



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

WBS 1.2.9.3  
 QA

OCT 25 1991

Richard L. Bullock  
 Technical Project Officer  
 for Yucca Mountain  
 Site Characterization Project  
 Raytheon Services Nevada  
 101 Convention Center Drive  
 Phase II, Suite P-250  
 Las Vegas, NV 89109

EVALUATION OF RESPONSES TO CORRECTIVE ACTION REQUESTS (CARs) YM-91-068 AND YM-91-069 RESULTING FROM YUCCA MOUNTAIN QUALITY ASSURANCE DIVISION (YMQAD) AUDIT YMP-91-04 OF RAYTHEON SERVICES NEVADA

The YMQAD staff has evaluated the responses to CARs YM-91-068 and YM-91-069. The responses have been determined to be satisfactory. Verification of completion of the corrective actions will be performed after the effective dates provided. Any extension to these dates must be requested in writing with appropriate justification prior to the date. Please send a copy of extension requests to Nita J. Brogan, Science Applications International Corporation, Las Vegas, Nevada.

If you have any questions, please contact either Catherine E. Hampton at 794-7973 or John S. Martin at 794-7881.

*R. E. Spence*

Richard E. Spence, Director  
 Yucca Mountain Quality Assurance Division

YMQAD:CEH-496

Enclosure:  
 CARs YM-91-068 and YM-91-069

cc w/encl:  
 K. R. Hooks, NRC, Washington, DC  
 S. W. Zimmerman, NWPO, Carson City, NV  
 M. J. Regenda, RSN, Las Vegas, NV

cc w/o encl:  
 J. W. Gilray, NRC, Las Vegas, NV  
 N. J. Brogan, SAIC, Las Vegas, NV, 517/T-08

YMP-5

9111050212 911025  
 PDR WASTE  
 WM-11 PDR

ADD: Ken Hooks Ltr. Encl.  
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**OFFICE OF CIVILIAN  
RADIOACTIVE WASTE MANAGEMENT  
U.S. DEPARTMENT OF ENERGY  
WASHINGTON, D.C.**

14 CAR NO.: YM-91-068  
 DATE: 08/08/91  
 SHEET: 1 OF 1  
 QA  
 WBS No.: 1.2.9.3

**CORRECTIVE ACTION REQUEST**

1 Controlling Document QAPD-002, Rev. 0	2 Related Report No. Audit YMP-91-04
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3 Responsible Organization RSN	4 Discussed With R.L. Bullock & J.L. Rue
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10 Response Due 20 days from issue	11 Responsibility for Corrective Action R.L. Bullock	12 Stop Work Order Y or N No
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5 Requirement:  
 QAPD-002, Rev. 0, Para. 2.2.12, "Personnel Selection, Indoctrination and Training," states in part, "Personnel assigned to perform activities that affect quality will receive appropriate indoctrination and training prior to performing work...Proficiency shall be maintained."

6 Adverse Condition:  
 Review of training files provided the following deficiencies:  
 1. Nickie Diersen - no training to project procedures for activities performed.  
 2. No documented evidence of personnel being trained to Administrative Procedures, Quality, (eg. AP-5.28Q).  
 3. Personnel not performing required reading prior to effective date of procedure or Procedure Interim Change notice. Examples included:  
     a. Scott Nordick - PP-03-21 effective date 6/3/91 date read 6/14/91  
     b. John McNeely - PP-02-07 effective date 4/29/91 date read 5/3/91

7 Recommended Action(s):  
 Correct the deficiency identified. Investigate to determine if there are other similar deficiencies. Take action to prevent recurrence.

