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Department of Energy

Nevada Operations Office P. O. Box 98518 Las Vegas, NV 89193-8518 MAR 1 3 1990

WBS 1.2.9.3 QA

Robert F. Pritchett Technical Project Officer for Yucca Mountain Project Reynolds Electrical & Engineering Co., Inc. P.O. Box 98521 Las Vegas, NV 89193-8521

ACCEPTANCE OF AMENDED RESPONSE TO STANDARD DEFICIENCY REPORT (SDR) 451, REVISION 0, RESULTING FROM YUCCA MOUNTAIN PROJECT OFFICE (PROJECT OFFICE) QUALITY ASSURANCE (QA) AUDIT 89-05 OF REYNOLDS ELECTRICAL & ENGINEERING CO., INC. (REECO)

The Project Office QA staff has evaluated and accepted your amended response to SDR 451, Revision 0, generated as a result of Project Office QA Audit 89-05 of REECo. The SDR will be closed after verification of satisfactory completion of the specified corrective actions. A copy of the SDR is enclosed for your information.

Verification of completion of your corrective action will be performed after the effective dates that were provided. Extensions to these due dates must be requested in writing with appropriate justification prior to the due date. Please send a copy of the extension requests to Nita J. Brogan, Science Applications International Corporation, 101 Convention Center Drive, Las Vegas, Nevada 89109, and Ralph W. Gray, U.S. Department of Energy, P.O. Box 98518, Las Vegas, Nevada 89193.

If you have any questions, please contact either Robert B. Constable at 794-7945, or Frank J. Kratzinger at 794-7163 both of Project Office QA staff.

Donald G. Horton, Director Quality Assurance Division Yucca Mountain Project Office

YMP:RBC-2381

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Enclosure: SDR 451, Revision 0

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	1 Date 9/28/89	2 Severity Le	vel 🗆 1	⊠2 □3	Page 1	of 3			
Organization	3 Discovered During Audit 89-5		4 SDR No. 451	Rev0					
	5 Organization REECo	6 Pe M. F	erson(s) Contacted Fox			7 Response Due Date is 20 Working Days from Date of Transmittal			
Originating QA	8 Requirement (Audit Checklist Reference, if Applicable) (CL # 16-2) NNWSI/88-9, Rev. 2, Sec. XVI, Para. 1.1								
ব্র	9 Deficiency A Corrective Action Report (CAR) was not identiated as a result of Audit Finding No. 1 of Audit Report No. REECo-001-89 dated 8/2/89. The finding stated that, "With 59 unsatisfactory findings out of 86.								
Completed	10 Recommended Action(s): 🖾 Remedial 🖾 Investigative 🖾 Corrective 1) Remedial - Write a CAR.								
Ę	11 QAE/Lead Auditor/D	Date 12 0/5/89	2 Division Mana			roject Quality	A		
Apr	William H. Cemp Wallacka in James Shundert 1/6/19								
zation in Block 5	14 Remedial/Investigative Action(s) (see attached response)								
Completed by Organiz	16 Cause of the Condition & Corrective Action to Prevent Recurrence 17 Effective Date								
Com	18 Signature/Date								
ġ	19 Response Accepted 20 Corrective Action	Earlie	Auditor/Date	H/I	Nanager/Date A Nanager/Date	Karadisk	ality Mgn/Date		
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	22 QA CLOSURE QAE/Lead Auditor/Date Division Manager/Date PQM/Date								

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	YMF STANDARD DEFICIENCY REPORT CONTINUATION SHEET		
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8 Requirement (continued)

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1.1 SIGNIFICANT ADVERSE CONDITIONS

For significant conditions adverse to quality the identification, cause, and corrective action taken to preclude recurrence shall be documented and reported to immediate management and upper levels of management for review and assessmment. A significant condition adverse to quality is one which, if not corrected, could have a serious effect on safety or operability. Significant conditions include, but are not limited to breakdowns in the Quality Assurance program and repetitive nonconformances. Upon discovering or receiving notification that a significant condition adverse to quality or unusual occurrence exists, each NNWSI Project Participant shall ensure that:

- o Immediate actions have been taken to remedy the specific conditions(s).
- o Causative factors have been determined.
- o Controls have been reviewed, implemented, monitored and revised, if necessary.
- o Affected managers at all levels have been notified of adverse condition(s) and of lessons to be learned to improve conditions or avoid similar occurrences.

QP 16.0, Rev. 7, Para. 5.1 & 5.2

5.1 REECo personnel connected with activities on the YMP shall be responsible for reporting to Project Quality Assurance (PQA) and their immediate management any observed condition which is adverse to Quality.

NOTE: No individual shall be deterred from reporting deficiencies or potentially adverse conditions to PQA.

