



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

WBS 1.2.9.3

MAY 27 1992

Carl P. Gertz, Project Manager, YMP, NV

VERIFICATION OF CORRECTIVE ACTION AND CLOSURE OF CORRECTIVE ACTION REQUEST
(CAR) YM-92-010 RESULTING FROM YUCCA MOUNTAIN QUALITY ASSURANCE DIVISION
(YMQAD) AUDIT YMP-91-I-01

The YMQAD staff has verified the corrective action to CAR YM-92-010 and determined the results to be satisfactory. As a result, the CAR is considered closed.

If you have any questions, please contact either Robert B. Constable at 794-7945 or Kenneth T. McFall at 794-7280.

Richard E. Spence, Director
Yucca Mountain Quality Assurance Division

YMQAD:RBC-3608

Enclosure:
CAR YM-92-010

cc w/encl:

K. R. Hooks, NRC, Washington, DC
S. W. Zimmerman, NWPO, Carson City, NV
J. W. Estella, SAIC, Las Vegas, NV, 517/T-22
B. J. Verna, SAIC, Las Vegas, NV,

cc w/o encl:

J. W. Gilray, NRC, Las Vegas, NV
N. J. Brogan, SAIC, Las Vegas, NV, 517/T-12

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WM-11 PDR

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

14CAR 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
3 Responsible Organization YMP0	4 Discussed With K. Harbert, R. Murthy	
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:
DOE/RW-0214, Revision 3, ICN 3.1, OCRWM QAPD, 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 <u>K. T. McFall</u> Date: <u>11/8/91</u> Kenneth McFall	9 Severity Level - 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/>	13 Approved By: <u>James B. Longford for RES</u> Date: <u>11/14/91</u> OQA
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15 Verification of Corrective Action:
VERIFIED COMPLETION OF CORRECTIVE ACTION ON 5/22/92.
A) THE MONTHLY REPORT OF THE STATUS OF CRs HAS BEEN REVISED
B) THE REQUIREMENT FOR CONFIGURATION AUDITS HAS BEEN REMOVED FROM AP-3.6Q
C) CORRECTED DURING THE AUDIT [EXTENSION REQUEST TO 5/22/92 IS NOT REQUIRED - CLOSED ON 5/22/92]
D) CORRECTED DURING THE AUDIT
CLASSROOM TRAINING ON MANDATORY VERBATIM COMPLIANCE HAS BEEN COMPLETED BY ALL AVAILABLE PROJECT PERSONNEL. KTM 5/22/92

16 Corrective Action Completed and Accepted: OAR <u>Kenneth McFall</u> Date <u>5/22/92</u>	17 Closure Approved By: OQA <u>R.C. Spence</u> <u>5/26/92</u>
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ENCLOSURE

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**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's) 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's 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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SHEET: 1 OF 3
QA

CORRECTIVE ACTION REQUEST (Continuation Page)

Root Cause

A. AP-3.6Q, Revision 0, "Configuration Management"

The requirement for Configuration Item (CI) identification on the monthly Change Request (CR) status report was not complete due to carelessness. The CIs were initially identified on the report, but were removed by mistake during a revision to the report.

B. AP-3.6Q, Revision 0, "Configuration Management"

The requirement for configuration audits to be conducted every 12 months was violated because of incorrect management direction.

C. AP-5.19Q, Revision 2, "Interface Control."

The requirement for sending Interface Memorandum of Understanding (IMOU) to the Local Records Center (LRC) was not performed due to a change in the method of transmitting documents to the LRC. The change was not fully understood by the staff.

D. AP-6.17Q, ICN 1, Revision 0, "Determination of Importance of Items and Activities"

The requirement for verifying that documents are complete was violated due to oversight.

Remedial Action

Memorandums will be issued by the Project Office Project Manager and the T&MSS Project Manager to their respective staffs requiring verbatim compliance with Project documents. Additionally, the memorandums will contain instructions for obtaining management direction when a document is unclear. The responsible individual to ensure this task is accomplished is the Training Manager. Planned completion date for this action is 1/10/92.

etc dtd 12/12/91 - YMP-EQR-1237

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QA

CORRECTIVE ACTION REQUEST (Continuation Page)

The Adverse Conditions identified in CAR YM-92-010 have been corrected in the following manners:

A. AP-3.6Q, Revision 0, "Configuration Management"

The monthly report of the status of CRs has been revised to identify CIs affected by the proposed change. This action has been completed.

B. AP-3.6Q, Revision 0, "Configuration Management"

The procedure will be revised to remove the requirement for configuration audits. The requirement for configuration reviews should be and is located in AP-3.8, Configuration Reviews. A Document Action Request (DAR) will be initiated to remove the requirement from AP-3.6Q. The responsible individual to accomplish this task is Kevin Harbert. Planned completion date for approval of the DAR is 4/15/92

C. AP-5.19Q, Revision 2, "Interface Control."

The employee processing IMOU's has been informed of the new process for transmitting documents to the LRC and is now performing the process correctly. This deficiency was corrected during the audit.

D. AP-6.17Q, ICN 1, Revision 0, "Determination of Importance of Items and Activities"

The adverse condition was corrected during the audit.

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CORRECTIVE ACTION REQUEST (Continuation Page)

Corrective Action

The QA Indoctrination Training will be revised to address verbatim compliance, document revision process, and corrective action process. The responsible individual to perform this task is the Training Manager. Planned completion date for this action is 1/10/92.

Project Office supervisors will attend a briefing to ensure consistent understanding of verbatim compliance, document revision process, and corrective action process requirements. The supervisors will, in turn, brief respective staff members. Attendance rosters for the briefings will provide objective evidence that the briefings were conducted and attended. The attendance rosters will be returned to and maintained by the Training Department. The responsible individual to ensure this task is accomplished is the Training Manager. The planned completion date for this action is 1/31/92.

Response Approved:

[Signature]
For Deputy Project Manager

12/11/91
Date

Response Accepted: *[Signature]* 12/13/91
QAR Date

Response Accepted: *[Signature]* 12/18/91
OQA Date



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JAN 10 1992

Distribution

COMPLIANCE WITH YUCCA MOUNTAIN SITE CHARACTERIZATION PROJECT OFFICE (YMPO)
PROCEDURES

The YMPO has received Corrective Action Request (CAR) YM-92-010 which states, "There has been a lack of verbatim compliance with procedures." This memorandum satisfies part of the remedial action of the CAR. I am committed to supporting procedure compliance. It is a YMPO requirement that employees perform quality-affecting activities in accordance with governing procedures.

It is the responsibility of each employee to ensure that procedures governing quality-affecting activities are followed precisely and that procedure violations do not occur.

If an employee does not understand or has doubts about a quality-affecting activity being performed, or if problems arise trying to follow a procedure that affects quality activities, the employee shall stop the activity and ask for direction from his/her supervisor or manager before continuing. It is the intent of this memorandum that procedures governing quality-affecting activities are not violated.

If you have any questions concerning procedure compliance of this memorandum, please ask your supervisor or manager.

YMP:ECR-1540


Carl P. Gertz
Project Manager