

YUCCA MOUNTAIN PROJECT OFFICE
QUALITY ASSURANCE SURVEILLANCE REPORT
OF
SANDIA NATIONAL LABORATORIES
SURVEILLANCE NUMBER YMP-SR-90-034
CONDUCTED JULY 9 THROUGH JULY 13, 1990

ACTIVITIES SURVEILLED:
SEISMIC RESPONSE TO UNDERGROUND NUCLEAR EXPLOSION
AND CALIBRATION OF ASSOCIATED EQUIPMENT
AND CORRECTIVE ACTIONS (CRITERIA 16)

Prepared by: Martha J. Mitchell
Martha J. Mitchell
Surveillance Team Leader
Quality Assurance Engineer
Yucca Mountain Project Office

Date: 16 Aug 90

Prepared by: James Blaylock
Donald G. Horton, Director
Quality Assurance
Yucca Mountain Project Office

Date: 9/11/90

9009210168 900912
PDR WASTE
WM-11 PDC

ENCLOSURE 1

EXECUTIVE SUMMARY

This report contains the results of Yucca Mountain Project Office (Project Office) Quality Assurance (QA) Surveillance Number YMP-SR-90-034 of Sandia National Laboratories (SNL), conducted in Albuquerque, New Mexico, July 9 through 13, 1990.

In the opinion of the Project Office surveillance team, the areas identified in the surveillance report's Scope section are marginally effective. The surveillance team was generally able to locate the records requested. Calibration records were entered into the records systems in large blocks of as many as 88 pages, but no contents breakdown was made beyond the 88-page block. This block had to be hand searched. A major concern of the surveillance was for demonstrating the connection of the calibration to the equipment used for a specific event recording. This was possible only when the information in the event log data base was available. Many of the communications concerning the test configuration were oral or informal and, thus, not available in the records. This is discussed further in the Section 6.2 of the surveillance report. A systems analysis of the calibration and calibration records and the methodology for data qualification would strengthen the activity.

Data and qualification of existing data are major issues with regard to the eventual use of data from these tests. Currently, this is particularly pertinent because of the impact of implementing the quality-grading system and other changes in programmatic control.

The surveillance team also determined that there are weaknesses in the corrective action system, resulting in the issuance of Standard Deficiency Reports separately from the rest of the surveillance deficiencies.

1.0 INTRODUCTION

This report contains the results of Yucca Mountain Project Office (Project Office) Quality Assurance (QA) Surveillance Number YMP-SR-90-34 of Sandia National Laboratories (SNL), conducted in Albuquerque, New Mexico, July 9 through 13, 1990.

2.0 SCOPE

The Scope of this surveillance was to evaluate seismic monitoring activity at SNL to determine technical and programmatic adequacy as imposed by controls established in (1) the SNL Quality Management Program Plan, (2) Experimental Procedure EP-0004, and (3) by Technical Procedures (TPs) 82 through 89. The emphasis of the surveillance concerned calibration records and traceability to the seismic monitoring data records. Software was not evaluated as part of the surveillance.

The corrective action program was also evaluated.

3.0 SURVEILLANCE PERSONNEL

This surveillance was performed by the following:

Martha J. Mitchell, Lead, Project Office QA
Mario R. Diaz, Quality Engineer, Project Office QA
Forrest D. Peters, Technical Specialist, Science Applications
International Corporation (SAIC)

4.0 SURVEILLANCE RESULTS

The surveillance team reviewed, both technically and programmatically, the work conducted under Modified Work Plan 12412-87, Task D.1. The quality level has been designated Level 1, and the Site Characterization Plan (SCP) Study Plan number is 8.3.1.17.3.3.2. This work included that conducted under the governing experimental procedure (EP-0004) and the associated technical procedures (TPs 82-89). The emphasis was on the calibration records and the relations between the calibration for recording the seismic response from the Underground Nuclear Explosion (UNE). Because, the actual event data has classified aspects and full data is not entered in the SNL records system. In this area, three Standard Deficiency Reports (SDRs) have been written. These are summarized in Section 6.1. Additionally, five observations were generated and are summarized in Section 6.2

Because of the classified nature of some of the data, a full technical evaluation of the subject area was not possible. In the area of calibration, the effectiveness of the records system is marginal with regard to traceability (from calibration to the seismic event to recalibration). The records system is sufficient to trace calibration into the "calibrating organization" at EG&G, to a point that interface controls appear sufficient to control calibration activity at that organization.

