



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

WBS 1.2.9.3
 QA

NOV 14 1991

Carl P. Gertz, Project Manager, YMP, NV

ISSUANCE OF CORRECTIVE ACTION REQUESTS (CARS) YM-92-008 THROUGH YM-92-013
 RESULTING FROM YUCCA MOUNTAIN QUALITY ASSURANCE DIVISION (YMQAD) AUDIT
 YMP-92-I-01 OF YUCCA MOUNTAIN SITE CHARACTERIZATION PROJECT OFFICE (YMPO)

Enclosed are CARS YM-92-008 through YM-92-013 generated as a result of YMQAD
 Audit YMP-91-I-01.

Please identify the corrective actions to be taken and implemented to correct
 the deficiencies. CAR Continuation Sheets and instructions for completion
 have been provided. Send the originals of your responses to Nita J. Brogan,
 Science Applications International Corporation, Las Vegas, Nevada. Responses
 to the CARS are due 20 working days from the date of this letter. Extensions
 to due dates must be requested in writing, with appropriate justification,
 prior to the due dates.

If you have any questions, please contact Robert B. Constable at 794-7945 or
 Richard E. Powe at 794-7749.

James Blylock
 Richard E. Spence, Director
 Yucca Mountain Quality Assurance Division

YMQAD:RBC-817

Enclosure:
 CARS YM-92-008 Through YM-92-013

cc w/encl:
 K. R. Hooks, NRC, Washington, DC ←
 J. W. Estella, SAIC, Las Vegas, NV, 517/T-22
 C. H. Prater, SAIC, Las Vegas, NV, 517/T-06
 C. L. Sellards, SAIC, Las Vegas, NV, 517/T-02
 S. W. Zimmerman, NWPO, Carson City, NV

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

YMP-5

9111270075 911114
 PDR WASTE
 WM-11 PDR

ADD: Ken Hooks *Chr. Encl.*

102.7
WM-11
NH03

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

14CAR NO.: YM-92-008
DATE: 11/6/91
SHEET: 1 OF 1
QA
WBS No.: 1.2.9.3

CORRECTIVE ACTION REQUEST

1 Controlling Document AP-5.32Q, Revision 1, ICN 1	2 Related Report No. Audit YMP-91-I-01
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3 Responsible Organization YMPO	4 Discussed With J. R. Dyer
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10 Response Due 20 days from issuance	11 Responsibility for Corrective Action C. P. Gertz	12 Stop Work Order Y or N No
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5 Requirement:
AP-5.32Q, Revision 1, ICN 1, Section 5, Steps 10, 11, and 18e, requires that the DDs/TPOs provide documentation of prerequisites to the Project Engineer (PE), that the PE incorporate documentation of prerequisites into the test planning package, and that the PE compile the test planning package ... e. with documentation of completion of prerequisites.

6 Adverse Condition:
Test Planning Packages (TPPs) do not address prerequisites.
Discussion:
Neither TPP 91-32 nor TPP 91-34 specifically addresses prerequisites, and it is impossible to tell from the evidence whether prerequisites were incorporated or if any were received from the DDs/TPOs.

7 Recommended Action(s):
Correct the discrepancies identified; investigate to determine if similar discrepancies exist. Take action to resolve recurrence such as changing AP-5.32Q to require that prerequisites be identified specifically or a statement be made saying there were no prerequisites.

8 Initiator & Date: Neil D. Cox 10/29/91 <i>Neil D. Cox 10/29/91</i>	9 Severity Level - 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/>	13 Approved By: _____ Date: OQA <i>James Blaylock for RES</i> 11/11/91
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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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OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

CAR NO. _____
DATE: _____
SHEET: _____ OF _____

CORRECTIVE ACTION REQUEST
(continuation sheet)

(PREFERRED FORMAT)

CORRECTIVE ACTION RESPONSE:

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # _____

- A. Extent of Deficiency:** (required for Severity Level 1 - also for Severity Level 2 if requested by OQA)

[Document investigative action and identify the extent of the deficient condition.]

- B. Root Cause:** (required for Severity Levels 1 & 2)

[Determine and identify the root cause for the deficient condition.]

- C. Remedial Action:** (action to correct the deficient condition - required for all CARs)

[Provide concise statement of each specific remedial corrective action with name of responsible individual and scheduled completion date.]

