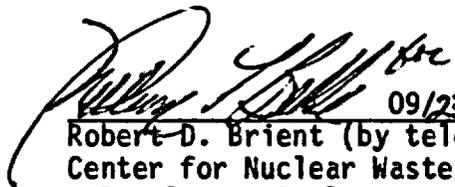
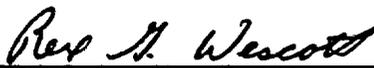


U. S. NUCLEAR REGULATORY COMMISSION  
OBSERVATION AUDIT REPORT NO. 91-12  
FOR THE OFFICE OF CIVILIAN  
RADIOACTIVE WASTE MANAGEMENT  
AUDIT NO. 91-07 OF  
SANDIA NATIONAL LABORATORIES

  
09/23/91  
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## 1.0 INTRODUCTION

From August 19-23, 1991, the U.S. Nuclear Regulatory Commission (NRC) staff observed the U.S. Department of Energy (DOE)/Yucca Mountain Site Characterization Project Office (YMPO) Quality Assurance (QA) Audit No. 91-07 of Sandia National Laboratories (SNL) conducted in Albuquerque, New Mexico. SNL, a participant in the Yucca Mountain Site Characterization Project (YMP), is responsible for repository systems development; data management and analysis; systems performance assessment of the repository; conceptual design of the repository; determining the thermal and mechanical properties of the host rock; repository sealing performance requirements, materials evaluation, design, and testing; and providing assistance to other YMP participants in areas of specialized expertise.

This report addresses the effectiveness of the DOE/YMPO audit and, to a lesser extent, the adequacy of the SNL QA program.

## 2.0 OBJECTIVES

The objectives of the DOE/YMPO audit were to evaluate the implementation and effectiveness of the SNL QA program. The NRC staff's objective was to gain confidence that DOE and SNL are properly implementing the requirements of their QA programs by evaluating the effectiveness of the DOE audit and determining whether the SNL QA program is in accordance with the requirements of the DOE/Office of Civilian Radioactive Waste Management (OCRWM) Quality Assurance Requirements Document (QARD).

## 3.0 SUMMARY AND CONCLUSIONS

The NRC staff based its evaluation of the DOE/YMPO audit process and the SNL QA program on direct observations of the auditors, discussions with the audit team and SNL personnel, and reviews of pertinent audit information (e.g., the audit plan, checklists, and SNL documents). The NRC staff has determined that, overall, Audit No. 91-07 of SNL achieved its purpose of determining the effectiveness of the SNL QA program implementation for the areas that were audited. The audit was conducted in a professional manner. The audit team was well prepared, and the checklist items were adequately described in the audit plan.

The NRC staff agrees with the preliminary DOE/YMPO audit team findings that the SNL QA program was adequately implemented for the areas that were audited, with the exception of Criteria 12 and 18. Criterion 12 is indeterminate and Criterion 18 is marginally effective. The NRC also agrees with the DOE/YMPO audit team that SNL has made considerable progress from last year in implementing its QA program. SNL should initiate timely corrective actions for the weaknesses identified by the DOE/YMPO audit team.

DOE/YMPO should monitor the SNL program to ensure that deficiencies identified during this audit are corrected and future implementation is carried out in an effective manner. The NRC staff expects to participate in this monitoring as observers and may perform its own independent audits at a later date to assess the adequacy and effectiveness of the SNL QA program.

#### 4.0 AUDIT PARTICIPANTS

##### 4.1 NRC

William Belke	Observer	
Rex G. Wescott	Observer	
Robert D. Brient	Observer	Center for Nuclear Waste Regulatory Analyses

##### 4.2 DOE

James Blaylock	Audit Manager	DOE/YMPO
Neil D. Cox	Audit Team Leader	Science Applications Inter- national Corp. (SAIC)
Mario R. Diaz	Auditor	DOE/YMPO
Donald J. Harris	Auditor	DOE/YMPO
Frank J. Kratzinger	Auditor	SAIC
John R. Matras	Auditor	SAIC
Richard L. Maudlin	Auditor	MAC Technical Services Co.
Terry J. Noland	Auditor	Westinghouse Corp.
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Thomas J. Higgins	Lead Technical Specialist	SAIC
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##### 4.3 State of Nevada

Susan Zimmerman	Observer
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##### 4.4 Clark County, Nevada

Englebrecht Von Tiesenhausen	Observer (Part time)
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##### 4.5 Nye County, Nevada

Phillip Niedzielski-Eichner	Observer (Part time)
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##### 4.6 Management and Operations Contractor

George Vaslos	Observer
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## 5.0 REVIEW OF THE AUDIT AND AUDITED ORGANIZATION

The DOE/YMPO audit was conducted in accordance with OCRWM Quality Assurance Administrative Procedure (QAAP) 18.2, Revision 3, "Audit Program," and OCRWM QAAP 16.1, Revision 3, "Corrective Action Requests."

