

Department of Energy

Yucca Mountain Project Office P. O. Box 98608 Las Vegas, NV 89193-8608 TO: K. Hooks

WBS 1.2.9.3 QA

NOV 06 1990

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 actions. A copy of the SDR is enclosed for your information.

Verification of completion of your corrective action will be performed after the effective date that was provided. Extensions to due dates must be requested in writing with appropriate justification prior to the due date. Please send copies of the extension request to Nita J. Brogan, Science Applications International Corporation, 101 Convention Center Drive, Las Vegas, Nevada 89109.

If you have any questions, please contact either Catherine E. Hampton at (702) 794-7973 or FTS 544-7973 or Stephen R. Dana at (702) 794-7176 or FTS 544-7176 of the Yucca Mountain Project QA staff.

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

QA:CEH-706

Enclosure: SDR 466, Revision 0

WM-11 WM-11 NHD2

	ORIGINAL THIS IS A RED STAMP
	YMPO STANDARD DEFICIENCY REPORTN-QA-0384/89
ganization	1 Date 11/17/89 2 Severity Level 1 1 2 3 Page 1 of 2.3 3 Discovered During Audit 89-7 3a Identified By F. Ruth/ J. Hadden 4 SDR No. 466 4 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) 1 2 3 9
completed by onginaming	 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 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of the table of contents, dated October 13, 1989, to determine if all appropriate procedures had been removed or marked superceded 10 Recommended Action(s): I Remedial I Investigative I Corrective Identify the remedial action(s) to be taken to correct the deficiencies noted in block 9.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
tion in Block 5 Aprvi.	11 QAE/Lead Auditor/Date 12 Division Manager/Date 13 Project Quality Mor/Date 13 Project Quality Mor/Date 13 Project Quality Mor/Date 14 Remedial/Investigative Action(s) 15 Effective Date 2/16/90 Refer to Page 3 of 3
completed by Urgariiza	16 Cause of the Condition & Corrective Action to Prevent Recurrence 17 Effective Date <u>2/16/90</u> Refer to Page 3 of 3 18 Signature/Date
omp. by Orig. QA Org.	19 Response Accepted 2/21/90 Project Quality Mgr./Date Project Quality Mgr./Date 21 Remarks 0 See Ltr., Herbst to Horton, dtd. 2/12/90 3/20/90 21 Remarks 0 See Ltr., Herbst to Horton, dtd. 1/11/90 21 Remarks 0 See Ltr., Herbst to Horton, dtd. 1/11/90 21 Remarks 0 See Ltr., Herbst to Horton, dtd. 1/11/90 21 Remarks 0 Sec Ltr., Herbst to Horton, dtd. 1/11/90 20 Sec Ltr., Herbst to Herbst to Horton, dtd. 1/11/90 20 Sec Ltr., Herbst to Herbst to Horton, dtd. 1/11/90 20 Sec Ltr., Herbst to He
ວິ	22 QAE/Lead Auditor/Date Division Manager/Date PQM/Date

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ENCLOSURE

YMPO STANDARD DEFICIENCY REPORT CONTINUATION SHEET	N-QA-038 12/88
SDR No. 466 Rev. 0 Page 2	of 23
8 Requirement (continued)	dipy.
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 pro- cedure was missing from the manual.	
Note: The following is a list of the controlled manuals that were reviewed a all discrepancies discovered during the review were corrected during the aud	
#4 #5 #27 #40 #48 #50 #85 #86 #90	
10 Recommended Actions (continued)	
determine the extent and depth of similar deficient conditions listed as example the SDR. Identify these deficiencies and provide the measures required to continue them. Identify the cause of the condition and the planned corrective action prevent recurrence.	orrect
21 Remarke (Cont'd) amended Response assistable - Dylanes "20/80 C. Haupterfor 10/30/90	

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 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

At dtd 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."



THIS IS A YMP ACTION ITEM NO. 1111-1990-066

Los Alamos National Laboratory Los Alamos New Mexico 87545 WBS: 1.2.9.3.A "QA"

March 30, 1990

TWS-EES-13-03-90-111

Mr. Donald Horton Yucca Mountain Project Office U.S. Department of Energy P. O. Box 98518 Las Vegas, NV 89193-8518

Dear Mr. Horton:

SUBJECT: AMENDED RESPONSE AND REQUEST FOR EXTENSION TO STANDARD DEFICIENCY REPORT NO. 466 (ACTION ITEM NO. NN1-1990-0662)

A survey undertaken by the QA staff showed that controlled distribution manual holders failed to properly maintain their quality assurance manuals (refer to Los Alamos YMP Survey Report No. LANL-02 with accompanying Deficiency Report DR-LANL-01). To continue with our corrective action efforts, I request an extension to June 29 for SDR 466. The following amended response to SDR 466 is submitted for your approval:

Block 16: Cause of Condition & Corrective Action to Prevent Recurrence

Cause of Condition: Manual holders have failed to update their manuals as required in the controlled distribution memorandum.

