

**U.S DEPARTMENT OF ENERGY
OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT
OFFICE OF QUALITY ASSURANCE**

**AUDIT REPORT
OF THE
CRWMS M&O
VIENNA,VA**

**AUDIT NUMBER HQ-ARP-95-02
NOVEMBER 15-18, 1994**

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Date: 12/12/94

Approved By: R. W. Horton
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Director
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Date: 1/17/95

1.0 EXECUTIVE SUMMARY

As a result of the Quality Assurance Performance Based Audit (PBA) HQ-ARP-95-02, the audit team determined that the CRWMS Management & Operating (M&O) Contractor implementation of the process for corrective action was marginal. The evaluation of the process implementation effectiveness, for the specific areas reviewed, was based on one Corrective Action Request (CAR) written on the corrective action process and twelve deficiencies, requiring only remedial action which were corrected during the audit. Also, four recommendations were identified for M&O management consideration. The deficiencies and recommendations are described in Section 5 of this report.

The audit team determined that the M&O has made progress since the previous audit. This is especially demonstrated by the M&O's improvement in identifying problem areas. The audit team encourages the M&O to rigorously implement their corrective action program to eliminate the identified problems. In addition, the audit team recommends that problems identified at one location continue to be evaluated to assure that effective corrective actions at all locations are considered and appropriately implemented.

2.0 SCOPE

The audit was conducted to evaluate the effectiveness of the CRWMS M&O QA Program as described in the Quality Assurance Requirements and Description with regard to the M&O corrective action process.

The processes/activities evaluated during the audit, in accordance with the approved Audit Plan, were as follows:

1. Identification
2. Evaluation
3. Corrective action
4. Verification

Requirements were drawn from DOE/RW-0333P, *Quality Assurance Requirements and Description* document (QARD), Revision 1, and the M&O implementing Quality Administrative Procedures (QAPs).

3.0 AUDIT TEAM AND OBSERVERS

The following is a list of audit team members, their assigned areas of responsibility, and observers:

<u>NAME</u>	<u>ORGANIZATION</u>	<u>PROCESS ELEMENT</u>
AUDITORS		
Walter Coutier	QATSS	Audit Team Leader
Norm Frank	QATSS	PBA Processes 2, 3
Vance Cannaday	QATSS	PBA Process 1
Gary Wood	QATSS	PBA Processes 3, 4

OBSERVERS

Englebrecht von Tiesenhausen, Clark County, NV.

4.0 AUDIT MEETINGS AND PERSONNEL CONTACTED

A preaudit meeting was held at the M&O office in Vienna, VA on November 15, 1994. A daily debriefing and status meeting was held with M&O management and staff to discuss issues and potential deficiencies. The audit was concluded with a postaudit meeting held at the M&O office in Vienna, VA on November 18, 1994. Personnel contacted during the audit are listed in Attachment 1. The list also identifies those who attended the preaudit and postaudit meetings.

5.0 SUMMARY OF AUDIT RESULTS

5.1 Program Effectiveness

As a result of the performance-based evaluation, the overall effectiveness of the M&O process for corrective action is considered to be marginal, for the specific areas reviewed, due to the deficiencies identified in CAR HQ-95-003 and deficiencies corrected during the audit. These included the lack of: adequate implementation of effective corrective action, adequate evaluation of deficiency impact, adequate objective evidence of justification for closure of CARs, and adequate verification of implementation of corrective action. The process for M&O corrective action requires improved controls in these areas to ensure effective implementation.

5.2 Stop Work or Immediate Corrective Actions Taken

There were no Stop Work Orders, immediate corrective actions, or related additional items resulting from this audit.

5.3 QA Program Audit Activities

The details of the audit evaluation along with objective evidence reviewed are contained within the audit checklists. The checklists are processed as non-permanent QA Records.

A summary table of audit results is provided in Attachment 2.

5.4 Technical Activities

The audit was conducted to evaluate the effectiveness of the corrective action process and activities. The audit team did not evaluate any technical activities.

5.5 Summary of Deficiencies

The audit team identified one deficiency during the audit for which one CAR has been issued. Twelve additional deficiencies were identified and corrected prior to the postaudit meeting.

Deficiencies documented on a CAR and those corrected during the audit are detailed below.

5.5.1 Corrective Action Requests (CARs)

As a result of the audit, the following CAR was issued:

CAR HQ-95-003

The corrective action process is not always being adequately implemented in the areas of evaluation of deficiency impact, objective evidence for justification of CAR closures, and verification of the implementation of corrective actions.

5.5.2 Deficiencies Corrected During The Audit (CDA)

Deficiencies which are considered isolated in nature and only require remedial action may be corrected during the audit.

