

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT

YUCCA MOUNTAIN QUALITY ASSURANCE DIVISION

QUALITY ASSURANCE SURVEILLANCE REPORT OF

THE MANAGEMENT AND OPERATIONS CONTRACTOR

SURVEILLANCE NUMBER YMP-SR-92-012

CONDUCTED MAY 27 THROUGH JUNE 1, 1992

ACTIVITIES SURVEILLED:

ACTIVITIES ASSOCIATED WITH TRANSITION PLAN YMP/92-8
YUCCA MOUNTAIN SITE CHARACTERIZATION PROJECT
PLANS AND PROCEDURE ORGANIZATION

Prepared by: Donald J. Harris Date: June 16, 1992
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Approved by: D. G. Horton Date: 6/18/92
Donald G. Horton
Director
Office of Quality Assurance

1.0 EXECUTIVE SUMMARY

This report contains the results of the Office of Civilian Radioactive Waste Management (OCRWM) Quality Assurance (QA) Surveillance No. YMP-SR-92-012 of the Management and Operating (M&O) Contractors activities associated with Transition Plan 92-8 Yucca Mountain Site Characterization Project, Plans and Procedures Organization. The surveillance was conducted at the facilities of the M&O Contractor in Las Vegas, Nevada on May 27 through June 1, 1992. The surveillance was conducted by a team from Yucca Mountain Quality Assurance Division (YMQAD) of the Office of Quality Assurance (OQA) in accordance with the requirements of OCRWM Quality Assurance Administrative Procedure QAAP 18.3, Revision 3, Surveillance Program.

A review of the activities associated with the transition of the Plans and Procedure Organization (PPD) of the Project Controls Branch (PCB) to the M&O was performed based on the checklist developed from the following Yucca Mountain Site Characterization Project (YMP) procedures:

- o Quality Management Procedure QMP-02-01, Revision 5, Project Office Instructions and Qualification Training
- o QMP-06-04, Revision 4, Interim Change Notice (ICN) Nos. 1-3, Project Office Document Development, Review, Approval and Revision Process
- o Administrative Procedure-Quality AP-1.5Q, Revision 5, Issuance and Maintenance of Controlled Documents
- o AP-1.17Q, Revision 1, Forms Control
- o AP-1.18Q, Revision 0, Records Management: Las Vegas Records Source Implementation
- o AP-6.1Q, Revision 3, Project Office Document Development, Review, Approval and Revision Control

One Corrective Action Request (CAR) was generated as a result of this surveillance. The position descriptions for the existing staff members were still in progress, the verification of education and experience had not been completed, and assignments of Indoctrination and Training were incomplete. Records implementation was considered as indeterminant based on no records being submitted to the Local Records Center (LRC) since the transition. The remaining activities were considered to be satisfactory and effective.

2.0 SCOPE

The surveillance was performed to determine the effectiveness of activities associated with the PPD, which transitioned over to the M&O Contractor on March 23, 1992.

3.0 SURVEILLANCE TEAM

Donald J. Harris, Surveillance Team Leader, Quality Assurance Engineer, Science Applications International Corporation (SAIC)/YMQAD, Las Vegas, Nevada

Cynthia H. Prater, Quality Assurance Specialist, SAIC/YMQAD, Las Vegas, Nevada

4.0 PERSONNEL CONTACTED DURING THE SURVEILLANCE

Judith E. Zimmerman, TRW/M&O, Plans and Procedures Supervisor

Sandra L. Moore, TRW/M&O, Administrative Technical Specialist

Judy B. Justice, Duke Engineering/M&O, Training Officer

Nathaniel W. Hodgson, TRW/M&O, Quality Assurance Verification Manager

Laura M. Tate, TRW/M&O, Records Management

Russ Riding, SAIC, Training Coordinator, System & Compliance Division

Sam H. Horton, SAIC/YMQAD, Quality Assurance Engineer

Alice M. Harmon, SAIC, Records Supervisor, Training Administrative and Records Department

Gail L. Vaught, SAIC, Data Entry Clerk, Training Administrative and Records Department

5.0 SURVEILLANCE RESULTS

5.1 Procedures Reviewed During the Surveillance

5.1.1 OMP-02-01, Revision 5, Project Office Indoctrination and Qualification Training

Training records for seven M&O PPD staff members were reviewed for compliance with procedural requirements. During a review of these records, several deficient conditions were found which included the following:

Position Descriptions - None approved
Position Qualification forms - Six incomplete
Training Assignment forms - No assignment of Project Indoctrination
Verification of Education and Experience - Three of seven not completed

NOTE: Document Action Request DAR-549 for QMP-02-01 will clarify the indoctrination and orientation training requirements. This change is currently in comment resolution.