Corrective Action to Prevent Recurrence: The controlled distribution procedure will be revised to delineate the level of manual control needed, i.e., for quality affecting work and for information only. A new memorandum will be issued containing instructions to alleviate errors in direction and require QA Liaison oversight of the controlled distribution within each work area. The manual holders with be retrained to the new system.

During the quarter following the above actions, the Los Alamos Verification Group will verify a random sample of QA manuals.

If you have any questions, please contact Henry Nunes at (FTS) 843-8039.

Sincerely.

R. J. Herbst

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APR 0 5 1990

Mr. Donald Horton March 30, 1990 TWS-EES-13-03-90-111 Page 2

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Cy: J. Blaylock, DOE/YMP, Las Vegas, NV M. R. Diaz, DOE/YMP, Las Vegas, NV J. Brogan; SAIC, Las Vegas, NV. S. R. Dana, SAIC, Las Vegas, NV A. K. Sacco, DOE/YMP, Las Vegas, NV S. L. Bolivar, EES-1, MS D462 J. A. Canepa, EES-13, MS J521 M. J. Clevenger, EES-15, MS J495 E. M. Cole, LATA, MS M321 G. P. Cort, EES-13, MS J521 J. L. Day, LATA, MS M321 R. J. Herbst, EES-13, MS J521 T. A. Morgan, INC-7, MS J514 R. A. Morley, EES-1/LV, MS J900/527 H. P. Nunes, EES-13, MS J521 L. W. Schempp, MEE-9, MS J521 S. Sebring, MAT-3, MS P274 K. A. West, EES-13, MS J521 RPC file (2), LATA, MS M321 TWS-EES-13 file, MS J521 QA files, LATA, M321 CRM-4, MS A150



Los Alamos National Laboratory Los Alamos New Mexico 87545 QA RECEIVED

WBS 1.2.9.3

QA

OCT 0 9 1990

October 3, 1990

TWS-EES-13-10-90-030

Mr. Donald Horton Yucca Mountain Project Office U. S. Department of Energy P. O. Box 98608 Las Vegas, NV 89193-8608

Dear Mr. Horton:

SUBJECT: AMENDED RESPONSE FOR STANDARD DEFICIENCY REPORT NO. 466, RESULTING FROM YMP AUDIT NO. 89-7, ACTION ITEM NN1-1990-0662

Attached for your review and approval is a request for extension to the referenced standard deficiency report (SDR).

SDR No. 466, Request for extension for Corrective Action completion date to November 16. This extension is necessary for us to complete the corrective action to our controlled document distribution procedure. A draft of the Controlled Distribution procedure was completed and reviewed by the QA Liaisons. The final procedure must still be prepared (as required by the recently approved, revised quality implementation procedure for quality procedure preparation) and formally reviewed and approved. The extension will allow us to complete the procedure, conduct needed read-training for those who possess controlled copies of the QA Manual, and implement the procedure.

A copy of the draft quality procedure is attached for your information. If you have any questions, please contact Henry Nunes at (FTS) 843-8039.

Sincerely,

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Richard J. Herbst

HPN/kb Attachments: a/s

Cy: N. Arendt, MAT-3, MS P274
S. L. Bolivar, EES-1, MS D462
N. J. Brogan, SAIC, Las Vegas, NV
J. A. Canepa, EES-13, MS J521
M. J. Clevenger, EES-15, MS J495
E. M. Cole, LATA, MS M321
G. P. Cort, EES-13, MS J521
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T. L. Morgan, INC-7, MS J514 R. A. Morley, EES-1/LV, MS J900/527 H. P. Nunes, EES-13, MS J521 E. P. Springer, EES-13, MS J521 K. A. West, EES-13, MS J521 RPC file (2), LATA, MS M321 TWS-EES-13 file, MS J521 QA File, LATA, MS M321 CRM-4, w/o attach., MS A150

Richard J. Herbst

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Cindy Prater, SAIC, Las Vegas, NV, 517/T-08

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cc w/o encl:

cc w/encl:

- J. H. Hines, OQD, AL
- A. R. Chernoff, MSD, AL
- H. E. Valencia, LAAO
- J. W. Gilray, NRC, Las Vegas, NV
- R. A. Morley, LANL, Los Alamos, NM