficiency."

"Investigative-Review all CARs Issued to date for indication of deficient conditions such as those described in Block 9 of the SDR. Document and report the results of this review to the QAPL so that corrective action determined to be necessary may be initiated."

**Block 16-Cause of Condition & Corrective Action to Prevent Recurrence**

"Cause-Personnel error and procedural inadequacies."

"Corrective Action to Prevent Recurrence-The Corrective Program procedures will be revised to restructure the program. As a result, program requirements not previously addressed will be specified. After revision, training of all personnel involved in the Corrective Action Program will be performed with additional training provided to personnel involved with program implementation and administration."

Richard J. Herbst

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APR 20 1990

cc w/encl:

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