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OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT
YUCCA MOUNTAIN QUALITY ASSURANCE DIVISION
QUALITY ASSURANCE SURVEILLANCE REPORT OF
YUCCA MOUNTAIN SITE CHARACTERIZATION PROJECT OFFICE
SURVEILLANCE NO. YMP-SR-92-027
CONDUCTED SEPTEMBER 23 THROUGH 30, 1992

SURVEILLANCE ACTIVITIES:

YUCCA MOUNTAIN SITE CHARACTERIZATION PROJECT
DOCUMENT CONTROL CENTER/DOCUMENT AND RECORDS CENTER
AND
CENTRAL RECORDS FACILITY
TRANSITION PLAN YMP/92-17

Prepared by: \(\)

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ENCLASURE

Date: 10/6/92

1.0 EXECUTIVE SUMMARY

The surveillance conducted to verify completion and implementation of the requirements of Transition Plan YMP/92-017, Revision 0, for the transition of the Document Control Center (DCC), the Document and Records Center (DRC), and the Central Records Facility (CRF), was conducted from September 23 through 30, 1992. Final verification of completion for transitioned items was scheduled for August 10, 1992, and a surveillance by the Yucca Mountain Quality Assurance Division (YMQAD) was scheduled to be initiated on or after September 20, 1992.

Technical and Management Support Services (T&MSS) and Civilian Radioactive Waste Management/Management and Operations (CRWM/M&O) completed the transition as required by the Transition Plan. DCC, CRF, and DRC implementing procedures are in place and are being effectively utilized by the M&O at Las Vegas, Nevada, and at Nevada Test Site (NTS) facilities.

No Corrective Action Requests were initiated as a result of this surveillance. One recommendation, which is not considered a deficiency, is offered for possible improvement or enhancement of Administrative Procedure (AP)-1.18Q.

2.0 SCOPE

This report contains results of the Office of Civilian Radioactive Waste Management (OCRWM) Quality Assurance (QA) Surveillance No. YMP-SR-92-027 of the M&O and T&MSS regarding the transition of the DCC, the DRC, and the CRF. The surveillance was conducted at the Yucca Mountain Site Characterization Project (YMP) facilities in Las Vegas, Nevada, and at the NTS to determine compliance with the requirements of Transition Plan YMP/92-17, Revision 0, dated May 1992.

3.0 SURVEILLANCE TEAM

The surveillance team consisted of the following personnel:

Sandra D. Bates, Quality Assurance Specialist, Surveillance Team Leader, Science Applications International Corporation (SAIC)/YMQAD

One observer, Nathaniel Hodgson, CRWM/M&O, was present on September 23, 1992.

4.0 PERSONNEL CONTACTED DURING THE SURVEILLANCE

Bowlinger, Scott K., Document Leader, CRWM/M&O Chadwick, Paul A., Division Manager, Training Department, SAIC/T&MSS Ferguson, Earl J., Supervisor Engineering Records, Raytheon Services Nevada Gandi, John G., Manager, Information Resources Management, U.S. Department of Energy Griffith, Rhonda, Document Clerk, CRWM/M&O Harper, James B., T&MSS Quality Assurance Manager, SAIC/T&MSS Helms, Ronald G., Project Management, SAIC/T&MSS Hodgson, Nathanial W., Quality Assurance Verification, CRWM/M&O Houston, Gailind A., Document Control Clerk, CRWM/M&O Jackson, Jack A., Quality Assurance Manager, CRWM/M&O Jacobson, Jo Anne P., Central Records Facility Supervisor, CRWM/M&O Justis, Judy B., Training Coordinator, CRWM/M&O Keener, Kenneth R., Document Control Supervisor, CRWM/M&O Kettell, Richard A., Quality Assurance Engineer, SAIC/T&MSS Klemens, Robert H., Quality Assurance Engineer, SAIC/T&MSS Lee, Lynda J., Program Records Center Manager, CRWM/M&O Piniol, Debra N., Document Control Coordinator, CRWM/M&O Quinnell, Kim L., Group Leader, Microfilm Center, CRWM/M&O Rixford, Carol A., Las Vegas Records Center Supervisor, CRWM/M&O Sellards, Cindy, Records Specialist, SAIC/T&MSS Walker, John M., Records Clerk II, CRWM/M&O Zimmerman, Judith E., Supervisor, Plans and Procedures, CRWM/M&O

