

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

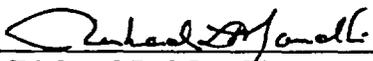
SUPPLIER SURVEY REPORT OQA-SFE-97-005

OF

PIERCE LEAHY ARCHIVES

LAS VEGAS, NEVADA

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ENCLOSURE

## 1.0 EXECUTIVE SUMMARY

As a result of the survey, it was noted that some responsibilities for implementation of the Quality Assurance (QA) requirements have been assumed by the Civilian Radioactive Waste Management System Management & Operating Contractor (CRWMS M&O). The responsibilities assumed by the CRWMS M&O include implementation of QAP 2-1, QAP 2-2, QAP 6-1 and Office of Civilian Radioactive Waste Management (OCRWM) Administrative Procedure 16.1Q.

The results of the supplier survey of Pierce Leahy Archives and CRWMS M&O responsibilities revealed inadequate conditions resulting in several recommendations related to Pierce Leahy Archives' implementation of CRWMS M&O Implementing Line Procedure NLP-17-5, Revision 3, "Storage and Retrieval of QA Records by a Records Storage Service Supplier," and Attachment I to CRWMS M&O Procedure QAP-17-6, Revision 3, for the OCRWM activities. Some of the recommendations will require action by the CRWMS M&O in the revision to CRWMS M&O procedures. At the present time, CRWMS M&O has not issued any quality affecting procurement documents to Pierce Leahy Archives. The recommendations relate to: Lack of acceptance criteria established and documented for monitoring of temperature and humidity in the single storage facility; insufficient documented evidence to reflect that the person that certified the single storage facility is competent in the technical field of fire protection and fire extinguishing; missing storage transmittal for 127 boxes of records previously shipped from the CRWMS M&O facility in Vienna; inadequate storage of QA records; and lack of code description in implementing procedure which describe location in the complete listing of records.

The recommendations identified during the survey were discussed with the Pierce Leahy Archive Manager and the CRWMS M&O, who agreed to provide a resolution to the unsatisfactory conditions.

## 2.0 SCOPE

The supplier survey was conducted at the request of the CRWMS M&O to evaluate the capability of Pierce Leahy Archives' facility, personnel, and implementation of NLP-17-5, as it relates to the receipt, identification, storage and preservation of Yucca Mountain Project QA records. CRWMS M&O responsibilities included the review of the training of Pierce Leahy Archives' employees, control and issue of procedures to Pierce Leahy Archives, and evaluation of the corrective action process. The QA program elements determined to be applicable, as delineated by NLP-17-5, Revision 3, are: QA Program; Document Control; Corrective Action; and QA Records.

## 3.0 SURVEY TEAM AND OBSERVERS

Richard L. Maudlin, Survey Team Leader, OQA  
Emily S. Reiter, Survey Team Member, OQA

#### **4.0 PERSONNEL CONTACTED DURING FACILITY SURVEY**

Terry L. Mueller, CRWMS M&O/Record Services Supervisor  
Terri L. Badredine, CRWMS M&O/Records Processing Center Supervisor  
Novella Chaffin, CRWMS M&O/Media Specialist  
Cheryl McEntee, CRWMS M&O/Documentation Technician  
Eric Parks, Pierce Leahy Archives Manager  
Rose Evangelista, Pierce Leahy Archives Representative  
Michael McCluskey, Pierce Leahy Archives Warehouse Record Handler

#### **5.0 SUMMARY OF SURVEY RESULTS**

The survey team determined that Pierce Leahy Archives facility is effectively and satisfactorily implementing the requirements of NLP-17-5, "Storage and Retrieval of QA Records by a Records Storage Service," for the intended scope of work, with the exception of the identified conditions noted in Section 6.0 of this report. These conditions are documented as recommendations, since the CRWMS M&O has not issued any quality affecting procurement documents to this prospective supplier. Acceptance of this supplier is contingent upon satisfactory resolution of the recommendations by the CRWMS M&O and Pierce Leahy Archives. To date, Pierce Leahy Archives has not notified the CRWMS M&O of any conditions adverse to quality, therefore, implementation of corrective action could not be verified.

#### **6.0 RECOMMENDATIONS**

The recommendations are provided for your consideration should you desire to pursue approval of Pierce Leahy Archives and have them added to the OCRWM Qualified Suppliers List. The recommendations will require modification to the existing CRWMS M&O Implementing Line Procedure, NLP-17-5, "Storage and Retrieval of QA Records by a Records Storage Service Supplier," Statement of Work for Pierce Leahy Archives (PLA) DX1190, Rev. 3, 2/20/97, and resolution of the problems noted during the evaluation of program implementation.

1. NLP-17-5, Revision 3, Section 5.5.2, requires adequate protection be provided against damage to QA records from environmental conditions such as extremes in moisture and high/low temperatures. The temperature and humidity in the single storage facility is being monitored; however, there has been no acceptance criteria established and documented.
2. QAP 17-6, Revision 3, Attachment I, requires that the construction of the single storage facility be reviewed for adequacy by a person competent in the field of fire protection and fire extinguishing. Documented evidence could not be provided to support the competence of the person who certified the single storage facility.

Documentation needs to be provided to reflect that the person certifying the single storage facility is competent in the technical field of fire protection and fire extinguishing.

3. NLP-17-5, Revision 3, Section 5.3.2, requires that the RSSS acknowledge receipt by verifying a shipment against the "Storage Transmittal." 127 boxes of records were shipped from the CRWMS M&O/TRW facility in Vienna, Virginia, without evidence of a completed "Storage Transmittal."
4. In the vault, record boxes were found stacked four high and the bottom box was partially crushed.
5. The complete listing of records at Pierce Leahy Archives defined the location (Vault or Warehouse) by a code; however, this code is not described in any procedure or other document.