The NRC staff observation of the DOE/YMPO audit was based on the NRC procedure "Conduct of Observation Audits" issued October 6, 1989. NRC staff Observations are classified in accordance with the procedure guidelines. The NRC staff findings may also include weaknesses (actions or items which are not deficiencies, but could be improved), good practices (actions or items which enhance the QA program), and requests for information required to determine if an action or item is deficient.

The NRC staff requires written responses from DOE in order to close its Observations. Written responses to weaknesses identified by the NRC staff will be requested when appropriate. In general, weaknesses and items related to requests for information will be examined by the NRC staff in future audits or surveillances.

### 5.1 Scope of Audit

The audit scope was to determine the effectiveness of the SNL QA program implementation.

#### (a) Programmatic Elements

The audit team utilized checklists developed from requirements in the YMPO Administrative Procedures (Quality) (APQs), SNL Quality Assurance Program Plan (QAPP), and applicable implementing procedures. The checklists covered QA program controls for 14 of the Title 10 Code of Federal Regulations (10 CFR) Part 50 Appendix B criteria. The 14 criteria evaluated were 1, 2, 3, 4, 5, 6, 7, 8, 12, 13, 15, 16, 17, and 18. The remaining four criteria were examined to verify that SNL was inactive in these areas since they were previously identified as not applicable to the SNL scope of work. The NRC staff accepted this position and found the other 14 programmatic elements addressing the 10 CFR Part 50 Appendix B criteria acceptable in its review of the SNL QAPP (ref. Linehan/Stein letter dated October 24, 1989).

#### (b) Technical Areas

The two technical activities selected to be audited by DOE/YMPO to be reviewed during the audit were:

1) Work Breakdown Structure (WBS) 1.2.1.4.7, Supporting Calculations for Postclosure Performance Analysis,

2) WBS 1.2.3.2.7.1, Mechanical and Thermal Properties.

These technical activities were evaluated to determine adequacy in the following areas:

- \* Technical qualifications of scientific investigators and design personnel.
- \* Understanding of procedural requirements as they pertain to scientific investigation activities.
- \* Adequacy of technical procedures.
- \* Development of scientific investigation planning documents, study plans, work supporting the Site Characterization Plan (SCP), and any related work products.

In addition to the above listed activities, work completed on the Exploratory Studies Facility (ESF) Alternatives Study since the last audit was also evaluated in regard to Criterion 3 of the QAPP requirements.

## 5.2 Timing of the Audit

The NRC staff believes the timing of the QA audit was appropriate. SNL is in the process of updating its QAPP to the current revision of the OCRWM QARD. This had minimal impact on the outcome of the audit. Also, SNL has made a number of improvements in its QA program since the August 1990 audit and it was beneficial to assess the adequacy of the improvements made to date.

## 5.3 Examination of Programmatic Elements

The programmatic checklists covered the QA program controls for the 14 elements listed below:

- 1.0 Organization
- 2.0 Quality Assurance Program
- 3.0 Scientific Investigation Control and Design Control  
(including Software Control)
- 4.0 Procurement Document Control
- 5.0 Instructions, Procedures, Plans, and Drawings

- 6.0 Document Control
- 7.0 Control of Purchased Items and Services
- 8.0 Identification and Control of Items (Samples and Data)
- 12.0 Control of Measuring and Test Equipment
- 13.0 Handling, Storage, and Shipping
- 15.0 Control of Nonconforming Items
- 16.0 Corrective Action
- 17.0 Quality Assurance Records
- 18.0 Audits

The following programmatic elements were not included in the scope of the audit since SNL currently has no activities to which these elements apply:

- 9.0 Control of Processes
- 10.0 Inspection
- 11.0 Test Control
- 14.0 Inspection, Test, and Operating Status

The NRC staff observed the DOE/YMPO audit team's evaluation of selected programmatic elements of the SNL QAPP. Only portions of some elements were observed. Therefore, some deficiencies identified by the audit team were not observed by the NRC staff. Such deficiencies will not be discussed in detail in this report.