5.0 SURVEILLANCE RESULTS

5.1 Synopsis of Surveillance

The surveillance was conducted through interviews with personnel, direct observation of operations, and verification of records. Requirements delineated in the transition plan were verified for compliance. Transition of the scope of work was evaluated to determine if responsibilities were assumed by the M&O. Staffing requirements have been met, including appointments of key personnel as delineated in the plan. Procedures have been developed to encompass all areas prescribed, and upper-tier requirements are contained in lower-tier documents. No subcontracts were outstanding at the time of the transition; a contractual agreement for records storage by T&MSS was discontinued and renewed by the M&O prior to the transition. No corrective actions by T&MSS were pending at the time of the transition. The M&O has established a training department and personnel are being trained prior to the start of work activities. Facilities and equipment have been transitioned in a timely manner and are operational.

5.2 SURVEILLANCE RESULTS

A. DOCUMENT CONTROL CENTER

The DCC operates in accordance with AP-1.5Q, and M&O Quality Administrative Procedure (QAP)-6-1.

The evaluation of compliance with requirements of the transition plan resulted in the following observations:

- 1. Start-up operations were begun by August 3, 1992, as scheduled.
- 2. Key employee positions have been filled.
- 3. Direct observation of data processing for documents requiring revision or change notices disclosed that controls are in place for adequate processing. Observation of the operation and control of notification systems that require deadlines confirmed that automatic flags are in place to assure compliance with procedures. Sample evaluation of documents already in the system confirmed that processed data conforms to requirements, and that the system is adequate for retrieval of the information.
- 4. Personnel interviewed were cognizant of the job they were expected to perform, and were conversant regarding procedures being utilized and procedures required.
- 5. Procedural review to determine impact of the revision process on DCC/DRC functions and on other documents is presently done by review of hard copies; however, a target date of early 1993 has been established by the Plans and Procedures department for development of a data base to simplify the operation and to provide better accuracy.

B. DOCUMENT AND RECORDS CENTER

The DRC operates in accordance with AP-1.18Q, AP-1.5Q, and M&O QAPs (see Section 5.3).

The DRC, located at the NTS facilities, serves as a transition point for controlled documents and records generated at the NTS and subsequently remitted to the DCC or to records facilities in Las Vegas, Nevada.

The evaluation of compliance with requirements of the transition plan resulted in the following observations:

- 1. Start-up operations were begun by August 3, 1992, as scheduled.
- Key employee positions have been filled.
- 3. Direct observation of data processing for documents requiring revision or change notices disclosed that controls are in place for adequate processing. Operation and control of notification systems that require deadlines are controlled by the DCC in Las Vegas, Nevada. Sample evaluation of documents already in the system confirmed that processed data conforms to requirements and that the system is adequate for retrieval of the information. Change Directives for documents approved by the Project Change Control Board are provided to the DRC.
- 4. One-of-a-kind records are being maintained in a 2-hour fire rated safe and contained in metal files.
- 5. Privileged access requirements are being observed.
- 6. Personnel interviewed were cognizant of the job they were expected to perform, and were conversant regarding procedures being utilized and procedures required.

C. CENTRAL RECORDS FACILITY

The CRF operates in accordance with AP-1.18Q, and M&O QAPs (see Section 5.3).

The evaluation of compliance with requirements of the transition plan resulted in the following observations:

- 1. Start-up operations were begun by August 3, 1992, as scheduled.
- 2. Key employee positions have been filled.

3. Direct observation of retrieval capabilities included a search for a Technical Directive Letter (TDL) referenced in Transition Plan YMP/92-17. It was determined that the TDL had not been submitted to the Las Vegas Records Center for processing, and consequently was not in the system. A recommendation was made regarding timely submittal of Technical Directives and other documents by Yucca Mountain Site Characterization Project Office (YMPO) personnel (see Section 6.0).

A subsequent search of the system revealed that records do exist for all documents cross-referenced to Yucca Mountain Quality Assurance Technical Directive Identification numbers, logged in hard copy.

