



Department of Energy
Washington, DC 20585

MARCH 30, 1994

Mr. R. L. Robertson
General Manager
CRWMS, M&O
TRW Environmental Safety Systems, Inc.
2650 Park Tower Drive, Suite 800
Vienna, VA 22180

Subject: Office of Civilian Radioactive Waste Management (OCRWM)
Quality Assurance (QA) Surveillance HQ-SR-94-04 of M&O's
implementation and effectiveness of remedial actions taken to
address deficiencies and recommendations previously identified by
OCRWM.

Dear Mr. Robertson:

Enclosed, please find the subject report that is a result of recent surveillance activity conducted by the Headquarters Quality Assurance Division (HQAD) at your facility in Vienna, Virginia. HQAD would like to express our appreciation for the level of cooperation received during the conduct of the activity.

There were no Corrective Action Requests (CARs) issued. However, three recommendations are presented by the surveillance team for consideration by the M&O Management.

If you have any questions, please contact Bob Clark at 586-1238 or Marlin Horseman at (703) 841-0043.

Sincerely,

Donald G. Horton, Director
Office of Quality Assurance

Enclosure:
Surveillance Report HQ-SR-94-04

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PDR WASTE
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PDR



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Ltr. Encl.

ADD: Ken Hooks

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NH03

cc:

T. Johnson, RW-3.1
R. Milner, RW-40
D. Shelor, RW-30
T. Wood, RW-53
S. Zimmerman, Carson City, NV
R. Loux, Carson City, NV
C. Schank, Churchill Co. NV
J. Bingham, Clark Co. NV
D. Betchel, Clark Co. NV
E. von Teisenhausen, Clark Co. NV
J. Hayes, Esmeralda Co. NV
L. Fiorenzi, Eureka Co. NV
B. Mettam, Inyo Co.
R. Michener, Inyo Co.
G. Derby, Lander Co.
J. Pitts, Lincoln Co.
M. Baughman, Lincoln Co.
V. Poe, Mineral Co.
L. Bradshaw, Nye Co.
P. Niedzielski-Eichner, Nye Co.
K. Hooks, NRC
R. Morgan, M&O, LV
R. Ruth, M&O, Vienna
L. Foust, M&O, NV
F. Mariani, White Pine Co.
M. Horseman, QATSS-HQ

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 Surveillance No. HQ-SR-94-04

rec'd
3/23/94

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

QUALITY ASSURANCE SURVEILLANCE RECORD

¹ ORGANIZATION/LOCATION: M&O/Wienna, VA	² SUBJECT: Implementation and Effectiveness of Remedial Actions and Recommendations	³ DATE: 3/8-10/94
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⁴SURVEILLANCE OBJECTIVE:
 To verify that Remedial Actions continue to be effective for identified deficient areas of QA Program.

⁵ SURVEILLANCE SCOPE: Surveillance evaluation to include: Evaluation of the effectiveness of remedial actions taken to address identified deficiencies, and areas identified for improvement by OCRWM initiated recommendations.	⁶ SURVEILLANCE TEAM: Team Leader: Walt Coutier Additional Team Members: Dennis Threatt Robert Holliday Norm Frank Richard Peck
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⁷ PREPARED BY: <u>Walter R. Coutier</u> Walter R. Coutier Surveillance Team Leader Date: <u>2/17/94</u>	⁸ CONCURRENCE: for revised SRDs <u>R.W. Clef</u> QA Division Director Date: <u>3/3/94</u>
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SURVEILLANCE RESULTS

⁹BASIS OF EVALUATION / DESCRIPTION OF OBSERVATIONS:

 Previous OCRWM audit, surveillance, and observation reports, and M&O applicable procedures.

 See pages 2 through 9.

¹⁰ SURVEILLANCE CONCLUSIONS:

 See page 10.