1. Five records pagination discrepancies noted during the audit were corrected by the record source either through notation on paper copies or by submittal of a supplemental records package.
 - Tracking number 94-IP-0024, 10/25/94, CIS Phase 2 Version 1.0.
 - Tracking number 94-IP-0024, 9/21/94, CIS Phase 2 Version 1.0.
 - CAR 93-QV-C-089 Table of Contents.
 - CAR 93-QV-C-084 Table of Contents.
 - CAR 93-QV-C-087 Table of Contents.
2. Four entries in the 11/3/94 CAR Status Log were corrected in the 11/17/94 CAR Status Log:
 - CAR 94-QV-C-001.
 - CAR 94-QV-C-002.
 - CAR 94-QV-C-084.
 - CAR 93-QV-C-083.
3. Three discrepancies in two CAR record packages were corrected by submitting supplemental records packages for each CAR providing the justification for closure:
 - CAR 94-QV-C-016.
 - CAR 93-QV-C-083.

5.5.3 Follow-up on previously identified CARs

Issues regarding the corrective action process identified by CAR HQ-94-008 (open) were investigated. Repetitive conditions of the same issues were noted during this audit, see CAR HQ-95-003.

6.0 RECOMMENDATIONS

The following recommendations resulted from the audit and are presented for consideration by M&O management.

1. There is no written standard for pagination of records sent to the LRC. The Records Package Worksheet used to check records packages at the LRC does not include a check of pagination. This has resulted in a variety of methods used to paginate records. A standard method needs to be specified for, and used by, personnel handling records.
2. Although the recent entries in the CAR Status Log are correct, there were some problems identified and corrected concerning old entries. As CARs are processed and closed, the CAR Status Log should be checked and corrections made where warranted.
3. Revised or supplemental pages to CARs should be identified as revised or supplemental pages and should contain a date to clarify when they were revised or added.
4. Continue to emphasize that extension requests should be made as soon as it is known that the due date will be missed. Status log and weekly status reports provide ample forewarning of a need for extensions. It appears that acceptance of the extensions is sometimes forced because of the lateness of the request.

7.0 LIST OF ATTACHMENTS

Attachment 1: Personnel Contacted During the Audit
Attachment 2: Summary Table of Audit Results

ATTACHMENT 1

PERSONNEL CONTACTED DURING THE AUDIT

NAME	TITLE	CONTACT	MEETINGS	
			PRE	POST
V. Cannaday	Auditor		x	x
J. Cassidy	Quality Engineering Manager	x	x	x
W. Coutier	Audit Team Leader		x	x
M. Donovan	QA Specialist	x		
N. Frank	Auditor		x	x
D. Franks	QA Audits Manager	x	x	x
M. Franks	Tech. Spec. I	x	x	x
R. Godman	Assist. Gen. Mgr.	x		x
V. Harris	QA Sr. Staff Secretary			x
M. Horseman	QATSS Audit Lead		x	
G. Keener	QA Audit Specialist	x	x	
C. Kelly	Training Records Specialist	x		x
A. McHenry	Records Analyst	x		
R. Morgan	Vienna QA Manager	x	x	x
R. Ruth	M&O QA Manager		x	
P. Schlereth	Sr. QA Engineer	x	x	x
M. Shepherd	Vienna Records Center Manager	x		
V. Skrinak	IMS Manager		x	
A. Tayfun	Records Manager	x		
J. Tierney	Quality Engineering Support Manager	x	x	x
P. Viggiano	CAR Coordinator	x	x	
E. von Tiesenhausen	Observer	x		
J. Watson	Training Supervisor	x		x
T. White	QA Specialist	x		
G. Wood	Auditor		x	x

**ATTACHMENT 2
SUMMARY TABLE OF AUDIT RESULTS**

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AUDIT HQ-ARP-95-02 DETAIL SUMMARY

ELEMENT	PROCESS STEP	DETAILS (Checklist)	CARs	CDA	RECOMMEND	ADEQUACY	COMPLIANCE	EFFECTIVE
PERFORMANCE BASED								
M&O	1. IDENTIFICATION	pgs. 1-4	HQ-95-003	4	1	N	N	MARGINAL
CORRECTIVE	2. EVALUATION	pgs. 1-3	HQ-95-003	2	1	N	N	MARGINAL
ACTION	3. CORRECTIVE ACTION	pgs. 1-5	HQ-95-003	2	N	N	N	MARGINAL
PROCESS	4. VERIFICATION	pgs. 1-10	HQ-95-003	4	2	N	N	MARGINAL
TOTAL	ADEQUATE CONTROL PROCESS	22 pages	1	12	4			MARGINAL

CARs Corrective Action Requests
 CDA Corrected During Audit
 RECOMMEND Recommendations
 ADEQUACY .. Requirements in Procedures
 COMPLIANCE .. Procedures Implemented
 EFFECTIVE .. Effectiveness of Process or Activity
 TOTAL Overall Summary of Audit Results
 N None/Not Applicable