

# **Department of Energy**

Nevada Operations Office P. O. Box 98518 Las Vegas, NV 89193-8518 APR 2 0 1990

WBS 1.2.9.3 QA

Richard J. Herbst Technical Project Officer for Yucca Mountain Project Los Alamos National Laboratory University of California N-5, Mail Stop J521 P.O. Box 1663 Los Alamos, NM 87545

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

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YMP:CEH-2840

Quality Assurance Yucca Mountain Project Office

Enclosure: SDR 466, Revision 0

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Originating QA Organization			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 docu- ment removes and destroys obsclete documents in accordance with directions												
by	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of the table of contents, dated October 13, 1989, to determine if all appropriate procedures had been removed or marked superceded												
Completed	10 Recommended Action(s): A Remedial A Investigative A 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												
Aprvl.	11 QAE/Lead Auditor/Date 12 Division Manager/Date 13 Project Quality Mor/Date 5 Dava 11/30/89 Automatica 12-181 Home Control 189										te 189		
ation in Block 5	14 Remedial/Investigative Action(s) 15 Effective Date 2/16/90 Refer to Page 3 of 3												
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-	19 Response Accepted	QA X	E/Lead Auditor/E	Date 21/90	Division M			7 peat	Qualit	Kilkigr	Date		
QA Org.	20 Corrective Action QA Verif. Satisfactory		E/Lead Auditor/Date Division Manager/Da			Date	Project						
Orig. C	21 Remarks D'See Ltr., Herbst to Horton, dtd. 2/12/90, SDR Rosponse Clarification & Amandment and SDR response Ltr., Herbst to Horton, dtd. 1/11/90. Externin Response 2120/90-THS-EES-13.62-90-045- accept 3/6/90-YMP.RBC-2281												
Comp. by	accept Response 3/6/90 - YMP-RBC . 2245 amended Response Recial dtd 3/3:190 - TWS - EES-13-03.90 - 111												
	QA CLOSURE	A CLOSURE QAE/Lead Auditor/Date Division Manager/Date PQM/Date											

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ENCLOSURE

YMPO STANDARD DEFICIENCY REPORT CONTINUATION SHEET									
S	SDR No. 466 Rev. 0	Page 2	of #3						
8	Requirement ( continued )		OLP4						
	given in the receipt acknowledgement form. If the holder of a c document prefers to keep obsolete revisions, he may do so, but h "superceded," "obsolete," or a similar expression on the cover p outdated version and note this action on the rece_pt acknowledge	e must mark bage of the							
9	Deficiency ( continued )								
	cr obsolete as required. During the review, procedures were fou should have been removed or marked obsolete. In one case (#90), cedure was missing from the manual.								
	Note: The following is a list of the controlled manuals that we all discrepancies discovered during the review were corrected du								
	#4 #5 #27 #40 #48 #50 #85 #86 #90								
10 Recommended Actions ( continued )									
	determine the extent and depth of similar deficient conditions 1 the SDR. Identify these deficiencies and provide the measures r them. Identify the cause of the condition and the planned corre prevent recurrence.	equired to o	orrect						

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Page 3 of 3 SDR 466, RO

## 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 QPO6.1 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

Audite 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

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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 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: Ralph Stein, HQ (RW-30) FORS D. E. Shelor, HQ (RW-3) FORS H. P. Nunes, LANL, Los Alamos, NM J. E. Clark, SAIC, Las Vegas, NV, 517/T-12 S. R. Dippner, SAIC, Las Vegas, NV, 517/T-08 S. W. Zimmerman, NWPO, Carson City, NV K. R. Hooks, NRC, Washington, Decomposition cc w/o encl:

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