¹¹ COMPLETED BY: <u>Walter R. Coutier</u> Surveillance Team Leader Date: <u>3/23/94</u>	¹² APPROVED BY: <u>R.W. Clef</u> QA Division Director Date: <u>3/30/94</u>
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9 BASIS OF EVALUATION/DESCRIPTION OF OBSERVATIONS (Continuation):

Surveillance HQ-SR-94-04 was conducted using checklists designed to evaluate: the effectiveness of remedial actions taken to address deficiencies identified and corrected during prior audits and surveillances; and actions taken regarding recommendations made by OCRWM during prior audits, surveillances, and observations (1991 through December 1993). Members of the surveillance team concentrated on procedural compliance in the areas where deficiencies were identified and recommendations were made as well as evaluating actions taken regarding deficiencies and recommendations to determine if the actions continue to be effective.

PERSONNEL CONTACTED

The personnel contacted during the course of the surveillance are listed in Attachment 1.

SURVEILLANCE RESULTS

The following is a summary by QA program element of the activities evaluated.

QA Program Element 1, Organization

One previous recommendation from surveillance report HQ-SR-92-01 concerned the lack of documentation of the interface with Duke Power Co., Technical Services Division (TSD) in the QA program. This recommendation is no longer applicable because TSD is no longer involved with the program. All work previously done by TSD is now done under the M&O and described in the QA program.

A second recommendation from surveillance report HQ-SR-93-03 suggested that the QRB secretary record the attending board representatives in the QRB meeting minutes, especially when the QRB has accepted procedures. The QRB secretary is now recording all attendees (members, alternates, and other attendees).

QA Program Element 2, QA Program

Audit report HQ-93-03, surveillance reports HQ-SR-91-12, HQ-SR-92-01, HQ-SR-92-04, HQ-SR-93-03, HQ-SR-93-05, and HQ-SR-93-07, and observation reports 93-VIA-01 and 93-ST5-01 previously identified nine recommendations and four observations for M&O consideration. In addition, there was one deficiency corrected during audit HQ-93-03 concerning the contents of QA records packages associated with procedures. Each of these areas was examined. One recommendation in the area of training is presented for consideration. A training data base file was corrected during the surveillance to reflect a reading/self study record that was missing in the data base.

9 BASIS OF EVALUATION/DESCRIPTION OF OBSERVATIONS (Continuation):

QA Program Element 3, Design Control

For Element 3, the evaluation was based on one deficiency and ten recommendations.

One recommendation was made during Surveillance HQ-SR-92-04 regarding complete incorporation of comments made during the technical document review process. An evaluation of the technical document review process for the revision of System Requirements Documents (SRDs) indicated that a new step has been added to establish an Issues List to document and track review comments for future incorporation when the comments cannot be adequately incorporated into the current revision. This action was determined to be effective in addressing the recommendation.

One recommendation was made during Surveillance HQ-SR-93-05 regarding the need to control changes in requirements to ensure proper update of requirements documents during the design development process. This recommendation was also addressed by the establishment of an Issues List to document and track changes to requirements to ensure proper incorporation into the technical document during future revisions. This action was determined to be effective in addressing the recommendation.

One deficiency was corrected during Surveillance HQ-SR-93-07 regarding the complete implementation of actions required by Baseline Change Proposals. Specifically, BCP 00-93-0002 was reviewed to ensure all actions were completed as required. This BCP has been completed and is currently in the process of closure approval. Additionally, BCP 00-94-0001 was reviewed to determine if actions required were being tracked and completed as specified. The actions to incorporate requirements for Multipurpose Casks into the SRDs are currently being addressed in revisions to the SRDs as verified by a review of a sample of revised SRDs currently going through the approval process. It was determined that the remedial action taken to address the deficiency continues to be effective in that actions to complete BCPs are being tracked and completed as required.

Five recommendations were made during Surveillance HQ-SR-93-07. A recommendation was made regarding consistent use of acronyms identifying unqualified or unavailable data. A review of the TDPP for the Revision of SRDs and a sample of SRD revisions indicated a consistent use of the acronyms. Action taken to address the recommendation was determined to be effective.

A recommendation was made to reference the source for requirements to the next higher level document rather than the regulatory source. Through a review of the sample of SRD revisions, it was determined that the requirements reference both the regulatory

9 BASIS OF EVALUATION/DESCRIPTION OF OBSERVATIONS (Continuation):

source and the next higher level technical document. This process was found to be effective.