In addition, general aspects of the corrective action system at SNL were surveilled, and existing, open deficiency reports were investigated. As a result, SDR No. 552 was issued on the lack of response to SDR No. 532.

5.0 PERSONNEL CONTACTED

The following people were contacted during the course of this surveillance:

L. Shephard, SNL
A. Hotchkiss, SNL
J. Phillips, SNL
K. Schardein, Tech-Reps, Inc. (TRI)
G. Smit, SNL
R. Richards, SNL
T. Vanderbeek, TRI

6.0 SYNOPSIS OF DEFICIENCY DOCUMENTS/OBSERVATIONS

6.1 Standard Deficiency Reports

The following SDRs were issued as a result of this surveillance:

SDR No. 568	QA records are not identified in EPs and TPs. This is contrary to Department Operating Procedure DOP 5-2.
SDR No. 569	Records identified as QA records in TP-82 do not meet the definition of QA records in the SNL QAPP Section 17.
SDR No. 570	Forms and information were made part of TP-82 that belong to EG&G procedures. These cannot be reviewed and changed via the SNL internal review system as stated in the SNL Quality Assurance Program Plan (QAPP) Revision E, Section 5.1.1.

6.2 Observations

The surveillance generated the following observations:

- YMP-SR-90-034-01 A system calibration of equipment, rather than only individual item calibration, would increase reliability and confidence in the instrumentation system.
- YMP-SR-90-034-02 Analog data tapes (i.e., the raw data) for the experiments should receive storage commensurate with their importance.
- YMP-SR-90-034-03 Calibration records are not being obtained from the calibrating organization and entered in the records system in a timely manner.
- YMP-SR-90-034-04 A computer data log copy of the UNE event should be placed in records with each shot, rather than once a year.
- YMP-SR-90-034-05 A method for identification of errors and correction of the corrective action item list needs to be developed.

7.0 RECOMMENDATIONS

During the course of the surveillance, the surveillance team observed that the calibration system for the UNE seismic experiments are complex in nature. Some equipment is located in test holes and it is difficult to determine what the equipment setup needs are for a UNE until the UNE test configuration is announced. The classified nature of some of the test information impacts records management and makes traceability difficult. For these reasons it is recommended that the principal investigator conduct a detailed walk-through of the calibration and records management for his area, taking into account the observations from this surveillance.

8.0 REQUIRED ACTION

Response to each SDR (delineated in Section 6.0) are due within 20 working days from the date of the SDR transmittal letter. Upon response, and satisfactory verification of all remedial and corrective actions, the SDRs will be closed and the Project Office will be notified (by letter) of the closure.

A written response is required for the observations contained in Enclosure 1 of this report. Responses are due within 20 working days from the transmittal letter of this report.

YMPO STANDARD DEFICIENCY REPORT

N-QA-038
4/89

Completed by Originating QA Organization	1 Date 07/11/90		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2	
	3 Discovered During YMP-SR-90-034		3a Identified By M. Diaz		4 SDR No. 568 Rev. 0	
	5 Organization SNL		6 Person(s) Contacted B. Richards		7 Response Due Date is 20 Working Days from Date of Transmittal	
	8 Requirement (Audit Checklist Reference, if Applicable) DOP 5-2, Rev. G, Para. 5.1 states in part, "TPs written in support of experiments and equipment tests will include the identification of the QA records that are generated during implementation of the TP."					
Completed by Organization in Block 5	9 Deficiency Contrary to the above requirements, several SNL procedures do not identify the QA records generated during the implementation of the TPs and/or EPs.					
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective The following are recommended actions: (1) Modify the affected procedures to comply with the requirements, (2) Investigate the impact of this deficiency					
	11 QAE/Lead Auditor/Date <i>Martha Michel 16 Aug 98</i>		12 Division Manager/Date		13 Project Quality Mgr./Date <i>James Blaylock 9/11/90</i>	
Completed by Org. QA Org.	14 Remedial/Investigative Action(s)					
	15 Effective Date _____					
	16 Cause of the Condition & Corrective Action to Prevent Recurrence					
Comp. by Org. QA Org.	17 Effective Date _____					
	18 Signature/Date					
	19 Response Accepted		QAE/Lead Auditor/Date		Division Manager/Date	
	20 Corrective Action Verif. Satisfactory		QAE/Lead Auditor/Date		Division Manager/Date	
Comp. by Org. QA Org.	21 Remarks					
	22 QA CLOSURE		QAE/Lead Auditor/Date		Division Manager/Date	
				PQM/Date		

ENCLOSURE 2

**YMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET**

N-QA-038
2/89

SDR No. 568

Page 2 of 2

8 Requirement (continued)

DOP 11-1, Rev. G, Para. 2.0 states in part, "This DOP applies to SNL YMP EPs and ETPs. The procedures shall identify QA records generated during implementation of the document."