Data system search and retrieval capabilities are in place, and documents requested were retrieved using variable identifiers.

4. Microfilm center operations were evaluated to determine if a system is in place for timely transmittal and receipt acknowledgment of microfilm to and from YMP participants. Although the system in not on a data base, it is checked weekly by microfilm center personnel to determine compliance.

Microfilm numbers were cross checked with numbers obtained from the CRF to determine that microfilm is available and readily identifiable.

D. TRAINING

Key personnel files were reviewed to determine if personnel were trained to work to procedures AP-1.5Q and M&O QAP-6-1 according to the requirements of the transition plan. One deficiency was identified and corrected during the surveillance (see Section 5.4).

Training to M&O procedures is conducted in accordance with M&O procedure QAP-2-1. Methodology outlined in QAP-2-1 is not parallel in approach to that in YMPO procedures; however, it was determined that personnel are trained to procedural requirements prior to beginning work and that instruction is conducted when procedures change.

5.3 The following documents were reviewed during the surveillance:

Quality Assurance Requirements Document, Revision 4

AP-1.5Q, Issuance and Maintenance of Controlled Documents

AP-1.18Q, Records Management: Las Vegas Record Source Responsibilities

NWMS M&O Quality Assurance Program Description

CRWMS M&O QAP-17-1, Program Records Management: Record Source Responsibilities

CRWMS M&O QAP-17-2, Program Records Management: Receipt and Handling of Program Records and Records Packages

CRWMS M&O QAP-17-3, Program Records Management: Capture System Prototype

CRWMS M&O QAP-17-4, Program Records Management: Microfilming Program Records

CRWMS M&O QAP-17-5, Program Records Management: Indexing Program Records

CRWMS M&O QAP-17-6, Program Records Management: Storage, Retrieval and Disposition of Program Records

CRWMS M&O QAP-6-1, Document Control

YMP/92-17, Revision 0, Yucca Mountain Site Characterization Project Document Control Center/Document and Records Center and Central Records Facility Transition Plan, Revision 0

The following documents were in effect prior to September 8, 1992, and were superseded by QAP-17-1 through QAP-17-6 above.

NSP-6-1, Yucca Mountain Site Office: Document and Records Center Operations

NSP-17-1, CRF Operations: Records Processing and Retrieval

NSP-17-2, CRF Operations: Records Receipt and Review

NSP-17-3, CRF Operations: Records Storage and Retrieval

5.4 Deficiencies Corrected During the Surveillance

One training record reviewed for compliance to training requirements was found to be deficient and was corrected prior to the end of the surveillance, by certification that the employee in question had completed the training.

6.0 RECOMMENDATIONS

One recommendation is offered for YMPO consideration regarding AP-1.18Q.

It was determined during the surveillance that Technical Directive number YMP:JGG-2905, dated May 8, 1992, and referenced in YMP/92-17, Revision 0, had not yet been submitted to the Las Vegas Records Center for processing. Research revealed that other technical directives, although conforming to requirements as outlined in AP-1.18Q, were not submitted in a timely manner. The Transmittal/Receipt Acknowledgment from the Las Vegas Records Center for records below was dated 9/28/92.

YMP:JGG-2905, Dated 5/8/92 RSED:TWB-1707, Dated 2/27/92 YMP:RAL-4369, Dated 5/26/92 YMP:RAL-1307, Dated 5/26/92 EDD:JMR-1582, Dated 1/30/92 EDD:JMR-1580, Dated 1/21/92

AP-1.18Q, Appendix D, states that QA records and QA records packages are to be submitted no later than 10 working days after the records or records packages have been authenticated.

Three methods of authentication are outlined in AP-1.18Q as follows: 1) stamping, initialing or signing, and dating a document, or 2) a written statement by the responsible individual or organization; or 3) issuing a document that is clearly identified as a statement by the reporting individual or organization.

The second and third methods of authentication do not require a date. The third method, furthermore, lacks a substantial means of verification or criteria for same.

It is recommended that Section 3.0, Definitions, Subsection 3.2, Authentication, be revised to include dating criteria. The definition should also be clarified so that verification of authentication can be substantiated.'