A recommendation was made to systematically review the cross-reference between the WMSR Volume IV and the MGDS-RD to identify and correct any discrepancies. In reviewing the revised cross-reference, it was determined that the cross-reference was adequately reviewed and corrected. Actions to address this recommendation were determined to be effective.

A recommendation was made to better identify "derived" requirements by indicating the design source. A review of the TDPP for the Revision of SRDs determined that this recommendation has been addressed. A review of a sample of SRD revisions indicated the action had been implemented only in sections where the SRD had been revised to address the MPC. Through discussion with the M&O System Engineer responsible for the MGDS-RD, it was determined that the change will be fully implemented with the next revision of the SRDs. These actions were determined to adequately address the recommendation and, where implemented, were determined to be effective.

A recommendation was made to more consistently reference regulatory requirements when similar requirements exist in both the Code of Federal Regulations (CFR) and the United States Code (USC). A review of SRD revisions indicated no inconsistencies. This recommendation was determined to be effectively implemented.

QA Program Element 4, Procurement Document Control

Two previous recommendations from audit report HQ-93-03 were examined. Action had been taken on the first, to revise QAP 3.8 to accurately depict the sequence of the process. Although no action had been taken on the second, to include Memorandum Purchase Orders (MPOs) and Task Orders in the definition of QAP 4-1. These Task Orders are being controlled in accordance with QAP 4-1 as procurement documents, including a review by the quality department. The recommendation to include MPOs and Task Orders in the definition of procurement documents is still offered for the M&O to consider.

QA Program Element 5, Implementing Documents

The evaluation of Element 5 was based on three recommendations. One observation made during Surveillance HQ-SR-92-01 addressing concerns related to the preparation, review, approval, and control of QAIPs was no longer applicable since the M&O is no longer using QAIPs.

9 BASIS OF EVALUATION/DESCRIPTION OF OBSERVATIONS (Continuation):

One recommendation was made during Audit HQ-93-03 to re-evaluate the requirements for plans with respect to the level of controls required for various plans. A review of the M&O procedures indicated that plans are currently used for quality affecting procurements and for the preparation of technical documents. Both types of plans are subject to the controls of the QARD and these controls were determined to be effectively implemented.

One recommendation was made during Surveillance HQ-SR-92-04 to consider placing control numbers or revision dates on individual pages of future TDPPs. A review of the TDPP for the Revision of SRDs and a review of the sample of SRDs indicated that the current practice is to include the technical document title, revision, and page number on the header of each page. This was determined to be an effective practice to maintain control of the content of the technical documents.

One recommendation was made during Surveillance HQ-SR-93-03 to have responsible managers approve QAPs related to their functional activity in order to further enhance the ownership of the QAPs. As of this date, this recommendation has not been implemented by the M&O. The surveillance team, however, did not identify any new concerns in this area. This recommendation is still offered for consideration by the M&O management.

QA Program Element 6, Document Control

For QA Program Element 6, the evaluation was based on several recommendations.

Six recommendations were made during Surveillance HQ-SR-92-09. One recommendation was made to assign review criteria to reviewers with expertise most appropriate to the review criteria. Based on review of the Technical Document Review Package (TDRP) for the CRD, revision 1, the assignment of review criteria was matched to the expertise of the reviewers as indicated in the matrix of reviewers. This action was determined to be effectively addressed in the recommendation.

A recommendation was made to have document preparers review comments to upper level documents to ensure that appropriate changes flow down into the lower level documents. The M&O has established a method, through the use of Issues Lists, to ensure that changes made to documents that impact other documents are tracked for incorporation into the next revision of the affected document. This action was determined to effectively address the recommendation.

9 BASIS OF EVALUATION/DESCRIPTION OF OBSERVATIONS (Continuation):

A recommendation was made concerning the use of "Kick-off Briefings" to initiate the document review process and ensure a more adequate review. A review of the information presented at the meeting indicated that all pertinent topics were addressed. The use of "Kick-off Briefings" was determined to be effective.