- D. Corrective Action to Prevent Recurrence:** (action taken to address the root cause and prevent recurrence of the deficient condition - required for Severity Levels 1 & 2)

[Provide concise statement of each specific action with name of responsible individual and scheduled completion date.]

2. [Repeat 1 above for each deficient condition.]

Response Approved: _____
Responsible Manager Date

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

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SHEET: _____ OF _____

**CORRECTIVE ACTION REQUEST
(continuation sheet)**

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

14CAR NO.: YM-92-009
DATE: 11/6/91
SHEET: 1 OF 2
QA
WBS No.: 1.2.9.3

CORRECTIVE ACTION REQUEST

1 Controlling Document
AP-6.17Q, Revision 0, ICNs 1 & 2, Para. 5.2.2, Item 2

2 Related Report No.
Audit YMP-91-I-01

3 Responsible Organization
YMP0

4 Discussed With
J. Waddell, R. Barton

10 Response Due
20 days from issuance

11 Responsibility for Corrective Action
C. P. Gertz

12 Stop Work Order Y or N
No

5 Requirement:

Para. 5.2.2 ...the AT Manager shall assure that all documents (including subsequent versions of the WBS Dictionary) entered on the AT (Assessment Team) Controlled List, meet the following criteria:....2. They are the most current available version.

6 Adverse Condition:

The Assessment Team (AT) Controlled List does not include the most current available version of the WBS Dictionary.

Discussion:

a. AT controlled List, YMP/90-44, Revision 12, dated 8/30/91, lists a WBS Dictionary, YMP/CC-0001, dated 7/19/91 while the document Control Center contains a WBS Dictionary dated 10/9/91. This is a recurring problem. The same deficiency was found during the Corrective Action Review I-02, June 11-15, 1990, and Internal Audit 90-I-01, October 22-26, 1990. Although these deficiencies were remedied during the respective audits, actions to prevent recurrence, if any, have been ineffective.

b. The audit team recognizes that a proposed procedure revision was being processed prior to the

7 Recommended Action(s):

1) Correct the deficiency identified, 2) determine the root cause of this deficiency, and 3) develop corrective actions to prevent its recurrence.

8 Initiator *Neil D. Cox, AT* Date: 10/28/91
Neil D. Cox 10/28/91

9 Severity Level -
1 2 3

13 Approved By: QA James B. [Signature] Date: 11/14/91

15 Verification of Corrective Action:

16 Corrective Action Completed and Accepted:
OAR _____ Date _____

17 Closure Approved By:
OQA _____

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RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

CAR NO.: YM-92-009
DATE: 11/6/91
SHEET: 2 OF 2

CORRECTIVE ACTION REQUEST
(continuation sheet)

6 Adverse Condition (continued)

audit that should clarify the intent of the procedure, and that during the audit a new notice was added to the AT Controlled List (see Attachment 1).

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CORRECTIVE ACTION REQUEST
(continuation sheet)

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[Provide concise statement of each specific remedial corrective action with name of responsible individual and scheduled completion date.]

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[Provide concise statement of each specific action with name of responsible individual and scheduled completion date.]

- 2. [Repeat 1 above for each deficient condition.]**

Response Approved: _____
Responsible Manager Date

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

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DATE: _____
SHEET: _____ OF _____

**CORRECTIVE ACTION REQUEST
(continuation sheet)**

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

14 CAR NO.: YM-92-010
DATE: 11/8/91
SHEET: 1 OF 2
QA
WBS No.: 1.2.9.3

CORRECTIVE ACTION REQUEST

1 Controlling Document DOE/RW-0214, Rev. 3, ICN 3.1, QAPD, Sec. 5, Para. 5.1	2 Related Report No. Audit YMP-91-I-01
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3 Responsible Organization YMPO	4 Discussed With K. Harbert, R. Murthy
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10 Response Due 20 days from issuance	11 Responsibility for Corrective Action C. P. Gertz	12 Stop Work Order Y or N No
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5 Requirement:
DOE/RW-0214, Revision 3, ICN 3.1, OCRWM QARD, Section 5, Paragraph 5.1, "OCRWM Plans, Procedures, Instructions and Drawings" states in part: "Procedures are developed and implemented to ensure that methods to be used for performance of activities affecting quality are prescribed in documented plans, procedures, and instructions. Activities affecting quality are performed in accordance with these documents...."