9 Deficiency (continued)

The following procedures were used as samples and checked for implementation of the requirements:

TP-59, Rev. C	EP-0018, Rev. A
TP-60, Rev. B	EP-0020, Rev. 0
TP-62, Rev. B	
TP-82, Rev. C (some portions)	
TP-89, Rev. A	
TP-102, Rev. 0	

NOTE: Some of the procedures indicate that the record(s) should be transmitted to the PI without indicating that those shall be identified, classified and handled as QA records. Some procedures state, "Records which will be designated Quality Assurance (QA) records will be specified in the EP governing the work." However, the identification of the EP is not provided. Furthermore, most of the EPs are not quality-related procedures; consequently they are not auditable. Therefore, the requirements as mentioned in the finding shall be addressed or described in the pertinent quality-related procedures and not within the EP.

10 Recommended Actions (continued)

on quality-related work performed using the procedure affected by this SDR, and (3) Provide training and subsequent documentation to the revised procedures to all affected personnel.

YMPO STANDARD DEFICIENCY REPORT

N-QA-038
4/89

Completed by Originating QA Organization	1 Date 07/11/90		2 Severity Level <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3		Page 1 of 2
	3 Discovered During YMP-SR-90-034		3a Identified By M. Mitchell		4 SDR No. 569 Rev. 0
	5 Organization SNL		6 Person(s) Contacted J. Phillips		7 Response Due Date is 20 Working Days from Date of Transmittal
	8 Requirement (Audit Checklist Reference, if Applicable) SNL-NWRT-QAPP, Rev. E, Para. 17.1.2 states in part, "QA records include (1) individual documents that have been executed, completed, and approved and that...."				
	9 Deficiency Contrary to the above requirement, TP-82, Rev. C incorrectly identifies as records on Page 11 of 168, documents that have not been executed, completed, or approved in accordance with the definition referenced above.				
Completed by Organization in Block 5	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input type="checkbox"/> Investigative <input type="checkbox"/> Corrective The following are recommended actions; correct terminology in TP-82, and provide training on record requirements and terminology.				
	11 QAE/Lead Auditor/Date <i>Martha Mitchell</i> 26 Aug. 90		12 Division Manager/Date		13 Project Quality Mgr./Date
	14 Remedial/Investigative Action(s)				
	15 Effective Date _____				
	16 Cause of the Condition & Corrective Action to Prevent Recurrence				
Comp. by Org. QA Org.	17 Effective Date _____				
	18 Signature/Date				
	19 Response Accepted	QAE/Lead Auditor/Date	Division Manager/Date	Project Quality Mgr./Date	
	20 Corrective Action Verif. Satisfactory	QAE/Lead Auditor/Date	Division Manager/Date	Project Quality Mgr./Date	
	21 Remarks				
22 QA CLOSURE					
QAE/Lead Auditor/Date		Division Manager/Date	PQM/Date		

**YMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET**

**N-QA-038
2/89**

SDR No. 569

Page 2 of 2

8 Requirement (continued)

9 Deficiency (continued)

This reference is "Note, at this point..."

10 Recommended Actions (continued)

- comments concerning the problems on the Station Data Sheet (Exhibit F, Appendix A) to notify the 9311 PI.
- b. The post-shot records which include the Field Check List Signal Control, Tape Track Assignment Sheet and the Station Data Sheet forms (Exhibits B through F respectively, Appendix A) will be prepared and copies filed at NTS (NOTE, ALL FIELD-GENERATED FORMS MUST HAVE PRINTED NAMES, SIGNATURES AND DATES ENTERED IN BLACK INK)
 - c. All tapes, paper playbacks and field data sheets (Appendix A, exhibits A thru F, as applicable and Appendix D, with printed name, signature and date) will be transmitted to 9311. The analog tapes containing duplicate data will be transported via separate carriers.
 - d. Upon completion of the paperwork, the supporting staff (Field Technician) will print his name, sign, initial and date the form included in Appendix D and transmit this appendix, the Canister Settings Sheet and the paperwork listed above to the 9311 PI.