One recommendation was made regarding the identification and tracking of the appropriate revision levels for source input documents. The Technical Document Preparation Plan (TDPP) for the Revision of SRDs, Section 5.2.2 addresses the applicable revisions as the document issue in effect on the date of approval of the SRD, as specified in the Technical Document Input Control forms. This was determined to be effective in addressing this recommendation.

A recommendation was made regarding the time-frame established for document reviews. The increased time-frame in QAP-5-1,R2,P01 (approximately twenty working days) was made in consideration of this recommendation. It was found that in accordance with QAP-3-1, para. 5.2.2, the Technical Document Review Package (TDRP) memorandum provided to the reviewers establishes the time for review. The Program Cost and Schedule Baseline for 94/95 and an Internal Implementation Schedule for revision 2 of the CRD/SRDs (in draft) for the period March-December 1994 are kept current and used to ensure that activities are scheduled so that no conflict exists to impact the reviewer. These actions were determined to be effective in addressing the recommendation.

One recommendation was made regarding the provision of a redline/strikeout draft of the final document to each reviewer to allow reviewers to see how comments were incorporated. Although this practice is not addressed by procedure, a review of the TDRP for the CRD, revision 1 review indicated that this method is used for the preparation and revision of technical documents. Also, a redlined draft was provided to the surveillance team as evidence that this method was used for QAP-5-1 comment resolution and acceptance activities. The process was found to be effectively implemented

Five recommendations were made during Surveillance HQ-SR-93-03. One recommendation was made to consider placing an identifier (such as a "Q") on documents which are subject to the requirements of the OCRWM QARD. The team reviewed several documents with quality affecting activities which were identified in accordance with QAP-17-1. Records were identified with "QA" in the upper right-hand corner as required by procedure. This requirement was determined to be effectively implemented and adequately addressed the recommendation.

9 BASIS OF EVALUATION/DESCRIPTION OF OBSERVATIONS (Continuation):

Another recommendation was made to improve the procedure review process by providing more related documentation. In review and evaluation of the PRR package, it was found that for the Kick-off meeting, a handout and discussion explaining the required changes, related CARs and QARD had been provided to the reviewers. The individual responsible for the Requirements Traceability Network provided a discussion and demonstrated the adequacy of the RTN in tracking QARD requirements and the status. The information provided was determined to effectively address the recommendation.

Another recommendation was made regarding the QRB process in defining specific actions, responsibilities, and issues to be submitted. A review of the QRB Charter indicated that it sets the duties and administrative details for conducting QRB meetings. Although the recommendation has not been specifically addressed, it was determined that the QRB meetings continue to be effective.

Another recommendation was made regarding a mechanism for changing the category of a comment (either downgrade or upgrade). This recommendation has not been addressed by the M&O, however evaluation of the PRR process was determined by the surveillance team to be effective in that both the mandatory and non-mandatory comments are being adequately resolved. A recommendation was made regarding the moving of the QARD verification process upstream to provide more interface with the review process. Through review of the PRR record package for a QAP revision, it was determined that this recommendation has been effectively implemented.

Surveillance HQ-SR-93-05 identified a recommendation that during future reviews, reviewer expertise be identified more specifically to the technical content of the document to ensure all areas are adequately addressed. A complete TDRP was provided to the surveillance team by the System Engineer responsible for the CRD preparations. The TDRP contained a matrix of the document reviewers, their areas of expertise, and the review criteria assigned. This was determined to be effective in the assignment of document reviewers based on their expertise.

A recommendation was previously identified during Surveillance HQ-SR-93-07 regarding the responsibility for the quality of the final document after review comments have been incorporated. Through review of the TDRP for the revision of the CRD, it was determined that the review comments were effectively addressed by the document preparers and the quality of the final document has been effectively maintained by the preparers.

9 BASIS OF EVALUATION/DESCRIPTION OF OBSERVATIONS (Continuation):

QA Program Element 16, Corrective Action

An evaluation was made of the process for identifying deficiencies through the Corrective Action process. This was a previous observation from HQ-SR-92-01 in which the M&O had utilized the DN system to identify a deficiency because the CAR procedure had not been developed at that time. A review of the CAR status log, weekly CAR action status reports, memos, and seven CARs confirmed that the CAR system is effectively being used to document deficiencies identified during the M&O QA program implementation.