6 Adverse Condition:
There has been a lack of verbatim compliance with procedures.

DISCUSSION:

Examples for the lack of verbatim compliance are:

A. YMP AP-3.6Q, Revision 0, "Configuration Management," Paragraph 5.3.2.1.e states that the monthly report of the status of Change Requests (CRs) will contain Configuration Items (CIs) affected by the proposed change.

CI(s) affected by the proposed change were not included in the monthly status report of CRs for the time period of April through September 1991.

7 Recommended Action(s):
Take action to preclude recurrence such as development of a formal training class that covers such topics as verbatim compliance, what to do to request a change to a procedure and when to initiate a CAR.

8 Initiator <i>K. T. McFall, ATC</i> Date: <i>11/8/91</i> Kenneth McFall	9 Severity Level - 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/>	13 Approved By: <i>James B. Langford for RES</i> Date: <i>11/14/91</i>
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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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OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

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DATE: 11/8/91
SHEET: 2 OF 2

CORRECTIVE ACTION REQUEST
(continuation sheet)

6 Adverse Condition (continued)

- B. YMP AP-3.6Q, Revision 0, Paragraph 5.4.2 states that configuration audits shall be conducted at intervals not to exceed 12 months.

A Total of 15 months elapsed between the March 1990 configuration audit and the June 1991 audit.

- C. YMP AP-5.19Q, Revision 2, "Interface Control" requires interface Memoranda of Understandings (IMOU) to be sent to the Local Records Center (LRC)

1. after being signed by evaluators (Step 10),
2. after being signed by requester for data acceptance (Step 15), and
3. after being updated and closed (Step 17).

During the audit, it was determined that none of the IMOU had been sent to the LRC. This was corrected during the audit.

- D. AP-6.17Q, ICN 1, Section 5.12.3 states: "The ORB Administrative Assistant shall transmit a copy of each approved Q-List, Quality Activities List, accompanying PR List, supporting analysis evaluation packages, and subsequent changes to the Local Records Center for filing as a Project record in accordance with approved Project procedures."

QMP-17-01, Revision 3, ICN 1 states that the Record Source shall perform the following steps: Step 11a, "Verify that documents are complete...."

The ORB Administrative Assistant transmitted the record package for QAL-3 (NNA.91.0521.0028/Document Number I-85611) to the LRC. This record package has an Analysis Evaluation Package Cover Sheet that had a blank for the final signature and there was no explanation for the blank. This was corrected during the audit.

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CAR NO. _____
DATE: _____
SHEET: _____ OF _____

CORRECTIVE ACTION REQUEST
(continuation sheet)

(PREFERRED FORMAT)

CORRECTIVE ACTION RESPONSE:

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # _____

- A. Extent of Deficiency: (required for Severity Level 1 - also for Severity Level 2 if requested by OQA)**

[Document investigative action and identify the extent of the deficient condition.]

- B. Root Cause: (required for Severity Levels 1 & 2)**

[Determine and identify the root cause for the deficient condition.]

- C. Remedial Action: (action to correct the deficient condition - required for all CARs)**

[Provide concise statement of each specific remedial corrective action with name of responsible individual and scheduled completion date.]

- D. Corrective Action to Prevent Recurrence: (action taken to address the root cause and prevent recurrence of the deficient condition - required for Severity Levels 1 & 2)**

[Provide concise statement of each specific action with name of responsible individual and scheduled completion date.]

- 2. [Repeat 1 above for each deficient condition.]**

Response Approved: _____
Responsible Manager Date

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

CAR NO. _____
DATE: _____
SHEET: _____ OF _____

**CORRECTIVE ACTION REQUEST
(continuation sheet)**

OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

14 CAR NO.: YM-92-011
DATE: 11/8/91
SHEET: 1 OF 1
QA
WBS No.: 1.2.9.3

CORRECTIVE ACTION REQUEST

1 Controlling Document
DOE/RW-0214, Revision 3, ICN 3.1, QAPD

2 Related Report No.
Audit YMP-91-I-01

3 Responsible Organization
YMPO

4 Discussed With
S. Matthews

10 Response Due
20 days from issuance

11 Responsibility for Corrective Action
C. P. Gertz

12 Stop Work Order Y or N
No

5 Requirement:
OCRWM QAPD, Revision 3, Section 6 - Document Control requires the QA organization to review and, where applicable, concur with controlled documents that contain quality assurance requirements.

