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M E M O R A N D U M

TO: Distribution

FROM: Susan W. Zimmerman  
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DATE: December 27, 1990

SUBJECT: State Observation of DOE Audit 90-I-01

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The purpose of this memo is to relate the State of Nevada's observations and comments on the DOE QA audit of DOE Headquarters and the Project Office. This audit was performed on October 15-19, and 22-26, 1990.

The Audit Process

It is fortunate that this audit was performed as an internal audit. The composition of the audit team was such that there were multiple instances of an auditor answering the question for the auditee because the auditor was more familiar with the area. At times it was difficult to distinguish between the auditor and the auditee. This tendency was brought to the attention of the Audit Team Leader; however, in some areas, the tendency persisted. In most of the cases, it did not appear that there was malicious intent behind this, but it did detract from the audit and the perception of independence of the auditors.

Given the circumstances, the audit team did an in-depth job. Most of the auditors did a thorough, no-holds-barred audit and followed through when problems were found. There were few, if any, attempts to gloss over problems. For the most part, the team was very professional.

In the future, DOE should consider separating the two portions (HQ and the Project Office) of the audit by at least two weeks. There was little, if any, room to allow for problems to be fully

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explored. The push was to get everything done by the end of the week so that the next portion of the audit could be started on time. Also, schedule should not drive the timing of the audits. The timing of this audit was atrocious. Ignoring the fact that DOE should have performed this audit a minimum of two years ago, the combination of multiple and extensive changes to the governing QA documents and their almost simultaneous issuance of the new revisions and the performance of the audits, with major changes to the audit process procedure just the week prior to the start of the audit caused confusion on the part of the auditors and the observers as to which revision of which document was being audited. When DOE was asked about the timing of the audit, the answer was that there was a milestone that had to be met. If that answer had been given by a participant instead of a DOE person, it would have resulted in major repercussions. In this instance, it was basically ignored.

#### The Audit Program

The DOE waited until all the participants had undergone multiple extensive audits and surveillances over an almost 3 year period before subjecting their "governing" QA program to an audit, even an internal one. One would have thought that someone in DOE would have paid attention to the outcome of all those audits and tried to learn some things about the program and what needed to be done prior to their own audit. This was obviously not the case. The outcome of this audit was reminiscent of those participant audits two to three years ago. Many of the same problems were found, such as audits and surveillances, records, training and attitudes. The results from the Headquarters portion of the audit were abysmal. It appeared that there had been no preparation for the audit and that no one seemed to care that things were in such a sad shape. One of the auditors asked one of the HQ QA staff why there had not been any audits or surveillances of HQ to prepare for the audit. The reply was that they already had enough findings to deal with and did not need to find any more. Of the 11 criteria that were applicable to the HQ program, four were found ineffective and two were found indeterminate. For criteria 2, training was found to be ineffective. There is no excuse for these results. It is inexcusable to have the audit and surveillance program ineffective. DOE has had ample time to prepare for this audit and many opportunities to learn from the participants' program. The Project Office portion of the audit was better than the HQ portion, but that is not saying much. More had been done to prepare for the audit but the document that had been touted as the prime example of good QA practices (the Technical Requirements Document for Midway Valley/Calcite-Silica) fell on its face during the audit. Again, it was an example of letting the schedule drive the activity. The process of the development of the documents was ineffective. Again, no excuse.

Since the end of the audit and the publication of the results, DOE has made numerous statements that all was found acceptable during the audits and only a few "minor" changes need to be made to the program. I strongly advise DOE to actually read the audit report and to stop misleading the public about the results of the audit. The program is ready to continue implementing the new procedures but with all the criteria found to be ineffective or indeterminate, the DOE QA program is not ready to control new site characterization activities.

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