QA Program Element 17, QA Records

Two previous recommendations from audit HQ-93-03 identified audit record packages as having mixed records for different audits and a lack of understanding of terminology for "authentication", "validation", and "completed" associated with QA records. Additionally, surveillance HQ-SR-93-07 had identified a correction that was made to include a requirement source document in a record package during the surveillance.

QA record packages for six audits and three surveillances were reviewed for consistent content and accuracy of referenced records. There was no mixing of records noted. However, one audit package (94-VIA-02) required concurrence of changes made to checklist references and an incorrect audit number in the executive summary. The entries were corrected by obtaining the initials and dates of the responsible personnel and were verified during the surveillance. There were no indications that unique requirement source documents were missing or necessary in the record packages reviewed.

There remains a lack of understanding concerning "authentication" and "validation" of QA record packages as noted in the need to revise audit record package 94-VIA-02 for concurrence of changes. The record package had been "validated" as correct, complete, and accurate. However, there were ten corrections to the planning checklist references noted at the time of validation without the proper signatures and dates. The changes did not reflect an impact on the scope or quality of the conduct of the audit (see recommendations and items corrected during the surveillance).

QA Program Element 18, Audits

Observation reports OBS-94-VIA-01, OBS 93-STS-01, and surveillance report 94-VIA-01 previously identified two recommendations and four observations associated with the audit process, including checklists, schedules, personnel qualifications, and attendance by management at daily briefings.

9 BASIS OF EVALUATION/DESCRIPTION OF OBSERVATIONS (Continuation):

In addition to the review of six audit record packages and three surveillance record packages; a sampling of the M&O audit logs, and schedules were reviewed. Also the qualification records of nine M&O auditors and lead auditors were reviewed. The audit/surveillance checklists appeared to be consistent with the planned coverage for the activities being evaluated although enhancements could be made regarding the tracking, approval process; and the identification of objective evidence. (see recommendations). Previous issues associated with the timeliness of the qualification/certification of audit personnel prior to the audit process appear to be resolved at this time. Two personnel noted in the record files are no longer associated with the project. Representation of management at audit debriefing meetings appeared to be appropriate, although "senior" levels of management attending daily debriefing meetings could not be verified.

A recommendation concerning the lack of consistency between audit schedules and plans was identified in Observation Report 93-VIA-01. Audit plans and schedules reviewed were consistent with the scope of activities to be evaluated. The schedules are presently being revised for the quarterly issue to address recent changes in scheduled activities. This recommendation was effectively being implemented.

The observation (OBS 93-VIA-01) regarding completion of checklists without omissions, errors, and sufficient evidence could not be verified since completed checklists are not retained as a QA record by the M&O. (Refer to CAR-94-006 for deficiencies associated with objective evidence inadequacies.)

QA Program Element 19, Software

A recommendation from audit report HQ-93-03 that "emergency meetings" of the Software Configuration Control Board (SCCB) be identified as such in meeting minutes is no longer applicable because a revision to the quality assurance procedure deleted "emergency meetings". Two areas that were corrected during the performance of audit report HQ-93-03 were examined and no additional deficiencies were found. One area concerned the submittal of software configuration item identifiers to the Configuration Management organization. The second concerned the deletion of the reference to the Configuration Management Plan from Paragraph 3.7 of the M&O QAPD.

LIST OF ATTACHMENTS

Attachment 1: List of personnel contacted

Attachment 2: List of Objective Evidence Reviewed

10 SURVEILLANCE CONCLUSIONS:

The OCRWM surveillance team determined that remedial actions taken to correct identified deficiencies continue to be effective and actions, when taken, regarding recommendations provided by OCRWM were appropriate and effective in addressing areas of concern. No Corrective Action Requests (CARs) were issued. The surveillance team offered three recommendations for consideration by the M&O management. The M&O initiated an internal CAR to address the late issuance of an audit report that was identified by the surveillance team and several records were corrected during the course of the surveillance.