This requirement must be passed down to the implementing procedures.

6 Adverse Condition:
Contrary to the above requirement, QMP-06-04, Revision 4, "Project Office Document Development, Review, Approval, and Revision Process" does not include the requirement for QA review.

Subsequent investigation revealed QA has been reviewing applicable documents.

7 Recommended Action(s):
Correct the procedure.

8 Initiator R. Stone, ATL Date: 11/8/91
Kenneth McFall
K.T. McFall

9 Severity Level -
1 2 3

13 Approved By: OQA James Blaylock for RES Date: 11/14/91

15 Verification of Corrective Action:

16 Corrective Action Completed and Accepted:
QAR _____ Date _____

17 Closure Approved By:
OQA _____

OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

CAR NO. _____
DATE: _____
SHEET: _____ OF _____

CORRECTIVE ACTION REQUEST
(continuation sheet)

(PREFERRED FORMAT)

CORRECTIVE ACTION RESPONSE:

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # _____

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[Provide concise statement of each specific action with name of responsible individual and scheduled completion date.]

2. [Repeat 1 above for each deficient condition.]

Response Approved: _____
Responsible Manager Date

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

CAR NO. _____
DATE: _____
SHEET: _____ OF _____

**CORRECTIVE ACTION REQUEST
(continuation sheet)**

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.**

14CAR NO.: YM-92-012
DATE: 11/8/91
SHEET: 1 OF 2
QA
WBS No.: 1.2.9.3

CORRECTIVE ACTION REQUEST

1 Controlling Document AP-6.2Q, Revision 0		2 Related Report No. Audit YMP-91-I-01	
3 Responsible Organization YMP0		4 Discussed With J. Peck, C. Lewis	
10 Response Due 20 days from issuance	11 Responsibility for Corrective Action C. P. Gertz	12 Stop Work Order Y or N No	
5 Requirement: AP-6.2Q, Revision 0, Management and Operation of Sample Handling Activities at Borehole Sites, Paragraph 2.0, Applicability states in part: "...this procedure does not apply to those samples requiring alternative handling as directed by the Sample Overview Committee (SOC)." AP-6.2Q, Revision 0, Paragraph 5.5.1.4 states in part: "Footage marks will be written directly on the core at one-foot intervals." AP-6.2Q, Revision 0, Paragraph 5.5.4 states in part: "Geological core logging by FO staff will occur in two distinct phases: Recording structural information and recording lithologic information."			
6 Adverse Condition: BTP-SMF-013, Revision 0, "Staging, Packaging, Documenting Neutron-Access Borehole Samples" is not consistent with AP-6.2Q requirements for marking and logging and there is a lack of objective evidence that the SOC directed this alternative method of handling samples. DISCUSSION: A. BTP-SMF-013, Revision 0 does not require footage marks to be physically applied to the core sample at one-foot intervals. Also, in inspecting the neutron access borehole samples for runs 64 and 65, no marks at one foot existed on the lexicon encasement. B. BTP-SMF-013 does not require the logging of structural information and lithologic information related to cores extracted from neutron access boreholes. In addition, no objective evidence was provided to indicate this had been accomplished for neutron access			
7 Recommended Action(s): A. Either revise BTP-SMF-013 to be consistent with the requirements of AP-6.2Q or properly document the alternative approach. If BTP-SMF-013 is revised to incorporate the requirements of AP-6.2Q, identify the plan of action to be taken to bring existing			
8 Initiator <i>R. L. Maudlin</i> R. L. Maudlin <i>R. L. Maudlin</i>	Date: <u>11/12/91</u>	9 Severity Level - 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/>	13 Approved By: <i>James Blaylock for RES</i> OQA <u>James Blaylock for RES</u> Date: <u>11/14/91</u>
15 Verification of Corrective Action:			
16 Corrective Action Completed and Accepted: QAR _____ Date _____		17 Closure Approved By: OQA _____	

OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

CAR NO.: YM-92-012

DATE: 11/8/91

SHEET: 2 OF 2

CORRECTIVE ACTION REQUEST
(continuation sheet)

6 Adverse Condition (continued)

borehole samples, runs 64 and 65.

