

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

WBS 1.2.9.3  
QA

**APR 16 1991**

Robert F. Pritchett  
Technical Project Officer  
for Yucca Mountain  
Site Characterization Project  
Reynolds Electrical &  
Engineering Co., Inc.  
P.O. Box 98521  
Las Vegas, NV 89193-8521

EVALUATION OF RESPONSES TO CORRECTIVE ACTION REQUESTS (CARs) YM-91-028, YM-91-030, YM-91-033, AND YM-91-036 RESULTING FROM YUCCA MOUNTAIN QUALITY ASSURANCE DIVISION (YMQAD) AUDIT 91-02 OF REYNOLDS ELECTRICAL & ENGINEERING CO., INC.

The YMQAD staff has evaluated the responses to CARs YM-91-028, YM-91-030, YM-91-033, and YM-91-036. 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 that 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.

*Catherine Hampton for*  
Donald G. Horton, Director

Yucca Mountain Quality Assurance Division

YMQAD:CEH-3296

Enclosures:  
CARs YM-91-028, YM-91-030,  
YM-91-033 and YM-91-036

cc w/encls:  
K. R. Hooks, NRC, Washington, DC  
S. W. Zimmerman, NWPO, Carson City, NV  
W. J. Glasser, REECO, Las Vegas, NV  
N. J. Brogan, SAIC, Las Vegas, NV, 517/T-08

cc w/o encl:  
J. W. Gilray, NRC, Las Vegas, NV

YMP-5

9104230330 910416  
PDR WASTE PDR  
WM-11

**FULL TEXT ASCII SCAN**

ADD: K Hooks

Ltr. Encl.

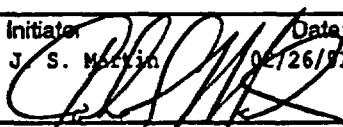
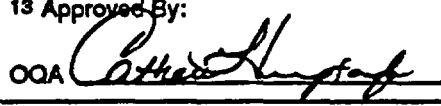
102.7  
Wm-11  
NH03

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

14CAR NO.: YM-91-028  
DATE: 03/07/91  
SHEET: 1 OF 2  
QA  
WBS No.: 1.2.9.3

**CORRECTIVE ACTION REQUEST**

1 Controlling Document Quality Procedure 9.1		2 Related Report No. AUDIT NO. 91-02	
3 Responsible Organization REEC Co QSD		4 Discussed With S. Archuleta, J. Donaldson	
10 Response Due 20 Days After Issue	11 Responsibility for Corrective Action R. F. Pritchett		12 Stop Work Order Y or N No
5 Requirement: QP-9.1, Rev. 3, "Welding Procedure Qualification," Para. 6.2.3 states, "when required by the applicable code, arrange for nondestructive testing of the sample weld, (i.e., ultrasonic, radiographic, etc.) and attach a copy of the nondestructive evaluation report to the original PQR for retention."			
6 Adverse Condition: Contrary to the above requirement, NDE reports were not attached to the PQRs for those weld procedure qualifications for which NDE was performed.			
7 Recommended Action(s): Identify the remedial action(s) to be taken to correct the deficiencies noted in Block 6. Investigate the program process, activities or documentation to determine the extent and depth of similar deficient conditions on the CAR. Identify these deficiencies and provide the			
8 Initiator J. S. Markin 	Date: 02/26/91	9 Severity Level - 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/>	13 Approved By: OQA  3891 Date:
15 Verification of Corrective Action:			
16 Corrective Action Completed and Accepted: QAR _____ Date _____		17 Closure Approved By: OQA _____	

**ENCLOSURE**

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CAR NO.: YM-91-028  
DATE: 03/07/91  
SHEET: 2 OF 2

**CORRECTIVE ACTION REQUEST  
(continuation sheet)**

**7 Recommended Action(s) (continued)**

measures required to correct them. Identify the cause of the condition and the planned corrective action to prevent recurrence.