(a) Organization (Criterion 1)

The DOE auditor conducted interviews with the SNL QA Division Supervisor and other support staff to verify the appropriate organizational responsibilities and their knowledge of the SNL QAPP and its implementation.

The SNL QA staff consists of a full-time dedicated QA Division Supervisor and eight QA personnel responsible for performing QA functions. Three of the QA staff are SNL personnel and the remaining are contractor personnel. The length of involvement of the QA contractor personnel with the geologic repository and the SNL QA program ranges from three to five years. SNL also will be staffing the position vacated by a QA contractor staff member who recently left for another position.

It was obvious from observing the auditor interviews with the SNL QA staff and the daily interviews and discussions with the SNL Technical Project Officer and other support staff, that the SNL staff is extremely knowledgeable of its QA program and implementing procedures.

The auditor effectively reviewed and evaluated this criterion and the SNL QA program under this criterion is adequate.

(b) Quality Assurance Program (Criterion 2)

The auditor verified there were provisions for resolution of disputes involving quality arising from a difference of opinion between QA personnel and other department personnel. Since the last DOE/YMPO audit of SNL, there was no evidence that the provisions for resolution of disputes had to be utilized. The auditor then selected a random sample of SNL personnel to interview and gain confidence that they understood and were familiar with the provisions for resolution of disputes involving quality. The results of the auditor's interviews indicated that SNL personnel were familiar with the process for resolution of disputes but generally had no cause to use it since disputes are usually satisfactorily resolved through their first line management.

The auditor informed SNL personnel that a DOE/YMPO representative would be visiting the SNL facilities the week following this audit to present a tutorial on the newly implemented system for reporting allegations of inadequate quality.

Certifications of personnel were reviewed with none of the limitations previously encountered with the restrictions of the Privacy Act. Certification files of SNL personnel consisted of a Personnel Assignment form, Certification of Personnel Qualifications, and a Training Assignment sheet to outline the required training for a particular task. The implementing procedural requirements classified the job position into four categories, namely, supervisor/manager, task leader, support staff, and principal investigator. Adjacent to these classifications are the required education and experience. Required training for each position is established by the individual's supervisor and training department. There is no position description required which delineates the detailed job responsibilities and duties. The NRC staff finds this an acceptable method, however, as documented in the last NRC Observation Audit Report for SNL (ref. Linehan to Shelor dated December 14, 1990), the NRC staff believes that the use of position descriptions would be more effective in demonstrating that SNL evaluates each position on its own requirements, and selects a person who meets these requirements to fill this position.

The SNL QAPP requires a management assessment to be conducted at least annually for determining the effectiveness of the system and management controls. The auditor found that SNL did perform this assessment annually and in accordance with the requirements of the SNL QAPP. However, in response to Standard Deficiency Report (SDR) 571 written by the DOE auditor during the August 20-24, 1990, audit, QA implementing procedure DOP 02-08, "Conduct of Management Assessments" had been revised and required the management assessment to be performed once during each fiscal year. To comply with this procedural revision, a management assessment could conceivably be performed in January 1991 and again in

December 1992, and extend to a period of 23 months. The auditor explained that the management assessment should be conducted as least once every 12 calendar months in order to meet the intent of the SNL QAPP and be effective. The NRC staff agreed with the auditor and noted this was consistent with the intent of the NRC Review Plan criterion for management assessments. The NRC staff noticed that SDR 571 had been closed out by the DOE/YMPO with the acceptable corrective action of DOP 2-8 being revised to make it consistent with the requirements of the SNL QAPP. Based on the DOE auditor's observation, it appears that the corrective action was inadequately verified and DOP 2-8 was revised again to make it consistent with the SNL QAPP.

The audit of this area was effective and Criterion 2 was adequately implemented.

(c) Scientific Investigation and Design Control (Criterion 3)

Criterion 3 was audited simultaneously with the two technical activities evaluated, WBS elements 1.2.1.4.7, "Support Calculations for Post Closure Performance Analysis" and 1.2.3.2.7.1, "Mechanical and Thermal Properties." Also, a late addition to the audit was a programmatic evaluation of the ESF Alternatives Study Final Report. An addenda to the checklist was developed specifically for this activity. Sandia administers the Reference Information Base (RIB) and Site Engineering Properties Database for YMP activities which were included in the audit checklist.

