



**Department of Energy**  
 Office of Civilian Radioactive Waste Management  
 Yucca Mountain Site Characterization Office  
 P.O. Box 98608  
 Las Vegas, NV 89193-8608

**NOV 05 1997**

D. G. Horton, Director  
 Office of Quality Assurance - Las Vegas  
 U.S. Department of Energy  
 Office of Civilian Radioactive  
 Waste Management  
 P.O. Box 30307  
 North Las Vegas, NV 89036-0307

**RESPONSE TO DEFICIENCY REPORT (DR) YM-97-D-078**

Enclosed is the response to DR YM-97-D-078 for your approval.

If you have any questions, please contact either Harry C. White, Jr., at 794-5573 or Ruth H. Belanger at 295-6830.

  
 J. Russell Dyer  
 Acting Project Manager

AMAAM:HCW-0216

Enclosures:

1. DR YM-97-D-078
2. Outstanding Document Matrix

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D. G. Horton

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cc w/encls:

J. G. Spraul, NRC, Washington, DC  
J. O. Thoma, NRC, Washington, DC  
W. L. Belke, NRC, Las Vegas, NV  
S. W. Zimmerman, NWPO, Carson City, NV  
R. H. Belanger, M&O, Las Vegas, NV  
J. A. Hall, M&O, Las Vegas, NV  
D. G. Sult, OQA/QATSS, Las Vegas, NV  
J. E. Therien, OQA/QATSS, Las Vegas, NV  
G. D. Wood, OQA/QATSS, (RW-3) FORS  
J. J. Adams, DOE/YMSCO, Las Vegas, NV  
V. F. Iorii, DOE/YMSCO, Las Vegas, NV  
H. C. White, Jr., DOE/YMSCO, Las Vegas, NV  
E. R. Cooper, DOE/YMSCO, Las Vegas, NV (2 cys)  
R. W. Clark, DOE/OQA, Las Vegas, NV  
Records Processing Center = "7"

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U.S. DEPARTMENT OF ENERGY  
WASHINGTON, D.C.**

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**PERFORMANCE/DEFICIENCY REPORT RESPONSE**

**14 Remedial Actions:**

Research was conducted identifying 21 quality affecting procedures that needed to be revised to make corrections regarding the DOE organization, to make changes to references of obsolete procedures and documents, and to correct cited procedural discrepancies and to processes disconnects. DARs are issued against, or are in process for all of these procedures to make the necessary changes. A list of these procedures is attached.

The Procedure Advisory Board AM representative will determine the impact of using incorrect procedures for each AMs' area of responsibility.

Research on the procedures specifically called out in this Deficiency Report was conducted and the following status is provided on each procedure:

QAP 2.4 Revision 2 was effective 8/27/97 and is now consistent with QAP 5.1 (continued next page)

**15 Extent of Condition: (Not required for PR)**

Last year Technical Publications Management (TPM) initiated an analysis of all current OCRWM/YMP procedures to determine the extent to which any superseded or canceled procedures were referenced in any other procedure. Many of these procedures have been processed, however, several do remain as demonstrated by the procedures listed above. The condition at this point is largely due to the decision to process all changes concurrently (thus delaying some) with the procedure consolidation effort initiated by W. Barnes on 9/30/96 (AMA:ELL-2701). The consolidation effort resulted in 112 documents identified to be revised or cancelled out of which 46 have completed the actions leaving 66 pending documents to be revised of which a list of 21 "Q" procedures is attached.

Additional investigative actions are being conducted to identify any other YMP procedures that require revision in order to reflect current organizational responsibilities, proper references, and sequencing of methodologies. (Continued next page.)

**16 Root Cause Determination: (Not required for PR)**

Required:  Yes  No

The majority of the procedures with DARs against them have been held to be processed with the procedure consolidation effort. This effort, tasked to the AMs by W. Barnes (citation in block #15), has not been completed in a timely manner because most AMs did not emphasize the priority of procedure maintenance. The actions listed in block #17 encourage upper level participation. In addition, writing a DAR had become a standard practice to avoid a deficiency report and yet avoid immediate action. Once again, block #17 provides actions to lessen recurrence.