- C. Neither the meeting minutes of the SOC nor the 8/7/91 SOC Specimen Removal Request for Study Plan 8.3.1.2.2.1 provide a clear understanding that the SOC was directing an alternative handling method for Neutron-Access Borehole Samples.

7 Recommended Action(s) (continued)

borehole samples into conformance.

- B. Take action to prevent recurrence.

OFFICE OF CIVILIAN
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WASHINGTON, D.C.

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SHEET: _____ OF _____

CORRECTIVE ACTION REQUEST
(continuation sheet)

(PREFERRED FORMAT)

CORRECTIVE ACTION RESPONSE:

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # _____

- A. Extent of Deficiency: (required for Severity Level 1 - also for Severity Level 2 if requested by OQA)**

[Document investigative action and identify the extent of the deficient condition.]

- B. Root Cause: (required for Severity Levels 1 & 2)**

[Determine and identify the root cause for the deficient condition.]

- C. Remedial Action: (action to correct the deficient condition - required for all CARs)**

[Provide concise statement of each specific remedial corrective action with name of responsible individual and scheduled completion date.]

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[Provide concise statement of each specific action with name of responsible individual and scheduled completion date.]

2. [Repeat 1 above for each deficient condition.]

Response Approved: _____
Responsible Manager Date

**OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
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DATE: _____
SHEET: _____ OF _____

**CORRECTIVE ACTION REQUEST
(continuation sheet)**

OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

14 CAR NO.: YM-92-013
DATE: 11/8/91
SHEET: 1 OF 2
QA
WBS No.: 1.2.9.3

CORRECTIVE ACTION REQUEST

1 Controlling Document
BTP-SMF-013, Revision 0, QAAP 16.1, Revision 3

2 Related Report No.
Audit YMP-91-I-01

3 Responsible Organization
YMP (SMF)

4 Discussed With
J. Peck/C. Lewis

10 Response Due
20 days from issuance

11 Responsibility for Corrective Action
C. P. Gertz

12 Stop Work Order Y or N
No

5 Requirement:

BTP-SMF-013, Revision 0, Staging, Packaging, Documenting Neutron-access Borehole Samples, Step 9 states in part: "Videotape the core run with high resolution video camera."

QAAP 16.1, Revision 3, Corrective Action Requests, Section 4.3, Subsection 4.3.1 states in part: "OCRWM personnel (including direct-support personnel) are responsible for: Identifying and reporting deficiencies observed in the conduct of program activities or in the characteristics of program products."

QAAP 16.1, Revision 3, Section 6.0, subsection 6.1.1 states in part: "Upon discovering an apparent deficiency, OCRWM personnel shall initiate a CAR...."

6 Adverse Condition:

Contrary to the above, there is no documented evidence which indicates the videotaping of neutron access borehole core run No. 58 and this program deficiency was not documented on a CAR.

An entry was made in the Daily Activities Log (at the neutron access borehole) by an SMF staff person that the deficiency occurred.

7 Recommended Action(s):

a. Videotape the core run 58 or provide justification for why compliance with the procedure cannot be obtained. Determine what the affect on quality is in the absence of videotaping the run.

8 Initiator *R. L. Maudlin*, ATL Date: 11/12/91

R. L. Maudlin

9 Severity Level -
1 2 3

13 Approved By: *James Blayford* Date: 11/14/92

OQA *James Blayford* RES

15 Verification of Corrective Action:

16 Corrective Action Completed and Accepted:
OAR _____ Date _____

17 Closure Approved By:
OQA _____

OFFICE OF CIVILIAN
RADIOACTIVE WASTE MANAGEMENT
U.S. DEPARTMENT OF ENERGY
WASHINGTON, D.C.

CAR NO.: YM-92-013

DATE: 11/6/91

SHEET: 2 OF 2

CORRECTIVE ACTION REQUEST
(continuation sheet)

7 Recommended Action(s) (continued)

- b. Investigate to determine if there are similar deficiencies and take action to preclude recurrence.

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Response Approved: _____
Responsible Manager Date

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(continuation sheet)**