

Department of Energy

Washington, DC 20585

JUL 2.4 1997

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ISSUANCE OF SURVEILLANCE RECORD M&O-SR-97-043 RESULTING FROM THE OFFICE OF QUALITY ASSURANCE (OQA) SURVEILLANCE OF THE CIVILIAN RADIOACTIVE WASTE MANAGEMENT SYSTEM MANAGEMENT AND OPERATING CONTRACTOR (CRWMS M&O)

Enclosed is the record of Surveillance M&O-SR-97-043 conducted by the OQA of the CRWMS M&O at the Harry Reid Center for Environmental Studies located on campus at the University of Nevada at Las Vegas (UNLV), and the CRWMS M&O Training facility located in Building 12, Summerlin Complex, Las Vegas, Nevada, on July 1, 1997.

The purpose of the surveillance was to verify that corrective actions taken by the CRWMS M&O were adequate to close Deficiency Report (DR) LVMO-96-D-057, which documented the use of UNLV procedures to perform quality affecting work rather than CRWMS M&O Implementing Procedures.

This surveillance is considered completed and closed as of the date of this letter. A response to this surveillance record is not required; however, the above DR will continue to be tracked until it is closed to the satisfaction of the quality assurance representative and the Director, Office of Quality Assurance.

If you have any questions, please contact either James Blaylock at (702) 794-1420 or Stephen D. Harris at (702) 734-0870.

Donald G. Horton, Director Office of Quality Assurance

OQA:JB-1931

Enclosure: Surveillance Record M&O-SR-97-043

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QA: L

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cc w/encl:

L. H. Barrett, DOE/HQ (RW-1) FORS R. A. Milner, DOE/HQ (RW-2) FORS T. A. Wood, DOE/HQ (RW-55) FORS J. O. Thoma, NRC, Washington, DC W. L. Belke, NRC, Las Vegas, NV R. R. Loux, NWPO, Carson City, NV S. W. Zimmerman, NWPO, Carson City, NV Jim Regan, Churchill County Commission, Fallon, NV D. A. Bechtel, Clark County, Las Vegas, NV Susan Dudley, Esmeralda County, Goldfield, NV Sandy Green, Eureka County, Eureka, NV Tammy Manzini, Lander County, Austin, NV Kim Packard, Mineral County, Hawthorne, NV P. A. Niedzielski-Eichner, Nye County, Chantilly, VA Wayne Cameron, White Pine County, Ely, NV B. R. Mettam, County of Inyo, Independence, CA Mifflin and Associates, Las Vegas, NV T. H. Chaney, USGS, Denver, CO M. J. Clevenger, M&O/LANL, Los Alamos, NM D. C. Mangold, M&O/LBNL, Berkeley, CA R. E. Monks, M&O/LLNL, Livermore, CA F. J. Schelling, M&O/SNL, Albuquerque, NM, M/S 1325 H. R. Cox, M&O, Las Vegas, NV R. A. Morgan, M&O, Las Vegas, NV

R. W. Clark, DOE/OQA, Las Vegas, NV

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•	RADIOACTIVE U.S. DEPAR	CE OF CIVILIAN WASTE MANAGEMENT TMENT OF ENERGY HINGTON, D.C.	Surve	illance No. <u>M&O-SR-97-043</u>
QUALITY ASSURANCE SURVEILLANCE RECORD				
SURVEILLANCE DATA				
1. ORGANIZATION/LOCATION: Civilian	2. SUBJECT: Corrective Action		3. DATE: July 1, 199	
Radioactive Waste Management System Management & Operating Contractor (CRWMS M&O), Las Vegas, NV	Concentre Action		July 1, 197	,
4. SURVEILLANCE OBJECTIVE: Verify the corrective action response to Deficiency Report (DR) LVMO-96-D-057.				
5. SURVEILLANCE SCOPE: Review of documentation and actions for closure of LVMO-96-D-057				er:
7. PREPARED BY: Jon Cycum Stephen D. Harris 120n	6/10/97	8. CONCURRENCE: 12.00	Clex	6/11/97
Surveillance Team Leader	Date	Director, OQA	161	Date
SURVEILLANCE RESULTS				
 9. BASIS OF EVALUATION/DESCRIPTION OF OBSERVATIONS: A surveillance of the CRWMS M&O was conducted at the Harry Reid Center for Environmental Studies located on campus at the University of Nevada Las Vegas (UNLV) and the CRWMS M&O Training facility located in Building 12, Summerlin Complex, Las Vegas, NV. The objective of this surveillance was to verify the adequacy of corrective actions taken by the CRWMS M&O to resolve the deficiencies identified in DR LVMO-96-D-057. This DR documents the fact that UNLV had been performing quality affecting activities using procedures developed by the university specifically for their scope of work. This was contrary to the UNLV FY96 Statement of Work, Revision 1, Page 2, "All quality affecting work shall be accomplished in accordance with the DOE/Yucca Mountain Site Characterization Project, Quality Assurance Requirements and Description (QARD) and CRWMS M&O Implementing Procedures. (1) Take the necessary actions to convert the UNLV procedures to CRWMS M&O procedures. (2) Conduct an investigation to determine the acceptability of the work currently being done to UNLV procedures. (3) Ensure that UNLV personnel are trained/indoctrinated to the appropriate implementing procedures. 				
Based on document reviews, personnel interviews, and a tour of the laboratory facilities at UNLV, the Surveillance Team Leader concluded that CRWMS M&O (UNLV) has satisfactorily completed the corrective actions required to correct the deficiencies identified in DR LVMO-96-D-057, and recommends closure. Deficient Conditions: None Recommendations: Closure of DR LVMO-96-D-057 11. COMPLETED BY: 12. APPROVED BY:				
Surveillance Team Leader Date Director, OQA 7/23/97 Director, OQA				
Exhibit QAP-2.8.1				REV.03/14/97