II.4.5.2 Upon receipt of the data from the field, the supporting staff (Data Processing Clerk) will set up an Event Data Book and photo copy all QA records discussed above. In addition, the following tasks will be accomplished:

- a. The original records will be filed in the 9311 files and the copies will be placed in the Event Data Book. The forms filed in the Event Data Book will be numbered sequentially starting with the number 1. Special care will be taken by the supporting staff (Data Processing Clerk) when punching holes in the records to ensure no information is obliterated. The Event Data Book will serve as a log book as defined in DOP 11-2.
- b. The supporting staff (Scientific Investigator) will transmit the tapes and the Event Data Book to another member of the supporting staff (Data Reduction Clerk).
- c. All pertinent information from the field data sheets will be entered into the Weapons Test Seismic Investigations (WTSI) data base by the supporting staff (Data Processing Clerk) for permanent retention on the SNLA Building 806 Secure VAX computer. The 9311 PI will transmit a dump of this data base to the 6310 contact for inclusion in the Data Records Management System (DRMS) within 10 days after record closeout for each UNE.

II.5.0 Safety

II.5.1 Activities in this section of this TP do not have significant or unusual safety hazards. Review and approval by the SNL Environment, Safety and Health Department and/or appropriate organizations is not required.

II.6.0 QA Records

II.6.1 QA records generated in this phase of the operation are the gage calibration certificates, bench equipment calibration certificates, Canister Settings Sheet, Field Check List Signal Control forms, Tape Track Assignment forms, Station Data Sheets (exhibits A through F in Appendix A) and Appendix D. The records associated with a specific UNE (exhibits A through F in

Appendix A and Appendix D) will be filed in the Event Data Book. NOTE, AT THIS POINT IN TIME THERE WILL BE THREE COPIES OF THE QA RECORDS, I.E., ONE SET AT NTS, ONE IN 9311 AND ONE IN THE EVENT DATA BOOK. At such time that the entire data processing effort is completed, this book will be closed out and transmitted, within 10 days after records closeout, to the 6310 contact by the 9311 PI. It is the responsibility of the 6310 contact to arrange for reproducing this book and including it in the DRMS. In addition the 6310 contact will return the original book to the 9311 PI. The Supporting Staff (Field Technician) will transmit the calibration certificates for the gages and bench equipment to the 9311 PI as the calibrations are done. The 9311 PI will transmit copies of these certificates, within 10 days after the records closeout for each calibration, to the 6310 contact for inclusion in the DRMS.

II.7.0 References

- II.7.1 TP-83, Verification of PNE Amplifier Gains and Frequency Response
- II.7.2 TP-84, Verification of Tamarac-B Amplifier Gains and Frequency Response
- II.7.3 TP-85, Verification of PFTU Amplifier Gains and Frequency Response
- II.7.4 TP-86, Set-up and Adjustment of TM Control Box (PNE Seismic)
- II.7.5 TP-87, Set-up and Adjustment of TM Control Box (PFTU)
- II.7.6 TP-88, Ground Motion Gage Operation Verification
- II.7.7 DOP 11-2 Requirements for Experiment and Equipment-Test Logbooks
- II.7.8 DOP 12-1 Measuring and Test Equipment Control