ITEMS CORRECTED DURING SURVEILLANCE

1. The training data base was corrected to reflect a reading/self study record located in a training file but missing in the data base.
2. An audit record package was corrected to reflect concurrence of changes made to references on the audit planning checklist and the executive summary of the report.
3. The M&O initiated an internal CAR to address an audit report that was issued beyond their program commitment of thirty days from the audit exit date.

RECOMMENDATIONS

The following recommendations are presented by the surveillance team for consideration by the M&O management:

1. Recommend that training handouts/overheads and content provided during briefings be cross referenced to CAR, audit, surveillance, or other documents that influenced the content of the briefing, and retained as a record. Personnel should be made aware of the documents available to specify and request additional training, and there should be consideration given to forwarding training records to the Training Department in a more timely manner. Training on QAP Philosophy and the QRB Charter should be updated and repeated for new QRB members.
2. Checklists for audits/surveillances should be identified with the total page count and date of issue/approval to ensure tracking of all required pages and that evidence of approvals are obtained prior to conduct of the audit/surveillance.
3. The process of QA record "authentication" and "validation" should be further defined and clarified to address the responsibilities activities necessary for the M&O to ensure that QA records are: complete, accurate, correct, and protected.

ATTACHMENT 1

Personnel Contacted During Surveillance

<u>Name</u>	<u>Organization</u>	<u>Title</u>
J. Afelbil	Local Records Center	Records Analyst
B. Bernhardt	Purchasing	Procurement Mgr.
J. Cassidy	M&O QA	Qual. Eng. Mgr.
S. Cherkofsky	M&O	System Eng.
P. Chomentowski	M&O QA	QA Engineer
E. Chulick	Training	Training Mgr.
H. Dameron	M&O QA	Sr. Tech. Specialist
W. Farmer	M&O QA	Auditor
M. Franks	M&O QA	QA Tech. Spec. I
A. Jenkins	M&O	System Eng.
C. Kelly	Training	Records Spec.
G. Kenner	M&O QA	Audit Specialist
W. Law	M&O	System Eng.
K. Leonardo	M&O	Sr. Data Analyst
J. Lennon	Central Records Facility	Records Analyst
L. Lindsay	M&O	System Eng.
P. Lovett	M&O	System Eng.
A. McHenry	Central Records Facility	Records Analyst
R. Morgan	M&O QA	QA Manager
D. Nolan	Trans. Dept.	Supervisor
J. Penhacker	M&O	CM Manager
L. Rickertsen	M&O	Sr. Staff
R. Robertson	M&O	General Manager
V. Sauers	DB	SCM Mgr.
R. Tagg	Contracts	Contract Admin.
J. Tierney	M&O QA	QA SPT. Mgr.
P. Viggiano	M&O QA	QA Specialist
J. Watson	Training	Training Supvr.
P. White	M&O QA	QA Engineer
M. Williams	M&O	Sr. CM Specialist

ATTACHMENT 2

List of Objective Evidence Reviewed During the Surveillance

<u>Document Title</u>	<u>Date/Revision</u>
OCRWM Audit report HQ-93-03	3/25/93
OCRWM Surveillance reports:	
HQ-SR-91-017	11/27/91
HQ-SR-92-001	11/27/91
HQ-SR-92-004	6/25/92
HQ-SR-92-009	2/9/93
HQ-SR-92-012	5/25/93
HQ-SR-93-003	8/13/93
HQ-SR-93-005	10/14/93
HQ-SR-93-007	10/28/93
HQ-SR-94-001	12/6/93
OCRWM Observation reports:	
93-ST5-01	1/18/93
93-VIA-01	10/19/937
93-NSA-02	2/2/93
94-VIA-01	1/12/94
QRB Minutes #36	2/1/94
QRB Minutes #34	1/5/94
QRB Minutes #38	2/16/94
QRB Membership List	12/15/93
IOM E. Chulick	2/18/94
Software Baseline, ARMS 1.1.0	2/18/94
Software Baseline, EMC 1.1	7/1/93
CAR-92-C-032	11/1/93
Trng. Attend. QAP-2-2, Rev. 2	1/11/94
Trng. Rec. Checklist, QAP-1-0	1/5/94
Trng. Rec. Checklist, QAP-2-6,R2	3/1/94
Training File, B. Bernhardt	N/A
Training File, R. Morgan	N/A
Training File, C. Tankersley	N/A
Training File, A. Tayfun	N/A
Training File, J. Watson	N/A
Training File, J. Clark	N/A
Training File, M. Shepherd	N/A
ESF Title III Design Readiness Review	9/92
Training Briefing Handouts (presented in LV)	2/16/94