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

CAR NO. YM-91-028

DATE: 04-01-91

SHEET: 1 OF 1

CORRECTIVE ACTION REQUEST  
(continuation sheet)

CORRECTIVE ACTION RESPONSE: CAR YM-91-028

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # 1

A. Extent of Deficiency:

Review of Procedure Qualification Records (PQRs) indicated this condition exists for PQRs 1422, 2119, 3113, 3116A, and 3225.

B. Root Cause:

These Welding Procedure Specifications (WPSs) were originally qualified for a non-YMP welding program in which the attachment of NDE reports to the PQR was not required. When the subject PQRs were incorporated as YMP WPS support, management failed to assure compliance with this requirement.

C. Remedial Actions: (All Actions To Be Completed By 04/15/91)

The required NDE records were filed in the original non-YMP PQR files. Copies of the required NDE reports have been retrieved and filed in the YMP PQR records. A statement shall be added to the PQRs and WPSs to identify the date of issue and code or standard title utilized for generation of the welding document.

D. Corrective Action to Prevent Recurrence: (Actions To Be Completed By 09/09/91)

The YMP welding program shall be revised to assure compliance to requirements. The revision of the YMP welding program shall assure the date of issue and code or standard title utilized for generation of the welding document (WPS, PQR, and WQR) are defined on the document. The revised YMP program will stipulate the format and methodologies for development of the WPSs, PQRs, and WQRs. The revision of the YMP welding program shall be completed by September 9, 1991. Additional revision or generation of new PQRs, WPSs, and WQRs shall be as required per engineering design criteria when received from the project.

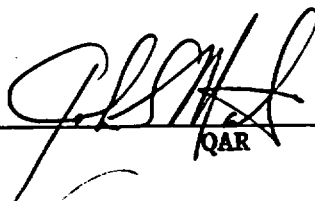
Response Approved: \_\_\_\_\_

*i27 Pritchett*  
Responsible Manager

4/1/91  
Date

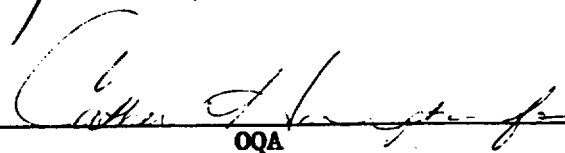
*Let's do it 4/1/91 - 580-01-337*

Response Accepted:

  
QAR

4-5-91  
Date

Response Accepted:

  
OQA

4-8-91  
Date

**ORIGINAL**

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**THIS IS A RED STAMP**  
14CAR NO.: YM-91-030  
DATE: 03/07/91  
SHEET: 1 OF 2  
QA  
WBS No.: 1.2.9.3

**CORRECTIVE ACTION REQUEST**

1 Controlling Document American Society of Mechanical Engineers, Sec. IX		2 Related Report No. AUDIT NO. 91-02	
3 Responsible Organization REECo QSD		4 Discussed With S. Archuleta, J. Donaldson	
10 Response Due 20 Days After Issue	11 Responsibility for Corrective Action R. F. Pritchett	12 Stop Work Order Y or N No	
5 Requirement: <p>Procedure NWP, Revision 0 "NNWSI Standard Welder, Welding Operator, Brazier and Brazing Operator, Certification Specification," Para. 2.2 references that "ANSI/AIME, Section IX (American Society of Mechanical Engineers), "Welding and Brazing Qualifications." be utilized for welder certification. ASME Section IX, Part QW, "Welding," paragraph QW-322, "Renewal of Qualification," states, "The performance qualifications of a welder or welding operator shall be affected under the following conditions: (a) when he has not welded with a process during a period of 3 months or more, his qualifications or that process shall be expired; except when he is welding with another process, the period may be extended to 6 months; (b) when he has not welded with any process during a period of 3 months, all his qualifications shall be expired including any which may extend beyond 3 months by virtue of (a) above;..."</p>			
6 Adverse Condition: <p>Contrary to the above, welder with stamp No. 2-001 had his qualifications renewed for weld procedures N-1112, N-1117G, and N-3914, without the performance of any welding process for a period greater than 3 months.</p>			
7 Recommended Action(s): <p>Identify the remedial action(s) to be taken to correct the deficiencies noted in Block 6. Investigate the program process, activities or documentation to determine the extent and depth of similar deficient conditions on the CAR. Identify these deficiencies and provide the</p>			
8 Initiator J. S. Martin	Date: 02/26/91	9 Severity Level - 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/>	13 Approved By: OQA <i>Charles H. [Signature]</i> 3-11-91
15 Verification of Corrective Action:			
16 Corrective Action Completed and Accepted:  QAR _____ Date _____		17 Closure Approved By:  OQA _____	