YMPO STANDARD DEFICIENCY REPORT

N-QA-038
4/89

Completed by Originating QA Organization	1 Date 07/11/90		2 Severity Level <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3		Page 1 of 2	
	3 Discovered During YMP-SR-90-034		3a Identified By M. Mitchell		4 SDR No. 570 Rev. 0	
	5 Organization SNL		6 Person(s) Contacted J. Phillips		7 Response Due Date is 20 Working Days from Date of Transmittal	
	8 Requirement (Audit Checklist Reference, if Applicable) SNL-NWRT-QAPP, Rev. E, Para. 5.1.1 states in part, " An independent review of all such instructions, procedures, plans, and drawings shall be performed by the originating organization to assure technical adequacy and inclusion of					
Completed by Organization in Block 5	9 Deficiency Contrary to the above, TP-82, Rev. C is a mosaic of EG&G initiated activities--which includes calibration sheets, data forms, and other functions. SNL does not directly control the EG&G procedure from which the					
	10 Recommended Action(s): <input checked="" type="checkbox"/> Remedial <input checked="" type="checkbox"/> Investigative <input checked="" type="checkbox"/> Corrective The following are recommended actions: (1) Make appropriate changes to TP-82; (2) Determine if other such information inclusions exist where the					
	11 QAE/Lead Auditor/Date <i>Martha Mitchell 16 Aug 90</i>		12 Division Manager/Date		13 Project Quality Mgr./Date <i>James Blaylock for 9/11/90</i>	
Completed by Organization in Block 5	14 Remedial/Investigative Action(s)					15 Effective Date _____
	16 Cause of the Condition & Corrective Action to Prevent Recurrence					17 Effective Date _____
	18 Signature/Date					
Comp. by Orig. QA Org.	19 Response Accepted		QAE/Lead Auditor/Date		Division Manager/Date	
	20 Corrective Action Verif. Satisfactory		QAE/Lead Auditor/Date		Division Manager/Date	
	21 Remarks					
	22 QA CLOSURE		QAE/Lead Auditor/Date		Division Manager/Date	
PQM/Date						

**YMPO STANDARD DEFICIENCY REPORT
CONTINUATION SHEET**

**N-QA-038
2/89**

SDR No. 570

Page 2 of 2

8 Requirement (continued)

appropriate quality requirements.

9 Deficiency (continued)

TP-82 is devised, furthermore EG&G is not required to obtain SNL review and approval prior to making revisions to their (EG&G) procedures.

10 Recommended Actions (continued)

information cannot be reviewed because it is in the control of another organization; and (3) Provide a mechanism, such as training, to prevent recurrence.

YUCCA MOUNTAIN PROJECT OFFICE
1 YMPO OBSERVATION NO. YMP-SR-90-034-01

N-QA-012
4/89

Completed by Originating Organization	2 Noted During: YMP-SR-90-034		3 Identified By: F. Peters		4 Date: 07/12/90	
	5 Organization: SNL		6 Person(s) Contacted: J. Phillips		7 Response Due Date is 20 Days from Date of Transmittal	
	<p>8 Discussion:</p> <p>At present, the calibrations for the recording equipment are performed by the separate calibration of the individual components, with no overall system calibration being performed.</p> <p>The procedure for a full system (even though limited) calibration by means of "torqueing" the accelerometers, should be completed, and should be implemented for those sets of equipment where this is possible, before any additional recordings are made.</p>					
Completed by Respondee	9 QAE/Lead Auditor <i>Martha J. M. Schell</i>		Date <i>16 Aug 90</i>		10 Branch Manager <i>James Blaylock Jr</i>	
					Date <i>9/11/90</i>	
Completed by QA Org.	11 Response:					
	12 Signature: _____ Date: _____					
Completed by QA Org.	13 Response Receipt Acceptable <input type="checkbox"/>					
	Initiator	Date	QA/Lead Auditor	Date		
Completed by QA Org.	14 Remarks:					
	<div style="text-align: right;"> Page <u>1</u> of <u>1</u> </div>					

YUCCA MOUNTAIN PROJECT OFFICE
1 YMPO OBSERVATION NO. YMP-SR-90-034-02

N-QA-012
4/89

Completed by Originating Organization	2 Noted During: YMP-SR-90-034		3 Identified By: M. Mitchell		4 Date: 07/12/90	
	5 Organization: SNL		6 Person(s) Contacted: J. Phillips		7 Response Due Date is 20 Days from Date of Transmittal	
	8 Discussion: During discussions with SNL staff and from TP-89, it was determined that the digitized data from the underground nuclear explosions (UNEs) recorded for seismic studies were considered the raw data rather than the analog data from which it is developed. The analog data contains the calibration signal telemetered to the recording site with the data. The digital data can be redeveloped from the analog tapes if an error is made or if it is determined that a different method of processing is required.					
	9 QAE/Lead Auditor <i>Martha Mitchell</i>			Date 16 Aug 90		10 Branch Manager Date
Completed by Respondee	11 Response:					
	12 Signature: _____ Date: _____					
Completed by QA Org.	13 Response Receipt Acceptable <input type="checkbox"/>					
	Initiator		Date		QA/Lead Auditor	
14 Remarks:						
						Page 1 of 2

8 Discussion: (continued)

Understanding of the concept of raw data is necessary for all principal investigators to determine the importance of records and records storage. Since the data from this activity is from UNEs and not part of the project records system, it is necessary to determine the sufficient storage requirements for raw data tapes.

