



## Department of Energy

Nevada Operations Office  
P. O. Box 98518  
Las Vegas, NV 89193-8518

WBS 1.2.9.3  
QA

FEB 05 1990

Robert F. Pritchett  
Technical Project Officer for Yucca Mountain Project  
Reynolds Electrical &  
Engineering Co., Inc.  
P.O. Box 98521  
Las Vegas, NV 89193-8521

VERIFICATION OF COMMITTED CORRECTIVE ACTION FOR STANDARD DEFICIENCY REPORT  
(SDR) 455, REVISION 0, RESULTING FROM YUCCA MOUNTAIN PROJECT OFFICE QUALITY  
ASSURANCE (QA) AUDIT 89-05 OF REYNOLDS ELECTRICAL & ENGINEERING CO., INC.  
(NN1-1990- 1086)

Be advised that the effective date for the completion of the committed  
corrective action to SDR 455, Revision 0, has passed with the corrective  
action remaining incomplete. This renders the verification as unsatisfactory  
and is hereby rejected. Please provide a new completion date within 10  
working days from the date of this letter. Send a copy of your response to  
Nita J. Brogan, Science Applications International Corporation (SAIC),  
101 Convention Center Drive, Las Vegas, Nevada 89109, and a copy to  
Ralph W. Gray, U.S. Department of Energy, P.O. Box 98518, Las Vegas,  
Nevada 89193.

The specific detail of corrective action determined to be unsatisfactory is as  
stated below:

Training to the Interim Change Notice for QP 6.0, Revision 5, was  
not completed.

Verification of completion of your corrective action will be performed after  
the new effective date to be provided. Any subsequent failure to comply with  
the due date provided will result in elevation of the matter to the  
appropriate management for action. A copy of the SDR is enclosed for your  
information.

9002090361 900205  
PDR WASTE  
WM-11 PDC

FULL TEXT ASCII SCAN  
ADD: J Kennedy

11/  
WM-11  
102.7  
NH03

Robert F. Pritchett

-2-

FEB 05 1990

If you have any questions, please contact Robert B. Constable of my staff at 794-7945, or Amelia I. Arceo of SAIC at 794-7737.

*James Blaylock for*

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

YMP:RBC-1817

Enclosure:  
SDR 455, Revision 0

cc w/encl:

Ralph Stein, HQ (RW-30) FORS  
D. E. Shelor, HQ (RW-3) FORS  
M. A. Fox, REEC Co, Las Vegas, NV  
A. I. Arceo, SAIC, Las Vegas, NV, 517/T-06  
S. R. Dana, SAIC, Las Vegas, NV, 517/T-06  
J. H. Nelson, SAIC, Las Vegas, NV, 517/T-04  
S. W. Zimmerman, NWPO, Carson City, NV  
J. E. Kennedy, NRC, Washington, DC

cc w/o encl:

N. J. Brogan, SAIC, Las Vegas, NV, 517/T-22  
Cynthia Robertson, SAIC, Las Vegas, NV, 517/T-22  
J. W. Gilray, NRC, Las Vegas, NV