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CAR NO.: YM-91-030  
DATE: 03/07/91  
SHEET: 2 OF 2

**CORRECTIVE ACTION REQUEST  
(continuation sheet)**

**7 Recommended Action(s) (continued)**

measures required to correct them. Identify the cause of the condition and the planned corrective action to prevent recurrence.

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WASHINGTON, D.C.

CAR NO. YM-91-030

DATE: 04-01-91

SHEET: 1 OF 2

CORRECTIVE ACTION REQUEST  
(continuation sheet)

CORRECTIVE ACTION RESPONSE: CAR YM-91-030

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # 1

A. Extent of Deficiency:

At the time of subject YMP Audit, there was one active YMP welder, Z-001.

B. Root Cause:

The format that had historically been followed in the non-YMP program, from which the YMP procedure NWP-2 was developed, determined that the "Three Month" requirement would be adequately satisfied if the specified "Three Month" period was interpreted to be established by three successive calendar months beginning on the first day of the month following the month in which the welder was qualified in or used the specific process. Thus, if a welder used a process on any day in January his qualification for that process did not expire until the end of the third month after January, which would be April 30th. Documented usage of the process anytime before April 30th was considered to be within the required three month time frame. No attempt to extend one process through the usage of a second process was made. The YMP procedure NWP-2 failed to properly define and justify this interpretation.

C. Remedial Actions: (All Actions Are Completed)

The YMP qualifications for welder Z-001 has been rescinded. No welding has been performed on this project to date.

D. Corrective Action to Prevent Recurrence: (Actions To Be Completed By 09/09/91)

Research of ASME Section IX Code cases was conducted to determine if a committee interpretation of this question had been performed. No decision by the ASME code committee addressing the three month period was found. Two active members of the AWS D1.1 committee were contacted and neither member could shed light on the intended interpretation by their committee. Thus, it is a matter of interpreting the intent of the author in deciding if a deficiency exists or not; the only people who can decide this is the committee that wrote the requirement and that committee has been superseded by the 1989 committee for ASME Section IX and the 1990 committee for AWS D1.1. ASME Section IX was changed to specify a "Six Month" period by the winter 1990 addenda.

*Ltr dtd 4/1/91 - 580-01-337*



Original

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CAR NO. YM-91-030  
DATE: 04-01-91  
SHEET: 2 OF 2

CORRECTIVE ACTION REQUEST  
(continuation sheet)

CORRECTIVE ACTION RESPONSE: CAR YM-91-030 (Continued)

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # 1

D. Corrective Action to Prevent Recurrence: (Continued)

The REECO YMP welding program shall be revised and approved by September 9, 1991. The new YMP program will implement a six month expiration period; i.e., day of month to day of month six months later. Further details of controls to be implemented in the YMP welding program revision are defined in response to YM-91-28, "Corrective Action To Prevent Recurrence".

Response Approved: 127 Brichest 4/1/91  
Responsible Manager Date

Response Accepted: [Signature] 4-5-91  
QA Date

Response Accepted: Cathleen Thompson for 4-12-91  
OQA Date

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14CAR NO.: YM-91-033  
DATE: 03/07/91  
SHEET: 1 OF 2  
QA  
WBS No.: 1.2.9.3