5.2 Project Quality Assurance Manager (PQAM) - The Project Quality Assurance Manager is responsible for evaluating significant conditions adverse to quality or potentially adverse conditions; initiating the Corrective Action Request (CAR), Exhibit III; concurring with the proposed corrective action or providing other corrective action; ensuring that all significant conditions adverse to quality are properly documented and reported to upper levels of management for review and assessment; and implementing follow-up action to assure that corrective action is implemented in a manner which will preclude recurrence.

9 Deficiency (continued)

Requirements, the overall finding is a failure to effectively implement the

YMPO-STANDARD DEFICIENCY REPO	ता
CONTINUATION SHEET	

N-QA-038 12/88

SDR No. 451

9 Deficiency (continued)

YMP QA Program. "The Audit Report stated in part, "There were 86 programmatic requirements identified on the audit checklist. Of the 86 requirements, compliance was unsatisfactory for 59 of them, resulting in a failure rate of 69.7%. This inordinate failure rate signifies a failure to effectively respond to the YMP QA program requirements."

10 Recommended Actions (continued)

Rev. 0

2) Investigative and Corrective - Identify the cause of the deficiency and actions taken to prevent recurrence.



Reynolds Electrical & Engineering Co., Inc.

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IN REPLY REFER TO:

RESPONSE TO SDR 451 OF DOE AUDIT 89-05

14- We take exception to this deficiency. The initiation of a Corrective Action Report would be redundant in that the YMP QA Audit/Survey Finding Report (AFR) provides for the audited organization to document the cause and it's proposed corrective action, including action to preclude recurrence. In this case (Audit No. REECo-001-89), the audit findings were brought to the attention of upper management through required distribution of the Audit Report to both the Technical Project Officer and the General Manager of REECo.

SECTION XIV, Paragraph I.I of QAPP 568-DOC-115 states:

* For significant conditions adverse to Quality the identification, cause, and corrective action taken to preclude recurrence shall be documented and reported to immediate management and upper levels of management for review and assessment. A significant condition adverse to Quality is one which, if not corrected, could have a serious effect on safety or operability. Significant conditions include, but are not limited to breakdowns in the Quality Assurance program and repetitive nonconformances. Upon discovering or receiving notification that a significant condition adverse to Quality or unusual occurrence exists, REECo shall ensure that:

- Immediate actions have been taken to remedy the specific condition(s).
- Causative factors have been determined.
- Affective managers at all levels have been notified of adverse condition(s) and of lessons learned to improve conditions or avoid similar occurrences."

It is our interpretation of the foregoing QA Program requirement that; Corrective Action Reports shall be initiated when conditions are of the nature as stated above, that are identified outside of formal investigations such as surveillance and audits. In our opinion, this alleged deficiency statement of SDR 451 delineates a misuse of the Corrective Action Program.

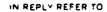
16- Cause of the Condition & Corrective Action to Prevent Recurrence.

NONE

REECO

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AMENDED RESPONSE TO SDR 451 OF DOE AUDIT 89-05

14- The initiation of a Corrective Action Request (CAR), in this case, would not be a constructive use of the document. The QA Audit/Survey Finding Report (AFR) provides for the audited organization to document the cause and proposed corrective action. In this case the audit findings were reported to top management, both the Technical Project Officer, and the General Manager of REECo.

In this case the determination to not issue a CAR was made with the thought that the AFR would produce the same results, especially when submitted to REECo management, i.e. action was taken immediately to correct the deficiencies, determination of cause made, and controls revised or established and implemented.

This was accomplished by noiding a meeting with the Operations Equipment Department Manager, C. G. Lawson. The meeting was chaired by the Operations & Maintenance Division Manager, W. G. Flangas at the direction of the General Manager, D. L. Fraser. Also present were the REECO/YMP TPO. R. F. Pritchett, GA Manager, M. A. Fox, Division Guality Coordinator, William Glasser, and Lead Auditor, Anthony Tonda.

A plan for corrective action was developed and a date set for accomplishment. Every effort was directed to be made to provide for effective implementation of the QA program by the Operations Equipment Department no later than February 28, 1990.

15- 02-15-90

16- The cause of the condition was that the issuance of a CAR was deemed unwarranted in this case. Deficiencies determined to be significant conditions adverse to quality discovered as a result of audit, surveillance or trend analysis will result in a CAR being issued.

17-01-04-90 An ded 1/9/90-580-01-190

REECO

MAR 1 3 1990

Robert F. Pritchett

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cc w/encl: Ralph Stein, HQ (RW-30) FORS D. E. Shelor, HQ (RW-3) FORS M. A. Fox, REECo, Las Vegas, NV F. J. Kratzinger, SAIC, Las Vegas, NV, 517/T-06 S. W. Zimmerman, NWPO, Carson City, NV J. E. Kennedy, NRC, Washington, DC cc w/o encl:

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N. J. Brogan, SAIC, Las Vegas, NV, 517/T-08 C. H. Prater, SAIC, Las Vegas, NV, 517/T-06 J. W. Gilray, NRC, Las Vegas, NV