For the two technical activities audited, teams of an auditor and a technical specialist were utilized. For WBS 1.2.1.4.7, the programmatic auditor also functioned as the audit Lead Technical Specialist, primarily assisting the technical specialist assigned to that activity.

WBS element 1.2.1.4.7 dealt only with analysis, so the application of Criterion 3 programmatic controls was limited. The quality affecting work of WBS element 1.2.3.2.7.1 consisted of mechanical testing performed by a contractor, still in a relatively early phase, with no data officially turned over to SNL. A major portion of the technical review of 1.2.3.2.7.1 involved non-quality affecting work. As a result, implementation of the following types of Criterion 3 activities and controls could not be evaluated: design control, analysis, and interfaces, design drawings, scientific investigation interfaces, verification of scientific investigations, and peer reviews.

Checklists were comprehensive and the auditors' investigations were thorough. A majority of the available objective evidence; procedures, reports, and review documentation, was reviewed by the technical specialists and auditors. Utilizing a Criterion 3 coordinator was appropriate in order to assure that the individual auditors covered as much of the checklist as possible.

SNL technical staff conveyed a good understanding of QA program requirements and their individual QA responsibilities. Implementation of Criterion 3 controls appeared adequate to the extent that quality affecting activities had been performed and the audit was able to evaluate. The audit of Criterion 3 was effective.

#### Software Quality Assurance

The portion of the Software QA (SQA) audit observed involved examination of the configuration control system, which was demonstrated to the auditor and observers. The relational database developed by SNL/YMPO not only tracks each configured item, but also tracks each use of a software item in analysis. For analysis, the software version, equipment used, and other pertinent information are documented. The auditor examined in detail records associated with eight codes that had been used in analysis. These included both calculational and scientific and engineering software, existing and commercial. Approximately 50 codes were under configuration control, however, most of those other than the eight reviewed were not fully documented. As with other YMP participants, the level of documentation required for software is dependent upon its use and its source.

SNL staff associated with SQA appeared to be familiar with quality requirements and implementation of their SQA Plan. The implementation of SQA was adequate and the auditors were effective.

#### (d) Control of Purchased Items and Services (Criterion 7)

The auditor preselected a sample of 15 vendors from the 63 SNL approved vendor listing based on the review of the SNL monthly reports. The 15 approved vendors were entered on a composite listing by the auditor which, numerically, corresponded to the audit checklist criteria. This allowed the auditor to systematically and expeditiously audit this criterion. The auditor evaluated purchase requisitions to verify the specified scope of work, education and experience required to perform the scope of work, period of performance, QA program requirements (including subcontractor requirements), right of access, corrective action requirements, reporting of deviations, and the documents required to be submitted by the vendor to SNL. The purchase requisitions were also checked for the proper reviews and approvals.

The auditor concluded that there had been a substantial improvement in this area since their previous audit. Documentation was in proper order, traceable, and SNL personnel were knowledgeable of the implementing QA requirements. The audit of this criterion was effective and the implementation adequate.

(e) Control of Measuring and Test Equipment (Criterion 12)

The auditor visited several locations where measuring and testing equipment would potentially be utilized. The auditor verified that SNL presently is performing no quality-affecting activities that require calibration. SNL is performing mainly scoping work in the area of rock mechanics.

There was only one approved calibration vendor (New England Research) for calibration services and no master list of calibrated instruments for quality-affecting activities. Although there was a minimal amount of activity to review in this area, the auditor probed in-depth and looked at certifications of traceability, procurement planning, calibration results, and acceptance calibration certificates.

At the completion of the audit of this criterion, the auditor summarized what was audited and concluded that there was not enough implementation or procedural controls in place to determine whether implementation was effective. Consequently, the implementation of this criteria is indeterminate. The audit of this area is considered effective.

(f) Audits (Criterion 18)

Auditors reviewed the 1991 audit schedule, auditor qualifications, and a sample of vendor audits. The SNL 1991 internal audit, performed by contractor MAC Technical Services Co. to achieve independence, was reviewed in detail, as were five of the twelve vendor audits listed on the (revised) schedule. The review of the audit of the vendor performing the quality affecting work for WBS element 1.2.3.2.7.1 revealed that contractual requirements, such as calibration recall and qualification of the calibration vendor, were appropriately verified.