**CORRECTIVE ACTION REQUEST**

1 Controlling Document QP-12.0, Rev. 6 and MQA-IP-QS-5.0, Rev. 0		2 Related Report No. AUDIT NO. 91-02	
3 Responsible Organization REECo QSD		4 Discussed With S. Archuleta, E. Kress	
10 Response Due 20 Days After Issue	11 Responsibility for Corrective Action R. F. Pritchett		12 Stop Work Order Y or N No
5 Requirement: <ol style="list-style-type: none"><li>Quality Procedure 12.0, Rev. 6, Para. 6.2.2 states, "Prior to installing M&amp;TE into service, it shall be entered into a tracking system log which shall contain as a minimum: item, S/N, model number, user assigned number, data calibrated, date calibration day, date put into service, date removed from service, date used and where used."</li><li>MQA-IP-QS-5.0, Rev. 0, Para. 1.3 states in part, "All support provided to the YMP shall be governed by internal Implementing Procedures." In addition, Paragraph 2.1 states in part, "This procedure shall apply to all implementing instructions, procedures and drawings developed for use in the YMP support."</li></ol>			
6 Adverse Condition: Contrary to the above requirements, the following discrepancies were found: <ol style="list-style-type: none"><li>Tracking system utilized by the Physical Standards and Calibration Lab (PSCL) does not contain the following prerequisites: serial number, user assigned number, date calibrated, date put into service, date removed from service, dates utilized or location of utilization.</li><li>As stated within MQA-IP-QS-5.0, Rev. 0, the procedures developed for utilization by the Quality Systems Division are for internal use only. However, MQA-IP-CP-GEN-1, Rev. 3, contains requirements for the user organizations (i.e., USGS, SAIC, LANL, etc....) in the following paragraphs 6.3, 6.3.1, 6.3.2, 6.3.3, 6.4.1, 6.12, and 6.12.1.</li></ol>			
7 Recommended Action(s): Identify the remedial action(s) to be taken to correct the deficiencies noted in Block 6. Investigate the program process, activities or documentation to determine the extent and depth of similar deficient conditions on the CAR. Identify these deficiencies and provide the			
8 Initiator J. S. Martin Date: 02/27/91		9 Severity Level - 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/>	
		13 Approved By: OQA <i>Cathy Humphreys</i> Date: 3-11-91	
15 Verification of Corrective Action:			
16 Corrective Action Completed and Accepted: QAR _____ Date _____		17 Closure Approved By: OQA _____	

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CAR NO.: YM-91-033  
DATE: 03/07/91  
SHEET: 2 OF 2

**CORRECTIVE ACTION REQUEST  
(continuation sheet)**

**7 Recommended Action(s) (continued)**

measures required to correct them. Identify the cause of the condition and the planned corrective action to prevent recurrence.

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CAR NO. YM-91-033  
DATE: 04-01-91  
SHEET: 1 OF 5

CORRECTIVE ACTION REQUEST  
(continuation sheet)

CORRECTIVE ACTION RESPONSE: CAR YM-91-033

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # 1

The requirements of Quality Procedure 12.0 Rev. 6, Para. 6.2.2 is intended to provide a tracking system log for the user of the calibrated M&TE to record where the calibrated equipment is used. This requirement is not applicable to the Physical Standards and Calibration Lab. The specific implementation of this requirement is included in the Construction Department's Procedure, CD-IP-001, and the Drilling Department's Procedure, DD-IP-02. Both procedures include an Exhibit III, M&TE Tracking Log, which contain the minimum recording requirements. A copy of these exhibits are attached. To date, there have been no activities which have necessitated the use of these logs.

No further corrective action is required on the identified potential adverse condition since REECO is in full compliance with the intended requirement.

Response Approved:

*127 Bitchest*

Responsible Manager

*4/1/91*

Date

Response Accepted:

*[Signature]*

QAR

*4-5-91*

Date

Response Accepted:

*[Signature]*

OQA

*4-8-91*

Date

*Stu dtd 4/1/91 - 580-01-337*

Exhibit III  
M&TE Tracking LogCAR NO. YM-91-033  
DATE: 04-01-91  
SHEET: 2 of 5REYNOLDS ELECTRICAL & ENGINEERING CO., INC.  
YUCCA MOUNTAIN PROJECTMEASURING AND TEST EQUIPMENT (M&TE)  
TRACKING LOG

M&amp;TE Item: \_\_\_\_\_

Control (PTL) # \_\_\_\_\_

Serial # \_\_\_\_\_

Model # \_\_\_\_\_ ( S A M P L E )