5.1.2 QMP-06-04, Revision 4, ICN Nos. 1-3, Project Office Document Development, Review, Approval and Revision Process

A sample of four documents processed by PPD, since the transition was reviewed for compliance with the procedure requirements and the effectiveness of the procedure. The following procedures, QMP-04-03, Revision, 0; QMP-01-01, Revision 3, ICN No. 2; AP-6.4Q, Revision 2 and YMP 92-03, Revision 0, and the associated records required by the procedure were evaluated against the checklist questions for ICN Cover Page Instructions form, number of ICNs allowed, identification of primary reviewers on the Document Action Initiation form, change indication and/or complete revision indicator, review package content, determination of training assignment and the number of days required. Subject Matter Expert (SME) acceptance of the final draft, assignment of document effective date, forms electronic version, update and determination of Change Control Board (CCB) action.

There exists a degree of confusion in two areas of this procedure.

- a. Normally the Training Department determines the training assignment and the number of days required for training on revisions or ICNs to documents depending on the Training history of the document. However, on a new document, Revision 0, Training transmits a letter to affected organizations requesting the identification of base-line training and stating if requested, "Identify if a formal training class is required." This method is directed by QMP-02-01, Revision 5, Paragraph 5.0, Step 5. The Document Approval Sheet on QMP-04-03 indicated "TRAINING REQUIRED-N/A" and the "NUMBER OF DAYS REQUIRED FOR TRAINING-N/A." The two QMPs do not reflect the same requirement or methodology in this instance.

- b. The procedure fails to provide sufficient information or methodology to process electronic versions of forms. It does not address the user organization's decision to have the form made available electronically or their identification to PPD, to have the form available electronically. In addition, the procedure does not define how PPD directs the Forms Librarian (T&MSS) to electronically input new or revised forms.

5.1.3 AP-1.5Q, Revision 5, Issuance and Maintenance of Controlled Documents

The same sample of documents processed by PPD in Item 2 was reviewed. As appropriate, it was determined that the document identification number for non-controlled CCB documents were provided by PPD, who also provided completed the DAR and ICN forms.

5.1.4 AP-1.17Q, Revision 1, ICN No. 1, Forms Control

Of the documents sampled, QMP-04-03 contained a revision 0 of form YMP-097 and AP-6.4Q contained a revision 3 of form YMP-055, Revision 2. The DAR included both the procedures and the forms which contained the form identification, revision level and date. The master forms were issued to the Document Control Center to be issued to the Project Forms document holders.

5.1.5 AP-1.18Q, Revision 0, Records Management: Las Vegas Records Source Implementation

Activities associated with this procedure were determined to be indeterminant, due to the lack of processing PPD records to the LRC. The documents have not been authenticated, therefore, are classified as "In process documents" and maintained in a locked cabinet and office. The Records Specialist is currently on board and in training. The schedule for transmittal of the records to the LRC is June 15, 1992.

The M&O Contractor has provided to both the LRC and the Training Center the names for authorized access to privileged records.

5.1.6 AP-6.1Q, Revision 3, Project Office Document Development Review

The four samples selected for review had DARs 516, 529, 584 and 589 initiated and concurred with by the PCB and the documents were processed in accordance with QMP-06-04.

5.2 Synopsis of Corrective Action Request

As a result of this surveillance, CAR No. YMP-92-044 was issued. Contrary to the requirements of QMP-02-01, Revision 5, PPD did not have approved position descriptions for existing staff member and five of seven employees had not completed all indoctrination and training assignments (see Enclosure 1 for an information copy of the issued CAR).

6.0 RECOMMENDATIONS

- 6.1 Revise QMP-06-04, or include in the new implementing line procedure which supersedes the QMP, the methodology for: 1) the using organization's decision of having the form available electronically and the method of documenting the decision, and 2) how PPD identifies to the Forms Librarian (T&MSS) to enter new or revised forms or the deletion of forms.
- 6.2 Clarify the methodology of determining training requirements. QMP-06-04 requires a review package to be sent to the Training Officer or designee for the determination of training requirements. After the document is approved the signature of the Training Officer or designee is obtained for the number of days required for training. QMP-02-01 requires the notification of the supervisor of new documents for evaluation of employee training needs. In the case of QMP-04-03, Technical Directives, the procedure was approved on April 15, 1992, the document approval sheet, bottom block indicates "training required N/A" and "number of days required for training as N/A" and signed on April 15, 1992. In this case, training should have been marked "yes" and the number of days indicated as "0" with a comment referencing the letter number, requesting the using organizations to determine base-line training requirements and if classroom training is required with Training notified of the results.
- 6.3 Provide an "Action Plan" with schedule to address the PCQAG-002 requirements to (1) develop a matrix of both plans and procedures for cross referencing to assist in the evaluation of impact of proposed changes or changes to plans and procedures and (2) develop a style guide and determine training needs and author or reviewer qualifications training requirements. These requirements of the PCQAG-002 are currently neither identified, scheduled, nor tracked through to their conclusion of a physical product.