ATTACHMENT 2 (Continuation)

<u>Document Title</u>	<u>Date/Revision</u>
Records Package 93-12-0272	N/A
Records Package 93-12-0289	N/A
Records Package 93-11-0040	N/A
Records Package 93-10-0231	N/A
Records Package 93-12-0290	N/A
Records Package 94-01-0020	N/A
Records Package QAP-1-1, R2	N/A
Records Package QAP-3-6, R2	N/A
MPO DX1965RT3X, Task Order 9, R1-SNL	N/A
MPO DX1965RT3X, Task Order 13-SNL	N/A
Audit Record Package 93-NSA-01	12/3/92
Audit Record Package 94-VIA-02	2/22/94
Audit Record Package 94-VIA-01	2/22/94
Audit Record Package 93-VIA-01	10/22/93
Audit Record Package 93-MRA-01	10/11/93
Audit Record Package 93-NUA-01	10/8/93
Auditor Qualification, P. Chomentowski	9/10/92
Auditor Qualification, W. Farmer	1/30/92
Auditor Qualification, C. Jennings	9/20/93
Auditor Qualification, G. Keener	1/13/94
Auditor Qualification, P. Viggiano	9/16/93
Auditor Qualification, P. Horsman	2/20/92
Auditor Qualification, R. Justice	1/30/92
Auditor Qualification, M. Collins	9/16/93
Tech. Expert Qualification, M. Bali	7/7/93
Surveillance Record Package 93-MNS-01	10/8/93
Surveillance Record Package 94-VIS-01	2/7/94
Surveillance Record Package 94-MRS-01	2/22/94
Audit Log	1/10/94
Audit Log	4/29/93
Audit Log	4/19/93
Audit Schedule	1/12/94
Audit Schedule	10/18/93
Audit Schedule	8/3/93
CAR Status Report	3/8/94
Weekly CAR Action Report	3/3/94
CAR Briefs Weekly Report	3/3/94
CAR Report to Contracts	3/3/94

ATTACHMENT 2 (Continuation)

<u>Document Title</u>	<u>Date/Revision</u>
CAR Report to Operations	3/3/94
CAR Report to Quality Assurance	3/3/94
CAR 94-QV-C-006	2/8/94
CAR 94-QV-C-011	1/25/94
CAR 94-QV-C-012	2/7/94
CAR 94-QV-C-043	5/28/93
CAR 94-QV-C-039	4/29/93
CAR 94-QV-C-040	4/29/93
CAR 94-QV-C-031	10/1/92
Memo R. Ruth to Mgmt. I & II	1/28/94
Monthly CAR Status Summary	2/9/94
MGDS-RD Issues List	3/4/94, R1
TDPP for the revisions of SRDs	10/14/93, R2
CRD	R1MGDS-RDR1
Trans-SRD	2/94, R1
Interface Control Working Group Charter	1/29/93, R0
VA.SE.GAC.10/93.458	10/1/93
PSR-DW and WMSR to MGDS-RD	10/1/93, R0
QAP-2-0	3/1/94, R1, PO1
QAP-3-1	12/1/93, R4, PO1
QAP-3-4	10/20/93, R1, PO1
QAP-3-5	1/13/94, R4, PO3
QAP-4-1	10/30/93, R2
QAP-5-1	11/30/93, R2, PO2
QAP-5-2	6/18/93, R0, PO1
QAP-7-1	10/30/93, R2