Date Cali- brated	Recali- bration Due Date	Date Put In Service	Issue Initials	Date Removed From Service	Reason Removed From Service	Date Used	Where Used	Date Returned To DSY	Date Returned To Cal Lab



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CAR NO. YM-91-033

DATE: 04-01-91

SHEET: 4 OF 5

CORRECTIVE ACTION REQUEST  
(continuation sheet)

CORRECTIVE ACTION RESPONSE: CAR YM-91-033

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # 2

A. Extent of Deficiency:

The Calibration Lab has reviewed all Calibration Lab Quality Implementing Procedures and in no other internal procedure are requirements for users made as found in REECO YMP Quality Assurance Internal Procedure MQA-IP CP GEN-REV 3, Para. 6.3, 6.3.1, 6.3.2, 6.3.3, 6.4.1, 6.12, and 6.12.1.

B. Root Cause:

The User requirements were put in place before QP 12.0 was written. Review of subsequent revisions did not note these errors and properly remove user requirements.

C. Remedial Actions: (All Actions To Be Completed By 06/01/91)

At the next revision, any reference to user requirements will be removed from REECO MQA-IP-CP-GEN-1, Rev. 3. Requirements from Section 6.3 including Para. 6.3.1, 6.3.2, and 6.3.3 to be reviewed by the REECO Yucca Mountain Office for possible inclusion in REECO YMP Quality Procedure QP 12.0 in specifying REECO M&TE User requirements.

MQA-IP-CP-GEN-1, Rev. 3, shall be revised as follows:

1. Para. 6.4.1.1 shall read - items of M&TE will not be accepted for calibration unless accompanied by a properly completed Calibration Service Requested Form Number RE-0126 (7/89). If items are received from Users without a properly completed RE-0126, the personnel delivering the items will be requested by Cal Lab personnel to complete the service request form.
2. Para. 6.12 shall read - when M&TE cannot be adjusted to within its designated tolerances, a rejected tag (Exhibit IV) or similar, shall be attached, and it shall be returned to the using organization.

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CAR NO. YM-91-033

DATE: 04-01-91

SHEET: 5 of 5

CORRECTIVE ACTION REQUEST  
(continuation sheet)

CORRECTIVE ACTION RESPONSE: CAR YM-91-033 (Continued)

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # 2

C. Remedial Actions: (Continued)

3. Para. 6.12.1 shall read - M&TE items found to be out of calibration tolerance during calibration shall be adjusted as necessary to bring them into tolerance.

A Physical Standards and Calibration Out of Tolerance Notification, RE-0698 (Exhibit V), shall be prepared by the calibration technician notifying the using organization that a possible nonconforming condition exists detailing the item's identification number and its out-of-tolerance condition.

The MQA-IP-CP-GEN-1, Rev. 3, shall be revised and approved by June 1, 1991.

D. Corrective Action to Prevent Recurrence: (Actions To Be Completed By 06/01/91)

Management has recently (March 26 & 27, 1991) attended a YMP Records Management class which provided a greater understanding of YMP records requirements, in particular draft review documentation. The MQA-IP-CP-GEN-1, Rev. 3, shall be revised and approved by June 1, 1991.

Response Approved:

137 Bitchest  
Responsible Manager

4/1/91  
Date

Response Accepted:

John Martin  
QAR

4/5/91  
Date

Response Accepted:

Calvin Hampton for  
OQA

4-8-91  
Date



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WASHINGTON, D.C.**

14 CAR NO.: YM-91-036

DATE: 03/07/91

SHEET: 1 OF 2

QA

WBS No.: 1.2.9.3

**CORRECTIVE ACTION REQUEST**

1 Controlling Document

568-DOC-155 QAPP

2 Related Report No.

AUDIT NO. 91-02

3 Responsible Organization

REECO

4 Discussed With

R. Pritchett

10 Response Due

20 Days After Issue

11 Responsibility for Corrective Action

R. F. Pritchett

12 Stop Work Order Y or N

No

5 Requirement:

QAPP-568-DOC-115, Rev. 8, Sect. XVI, Para. 1.2 states, "The PQA organization shall document concurrence of the adequacy of proposed corrective actions to assure that QA requirements will be satisfied. Follow-up action shall be taken by the PQA organization to verify proper implementation of this corrective action and to close out the corrective action. The organization responsible for implementing the corrective action shall assure that the corrective action is completed in a timely manner."