**17 Action to Preclude Recurrence: (Not required for PR)**

Required:  Yes  No

Action previously proposed as a solution to YM-96-D-102 was that the Procedure Consolidation effort would be supported by the AMs and that the procedures would be updated in a timely manner. This has not proven to be the case, however, the procedures against which DARs were issued were not revised and therefore were found to be a problem in this audit. However slow, this initial analysis is still an integral part of the resolution of this issue. The AMAAM has created a Procedure Advisory Board with a designee from each of the Assistant Managers. This board will meet periodically until 75% of the current DARs are incorporated into the procedures and will continue to meet as necessary thereafter. The AMAAM has tasked TPM to create a report on "aging" DARs to show procedures or procedure actions (DARs) that seem to be "stuck". This aging report will be provided at the board meetings and will provide a status to the AMs' representatives alerting them if action is necessary. The AMAAM has also tasked TPM to dedicate a portion of one technical writer's time to facilitate the flow of procedures through the review stage in a more timely manner.

The Procedure Advisory Board's first meeting was held on 10/15/97. TPM presented the first draft of the aging DAR report at this meeting. 75% (15) of the current procedures in process will be completed by 3/31/98 thereby illustrating that the Procedure Advisory Board and aging reports are effective methods of maintaining control of processes. (Continued next page.)

**18 Corrective Action Completion Due Date:**

03/31/98

**19 Response by:**

*Suarez*

Date 10/30/97

Phone 794-5519

**20 Response Accepted**

QAR

Date

**21 Response Accepted (N/A for PR)**

DOQA

Date

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PR/DR CONTINUATION PAGE

Block #14

YAP-2.1Q, Revision 1 has been revised accordingly and is currently being prepared for review.

YAP-2.7Q, Revision 0, ICN. The preparers and responsible individuals disagree with this finding. The purpose of the alternate acceptance path is to avoid duplicating review efforts. The alternate review path says that if evidence of meeting the review requirements can be demonstrated, then duplicate reviews need not be carried out. Review requirements are specified in QAP-6.2 and must be met regardless of which method is chosen.

YAP-5.1Q, Revision 4 is currently out for review. Revision 4 resolves this finding by completing actions on the outstanding DARs.

QAP 18.1, Revision 5 and QAP 18.2, Revision 7 are being revised accordingly and will resolve this finding.

YLP-5.1Q-AMSP was superseded on 5/17/95 by YLP-5.1Q-YMSCO which has a DAR to make this change. YLP-5.1Q will be revised to incorporate this change.

Block #15

Lastly, respective AMs shall evaluate whether noted procedural anomalies impacted any work that was performed to such procedures. This will be coordinated through the Procedure Advisory Board.

Block #17

Attached is a list of the 21 procedures against which the 75% (15) measurement is placed. Research has indicated that between 15-25% of the procedures that are revised have major comments during the review cycle that prolongs the total revision process. The 75% measurement is statistically realistic and attainable.

Finally, it is anticipated that these actions will create a management awareness of the problem thereby ensuring that in the future program procedures are maintained in an effective manner.

**Outstanding Document Matrix  
 Strategy plan for Reduction of OCRWM Plans and Procedures**

<u>PROCEDURE</u>	<u>REV/ICN</u>	<u>RESPONSIBLE INDIVIDUAL</u>
YAP-5.1Q	4/0	ADAMS
YAP-12.1Q	1/0	ADAMS
YLP-2.1Q-YMSCO	½	ADAMS
YLP-4.1Q-YMSCO	0/3	ADAMS
YLP-5.2Q-AMA (YLP-SV.1Q-AMAAM)	0/2	ADAMS
YAP-2.1Q	1/0	BROCOUM
YAP-2.4Q	1/0	BROCOUM
YAP-2.7Q	0/1	BROCOUM
YAP-2.8Q	2/0	BROCOUM
YAP-3.3Q	1/0	BROCOUM
YAP-3.7Q	1/0	BROCOUM
YAP-5.4Q	1/0	BROCOUM
YAP-5.8Q	1/0	BROCOUM
YAP-SIII.1Q	2/0	BROCOUM
YAP-SIII.3Q	2/0	BROCOUM
YAP-SIII.4Q	0/2	BROCOUM
YAP-SIII.5Q	0/1	BROCOUM
YLP-5.1Q-YMSCO	2/0	BROCOUM
YAP-2.6Q	2/0	SPENCE
QAP 18.1	5/0	HORTON
QAP 18.2	7/0	HORTON