8 Initiator J.S. Martin	Date: 08/08/91	9 Severity Level - 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/>	13 Approved By: OQA <i>Catherine Longstaffe</i>	Date: 8-12-91
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15 Verification of Corrective Action:

16 Corrective Action Completed and Accepted: OAR _____ Date _____	17 Closure Approved By: OQA _____
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(continuation sheet)

The inference in QAPD-002, Rev. 0, Para. 2.2.12, Personnel Selection, Indoctrination and Training is that the work personnel are performing pertains to activities that affect quality

**A. Extent of Deficiency**

1. Nickie Diersen had read the applicable Project Procedures, however, she did not return the self study form in time.

The objective evidence for self study was received after the due date. A further review of her activities indicated that the work previously performed by her was indeed in compliance with the applicable procedures.

2. At the time of the audit there had been training on AP-5.21Q, Field Work Activation for 21 RSN employees. There are 10 additional APQs that some RSN employees should be trained to.
3. Scott Nordick did not perform any quality affecting work to the RSN YMP Project Procedure PP-03-21, Rev. 0, prior to 6-14-91 when he completed his training on the procedures.

John McNeely did not perform any quality affecting work to the RSN YMP Project Procedure PP-02-07 prior to 5-3-91 when he completed his training on the procedure.

Copies of the documentation to support the above statements are on file.

**B. Root Cause**

1. Training Department did not issue a follow-up letter to ensure that the self study form had been sent by Nickie Diersen in due time.
2. Fenix & Scisson and Holmes & Narver required personnel to be trained on the APQs. Due to the changing of companies and developing a new training program for RSN, the training on APQs was overlooked.
3. N/A

*Ltr dtd 9/11/91 - RSN - YMP - 1188*

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C. Remedial Action

1. Objective evidence of training to the applicable procedures have been obtained.
2. The lack of training on the Administrative Procedures, Quality (APQ), has been corrected through the use of the self study reading requirements. In any of the RSN Project Procedures where an APQ has been called out, those that are required to read that procedure are also required to read the referenced APQ. Distribution of said reading requirements to the affected personnel was completed on August 23, 1991. This activity is scheduled to be completed by September 30, 1991.
3. N/A

D. Corrective Action to Prevent Recurrence

1. Training Department personnel have been instructed to ensure that the required self study forms are returned in time. In addition, Nickie Diersen has been advised by letter to comply with the self study requirements document and mail them in due time.
2. Upon receipt of new or revised APQs or ICNs to current APQs from T&MSS they will be reviewed to determine if they are called out in RSN's Project Procedures (PPs). If they are, those who are required to read the POP that the APQ is referenced in will also be required to read the APQ and a self study will be issued.
3. N/A

Responsible Individual:

Manager, Systems Engineering

Response Approved:

FL Bullock

Date:

9/13/91

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CAR NO. YM-91-068

DATE: \_\_\_\_\_

SHEET: \_\_\_\_\_ OF \_\_\_\_\_

**CORRECTIVE ACTION REQUEST**  
(continuation sheet)

Response Accepted: \_\_\_\_\_  
QAR Date

Response Accepted: \_\_\_\_\_  
OQA Date

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WASHINGTON, D.C.

CAR NO. YM-91-069  
DATE October 17, 1991  
SHEET 1 OF 1

**CORRECTIVE ACTION REQUEST**  
(continuation sheet)

AMENDED RESPONSE

- Item 2. Section 6.1.1 of PP-0201, Revision 0, Indoctrination and Training will be revised to indicate that Management and Supervisory personnel shall determine the training of Raytheon personnel. This action will be completed by November 30, 1991.

RESPONSE APPROVED: *Joseph C. Coleman* DATE 10/17/91

Response Accepted: *John S. [Signature]* 10-18-91  
QAR Date

Response Accepted: *R.E. Spence* 10/24/91  
OQA Date

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14CAR NO.: YM-91-069  
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QA  
WBS No.: 1.2.9.3

**CORRECTIVE ACTION REQUEST**

1 Controlling Document RSN QAPD-002, Rev. 0	2 Related Report No. Audit YMP-91-04
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3 Responsible Organization RSN	4 Discussed With R.L. Bullock & J.L. Rue
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10 Response Due 20 days from issue	11 Responsibility for Corrective Action R.L. Bullock	12 Stop Work Order Y or N No
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5 Requirement:  
QAPD-002, Rev. 0, Para. 2.2.12, "Personnel Selection, Indoctrination and Training," states in part, "Management and Supervisory personnel determine the extent and need of training for personnel based on the scope, competency and nature of the activity and on education, experience and proficiency of the person."