In addition, Sect. XVIII, Paras. 1.6 through 1.7 state, "Management of the audited organization shall investigate adverse audit findings; determine root cause; schedule corrective action, including measures to prevent recurrence; and, within thirty calendar days of receipt of the audit report, notify the appropriate organizations in writing of action taken or planned. The adequacy of audit responses shall be evaluated by or for the auditing organization."

6 Adverse Condition:

Contrary to the above requirements, AFR No. 3 of Audit No. 001-90 has had corrective action accepted and the subsequent closure of subject AFR without full corrective action being implemented or a date for completion of the proposed corrective action being given.

7 Recommended Action(s):

Identify the remedial action(s) to be taken to correct the deficiencies noted in Block 6. Investigate the program process, activities or documentation to determine the extent and depth of similar deficient conditions on the CAR. Identify these deficiencies and provide the

8 Initiator

J. S. Martin

Date:

02/28/91

9 Severity Level -

1 ☐ 2 ☒ 3 ☐

13 Approved By:

Date:

OQA

Catherine H. [Signature] 30-91

15 Verification of Corrective Action:

16 Corrective Action Completed and Accepted:

QAR

Date

17 Closure Approved By:

OQA

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

CAR NO.: YM-91-036  
DATE: 03/07/91  
SHEET: 2 OF 2

**CORRECTIVE ACTION REQUEST  
(continuation sheet)**

**5 Requirements (continued)**

"Follow-up action shall be taken to determine whether or not corrective action has been accomplished as scheduled and shall be verified by the auditing organization. An analysis of audit results shall be performed by the PQA organization to identify quality trends. The results of the analysis shall be reported to responsible management for review, assessment, and appropriate action."

**7 Recommended Action(s) (continued)**

measures required to correct them. Identify the cause of the condition and the planned corrective action to prevent recurrence.

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

CAR NO. YM-91-036

DATE: 04-01-91

SHEET: 1 OF 2

CORRECTIVE ACTION REQUEST  
(continuation sheet)

CORRECTIVE ACTION RESPONSE: CAR YM-91-036

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # ALL

A. Extent of Deficiency:

A review was conducted of other recently closed Audit Finding Reports (AFRs) and no other examples were identified. This is considered an isolated occurrence.

B. Root Cause:

The rationale used by the auditor, who took over responsibility for the AFR, was based on the accepted commitments made in the AFR responses. The rationale for closure was based on:

- (i) the approval of Quality Systems Division's internal programmatic controls (MQA-IP-QS-5.0) for procedures;
- (ii) the lack of any welding, planned or in progress;
- (iii) that any new or revised procedures would be processed in accordance with the newly established programmatic controls; and
- (iv) that those new or revised procedures would be reviewed and approved by YMP QA, who would verify that all administrative requirements were satisfied.

Those actions taken to correct the original deficient condition at that time, appeared to be acceptable to close the finding. This rationale was not consistent with the requirements of the QAPP.

C. Remedial Actions: (All Actions Were Completed 03/18/91)

AFR 3 was re-opened on March 18, 1991 and a revised response requested from the Quality Systems Division.

*Ltr dtd 4/1/91 - 580-01-337*

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

CAR NO. YM-91-036  
DATE: 04-01-91  
SHEET: 2 OF 2

CORRECTIVE ACTION REQUEST  
(continuation sheet)

CORRECTIVE ACTION RESPONSE: CAR YM-91-036 (Continued)

1. CORRECTIVE ACTION FOR DEFICIENT CONDITION # ALL

D. Corrective Action to Prevent Recurrence: (Actions Were Completed  
03/29/91)

The auditor who closed the AFR incorrectly, was counseled by the QA  
Manager on the proper method of closing out Audit Findings.

Response Approved: R F Pritchett 4/1/91  
Responsible Manager Date

Response Accepted: [Signature] 4/5/91  
QAR Date

Response Accepted Catherine Hampton 4-8-91  
OQA Date