ENCLOSURE

9. BASIS OF EVALUATION/DESCRIPTION OF OBSERVATIONS: (Cont'd)

In response to recommended Corrective Action #1, the surveillance team verified that the UNLV tracer laboratory procedures have been converted into CRWMS M&O Implementing Procedures. Originally there were eight UNLV technical laboratory procedures, however, during the conversion process one of these procedures was replaced with an existing approved CRWMS M&O procedure. The new CRWMS M&O technical laboratory procedures are Nevada Work Instructions (NWI) and are listed in the "Documents Reviewed/Referenced During the Surveillance" section.

In response to recommended Corrective Action #2, the surveillance team reviewed the report which documented an independent evaluation of work performed at UNLV titled, "Technical Review of Nevada-Las Vegas (UNLV) Harry Reid Center Environmental Laboratory," BAA000000-0171705705-00001, Revision 0, Dated September 1996. The report indicated that the work conducted in accordance with the existing procedures was satisfactory. The team reviewed the converted CRWMS M&O NWI procedures and interviewed the CRWMS M&O laboratory staff personnel and determined that there are no significant changes in laboratory methods or data reporting.

This area was found to be effective.

In response to recommended Corrective Action #3, the surveillance team reviewed the Training and Indoctrination Lists (reading list) for the following laboratory personnel: Irene Farnham, Amy Smiecinski, Tatjana Jankovic, Jennette Danials, Lendley Kasumasa. The team verified that the above personnel had completed the reading assignments for the above NWIs, and the following additional procedures:

- QAP-1-0, Revision 5, CRWMS M&O ORGANIZATION
- QAP-2-0, Revision 4, CONDUCT OF ACTIVITIES
- QAP-2-2, Revision 5, VERIFICATION OF PERSONNEL QUALIFICATIONS
- QAP-12-1, Revision 4, CONTROL OF MEASURING AND TEST EQUIPMENT AND CALIBRATION STANDARDS
- QAP-SIII-3, Revision 2, SCIENTIFIC NOTEBOOKS
- AP 16.1Q, Revision 2, PERFORMANCE/DEFICIENCY/REPORTING
- AP 16.2Q, Revision 2, CORRECTIVE ACTION AND STOP WORK
- YAP-6.2Q, Revision 1, DISTRIBUTION, MAINTENANCE, AND USE OF CONTROLLED AND MANAGED DOCUMENTS
- YAP-15.1Q, Revision 3, ICN 1, CONTROL OF NONCONFORMANCES

The surveillance team verified that the training records required by QAP-2-2, Revision 2, Paragraph 6.1.1 (Forms 0159, 0161, and 0374), were on file at the training facility, Building 12, Summerlin, for the above personnel.

This area was found to be effective.

In addition to the above, the surveillance team examined the laboratory facilities and interviewed personnel at the Harry Reid Center. The following areas were examined:

- Measuring and Test Equipment. The surveillance team reviewed calibration records for the following balances and weights used in the tracer analysis and found them to be acceptable: Balances, Cal. No. 312013, and Cal No. 312014 and Thoemner Weight Set No. 72326.
- Sample Control. The surveillance team confirmed that samples are kept in a secured refrigerated vault under the custody of the Project Director to limit access. The samples were examined and it was noted that they were marked with BAR Codes in accordance with QAP-SIII.4Q.
- Procedure Control. The surveillance team verified that the current NWIs were controlled, and present in the work location.
- Data Validation. The surveillance team verified that data is reviewed internally at the laboratory prior to being transmitted to the user.

The additional areas examined were found to be effective.

PERSONNEL CONTACTED:

W. Distel, Principal Investigator

I. Farnham, Project Manager

A. Smiecinski, QA Specialist

J. Justice, Training Manager

DOCUMENTS REVIEWED/REFERENCED DURING THE SURVEILLANCE:

- NWI-UNLV-002Q, Revision 0, ICN 1, TOP-LOADING BALANCE USE FOR THE TRACER PROJECTS
- NWI-UNLV-003Q, Revision 0, ICN 1, ANALYTICAL BALANCE USE FOR THE TRACER PROJECTS
- NWI-UNLV-004Q, Revision 0, ICN 1, HIGH PRESSURE LIQUID CHROMATOGRAPH OPERATIONS
- NWI-UNLV-005Q, Revision 0, BATCH TESTING OF ORGANIC TRACERS
- NWI-UNLV-007Q, Revision 0, ORGANIC TRACER EXTRACTIONS PROCEDURES
- NWI-UNLV-008Q, Revision 0, STANDARD OPERATING PROCEDURE FOR THE ION CHROMATOGRAPHY SYSTEM
- NWI-UNLV-009Q, Revision 0, STANDARD OPERATING PROCEDURE FOR THE INDUCTIVELY COUPLED PLASMA-MASS SPECTROSCOPY (ICP-MS) SYSTEM