- 6.4 Evaluate the current QMP and AP-Q for superseded references and responsible organizations. The procedures QMP and AP-Q are riddled with similar disconnects (i.e., AP-4.1Q).
- 6.5 Consider defining the procedure responsibility level down to the actual responsible organization who performs the task. Currently, the PCB is identified in approximately 20 procedures in the responsible parties section. The PPD which is part of the PCB organization, is not identified in the responsible parties section, even though they are the responsible party in five of the procedures. This method of defining the responsible party is very confusing.
- 6.6 Revise QMP-06-04 to specifically exclude those documents controlled by another defined process procedure.
- 6.7 Clarify the interfaces between the CCB procedures and PPD procedures, for when CCB requests the assistance of PPD to provide a QMP-06-04 review of a CCB controlled document. The methodology and responsibilities need to be clearly defined.
- 6.8 Training base-line documents for the PPD supervisor and assistant should consist of the following documents:
- | | | |
|-----------|----------|------------------|
| QAAP 16.1 | AP-1.5Q | DOE/RW-0215 QARD |
| QAAP 5.1 | AP-1.17Q | QMP-02-01 |
| QAP 6.2 | AP-1.18Q | QMP-06-04 |
| | AP-6.1Q | |
- 6.9 In order to meet the project's goals and objectives, it is recommended that additional resources or overtime for PPD be authorized. The transition process resulted in a learning curve differential within the PPD organization. The expedited changes directly related to the YMP audit, the incomplete position descriptions, position qualification, project indoctrination, have begun to create a backlog of documents requiring processing. In addition, no records have been transmitted to the LRC since the transition. The additional resources or overtime can relieve the potential impact to the project.
- 6.10 All SMEs should be notified to support PPD and provide assistance and direction on their documents to preclude any outside influence which could impact PPD during this transition phase.

ENCLOSURE 1

ORIGINAL
THIS IS A RED STAMP

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT U.S. DEPARTMENT OF ENERGY WASHINGTON, D.C.		8 CAR NO.: <u>TR-92-044</u> DATE: <u>6/4/92</u> SHEET: <u>1</u> OF <u>2</u> QA
CORRECTIVE ACTION REQUEST		
1 Controlling Document QWR-02-01, Revision 5		2 Related Report No. YMP-SR-92-012
3 Responsible Organization M&O and Plans & Procedures Dept.	4 Discussed With Judith Zimmerman	
5 Requirement: QWR-02-01, Revision 5. Step 7, states, "Obtain a position description from Personnel or designee and conduct a documented evaluation of a new employee's qualifications against the requirements of the position description. Document evaluation on the Position Qualification form (Attachment 1). Step 8, states in part, "Assign new employee initial and baseline training and indoctrination training. Document assignment on Training Assignment form (Attachments 2 and 3). Enter assignment completion date of no more than 30 working days from date of assignment. ...Employee's shall receive indoctrination in: a. General criteria, including applicable codes, standards, and company procedures.		
6 Adverse Condition: Contrary to the above requirements the following conditions exist: 1. PFD does not have approved position descriptions for existing staff members. 2. Out of seven employees' training records checked, five had not completed all indoctrination and training assignments (see attached matrices for specifics).		
9 Does a significant condition adverse to quality exist? Yes ___ No <u>X</u> If Yes, Circle One: A B C	10 Does a stop work condition exist? Yes ___ No <u>X</u> ; If Yes - Attach copy of SWO If Yes, Circle One: A B C D	11 Response Due Date: 20 Days from issuance
12 Required Actions: <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Extent of Deficiency <input checked="" type="checkbox"/> Preclude Recurrence <input type="checkbox"/> Root Cause Determination		
13 Recommended Actions: 1. Identify whether the above mentioned adverse condition had an affect on quality-related activities. 2. Identify these activities and provide the measures required to correct them. 3. Investigate the program process and identify the steps necessary to prevent recurrence.		
7 Issued By: <u>[Signature]</u> Date: <u>6/4/92</u>	14 Issuance Approved by: <u>[Signature]</u> Date: <u>6/9/92</u>	
15 Response Accepted QAR Date:	16 Response Accepted QADD Date:	
17 Amended Response Accepted QAR Date:	18 Amended Response Accepted QADD Date:	
19 Corrective Actions Verified QAR Date:	20 Closure Approved by: QADD Date:	