# YMPO STANDARD DEFICIENCY REPORT

N-QA-038  
4/89

Completed by Originating QA Organization	1 Date 9/27/89		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2	
	3 Discovered During Audit 89-5		3a Identified By A.I. Arceo & C.E. Hampton		4 SDR No. 455 Rev. 0	
	5 Organization REECO		6 Person(s) Contacted M. Fox, Steve Straub		7 Response Due Date is 20 Working Days from Date of Transmittal	
	8 Requirement (Audit Checklist Reference, if Applicable) CL #6-1 & 6-4 NNWSI Project QA Plan/88-9, Revision, Section VI, Para. 1.2, states in part: "Implementation of Document Control shall provide for the following: a master					
Completed by Organization in Block 5	9 Deficiency a) Contrary to the above cited requirements:  1. The master list of project controlled documents (dtd 8/23/89) did not					
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective 1. Remedial - Include the listed LS-SP-IP-001 and LS-SP-IP-003 procedures on the master list of controlled documents.					
	11 QAE/Lead Auditor/Date <i>William H. Arceo</i> 10/15/89		12 Division Manager/Date <i>Robert J. Arceo</i> 10/5/89		13 Project Quality Mgr./Date <i>James Blaylock</i> 10/6/89	
Completed by Org. QA Org.	14 Remedial/Investigative Action(s)  (see attached response)				15 Effective Date 9/22/89	
	16 Cause of the Condition & Corrective Action to Prevent Recurrence  17 Effective Date 12/15/89					
	18 Signature/Date <i>Wendy Fox</i> 11/8/89					
Comp. by Orig. QA Org.	19 Response Accepted		QAE/Lead Auditor/Date <i>Amelia J. Arceo</i> 12/11/89		Division Manager/Date <i>J. Davis</i> 12/14/89	
	20 Corrective Action Verif. Satisfactory		QAE/Lead Auditor/Date		Division Manager/Date	
			Project Quality Mgr./Date <i>Cathleen Hampton</i> 12/15/89		Project Quality Mgr./Date	
	21 Remarks <i>Accept Response dtd 12/21/89 - 7000:JB-1001</i> Verification of Remedial/Investigative Actions was satisfactory. Reviewed Master List of Controlled Documents dated 11/9/88 which listed LS-SP-IP-001 and LS-SP-IP-003. Interim Change Notice (ICN), QPCN-89-07, 1/13/90 for QP 6.0 was reviewed. Para 6.1.3 required that each organization shall inform the PQM of controlled documents which they generate. Training to the ICN was not completed; hence, this SDR could not be closed. <i>J.A. Jones - 1-23-90</i>					
22 QA CLOSURE		QAE/Lead Auditor/Date		Division Manager/Date		PQM/Date

ENCLOSURE

**YMPO STANDARD DEFICIENCY REPORT  
CONTINUATION SHEET**

N-QA-038  
12/88

SDR No. 455

Rev. 0

Page 2 of 2

8 Requirement ( continued )

list or equivalent to identify the correct and updated revisions of documents."

a) QP 6.0, Rev. 5

6.3.2 The PQAM shall develop and maintain a master list of the project's controlled docuemnts. The list shall identify the current revision of controlled documents issued for QA Level I & II activities.

b) QP 5.3, Rev. 0

6.4.5 After resolution of all comments, the procedure is prepared in final form by the responsible person who shall obtain final review and approval from the department manager and the PQAM.

9 Deficiency ( continued )

include all controlled documents in existence.

2. QP 6.0, Rev. 5 does not provide a mechanism for QA to be notified of controlled documents generated within departments.

b) Implementing procedrue (LS-SP-IP-001, Rev. 0 dtd 7/20/89, LS-SP-IP-003, Rev. 0 dtd 9/18/89) were not approved by the PQAM. Implementing procedures are currently being reviewed by QA but are not being presented to QA in finalized form for approval. These procedures were not implemented to date.

10 Recommended Actions ( continued )

2. Investigative - Verify if there are other controlled docuemnts issued and add them to the master list of controlled documents.

3. Corrective - Revise the affected implementing procedures to include a mechanism for QA to be notified when controlled documents are generated and issued.

4. Corrective - Inform other departments of the above requirements.



# Reynolds Electrical & Engineering Co., Inc.

Post Office Box 98521 • Las Vegas, NV 89193-8521

IN REPLY REFER TO:

## RESPONSE TO SDR 455 OF DOE AUDIT 89-05

14

Procedures LS-SP-IP-001 and LS-SP-IP-003 have been added to the master list of controlled documents.

A departmental investigation was conducted to determine if there were other controlled documents missing from the master list. No others were found to exist.

15

09-22-89

16

The cause of the deficiency was a lack of understanding of the requirements contained in Quality Procedure QP 6.0, Document Control, and a lack of a mechanism for notifying Project Quality Assurance when controlled documents are generated and issued.

**CORRECTIVE ACTION--** An Interim Change Notice will be prepared for QP 6.0 to include the requirement to notify QA when controlled documents are issued so that they may be added to the master list. Training to the ICN will be conducted for appropriate departmental personnel.

17

12-15-89

**REEC<sub>o</sub>**

AN  **EG&G** COMPANY