YUCCA MOUNTAIN PROJECT OFFICE
1 YMPO OBSERVATION NO. YMP-SR-90-034-03N-QA-012
4/89

Completed by Originating Organization	2 Noted During: YMP-SR-90-034	3 Identified By: M. Mitchell	4 Date: 07/12/90
	5 Organization: SNL	6 Person(s) Contacted: J. Phillips	7 Response Due Date is 20 Days from Date of Transmittal
	8 Discussion: During the surveillance of calibration records for UNE experiments using EP-0004 as the upper tier procedure, it was noted that a number of instruments had recall dates in the June, 1990 time frame. The recalibration records for this equipment could not be located in the records. It appears that sufficient time has occurred to enter this data in the local records even though many of these records were originally generated by EG&G. Methods need to be developed to enable staff members to obtain calibration reports in an efficient fashion and enter the calibration		
Completed by Respondee	9 QAE/Lead Auditor <i>Martha J. Mitchell</i>	Date <i>16 Aug 90</i>	10 Branch Manager Date
	11 Response:		
Completed by QA Org.	12 Signature: _____ Date: _____		
	13 Response Receipt Acceptable <input type="checkbox"/>		
	Initiator _____ Date _____	QA/Lead Auditor _____	Date _____
14 Remarks:			
Page 1 of 2			

8 Discussion: (continued)
records in the records system.

YUCCA MOUNTAIN PROJECT OFFICE
1 YMPO OBSERVATION NO. YMP-SR-90-034-04

N-QA-012
4/89

Completed by Originating Organization	2 Noted During: YMP-SR-90-034		3 Identified By: M. Mitchell		4 Date: 07/12/90	
	5 Organization: SNL		6 Person(s) Contacted: J. Phillips		7 Response Due Date is 20 Days from Date of Transmittal	
	8 Discussion: <p>It was found that the calibration information for instruments before a UNE and recalibration of the equipment after the UNE was difficult to identify. The event log data base that is entered in the records once a year appears to be the best way to actually identify the information for the stations used for the shot. From the standpoint of the calibration records identification and traceability, it would be preferable to put the data log copy in the records with each shot.</p>					
Completed by Respondee	9 QAE/Lead Auditor		Date		10 Branch Manager	
	<i>W. Marchant / M. Mitchell</i>		<i>16 Aug 90</i>		Date	
Completed by QA Org.	11 Response:					
	12 Signature: _____ Date: _____					
Completed by QA Org.	13 Response Receipt Acceptable <input type="checkbox"/>					
	Initiator	Date	QA/Lead Auditor	Date		
Completed by QA Org.	14 Remarks:					
	<div style="border: 1px solid black; padding: 5px; text-align: right;"> Page <u>1</u> of <u>1</u> </div>					

YUCCA MOUNTAIN PROJECT OFFICE
1 YMPO OBSERVATION NO. YMP-SR-90-034-05

N-QA-012
4/89

Completed by Originating Organization	2 Noted During: YMP-SR-90-034		3 Identified By: M. Diaz		4 Date: 07/11/90	
	5 Organization: SNL		6 Person(s) Contacted: B. Richards,		7 Response Due Date is 20 Days from Date of Transmittal	
	<p>8 Discussion:</p> <p>SNL is using an Action Item list as part of their corrective action program in order to assure that response due date and verification date for SDRs are achieved. However, during the surveillance it was found that certain dates and overall status were not accurate. Consequently, this list can and will mislead personnel to believe that corrective actions have been taken to correct some deficiencies when in fact actions were not in effect.</p> <p>Additionally, this list is not described or mentioned in the implementing</p>					
Completed by Respondee	9 QAE/Lead Auditor		Date		10 Branch Manager	
	<i>Murtha / Mr. Schell</i>		<i>16 Aug 90</i>			
Completed by QA Org.	11 Response:					
	12 Signature: _____ Date: _____					
Completed by QA Org.	13 Response Receipt Acceptable <input type="checkbox"/>					
	Initiator	Date	QA/Lead Auditor	Date		
Completed by QA Org.	14 Remarks:					
	<div style="text-align: right;"> Page <u>1</u> of <u>2</u> </div>					

8 Discussion: (continued)

corrective action program which makes it optional, but not necessarily mandatory to comply with this guidance.