In the area of audits, the auditors found that the SNL implementing procedure contradicted the requirements of the SNL QAPP to issue audit reports within 30 calendar days of the completion of the audit. The NRC staff noted that this was also previously documented during the August 1990 DOE/YMPO audit of SNL on SDR 578. The late issuance of audit reports has also been identified in the DOE/YMPO surveillance YMP-SR-91-016, May 1991, as Corrective Action Request (CAR) YM-91-247. SDR 578 was also noted as being acceptably closed out by revising the implementing procedure. This serves as another example of an SDR being closed out by YMPO without acceptably verifying the corrective action implementation. The DOE/YMPO Audit Team Leader intended to recommend elevating this audit finding to a Severity Level 1.

Based on the auditor's findings and subsequent verification of corrective action by SNL in this area, the NRC staff agrees with the auditor's conclusion that the QA program implementation in this area is marginal. The audit of this area was effective.

(g) Conclusions

The audit of the SNL QA program effectively evaluated the degree of compliance to the SNL QAPP and associated procedures for the amount of work being conducted under the SNL QA program. The auditors utilized appropriate checklist questions and in-depth interviews to obtain the required information in evaluating the SNL QA program. The daily caucuses held by the audit team provided good interaction between the technical and programmatic auditors.

5.4 Examination of Technical Products

The audit team technical specialists reviewed to varying degrees, the technical areas listed below by WBS Number and title:

<u>WBS Number</u>	<u>Title</u>
1.2.1.4.7	Supporting Calculations for Post-closure Performance Analysis
1.2.3.2.7.1	Mechanical and Thermal Analysis

The NRC staff observed the audit team's evaluation of selected areas. The DOE/YMPO technical specialists and auditors working together as a team were involved in most of the reviews observed by the NRC staff.

(a) Supporting Calculations for Postclosure Performance Assessment

In regard to WBS 1.2.1.4.7, the draft document SAND 91-0791 "Movement of Shaft and Draft Construction Water in Yucca Mountain, Nevada - an Extended Study," June 1991, was audited for technical adequacy and programmatic aspects. This study was audited as "quality-affecting" work. The technical questions asked by the audit team were thorough and established the technical quality of the calculations. Lead technical investigators were questioned about record keeping, including their adherence to and knowledge of record keeping procedures. In addition, training records of key project personnel were reviewed and compared against a list of procedures that were considered applicable to the project. The training in proper use of procedures was found to be adequate.

The auditors also reviewed, in detail, the use of the SNL computer program entitled NORIA. The use of this program on the project was evaluated in accordance with SQA and adherence to other procedures written to govern the use of computer programs in analyses. The audit of this area was effective. The SNL QA program implementation in this area was indeterminate due to lack of significant quality-affecting work product.

(b) Mechanical and Thermal Analysis

In regard to WBS 1.2.3.2.7.1, the auditor initially selected a subtask entitled "rock linear expansion" and traced the data transfer from an unpublished memorandum to an entry in the RIB. Some entries in the RIB could not be adequately traced back to the source document. The auditor also traced data from published SNL reports regarding thermal conductivity and heat capacity. Data traceability problems were also found in these areas. Although no quality-affecting work is being performed at Sandia under this WBS, procedures do exist regarding transfer of information to the RIB. The data traceability problems appear to indicate a lack of adherence to these procedures. The auditor also examined the qualifications of key project personnel and found them to be adequate. The audit of mechanical and thermal analysis was effective but implementation remains indeterminate due to no quality-affecting work being implemented.

(c) Conclusions

(1) Audit Effectiveness

In general, the technical portion of the audit was effective. The sample of work activities selected for the audit was appropriate. The technical checklists were sufficient to determine the technical qualifications of the principal investigators and technical quality of the product. The audit team conducted the audit in a professional manner and asked questions to ascertain complete understanding of the technical program and applicable QA requirements.

(2) SNL Technical Program

The SNL technical personnel appeared well qualified, and in general, were properly trained, and had an overall understanding of QA requirements in their areas of technical work. The transfer of data from non-quality-affecting activities to the RIB appears to be an area where existing procedures need to be better adhered to and additional procedures may need to be developed. Overall, the audit of the technical program was effective. However, due to minimal quality-affecting work product available for auditing, the technical program implementation in this area is indeterminate.

### 5.5 Conduct of Audit

The audit team members were generally well prepared and demonstrated a sound knowledge of the QA and technical aspects of the SNL program. The audit checklists included the important QA controls addressed in the OCRWM QARD that are applicable to SNL. In general, the audit team used the checklists effectively in their interviews with SNL personnel and review of documents. The technical and programmatic portions of the audit were generally effective, and integration of the technical and programmatic portions of the audit were effective.