ENCLOSURE 1
(Continued)

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT U.S. DEPARTMENT OF ENERGY WASHINGTON, D.C.	6 CAR NO.: <u>YMP-92-044</u> DATE: <u>6/4/92</u> SHEET: <u>2</u> OF <u>2</u> QA
CORRECTIVE ACTION REQUEST (Continuation Page)	
<p>5 Requirements (continued)</p> <ul style="list-style-type: none">b. Applicable quality assurance program elements and authorities.c. Job responsibilities and authority.*	

ENCLOSURE 1
(Continued)

CAR NO. YMP-92-044
BLOCK 6 ATTACHMENT
PAGE 1 OF 2

QMP-02-01, Revision 5 EMPLOYEE	POSITION DESCRIPTION	POSITION QUALIFICATION FORM	TRAINING ASSIGNMENT FORM	90 WORKING DAYS	VERIFICATION OF EDUCATION & EXPERIENCE
ZIMMERMAN, JUDITH E.	NO	3/23/92	3/23/92	4/23/92	11/18/91
BRANUM, KANDACE M.	NO	NO	3/23/92	4/23/92	4/20/92
HOOPHAINA, EDGAR	NO	NO	4/13/92	5/13/92	NO
JANIS, GARY J.	NO	NO	3/23/92	4/23/92	3/24/92
MOORE, SANDRA L.	NO	NO	5/4/92	6/1/92	NO
NUSBAUM, MARYANN C.	NO	NO	3/18/92	4/23/92	3/18/92
TATE, BRYAN	NO	NO	3/24/92	4/23/92	NO

QMP-02-01, Revision 5 EMPLOYEE	PROJECT OVERVIEW	QA INDOCTRINATION	SAFETY & HEALTH	DOE ORDER 5000.3A
ZIMMERMAN, JUDITH E.	NO	7/25/91	NO	NO
BRANUM, KANDACE M.	3/28/91	3/28/91	3/28/91	3/28/92
HOOPHAINA, EDGAR	NO	NO	NO	NO
JANIS, GARY J.	7/31/90	7/31/90	NO	9/12/90
MOORE, SANDRA L.	NO	6/12/91	NO	NO
NUSBAUM, MARYANN C.	5/21/92	5/21/92	5/21/92	5/21/92
TATE, BRYAN	9/12/90	9/12/90	9/12/90	9/12/90

ENCLOSURE 1
(Continued)

CAR NO. YMP-92-044
BLOCK 6 ATTACHMENT
PAGE 2 OF 2

CMP-02-01, Revision 8 EMPLOYEE	AP-1.3 R3/CH2	AP-1.6Q R5	AP-1.16 R0/CH1	AP-1.17Q R1/CH1	AP-1.18Q R0	AP-1.3Q R4/CH2	AP-1.6Q R0/CH1	AP-6.1Q R3	CMP-02-01 R3	CMP-03-08 R3/CH2	CMP-05-04 R4/CH2	CMP-17-01 R3/CH2	QARD RW-314 R4
ZIMMERMAN, JUDITH E.	3/23/92	3/23/92	3/18/92	3/23/92	3/13/92	3/23/92	3/23/92	3/23/92	3/23/92	3/23/92	3/23/92	3/18/92	N/A
BRANUM, KANDACE M.	N/A	4/20/92	N/A	4/21/92	4/22/92	N/A	N/A	4/21/92	4/22/92	N/A	4/22/92	N/A	3/23/92
HOOPELAND, EDGAR	N/A	4/20/92	N/A	4/20/92	4/22/92	N/A	N/A	4/18/92	4/23/92	N/A	4/17/92	N/A	4/21/92
JAMS, GARY J.	N/A	4/21/92	N/A	4/21/92	4/21/92	N/A	N/A	3/24/92	4/20/92	N/A	3/24/92	N/A	3/24/92
MOORE, SANDRA L.	N/A	5/4/92	N/A	5/4/92	5/4/92	N/A	N/A	5/4/92	5/5/92	N/A	5/6/92	N/A	5/5/92
NUSBAUM, MARYANN C.	N/A	3/18/92	N/A	3/18/92	4/18/92	N/A	N/A	3/18/92	3/18/92	N/A	3/17/92	N/A	3/27/92
TATE, BRYAN	N/A	4/13/92	N/A	4/13/92	4/13/92	N/A	N/A	4/13/92	4/13/92	N/A	3/30/92	N/A	3/27/92

NOTE: N/A = Not Assigned