6 Adverse Condition:  
Contrary to the above Project Procedure PP-02-01, Rev. 0, "Indoctrination and Training," Para. 6.1.1. states in part, "... Assignments may be identified by Managers/Line Supervisors."

DISCUSSION  
During the course of this audit it was found that training requirements were established by the Training Coordinator for personnel involved in activities affecting quality without input from Managers/Supervisors. As was stated in interviews, the methodology employed in establishing the training requirements was accomplished by a review of old H&N and FSN procedures against the procedures issued by RSN. As a result, Managers/Supervisors have had no direct input into training requirements for those individuals assigned to them as required by the RSN QAPD. In review of PP-02-01, Rev. 0, it was found that the procedure indicated that Managers/Supervisors may provide input to personnel for which they are responsible. To comply with the RSN QAPD, the word "may" should read "shall."

7 Recommended Action(s):  
Correct the deficiency identified. Investigate to determine if there are other similar deficiencies. Take action to prevent recurrence.

8 Initiator J.S. Martin	Date: 08/08/91	9 Severity Level - 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/>	13 Approved By: OQA <i>Catherine [Signature]</i>	Date: 8-12-91
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15 Verification of Corrective Action:

16 Corrective Action Completed and Accepted: OAR _____ Date _____	17 Closure Approved By: OQA _____
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A. Extent of Deficiency

This is not a valid deficiency due to the reasons given below.

The training assignments for line organization personnel were made based on a systematic analysis of the procedures done by the Systems Engineering Manager, the Senior Quality Engineering Coordinator and the Training Coordinator collectively. The matrices were then sent to the department managers for review, editing, and/or concurrence. This has been and will continue to be done on a quarterly basis and as needed for new employees and matrixed personnel.

The training assignments for Quality Assurance Department personnel are contained in Quality Assurance Procedure QAP-2.2(Y) which is approved by the Manager, Quality Assurance YMP. Additional assignments are made by memo or letter from the Manager, Quality Assurance YMP.

The evidence is on file of training assignments that were made or concurred with by managers on the YMP.

B. Root Cause

N/A

C. Remedial Action

N/A

D. Corrective Action to Prevent Recurrence

N/A

Response Approved: Randolph L. Sherrin Date: 9/11/91

Response Accepted: \_\_\_\_\_ Date \_\_\_\_\_  
QAR

Response Accetped: \_\_\_\_\_ Date \_\_\_\_\_  
OQA

*Str. doc. 9/11/91 - RSN - YMP-1188*

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**CORRECTIVE ACTION REQUEST**  
(continuation sheet)

AMENDED RESPONSE

Item 1. An investigation was conducted and it was determined that there were additional personnel who did not complete their training prior to the effective date of the procedure. It was also determined that they did not conduct any quality affecting activities to the procedure prior to completing the training, therefore there do not appear to be any deficient conditions regarding any of these people. Documentation to support this position has been placed in each person's training file.

Item 2. PP-02-01, Revision 0 appears to have sufficient guidelines to satisfy the requirements of the QAPD, QARD, and NQA-1, but in order to satisfy the concerns of the auditor, the procedure will be revised to include follow up action when training forms are not completed by the required completion date. This action should be completed by November 30, 1991.

There is no root cause for item 3 since there is no requirement for personnel to complete training prior to the effective date of the procedure. The requirement is that training be completed prior to the initiation of quality affecting activities to the procedure.

RESPONSE APPROVED: Joseph C. Calabrese DATE 10/17/91

Response Accepted: Paul S. Mantel 10-18-91  
QAR Date

Response Accepted: R. E. Spence 10/25/91  
OQA Date