### 5.6 Qualification of Auditors

The qualifications of the QA auditors on the team were previously accepted by the NRC staff (ref. NRC Observation Audit Report for USGS dated August 22, 1988) or were acceptable based on QMP-02-02, the DOE procedure for qualifying auditors. The technical specialists appeared knowledgeable of the SNL QA program requirements.

### 5.7 Audit Team Preparation

The QA auditors were well prepared in the areas they were assigned to audit and knowledgeable in the SNL QAPP and implementing procedures. The technical specialists were generally familiar with the technical activities of SNL as described in the WBS and Scientific Investigation Plans.

### 5.8 Audit Team Independence

The audit team members did not have prior responsibility for performing the activities they investigated. Members of the team had sufficient independence to carry out their assigned functions in a correct manner without adverse pressure or influence from SNL personnel.

### 5.9 Review of Previous Audit Findings

(a) Audit Plan 91-07 overall was complete and included: (1) the audit scope; (2) a list of audit team personnel; (3) a list of all the audit activities; (4) the audit notification letter; (5) the SNL QAPP, and past audit report; and (6) the programmatic and technical checklists. All eight SDRs (571 through 578) resulting from the August 1990 QA audit had been closed prior to this audit. The NRC staff noted that two of the previously closed SDRs (571 and 578) were improperly closed out (see Sections 5.3 (b) and 5.3 (f) of this report). This necessitated additional corrective action to be taken by SNL to respond to the auditor's concerns. The NRC staff is particularly concerned about SDRs being

closed out and then having to be reopened, or have additional corrective action taken as a result of ineffective verification of the proposed corrective action. The NRC staff urges DOE to devote more attention to verifying the accuracy of the proposed corrective action in response to audit findings in the future. The NRC staff intends to carefully monitor the effectiveness of the corrective actions taken to resolve audit findings in the future.

- (b) The NRC staff had no Observations resulting from the September 1989 audit and the two Observations from the August 1990 audit have been resolved.
- (c) Based on discussions between the State of Nevada and NRC observers, the State of Nevada observations from previous audits appeared to have been resolved during this audit.

#### 5.10 Summary of NRC Staff Findings

- (a) The NRC staff did not identify any Observations relating to deficiencies in either the DOE/YMPO audit process or the SNL QA program.
- (b) Weaknesses
  - o SDRs/CARs are being closed out by the YMPO without proper verification of the corrective action that was implemented. During this audit, two of the eight SDRs written from the last DOE/YMPO audit of SNL had the same condition noted by the auditors. One of the noted deficiencies was being considered for elevation to a Level 1 condition by the DOE/YMPO audit team leader. The NRC staff recommends that in the future, DOE devote more attention to verifying the accuracy of the corrective action implemented to close out audit findings to avoid recurring conditions (see Sections 5.3 (b) and 5.3 (f)).
  - o At the entrance meeting, prior to the start of the audit, it would have been beneficial to have SNL present a brief overview of the work activities that have occurred since the previous DOE/YMPO audit.
- (c) Good Practices
  - o At the conclusion of the audit in the measuring and test equipment area, the DOE/YMPO auditor summarized what was reviewed and what the potential findings were. This brief summarization provided the auditee, auditor and observers the opportunity to understand there were no misunderstandings of what was audited, and assist in the accuracy of the audit report.

- o There is a strong commitment and support for an effective QA program from the SNL Technical Project Officer on down to the line organizations. In general, all SNL personnel were very receptive and sensitive to the audit team findings from the perspective of improving the SNL QA effort. The SNL QA Manager indicated all personnel had been instructed in the Total Quality Program and appeared supportive of the SNL QA program effort.

#### 5.11 Summary - Audit Team Findings

The audit team identified 4 potential deficiencies and prepared draft documentation describing these deficiencies. Preliminary CARs were issued in the following areas:

<u>Programmatic Element</u>	<u>Adverse Condition Summary</u>
16	(3) CAR forms did not have the signature of the initiators.
16	(1) CAR did not have documentation to indicate it was distributed to affected personnel, and there was one instance where a CAR did not have a schedule for completion of corrective action.
16	Several of the SNL vendor audit reports indicated that audit findings should have been classified as findings and not as observations.
18	An interim change to the SNL implementing procedure contradicted the SNL QAPP requirement of issuing an audit report within 30 days, and the implementing procedure for Audit Finding Observation Reports did not require audit observations to be investigated as required by the SNL QAPP.